



**Academic Program Review**  
**DUE DATE: November 21, 2018**

The HLC Criteria for Accreditation, specifically Core Component 4.A, require institutions to maintain a “practice of regular program review<sup>1</sup>” as one component for ensuring the quality of our educational programs and evaluating our effectiveness in achieving our stated student learning outcomes. For academic units, “Program” means an academic School.

<b>School:</b>	<b>Nursing</b>
<b>Degree Programs of the School: (indicate which, if any, hold specialized programmatic accreditation)</b>	<b>Bachelor of Science in Nursing</b> <ul style="list-style-type: none"> <li>● <b>Accredited by The Commission on Collegiate Nursing Education - (CCNE)</b></li> </ul>
<b>Academic Program Review Submission Date:</b>	
<b>Dean:</b>	<b>Dr. Ronald Hutchins</b>
<b>School Chair:</b>	<b>Dr. Kathy Berchem</b>
<b>Names of Faculty Members Completing Program Review Report:</b>	<b>Dr. Kathy Berchem &amp; Professor Kelli Verdecchia MSN</b>

**Guidelines for Completing the Academic Program Review**

Questions in Part 1 are focused at the School level, and should reflect School-level data, findings, etc.

<sup>1</sup> <https://www.hlcommission.org/Policies/criteria-and-core-components.html>

Questions in Part 2 should be completed for each distinct academic degree program in the School. In the cases where an academic degree holds specialized programmatic accreditation, Schools can cite the page(s) which address the prompt question. In all cases, attach evidence where available using the appendix cover sheet to identify how the evidence supports the relevant criteria or prompt.

## **PART 1: School-Level Review**

### **School Mission and Goals**

1. Provide the School's mission statement and explain its connection to the University mission.

Our mission at the School of Nursing (SON) is to “Graduate competent students who are prepared to safely provide compassionate nursing care utilizing theory and evidence-based practice” which aligns to the [LSSU's mission](#) “We equip our graduates with the knowledge, practical skills and inner strength to craft a life of meaningful employment, personal fulfillment, and generosity of self, all while enhancing the quality of life of the Upper Great Lakes region. We serve the regional, state, national and global communities by contributing to the growth, dissemination, and application of knowledge. LSSU nursing graduates self-report success in a wide variety of nursing roles throughout the United States and Canada. Graduates continue to excel in graduate education and nursing leadership roles as demonstrated by reports of success as faculty in higher education and leadership positions in major health care institutions.”

The SON is in alignment with our University [Vision Statement](#) “We capitalize on our unique location and mission as a regional state university to be a model for education innovation and a preferred partner for U.S. and Canadian community and tribal colleges”. The mission statement, goals, and expected program outcomes are listed on the SON [website](#) and also in the SON [Handbook](#). The SON program outcomes were developed in alignment with The Essentials of Baccalaureate Nursing Education for Professional Nursing Practice [American Association of Colleges of Nursing (AACN, 2008). Each AACN Essential is directly linked to a SON Program Outcome. These program outcomes are reviewed annually, by the SON, for congruence and continued alignment with AACN Essentials and University Outcomes. This was last reviewed on April 30th, 2018 at our biannual SON retreat.

2. List the School-level goals and explain how they support and connect to the CAFE Master Goals of the Strategic Plan.

<https://www.lssu.edu/wp-content/uploads/2018/09/2018-2023-LSSU-Strategic-Plan.pdf>

### **Culture:**

**School-level Goal: is in alignment with the Commission on Collegiate Nursing Education (CCNE) Key Element III-F: The curriculum and teaching-learning practices consider the needs and expectations of the identified community of interest.**

*We cultivate open communication, engagement, and behaviors as demonstrated by* participation in program governance by faculty and students. This documented in the minutes and attendance records of the different committees within the SON. The SON faculty created and is governed by the SON Bylaws (see Appendix I). These Bylaws provide a unified approach to the development, planning, and implementation of the nursing programs in the SON. The Bylaws are consistent with University policies, practices, and agreements in order to provide a systematic process for overall program governance.

*We cultivate continuous self-improvement through service, assessment, and accountability. This is accomplished by inclusion and engagement of students, faculty and SON staff in committee discussions and decision-making.* One student representative from the generic BSN program is elected to each SON committee and LSSU SON faculty participates in regular SON committee meetings. Students representatives are nominated by Lake State Student Nursing Association and/or SON faculty. The SON committees are comprised of the Student Affairs Committee (SAC), Curriculum, Outcomes and Learning Resources committees.

Under the oversight of the Dean, SON committee members discuss items and make program recommendations related to the mission of the SON. The Dean and Chair of the SON lead these regular meetings where recommended changes are discussed, approved and a plan for adoption is made. SAC is then responsible for updating the appropriate policies and disseminating this information to communities of interest. The Dean represents the SON and its faculty at the administrative level and with our communities of interest and leads the Nursing Advisory Council meetings to facilitate communication among the SON and our communities of interest. In attendance at these meetings are representatives from all clinical sites, and the two other nursing schools in the area. Placement needs, evaluation results, curriculum planning, and unique needs of diverse student populations are discussed with the communities of interest. The SON collaborates with the program-identified communities of interest in decision-making for the program and curriculum design; cultivating an environment of inclusion where all members treat others with dignity and respect.

The students evaluate each clinical site every semester in order to ascertain whether best learning practices and both student and organizational needs are being met. The results of these evaluations are shared at the Advisory Council meetings hosted once a year by the SON at LSSU. The course coordinators in the SON maintain a working relationship with their specific communities of interest to assure that their needs and expectations are met. This may include specific orientation needs, accreditation requirements, training for specific skills, and overall technology requirements.

**School-level Goal: is in alignment with the Commission on Collegiate Nursing Education (CCNE) Key Element II-F: The parent institution and program provide and support an environment that encourages faculty teaching, scholarship, service, and practice in keeping with the mission, goals, and expected faculty outcomes.**

*We cultivate continuous self-improvement through service, assessment, and accountability.* Faculty members maintain a strong record of scholarship with a focus on linear and end-based models of learning that focus on process-based and experiential student learning. LSSU works from the [Boyer Model](#) that includes discovery, integration, application, and teaching as forms of scholarship. LSSU provides for faculty development and scholarship support through internal resources such as the Center for Engaged Teaching and Learning (CETAL). Professional Development Funds (PDF's) as outlined in the current faculty association collective bargaining agreement are allocated to all SON faculty members to enhance the scholarship of teaching and evidenced based nursing practice.

Resources for release time to participate in professional development activities are provided from the current faculty. The SON, and University at large, to enhance faculty educational endeavors at the doctoral level for maximum professional development and ultimate student benefit, also encourages sabbatical leaves. Faculty are also encouraged to sit on Community/Facility Advisory Boards to strengthen student learning outcomes as ambassadors to LSSU which can ultimately benefit clinical placement avenues and foster a stronger community based commitment to LSSU. Service is an expected faculty outcome and is emphasized in the evaluation process as defined by the Faculty Association Collective Agreement.

The SON supports faculty development through such activities as: active participation on University wide committees, workshops, encouraging conference attendance, achieving advanced certifications, and support for doctorate achievement. It is also expected that faculty submit plans for continued professional development as part of their annual review process.

### **Academics:**

School-level Goal: is in alignment with the Commission on Collegiate Nursing Education (CCNE) Key Element III-A: **The curriculum is developed, implemented, and revised to reflect clear statements of expected student outcomes that are congruent with the program's mission and goals, and with the roles for which the program is preparing its graduates.**

*We will cultivate continuous academic and co-curricular improvement to provide relevant programs and support services.* The SON faculty is committed to a developing culture of review, assessment and evaluation with a process in place for doing so on an ongoing basis. The curriculum focuses on an integration of evidenced-based practice and rigorous curricula. The School of Nursing Curriculum committee engages in an annual curriculum review of our BSN Program Objectives by Level to monitor the threading of

program outcomes throughout our curriculum. Student outcomes are linked to both course and program objective in alignment with program assessment measures that are tracked and trended within a computer software program called Nuventive Improve that allows for a targeted review of the curricula.

For example, the SON Curriculum Committee engaged in discussion regarding low Pharmacology scores on the NCLEX-RN exam. The threading of Pharmacology concepts was evaluated within all courses in the BSN Curriculum by the SON faculty. An identified area of opportunity to support student learning in this area was to integrate an elective Pathopharmacology course for students who had already taken the Pathophysiology and Pharmacology courses. This course was created in the Summer of 2018 for implementation in Spring 2019 and will be case-study, application-based learning. This course was approved through the LSSU Curriculum Committee in October 2018. The SON will track Pharmacology scores on the NCLEX-RN exam in order to evaluate any impact on student learning from this new Pathopharmacology course on. In addition to this, a program called SafeMedicate will also be integrated throughout all Nursing clinical courses as of Fall 2018.

In both the generic BSN and post BSN-completion programs there are supportive environments that provide students with learning opportunities that incorporate a variety of teaching and learning strategies in alignment with both program and course outcomes. For the generic BSN program, didactic courses teach pathophysiology, pharmacology, nursing concepts and research through classroom lecture. Activities may include classroom discussions, group work, service learning, and student presentations that allow the student to apply evidenced-based concepts to nursing practice. Students receive additional learning opportunities for courses with clinical components in the nursing campus lab, on site clinical rotations and at the simulation center that allow students to apply knowledge learned in the classroom setting in a real life environment.

***We will cultivate programs that support individual growth within the curricular, co-curricular, and non-curricular realms culminating in degree completion and endorsement of lifelong learning.*** Online course work in both concentrations may include simple word documentation, threaded discussions, evidenced-based practice websites and streaming videos. Students in the Post RN BSN completion program experience a combination of didactic learning through distance education in the form of face-to-face lecture at regional sites, seminar, and an online format via the Learning Management System (Moodle).

***We will cultivate student educational experiences that add value and allow students to reach their full potential.*** Simulation continues to be integrated into the Nursing curriculum, with expanded opportunities for simulation learning increasing with the construction of the new WMH Superior Simulation Center on campus Fall 2018. Virtual world simulation software is also being implemented: VSIM, and an Electronic Health Record (DocuCare) throughout the program.

Planned clinical experiences in inpatient and community settings provide students the opportunity to develop professional competencies in practice settings aligned to baccalaureate preparation. Clinical practice experiences are provided for all students, including those completing the program through distance education. The local hospital provides a variety of clinical experiences for LSSU students exclusively, as no other nursing program utilizes the facility. Students also utilize clinical facilities in Canada, providing a unique opportunity to compare healthcare systems internationally. Our community of interest (potential employers and clinical placement partners), state that the curriculum and its clinical practice experiences ensure students are competent to enter nursing practice as baccalaureate-prepared nurses.

In addition, the SON maintains an ongoing relationship with the local Tribal Health Center, which presents unusual opportunities for enhanced cultural experiences for LSSU nursing students. The degree completion students complete a clinical community health experience under the supervision of a community health faculty member.

### **Finance:**

**School-level Goal: is in alignment with the Commission on Collegiate Nursing Education (CCNE) Key Element II-A: Fiscal and physical resources are sufficient to enable the program to fulfill its mission, goals, and expected outcomes. Adequacy of resources is reviewed periodically and resources are modified as needed.**

We will cultivate a culture of continuous improvement through accountability and sustainability practices, regular financial reviews, and periodic reporting. The SON confirmed that the SON's financial resources are adequate to enable the achievement of the program's mission, goals, and expected outcomes. The SON's revenue sources include tuition, fees, state funding, and indirect cost recovery. Additionally, restricted discretionary funds are used to support specific projects and faculty development.

**We will cultivate viable entrepreneurial efforts to efficiently support evolving institutional needs, and to support new financially-viable, mission-driven opportunities.** The SON observations of the facilities confirmed the physical space is sufficient and configured to enable the program to achieve its mission, goals, and expected outcomes. The SON occupies 4,980 square feet that include three labs with 17 beds, storage and office space, a computer laboratory, multi-media classrooms, and other resources. Through a partnership with a member of our Community of Interest (War Memorial Hospital), WMH Superior Simulation Center was constructed on-campus and opened October 2018. This will expand learning spaces for LSSU students and provide opportunities for interprofessional collaborations.

**We will cultivate data-informed budgetary processes that are open, transparent, and in alignment with institutional priorities** Laboratories are staffed with a full RN

Lab Coordinator and nursing students as part of work study. Equipment and supplies for computing, the laboratory, and teaching-learning are sufficient to achieve the mission, goals, and expected outcomes. On an annual basis, the Learning Resources Committee, as part of the SON, provides a survey as an opportunity for feedback from our community of interest (nursing students). The survey (n=32) completed February 2018 demonstrated that 78.13% of respondents chose either agree or strongly agree to the question “There is enough open lab hours for me to practice”, 15.63% chose neutral or no opinion. For the question “The nursing lab has enough equipment for me to learn the skills required within the nursing program”, 71.88% chose agree or strongly agree, 15.63% were neutral. These results will be shared with faculty by the Learning Resources Committee in Fall 2018 for discussion.

### **Enrollment:**

#### **We will cultivate continuous improvement of the student experience through data-informed decision making and student input.**

School-level Goal: is in alignment with the Commission on Collegiate Nursing Education (CCNE) Standard II: The parent institution demonstrates ongoing commitment to and support for the nursing program. The institution makes resources available to enable the program to achieve its mission, goals, and expected outcomes. The faculty, as a resource of the program, enable the achievement of the mission, goals, and expected program outcomes.

#### **We will cultivate, maintain, and support an enrollment management strategic plan that will center on programs and activities that reach enrollment goals.**

The Lake Superior State School of Nursing (SON) presently resides under the umbrella of the College of Nursing and Health Sciences effective August 1, 2011. Currently, the SON provides an accredited Bachelor of Science in Nursing (BSN) – pre-licensure track and an RN to BSN completion track. Total nursing student enrollment for 2017-2018 is 130 students in the four-year BSN pre-licensure track and 5 part-time students in the RN to BSN completion track for a total of 135 nursing students. The average age of our nursing students is 24; median age of all students is 23 with only about 10% of males enrolled within the program.

The SON Academic Assistant also contributes as a team member in the enrollment management strategic plan. She works with Admissions to set up meetings and tours for prospective nursing students with nursing faculty. She responds to emails, phone calls and walk-ins with questions about the program, providing information through conversation that encourages success, motivation and optimism. She also works with Admissions to assist transfer students with their transfer credit evaluations, to review previous coursework and recommend a course of study. In addition to this, her role also

includes mail and/or e-mail recruiting/marketing folders with pertinent information about the program to prospective students, and assisting with the BSN application process by providing directions, answering questions and offering information. Lastly, she prepares materials for recruiting events and orientations such as recruiting /marketing folders, flyers and handouts, display board and specific information regarding test scores and transfer credit evaluations. Her contribution to the enrollment management strategic plan supports SON faculty in implementing a systematic and integrated approach to meeting student enrollment.

**School-level Goal:**

Strategic Plan 3.1 Retention Rates:

The SONHS will increase the number of qualified pre-nursing students admitted to the BSN program, after completion of pre-nursing courses, from 24 to 28 students during both the fall and spring admissions cycles. Effective date: 2015-2016 academic year. (See Appendix II)

The SON faculty discusses enrollment and recruitment on a regular basis. The following is an excerpt from a set of SON meeting minutes:

*R. Hutchins (Dean) stated that a presidential directive has come down to the Dean's to collectively trim 2.8 million from the proposed budget for the upcoming fiscal year. School of Nursing is going to find it hard to actually trim much, but could we, collectively, think of ways to bring in revenue.*

- o BSN Completion-begin marketing this as an online program*
- o Offer another clinical group; bring the number of admissions to a cohort to 28?*
- o Offer courses in a condensed term?*

*ACTION: K. Verdecchia proposed motion to form an ad-hoc committee to address and formulate the condensed term. Seconded by L. Oliver. Motion carried. Committee members to be: L. Oliver, J. Gerrie, C. Butcher.*

*4-29-2015 Spring SON Retreat*

*ACTION: Motion by J. Gerrie to increase admission to cohorts to 28 and assess the change in a year. Seconded by L. Oliver. No further discussion. Motion carried/all in favor.*

**School-level Goal: is in alignment with the Commission on Collegiate Nursing Education (CCNE) Key Element II-B. Academic support services are sufficient to ensure quality and are evaluated on a regular basis to meet program and student needs.**



We cultivate collaborations with external and internal groups to promote student development and success. Instructional aides, technology, software and hardware and technical support are available campus-wide in sufficient quantity to be consistent with meeting the BSN program objectives and teaching methods. Resources are also available to assist students or faculty with technology via the Audio-Visual Department and Information Technology Department. Learning resources are evaluated and recommendations are brought by the SON Learning Resources Committee to the SON faculty for discussion and approval.

