

Assessment Year 2017

Program – Master of Science in Nursing

College: College of Nursing (College of Nursing and School of Allied Health)

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Northwestern Mission. Northwestern State University is a responsive, student-oriented institution that is committed to the creation, dissemination, and acquisition of knowledge through teaching, research, and service. The University maintains as its highest priority excellence in teaching in graduate and undergraduate programs. Northwestern State University prepares its students to become productive members of society and promotes economic development and improvements in the quality of life of the citizens in its region.

College of Nursing's Mission. Northwestern State University College of Nursing serves the people of Louisiana and in so doing improves the health of its citizens while advancing the mission of Northwestern State University through excellence in accessible undergraduate, graduate, and continuing education programs that are designed to assist individuals in achieving their professional goals as responsible and contributing members of their profession and society.

Master of Science in Nursing's Mission Statement: Same as the CON

MSN Purpose: The Master of Science Program's purpose is to provide learning opportunities for:

- (a) the development of knowledge, intellectual skills, and clinical competence necessary to fulfill the role of the advanced practice registered nurse, nurse educator, or nurse administrator;
- (b) the development of skills and knowledge to function as an educator, an administrator, or a nurse practitioner and,
- (c) to provide a foundation for doctoral study.

MSN Student Learning Outcomes: The Master of Science in nursing graduate will:

1. Integrate theories, knowledge, skills, and findings from nursing science, scientific disciplines, and humanities to guide the delivery of culturally sensitive care to clients, families, and communities within the professional scope and standards of advanced nursing practice.
2. Demonstrate responsibility and accountability as a practitioner of advanced nursing and consumer advocate to effect relevant change that will improve the health of citizens at a local, state, and national level.
3. Utilize a scholarly inquiry process, grounded in evidence-based research, to become a producer and consumer of research evidence which contributes to the development and improvement of nursing theory, nursing practice, and ultimately client and healthcare outcomes.

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4. Analyze the effect of historical, cultural, economic, ethical, legal, and political influence on nursing and health care delivery.
5. Manage resources within a health care delivery system through collaboration with other health care providers, community, and clients.
6. Contribute to the continued professional development and improvement of self, client, community, and healthcare delivery systems.

Methodology: The assessment process for the MSN program is as follows:

- (1) Data from assessment tools (both direct & indirect, quantitative & qualitative) are collected and sent to the program director.
- (2) The program director enters the data in the Student Learning Outcomes (SLO) database.
- (3) The results are shared with the Director of Assessment and analyzed at the MSN Assessment Committee meeting. The committee discusses data analysis, interpretation, actions, trends, results, and future plans to address needed improvements.
- (4) The Assessment committee findings are discussed in the program curriculum committee meetings. Additional insights and actions are added to the SLOs based on faculty input.
- (5) Significant findings are reported in the Administrative Council meeting.

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Student Learning Outcomes:

Note¹: Skyfactor™ survey (a student satisfaction tool) is given the semester the student graduates. Skyfactor™ is a tool that is based on research and is designed to provide data for benchmarking and longitudinal comparisons. Questions utilized in Skyfactor™ are designed based on accreditation standards. The survey is administered by Skyfactor™, ensuring student anonymity. Results from the year are compiled by Skyfactor™ into an aggregate report which provides student responses and compares our program with like programs across the nation. Skyfactor™ compares the NSU program mean to schools with the same Carnegie level. The NSU MSN program uses the Carnegie level as a standard for comparison for the Skyfactor™ questions used as an assessment measure. The scale for the Skyfactor™ questions range from one to seven with seven being the highest score.

Note²: Assessment period. The MSN assessment data is based on the calendar year Jan-Dec. For clarity and to be consistent with university programs, we will label the 2016 year as 2016-2017 and 2017 year as 2017-2018. AY=Assessment Year

SLO 1 Synthesize theories from nursing sciences and related disciplines to guide the design and implementation of culturally-sensitive care to client, families, and communities within the respective professional scope and standard of advanced nursing practice.

Measure 1.1 (Direct-Knowledge/Skill)

Assessment Method: Graded Final Practicum: The graded final practicum is administered in the last clinical semester. This practicum is a comprehensive clinical evaluation with specific criteria, which includes culturally sensitive care within the scope and standards for advanced practice nursing.

Expected Outcome: 90% of students will achieve a final score of 80% or better on the initial graded final practicum.

Findings

AY 2016-2017: 97% (58/60) of students scored 80% or higher Target Met

AY 2017-2018: 97% (70/72) of students scored 80% or higher Target Met

Analysis. This measure was new in 2016-2017, consequently data only trends for 2 years. Prior to 2016, this SLO was measured by the Clinical Comprehensive written exam. Although the target was met in 2015-2016 and prior years, the MSN Program and Curriculum Committee (PCC) voted to delete the clinical Comprehensive written exam and replace it with a graded final practicum in Spring 2016-2017. The graded final practicum involves faculty evaluation of student performance in the clinical setting. The PCC felt the final practicum more accurately reflected the student's clinical knowledge, and actual demonstration would allow more teacher-student interaction after the practicum to facilitate learning. In the 2016-2017 assessment year, the measure for this SLO was changed to the graded final practicum and the expected outcome was

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90% of the students would score an 80% or higher. In the 2016-2017 assessment year 58 out of 60 students (97%) achieved a final score of 80% or higher, meeting the expected outcome of 90%. Based on this result, the plan for the 2017-2018 assessment year was to implement Shadow Health in NURG 5700 Methods of Clinical Nursing Assessment. Shadow Health is a computer based, interactive learning program that serves as a lab for practicing advanced assessment techniques (including focused history, cultural sensitivity, and empathy). Other plans for 2017-2018 included: 1) adding a new section of NURG 5280 Advanced Pathophysiology, with a new instructor and a new text which offered more online resources. This change was due to student evaluations of the pathophysiology course, and the University impetus to decrease the cost of textbooks; 2) changing the textbooks in NURG 5810 Family Dynamics from two textbooks to one less expensive textbook; 3) adding Flipgrid and other video formats to increase student connectivity in online courses; and 4) adding "Clinical Pearls" assignments in concentration specific clinical courses to help students learn the most common conditions for specific populations.

In the 2017-2018 assessment year the above plan was implemented. Shadow Health was implemented in Fall of 2016-2017 and continued through the 2017-2018 assessment year. Faculty received much positive feedback on Shadow Health; however, the use of Shadow Health will not impact the results of this measure until Spring 2018-2019 because the data is collected in the last clinical semester. In the 2017-2018 assessment year, the expected outcome was met with 70/72 (97%) students achieving an 80% or better. The expected outcome has been met for the past two years, with a very high percentage of students meeting the target. This is evidence that students are learning the required information and can implement culturally sensitive care.

Based on the analysis of the results, the plan for the 2018-2019 assessment year is for faculty to: 1) contact preceptors on a weekly basis to ensure regular communication between faculty and preceptors regarding students, their clinical experiences, and their delivery of appropriate, culturally sensitive care, and 2) change the Primary Care Pediatric Nurse Practitioner (PCPNP) primary text to *Burn's Primary Care Pediatrics*, which is written by nurse practitioners for nurse practitioners, rather than continue with the current primary text, which was written by physicians. It is anticipated this new primary text will include more nursing theory and science, and student exam questions will be more congruent with the national certification exam. In addition, the MSN program will continue to: 1) use Shadow Health in teaching NURG 5700, 2) use "Clinical Pearls" assignments in concentration specific clinical courses, 3) use one text, Flipgrid, and other video formats in NURG 5810, and 4) offer the new NURG5280 pathophysiology section, which has had very positive student reviews.

Decision. In the 2017-2018 assessment year, 97% of students were able to achieve a score of 80% or higher on the initial attempt of the final practicum. This result is equal to the result in 2016-2017. Based on the analysis of the results, the plan for 2018-2019 is for faculty to: 1) contact preceptors on a weekly basis to ensure regular communication between faculty and preceptors regarding students, their clinical experiences, and their delivery of appropriate, culturally sensitive care, and 2) change the Primary Care Pediatric Nurse Practitioner (PCPNP) primary text to *Burn's Primary Care Pediatrics*,

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which is written by nurse practitioners for nurse practitioners, rather than continue with the current primary text, which was written by physicians. It is anticipated this new primary text will include more nursing theory and science, and student exam questions will be more congruent with the national certification exam. In addition, the MSN program will continue to: 1) use Shadow Health in teaching NURG 5700, 2) use “Clinical Pearls” assignments in concentration specific clinical courses, 3) use one text, Flipgrid, and other video formats in NURG 5810, and 4) offer the new NURG5280 pathophysiology section, which has had very positive student reviews.

Measure 1.2 (Indirect-Knowledge)

Assessment Methods: Skyfactor™ Questions:

1. Q86 “To what degree did the MSN program enhance your ability to integrate evidence from nursing and other sciences as the foundation for practice?”
2. Q80 “Regarding clinical prevention and population health for improving health, to what degree did your MSN program enhance your ability to apply organizational, client-centered, and culturally appropriate concepts in the delivery of evidence based clinical prevention and population care and services to patients?”

Expected Outcome: Equal to or greater than Carnegie mean score (Range 1-7)

Findings

Question 1 Integrate evidence

AY 2016-2017: NSU Mean – 6.31; Carnegie Mean Score – 6.15 Target Met

AY 2017-2018: NSU Mean – 6.41; Carnegie Mean Score – 6.15 Target Met

Question 2 Apply culturally appropriate concepts

AY 2016-2017: NSU Mean – 6.44; Carnegie Mean Score - 6.12 Target Met

AY 2017-2018: NSU Mean – 6.38; Carnegie Mean Score - 6.09 Target Met

Trended results

Year	2015-16	2016-17	2017-18
Skyfactor™ Question	Q86 Integrate evidence	Q86 Integrate evidence	Q86 Integrate evidence
NSU	6.19	6.31	6.41
Carnegie	6.05	6.15	6.15
	Q80 Apply culturally appropriate concepts	Q80 Apply culturally appropriate concepts	Q80 Apply culturally appropriate concepts
NSU	6.20	6.44	6.38
Carnegie	5.99	6.12	6.09

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Analysis. All MSN students take core courses which include NURG 5010 Research in Nursing, NURG 5100 Social Forces and Nursing Practice, NURG 5120 Theory Oriented Nursing Practice, and NURG 5280 Advanced Human Physiology and Pathology for Advanced Practice Nurses. These courses provide evidence from nursing as a foundation for practice that students use as they enter their clinical and functional role concentration. Evidenced based practice is part of every clinical concentration (AGACNP, AGPCNP, FNP, PCPNP, WHNP, Adult Gerontology Nursing, and Maternal Child and Family Nursing).

In the 2016-2017 assessment year, the NSU mean score for question one (1) was 6.31 which met the expected outcome of meeting or exceeding the Carnegie score of 6.15. The NSU mean score for question two (2) was 6.44 which met the expected outcome of meeting or exceeding the Carnegie mean score of 6.12. The NSU mean score for both questions show an upward trend from 2015-2016.

Although the targets were met in 2016-2017, nurse practitioner faculty felt students would receive more benefit from discussing clinical guidelines in an online forum mediated by clinical faculty. The plan for the 2017-2018 assessment year was to have groups of students present clinical guidelines via voice over PowerPoints and post these in their specific clinical concentration courses for the entire class to see. These guidelines would then be discussed in a synchronous online forum with interaction and discussion with clinical faculty. Students would be able to discuss clinical experiences, receive encouragement from faculty, and interact with one another.

In 2017-2018 the above plan was implemented. Groups of students presented clinical guidelines via voice over PowerPoints which were posted for the entire class to see. These guidelines were then discussed in a synchronous online forum with interaction and discussion with clinical faculty. Students discussed clinical experiences, received encouragement from faculty, and interacted with one another. Student feedback was positive regarding these changes. The NSU mean score for the 2017-2018 assessment year for question one was 6.41 which met the expected outcome of the Carnegie mean score of 6.15. The upward trend continued for three years for this question. The NSU mean score for question two was 6.38 which met the expected outcome of the Carnegie mean score of 6.09. This was a slight decrease from the previous year's mean score of 6.44, but higher than the 2015-2016 result of 6.2.