Supplemental learning program resources include Lippincott's online support products and Elsevier Evolve *Clinical Excursions*<sup>™</sup>. Lippincott's NCLEX-RN PassPoint<sup>™</sup> | Powered by PrepU<sup>™</sup> is used by nursing students and provides a multifaceted learning resource uniquely designed to facilitate achievement of learning outcomes. PassPoint<sup>™</sup> helps faculty gauge each student's comfort with computerized adaptive testing and progress in synthesizing curricular learning. Detailed summary reports track ongoing performance, which enables users to evaluate weaknesses and strengths and prioritize areas for deeper study. Lippincott's DocuCare<sup>™</sup> electronic medical record system is currently being integrated into all nursing clinical courses and vSim<sup>™</sup> integration was begun for Adult 2 students in Fall 14, with full integration into nursing clinical courses since Fall 2016.

LSSU Nursing students and faculty have access to hard copy and online journals, reference books, and textbooks in all nursing-related topics and online search databases for articles at [Kenneth J. Shouldice Library](#). The students also have access to up-to-date standards and practice references such as: The Canadian Compendium of Standards for Nursing and The American Nurses Association (ANA) Practice Books. The Circulation Desk at the library is the service point for a number of activities, including checking out library materials and class reserves, picking up Interlibrary Loan orders, and obtaining printouts from printing requests sent from library computers. Communities of interest and other constituencies are able to access nursing educational materials from the library as well. The library offers an Interlibrary Loan (ILL) service for learners who need resources not in the library collection; these materials are borrowed from other learning institutions.

The Technical Services Department offers a large variety of services including equipment rentals, equipment reservations for faculty and staff members, Help Desk, video recording and editing, technological support for faculty and staff, ITV classes, video conferencing, audio editing, converting videos, technical support for Moodle, support for faculty, staff and students with AV equipment in the classroom, sale of scantrons, headphones, jump drives, and other small electronics, color copies, scanning, support for evaluation surveys, library room reservations, lamination and checkout services for

education videos. The video conferencing or interactive television system allows the University to provide instruction, seminars, conferences, meetings, and many other interactive options to residents of the Upper Peninsula and assisting with BSN completion in the Escanaba area.

Full time tenure track faculty members are assigned advisees at the end of their second year of employment. The university also provides both face-to-face and online resources for advising. The School of Nursing is in alignment with [University Advising policies](#) as demonstrated in the Nursing Advising Handbook. The Faculty Advisor and student advisee meet on a routine basis at least once per semester.

**We will cultivate continuous improvement of the student experience through data-informed decision making and student input. Please refer to Question 2: CAFE (Finance) section regarding results of Student survey on Learning Spaces**

*Explain how the School works to address each of the following questions. For each question, respond with a narrative and supporting evidence.*

**Teaching and Learning Programs Evaluation and Improvement: (CC 4.A)**

3. Explain how faculty determine program and course learning outcomes, course prerequisites, rigor of courses, expectations for student achievement, and student access to resources.

Participation in program governance by faculty and students is taking place as documented in the minutes and attendance records of the different committees. The SON faculty created and is governed by the SON Bylaws (APPENDIX I). These Bylaws provide a unified approach to the development, planning, and implementation of the nursing programs in the SON. The Bylaws are consistent with University policies, practices, and agreements in order to provide a systematic process for overall program governance.

One student representative from the generic BSN program is elected to each committee and LSSU SON faculty participates in regular SON committee meetings. Students representatives are nominated by Lake State Student Nursing Association and/or SON faculty. The SON committees are comprised of the Student Affairs Committee (SAC), Curriculum, Outcomes and Learning Resources committees. Under the oversight of the Dean, SON committee members discuss items and make program recommendations related to the mission of the SON. The Dean and Chair of the SON lead these regular meetings where recommended changes are discussed, approved and a plan for adoption is made. SAC is then responsible for updating the appropriate policies and disseminating this information to communities of interest.

The SON offers two curricular tracks to the Bachelor of Science degree in nursing which include a 4-year pre-licensure program and a 2-year post licensure program for the registered nurse. Both tracks provide students with the opportunity to acquire knowledge, values and skills necessary for the practice of professional nursing. The School of Nursing's curriculum and student outcomes are congruent with the program's mission, goals and expected student outcomes taking into account University and Professional Standards as described in The Essentials of Baccalaureate Education for Professional Nursing Practice (AACN, 2008). The curriculum for both the generic BSN and the BSN completion nursing programs are based on an eclectic interpretation of the nursing paradigm as outlined in the student handbook. The baccalaureate graduate is prepared to function as a generalist in providing care at the primary, secondary and tertiary levels within a variety of settings.

The SON Curriculum Committee is responsible for the development, implementation, evaluation and revision of BSN courses. A BSN student sits on this committee to provide student input to curricular matters. The committee's focus is to ensure that curricular outcomes for individual student learning are congruent with BSN Program outcomes. Expectations for student outcomes for each course are articulated in course syllabi and program outcomes are outlined in the Student handbook.

There are two examples of the SON faculty using assessment data to support curricular changes for the program:

1. **2014:** The BSN curriculum was revised for students being admitted starting in the spring 2014 semester. The curricular changes that were implemented to prepare students for their professional role were as follows:
  - a. NURS 434 Nursing Research was moved to semester 3 from semester 5, which allows students to concurrently apply learned concepts from MATH 207 Principles of Statistical Methods to this course.
  - b. HLTH 352 Health Issues Aging Population was eliminated from Semester 3 as required core course and has been integrated across the nursing curriculum as it allows students the opportunity to learn about the needs of the elderly population across each practice setting.
  - c. A realignment of a 3 credit elective with Semester 5, allows students the ability to choose a course of their preference to allow for student-life balance.
  
2. **2018:** With the USEM 101 now added to the first semester freshman year schedule, the SON faculty noted that a new incoming freshman would be at 18 credits. This is 1 credit above the 17 credit limit that LSSU has for the tuition slot. Also, if the student needs to take MATH 102 (many of our new freshman need at least that level math), they would be at 19 credits, severely impacting their ability to be successful in their first semester at LSSU.

The SON faculty voted to move COMM 101 out of the freshman year first semester into the Junior year, better distributing the credit load, and providing a better opportunity for student success.

The SON faculty is committed to a developing culture of review, assessment and evaluation with a process in place for doing so on an ongoing basis. The curriculum focuses on an integration of evidenced-based practice and rigorous curricula. The School of Nursing Curriculum committee engages in an annual curriculum review of our BSN Program Objectives by Level to monitor the threading of program outcomes throughout our curriculum. Student outcomes are linked to both course and program objective in alignment with program assessment measures that are tracked and trended within a computer software program called Nuventive that allows for a targeted review of the curricula. To ensure that the BSN curriculum facilitates achievements of student outcomes, prepares graduates for entry level practice and reflects The Essentials of Baccalaureate Education for Nursing Education all BSN courses are examined regularly by the SON Curriculum committee. The SON curriculum committee reviews, evaluates and makes recommendation to the SON faculty for revisions as needed.

The LSSU BSN Nursing Program demonstrates clearly that the curriculum is logically structured to achieve expected student outcomes as it builds upon a foundation of the arts, sciences, and humanities. The BSN follow a suggested course pattern that integrates all general education required courses. For the generic BSN students, this includes the entire preclinical first year courses. In the next three years of the curriculum, courses such as Humanities, Statistics, and Diversity courses are integrated.

4. Explain how faculty ensure the equivalence of learning outcomes and achievement in all modes and locations where degrees are delivered. Provide examples of course syllabi from multiple delivery modes and locations of the same course(s).

In both the generic BSN and post BSN-completion programs there are supportive environments that provide students with learning opportunities that incorporate a variety of teaching and learning strategies in alignment with both program and course outcomes. For the generic BSN program, didactic courses teach pathophysiology, pharmacology, nursing concepts and research through classroom lecture. Activities may include classroom discussions, group work and student presentations that allow the student to apply evidenced-based concepts to nursing practice. Students receive additional learning opportunities for courses with clinical components in the nursing campus lab, on site clinical rotations and at the simulation center that allow students to apply knowledge learned in the classroom setting in a real life environment. Online course work in both concentrations may include simple word documentation, threaded discussions, evidenced-based practice websites and streaming videos. Students in the Post RN BSN completion program experience a combination of didactic learning through distance education in the form of face –to-face lecture at regional sites, hands on labs, seminar,

Interactive Television (ITV) and an online format via Moodle. See Appendix III for example syllabi

5. If applicable, attach the most recent report, findings and recommendations from specialized programmatic accreditations within the School.

Appendix IV: 2015 LSSU SON SelfStudy for CCNE

Appendix V: CCNE accreditation approval and compliance letter 12\_2015

Appendix VI: LSSU Compliance Report for CCNE 2016 Final

Appendix VII: 2017\_12\_RRCBAL\_B\_LSSU\_MI

Appendix VIII: CCNE Response Report FINAL VERSION

Appendix IX: CIPR LSSU FINAL

6. Report data from the past two years to show what students are doing after graduation from the programs in your School. For example, statistical data should report the numbers of students in specific areas (*i.e.*, business, government, education, military, unemployed, pursuing advanced degrees, etc.). Attach representative data.

According to data that was provided by LSSU Alumni Association, the graduate numbers are as follows:

- 2014: 30 graduates
- 2015: 48 graduates
- 2016: 48 graduates
- 2017: 42 graduates

The following is a representation of this data and demonstrates the wide distribution of geographic employment locations by our graduates (including International locations); a factor that contributes to challenges in data collection.

<i>Geographic Area</i>	<i>2014 (30 grads)</i>	<i>2015 (48 grads)</i>	<i>2016 (48 grads)</i>	<i>2017 (42 grads)</i>	<i>2018 (21 Spring semester only)</i>
<i>Michigan</i>	27	43	38	35	18
<i>Out of State</i>	3 total: (WI; SC; WA)	5 total: (MN; TN; OH; WI; Ontario, Canada (1))	10 total: (IL; NM; GA; TX; OH; MN; FLA (2) Ontario, Canada (2))	7 (GA, WI, SC, Canada, 2-unknown)	2-unknown

According to Alumni publications, alumni from the LSSU nursing program have prospered in many areas. The Alumni relations publication reports the program graduates are also employed in State Department of Corrections, participating in consulting work, educating both locally and in other areas of the United States, obtaining graduate education, participating in community fundraising events that contribute to charitable organizations such as Hospice House, and noteworthy awards such as the Rochester Extraordinary Women's Award.

Personal communication by faculty with the graduates of the program indicate they are gaining employment in emergency departments, intensive care units, neonatal intensive care, rehabilitation centers, and distinguished organizations such as Cleveland Clinic, Mayo Clinic, Vanderbilt University, University of Pennsylvania and the US Navy, as example. Locally, LSSU nursing graduates work at a variety of facilities in a wide range of positions, often self-reporting employment within three months of graduation. Nursing students in their final year of schooling are also being recruited for positions prior to their graduation.

#### **Assessment (CC 4.B and CC 4.C)**

*Explain how the School uses assessment to promote ongoing growth and improvement. As evidence for each question, you may choose to include content from the 'Use of Results' column in the 4-Column Program Assessment Report, or provide broader assessment results from an alternative source.*

7. School-level goals and their connections to the university's CAFE Master Goals Strategic Plan were listed in Question 2 of this report. Select 3-5 of those goals as a focus for the School's 4-Column School Assessment Report; add the selected goals to the 4-Column report document, and attach the document.  
Please see Appendix 10 for 4-Column report
8. Describe how results from assessment have been used to improve your School. Include specific examples.  
As indicated in prior reports, our overall BSN program outcomes are aligned directly with the nine Baccalaureate Essentials from the American Association of Colleges of Nursing (AACN).

### **The Baccalaureate Nurse Essentials Program Standards and Expected Program Outcomes for the LSSU BSN Program**

- I. Liberal Education for Baccalaureate Generalist Nursing Practice** Appraises a solid base in liberal education for nursing practice
- II. Basic Organizational and System Leadership for Quality Care and Patient Safety** Synthesizes knowledge and skills in leadership, quality Improvement, and patient safety to provide quality health care
- III. Scholarship for Evidence-Based Practice** Evaluates research for potential application for evidence-based practice
- IV. Information Management and Application of Patient Care Technology** Designs knowledge and skills in information management and patient care technology in the delivery of quality patient care
- V. Health Care Policy, Finance, and Regulatory Environments** Analyzes health care policies, including financial and regulatory, directly and indirectly influencing the nature and functioning of the healthcare system
- VI. Inter-professional Communication and Collaboration for Improving Patient Health Outcomes** Appraises communication and collaboration among health care professionals and patients to deliver high quality and safe patient care
- VII. Clinical Prevention and Population Health** Determines health promotion and disease prevention at the individual and population health levels
- VIII. Professionalism and Professional Values** Emulates professionalism and inherent values of altruism, autonomy, human dignity, integrity, and social justice
- IX. Baccalaureate Generalist Nursing Practice** Synthesizes nursing practice with patients, individuals, families, groups, communities, and populations across the lifespan and across the continuum of health care environments and the variations of care, the increased complexity, and the increased use of health care resources inherent in caring for patients

These nine Essentials are guideposts for the LSSU SON and are therefore included in our BSN student handbook, and are accessible on our LSSU SON webpage. Newly admitted students are presented with the expected program outcomes as a part of their initial coursework in NURS 211 Introduction to Professional Nursing. Subsequently, course outcomes created based on the nine essentials, are evaluated in each nursing course and

with findings inputted into our campus wide tracking system called Nuventive Improve (TM). Using the Nuventive Improve (TM) data system, faculty members track results of assignments, test questions, written papers, clinical performances to measure student learning outcomes in relationship to program outcomes. The Nuventive Improve (TM) tracking system assists all faculty members to target the beginning tracking date, the assessment method used, the threshold to be met, the findings, a determination of outcome achievement, and any action to be taken in subsequent analysis in the event the threshold target for each course outcome measured is not met. The SON is now in the process of using the Nuventive Improve (TM) assessment data in the aggregate and for decision-making purposes in a more structured way program wide on an ongoing basis. The curriculum evaluation process that the SON undergoes each year entails evaluation of program outcomes with subsequent discussion and curriculum improvement. In order to evaluate the meeting of program outcomes for the BSN program, each student completes an 'End of Program Curriculum Evaluation' survey. The survey is set up based on the LSSU BSN Program objectives, which are reflective of the nine Baccalaureate Essentials from the American Association of Colleges of Nursing (AACN). Based upon feedback from these surveys, it was identified that success in meeting program outcomes regarding Evidence-based practice would be best attainable by moving NURS 434 Nursing Research from the senior level to the first semester of the junior level to provide more opportunities for application throughout the entire program. Follow-up survey data from future semesters will be utilized to evaluate whether this change was beneficial to assisting student in meeting the overall program outcome regarding Evidence-based practice.

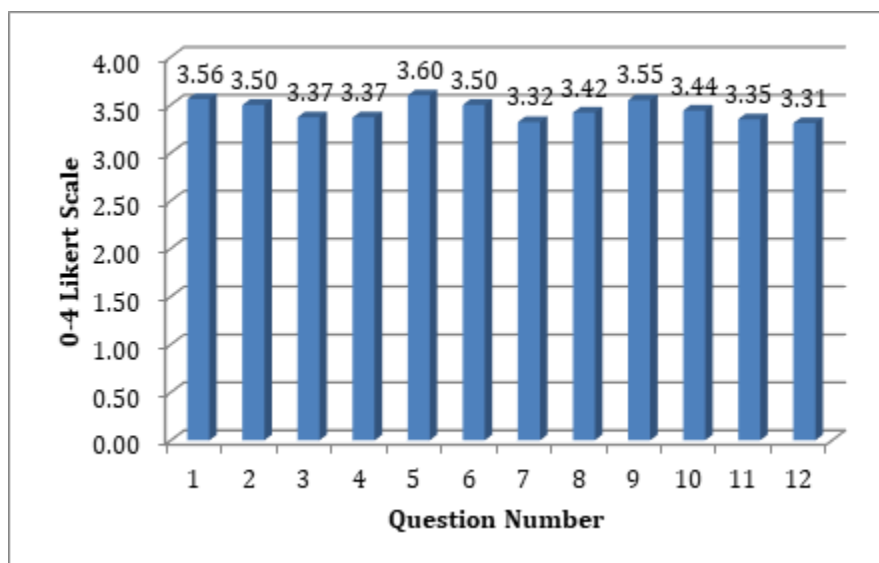
Additional program curriculum evaluation and discussions have prompted other curriculum changes within our program. The SON Curriculum/Outcomes committee (which meets biweekly during the semester) has developed and is implementing an evaluation plan to assess each course within the program. This process is summarized and reported to the SON faculty during the monthly and bi-annual faculty retreat. During the December 2017 SON Faculty bi-annual retreat, faculty analyzed data from the 2016 NCLEX Pearson report and found that LSSU graduates scored had their lowest scores in the area of Pharmacology. Through threading evaluation of all of the courses within our



program, faculty determined that concepts of Pharmacology were indeed being threaded through each nursing course. With input from nursing students, faculty determined that success in achieving program outcomes would further be supported by the addition of an elective Case Study based Pathopharmacology course. Course development occurred during Summer 2018, approved by the University Curriculum committee October 2018, and course offering will begin Spring 19. Success of this strategy will be evaluated with subsequent NCLEX Pearson reports. Other courses have gone through this evaluation process, with some requiring no change (e.g. HLTH 235 Health Informatics).

9. Describe how the School uses assessment results to inform and facilitate better planning and budgeting.

The SON has recently implemented high fidelity simulation activities into clinical nursing course. A survey was developed to assess how student genuinely felt regarding achievement of intended learning outcomes. In the 4 weeks that this evaluation has been implemented, 62 students have completed the evaluation. Student evaluation data demonstrates that students are rating their simulation experience (including faculty effectiveness) at an average of 3.44 (range) out of a possible 4 on a Likert scale. The overall distribution by question is demonstrated below. This survey is continuous.



The SON operated an off campus 2000 square foot Nursing Simulation Center housed in the SSMartzone business acceleration building about 1 mile from the University. Since its inception (Fall 2013) the total operational expense of the Simulation Center has been approximately \$800,000. These costs include state of the art simulators,

as well as their accompanying software and equipment. In addition to donations and grant funding sources, the simulation program depends on \$45 per credit hour in nursing student fees and \$120,000 per year from the university's general fund. The Simulation Center moved to a renovated space on-campus September 2018, and employs a full-time Simulation Director and a full-time Simulation specialist.

The SON Dean and Chair develop and manage the SON budget and faculty provides input when resources are required or requested. This includes needs for equipment, library media purchases, and resources needed in the off-campus Simulation Center (includes equipment and supplies). The Dean and Chair review these requests and presents them to the Finance Department for approval. In addition, contracted services, supplies and main operating expense funds that are not used by the School of Nursing within that fiscal year may be carried into the following school year. Resources support faculty development, research, instruction, practice activities, and community and public service. Professional development funds for full-time nursing faculty are \$1000 per contract year. This amount is prorated for regular part-time faculty and may be carried over to the next year if unused.

The following are examples of how the SON uses assessment results to inform and facilitate program planning

Example:

**Program Outcome: Improved NCLEX Pass Rates**

**Expected Level of Achievement:** *December 2017 graduates will achieve minimum 80% pass rate*

**Actual Outcome:** *final results pending (90%) pass rate as of May 1, 2018*

*Explanation: 2016 pass rates: 80.9%, 2017 pass rates 73% for first time test-takers.*

*Action Plan: NCSBN NCLEX review program purchased for Spring 2017 graduates, individual NCLEX Success Plans created with students, tracking and trending of ATI Predictor scores, adjustment of ATI Predictor testing time frame, NCLEX test-taking strategies threaded throughout program, development of Pathopharmacology course*

*Faculty Participation: Multiple faculty meeting discussions took place regarding low pass rate*

*trends and influencing factors. Faculty mentoring of NCSBN study sessions took place, each faculty integrated test-taking strategies into courses. All decisions for this issue were done as a faculty group after discussion*

### **Program Outcome: Simulation Integration**

**Expected Level of Achievement:** *100% of Nursing clinical courses will engage in a minimum of one simulation experience*

**Actual Outcome:** *8 of 9 courses (88.8%) engage in simulation activities*

*Explanation: Simulation has been threaded throughout our BSN Curriculum with the exception of NURS 433 Nursing Care of Populations.*

*Action Plan: Work has begun to integrate one simulation experience into this course for the Fall 2018 semester.*

*Faculty Participation: Each course coordinator has collaborated with Simulation faculty to create outcomes and design a meaningful simulation experience for students. Faculty are actively involved in all simulation activities, including faculty development, simulation*

*education, and simulation evaluation.*

10. In addition to LSSU's campus-wide programs designed to support retention and degree completion, list any additional activities of the School specifically intended to increase retention and degree completion.

### **Student Mentoring**

Students routinely report that faculty members have made themselves available outside of office and class hours to review and discuss course material, and in some cases provide emotional support and referral for those students experiencing stress. Discussion has occurred at SON level as to how students may become better prepared for expectations within the learning environment and post-graduation. A pre-semester learning workshop titled "JumpStart Nursing" was developed in 2017 by the SON and the LSSU Student Nurses Association (LSSNA) for students that focused on maximizing learning, identification of learning resources in an evidence-based learning environment, and stress reduction self-care methods. This workshop continues to be offered each semester and is now more actively facilitated by the current BSN students via the student-led LSSNA.

### **Student Support**

Professor Cynthia Butcher continues to provide guidance as faculty advisor for the Lake Superior Student Nurses Association. This student group provides support for nursing students, and actively participates in community activities such as the Red Cross Blood Drive and Cancer Walk. The LSSNA is a component of role modeling for evolving into the role of Professional Nurse, which aligns with the *AACN Baccalaureate Essential Program Standard VIII: Professionalism*

The following chart is an example of tracking for student retention and degree completion:

<i>Calendar Year of Graduation</i>	<i>Calendar Year of Admission</i>	<i># Students Admitted</i>	<i># Students Excluded</i>	<i># Students Completing</i>	<i>% Students Completing</i>
2017	2014-15	47	3	43	97.7%
2016	2013-14	52	5	47	100%
2015	2012-13	54	1	52	100%

### **Resources (CC 5.A and CC 5.C).**

11. Describe how the School allocates resources to adequately support the mission. Include explanations of faculty/staff, fiscal, and infrastructure allocations. For example, describe the process used to ensure that each faculty member or instructor in the program is qualified to teach the courses they are assigned, as consistent with HLC guidelines. (<https://www.hlcommission.org/Publications/determining-qualified-faculty.html>)

Please refer to Appendix 11 for Faculty Qualifications form.

The LSSU nursing faculty follows a structured plan for annual evaluations that utilizes a contractual tool titled Professional Assessment Weighting (PAW). Included in the annual evaluation is an assessment of teaching effectiveness, scholarly activities, service to the university, department, community and the profession. Annual summative faculty reports are submitted to the Dean for review and a plan for continued success is discussed regarding tenure, promotion and maintenance of current rank. The annual faculty

evaluation, promotion and tenure process (as described in the faculty handbook) are utilized to measure faculty outcomes as they align to program outcomes.

Aggregate faculty outcomes are evaluated in the areas of effective teaching, scholarship and service. The LSSU nursing faculty outcomes are consistent with both the University and program Mission, goals and expected outcomes. At the beginning of each academic year, the SON faculty now determines the faculty evaluation outcomes that must be achieved. The table below is representative of the 2017-2018 academic year determined at the SON meeting August 2017.

<i>Faculty Outcome</i>	<i>Timeframe</i>	<i>Expected Level of Achievement</i>	<i>Actual Outcome</i>
<i>Scholarship</i>	<i>2017-2018</i>	<i>100% of SON faculty will engage in scholarship as defined by Boyer's model and Faculty Association contract</i>	<i>100% achievement</i>
<i>Continuing Education</i>	<i>2017-2018</i>	<i>100% of SON faculty will achieve required 25 CEUs</i>	<i>100% achievement</i>
<i>Student Evaluation of Faculty</i>	<i>2017-2018</i>	<i>aggregate average of 4 out of a 5-point scale</i>	<i>4.08</i>

For the 2018-2019 academic year, the SON faculty voted in August 2018 to maintain the above faculty outcome criteria.

LSSU nursing faculty have presented at local and national conferences over the past three years on a variety of topics including Faculty Development, Simulation and Information Management. Additional faculty members have accomplished the following:

- Completed certification as a Medical-Surgical Nurse Specialist
- Graduated from NEA Emerging Leaders Academy 2015-16.
- Earned credentialing as a Certified Simulation Healthcare Educator (CHSE)
- Ongoing Certification as a Certified Nurse Education (CNE)

12. Explain how the School ensures that the curriculum for each program is current. For example, evidence may include specialized program accreditation, advisory boards, input from industry, discipline standards, previous School reviews or reports, etc.

The faculty supports the use of accepted standards for program outcomes as evidenced by the inclusion of AACN Baccalaureate Program standards, QSEN, American Nurses Association – Standards and Scopes of Practice, Ontario Compendium of Care Standards, International Nursing Association for Clinical Simulation and Learning – Standards of Best Practice: Simulation, and other practice focus standards.

It is the responsibility of the SON outcomes committee to periodically review and revise mission, goals and expected student outcomes, in conjunction with the SON Student Affairs Committee (SAC). Recommendations for revision of the mission, goals, and expected student outcomes are made to the SON faculty as a group for discussion and agreement as documented in materials and minutes of the faculty meetings. Input from the communities of interest is obtained through the Nursing Advisory Board, which meets once a year to discuss relevant nursing program outcomes and make recommendations and provide feedback on graduated students. The membership of the Nursing Advisory Board is primarily composed of representatives of our clinical agencies. Students are included in the communities of interest and actively participate as members of the SON committees and as invited guests at the Nursing Advisory Board meetings.

Faculty schedule a minimum of 2 annual day long retreats to address issues of mission, goals and student learning. There are five standing committees; Nursing Department, Student Affairs, Curriculum, Outcomes, and Learning Resources. These committees meet a minimum of three times per semester.

As the BSN program is accredited by CCNE, the SON performs consistent data assessment and continuous improvement program review. The next on-campus Accreditation visit by CCNE takes place Spring 2020. In the interim, the SON submits reports Continuous Improvement Progress Reports (CIPR). See **Appendix IX: CIPR**  
**LSSU FINAL**

## PART 2: Degree-Level Review

Degree Program: Bachelor of Science in Nursing

*Explain how the program works to address each of the following questions. For each question, respond with a narrative and supporting evidence.*

### Assessment (CC 4.B and CC 4.C)

13. Provide evidence that the degree-level program outcomes are clearly stated and are effectively assessed, including the “use of results.” Attach the 4-Column Program Assessment Report.  
Please see Question 7.
14. Explain how results from degree assessments were used to improve the degree program. Include specific examples.  
Please see narrative from Program Assessment section.

### Quality, Resources and Support (CC 3.A)

15. Explain how the program ensures that degree program-level and course-level learning outcomes are at an appropriate level. Attach evidence, including a degree audit for the program.

For the School of Nursing, the Program level and Degree level outcomes are the same. Please refer to narrative under question 8 in School Level Review (part 1), and Appendix XII for BSN Degree Audit

Program Outcome	Timeframe	Expected Level of Achievement	Actual Outcome
Liberal Education for Baccalaureate Generalist Nursing Practice	2017—2018	Appraises a solid base in liberal education for nursing practice as evidenced by 100% of students will achieve minimum 85% of NURS 436 Critical Analysis paper	100% Satisfactory level



Basic Organizational and System Leadership for Quality Care and Patient Safety	2017—2018	Synthesizes knowledge and skills in leadership, quality improvement, and patient safety to provide quality health care as evidenced by completion of NURS 435 Nursing Management and Leadership capstone project (100% will complete capstone project) and paper, NURS 431 Change Project, and NURS 433 test questions -	94% of students completed project. One student was given an “Incomplete” grade for health reasons and will finish this summer.
Scholarship for Evidence-Based Practice	2017—2018	Evaluates research for potential application for evidence-based practice as evidenced by completion of NURS 436 Critical Analysis Paper. - 100% of students will achieve minimum 85%	100% Satisfactory level
Information Management and Application of Patient Care Technology	2017—2018	Designs knowledge and skills in information management and patient care technology in the delivery of quality patient care as evidenced by completion of NURS 431 Cardiogenic Shock and Sepsis Simulation, VSIM (Virtual Simulation), DocuCare Electronic Health Record - 100% will complete at Satisfactory level	100% Satisfactory level
Health Care Policy, Finance, and Regulatory Environments	2017—2018	Analyzes health care policies, including financial and regulatory, directly and indirectly influencing the nature and functioning of the healthcare system as evidenced by completion of NURS 435 Financial Projection and Feasibility Study Paper - 100% of students will achieve minimum 80% grade	94% of students achieved 80% grade. One student was given an “Incomplete” grade for health reasons and will finish this summer.

Inter-professional Communication and Collaboration for Improving Patient Health Outcomes	2017—2018	Appraises communication and collaboration among health care professionals and patients to deliver high quality and safe patient care as evidenced by completion of NURS 431 Clinical SBAR Tool and Evaluation Tool - 100% will complete at Satisfactory level	100% Satisfactory level
Clinical Prevention and Population Health	2017—2018	Determines health promotion and disease prevention at the individual and population health levels as evidenced by completion of NURS 432 Ongoing Veterans Health Project and NURS 433 Family Assessment and Teaching Plan	Data pending
Professionalism and Professional Values	2017—2018	Emulates professionalism and inherent values of altruism, autonomy, human dignity, integrity, and social justice as evidenced by completion of NURS 431 Clinical Evaluation Tool - 100% will complete at Satisfactory level	100% Satisfactory level
Baccalaureate Generalist Nursing Practice	2017—2018	Synthesizes nursing practice with patients, individuals, families, groups, communities, and populations across the lifespan and across the continuum of health care environments and the variations of care, the increased complexity, and the increased use of health care resources inherent in caring for patients as evidenced by completion of NURS 432 Clinical Evaluation Tool - 100% will complete at Satisfactory level	100% Satisfactory level

**The Lumina Foundation’s Degree Qualification Profile (DQP) is suggested as a resource for answering the questions about what students should know and be able to do at each degree level:**

<http://degreeprofile.org/wp-content/uploads/2017/03/DQP-grid-download-reference-points-FINAL.pdf>

**Intellectual Inquiry (CC 3.B).**

16. Explain what the program does to engage students in collecting, analyzing, and communicating information; mastering modes of inquiry or creative work; developing skills integral to the degree program. Attach examples of undergraduate research, projects, and creative work.

In both the generic BSN and post BSN-completion programs there are supportive environments that provide students with learning opportunities that incorporate a variety of teaching and learning strategies in alignment with both program and course outcomes. For the generic BSN program, didactic courses teach pathophysiology, pharmacology, nursing concepts and research through classroom lecture. Activities may include classroom discussions, group work, service learning, and student presentations that allow the student to apply evidenced-based concepts to nursing practice. Students receive additional learning opportunities for courses with clinical components in the nursing campus lab, on site clinical rotations and at the simulation center that allow students to apply knowledge learned in the classroom setting in a real life environment. Online course work in both concentrations may include simple word documentation, threaded discussions, evidenced-based practice websites and streaming videos. Students in the Post RN BSN completion program experience a combination of didactic learning through distance education in the form of face –to-face lecture at regional sites, seminar, and an online format via the Learning Management System (Moodle). Simulation continues to be integrated into the Nursing curriculum, with expanded opportunities for simulation learning increasing with the construction of the new Simulation Center on campus Fall 2018. Virtual world simulation software is also being implemented: VSIM, and an Electronic Health Record (DocuCare).