Based on the analysis of the results, the plan for the 2018-2019 assessment year is to 1) continue with the synchronous online forum presentations and discussion of clinical guidelines with students, but decrease the number of participants for each forum to approximately 10 to 15 students with two faculty facilitators. This will allow more interaction with students and faculty and ensure all students have a chance to participate and engage each other; 2) update NURG 5100 Social Forces and Nursing Practice to reflect the most current trends in nursing and policy because of the dynamic political climate; and 3) reformat the research content (NURG 5010) in such a way that students complete mini research proposals to better comprehend the rigor of research and necessity of article reviews to determine the best evidence.

Decision. NSU graduate nursing students mean scores have been higher than Carnegie institutions in their perceived ability to integrate evidence from nursing and other sciences to apply organizational, client centered, culturally appropriate concepts

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to population prevention and delivery of care to patients. NSU has demonstrated success in this measure for the last three assessment years. The plan for the 2018-2019 assessment year is to 1) continue with the synchronous online forum presentations and discussion of clinical guidelines with students, but decrease the number of participants for each forum to approximately 10 to 15 students with two faculty facilitators. This will allow more interaction with students and faculty, and ensure all students have a chance to participate and engage each other; 2) update NURG 5100 Social Forces and Nursing Practice to reflect the most current trends in nursing and policy because the dynamic political climate; and 3) reformat the research content in such a way that students complete mini research proposals to better comprehend the rigor of research and necessity of article reviews to determine the best evidence.

Measure 1.3 (Direct-Knowledge)

Assessment Method: NURG 5830 Role of the Nurse Practitioner in Practice assignment on cultural and spiritual sensitivity.

Expected Outcome: 90% of the students will score 80% or better.

Findings

AY 2016-2017: 98.7% (76/77) scored 80% or higher Target Met

AY 2017-2018: 97% (67/69) scored 80% or higher Target Met

Analysis. The Role of the Nurse Practitioner in Practice assignment on cultural and spiritual sensitivity was implemented as a measure for SLO 1 in AY 2016-2017; therefore, data only trends for 2 years. Prior to AY 2016-2017, SLO 1 was measured by the Advanced Practice Nurse (APN) Clinical Practice Framework Paper assigned in NURG 5820 Introduction to the Role of the Nurse Practitioner. Although the target was met in AY 2015-2016, the MSN faculty voted to replace the Advanced Practice Nurse (APN) Clinical Practice Framework paper with a measure that would be a more accurate reflection of spirituality and cultural sensitivity. Therefore, for the 2016-2017 assessment year, the measure for this SLO was changed to the Role of the Nurse Practitioner in Practice assignment on cultural and spiritual sensitivity with the expected outcome of 90% of the students achieving a score of 80% or higher on the assignment. In the 2016-2017 assessment year, the target of 90% was met as 98.7% (76/77) of students were able to successfully explain the significance of the cultural and spiritual role competency of the nurse practitioner. Due to the high-performance levels, minimal changes were made related to this assignment. However, the plans for the 2017-2018 assessment year were to update the materials for the video lectures, readings, and resources.

In the 2017-2018 assessment year, the above plan was implemented and new resources were posted for this assignment and video recourses/lectures were updated. For the 2017-2018 assessment year, the expected outcome was met with 97% (67/69) of the students achieving a score of 80% or higher. Although the expected outcome was met for the past two years, there was a very slight decrease in the percentage of students who met the criteria. One student in the 2016-2017 assessment year did not

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meet the criteria whereas two students in the 2017-2018 assessment year did not meet the criteria. This is likely insignificant but nonetheless considered in the improvements for the 2018-2019 assessment year. Overall, the evidence shows a 97-98% student achievement for this SLO in the 2016-2017 and the 2017-2018 assessment year which demonstrates the students' ability to identify and implement culturally and spiritually sensitive care to patients, families, and communities. Based on the analysis of the evidence, the plan for the 2018-2019 assessment year is for faculty to: 1) provide current examples and online resources for students to ensure a variety of spiritual and cultural modalities that can be used when providing culturally sensitive care to clients, families, and communities, 2) provide interactive lectures to ensure engagement in cultural and spiritual aspects of care for different populations. Students are currently addressing the spiritual/cultural variable in the application of Neuman's framework to practice, but further emphasis will be made on the significance of this variable related to effective care to all clients. This assessment tool will also be used in role courses for the educator and the administrator, as the MSN PCC feels it is applicable to all areas of nursing.

Decision. For AY 2016-2017 and 2017-2018, 97-98% of students scored 80% or better for this measure. This is evidence that students have knowledge and can apply cultural and spiritual sensitivity in patient care. Based on the analysis of the results, the plan to enhance student learning for the 2018-2019 AY is for faculty to: 1) provide current examples and online resources to provide a tool box of modalities to use when providing culturally sensitive care, 2) provide interactive lectures to assure student engagement, 3) place more emphasis on the spiritual/cultural variable in the application of Neuman's framework to clinical practice, and 3) evaluate the use of the assessment tool in other courses that encompass the role of the educator and administrator.

Measure 1.4 (Indirect-Knowledge)

Assessment Method: Alumni Survey question 5a

Question 5a asks alumni to rate their satisfactions with how well the MSN program prepared them to incorporate knowledge, theory, and skill bases from scientific disciplines as related to provision of culturally sensitive care to clients, families and communities within the standards and scope of practice. Answer choices are not satisfied, somewhat satisfied, satisfied, and very satisfied.

Expected Outcome: 80% of one year alumni select satisfied or very satisfied

Findings

AY 2016-2017: 95% satisfied or very satisfied (N=23) Target Met

AY 2017-2018: 100% satisfied or very satisfied (N=11) Target Met

Analysis. Students currently address the spiritual/cultural variable in the application of Neuman's framework to practice in role and clinical courses. The one-year alumni feedback is important because the graduates have been able to work in the

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communities and have a better understanding of the knowledge and skills needed during their education to prepare them as competent advanced practice nurses.

For the year, 2016-2017, 66 surveys were distributed to one-year alumni (graduates for 2015-2016), with 23 respondents (response rate 35%). Of those 23 respondents, 95% were satisfied or very satisfied that their graduate education “incorporated knowledge from scientific disciplines to prepare you to deliver culturally sensitive healthcare within your standards and scope of practice to clients, families, and communities.” This is evidence that MSN graduates felt prepared, based on knowledge learned from scientific disciplines, to deliver culturally sensitive healthcare to patients they encountered during the first year after graduation. Since this measure was met at a high level, the plan for 2017-2018 was to continue the current practice and enhance student learning through these measures: 1) adding “Clinical Pearls” assignments in population specific clinical courses to help students learn about the most common conditions for specific populations and give students a reference to use in clinic. 2) have groups of students present clinical guidelines via voice over PowerPoints and post these in their specific clinical concentration courses for all students to see. These guidelines would then be discussed in a synchronous online forum with interaction and discussion with clinical faculty. Students would be able to discuss clinical experiences, receive encouragement from faculty, and interact with one another.

In 2017-2018, the above plan was implemented. The “Clinical Pearls” assignment was well received by students and faculty received positive feedback from the assignment. In addition, the PowerPoint presentations and online forums went well, but faculty felt that students would benefit from smaller groups in the forums. In 2017-2018 assessment year, 61 surveys were distributed to one-year alumni (graduates from 2016-2015) with 11 respondents (response rate 18%). Of those 11 respondents, 4 were satisfied and 7 were very satisfied that their graduate education “incorporated knowledge from scientific disciplines to prepare you to deliver culturally sensitive healthcare within your standards and scope of practice to clients, families, and communities.” The expected outcome for both years was met, with a higher margin for the 2017-2018 year. Based on the analysis of the results, the plans for the 2018-2019 assessment year are for faculty to: 1) to continue with the synchronous online forum presentations and discussion of clinical guidelines with students, but decrease the number of participants for each forum, by having 2 faculty per forum with approximately 10 to 15 students. This will allow more interaction with students and faculty, and ensure all students have a chance to participate and engage each other; 2) update NURG 5100 Social Forces and Nursing Practice to reflect the most current trends in nursing and policy due to the dynamic political climate; 3) revise NURG 5010 Research in Nursing to facilitate student comprehension of the rigor expected in research; 4) continue to use “Clinical Pearls” assignment; and 5) continue to use Flipgrid and other video formats in NURG 5810.

Decision. In 2017-2018 assessment year, 61 surveys were distributed to one-year alumni (graduates from 2016-2015) with 11 respondents (response rate 18%). Of those 11 respondents, 4 were satisfied and 7 were very satisfied that their graduate education “incorporated knowledge from scientific disciplines to prepare you to deliver culturally sensitive healthcare within your standards and scope of practice to clients, families, and

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communities.” Based on the analysis of the results, the plans for the 2018-2019 assessment year are for faculty to: 1) to continue with the synchronous online forum presentations and discussion of clinical guidelines with students, but decrease the number of participants for each forum, by having 2 faculty per forum with approximately 10 to 15 students. This will allow more interaction with students and faculty, and ensure all students have a chance to participate and engage each other; 2) update NURG 5100 Social Forces and Nursing Practice to reflect the most current trends in nursing and policy due to the dynamic political climate; 3) revise NURG 5010 Research in Nursing to facilitate student comprehension of the rigor expected in research; 4) continue to use “Clinical Pearls” assignment; and 5) continue to use Flipgrid and other video formats in NURG 5810.

SLO 2. Demonstrate responsibility and accountability as a practitioner of advanced nursing and consumer advocate to effect relevant change that will improve the health of citizens at a local, state and national level.

Measure 2.1 (Direct-Knowledge/Skill)

Assessment Method: Functional Role Comprehensive Examination: Functional Role Comprehensive Examination is administered in the last semester of course work. This examination is comprised of several scenarios with specific criteria that must be addressed.

Expected Outcome: 90% of students will score 80% or higher on the first attempt.

Findings

AY 2015-2016:	92.4% (61/66)	scored \geq 80%	Target Met
AY 2016-2017:	96.7% (55/57)	scored \geq 80%	Target Met
AY 2017-2018:	97.3% (71/73)	scored \geq 80%	Target Met

Analysis. Throughout the MSN program, the responsibility and accountability of the Advanced Practice Nurse (APN) as an advocate for population health is emphasized on local, state, and national levels. Students complete three to four role courses (depending on the track) which incorporate strategies, including readings, lectures, and other module activities, in preparation to successfully complete the final role comprehensive exam. During these courses, students learn about the critical environmental elements (local, state, and national) that affect advanced practice nursing. During the clinical courses designed for each concentration, the students integrate this knowledge into the clinical setting to improve patient health.

Prior to AY 2016-2017, students were required to complete a research comprehensive examination the same day as the role comprehensive exam. However, the MSN faculty voted in 2015 to eliminate this portion which likely attributed to the improvement in scores in AY 2016-2017. Also beginning in AY 2016-2017, students were given the option to complete the exam online with live proctoring via ProctorU. Providing the students with more options in the demonstration of their knowledge has likely aided in the higher level of performance. In addition, the comprehensive exam

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had been revised several years prior to 2016 to give students a choice in answering two of three scenarios to complete. Although faculty had seen this as giving the students a choice of test questions, some students would become confused and try to answer all three questions.

During the AY 2016-2017, the target was met as evidenced by 96.7% (55/57) of students scoring an 80% or higher on the first attempt of the Functional Role Comprehensive Examination. Based on the analysis of the results, the plans for the 2018-2019 assessment year were for faculty to: 1) develop a new grading rubric for the Role Comprehensive Exam that outlined expectations for students more clearly than before, 2) revise the comprehensive exam to ask two questions to eliminate confusion, and 3) offer a role comprehensive review prior to the examination.