**Nursing Program Review**  
**Appendices 1 - 13**

## Appendix 1 Cover Sheet

Use a copy of this cover sheet for each document submitted. Evidence supporting the questions and narratives does *not* need to be electronically added to this Program Review form. One option is to use this cover sheet to add content to directly this Word document. A second option is to submit separate documents along with the form, also using this cover sheet for each document provided.

Send email with supporting documentation to: [TRACDAT@lssu.edu](mailto:TRACDAT@lssu.edu), with a cc to your dean, or submit as a hardcopy to your dean.

<b>School:</b>	<b>Nursing</b>
<b>Document Title (if attached) or Filename (if emailed):</b>	<b>Appendix I: School of Nursing Bylaws</b>
<b>This documentation is relevant to Question number:</b>	<b>2</b>
<b>Briefly summarize the content of the file and its value as evidence supporting program review:</b>	<b>The School of Nursing Bylaws</b> provide a unified approach to the development, planning, and implementation of the nursing programs in the SON. The Bylaws are consistent with University policies, practices, and agreements in order to provide a systematic process for overall program governance.

**Lake Superior State University**  
**650 W. Easterday Ave., Sault Ste. Marie, MI 49783**  
**School of Nursing**

**BYLAWS**

Article I. Name:

This organization shall be known as the School of Nursing, College of Health and Behavior

Article II. Purpose:

The purpose of this organization is to provide a unified approach to the development, planning, and implementation of the nursing programs in the School of Nursing.

Article III. Objectives and Function:

Section I. Objectives:

Consistent with University policies, practices, and agreements, this organization shall act as a recommending body in:

- A. providing a systematic process for curriculum design and evaluation,
- B. providing opportunities for faculty professional development,
- C. developing and implementing criteria for student admission, readmission, promotion and evaluation,
- D. providing a systematic process for total program evaluation,
- E. providing a mechanism for student input into program development and evaluation, and
- F. providing a systematic process for obtainment, utilization and evaluation of resources and facilities.

Section II. Functions:

- A. Periodically review the philosophy, conceptual framework, goals, and outcomes of the nursing programs.
- B. Formulate, interpret, and implement policies of the School of Nursing
- C. Systematically assess and evaluate all program tracks in the School of Nursing.

- D. Improve the educational program by continuous evaluation and revision based on outcome achievement, current nursing trends and needs, consistent with the criteria of nursing education as established by the Commission on Collegiate Nursing Education (CCNE) and the Michigan Board of Nursing.
- E. Promote communication and collaboration between personnel in clinical facilities and the faculty/administration.
- F. Approve and implement recommendations submitted by School of Nursing committees, appropriate groups and individuals.
- G. Evaluate student services.
- H. Promote the professional growth of faculty members.
- I. Provide students and faculty with adequate library and laboratory resources essential to the maintenance of a progressive nursing program.
- J. Make decisions regarding admission, progression, and graduation of students.

Article IV. Membership:

- A. Dean of the School of Nursing.
- B. Chair of the School of Nursing
- C. Tenured and tenure track School of Nursing faculty members
- D. School of Nursing staff members

Article V. Responsibilities of Chairperson:

- A. Role is assumed by Dean of the School of Nursing or their designee (Chair)
- B. Duties:
  - 1. Preside at all meetings.
  - 2. Review all minutes submitted by School of Nursing secretary prior to each meeting, noting corrections on the original copy.
  - 3. Direct School of Nursing secretary to distribute copies of approved minutes as follows:
    - a. Original copy for permanent filing in School of Nursing office.

b. Full and part time nursing faculty and staff.

4. Review all minutes at the end of each semester to determine unfinished business.

Article VI. Meetings:

Section I. School of Nursing Meetings:

- A. Shall meet at least four times each semester. The time and dates shall be decided during the first week of each semester.
- B. The first meeting of the academic year shall be for the purpose of organization and for setting goals for the upcoming year.
- C. Up to two days prior to each regularly scheduled faculty meeting, additional items may be added to the agenda. Any faculty member or student may submit to the Dean or Chair items to be placed on the agenda.

Section II. Special Meetings:

- A. Called at discretion of Dean.
- B. Any member of the School of Nursing may submit to the Dean or Chair a request for a special meeting.

Article VII. Voting:

- A. All tenured or tenure track faculty members of the School of Nursing shall have one vote.
- B. The quorum shall consist of 2/3 of the total membership.
- C. Unless otherwise specified, a majority of the quorum is required for a motion to carry.

Article VIII. Committees:

Section I. Standing Committees:

Membership on committees shall be appointed by Dean of the School of Nursing. There shall be a student representative on all standing committees except the Professional Development Committee. Committees meet each semester or more frequently as necessary.

- A. Curriculum and Outcomes



B. Student Affairs

C. Learning Resources

Section II. Task Forces

Shall be appointed by the Dean of the School of Nursing to fulfill specific needs.

Section III. Minutes:

Minutes of all committee meetings and task forces shall be recorded, and copies shall be distributed to all nursing faculty; original signed copy shall be filed appropriately in the School of Nursing office.

Section IV. Functions of Committees:

A. Curriculum and Outcomes Committee

1. Recommend curriculum policies and procedures of the nursing program consistent with School of Nursing and University policies, procedures and practices.
2. Recommend revisions of the nursing philosophy, conceptual framework, goals, outcomes and course content based on evaluation data and current trends in practice, education and research.

The Committee may appoint subcommittees as needed to carry out the functions of the committee

- a. Coordinates review of courses relative to content and selected learning experiences to ensure that courses are congruent with the conceptual framework and program/level outcomes.
  - b. Review recommendations made by faculty and/or students regarding proposed curriculum changes.
  - c. Submit curriculum revisions at School of Nursing meetings for faculty consideration.
3. Evaluate nursing curriculum systematically according to specified program evaluation schedule.
  4. Assure that annual clinical facility evaluations are completed by faculty and students.
    - a. Tabulated results reviewed by Dean of Nursing and course coordinators and recommendations made.
    - b. Major changes in clinical experiences are brought to faculty for approval.

5. Review for overall Evaluation Plan for the pre and post-licensure nursing programs and make recommendations to nursing faculty
6. Review and monitor reliability and validity of evaluation tools
7. Collate and evaluate data to identify trends
8. Conduct and share with the appropriate committee(s) and School of Nursing graduate alumni (1y-3y-5y) and employer surveys for the BSN program
9. Conduct and review student surveys of services and facilities
10. Collate and share with the appropriate committee(s) and School of Nursing the attrition rate of BSN students

#### B. Student Affairs Committee

1. Recommend admission, readmission, progression and graduation policies for Nursing Programs consistent with university policies.
  - a. Assure admission policies reflect non-discrimination according to the equal opportunity guidelines and in compliance with the Americans with Disabilities Act and any other applicable laws.
  - b. Implement the School of Nursing student grievance policy when necessary.
  - c. Only faculty members will review student grievances and review records for determining student admission, progression and reinstatement.
2. Formulate policies and procedures unique to nursing students.
3. Review and revise pre and post licensure student handbooks annually.
4. Coordinate the selection of recipients of nursing scholarships and awards, making recommendations to the nursing faculty for approval.
5. Provides for representation on the Pinning Ceremony Task Force.

#### C. Learning Resources Committee

1. Appraise the adequacy of learning resources and services used by nursing students.
2. Make recommendations related to library, other learning resources and university services to faculty.
  - a. Evaluate the use of library, nursing skills lab and computer lab.
  - b. Collaborate with the Academic Success Center in selection of learning resources relevant to nursing students.

- c. Referral and follow-up for any reported safety related concerns in nursing lab.

## Appendix 2 Cover Sheet

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<b>School:</b>	<b>Nursing</b>
<b>Document Title (if attached) or Filename (if emailed):</b>	<b>Appendix II: Fall 2015 Goals for Recruitment and Retention</b>
<b>This documentation is relevant to Question number:</b>	<b>Question 2: CAFE (Enrollment)</b>
<b>Briefly summarize the content of the file and its value as evidence supporting program review:</b>	<b>This document is an integrated approach by the SON to meet student enrollment goals and guide enrollment decisions that reflect the Mission of the Institution</b>

Fall 2015

Per the directive of Lake Superior State University's President, the School of Nursing and Health Sciences (SONHS) has established the following goals in response to the University's Strategic Plan to recruit students to increase enrollment and improve first year retention rates. The faculty in the SONHS developed and approved the following:

Strategic Plan 2.1 Enrollment: LSSU will increase **enrollment (recruitment)**.

The SONHS will budget for advertisement and promotional items for the nursing and paramedic programs at LSSU. Effective date: Spring 2016

The SONHS will develop a plan for advertisement of the programs within the SONHS both in and out of state. Effective date: Spring 2016

The SONHS will develop a plan to encourage current SONHS students to participate with nursing faculty in LSSU's required Orientation Day activities with potential nursing and EMS students. Effective date: Spring 2016

The SONHS will change the entry point to the Practical Nursing Certificate (PNC) program from summer to fall semester (to capture graduating high school student and those that typically look to start college in the fall semester). Effective date: Fall 2016

The SONHS will increase faculty involvement to include participation in and creation of summer camps and simulation outreach programs at LSSU as a means for recruiting future high school students to LSSU.

Strategic Plan 3.1 Retention Rates: LSSU will improve first year **retention** rates.

The SONHS will increase the number of qualified pre-nursing students admitted to the BSN program, after completion of pre-nursing courses, from 24 to 28 students during both the fall and spring admissions cycles. Effective date: 2015-2016 academic year.

The SONHS will develop an Associate of Health Care Foundations degree for students admitted to LSSU who are interested in nursing and currently have the designation of "pre-nursing". Anticipated effective date: Fall 2016

Note: Currently, students interested in the BSN track of the Nursing Program are designated by the University and financial aid as "PRE-NURSING". Once pre-nursing course work is completed, BSN nursing students lose their pre-nursing status with the University. In addition, if not admitted to the BSN program's clinical coursework, students often lose their financial aid. These "pre-nursing" students either leave the University or select a new major (e.g. biology) in order to continue attending LSSU with financial aid support (but never intending on earning the degree). This results in skewed data re: program enrollment and completion rates for the University. This AD degree is intended to replace the "pre-nursing" status. Most courses in the AD Health Care Foundations apply towards the BSN degree and results in the student graduating with both an associate and bachelor degree. This also meets the President's directive to increase the number of degrees awarded by the University.

The SONHS will maintain a retention rate higher than national average for BSN programs. Effective date: Ongoing

## Appendix Cover Sheet

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<b>School:</b>	<b>Nursing</b>
<b>Document Title (if attached) or Filename (if emailed):</b>	<b>Appendix III: Example Syllabi</b>
<b>This documentation is relevant to Question number:</b>	<b>4</b>
<b>Briefly summarize the content of the file and its value as evidence supporting program review:</b>	<b>Examples of 2 syllabi that demonstrate equivalency of learning outcomes and achievement in all modes and locations where degrees are delivered.</b>

## Course Syllabus for NURS 434-OO1 Nursing Research

**Co-requisites:** NURS 327; Math 207 or PSYC 210

**Instructor(s):** Mary Reynolds-Keegan, RN, MSN, DNP

Office Number: 906-635-2101

Cell Phone Number: 407-401-4562 (voice mail or text available)

E-mail [address: mreynoldskeegan@lssu.edu](mailto:mreynoldskeegan@lssu.edu) (this is the best way to reach me)

**Office Hours: As Below or by Appointment**

Sunday	Tuesday	Wednesday	Thursday	Friday
<b>Afternoon or Evenings by appt.</b>	12:00 – 3:00 PM	10:00 am – 11:30 am	1:30 – 2:00 PM	By appt.

Also, if I am in my office on campus, I am usually available to talk with students. Please do not hesitate to come by. I welcome the opportunity to talk with each of you individually.

Welcome to NURS 434!!!

Nursing research is a KEYSTONE class that distinguishes you as a BSN and prepares you to inquire about “what is the evidence to support this decision/procedure/policy”? In this class we will cover how to: search, read, and appraise nursing literature, write a *scholarly* paper on a critically appraised topic of your choice, create a professional poster to disseminate your finding to faculty and colleagues at a research symposium. The classroom activities will help you to apply nursing research terms and concepts in *REAL WORLD* practice environments. You will be prepared to discuss and question policy and procedures confidently with physicians, colleagues, supervisors, and other intra-professionals, as we apply evidence-based practice to provide safe and effective care to our patients.

**Required Texts:**

Polit, D. F. & Beck, C.T. (2018). *Essentials of Nursing Research: Appraising Evidence for Nursing Practice* (9<sup>th</sup> ed.). Philadelphia: Wolters Kluwer Health/Lippincott Williams & Wilkins

**American Psychological Association (2010).** *Publication Manual of the American Psychological Association* (6<sup>th</sup> ed). Washington DC: American Psychological Association.

**Course Goals:** To prepare baccalaureate nurses with a basic understanding of the processes of nursing research and apply research findings from nursing and other disciplines in their clinical practice. Students will understand the basic elements of evidence-based practice to work with others in the healthcare field to identify potential research problems and to collaborate on research teams.

**Course Description:** This course develops appraisal skills of nursing and related research. It will enable students to think critically and ethically about providing the best possible care to clients based on evidence. Assignments and class discussion emphasize application of current research to a variety of dimensions including human beings, health, nursing and environment. Prerequisites: Prerequisites: NURS 327, MATH207 or PSYC210.

**Course Outcomes:** Course outcomes are developed in alignment with the **Commission on Collegiate Nursing Education** (CCNE) BSN Essential Standards (<http://www.aacn.nche.edu/education-resources/BaccEssentials08.pdf>) and the **College of Nurses of Ontario Standards** (<http://www.cno.org/en/learn-about-standards-guidelines/standards-and-guidelines/>) and Competencies ([http://www.cno.org/globalassets/docs/reg/41037\\_entrytopracitic\\_final.pdf](http://www.cno.org/globalassets/docs/reg/41037_entrytopracitic_final.pdf))

**Course Objectives:** By successful completion of this course, the student will be able to:

1. Synthesize a solid base in liberal education into nursing practice as evidenced **by the understanding of the process of conducting research and fostering an atmosphere of inquiry**
2. Synthesizes knowledge and skills in leadership, quality improvement and patient safety to provide quality health care as evidenced **by explaining the value of nursing research for evidence-based nursing practice and supporting and contributing to environments that encourage the application of research findings to professional practice**
3. Evaluates research for potential application for evidence based practice as evidenced **by critiquing qualitative and quantitative research articles for strengths and limitations and identifying research methods useful to the nursing profession**
4. Adapts knowledge and skills in information management and patient care technology in the delivery of quality patient care as evidenced **by demonstrating understanding of the rights and responsibilities relative to legal and ethical issues or research involving human subjects**
5. Appraises communication and collaboration among health care professionals and patients to deliver high quality and safe patient care as evidenced **by developing presentations of evidence based practice protocols through poster presentations to colleagues and sharing knowledge gained through research by presenting research findings to decisionmakers and others**
6. Emulates professionalism and inherent values of altruism, autonomy, human dignity, integrity, and social justice as **evidenced by developing and presenting research posters while ensuring that high standards are used in the research process**

■ **Grading Scale and Point Values:**



1 <sup>st</sup> Exam	15%
2 <sup>nd</sup> Exam	15%
Final	25%
Attendance/Participation/Application Exercises	10%
Research Critique of Quantitative Study	5%
Research Critique of Qualitative Study	5%
Literature Review/Critically Appraised Topic (CAT) Outline	5%
Literature Review/Critically Appraised Topic (CAT) Paper	10%
1 <sup>st</sup> Draft of Poster	6%
Final Draft of Poster	4%
<b>Total</b>	<b>100 %</b>

### **Grading Scale and Policies**

**Point Values:** \*\*Please note and review the School of Nursing Grading Policy.

#### **Grading Scale:**

98-100	A+	4.0	70-71	C-	1.7
92-97	A	4.0	68-69	D+	1.3
90-91	A-	3.7	62-67	D	1.0
88-89	B+	3.3	60-61	D-	0.7
82-87	B	3.0	0-59	F	0.0
80-81	B-	2.7			
78-79	C+	2.3			
72-77	C	2.0			

#### **University Policies and Statements:**

##### **The Americans with Disabilities Act & Accommodations**

In compliance with Lake Superior State University policies and equal access laws, disability-related accommodations or services are available to students with documented disabilities.

If you are a student with a disability and you think you may require accommodations you must register with Disability Services (DS), which is located in the KJS Library, Room 130, (906) 635-2355 or x2355 on campus. DS will provide you with a letter of confirmation of your verified disability and authorize recommended accommodations. This authorization must be presented to your instructor before any accommodations can be made.

Students who desire such services should meet with instructors in a timely manner, preferably during the first week of class, to discuss individual disability related needs. Any student who feels that an accommodation is needed – based on the impact of a disability – should meet with instructors privately to discuss specific needs.

### **IPASS (Individual Plan for Academic Student Success)**

If at mid-term your grades reflect that you are at risk for failing some or all of your classes, you will be contacted by a representative of IPASS. The IPASS program is designed to help you gain control over your learning through pro-active communication and goal-setting, the development of intentional learning skills and study habits, and personal accountability. You may contact 635-2887 or email [ipass@lssu.edu](mailto:ipass@lssu.edu) if you would like to sign up early in the semester or if you have any questions or concerns.

### **Honor Pledge**

As a student of Lake Superior State University, you have pledged to support the LSSU Student Honor Code and the School of Nursing Honor Code. You will refrain from any form of *academic dishonesty or* deception such as cheating, stealing, **plagiarism** or copying take-home assignments, homework, computer programs, lab reports, quizzes, tests or exams, all of which are Honor Code violations. Furthermore, you understand and accept the potential consequences of punishable behavior. Students are expected to perform all assigned work themselves. Any form of cheating or plagiarism will be handled in accordance with the Honor Code Procedures. Violations of the Honor Code may result in an F for the course grade.

### **Class Ground Rules:**

#### **E-mail Protocol –**

**Students are encouraged to contact me early and frequently to discuss any problems or concerns related to the course, Moodle, and/or how you are performing in the course.** Students are asked to check their LSSU e-mail frequently, at least twice per week. Only [lssu.edu](mailto:lssu.edu) email addresses will be used. I will answer your e-mail as soon as conveniently possible but certainly within 48-72 working day hours. Weekends will be variable. Email received Friday may not be answered until the following Monday. All email communication is to be respectful and professional. **Voice mail and e-mail are not always 100% successful at communicating our messages and can pose technical difficulties at times.** If you try to e-mail me or leave a voice mail/ text on my cell phone and have not heard from me in a timely manner, contact me again to ensure that your questions or issues are addressed promptly.

### Use of Technology in the Class Room -

Students wishing to use lap tops during the class must only use the lap top as part of the class activity for that day. No laptop may be used during guest or student presentations. Cell phones must be turned off or put on vibrate and used only for class purposes such as looking up research concepts during discussions.

### Attendance -

Attendance will guarantee that you learn the material better and will be taken on a daily basis.

Students are expected to attend the scheduled classes during the course and should be prepared to participate in weekly discussions. Our discussions constitute the most essential component of this course and are your opportunity to demonstrate your comprehension of the assigned readings in addition to your ability to apply this information to nursing practice. I understand the occasional need for students to be absent from class. To address this possibility, student's attendance will be taken each class period, however, at the end of the semester, I will randomly select 10 class periods that will be used to determine a student's attendance record for the semester.

### Absences -

The University expects regular class attendance by all students. Each student is responsible for all academic work missed during absences. When an absence is necessary, students should email the instructor as a courtesy and *check with colleagues* for information and/or assignments.

**For extended absences (sickness, funerals, etc.) students are to contact the Provost's office per university policy.** Please review the University Catalog for the complete policy on attendance.

### Class Participation and Discussion -

To be able to actively participate in class discussions, students are expected to come to class prepared by completing reading assignments, application exercises, viewing PowerPoint presentations, and reading the various references posted on Moodle. Intellectual freedom is encouraged in this class. Debate and disagreement are critical parts of the learning process. However, differences must be raised in a civil, non-personal way using active communication techniques.

### Assignments -

Completing assignments on time and keeping up with the class material is important for success in this course and in college. Homework such as active reading of research articles and application exercises will be assigned and periodically collected or checked for completeness in class on the day it is due. A *thoroughly completed assignment* may be used to count toward your attendance/participation grade. Late submissions **will not** be accepted except for legitimate **pre-approved (via e-mail) reasons** as determined by the instructor. Examples of legitimate reasons are: severe illness, death in family, etc. Students that are not in class when materials and application exercise are handed out should get a copy from a peer or stop by my office during my office hours.

### Changes in Class Syllabus or Schedule -

The instructor reserves the right to change portions of this syllabus and/or course schedule as needed. Students will be given appropriate time to adjust their schedules to any of the said changes. All changes will be announced in class and/or posted on Moodle as an "Announcement."

## Classroom Etiquette -

Research principles are taught using class discussion and students are expected to be respectful during class including minimal (if any) side-conversations with classmates, putting chairs and tables back in their original place, picking up any debris (pop cans, food) upon leaving class, and taking/returning from break as advised by the instructor. Frequent leaving class for whatever reason is not appropriate. It is disruptive to students as well as faculty. Disrespectful activities are not tolerated.

## Guest Speakers -

Exam or quiz questions may be taken from student/guest speaker content. Students will be asked to close their laptops during student/guest speaker presentations- be prepared to take notes by pen/pencil & paper.

## Exam Policies -

1. Exams will comprise a significant portion of the course grade.
2. Students are expected to take exams on the day they are scheduled. Exams may not be made up after the due date unless arrangements are made with the professor **prior** to the date of the exam. **An unexcused absence on a day when a test (including final exam) is given will result in a zero. Excused absence notification must be received by the professor via email at least 24 hours prior to class.**
3. After each exam, a review may be held in the next class session of questions missed by a significant portion of the class. Students should expect to find questions on the final exam based on the material reviewed.
4. Students are expected to maintain the confidentiality of the exam questions.
5. Students taking any exam prior to the class exam must get it **PRIOR** approved by the instructor and must **NOT** discuss ANY information pertaining to that exam with ANY persons. If it is discovered that ANY information regarding the exam has been shared, **EACH** student involved with the breach will receive a **ZERO** on the exam and may be disciplined accordingly

## Papers -

### APA Format Requirements

- Nursing and several other behavioral and social sciences utilize the Publication Manual of the American Psychological Association (APA) to cite sources and better communicate their research findings more clearly and concisely. There are several standards that are required for proper usage of APA format that is required by many of the nursing journal publishers. APA (2010) format is required for all papers in the school of nursing for structure, format, and references. (i.e. This means all assignments will have a title page and reference list, and **MOST IMPORTANT, proper “within text” citing and reference list citing**). Instructions and Resources on how to use APA and writing “scholarly papers are available on the Moodle APA tab.

## Grading of Assignments-

Grading of assignments, papers, and poster presentations, will be evaluated based on the content and format using the **wholistic grading rubric (see Appendix A)** for each assignment. Papers will be due on the date and time indicated in the course schedule and posted on the Moodle assignment tab.

- The grade for late papers (after the exact time noted on the syllabus) not **prior** approved by the instructor will be reduced by 5% per day (including weekends) starting from the grade (points) originally assigned to the paper.
- **IMPORTANT:** You are asked to submit:
  1. one hard copy of your paper in class
  2. an electronic copy of your paper posted on the Assignment tab on Moodle by the date and time indicated on the course schedule in the syllabus
  3. A completed APA checklist.
- When naming a document use the following format: Your **last name & the Document name** (e.x. Reynolds\_CAT Poster Draft or it will be returned to you to rename. If it is returned to you it must be resubmitted prior to the deadline for submission, or it will be considered late.
- Reading and critiquing your papers is important to me and I will spend the time providing you the feedback you deserve. It may take as long as **2 – 3 weeks** to complete all the grading of your papers. If you have any questions about writing your next paper before you receive your grade on the prior paper, *make an appointment with me to review your paper.*

## Moodle Learning Management System -

Moodle will be the electronic course platform that can be accessed through [www.my.lssu.edu](http://www.my.lssu.edu)

Course announcements will be made either in class or through Moodle announcement feature.

In the case of class cancellation for inclement weather or any other reason, an announcement will be posted on Moodle along with a plan for making up the lost time. Please let me know if you have any questions or concerns, or if you experience any problems accessing course materials or notices as soon as you identify a problem.

## Assignment

### Weekly application exercises

Each week there will be an application exercise that accompanies the chapter/s we will be covering. The application exercises in this course are designed to promote critical thinking and discussion and are similar to the short answer questions that will be on the exam (exams are made of about 60% multiple choice questions, and 40% scenarios with short answers similar to the weekly exercises).

The **application exercise will be distributed in class**. Although some questions can be answered yes, or no, it will be important for you to **explain** your answer. Throughout the semester, you will find that some of the questions can be interpreted in different ways based on the assumptions you make about the study design. If you **state your assumptions/rationale** to support your answer, and it is correct, I will follow your line of thinking and give you credit for your answer even though it may be different from the answer in the text.

Students should post their exercise to the assignment tab on that week's Moodle tab. The **exercises do not need to be typed**, students can hand write their answers and scan them into a document to upload into Moodle assignment tab.

We will review the application exercises in class. There is not always "one" right answer, the questions are **designed to stimulate discussion and critical thinking** about the key principles in the chapter. Caution: When reading the scenario try not to "read too much into it". If the author does not address the issue in the scenario then you can report the study does not address the issue.

I will post a discussion forum specifically for students to post questions (Q&A) or comments about the application exercises or anything else that is concerning about the class. I encourage your discussion about these concepts.

Application exercises will be **graded on a pass/fail basis**, as they are designed as a discussion tool and will be part of the attendance/participation grade. To obtain a passing grade the application exercise must be posted to Moodle *prior to the class time* that it will be reviewed. No late entry's or hard copies will be accepted without instructor approval.

## Assignment

### **434 Nursing Research Course Learning Activities**

#### **Critically Appraised Topic (CAT) Assignment.**

For this assignment a CAT is like a shorter and less rigorous version of a literature review, summarizing the best available research evidence on a **topic**. Usually several studies are reviewed in a CAT. When professionals summarize a single topic, the outcome is a **critically appraised paper (CAP)**. Evidence-based practice in nursing begins with the identification of a clinical problem or issue that requires review, definition, judgment of interventions, or application of evidence. Your project is to identify a clinical research issue related to evidence-based nursing practice and in addition show how this research can be applied when developing evidence-based practice (EBP) nursing interventions. **[Students are encouraged to make an appointment with me to discuss topic ideas for this project to help narrow down a topic to a manageable level].**

### **Researching the CAT Problem Statement**

#### **Reviewing the Literature on Your Topic**

The use of systematic reviews, meta-analysis, and primary studies along with Clinical Practice Guidelines are recommended. At least eight (8) articles will be utilized and properly referenced, within the paper and your poster.

#### **Writing the CAT Solution/Nursing Intervention**

This assignment is a two-part literature search. Once the topic has been decided, students will do a literature search on the topic to write the **problem statement** (see rubric below and Polit & Beck, 2018, p 95.). Once the problem has been identified, students will conduct a second literature review to identify and present an **evidence based** independent nursing intervention reported in the literature found to be successful at addressing the problem.

## Critically Appraised Topic/Literature Review Paper

### Criteria and Topic Emphasis

The final research paper will be no longer than **8 pages** (not including title page or references) with no less than **(8)** references and will be graded using the holistic **grading rubric** (see Appendix A). Paraphrase your sources, **DO NOT USE QUOTES**. I want to hear your paraphrasing of what you are referencing.

CAT/Literature Review Paper Criteria and Topic Emphasis		Topic Emphasis
<b>Abstract (150- 250 words)</b>		5
Although abstracts are presented first in an article, they are written last. Abstracts are often the ONLY part of an article that a reader will read and are written to briefly summarize the content of your paper.		
1. Under the abstract, include the <u>key words</u> you used in searching for your articles. Keywords are listed just below your abstract (see APA manual).		
2. Include a <u>PICO Question</u> that would be appropriate if you were to actually conduct a study on your topic (place your PICO question below the key words in your abstract)		
<b>Problem Statement (2-3 pages)</b> (see Ch 6, P & B text p. 95)		
1. <b>Problem:</b>		10
a. Identify the major underlying problem you identified in your readings related to your topic. ( <b>Example of Postpartum Depression as a topic</b> ) Ask yourself, “why is this problem important to nursing? (What is wrong with the current situation?) (e.g. <b>Problem:</b> women won’t admit they have symptoms of Postpartum Depression and it goes untreated for long periods of time).		
b. What is the <b>Scope</b> of the problem (How big is the problem and how many are affected? Cite the prevalence and incidence, <b>report the DATA</b> ).		
2. <b>Background:</b>		10
a. Identify all the reasons you identified to that explain why your problem exists ( <i>Example: Depression carries a significant negative <u>stigma</u>, women <u>fear</u> no one will understand, women are <u>ashamed</u> to admit they are unhappy after their delivery</i> ).		
b. How big are the problems you bring up in the background? How many are affected? <b>Report the DATA</b> , the prevalence and incidence.		
3. <b>Consequences:</b>		10
a. What are the consequences of not fixing the problem)? ( <b>Example:</b> <i>prolonged undiagnosed postpartum depression or postpartum psychosis can lead to suicide or infanticide</i> ).		
b. How big are the problems you bring up in the background? How many are affected? <b>Report the DATA</b> , the prevalence and incidence of the consequences you identified, provide the statistical/data.		
<b>Theoretical Framework (1- 2 paragraphs)</b>		5
This supports the problem or protocol/intervention you selected. You do not have to use a nursing theory; shared theories are acceptable in research papers. You may also use “ground theory” to base your paper on.		
<b>Independent Nursing Intervention/Protocol (1- 2 pages)</b>		
1. <b>Identify the role the nurse will have when caring out this intervention</b> i.e. <i>hospital or home nurse, staff development coordinator, school nurse, nurse leader/administrator, nurse practitioner, nurse lobbyist, etc.</i> ( <b>Example:</b> <i>OB Postpartum nurses</i> )		10
2. From your literature search, indicate what <b>independent nursing intervention/s (INI)/protocol</b> you identified that <i>best</i> addressed the problem, for example. Examples of INI include:		30
a). <b>Providing direct patient care</b> (e.g. <i>routinely screen postpartum women’s risk for postpartum depression after delivery and before discharge from the hospital</i> )		
b). <b>Teaching/educating</b> individuals, patients, families, or groups in the community (e.g. <i>school nurses can educate athletic coaches, parents, and athletes about the prevention, identification, and tx. of concussions using CDC’s “Heads Up” toolkit.</i>		

<p>c). <i>Teaching/educating/orienting other nursing staff as <b>Nursing Staff Development Coordinator</b></i></p> <p>d). <i>Establish policy or procedures as an administrator</i></p> <p>e). <i>Lobbying decision makers (Example: Require universal postpartum depression screen of all mothers before leaving any Michigan hospital after delivery)</i></p> <p>3. <b>Report the EBP</b> you found in the literature related to your INI. At least 3 of your references need to relate to the EBP-INI you are recommending to address your problem.</p> <p>4. <b>Report the Evidence (DATA)</b> you found in the literature to show the INI has been effective in addressing the problem you selected.</p>	
<p><b>Summary/Conclusion</b> (1-2 pages)</p> <p>Summarize your paper to include a brief review of the problem, scope, and consequences along with your proposed solution. State <b>KEY</b> statistical data as your evidence to support your nursing intervention. <b>NOTE:</b> When reading research articles, readers will often read just the abstract and/or your conclusion, so summaries are a brief report on what you have said throughout your paper.</p>	5
<p>APA Format for title page, body of the paper, and reference list (<b>use it!!!</b>) <b>Paraphrase sources “with-in text”, NO QUOTES!!</b></p>	15
<b>Total</b>	<b>100</b>

## Assignment

### Poster of Critically Appraised Topic

#### Poster of Critically Appraised Topic

Your poster summarizes the information from your CAT/literature review paper. **Please Note: The poster should not be a cut and paste from your paper. Less is more when making up a poster.** Follow the directions posted on Moodle as to how to create the PowerPoint and how to format the content of the poster.