In AY 2017-2018, the above plan was implemented. As there were only two comprehensive questions, there was no confusion on which questions to answer. A review was developed in video format and posted online for students to view at their convenience. In 2017-2018, 71 out of 73 students, or 97.26%, were successful in achieving an 80% or higher on the first attempt. The two students who had to retake the exam passed on the second attempt. The results from 2017-2018 (97.3) showed a slight improvement from AY 2016-2017 (96.7%) after implementation of the plan for 2017-2018. Overall, the evidence shows a 96-97% student achievement for this measure in AY 2016-2017 and AY 2017-2018 which demonstrates that students have the knowledge to be a positive change agent that improves health at the local, state, and national levels. Based on the analysis of the evidence, the plans for the AY 2018-2019 are for faculty to: 1) incorporate any changes in the local, state, and national environments that potentially impact advanced practice nursing into courses in the program; 2) utilize appropriate and consistent nomenclature such as “change-agent” across courses and across the program to ensure student understanding of the language; 3) continue to assure consistency among the role and clinical concentration courses within the program relative to the local, state and national factors that impact APN practice; 4) continue to provide current examples, interactive lectures, online resources, and current materials to assure student engagement; and (5) continue to emphasize the application of state and national legal and professional standards and scope of practice relative to specialty concentrations.

Decision. In 2017-2018, 97.26% of students achieved a score of 80% or higher on the first attempt. The results from 2017-2018 (97.3) showed a slight improvement from AY 2016-2017 (96.7%) after implementation of the plan for 2017-2018. Based on the analysis of the evidence, the plans for the AY 2018-2019 are for faculty to: 1) incorporate any changes in the local, state, and national environments that potentially impact advanced practice nursing into courses in the program; 2) utilize appropriate and consistent nomenclature such as “change-agent” across courses and across the program to ensure student understanding of the language; 3) continue to assure consistency among the role and clinical concentration courses within the program relative to the local, state and national factors that impact APN practice; 4) continue to provide current examples, interactive lectures, online resources, and current materials to assure student engagement; and (5) continue to emphasize the application of state

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and national legal and professional standards and scope of practice relative to specialty concentrations.

Measure 2.2 (Indirect-Knowledge/Skill)

Assessment Method: Skyfactor™ survey questions:

Question 68: “To what degree did your MSN program enhance your ability to work as a change agent?”

Question 140: “To what degree did your didactic and clinical courses prepare you in the following content areas? Ability to articulate advance practice role issues.”

Expected Outcome: Equal to or greater than the Carnegie mean score (Range 1-7)

Findings

Question 68 - Act as a change agent

AY 2016-2017: NSU Mean – 6.29; Carnegie Mean Score – 5.97 Target Met

AY 2017-2018: NSU Mean – 6.08; Carnegie Mean Score – 5.95 Target Met

Question 140 – Articulate role issues

AY 2016-2017: NSU Mean – 6.19; Carnegie Mean Score – 5.87 Target Met

AY 2017-2018: NSU Mean – 6.19; Carnegie Mean Score – 5.78 Target Met

Trended Results

Year	2015-2016	2016-2017	2017-2018
Skyfactor™ Question	Q68 Act as change agent	Q68 Act as change agent	Q68 Act as change agent
NSU	5.78	6.29	6.08
Carnegie	5.86	5.97	5.95
Skyfactor™ Question	Q140 Articulate role issues	Q140 Articulate role issues	Q140 Articulate role issues
NSU	6.35	6.19	6.19
Carnegie	5.67	5.87	5.78

Analysis. Throughout the MSN program, the responsibility and accountability of the Advanced Practice Nurse (APN) as an advocate for population health is emphasized on local, state, and national levels. Students complete three to four role courses (depending on the track) which incorporate strategies, including readings, lectures, and other module activities, in preparation to successfully complete the final role comprehensive exam. During these courses, students learn about the critical environmental elements (local, state, and national) that affect advanced practice nursing. During the clinical courses designed for each concentration, the students integrate this knowledge into the clinical setting to improve patient health.

In the 2016-2017 assessment year, the NSU mean score for question 68 was 6.29 which met the expected outcome of meeting or exceeding the Carnegie score of 5.97. The NSU mean score for question 68 shows an upward trend from assessment year 2015-2016 (5.78), when the expected outcome (5.86) was not met. The NSU

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mean score for question 140 was 6.19 which met the expected outcome of meeting or exceeding the Carnegie mean score of 5.87. Although the NSU mean score for question 140 met the expected outcome for 2016-2017, it was slightly lower than the 2015-2016 (6.35) results. As the MSN students are working as change agents in clinical, the MSN faculty felt that students were not recognizing the terminology of “change agent.” Based on the analysis of the results, the plan for 2017-2018 assessment year was to use the term “change agent” in didactic modules and assignments, especially in NURG 5100. This way, when the students saw this term, they would better understand what the question was referring to. However, NURG 5100 is earlier in the curriculum and results might not been seen in the Skyfactor results in the next year. Also planned for the 2017-2018 assessment is to incorporate ethical/advocacy assignment/case scenarios in the didactic portion of the clinical courses.

In 2017-2018 the above plan was implemented. Case studies were added to some clinical courses. An example of a case scenario involved the nurse practitioner facing an ethical dilemma and resolving that situation legally and ethically, encompassing advocacy in the resolution. The NSU mean score for the 2017-2018 assessment year for question 68 was 6.08, which met the expected outcome of meeting or exceeding the Carnegie mean score of 5.95. Though this score is lower than the last assessment year, it does show a two-year trend of meeting this target after not meeting it in 2015-2016. The NSU mean score for question 140 was 6.19 which met the expected outcome of meeting or exceeding the Carnegie mean score of 5.78. This is the same result as the previous year’s mean score (6.19) but exceeds the Carnegie score by a higher margin than the 2016-2017 assessment year.

Based on the analysis of the results, the plans for the AY 2018-2019 are for faculty to: 1) incorporate any changes in the local, state, and national environments that potentially impact advanced practice nursing into courses in the program, 2) utilize appropriate and consistent nomenclature such as “change-agent” across courses and across the program to ensure student understanding of the language, 3) continue to assure consistency among the role and clinical concentration courses within the program relative to the local, state and national factors that impact APN practice, 4) continue to provide current examples, case scenarios, interactive lectures, online resources, and current materials to assure student engagement, and (5) continue to emphasize the application of state and national legal and professional standards and scope of practice relative to specialty concentrations.

Decision. In the 2017-2018 assessment year, the NSU mean score for the 2017-2018 assessment year for question 68 was 6.08 which met the expected outcome of meeting or exceeding the Carnegie mean score of 5.95. The NSU mean score for question 140 was 6.19 which met the expected outcome of meeting or exceeding the Carnegie mean score of 5.78. Based on the analysis of the results, the plans for the AY 2018-2019 are for faculty to: 1) incorporate any changes in the local, state, and national environments that potentially impact advanced practice nursing into courses in the program, 2) utilize appropriate and consistent nomenclature such as “change-agent” across courses and across the program to ensure student understanding of the language, 3) continue to assure consistency among the role and clinical concentration courses within the

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program relative to the local, state and national factors that impact APN practice, 4) continue to provide current examples, case scenarios, interactive lectures, online resources, and current materials to assure student engagement, and (5) continue to emphasize the application of state and national legal and professional standards and scope of practice relative to specialty concentrations.

Measure 2.3 (Indirect-Knowledge)

Assessment Method: Alumni Survey

Question 5b asks alumni to rate their satisfaction with how well the MSN program prepared them to be an accountable, responsible practitioner of advanced nursing and a consumer advocate to effect relevant change to improve the health and citizens on a local, state, and national level. Answer choices are not satisfied, somewhat satisfied, satisfied, and very satisfied.

Expected Outcome: 80% of one-year alumni will select satisfied or very satisfied

Findings

AY 2016-2017: 91% were satisfied or very satisfied (N=23) Target Met

AY 2017-2018: 100% were satisfied or very satisfied (N=11) Target Met

Analysis. For the 2016-2017 assessment year, 66 surveys were distributed to one-year alumni (graduates for 2015-2016), with 23 respondents (35% response rate). Of the 23 respondents, 91% were satisfied or very satisfied that their graduate education prepared them to be “an accountable, responsible practitioner of advanced nursing and a consumer advocate to effect relevant change to improve the health and citizens on a local, state, and national level.” Though this measure met the expected outcome, there were several things planned for the 2017-2018 assessment year that impact this SLO and this measure. Based on the results, the plan for the 2017-2018 assessment year was to implement Shadow Health in NURG 5700 Methods of Clinical Nursing Assessment. Shadow Health is a computer based, interactive learning program that serves as a lab for practicing advanced assessment techniques (including focused history, cultural sensitivity, empathy, etc.). Other plans for 2017-2018 included: 1) a new section of NURG 5280 Advanced Pathophysiology, with a new instructor and a new text which had more online resources. This change occurred due to student evaluations of the pathophysiology course, and the University impetus to make the cost of textbooks more affordable; 2) changing the textbooks in NURG 5810 Family Dynamics from two textbooks to one less expensive textbook; 3) adding Flipgrid and other video formats to increase student connectivity in the online courses; and 4) adding “Clinical Pearls” assignments in population specific clinical courses to help students learn about the most common conditions for specific populations and give students a reference to use in clinic.

In 2017-2018, 61 surveys were distributed to one-year alumni (graduates from 2016-2015) with 11 respondents (18% response rate). Of those 11 respondents, 3 were satisfied and 8 were very satisfied that their graduate education prepared them to be “an accountable, responsible practitioner of advanced nursing and a consumer advocate to effect relevant change to improve the health and citizens on a local, state,

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and national level.” This measure was met for both assessment years, with the higher success in the 2017-2018 year. Based on the analysis of the evidence, the plan for the 2018-2019 assessment year is for faculty to: 1) contact preceptors on a weekly basis to ensure good communication between faculty and preceptors regarding students, and their clinical experiences and their delivery of appropriate, culturally sensitive care, 2) incorporate any changes in the local, state, and national environments that potentially impact advanced practice nursing into courses in the program, and 3) change the Primary Care Pediatric Nurse Practitioner (PCPNP) primary text to Burn’s Primary Care Pediatrics, which is written by nurse practitioners for nurse practitioners, rather than continue with the current text, which was written by physicians. It is anticipated this new primary text will include more nursing theory and science, and student test questions will be more congruent with the national certification exam. In addition, the MSN program will continue to use: 1) Shadow Health in teaching NURG 5700, 2) the “Clinical Pearls” assignment in population specific clinical courses, 3) one text, Flipgrid, and other video formats in NURG 5810, and 4) the new NURG5280 pathophysiology section, which has had very positive student reviews.

Decision. In the 2017-2018 assessment year, 100% of MSN one-year alumni felt educationally prepared to be accountable, responsible practitioners of advanced nursing and consumers advocates to effect relevant change to improve the health of citizens on local, state, and national levels during the first year after graduation. This met the expected outcome. The MSN PCC will continue to make improvements to the MSN program. Based on the analysis of the evidence, the plan for the 2018-2019 assessment year is for faculty to: 1) contact preceptors on a weekly basis to ensure good communication between faculty and preceptors regarding students, and their clinical experiences and their delivery of appropriate, culturally sensitive care, 2) incorporate any changes in the local, state, and national environments that potentially impact advanced practice nursing into courses in the program, and 3) change the Primary Care Pediatric Nurse Practitioner (PCPNP) primary text to Burn’s Primary Care Pediatrics, which is written by nurse practitioners for nurse practitioners, rather than continue with the current text, which was written by physicians. It is anticipated this new primary text will include more nursing theory and science, and student test questions will be more congruent with the national certification exam. In addition, the MSN program will continue to use: 1) Shadow Health in teaching NURG 5700, 2) the “Clinical Pearls” assignment in population specific clinical courses, 3) one text, Flipgrid, and other video formats in NURG 5810, and 4) the new NURG5280 pathophysiology section, which has had very positive student reviews.

SLO 3 Utilize a scholarly inquiry process, grounded in evidence-based practice, to become a producer and consumer of research evidence which contributes to the development and improvement of nursing theory, nursing practice and ultimately client and healthcare outcomes.

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Measure 3.1

Assessment Method: Paper in Lieu of Thesis: The PILT is completed prior to graduation, usually in the last semester of course work. The MSN students complete either a pilot project, integrative review of literature, systematic review of literature, or concept analysis.

Expected Outcome: 90% of the students will score 80% or higher

Findings

AY 2016-2017: 100% (62/62) scored \geq 80%

Target Met

AY 2017-2018: 100% (74/74) scored \geq 80%

Target Met

Analysis. At the end of the 2015-2016 Assessment Year, the comprehensive exam was eliminated as a student learning outcome measure and a new measure was implemented related to student success on the PILT for the AY 2016-2017. This change was made because faculty felt actual performance on the PILT was a better measure of a student's research competency than a written comprehensive exam.