Include the following text boxes on your poster:

<b>CAT/Literature Review Paper Criteria</b>
<b>Have Text Boxes with the Following Headings</b>
<b>Title:</b> The title does not have to take the form of a question, but it should have your P, I, & O somewhere in the title.. May use a colon to separate a creative title from the PIO title. Under the title (in a smaller font size), place your full name, Student Nurse, Lake Superior State University
<b>Problem :</b> (include the statement of the problem, background, and consequences in this section of your poster see p. 102 in the text) <b>Present your data</b>
<b>Literature Review &amp; DATA</b> you found as <b>EVIDENCE:</b> (Write a brief annotated bibliography of your key references from the literature <b>CLEARLY REPORTING</b> the statistics “DATA” and what they mean.
<b>Theoretical framework</b>



<p><b>Proposed Solution/Independent Nursing Intervention/Protocol:</b></p> <ol style="list-style-type: none"> <li>1. Describe the domain (place) and the role of the nurse in which the intervention/protocol takes place.</li> <li>2. Present your intervention (based on the evidence that you identified as effective in your literature review). Think of this as the “So <i>WHAT</i> can a <i>NURSE</i> do about this problem”? Now that you have the evidence say that <i>hospital nurses, as an educator, school nurse, or RNP, DON, CNE...etc. can do about this problem</i>”.</li> </ol>
<p><b>Graphs/Figures: There are special formats for utilization of tables, graphs/figures (Students MUST refer to APA Manual p. 158)</b></p>
<p><b>Conclusion/Discussion</b></p>
<p><b>References</b> (NOTE: Use MLA to reference within the poster and in the reference list to save room. Do <u>not</u> use APA format see example of posters from prior students in nursing lab hallway)</p>

## Grading of Posters

The poster represents all you have learned in the research class over the semester and is displayed outside the nursing lab for all to see. I will read and edit each poster submission and provide students the opportunity to re-submit their posters after correcting the identified areas of weakness. Students will be given a grade for each submission. If a student receives a 100% on the first submission, they will automatically receive 100% on the “second submission”.

## Poster Evaluation Rubric Criteria

Poster Evaluation	Points of Emphasis
Poster is readable from 3 - 4 feet	10
Problem statement clearly reflects its significance to nursing practice	20
Adequate amount of data is presented that supports the evidence-based practice using statistical terms and numbers i.e. p-values, confidence intervals, percent with # of subjects	25
Tables/Graphs/Figures/Pictures aid the reader to quickly understanding the data/evidence which must be referenced within the body of the poster and properly labeled per the APA manual on tables and figures.	20
The role of the nurse is clear and the intervention/protocol is detailed enough to inform the reader of the recommended nursing intervention/s supported in the literature	20
Affective impact of poster	5
Total	100

**Best Poster Certificates will be Awarded based on students vote on:** Best title; best presentation; best evidence; best affective impact; and best poster “over-all). Ties are broken based on “who wrote the better paper”.

## Poster Presentation

Dissemination of Your Evidence Based Critically Appraised Topic at the end of the semester, you will present your final critically appraised topic as a poster presentation to your classmates, faculty, family, and other students, which will

include the following assignments. Each student will prepare a five-minute summary to “walk the audience through their poster”. Do not read from the poster. Instead, give the big picture; explain why the problem is important and report **THE DATA YOU FOUND TO SUPPORT YOUR FINDING! THIS IS THE EVIDENCE IN EBP!** Use graphics or figures on the poster that illustrate and support the findings and the protocol addressing the problem. The students are expected to be professional, organized, and well prepared in their responses to faculty and peers’ questions. **Correct grammar and research terminology are expected.** Students are encouraged to contact the course faculty to discuss any questions or concerns related to the projects.

## Assignment

### Quantitative Study Critique Assignment

Students will critique and quantitative and a qualitative research article assigned by the professor. Instructions are posted on the “Critiques” Moodle Tab.

#### Appendix A

#### HOLISTIC ASSESSMENT SCALE

<b>98 – 100%</b>	<b>A+</b>	Original or independent approach to the discussion of topic.
<b>92 – 97%</b>	<b>A</b>	Very clear logical explanation. Good approach to the discussion. Well written.
<b>90 – 91%</b>	<b>A-</b>	Well-supported concepts with appropriate examples & aware of broader context. Diction/choice of words remarkable for understanding, and/or vividness. Superior sentence structure, sentence variation. Superior paragraph unity and flow, often using transitional words and phrases. Free of serious errors in grammar and APA mechanics.
<b>88 – 89%</b>	<b>B+</b>	Coherent, consistent approach to the understanding and discussion of topic. A few errors in grammar and/or APA mechanics.
<b>82 – 87%</b> examples.	<b>B</b>	Good logical explanation and understanding of concepts and terms with supporting  Good organization of ideas and choice of words Weak sentence structure/paragraph unity/flow. Some errors in grammar and/or APA mechanics.
<b>80 – 81%</b>	<b>B-</b>	Adequate understanding of concepts and terms with some examples. Fair organization of ideas and choice of words Weak sentence structure/paragraph unity/flow. Some errors in grammar and/or APA mechanics.
<b>78 – 79%</b>	<b>C+</b>	Shows weakness in logic, terms, and/or examples. Poor flow of ideas. Limited understanding of key concepts and terms. Several errors in grammar and/or APA mechanics.
<b>70 – 77%</b>	<b>C</b>	Poor sentence structure, not consistent. Choice of words shows poor understanding of concepts and terms Several errors in grammar and/or mechanics.
<b>68 – 69%</b>	<b>C-</b>	Poor understanding and explanation of the key concepts and terms Choice of words barely adequate. Several errors in grammar and APA mechanics.

66 – 67%	D+	Explanation of the topic inadequate. Faulty logic, lack of precise examples, erroneous facts, inconsistent ideas.
60 – 65%	D	Weak organization. Weak sentence structure. Very little paragraph unity. Choice of words shows weak vocabulary. Many serious errors in grammar and mechanics.
58 – 59%	D-	Virtually no explanation of the topic. Unsatisfactory logic. No supporting examples of facts. Poor organization/word choice. Unusually brief indicating lack of ideas on the topic. Numerous errors in grammar and mechanics.
57%	F	Completely off the topic. No redeeming features. Numerous errors of all kinds.

## Appendix B

### F18 APA Checklist for Scholarly Papers

6<sup>th</sup> Addition Publication Manual of the American Psychological Association

<file:///E:/235%20Informatics/F17/APA6thEdition%20Scanned%20PDF.pdf>

#### INSTURCTIONS:

1. Students will proof read their papers for proper APA using the APA Checklist. The student will check off each item assuring that their paper is compliant with each of items on the checklist.
2. **WARNING:** If your paper in fact does not meet the guidelines, and you have checked that it did, you will receive one point off for each time you checked the box and indicated your paper met the criteria, when it actually didn't.
3. The APA checklist should be submitted along with the hard copy of your paper.
4. Use the "How to Properly Reference Sources using APA" to VOID PLAGERISM when writing papers.

#### Formatting Your Paper (pp. 228 – 231)

- Margins:** Format the page using a 1" margin at the top, bottom, left, and right of every page
- Font:** Times New Roman
- Line Spacing:** Hit the space bar twice between all periods at the end of your sentences (p. 229)
- Left Justify:** Use left justify feature, with word wrap, and don't break up words with hyphenation at the end of a line (p. 229).
- Paragraphs:** Us the tab key to indent every paragraph ½ inch or 5 – 7 spaces. (p.229)

#### Title Page (p. 23)

- Font:** NOTE: The Running head font usually needs to be changed to Times New Roman as the default is NOT Times New Roman.
- Header:** Use Insert page number to make the header. Type **Running head** NOTE: Only the R is capitalized in Running head: . Space twice after the colon and type the title of the paper in ALL CAPTIAL LETTERS (You may abbreviate the title of your paper in the Running head so that it is not longer than 50 characters including the spaces)

**Page number:** Once the Running head: and the title in all CAPS is typed, use the space to get the page number in the Upper right corner and the word Running head in the left corner.

- Title:** Use Upper and Lower Case Letters in the Title, center it on the page in the upper half of the page (p.23).

### **Abstract (p.25)**

Consult with your instructor to see if an abstract is required for your paper. They are not always required.

- Title:** Write Abstract and center it on the page. Do not bold the word.
- Indentation:** If an abstract is required for your assignment, write it as a single paragraph and DO NOT INDENT the first sentence (p.27)
- # of Words** Do not exceed the word limit of **250**

### **Second Page (p.27)**

- Header:** Remove the word *Running head:* from the second page leaving only the TITLE OF YOUR PAPER in the header which should show up on each subsequent page. (NOTE: The instructions on how to remove the word *Running head* from the second page Depending on the version of your Micro-soft Office you may need to Google how to do this e.g. go to “Header & Footer Tools” > Different first page.
- First Line:** Repeat the Title of Your Paper using Upper and Lower Case, center it on the page, and do not bold it.
- 1<sup>st</sup> Paragraph:** Type your first paragraph. DO NOT use the heading **Introduction** (p. 27), APA says the introduction is implied, and it is clearly identified by its position the in the paper.
- Headings:** There are five possible levels of headings (p. 62). Unless instructed to follow specific wording for your headings, authors are able to name the header anything that helps clarify the content of the paragraph/s and improves the flow of the paper.
- 3<sup>rd</sup> Person:** Scholarly papers are written in the 3<sup>rd</sup> person.
- Numbers:** Spell out all numbers less than 10, and never start a sentence with a number.
- Abbreviation:** Do not start a sentence using an abbreviation.

Spell out the complete word and then put the acronym in parenthesis after it e.g. Center for Disease Control and Prevention (CDC). Subsequent references should only be cited using the Acronym (CDC).

- Percent/%** Use the % sign when it is preceded by a numeral. Use the word percentage when a number is not given (p.188).
  
- Ampersands:** Do not use ampersands within text, Spell out the word “*and*” within the body of your paper (within text), however, they may be used within the parenthesis.
  
- 2° Sources** Use these sparingly. Give the secondary source by naming the original work and give citation for the secondary source e.g. Smith’s diary (as cited in Nicholson, 2003) p.178).
  
- Citing in Text:** Cite only the author and date (p. 174) within text. Do not include the title of the reference article or source within text.
  
- Scholarly:** Write in a scholarly tone using professional jargon/vocabulary. Scholarly papers do not endorse the use of a creative writing approach, rather a paper that would be understood by persons in the profession reading professional peer reviewed journals.
  
- Suggestion:** Go to the APA manual pp. 41 – 51 for sample papers

## Course Syllabus for NURS 434-890 Nursing Research

**Co-requisites:** Math 207 or PSYC 210

**Instructor(s):** Mary Reynolds-Keegan, RN, MSN, DNP

Cell Phone Number: 407-401-4562 (voice mail or text available)

E-mail **address:** [mreynoldskeegan@lssu.edu](mailto:mreynoldskeegan@lssu.edu) (this is the best way to reach me)



### **Instructor Background:**

*I have been teaching nursing research at LSSU since 2010 and it is by far my most favorite class to teach. I received my Doctorate in Nursing Practice from Oakland University in 2010, and did my research on Universal Postpartum Depression Screening after Delivery. I have worked in Public Health with mothers and babies for over 18 years, and worked as a Staff Development Coordinator for 10 years before I started teaching. I live in Marquette, MI, with my husband*

**Office Hours:** As Below or any time by Appointment

Sunday	Tuesday	Wednesday	Thursday	Friday
Evenings <b>by appt.</b> 3:00 – 6:00 pm	9:00 – 12:00 pm 4:50 – 5:20 pm	10:00 am – 11:30 am	By appt.	By appt.

### **Required Texts:**

Polit, D. F. & Beck, C.T. (2018). Essentials of Nursing Research: Appraising Evidence for Nursing Practice (8<sup>th</sup> ed.). Philadelphia: Wolters Kluwer Health/Lippincott Williams & Wilkins

**American Psychological Association (2010).** *Publication Manual of the American Psychological Association* (6<sup>th</sup> ed). Washington DC: American Psychological Association.

**Course Goals:** To prepare baccalaureate nurses with a basic understanding of the processes of nursing research and apply research findings from nursing and other disciplines in their clinical practice. Students will understand the basic elements of evidence-based practice to work with others in the healthcare field to identify potential research problems and to collaborate on research teams.

**Course Description:** This course develops appraisal skills of nursing and related research. It will enable students to think critically and ethically about providing the best possible care to clients based on evidence. Assignments and class discussion emphasize application of current research to a variety of dimensions including human beings, health, nursing and environment.

### *Why Take This Class?*

*Nursing research is a KEYSTONE class that distinguishes you as a BSN and prepares you to inquire...why, and what is the evidence to support this decision/procedure/policy? In this class you will cover how to read and appraise nursing literature, write a scholarly paper on a critically appraised topic of your choice, and create and present a research poster on your chosen topic! The terms and concepts you learn in this class will allow you to discuss and question policy and procedures confidently with colleagues, and supervisors as we apply evidence based practice to provide safe and effective care to our patients. I can't wait to meet with you and talk about your topics and to see your research posters on the wall! You will leave this class with a*

**Course Outcomes:** Course outcomes are developed in alignment with the Commission on Collegiate Nursing Education (CCNE) BSN Essential Standards (<http://www.aacn.nche.edu/education-resources/BaccEssentials08.pdf> and the College of Nurses of Ontario Standards (<http://www.cno.org/en/learn-about-standards-guidelines/standards-and-guidelines/>) and Competencies ([http://www.cno.org/globalassets/docs/reg/41037\\_entrytopractic final.pdf](http://www.cno.org/globalassets/docs/reg/41037_entrytopractic final.pdf))

**Course Objectives:** By successful completion of this course, the student will be able to:

1. Synthesize a solid base in liberal education into nursing practice as evidenced by the understanding of the process of conducting research and fostering an atmosphere of inquiry
2. Synthesizes knowledge and skills in leadership, quality improvement and patient safety to provide quality health care as evidenced by explaining the value of nursing research for evidence-based nursing practice and supporting and contributing to environments that encourage the application of research findings to professional practice
3. Evaluates research for potential application for evidence-based practice as evidenced by critiquing qualitative and quantitative research articles for strengths and limitations and identifying research methods useful to the nursing profession
4. Adapts knowledge and skills in information management and patient care technology in the delivery of quality patient care as evidenced by demonstrating understanding of the rights and responsibilities relative to legal and ethical issues or research involving human subjects
5. Appraises communication and collaboration with health care professionals and patients to deliver high quality and safe patient care as evidenced by developing presentations of evidence-based practice protocols through poster presentations to colleagues and sharing knowledge gained through research by presenting research findings to decisionmakers and others
6. Emulates professionalism and inherent values of altruism, autonomy, human dignity, integrity, and social justice as evidenced by developing and presenting research posters while ensuring that high standards are used in the research process

■ **Grading Scale and Point Values:**

<b>1<sup>st</sup> Exam</b>	15%
<b>2<sup>nd</sup> Exam</b>	15%
<b>Final</b>	25%
<b>Weekly Application Exercises/Discussions</b>	10%
<b>Research Critique of Quantitative Study</b>	5%
<b>Research Critique of Qualitative Study</b>	5%
<b>Critically Appraised Topic (CAT) Outline</b>	5%
<b>Critically Appraised Topic (CAT) Paper</b>	10%
<b>1<sup>st</sup> Draft of Poster</b>	6%
<b>2<sup>nd</sup> Draft of Poster</b>	4%
<b>Total</b>	<b>100 %</b>

**Grading Scale and Policies**



**Grading Scale:**

98-100	A+	4.0	70-71	C-	1.7
92-97	A	4.0	68-69	D+	1.3
90-91	A-	3.7	62-67	D	1.0
88-89	B+	3.3	60-61	D-	0.7
82-87	B	3.0	0-59	F	0.0
80-81	B-	2.7			
78-79	C+	2.3			
72-77	C	2.0			

**University Policies and Statements:****The Americans with Disabilities Act & Accommodations**

In compliance with Lake Superior State University policies and equal access laws, disability-related accommodations or services are available to students with documented disabilities.