Students work in groups of three to four to develop a PILT project during NURG 5995 Research Seminar I, and they implement the project during two consecutive semesters in NURG 5996 Research Seminar II. Each student group is led by a graduate faculty prepared at the doctorate level. The students' PILT projects are required to meet certain criteria outlined in the course, as well as criteria determined by the Graduate School. During MSN PCC meetings, PILT faculty provide updates regarding their specific students' progress with the PILT projects. In 2016-2017, it was often noted that students: 1) required significant guidance by the faculty to meet requirements for the project, 2) had difficulty finding and understanding graduate school requirements for the PILTs, and 3) waited until the spring semester to do the majority of the work on the PILT, which was stressful due to the graduation deadlines. In addition, the numbers of students in the courses was increasing, requiring faculty to have multiple groups.

In the 2016-2017 assessment year, the target was met with 100% (N=62) of students achieving an 80% or higher on the final PILT project. Based on the analysis of the evidence, the plans for the 2017-2018 assessment year were to: 1) hire doctorally prepared adjunct faculty to augment full time faculty serving as major professor for PILT groups. The goal was for faculty to have no more than two PILT student groups; 2) mentor two faculty who recently received their doctorates into the role of PILT major professor; 3) have the statistician make a series of voice over PowerPoint statistics review presentations which students initially could have access to in NURG 5010 Research in Nursing. Faculty thought this might be helpful for students to review in NURG 5996 as well; 4) incorporate graduate school requirements for PILT projects directly into the NURG 5996 course syllabus so students would have easy access to clear, concise requirements; 5) develop a voice over PowerPoint for students who chose to do the systematic review to guide them through the process; and 6) increase the use of WebEx meetings to insure regular communication between faculty and students.

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In the 2017-2018 assessment year, the above plans were implemented. Doctorally prepared adjunct faculty were hired and the two new doctorally prepared faculty were mentored into the role of PILT committee member alongside a faculty chair who served as their mentor. This was a successful transition, and both faculty will be able to serve as a major professor for a PILT group in 2018-2019. The PowerPoint presentations were developed and made available for students, which seemed to decrease the confusion related to graduate school PILT requirements. Faculty teaching PILT groups utilized WebEx to meet with students. In the 2017-2018 AY, the target was met with 100% (N=74) of students achieving an 80% or better on the final PILT project. While this measure has remained at 100% achievement for the past two years, progress has been made in enhancing the learning experience for students and faculty. Based on the analysis of the evidence, the plan is to: 1) limit the number of groups per faculty to insure students get the needed attention to successfully progress to completion of the projects, 2) restructure NURG 5995 Research Seminar I to provide the students with a solid foundation to begin their projects immediately upon the start of the Fall semester, 3) continue to hire and use doctorally prepared adjunct faculty to serve on the PILT committees, and 4) incorporate more voice over PowerPoints to guide students while working on their PILTs.

Decision. In the 2017-2018 AY, the target was met with 100% (N=74) of students achieving an 80% or better on the final PILT project. Based on the analysis of the evidence, the plan is to: 1) limit the number of groups per faculty to insure students get the needed attention to successfully progress to completion of the projects, 2) restructure NURG5995 Research Seminar I to provide the students with a solid foundation to begin their projects immediately upon the start of the Fall semester, 3) continue to hire and use doctorally prepared adjunct faculty to serve on the PILT committees, and 4) incorporate more voice over PowerPoints to guide students while working on their PILTs.

Measure 3.2 (Indirect-Knowledge)

Assessment Method: Skyfactor™ questions:

Question 66: “To what degree did your MSN program enhance your ability to apply research outcomes within the practice setting?”

Question 67: “To what degree did your MSN program enhance your ability to resolve practice problems using research?”

Expected Outcome: Mean score equal to or greater than the Carnegie mean score.

Findings

Question 66 Apply research

AY 2016-2017: NSU Mean 6.50;

Carnegie Mean 6.11

Target Met

AY 2017-2018: NSU Mean 6.42;

Carnegie Mean 6.09

Target Met

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Question 67 Resolve practice problems using research

AY 2016-2017: NSU Mean 6.42; Carnegie Mean 6.09 Target Met
AY 2017-2018: NSU Mean 6.29; Carnegie Mean 6.07 Target Met

Trending Results

Year	2015-2016	2016-2017	2017-2018
Skyfactor™ Question	Q66 Apply research	Q66 Apply research	Q66 Apply research
NSU	6.27	6.50	6.42
Carnegie	6.00	6.11	6.09
Skyfactor™ Question	Q67 Resolve problems	Q67 Resolve problems	Q67 Resolve problems
NSU	6.15	6.42	6.29
Carnegie	5.95	6.09	6.07

Analysis. In the 2016-2017 Assessment Year, question 66 asked, “To what degree did your MSN program enhance your ability to apply research outcomes within the practice setting?” The NSU mean score was 6.50, which met the expected outcome of 6.11 and was an increase of 0.23 from the previous assessment year. Likewise, the NSU mean for question 67 was 6.42, which met the expected outcome of 6.09 and reflected a similar increase of 0.27 from the previous year (2015-2016). This data is evidence that students believed that the MSN program enhanced their ability to apply research outcomes to practice and to resolve practice problems using research. Based on the analysis of the evidence, the plan for the 2017-2018 assessment year was to: 1) eliminate the traditional bib card assignment in NURG 5770, 5780, and 5790; 2) replace the bib card assignment with voice over PowerPoint that applied research outcomes in addressing clinical practice guidelines; and 3) have monthly WebEx sessions in the above courses to present and discuss the assignment.

In the 2017-2018 assessment year, the above plan was implemented. In the courses (NURG 5770, 5780, and 5790) where students were no longer required to do bib cards but rather participated in development of voice over PowerPoints, which they shared via WebEx with faculty and their peers. Students expressed satisfaction with the activity. Faculty found the activity promoted a great deal of sharing among the students and faculty related to actual clinical experiences. While faculty guided the sessions, they also got a sense of where each student was in terms of processing clinical information and applying evidenced based guidelines in their clinical practice. In the 2017-2018 assessment year, for question 66, “To what degree did your MSN program enhance your ability to apply research outcomes within the practice setting?” the mean score was 6.42, which met the Carnegie mean score of 6.09. It was also a decrease of 0.08 from the previous assessment year. Likewise, the NSU mean score for question 67 was 6.29, which met the Carnegie mean score of 6.07, and was a decrease of 0.13 from the previous year. Though both questions experienced a decrease from the previous year, the mean scores were very high and had decreased by less than 0.15 points. Based on the analysis of the results, the plans for the 2018-2019 assessment year are to: 1) contact preceptors weekly (rather than sporadically) throughout the

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semester to help guide students in the clinical setting and through the didactic courses, and 2) continue the WebEx sessions which help students become familiar with clinical guidelines and how they “fit” into clinical practice in a very real way.

Decision. In the 2017-2018 assessment year, the NSU mean score was 6.42, which met the Carnegie mean score of 6.09. The NSU mean score for question 67 was 6.29, which met the Carnegie mean score of 6.07. Though both questions experienced a decrease from the previous year, the mean scores were very high and had decreased by less than 0.15 points. Based on the analysis of the results, the plans for the 2018-2019 assessment year are to: 1) contact preceptors weekly (rather than sporadically) throughout the semester to help guide students in the clinical setting and through the didactic courses, and 2) continue the WebEx sessions which help students become familiar with clinical guidelines and how they “fit” into clinical practice in a very real way.

Measure 3.3 (Indirect-Knowledge)

Assessment Method: Alumni Survey: Question 5c asks alumni to rate their satisfaction with how well the MSN program prepared them to become a producer and consumer of research evidence, contributing to nursing theory, nursing practice, and to use evidence based research to improve client and healthcare outcomes. The selection of choices on the alumni survey include (1) not satisfied, (2) somewhat satisfied, (3) satisfied, and (4) very satisfied.

Expected Outcome: Eighty percent (80%) of alumni will select satisfied or very satisfied.

Findings

AY 2015-2016:	75% (N=8)	Expected Outcome 80%	Target Met
AY 2016-2017:	83% (N=23)	Expected Outcome 80%	Target Met
AY 2017-2018:	100% (N=11)	Expected Outcome 80%	Target Met

Analysis. NURG 5010 is the first and foundational research course in the MSN student’s curriculum. During the 2016 Assessment Year, the regular faculty of record became seriously ill and other faculty assumed responsibility for the Spring 2016 course just prior to midterm. In Summer 2016, based on exposure to the Spring 2016 course, the new faculty determined that all course rubrics needed to be revised or new ones developed to offer more guidance for students and to better insure faculty were grading all assignments consistently. Therefore, for the Summer and Fall 2016 NURG 5010 course, the faculty and faculty assistant met a number of times throughout the semesters to review each assignment along with the associated instruction sheet and grading rubric. Each one was revised, and the revised documents were used for the following semester. During the summer session, faculty determined there was an identified need to insure students were more knowledgeable about the research process and associated concepts beyond a very basic understanding. However, faculty noted that students were not responding to the feedback provided by the faculty to

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improve themselves with each succeeding assignment. Additionally, it was evident that several students were not reading the assigned reading selections. It appeared the materials were difficult, but students were not “digging” in to try to understand the material. Therefore, faculty determined an objective test might be another strategy to motivate students to read the assigned readings and use the feedback received from faculty. Changes made in NURG 5010 during the 2016-2017 assessment year included:

- Course objectives were updated. Initial objective: #1 – Identify the role of the Advanced Practice Nurse in Research. Revised objective: #1 – Identify the role of the master’s-prepared nurse in research. This was done so students were clear that they needed to be concerned with this objective. Many thought it related only to the nurse practitioner students. Initial Objective: #6 – Examine differences in qualitative research traditions. Revised objective: #6 – deleted as based on requirements for the course, students are only briefly exposed to qualitative research but do not spend any time actually examining differences.
- Rubrics were revised for all assignments and explicit instructions provided for all assignments. Each rubric that was already present was updated for clarity and/or additional coverage of topic. If there wasn’t a rubric, one was developed.
- Continued to conduct two research critiques with new articles each semester to alleviate academic dishonesty concerns.
- Rather than have students submit an academic honesty statement with each assignment, one was developed that the student signed and submitted once for credit. They were made aware that this attestation was for all assignments in the course for that semester.
- The literature review table was expanded to include more detail to guide student’s progress.
- The CONSAH statistician developed several voice-over PowerPoint presentations at the request of the research faculty to help students understand statistical components of the course.
- A final exam of 100 items was developed. Most students scored in the 50’s and 60’s but some achieved 80’s and 90’s. Although students did not do great on the exam, faculty felt it was important to keep the exam for the next semester so students could see their their lack of knowledge. A consideration for the next year was for faculty to give some quizzes in the Spring semester so that deficits would be seen earlier and perhaps students would commit to learning research concepts and process a little sooner.

Alumni surveys are sent to all one-year alumni. In the 2016-2017 assessment year, 66 surveys were distributed to one-year alumni (graduates from 2015), with 23 respondents (response rate 35%). Of the 23 respondents, 83% selected either “satisfied” or “very satisfied” meeting the expected outcome of 80%. This is evidence that most students felt the MSN program prepared them to become a producer and consumer of research evidence, contributing to nursing theory, nursing practice, and to

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use evidence based research to improve client and healthcare outcomes in the first year after graduation. In addition, there was a substantial increase in the number of responses to the Alumni survey as the method of sending out the survey had changed. Previously the main campus at NSU sent out the alumni surveys. For 2016-2017 assessment year, rather than send the alumni survey link from the main campus staff, each program coordinator was asked to send a personal email with the link to their alumni. Though numbers remain small, the response rate increased and faculty were hopeful that the response rate would continue to improve. Though the expected outcome was met, there was still room for improvement. Based on the analysis of the evidence, the plans for the 2017-2018 assessment year were to: 1) update and revise rubrics based on experience and feedback from 2016-2017 to facilitate clarity of expectations, 2) include the poster presentation as part of the Mini-Proposal assignment criteria rather than as a separate assignment to avoid double jeopardy in regards to grading, 3) require a final exam rather than a final written assignment, and 4) consider giving quizzes throughout the course to evaluate student understanding of research.