If you are a student with a disability and you think you may require accommodations you must register with [Disability Services \(DS\)](#), which is located in the [KJS Library](#), Room 130, (906) 635-2355 or x2355 on campus. DS will provide you with a letter of confirmation of your verified disability and authorize recommended accommodations. This authorization must be presented to your instructor before any accommodations can be made.

Students who desire such services should meet with instructors in a timely manner, preferably during the first week of class, to discuss individual disability related needs. Any student who feels that an accommodation is needed – based on the impact of a disability – should meet with instructors privately to discuss specific needs.

**IPASS (Individual Plan for Academic Student Success)**

If at mid-term your grades reflect that you are at risk for failing some or all of your classes, you will be contacted by a representative of IPASS. [The IPASS program](#) is designed to help you gain control over your learning through pro-active communication and goal-setting, the development of intentional learning skills and study habits, and personal accountability. You may contact 635-2887 or email [ipass@lssu.edu](mailto:ipass@lssu.edu) if you would like to sign up early in the semester or if you have any questions or concerns.

**Honor Pledge**

As a student of Lake Superior State University, you have pledged to support the LSSU Student Honor Code and the School of Nursing Honor Code. You will refrain from any form of *academic dishonesty or* deception such as cheating, stealing, **plagiarism** or copying take-home assignments, homework, computer programs, lab reports, quizzes, tests or exams, all of which are Honor Code violations. Furthermore, you understand and accept the potential consequences of

punishable behavior. Students are expected to perform all assigned work themselves. Any form of cheating or plagiarism will be handled in accordance with the Honor Code Procedures. Violations of the Honor Code may result in an F for the course grade.

## Moodle Learning Management System -

Moodle will be the electronic course platform that can be accessed through [www.my.lssu.edu](http://www.my.lssu.edu)

Course announcements will be made either in class or through Moodle announcement feature.

In the case of class schedule change for inclement weather or any other reason, an announcement will be posted on Moodle along with a plan for making up the lost time. A NEWER “friendlier” version of Moodle will be used this semester, let me know if you have any questions or concerns, or if you experience any problems accessing course materials or notices as soon as you identify a problem.

## On-line Class Communication-

Anything written or uploaded to LSSU Moodle site is to comply with university policies and guidelines for academic and behavioral integrity as well as having proper citations to be in copyright compliance. Students are expected to be respectful in their writing to faculty and each other.

## Class On-line Structure:

### Weekly Lectures and Application Exercises/Discussions

1. Video Lectures for each chapter will be taped and posted to Moodle in the Tab for that week’s lesson by date posted on Moodle.
2. I will post a short application exercise for each chapter for you to type up and submit into a discussion forum each week. I recommend that you complete the exercises in “Word” and then **copy and paste it** into the assignment. Please **do not** include the “scenario” into the post, just include the chapter number, title, the questions, **and your short answers with explanation of your answer.**
3. **In ADDITION: I would also like you to include answers to the following reflection each week:**
  1. What were the major "take home messages" you got from this lecture?
  2. What was/were the "muddiest" point/s?
  3. How did the technology work for you (sound, visuals, etc.)?
  4. Do you have any suggestions to improve on this lecture/class?

**NOTE:** If you have any questions about accessing the on-line lectures please call me at 407-401-4562 or contact the IT department at 906-635-6677.

## Weekly Chapter Application Exercise Overview

The application exercises in this course are designed to promote critical thinking and discussion and are similar to the short answer questions that will be on the exam (exams are made of about 60% multiple choice questions, and 40% scenarios with short answers similar to the weekly exercises).

I will review the answers to the application exercises by posting the **Application Answer Video** to Moodle each week. If there are any questions about a specific question, please write it on your application that you submit that week or post it in the **Q&A for Application Exercises Forum** and I will address your questions on the following video lecture.

Caution: When reading the scenario try not to “read too much into it”. If the author does not address the issue in the scenario, then you can report the study does not address the issue. You will find that some of the application questions can be interpreted in different way based on the assumptions you make about the study design. If you **state your assumptions/rationale** to support your answer, and it is correct, I will follow your line of thinking and give you credit for your answer even though it may be different from the answer in the text.

## **Tips for Success in this Online Course:**

This course has a modular structure and is designed for ease of navigation. The tabs across the top of the course home page are organized into fifteen 1-week modules. Each week, click on the correct tab for the week to open that module’s content. Upon completion, all weekly modules remain available for review and on-going interaction. In addition to the weekly tabs, there are individual tabs for each major assignment, and for any discussion forums assigned.

Weekly activities are scored and graded, and some may require collaborative learning and active participation, as well as sharing of thoughts and problem solving. Assignment will be scheduled ahead of time and posted to the appropriate Moodle tab in order to give learners time to read and comment on fellow participants’ work before the next module begins.

Class discussion/forums may periodically be assigned. To earn all participation points, you will need to make a substantive post about the assigned topic and respond substantively to your classmates’ posts (“Substantive” posts will include appropriately cited information from that week’s readings, as well as an organized and constructive central point). Specific instructions, times, and topics, for these posts will be posted on the Moodle “Discussion” tab.

I will post a discussion forum specifically for students to post questions to each other or comments about the application exercise. I encourage your discussion about these concepts.

## **Class Ground Rules:**

**E-mail Protocol –**

Students are expected to check their LSSU e-mail and Moodle frequently, at least 3-4 times per week. Only my lssu.edu email addresses will be used. You can expect your e-mail to be answered within 48-72 working day hours. Weekends will be variable. All email communication is to be respectful and professional. **Voice mail and e-mail are not always 100% successful at communicating our messages and can pose technical difficulties at times.** If you try to e-mail me or leave a voice mail or text on my cell phone and have not heard from me in a timely manner, contact me again to ensure that your questions or issues are addressed promptly. **Students are encouraged to contact me early and frequently to discuss any problems or concerns related to the course and/or how you are performing in the course.**

### Use of Technology During Class Room Sessions -

Students wishing to use lap tops during face to face classes must only use the lap top as part of the class activity for that day. No laptop may be used during guest or student presentations. Cell phones must be turned off or put on vibrate and used only for class purposes such as looking up research concepts during discussions.

### Attendance -

Attendance in this online course is recorded whenever you log into the course to actively engage with the learning content. This includes participation in discussion boards, viewing lecture videos, completing a lesson activity, and so on. It is advised that you log in often and participate thoroughly in order to benefit from the learning activities, which are designed to prepare you for real-world tasks as well as for the quizzes and exams you will take for the course.

### Absences -

The University expects regular on-line class attendance by all students. Each student is responsible for all academic work missed during any absences. When an absence is necessary, students should email the instructor as a courtesy and check for information and assignments. For extended absences (sickness, funerals, etc.) **students are to contact the Provost's office** per university policy. Please review the University Catalog for the complete policy on attendance.

### Class Participation and Discussion -

Students are expected to be prepared for each week's assignments by complete reading assignments, application exercises, view PowerPoint presentations, read the various references posted on Moodle, and actively participate and post to discussions. Intellectual freedom is encouraged in this class. Debate and disagreement are critical parts of the learning process. However, differences must be raised in a civil, non-personal way using active communication techniques.

### Assignments -

In an online course, you must be diligent to complete all your work on time. Each lesson in this course builds on the previous lessons, so if you fall behind you will not be able to keep up with the rest of the class. Late assignments **will not** be accepted except for legitimate **pre-approved (via e-mail) reasons** as determined by the instructor. Examples of legitimate reasons are: severe illness, death in family, etc.

### Changes in Class Syllabus or Schedule -

The instructor reserves the right to change portions of this syllabus and/or course schedule as needed. Students will be given appropriate time to adjust their schedules to any of the said changes. All changes will be announced in class and/or posted on Moodle in the “Assignments” folder.

## Exam Policies -

6. Exams will comprise a significant portion of the course grade.
7. Students are expected to take exams on the day they are scheduled. Exams may not be made up after the due date unless arrangements are made with the professor **prior** to the date of the exam. **An unexcused absence on a day when a test (including final exam) is given will result in a zero. Excused absence notification must be received by the professor via email at least 24 hours prior to class.**
8. After each exam, a review may be held in the next class video session of questions missed by a significant portion of the class. Students should expect to find questions on the final exam based on the material reviewed.
9. Students are expected to maintain the confidentiality of the exam questions.
10. Students taking any exam prior to the class exam must get it **PRIOR** approved by the instructor and must **NOT** discuss ANY information pertaining to that exam with ANY persons. If it is discovered that ANY information regarding the exam has been shared, EACH student involved with the breach will receive a ZERO on the exam and may be disciplined accordingly

## Papers -

### APA Format Requirements

- Nursing and several other behavioral and social sciences utilize the Publication Manual of the American Psychological Association (APA) to cite sources and better communicate their research findings more clearly and concisely. There are several standards that are required for proper usage of APA format that is required by many of the nursing journal publishers. APA (2010) format is required for all papers in the school of nursing for structure, format, and references. (i.e. This means all assignments will have a title page and reference list, and **MOST IMPORTANT, proper “within text” citing and reference list citing**). Instructions and Resources on how to use APA and writing “scholarly papers are available on the Moodle APA tab.

## Grading of Assignments-

Grading of assignments, papers, and poster presentations, will be evaluated based on the content and format using the **wholistic grading rubric (see Appendix A)** for each assignment. Papers will be due on the date and time indicated in the course schedule and posted on the Moodle assignment tab.

- The grade for late papers (after the exact time noted on the syllabus) not **prior** approved by the instructor will be reduced by 5% per day (including weekends) starting from the grade (points) originally assigned to the paper.
- **IMPORTANT:** You are asked to submit:
  4. one hard copy of your paper in class

5. an electronic copy of your paper posted on the Assignment tab on Moodle by the date and time indicated on the course schedule in the syllabus
  6. A completed APA checklist.
- When naming a document use the following format: Your **last name & the Document name** (e.x.\_Reynolds\_CAT Poster Draft or it will be returned to you to rename. If it is returned to you it must be resubmitted prior to the deadline for submission, or it will be considered late.
  - Reading and critiquing your papers is important to me and I will spend the time providing you the feedback you deserve. It may take as long as **2 – 3 weeks** to complete all the grading of your papers. If you have any questions about writing your next paper before you receive your grade on the prior paper, *make an appointment with me to review your paper.*

## Moodle Learning Management System -

Moodle will be the electronic course platform that can be accessed through [www.my.lssu.edu](http://www.my.lssu.edu)

Course announcements will be made either in class or through Moodle announcement feature.

In the case of class cancellation for inclement weather or any other reason, an announcement will be posted on Moodle along with a plan for making up the lost time. Please let me know if you have any questions or concerns, or if you experience any problems accessing course materials or notices as soon as you identify a problem.

## Assignment

### Weekly application exercises

Each week there will be an application exercise that accompanies the chapter/s we will be covering. The application exercises in this course are designed to promote critical thinking and discussion and are similar to the short answer questions that will be on the exam (exams are made of about 60% multiple choice questions, and 40% scenarios with short answers similar to the weekly exercises).

The **application exercise for each application will be posted for each chapter in Moodle.** Although some questions can be answered yes, or no, it will be important for you to **explain** your answer. Throughout the semester, you will find that some of the questions can be interpreted in different ways based on the assumptions you make about the study design. If you **state your assumptions/rationale** to support your answer, and it is correct, I will follow your line of thinking and give you credit for your answer even though it may be different from the answer in the text.

Students should post their exercise on a Google Doc using the Google Doc for the whole semester.

We will review the application exercises in the “answer video” There is not always "one" right answer, the questions are **designed to stimulate critical thinking** about the key principles in the chapter. Caution: When reading the scenario try not to “read too much into it”. If the author does not address the issue in the scenario then you can report the study does not address the issue.

I will post a discussion forum specifically for students to post questions (Q&A) or comments about the application exercises or anything else that is concerning about the class. I encourage your discussion about these concepts.

Application exercises will be **graded on a pass/fail basis**, as they are designed as a discussion tool and will be part of the attendance/participation grade. To obtain a passing grade the application exercise must be posted to Moodle. No late entry's or hard copies will be accepted without instructor approval.

## Assignment

### 434 Nursing Research Course Learning Activities

#### Critically Appraised Topic (CAT) Assignment.

For this assignment a CAT is like a shorter and less rigorous version of a literature review, summarizing the best available research evidence on a **topic**. Usually several studies are reviewed in a CAT. When professionals summarize a single topic, the outcome is a **critically appraised paper (CAP)**. Evidence-based practice in nursing begins with the identification of a clinical problem or issue that requires review, definition, judgment of interventions, or application of evidence. Your project is to identify a clinical research issue related to evidence-based nursing practice and in addition show how this research can be applied when developing evidence-based practice (EBP) nursing interventions. **[Students are encouraged to make an appointment with me to discuss topic ideas for this project to help narrow down a topic to a manageable level].**

#### Researching the CAT Problem Statement

##### Reviewing the Literature on Your Topic

The use of systematic reviews, meta-analysis, and primary studies along with Clinical Practice Guidelines are recommended. At least eight (8) articles will be utilized and properly referenced, within the paper and your poster.

##### Writing the CAT Solution/Nursing Intervention

This assignment is a two-part literature search. Once the topic has been decided, students will do a literature search on the topic to write the **problem statement** (see rubric below and Polit & Beck, 2018, p 95.). Once the problem has been identified, students will conduct a second literature review to identify and present an **evidence based independent nursing intervention** reported in the literature found to be successful at addressing the problem.

#### Critically Appraised Topic/Literature Review Paper

##### Criteria and Topic Emphasis

The final research paper will be no longer than **8 pages** (not including title page or references) with no less than **(8)** references and will be graded using the holistic **grading rubric** (see Appendix A). Paraphrase your sources, **DO NOT USE QUOTES**. I want to hear your paraphrasing of what you are referencing.