In the 2017-2018 assessment year, the above plan was implemented. All rubrics were revised as needed for all assignments, giving explicit instructions on expectations. The statistician had previously developed voice-over PowerPoint presentations to help students understand statistical components of the course and these were once again offered as a resource to students. The poster presentation was included as part of the Mini-proposal assignment. The poster was graded more on visual and audio presentation style while the mini-proposal was graded on the content that should have been reflected in the poster presentation. Additional actions included: 1) development of a self-assessment exam worth 100 points given early in the course to help students understand the need to study the reading materials and the student's areas of concerns. Students made F's to A's, but, based on comments included in the course report, many did not initially take it seriously; 2) providing students with a form to indicate if they wanted their graded assignments back via mail (providing a SASE), for pick up, or not at all. Most students DID NOT want their assignments back; therefore, they were not privy to the feedback! This was a very surprising outcome to the course faculty; and 3) an optional final exam of 50 items was developed. However, only four students of 21 elected to take the final exam.

In the 2017-2018 assessment year faculty distributed 61 surveys with a return rate of 18% (N=11). All (100%) of the alumni responding selected "satisfied" or "very satisfied" for this item on the survey. This was a significant increase from 83% in 2016-2017. However, the number of survey responses and response rate was decreased from the previous year. Based on the analysis of the evidence, the plan for the 2018-2019 assessment year is to: 1) have a seasoned researcher teach NURB 5010 to further revise the course and enhance the student learning experiences, 2) include WebEx sessions where students can ask questions in real time and other students can benefit, 3) have consistent faculty teaching NURB 5010 Research in Nursing and NURB 5995

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Research Seminar to help students see the connection between the courses, 4) continue the pre-assessment exam, but for purposes of student enlightenment only – no grade, and 5) make the final exam a graded exam that is required.

Decision. In the 2017-2018 assessment year faculty distributed 61 surveys with a return rate of 18% (N=11). All (100%) of the alumni responding selected “satisfied” or “very satisfied” for this item on the survey. This was a significant increase from 83% in 2016-2017. However, the number of survey responses and response rate was decreased from the previous year. Based on the analysis of the evidence, the plan for the 2018-2019 assessment year is to: 1) have a seasoned researcher teach NURB 5010 to further revise the course and enhance the student learning experiences, 2) include WebEx sessions where students can ask questions in real time and other students can benefit, 3) have consistent faculty teaching NURB 5010 Research in Nursing and NURB 5995 Research Seminar to help students see the connection between the courses, 4) continue the pre-assessment exam, but for purposes of student enlightenment only – no grade, and 5) make the final exam a graded exam that is required.

SLO 4 Analyze the effect of historical, cultural, economic, ethical, legal, and political influence on nursing and health care delivery

Measure 4.1 (Indirect-Knowledge/Skill)

This measure has three questions from the Skyfactor Survey. Each is addressed separately.

First Question

Assessment Method: Skyfactor™ survey question:

Question 141: “To what degree did your didactic and clinical courses prepare you in the following content area? Business aspects of practice.”

Expected Outcome: Mean score equal to or greater than the Carnegie mean score.

Findings

Question 141 Business aspects

AY 2016-2017: NSU Mean 5.87; Carnegie Mean 5.04 Target Met

AY 2017-2018: NSU Mean 5.83; Carnegie Mean 5.00 Target Met

Analysis: Business aspects of the nurse practitioner role are taught in NURB 5840 Role of the Nurse Practitioner in Business Practice. For the 2015-2016 year, changes made in NURB 5840 included decreasing the number of discussion forums and changing individual assignments (except for the resume) to group assignments. Course evaluations from Fall 2015 indicated that the students felt the course was valuable and that the content is warranted. In the 2016-2017 assessment year, the NSU mean score for question 141 was 5.87 which met the expected outcome of meeting or exceeding the Carnegie score of 5.04. This evidence indicated that NSU graduating students believed

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that the MSN program had prepared them for the business aspects of practice. In 2016-2017, two of the three faculty who taught NURG 5840 were new to teaching the course. Faculty met to discuss the course, developed a rubric for grading discussion forums to ensure consistency, and kept in touch through email regularly throughout the semester. Based on the analysis of the results, the plans for the 2017-2018 assessment year were to: 1) revise the course, 2) come up with alternatives to the formal business plan, 3) let students choose their group partners, 4) consider developing recorded content to explain each section or difficult areas, quizzes, WebEx presentations, or other active learning techniques.

In the 2017-2018 assessment year, the above plan was implemented. Students were allowed to select their own groups and quizzes were added. The formal business plan was constructed at stages that aligned with the content modules. Faculty felt the changes were positive. In course evaluations, there were a variety of comments related to the high volume of work required for this one hour course. They did rate the course well in alignment of assignments and tests with material (4.45/5.0) but negative in the amount of work appropriate for the class (2.67/5.0 scale). Though some students found the course frustrating, others praised the available resources and faculty helpfulness. Students commented positively on the marketing assignment and the Louisiana State Board of Nursing (LSBN) regulation presentation and suggested that a graded resume would be good. The NSU mean for the 2017-2018 assessment year was 5.83 which met the expected outcome of meeting or exceeding the Carnegie mean score of 5.0. The NSU mean score and the Carnegie mean score were essentially unchanged from the previous year. Based on the analysis of the results, the plan for the 2018-2019 assessment year is to: 1) reconsider the business plan assignment, 2) consider adding more content related to credentialing, insurance, and licensure, and 3) continue the presentation by the LSBN, and 4) add a resume as an assignment.

Decision.The NSU mean for the 2017-2018 assessment year was 5.83 which met the expected outcome of meeting or exceeding the Carnegie mean score of 5.0. The NSU mean score and the Carnegie mean score were essentially unchanged from the previous year. Based on the analysis of the results, the plan for the 2018-2019 assessment year is to: 1) reconsider the business plan assignment, 2) consider adding more content related to credentialing, insurance, and licensure, and 3) continue the presentation by the LSBN, and 4) add a resume as an assignment.

Second Question

Assessment Method: Skyfactor™ survey question:

Question 74: "To what degree did your MSN program enhance your ability to intervene through the system level at the policy development process?"

Expected Outcome: Mean score equal to or greater than the Carnegie mean score.

Findings

Question 74 Intervene through system level at policy development process

AY 2016-2017: NSU Mean 5.45; Carnegie Mean 5.63 Target Not Met

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AY 2017-2018: NSU Mean 5.61 Carnegie Mean 5.67 Target Not Met

Analysis: NURG 5100 Social Forces provides the student with the opportunity to survey trends and developments in contemporary nursing and to examine the social forces affecting nurses, nursing, the client, and the health care system. Attention is focused on professionalism, the changing role of the nurse, legal and ethical frameworks and the professional practice of nursing in education and practice settings. Discussions include the skills needed to assess the system, conflicts, and means of entry into the political power base. Each year, students complete a Policy Analysis assignment. This assignment requires the student to identify a healthcare issue, identify possible solutions and stakeholders related to the issue, and decide who to talk with at the local, state, and national level to influence change regarding this issue. In addition, students are required to complete a final video project that incorporates the historical, as well as the current, cultural, economic, ethical, legal, and political influences on the US healthcare system.

In the 2016-2017 assessment year, the NSU mean score for question 74 was 5.45, which did not meet the expected outcome of meeting or exceeding the Carnegie mean score of 5.63. Based on the results, the plan for the 2017-2018 assessment year was to keep abreast of current healthcare issues by including the highly debated campaign platform that the Trump administration ran on, the repeal and replacement of the Affordable Care Act (ACA).

In the 2017-2018 assessment year, the above plan was implemented. For the final project, students researched components of both the Affordable Care Act and the proposed American Healthcare Act. Students had to demonstrate their knowledge of both through a video debate, addressing each act and arguing for or against. To demonstrate an understanding of ethical decision making and its role in healthcare provision and healthcare policy, students were asked to conclude whether healthcare was a right or a commodity. The faculty and student feedback on the activity was very positive and the debate allowed for a robust discussion. In the 2017-2018 assessment year, the NSU mean score was 5.61, which did not meet the expected outcome of meeting the Carnegie mean score of 5.67. However, the margin of missing the expected outcome was narrowed from 0.45 to 0.06. The result for the 2017-2018 AY was an increase in the mean score from the 2016-2017 assessment year. Based on the analysis of the results, the plan for the 2017-2018 assessment year is for faculty to revise the above stated debate as the policy changes.

Decision. In the 2017-2018 assessment year, the NSU mean score was 5.61, which did not meet the expected outcome of meeting the Carnegie mean score of 5.67. However, the margin of missing the expected outcome was narrowed from 0.45 to 0.06. This is an increase in the score from the 2016-2017 assessment year. Based on the analysis of the results, the plan for the 2017-2018 assessment year is for faculty to revise the above stated debate as the policy changes.

Third Question

Assessment Method: Skyfactor™ survey question:

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Question 57: “To what degree did the MSN program enhance leadership skills that emphasize ethical decision making?”

Expected Outcome: Mean score equal to or greater than the Carnegie mean score.

Findings

Question 57 Emphasize ethical decision making

AY 2016-2017: NSU Mean 6.58; Carnegie Mean 6.24 Target Met

AY 2017-2018: NSU Mean 6.43; Carnegie Mean 6.24 Target Met

Analysis. Ethical decision making is integrated throughout the MSN program curriculum, particularly in the role courses, NURG 5100 Social Forces, and clinical courses. Examples of assignments involving ethics include the ethical dilemma assignment in Social Forces, watching the movie “John Q” and discussion of all aspects of the ethical dilemmas observed, and case scenarios.

In the 2016-2017 assessment year, the NSU mean score for question 57 was 6.58 which met the expected outcome of meeting or exceeding the Carnegie score of 6.24. A score of 6.58 on a seven-point scale is evidence that the students believed that the MSN program enhanced leadership skills to emphasize ethical decision making. Since this measure was met at such a high level, the plans for the 2017-2018 assessment included continuing the current methods and assignment in teaching this content. In addition, the plans for the 2017-2018 assessment year were to: 1) include ethics in the business aspect of being an advanced practice nurse (billing, guidelines, following standards of practice - in NURG 5840), and 2) incorporate ethical dilemmas in some assignments in the clinic courses.

In the 2017-2018 assessment year, the above plan was implemented, in addition to continuing the previous practices in teaching ethics. In the 2017-2018 assessment year, the mean score for question 57 was 6.43, which met the expected outcome of meeting or exceeding the Carnegie mean score of 6.24. This mean score was a 0.15 point decrease from the 2016-2017 results. Based on the analysis of the evidence, the plan for the 2018-2019 assessment year is to consider changing some discussion forum assignments to self-graded quizzes or assignments to decrease the delay in feedback caused by the time required to grade discussion forums. The concern with this would be the loss of the robust discussions that are found with discussion forums; however, the benefit would be faster feedback to inform students of their progress in the course and in their understanding of the content.

Decision. In the 2017-2018 assessment year, the above plan was implemented, in addition to continuing the previous practices in teaching ethics. In the 2017-2018 assessment year, the mean score for question 57 was 6.43, which met the expected outcome of meeting or exceeding the Carnegie mean score of 6.24. Based on the analysis of the evidence, the plan for the 2018-2019 assessment year is to consider changing some discussion forum assignments to self-graded quizzes or assignments to decrease the delay in feedback caused by the time required to grade discussion forums. The concern with this would be the loss of the robust discussions that are found with

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discussion forums; however, the benefit would be faster feedback to inform students of their progress in the course and in their understanding of the content.

Measure 4.2 (Direct-Knowledge)

Assessment Method: NURG 5100 Social Forces assignment on Professional Ethics: the Ethical Dilemma assignment.

Expected Outcome: 80% of students will make 80% or higher on

Findings

AY 2015-2016:	98% (92/94) scored \geq 80%	Target Met
AY 2016-2017:	97.4% (77/76) scored \geq 80%	Target Met
AY 2017-2018:	94.2% (65/69) scored \geq 80%	Target Met

Analysis. The Ethical Dilemma assignment in NURG 5100 is an assignment in which students watch the movie “John Q” and analyze the many ethical situations identified in the movie. Students are required to identify and apply the utilitarian and deontological schools of thought in the movie and discuss with classmates in the discussion forum.

All aspects of this SLO (historical, cultural, economic, ethical, legal, and political) are integrated throughout the MSN Program Curriculum, particularly in the role courses and NURG 5100 Social Forces. In the AY 2015-2016, the MSN faculty voted to add an assignment from NURG 5100 Social Forces to obtain an objective measure of this SLO. The expected outcome was 80% of the students will achieve an 80% or higher on the assignment. Findings for AY 2015-2016 exceeded the expectations as 98% (92/92) students achieved a score of 80% or higher on the assignment. The target was met and exceeded expectations the following year as 97.4% (77/76) of the students achieved a score of 80% or higher for AY 2016-2017. Achievement on this measure was very high, so no major changes were required. Based on the analysis of the results, the plan for the 2017-2018 assessment year were to: 1) add a content to enhance student understanding of ethical principles and theories, 2) provide updated readings and resources, and 3) focus on the application of ethics within the current healthcare milieu including the transformation and restructuring of healthcare, healthcare financing, new healthcare policies, medical technologies, genetic discoveries, electronic medical records, telemedicine, etc.

In the 2017-2018 assessment year, the above plan was implemented. Additional lecture/content was added and updated readings and web resources were provided. In the 2017-2018 assessment year, 94.2% (65/69) of students achieved a score of 80% or better which met expected outcome of 80%. This data is evidence that these students were able to determine identify ethical dilemmas and determine ethical solutions to healthcare problems. However, a decrease in the average scores was noted by faculty. Based on the analysis of the results, the plan for the 2018-2019 assessment year is to: 1) enhance understanding of the concepts by hosting a face to face viewing of the

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movie “John Q,” followed by a live discussion on ethics using the multiple ethical situations presented in the movie, 2) continue to incorporate the APN ethical competency into the role and clinical courses in the MSN Program, 3) provide more opportunities for the application of the ethical competency within the MSN Program, and 4) consider replacing or adding an assessment method that encompasses the historical, cultural, economic, legal, and political influences on nursing and health care delivery.

Decision. In the 2017-2018 assessment year, 94.2% (65/69) of students achieved a score of 80% or better which met expected outcome of 80%. This data is evidence that these students were able to determine identify ethical dilemmas and determine ethical solutions to healthcare problems. Based on the analysis of the results, the plan for the 2018-2019 assessment year is to: 1) enhance understanding of the concepts by hosting a face to face viewing of the movie “John Q,” followed by a live discussion on ethics using the multiple ethical situations presented in the movie, 2) continue to incorporate the APN ethical competency into the role and clinical courses in the MSN Program, 3) provide more opportunities for the application of the ethical competency within the MSN Program, and 4) consider replacing or adding an assessment method that encompasses the historical, cultural, economic, legal, and political influences on nursing and health care delivery.

Measure 4.3 (Indirect-Knowledge)

Assessment Method: Alumni Survey: Question 5d asks alumni to rate their satisfaction with how well the MSN program prepared them to analyze the effect of historical, cultural, economic, ethical, legal and political influence on nursing and healthcare delivery. The choices include not satisfied, somewhat satisfied, satisfied, and very satisfied.

Expected Outcome: 80% of alumni will select “satisfied” or “very satisfied”

Findings

AY 2016: 83% were satisfied or very satisfied (N=23) Target Met

AY 2017: 100% were satisfied or very satisfied (N=11) Target Met

Analysis. Methods for teaching these concepts and the courses in which they are taught are in the information found in SLO 4, Measures 4.1 to 4.2. In the 2016-2017 assessment year 66 surveys were distributed to one-year alumni (graduates for 2015-2016), with 23 respondents (35% response rate). Of those 23 respondents, 83% were satisfied or very satisfied that their graduate education prepared them to “analyze the effect of historical, cultural, economic, ethical, legal and political influence on nursing and healthcare delivery.” Based on the results, the plans for the 2017-2018 assessment year were to: 1) revise the course NURG 5840; 2) come up with alternatives to the formal business plan in NURG 5840; 3) let students choose their group partners (NURG 5840); 4) consider developing recorded content to explain each section or difficult

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areas, quizzes, WebEx presentations, or other active learning techniques; 5) include ethics in the business aspect of being an advanced practice nurse (billing, guidelines, following standards of practice in NURG 5840); and 6) focus on the application of ethics within the current healthcare milieu including the transformation and restructuring of healthcare, healthcare financing, new healthcare policies, medical technologies, genetic discoveries, electronic medical records, telemedicine, etc.

In the 2017-2018 assessment year, 61 surveys were distributed to one-year alumni (graduates from 2016-2015) with 11 respondents (18% response rate). Of those 11 respondents, 4 were satisfied and 7 were very satisfied that their graduate education prepared them to “analyze the effect of historical, cultural, economic, ethical, legal and political influence on nursing and healthcare delivery.” These results mean that 100% of one-year alumni responding to the survey believed that the MSN program prepared them to analyze the effect of historical, cultural, economic, ethical, legal and political influence on nursing and healthcare delivery. This measure was met for both assessment years, with a higher margin for the 2017-2018 year. Based on the analysis of the results, the plans for the 2018-2019 assessment year are to: 1) reconsider the business plan assignment in NURG 5840, 2) consider adding more content related to credentialing, insurance, and licensure (NURG 5840), and 3) continue the presentation by the LSBN (NURG 5840), and 4) add a resume as an assignment (NURG 5840), and 5) change some discussion forum assignments to self-graded quizzes or assignments to decrease the delay in feedback caused by the time required to grade discussion forums.

Decision. Over the past two assessment years, MSN graduates have expressed that they felt the MSN curriculum prepared them to analyze the effect of historical, cultural, economic, ethical, legal, and political influence on nursing by the end of the first year after graduation. The MSN faculty will continue to make improvements to the MSN program. Based on the analysis of the results, the plan for the 2018-2019 assessment year is to: 1) reconsider the business plan assignment in NURG 5840, 2) consider adding more content related to credentialing, insurance, and licensure (NURG 5840), and 3) continue the presentation by the LSBN (NURG 5840), and 4) add a resume as an assignment (NURG 5840), and 5) change some discussion forum assignments to self-graded quizzes or assignments to decrease the delay in feedback caused by the time required to grade discussion forums.

The MSN PCC feels one-year alumni feedback is important because the graduates have been able to work in the communities and have a better understanding of the knowledge and skills needed during their education to prepare them as competent advanced practice nurses.

SLO 5. Manage resources within a health care delivery system through collaboration with other health care providers, community, and clients.

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Measure 5.1 (Indirect-Knowledge/Attitude)

Measure 5.1 is composed of three Skyfactor questions. Data regarding each question will be presented separately. Analysis of the three questions will be addressed as one item as all questions are closely related.

Assessment Method: Skyfactor™ questions –

Question 128: “To what degree did your clinical and didactic courses prepare you in the following content areas: Interdisciplinary Team Concepts?”

Question 77: “As a member and leader of interprofessional teams, to what degree did your MSN program enhance your ability to manage and coordinate care by collaborating with team members?”

Question 78: “As a member and leader of interprofessional teams, to what degree did your MSN program enhance your ability to manage and coordinate care by consulting other health professionals?”

Expected Outcome: Mean score equal to or greater than the Carnegie mean score.

Findings

Question 128 – Interdisciplinary Team Concepts

AY 2016-2017: NSU Mean – 5.90; Carnegie Mean Score – 5.71 Target Met

AY 2017-2018: NSU Mean – 5.71; Carnegie Mean Score – 5.69 Target Met

Question 77 – Manage and coordinate care by collaborating with team members

AY 2016-2017: NSU Mean – 6.31; Carnegie Mean Score – 6.13 Target Met

AY 2017-2018: NSU Mean – 6.16; Carnegie Mean Score – 6.12 Target Met

Question 78 – Consulting with other health professionals

AY 2016-2017: NSU Mean – 6.25; Carnegie Mean Score – 6.10 Target Met

AY 2017-2018: NSU Mean – 6.10; Carnegie Mean Score – 6.09 Target Met

Trended

	2015-2016	2016-2017	2017-2018
		N=55	N=69
Skyfactor™	Q128 Interdisc. Team concepts	Q128 Interdisc. Team concepts	Q128 Interdisc. Team concepts
NSU	6.04	5.90	5.71
Carnegie	5.47	5.71	5.69
Skyfactor™	Q77 Collaboration with team	Q77 Collaboration with team	Q77 Collaboration with team
NSU	5.94	6.31	6.16
Carnegie	6.01	6.13	6.12
Skyfactor™	Q78	Q78	Q78

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	Consulting other profess.	Consulting other profess	Consulting other profess
NSU	6.08	6.25	6.10
Carnegie	5.98	6.10	6.09

Analysis. The three questions in this measure address the related concepts of interprofessional teams, collaboration, and consultation. This content is taught and/or reinforced in all MSN clinical and role courses. Interdisciplinary patient care assignments included discussion boards, and the synthesis and demonstration of these concepts in clinical practice. The required text for the APRN role courses is Hamric and Hanson's Advanced Practice Nursing 6th Ed. The text is used throughout these courses for learning/enhancement of the key concepts related to interprofessional collaboration.

In the 2016-2017 assessment year, 55 students responded to the Skyfactor survey. The NSU mean score for question 128 was 5.9, which met the expected outcome of the Carnegie mean score of 5.71. This result was a slight decrease from the 2015-20106 mean score of 6.04. The NSU mean score for question 77 was 6.31, which met the expected outcome of the Carnegie mean score of 6.13. This mean was an increase from the 2015-2016 mean score of 5.94. The NSU mean score for question 78 was 6.25, which met the expected outcome of the Carnegie mean score of 6.1. These three questions met and exceeded the Carnegie mean scores by 0.15-0.19 points, which is evidence that students believed that the MSN program prepared them to manage and coordinate care by collaborating with interdisciplinary teams. The MSN faculty decided to enhance student learning for the 2017-2018 assessment year by revise assignments in the role courses, focusing on the core competencies of collaborative practice as defined by Interprofessional Education Collaborative (IPEC) and American Association of Colleges of Nursing (AACN).

In the 2017-2018 assessment year, case studies and examples were provided for students that not only demonstrated interprofessional collaboration but also added the skilled communication and unique contributions of the APN in providing patient-centered care. Students working in faculty-led interdisciplinary clinics at the Martin Luther King Health Center observed and participated in interdisciplinary care. In the 2017-2018 assessment year, there were 69 respondents. The NSU mean for question 128 was 5.71 which met the expected outcome of meeting the Carnegie mean score of 5.69. Though the outcome was met, this result was again a decrease in this mean for a two-year downward trend. This was unexpected as students had experienced more interdisciplinary information and practice than previous years. However, the Skyfactor survey is taken by graduating students and the students experiencing most of the interdisciplinary collaboration will not be graduating until the next year. Hence, the 2017 results would not show the benefits of the actions taken in 2017. This would be true for all three questions. The NSU mean score for question 77 was 6.16 which met the expected outcome of the Carnegie mean score of 6.12. The NSU mean score for question 78 was 6.1 which met the expected outcome of meeting the Carnegie mean score of 6.09. All three questions had a decrease in the mean score as compared to the last assessment year. In planning for 2018-2019, no new changes were made to the

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role courses as they had been revised in 2017-2018. The plan for the 2018-2019 assessment year is to revise some of the clinical courses to include a monthly WebEx session to enhance student learning through student-led discussions on selected case studies which promote the use of core competencies and interprofessional collaboration.

Decision. The NSU mean for question 128 was 5.71 which met the expected outcome of meeting the Carnegie mean score of 5.69. The NSU mean score for question 77 was 6.16 which met the expected outcome of the Carnegie mean score of 6.12. The NSU mean score for question 78 was 6.1 which met the expected outcome of meeting the Carnegie mean score of 6.09. All three questions had a decrease in the mean score as compared to the last assessment year. This was unexpected as students had experienced more interdisciplinary information and practice than previous years. However, the Skyfactor survey is taken by graduating students and the students experiencing most of the interdisciplinary collaboration will not be graduating until the next year. Hence, the 2017 results would not show the benefits of the actions taken in 2017. This would be true for all three questions. Based on the analysis of the evidence, the plan for the 2018-2019 assessment year is to revise some of the clinical courses to include a monthly WebEx session to enhance student learning through student-led discussions on selected case studies which promote the use of core competencies and interprofessional collaboration.

Measure 5.2 (Direct-Knowledge/Skill)

Assessment Method: NURG 5830 Role of the Nurse Practitioner in Practice - assignment on interprofessional collaboration.

Expected Outcome: 80% of students will receive 80% or higher

Findings

AY 2016: 96% (74/77) achieved an 80% or higher	Target met
AY 2017: 100% (50/50) achieved an 80% or higher	Target met

Analysis. In the 2016-2017 assessment year, the MSN PCC voted to add a newly developed assignment from NURG 5830 Role of the Nurse Practitioner in Practice to objectively measure this SLO. The assignment focused on the core competencies of collaborative practice as defined by Interprofessional Education Collaborative (IPEC) and American Association of Colleges of Nursing (AACN). The expected outcome was 80% of students would achieve an 80% or higher on the 50- point assignment on interprofessional collaboration.

In the 2016-2017 assessment year, 96% (74/77) of students achieved a score of 80% or better, which met and exceeded the expected outcome of 80%. The plan to enhance student learning for 2017-2018 was to revise the modules on interprofessional

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collaboration to incorporate the use of effective communication strategies to enhance collaboration.

In the 2017-2018 assessment year, the above plan was implemented by providing case studies and examples that not only demonstrated interprofessional collaboration, but also added the skilled communication and unique contributions of the APN in providing patient-centered care. This proved to be effective as the expected outcome for the 2017-2018 assessment year was higher than the previous year and reached 100%. All students (50/50) achieved a score of 80% or higher on the assignment. Overall, the evidence shows a 96-100% student achievement for this SLO in the past two assessment years, which is evidence that the students have learned and can demonstrate the ability to utilize effective communication strategies to develop, participate, and lead interprofessional teams and partnerships with patients, families, communities, and other healthcare providers and team members. Based on the analysis of the results, the plan for the 2018-2019 assessment year is for faculty to: 1) keep abreast of updates and trends in interprofessional collaborative practice and education in advanced practice nursing, 2) continue to incorporate the APN competencies of collaboration and consultation in the role and clinical courses, 3) continue to provide current examples, lectures, resources, materials, etc to assure student engagement and comprehension of the collaborative competency, and 4) consider the integration of projects that challenge students to apply and extend these learned interprofessional collaborative competencies that enable them to manage healthcare resources in improving the health of patients and communities.

Decision. In the 2017-2018 assessment year, 100% of students achieved a score of 80% or better on the assignment on interprofessional collaboration. Based on the analysis of the results, the plan for the 2018-2019 assessment year is for faculty to: 1) keep abreast of updates and trends in interprofessional collaborative practice and education in advanced practice nursing, 2) continue to incorporate the APN competencies of collaboration and consultation in the role and clinical courses, 3) continue to provide current examples, lectures, resources, materials, etc to assure student engagement and comprehension of the collaborative competency, and 4) consider the integration of projects that challenge students to apply and extend these learned interprofessional collaborative competencies that enable them to manage healthcare resources in improving the health of patients and communities.

Measure 5.3 (Indirect-Knowledge)

Assessment Method: Alumni Survey. Surveys are sent to the one-year alumni. Question 5e asks alumni to rate their satisfaction with how well the MSN program prepared them to manage resources within a healthcare delivery system through collaboration with other healthcare providers, community, and clients.

Expected Outcome: 80% of alumni select satisfied or very satisfied

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Findings

AY 2016-2017: NSU Mean 87% Expected Outcome: 80% Target Met.

AY 2017-2018: NSU Mean 100% Expected Outcome: 80% Target Met

Analysis. The MSN program prepares graduates to manage resources within a healthcare delivery system through collaboration with other healthcare providers, the community, and clients in all clinical and role courses. Collaborating within the healthcare delivery system is taught through patient care assignments included discussion boards, and the synthesis and demonstration of these concepts in clinical practice. In the 2016-2017 assessment year, 87% of the respondents to the alumni survey selected “satisfied” or “very satisfied” to the above question indicating that 87% were satisfied that the MSN program “prepared them to manage resources within a healthcare delivery system through collaboration with other healthcare providers, community, and clients.” Though 87% did meet the expected outcomes, the plan to enhance student learning for the 2017-2018 assessment year was to revise assignments focused on the core competencies of collaborative practice as defined by Interprofessional Education Collaborative (IPEC) and American Association of Colleges of Nursing (AACN).

In the 2017-2018 assessment year, the above plan was implemented by developing case studies and examples which were provided to students. These resources and assignments not only demonstrated interprofessional collaboration but also added the skilled communication and unique contributions of the APN in providing patient-centered care. Students working in faculty-led interdisciplinary clinics at the Martin Luther King Health Center observed and participated in interdisciplinary care. Other examples of student learning incorporated into clinical nursing courses included case work, counseling resources, and community resources. Students selected a family within their community with which to work. Interventions included providing assessment of problems, formulation of goals and interventions and creating a plan of care. The plan required the student to identify community resources and interdisciplinary providers to help the family reach their goals.

In the 2017-2018 assessment year, 100% of the respondents to the alumni survey selected “satisfied” or “very satisfied” to the above question indicating that 100% were satisfied that the MSN program “prepared them to manage resources within a healthcare delivery system through collaboration with other healthcare providers, community, and clients.” As the results for this year were 100%, the plan for the 2018-2019 assessment year includes the continuation of the interventions from the previous year. Based on the analysis of the evidence, the plan for the 2018-2019 assessment year is to revise some of the clinical courses to include a monthly WebEx session to enhance student learning through student-led discussions, utilizing case studies which allow the use of core competencies, collaboration, identification of community resources, and interdisciplinary relationships. In addition, faculty will continue to: 1) incorporate the APN competencies of collaboration and consultation in the role and

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clinical courses, 2) provide current examples, lectures, resources, materials, etc to assure student comprehension of the collaborative competency, 3) engage students via WebEx's and in faculty-led interdisciplinary clinics to facilitate learning about health systems, and 4) consider the integration of projects that challenge students to apply and extend these learned interprofessional collaborative competencies that enable them to manage healthcare resources in improving the health of patients and communities.

Decision. In the 2017-2018 assessment year, 100% of the respondents to the alumni survey selected "satisfied" or "very satisfied" to the above question indicating that 100% were satisfied that the MSN program "prepared them to manage resources within a healthcare delivery system through collaboration with other healthcare providers, community, and clients." Based on the analysis of the evidence, the plan for the 2018-2019 assessment year is to revise some of the clinical courses to include a monthly WebEx session to enhance student learning through student-led discussions, utilizing case studies which allow the use of core competencies, collaboration, identification of community resources, and interdisciplinary relationships. In addition, faculty will continue to: 1) incorporate the APN competencies of collaboration and consultation in the role and clinical courses, 2) provide current examples, lectures, resources, materials, etc to assure student comprehension of the collaborative competency, 3) engage students via WebEx's and in faculty-led interdisciplinary clinics to facilitate learning about health systems, and 4) consider the integration of projects that challenge students to apply and extend these learned interprofessional collaborative competencies that enable them to manage healthcare resources in improving the health of patients and communities.

Measure 5.4 (Indirect-Knowledge)

Assessment Method: Alumni Survey. Surveys are sent to the one year alumni. Question 5f asks alumni to rate their satisfaction on how well the MSN program prepared the graduate contribute to the continued professional development and improvement of self, client, community, and healthcare delivery systems.

Expected Outcome: 80% of alumni will select "satisfied" or "very satisfied"

Findings

AY 2016-2017: NSU Mean 91% Expected Outcome: 80% Target Met.

AY 2017-2018: NSU Mean 100% Expected Outcome: 80% Target Met

Analysis. Professional development and improvement of self, client, community, and healthcare delivery systems is threaded throughout the MSN curriculum. Readings and assignments on these concepts are found in the role courses, Social Forces in Nursing (NURG 5100), Family Dynamics (NURG 5810), and in clinical courses. In clinical courses, students learn to apply the Neuman Systems Model to their clinical practice.

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This provides a structure for future practice and the provision of holistic care to clients, communities, and healthcare teams and systems

In the 2016-2017 assessment year, the alumni survey was sent to 66 graduates with 23 completing the survey for a response rate of 35%. Ninety-one percent of the one-year alumni selected “satisfied” or “very satisfied,” which met the expected outcome of 80%. The plan for the 2017-2018 assessment year was to revise assignments focused on the core competencies of collaborative practice as defined by Interprofessional Education Collaborative (IPEC) and American Association of Colleges of Nursing (AACN). IPEC competencies are centered around the patient, family, community, population, and are linked to learning activities and educational strategies.

In the 2017-2018 assessment year, the above plan was implemented. Case studies and examples were provided for students that not only demonstrated interprofessional collaboration, but also added the skilled communication and unique contributions of the APN in providing patient-centered care. This was also demonstrated by students who had clinical experiences in the faculty-led interdisciplinary clinics at the Martin Luther King Health Center. Another example included case work in which students selected a family within their community with which to work. Interventions included providing assessment of problems, formulation of goals and interventions and creating a plan of care. The plan required the student to identify community resources and interdisciplinary providers to help the family reach their goals.

In the 2017-2018 assessment year, 100% of the responding alumni selected “satisfied” or “very satisfied” which met the expected outcome of 80%. This was an increase from last years alumni response (91%). Based on the analysis of the results, the plan for the 2018-2019 assessment year is to revise some of the clinical courses to include a monthly WebEx session to enhance student learning through student-led discussions, utilizing case studies which allow the use of core competencies, collaboration, identification of community resources, and interdisciplinary relationships. In addition, the faculty will continue to use case studies revised in the past year, work with students in the interdisciplinary clinics at the Martin Luther King Health Center, require the family/community resources assignment and have discussion board forums related to interdisciplinary patient care, collaboration, and lifelong learning.

Decision. In the 2017-2018 assessment year, 100% of the responding alumni selected “satisfied” or “very satisfied” which met the expected outcome of 80%. Based on the analysis of the results, the plan for the 2018-2019 assessment year is to revise some of the clinical courses to include a monthly WebEx session to enhance student learning through student-led discussions, utilizing case studies which allow the use of core competencies, collaboration, identification of community resources, and interdisciplinary relationships. In addition, the faculty will continue to use case studies revised in the past year, work with students in the interdisciplinary clinics at the Martin Luther King Health Center, require the family/community resources assignment and have discussion board forums related to interdisciplinary patient care, collaboration, and lifelong learning

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SLO 6 Contribute to the continued professional development and improvement of self, client, community and healthcare delivery systems.

Measure 6.1 (Direct-Knowledge)

Assessment Method: All MSN students complete a paper in lieu of thesis (PILT). Students are encouraged to submit the PILT for publication in a professional nursing journal or present a podium or poster presentation at a local, regional, or state conference.

Expected Outcome: 100% of students will present the PILT or submit PILT for publication.

Findings

AY 2016-2017: 100% (62/62)

Target Met

AY 2017-2018: 100% (74/74)

Target Met

Analysis. All students in the MSN program complete a PILT. Students work in groups of three to four to develop a PILT concept during NURG 5995 Research Seminar I and then implement the project during two consecutive semesters in NURG 5996 Research Seminar II. Each student group is led by a graduate faculty prepared at the doctorate level. The students' PILT projects are required to meet certain criteria outlined in the course, as well as criteria determined by the Graduate School. Presenting the PILT or submitting it for publication is felt to directly correlate with continued professional development and improvement of healthcare systems because the dissemination of research, reviews, and other scholarly work are key to improve healthcare outcomes. All students in the NURG 5996 Research Seminar II are expected to disseminate their findings prior to a grade assignment in the course.

In the 2016-2017 assessment year, 100% (N=62) of students either presented their PILT paper or submitted it for publication, meeting the expected outcome of 100%. MSN faculty discussion regarding the 2016-2017 assessment year found that most students were presenting their PILT to small cohorts such as local nurse practitioner groups or during faculty or nursing unit meetings. Although this does serve as dissemination and there is value in presentation to small groups, the faculty decided to strongly suggest that students present to larger forums, such as conferences or submit for publication for the 2017-2018 assessment year.

In the 2017-2018 assessment year, students were encouraged to present their PILT at a conference or submit the paper for publication. As a result, 100% (N=74) presented the PILT at a conference or submitted their PILT for publication. Upon analysis of this measure and looking at trends, the MSN faculty recognizes the expected outcome is consistently met. At a minimum, all PILTs are published in the NSU College of Nursing library. Although it is the goal of major professors to facilitate student groups to produce the highest quality PILT possible, not all PILTs will qualify for podium presentations or peer reviewed publication. The MSN faculty believes to fully meet this SLO, the measure needs to be reworded and more specific to genuinely reflect student's continued professional development and improvement of self, client,

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community and healthcare delivery. The measure for the 2018-2019 will be: “80% of students will present their PILT at a local, state, regional, or national conference as a poster or podium presentation.” This change in the measure will better indicate continued professional development and improvement of self, client, community, and healthcare delivery systems.

Decision. Based on the analysis of the results, 100% of students have consistently presented or submitted their PILT for publication during the 2016-2017 and 2017-2018 assessments years. Upon analysis of the measure and looking at trends, the MSN faculty realizes this measure, though consistently met, is likely being met at the lowest level of dissemination. The MSN faculty believes to fully meet this SLO, the measure needs to be reworded and more specific to genuinely reflect student’s continued professional development and improvement of self, client, community and healthcare delivery. Based on the analysis of the results, the measure for the 2018-2019 will be: “80% of students will present their PILT at a local, state, regional, or national conference as a poster or podium presentation.” This change in the measure will better indicate continued professional development and improvement of self, client, community, and healthcare delivery systems .

Comprehensive summary of key evidence of improvements based on analysis of the results.

In the 2017-2018 assessment year, the MSN program implemented many plans to enhance student learning. Changes were made based on student evaluations, data collected in the SLO measures, student feedback, faculty assessment of students, and implementation of best practices. As a result, the MSN program met all expected outcomes that had a direct measure. Eight of the indirect measures through the Skyfactor survey were met as well. While two indirect Skyfactor measures were not met, the results showed less than a 0.15-point difference between the NSU mean score and the Carnegie mean score. The certification rates for nurse practitioners for first time takers was 94.4% and all respondents to the one-year alumni survey were employed in a job for which their degree prepared them (nurse practitioner, educator, or administrator).

Some interventions, like the Skyfactor™ survey, implemented will not result in immediate improvements on SLO measures. Some measures initiated affected students that were just starting clinical and will not take the Skyfactor™ survey until they are graduating seniors. Below are measures that were implemented in the 2017-2018 assessment year that contributed to MSN student learning and success:

- Began using Shadow Health in NURG 5700 Methods of Clinical Nursing Assessment. Shadow Health is a computer based, interactive learning program that serves as a lab for practicing advanced assessment techniques, including focused history, cultural sensitivity, and empathy.
- A new section of NURG 5280 Advanced Pathophysiology was initiated, with a new instructor, and a new text which offered more online resources. This change occurred due to student evaluations of the pathophysiology course, and the University impetus to make the cost of textbooks more affordable.

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- Changed textbooks in NURG 5810 Family Dynamics from two textbooks to one less expensive textbook.
- Added Flipgrid and other video formats to increase student connectivity in online courses.
- Added “Clinical Pearls” assignments in concentration specific clinical courses to help students learn the most common conditions for specific populations.
- Had groups of students present clinical guidelines via voice over PowerPoints and post these in their specific clinical concentration courses for all students to see. These guidelines were then discussed in a synchronous online forum with interaction and discussion with clinical faculty. Students discussed clinical experiences, received encouragement from faculty, and interacted with one another. Student feedback was positive regarding these changes.
- Developed a new grading rubric for the Functional Role Comprehensive Exam that outlined expectations for students more clearly than previously.
- Revised the comprehensive exam to ask two questions to eliminate the confusion caused by offering the students a choice of three questions.
- Offered a role comprehensive review prior to the examination.
- Hired doctorally prepared adjunct faculty to augment full time faculty to serve as major professors for PILT groups. The goal was achieved for faculty to have no more than two PILT student groups
- Mentored two faculty who recently received their doctorates into the role of PILT major professor
- Statistician made a series of voice over PowerPoint statistics review presentations for NURG 5010 which students could have access to during their PILT courses.
- Incorporated graduate school requirements for PILT projects directly into the NURG 5996 course syllabus so students would have easy access to clear, concise requirements.
- Developed a voice over PowerPoint for students who chose to do the systematic review to guide them through the process.
- Increased the use of WebEx meetings to insure regular communication between faculty and students.
- Eliminated the traditional bib care assignment in NURG 5770, 5780, and 5790 and replaced the bib card assignment with voice over PowerPoint that applied research outcomes in addressing clinical practice guidelines. Had monthly WebEx sessions in the above courses to present and discuss the assignment. Faculty found the activity promoted a great deal of sharing among the students and faculty related to actual clinical experiences. While faculty guided the sessions, they could also get a sense of where each student was in terms of processing clinical information and applying evidenced based guidelines in their clinical practice.
- Updated and revised rubrics in NURG 5010 to facilitate clarity of expectations
- In NURG 5010: 1) included the Poster presentation as part of the Mini-Proposal assignment criteria rather than as a separate assignment to avoid double jeopardy in regards to grading, 2) developed a self-assessment exam worth 100

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points given early in the course to help students understand the need to study the reading materials and assesses the student's areas of weakness, 3) provided students with a form to indicate if they wanted their graded assignments back via mail (providing a SASE), for pick up, or not at all, and 4) an optional final exam of 50 items was developed.

- In NURG 5840: 1) revised the formal business plan, 2) allowed students to choose their group partners, and 3) developed recorded content to explain difficult areas, offered quizzes, WebEx presentations, or other active learning techniques.
- In NURG 5100: 1) revised modules related to policy development and interventions at the systems level, 2) added content to enhance student understanding of ethical principles and theories, 3) provided updated readings and resources, and 4) focused on the application of ethics within the current healthcare milieu including the transformation and restructuring of healthcare, healthcare financing, new healthcare policies, medical technologies, genetic discoveries, electronic medical records, telemedicine, etc.
- Related to interprofessional collaboration: 1) case studies and examples were provided for students that not only demonstrated interprofessional collaboration but also added the skilled communication and unique contributions of the APN in providing patient-centered care. Students performed clinical learning in faculty-led interdisciplinary clinics at the Martin Luther King Health Center where they observed and participated in interdisciplinary care
- Provided case studies and examples that demonstrated interprofessional collaboration and added the skilled communication and unique contributions of the APN in providing patient-centered care.
- Other examples of student learning incorporated into clinical nursing courses included case work, counseling resources, and community resources. Students selected a family within their community with which to work. Interventions included assessment of problems, formulation of goals and interventions and creating a plan of care. The plan required the student to identify community resources and interdisciplinary providers to help the family reach their goals.

Plan of action moving forward.

Many changes will be made during the 2018-2019 assessment year based on the analysis of the 2017-2018 results. This year will be a time of in-depth review of the Student Learning Outcomes and measures to ensure a more concise and effective use of measures. Below are plans for the 2018-2019 assessment year:

- Faculty will contact preceptors on a weekly basis to ensure regular communication between faculty and preceptors regarding students and their clinical experiences and the delivery of appropriate, culturally sensitive care.
- The primary text for the Primary Care Pediatric Nurse Practitioner (PCPNP) track will change to *Burn's Primary Care Pediatrics*, which is written by nurse

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practitioners for nurse practitioners, rather than continue with the current primary text, which was written by physicians. It is anticipated this new primary text will include more nursing theory and science, and student exam questions will be more congruent with the national certification exam.

- Continue with the synchronous online forum presentations and discussion of clinical guidelines with students, but decrease the number of participants for each forum to approximately 10 to 15 students with two clinical faculty. This will allow more interaction with students and faculty and ensure all students have a chance to participate and engage each other.
- Update NURG 5100 Social Forces to reflect the most current trends in nursing and policy due to the dynamic political climate.
- Reformat the research content in such a way that students complete mini research proposals to better comprehend the rigor of research and the necessity of article reviews to determine the best evidence.
- Provide current examples and online resources for students to ensure a variety of spiritual and cultural modalities that can be used when providing culturally sensitive care to clients, families, and communities.
- Provide interactive lectures to ensure engagement in cultural and spiritual aspects of care for different populations.
- Further emphasis will be made on the significance of addressing the spiritual/cultural variable in the application of Neuman's framework to effectively care for all clients.
- Incorporate changes in the local, state, and national environments into courses in the program that potentially impact advanced practice nursing.
- Utilize appropriate and consistent nomenclature such as "change-agent" across courses and across the program to ensure students recognize these concepts in practice.
- Limit the number of PILT groups per faculty to insure students get the needed attention to successfully progress to completion of the projects.
- Restructure NURG 5995 Research Seminar I to provide the students with a solid foundation to begin their projects immediately upon the start of the Fall semester
- Incorporate more voice over PowerPoints to guide students while working on their PILTs.
- Contact preceptors weekly throughout the semester to ensure regular communication and assessment of student learning.
- Assign a seasoned researcher to revise and teach NURB 5010 to enhance student learning experiences.
- Include synchronous WebEx sessions in NURG 5995 so students can interact and learn from one another.
- Have consistent faculty teaching NURG 5010 Research in Nursing and NURG 5995 Research Seminar to help students implement learning from NURG 5995 and NURG 5996.
- Make the final exam in NURG 5995 a graded exam that is required to assess student learning.
- Offer students an alternative to the business plan assignment in NURG 5840.

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- Add more content related to credentialing, insurance, and licensure in NURG 5840 to prepare students for practice.
- Add a formal resume assignment in NURG 5840.
- Provide more opportunities for the application of the ethical competency within the MSN Program
- Enhance understanding of ethical concepts by hosting a face to face viewing of “John Q” for students and faculty followed by a live discussion on ethics.
- Add an assessment method that encompasses the historical, cultural, economic, legal, and political influences on nursing and health care delivery.
- Revise clinical courses to include a monthly WebEx session to enhance student learning through student-led discussions using case studies which allow the use of core competencies and interprofessional collaboration.
- Keep abreast of updates and trends in interprofessional collaborative practice and education in advanced practice nursing to be sure students are learning the latest information.
- Integrate of projects that challenge students to apply and extend learned interprofessional collaborative competencies to enable them to manage healthcare resources in improving the health of patients and communities.
- Engage students via WebEx sessions and during faculty-led interdisciplinary clinics to facilitate learning about health systems.
- Revise Measure 6.1 to require students to present their PILT at a local, state, regional, or national conference as a poster or podium presentation. This change in the measure will better indicate continued professional development and improvement of self, client, community, and healthcare delivery systems.
- Review the Student Learning Outcomes and measures to ensure a more concise and effective use of measures.

MSN program will continue to:

- Use Shadow Health in teaching NURG 5700.
- Use “Clinical Pearls” assignment in population specific clinical courses.
- Use One text, Flipgrid, and other video formats in NURG 5810.
- Offer the new NURG5280 pathophysiology section, which has had very positive student reviews.
- Use the synchronous online forum presentations and discussion of clinical guidelines with students
- Address the spiritual/cultural variable in the application of Neuman’s framework to practice.
- Assure consistency among the role and clinical concentration courses within the program relative to the local, state and national factors that impact APN practice.
- Provide current examples, interactive lectures, online resources, and current materials to assure student engagement.
- Emphasize the application of state and national legal and professional standards and scope of practice relative to specialty concentrations.

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- Hire and use doctorally prepared adjunct faculty to serve on the PILT committees.
- Use WebEx sessions to help students become familiar with clinical guidelines and how they “fit” into clinical practice in a very real way.
- Use the pre-assessment exam in NURG 5995, but for purposes of student enlightenment only (no grade assigned).
- Use the presentation by the LSBN in NURG 5840.
- Incorporate the APN ethical competency into the role and clinical courses.