CAT/Literature Review Paper Criteria and Topic Emphasis		Topic Emphasis
<b>Abstract (150- 250 words)</b>		5
Although abstracts are presented first in an article, they are written last. Abstracts are often the ONLY part of an article that a reader will read and are written to briefly summarize the content of your paper.		
3. Under the abstract, include the <u>key words</u> you used in searching for your articles. Keywords are listed just below your abstract (see APA manual).		
4. Include a <u>PICO Question</u> that would be appropriate if you were to actually conduct a study on your topic (place your PICO question below the key words in your abstract)		
<b>Problem Statement (2-3 pages)</b> (see Ch 6, P & B text p. 95)		
4. <b>Problem:</b>		10
a. Identify the major underlying problem you identified in your readings related to your topic. ( <b>Example of Postpartum Depression as a topic</b> ) Ask yourself, “why is this problem important to nursing? (What is wrong with the current situation?) (e.g. <b>Problem:</b> women won’t admit they have symptoms of Postpartum Depression and it goes untreated for long periods of time).		
b. What is the <b>Scope</b> of the problem (How big is the problem and how many are affected? Cite the prevalence and incidence, <b>report the DATA</b> ).		
5. <b>Background:</b>		10
a. Identify all the reasons you identified to that explain why your problem exists ( <i>Example: Depression carries a significant negative <u>stigma</u>, women <u>fear</u> no one will understand, women are <u>ashamed</u> to admit they are unhappy after their delivery).</i>		
b. How big are the problems you bring up in the background? How many are affected? <b>Report the DATA</b> , the prevalence and incidence.		
6. <b>Consequences:</b>		10
a. What are the consequences of not fixing the problem)? ( <b>Example:</b> prolonged undiagnosed postpartum depression or postpartum psychosis can lead to suicide or infanticide).		
b. How big are the problems you bring up in the background? How many are affected? <b>Report the DATA</b> , the prevalence and incidence of the consequences you identified, provide the statistical/data.		
<b>Theoretical Framework (1- 2 paragraphs)</b>		5
This supports the problem or protocol/intervention you selected. You do not have to use a nursing theory; shared theories are acceptable in research papers. You may also use “ground theory” to base your paper on.		
<b>Independent Nursing Intervention/Protocol (1- 2 pages)</b>		
5. <b>Identify the role the nurse will have when caring out this intervention</b> i.e. hospital or home nurse, staff development coordinator, school nurse, nurse leader/administrator, nurse practitioner, nurse lobbyist, etc. ( <b>Example:</b> OB Postpartum nurses)		10
6. From your literature search, indicate what <b>independent nursing intervention/s (INI)/protocol</b> you identified that <i>best</i> addressed the problem, for example. Examples of INI include:		30
a). <b>Providing direct patient care</b> (e.g. routinely screen postpartum women’s risk for postpartum depression after delivery and before discharge from the hospital)		
b). <b>Teaching/educating</b> individuals, patients, families, or groups in the community (e.g. school nurses can educate athletic coaches, parents, and athletes about the prevention, identification, and tx. of concussions using CDC’s “Heads Up” toolkit.		
c). Teaching/educating/orienting other nursing staff as <b>Nursing Staff Development Coordinator</b>		



<p>d). <i>Establish policy or procedures as an administrator</i></p> <p>e). <i>Lobbying decision makers (Example: Require universal postpartum depression screen of all mothers before leaving any Michigan hospital after delivery)</i></p> <p>7. <b>Report the EBP</b> you found in the literature related to your INI. At least 3 of your references need to relate to the EBP-INI you are recommending to address your problem.</p> <p>8. <b>Report the Evidence (DATA)</b> you found in the literature to show the INI has been effective in addressing the problem you selected.</p>	
<p><b>Summary/Conclusion</b> (1-2 pages)</p> <p>Summarize your paper to include a brief review of the problem, scope, and consequences along with your proposed solution. State <b>KEY</b> statistical data as your evidence to support your nursing intervention. <b>NOTE:</b> When reading research articles, readers will often read just the abstract and/or your conclusion, so summaries are a brief report on what you have said throughout your paper.</p>	5
<p>APA Format for title page, body of the paper, and reference list (<b>use it!!!</b>) <b>Paraphrase sources “with-in text”, NO QUOTES!!</b></p>	15
<p><b>Total</b></p>	<b>100</b>

## Assignment

### Poster of Critically Appraised Topic

#### Poster of Critically Appraised Topic

Your poster summarizes the information from your CAT/literature review paper. **Please Note: The poster should not be a cut and paste from your paper. Less is more when making up a poster.** Follow the directions posted on Moodle as to how to create the PowerPoint and how to format the content of the poster.

Include the following text boxes on your poster:

<p><b>CAT/Literature Review Paper Criteria</b></p> <p><b>Have Text Boxes with the Following Headings</b></p>
<p><b>Title:</b> The title does not have to take the form of a question, but it should have your P, I, &amp; O somewhere in the title.. May use a colon to separate a creative title from the PIO title. Under the title (in a smaller font size), place your full name, Student Nurse, Lake Superior State University</p>
<p><b>Problem :</b> (include the statement of the problem, background, and consequences in this section of your poster see p. 102 in the text) <b>Present your data</b></p>
<p><b>Literature Review &amp; DATA</b> you found as <b>EVIDENCE:</b> (Write a brief annotated bibliography of your key references from the literature <b>CLEARLY REPORTING</b> the statistics “<b>DATA</b>” and what they mean.</p>
<p><b>Theoretical framework</b></p>
<p><b>Proposed Solution/Independent Nursing Intervention/Protocol:</b></p> <ol style="list-style-type: none"> <li>Describe the domain (place) and the role of the nurse in which the intervention/protocol takes place.</li> <li>Present your intervention (based on the evidence that you identified as effective in your literature review). Think of this as the “<i>So WHAT can a NURSE do about this problem</i>”? Now that you have the evidence say that <i>hospital nurses, as an educator, school nurse, or RNP, DON, CNE...etc. can do about this problem</i>”.</li> </ol>

<b>Graphs/Figures:</b> There are <u>special formats for utilization of tables, graphs/figures (Students MUST refer to APA Manual p. 158)</u>
<b>Conclusion/Discussion</b>
<b>References</b> (NOTE: Use MLA to reference within the poster and in the reference list to save room. Do <u>not</u> use APA format see example of posters from prior students in nursing lab hallway)

## Grading of Posters

The poster represents all you have learned in the research class over the semester and is displayed outside the nursing lab for all to see. I will read and edit each poster submission and provide students the opportunity to re-submit their posters after correcting the identified areas of weakness. Students will be given a grade for each submission. If a student receives a 100% on the first submission, they will automatically receive 100% on the “second submission”.

### Poster Evaluation Rubric Criteria

<b>Poster Evaluation</b>	<b>Points of Emphasis</b>
Poster is readable from 3 - 4 feet	10
Problem statement clearly reflects its significance to nursing practice	20
Adequate amount of data is presented that supports the evidence-based practice using statistical terms and numbers i.e. p-values, confidence intervals, percent with # of subjects	25
Tables/Graphs/Figures/Pictures aid the reader to quickly understanding the data/evidence which must be referenced within the body of the poster and properly labeled per the APA manual on tables and figures.	20
The role of the nurse is clear and the intervention/protocol is detailed enough to inform the reader of the recommended nursing intervention/s supported in the literature	20
Affective impact of poster	5
Total	100

**Best Poster Certificates will be Awarded based on students vote on:** Best title; best presentation; best evidence; best affective impact; and best poster “over-all). Ties are broken based on “who wrote the better paper”.

### Poster Presentation

Dissemination of Your Evidence Based Critically Appraised Topic at the end of the semester, you will present your final critically appraised topic as a poster presentation to your classmates, faculty, family, and other students, which will include the following assignments. Each student will prepare a five-minute summary to “walk the audience through their poster”. Do not read from the poster. Instead, give the big picture; explain why the problem is important and report **THE**

**DATA YOU FOUND TO SUPPORT YOUR FINDING! THIS IS THE EVIDENCE IN EBP!** Use graphics or figures on the poster that illustrate and support the findings and the protocol addressing the problem. The students are expected to be professional, organized, and well prepared in their responses to faculty and peers' questions. **Correct grammar and research terminology are expected.** Students are encouraged to contact the course faculty to discuss any questions or concerns related to the projects.

## Assignment

### Quantitative Study Critique Assignment

Students will critique and quantitative and a qualitative research article assigned by the professor. Instructions are posted on the "Critiques" Moodle Tab.

#### Appendix A

#### HOLISTIC ASSESSMENT SCALE

<b>98 – 100%</b>	<b>A+</b>	Original or independent approach to the discussion of topic.
<b>92 – 97%</b>	<b>A</b>	Very clear logical explanation. Good approach to the discussion. Well written.
<b>90 – 91%</b>	<b>A-</b>	Well-supported concepts with appropriate examples & aware of broader context. Diction/choice of words remarkable for understanding, and/or vividness. Superior sentence structure, sentence variation. Superior paragraph unity and flow, often using transitional words and phrases. Free of serious errors in grammar and APA mechanics.
<b>88 – 89%</b>	<b>B+</b>	Coherent, consistent approach to the understanding and discussion of topic. A few errors in grammar and/or APA mechanics.
<b>82 – 87%</b> examples.	<b>B</b>	Good logical explanation and understanding of concepts and terms with supporting  Good organization of ideas and choice of words Weak sentence structure/paragraph unity/flow. Some errors in grammar and/or APA mechanics.
<b>80 – 81%</b>	<b>B-</b>	Adequate understanding of concepts and terms with some examples. Fair organization of ideas and choice of words Weak sentence structure/paragraph unity/flow. Some errors in grammar and/or APA mechanics.
<b>78 – 79%</b>	<b>C+</b>	Shows weakness in logic, terms, and/or examples. Poor flow of ideas. Limited understanding of key concepts and terms.

		Several errors in grammar and/or APA mechanics.
70 – 77%	C	Poor sentence structure, not consistent. Choice of words shows poor understanding of concepts and terms Several errors in grammar and/or mechanics.
68 – 69%	C-	Poor understanding and explanation of the key concepts and terms Choice of words barely adequate. Several errors in grammar and APA mechanics.
66 – 67%	D+	Explanation of the topic inadequate. Faulty logic, lack of precise examples, erroneous facts, inconsistent ideas.
60 – 65%	D	Weak organization. Weak sentence structure. Very little paragraph unity. Choice of words shows weak vocabulary. Many serious errors in grammar and mechanics.
58 – 59%	D-	Virtually no explanation of the topic. Unsatisfactory logic. No supporting examples of facts. Poor organization/word choice. Unusually brief indicating lack of ideas on the topic. Numerous errors in grammar and mechanics.
57%	F	Completely off the topic. No redeeming features. Numerous errors of all kinds.

## Appendix B

### F18 APA Checklist for Scholarly Papers

6<sup>th</sup> Addition Publication Manual of the American Psychological Association

<file:///E:/235%20Informatics/F17/APA6thEdition%20Scanned%20PDF.pdf>

#### INSTRUCTIONS:

- After you are sure that your paper meets the APA criteria, check each box to show that your paper has met the proper APA formatting. **WARNING:** If your paper in fact does not meet the guidelines, and you have checked that it did, you will receive one point off for each time you checked the box and indicated your paper met the criteria, when it actually didn't.
- Use the "How to Properly Reference Sources using APA" to AVOID PLAGIARISM when writing papers.

#### Formatting Your Paper (pp. 228 – 231)

- Margins:** Format the page using a 1" margin at the top, bottom, left, and right of every page
- Font:** Times New Roman
- Line Spacing:** Hit the space bar twice between all periods at the end of your sentences (p. 229)
- Left Justify:** Use left justify feature, with word wrap, and don't break up words with hyphenation at the end of a line (p. 229).
- Paragraphs:** Use the tab key to indent every paragraph ½ inch or 5 – 7 spaces. (p.229)

#### Title Page (p. 23)

- Font:** NOTE: The Running head font usually needs to be changed to Times New Roman as the default is NOT Times New Roman.
- Header:** Use Insert page number to make the header. Type **Running head** NOTE: Only the R is capitalized in Running head: . Space twice after the colon and type the title of the paper in ALL CAPTIAL LETTERS (You may abbreviate the title of your paper in the Running head so that it is not longer than 50 characters including the spaces)
- Page number:** Once the Running head: and the title in all CAPS is typed, use the space to get the page number in the Upper right corner and the word Running head in the left corner.
- Title:** Use Upper and Lower Case Letters in the Title, center it on the page in the upper half of the page (p.23).

### **Abstract (p.25)**

Consult with your instructor to see if an abstract is required for your paper. They are not always required.

- Title:** Write Abstract and center it on the page. Do not bold the word.
- Indentation:** If an abstract is required for your assignment, write it as a single paragraph and DO NOT INDENT the first sentence (p.27)
- # of Words** Do not exceed the word limit of **250**

### **Second Page (p.27)**

- Header:** Remove the word *Running head:* from the second page leaving only the TITLE OF YOURPAPER in the header which should show up on each subsequent page. (NOTE: The instructions on how to remove the word *Running head* from the second page Depending on the version of your Micro-soft Office you may need to Google how to do this e.g. go to “Header & Footer Tools” > Different first page.
- First Line:** Repeat the Title of Your Paper using Upper and Lower Case, center it on the page, and do not bold it.
- 1<sup>st</sup> Paragraph:** Type your first paragraph. DO NOT use the heading **Introduction** (p. 27), APA says the introduction is implied, and it is clearly identified by its position the in the paper.
- Headings:** There are five possible levels of headings (p. 62). Unless instructed to follow specific wording for your headings, authors are able to name the header anything that helps clarify the content of the paragraph/s and improves the flow of the paper.



**3<sup>rd</sup> Person:** Scholarly papers are written in the 3<sup>rd</sup> person.

**Numbers:** Spell out all numbers less than 10, and never start a sentence with a number.

**Abbreviation:** Do not start a sentence using an abbreviation.

Spell out the complete word and then put the acronym in parenthesis after it e.g. Center for Disease Control and Prevention (CDC). Subsequent references should only be cited using the Acronym (CDC).

**Percent/%** Use the % sign when it is preceded by a numeral. Use the word percentage when a number is not given (p.188).

**Ampersands:** Do not use ampersands within text, Spell out the word “and” within the body of your paper (within text), however, they may be used within the parenthesis.

**2° Sources** Use these sparingly. Give the secondary source by naming the original work and give citation for the secondary source e.g. Smith’s diary (as cited in Nicholson, 2003) p.178).

**Citing in Text:** Cite only the author and date (p. 174) within text. Do not include the title of the reference article or source within text.

**Scholarly:** Write in a scholarly tone using professional jargon/vocabulary. Scholarly papers do not endorse the use of a creative writing approach, rather a paper that would be understood by persons in the profession reading professional peer reviewed journals.

**Suggestion:** Go to the APA manual pp. 41 – 51 for sample papers

### Appendix Cover Sheet

Use a copy of this cover sheet for each document submitted. Evidence supporting the questions and narratives does *not* need to be electronically added to this Program Review form. One option is to use this cover sheet to add content to directly this Word document. A second option is to submit separate documents along with the form, also using this cover sheet for each document provided.

Send email with supporting documentation to: [TRACDAT@lsu.edu](mailto:TRACDAT@lsu.edu), with a cc to your dean, or submit as a hardcopy to your dean.

<b>School:</b>	<b>Nursing</b>
<b>Document Title (if attached) or Filename (if emailed):</b>	<b>Appendix IV: 2015 LSSU SON SelfStudy for CCNE</b>
<b>This documentation is relevant to Question number:</b>	<b>5</b>
<b>Briefly summarize the content of the file and its value as evidence supporting program review:</b>	<b>Reports and Responses from Commission on Collegiate Nursing Education (CCNE) Program Accreditation</b>



School of Nursing: Bachelor of Nursing Program  
Self-Study for CCNE – December 2014



## TABLE OF CONTENTS

### INTRODUCTION

#### **STANDARD I - Program Quality: Mission and Governance**

- Key Element I-A
- Key Element I-B
- Key Element I-C
- Key Element I-D
- Key Element I-E
- Key Element I-F

#### **STANDARD II - Program Quality: Institutional commitment and Resources**

- Key Element II-A
- Key Element II-B
- Key Element II-C
- Key Element II-D
- Key Element II-E
- Key Element II-F

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

- Key Element III-A
- Key Element III-B
- Key Element III-C
- Key Element III-D
- Key Element III-E
- Key Element III-F

#### **STANDARD IV - PROGRAM QUALITY: Program Effectiveness: Assessment and Achievement of Program Outcomes**

- Key Element IV-A
- Key Element IV-B
- Key Element IV-C
- Key Element IV-D
- Key Element IV-E
- Key Element IV-F

**APPENDICES:**

- Appendix I:** University Organizational Chart
- Appendix II:** Faculty Profile Form AFY15
- Appendix III:** School of Nursing Bylaws
- Appendix IV:** Suggested Course Pattern for BSN Nursing Curriculum Admission to Nursing Clinical Courses
- Appendix V:** Course Sequence Post-Licensure BSN Track
- Appendix VI:** School of Nursing Curriculum Change Tracking Tool

## Introduction

### Lake Superior State University

Lake Superior State University (LSSU), located in Sault Ste. Marie, is in Michigan's Eastern Upper Peninsula and is a personal, small-town school that provides a superior blend of liberal and technical studies in a natural setting. LSSU was founded in 1946 on a 73-acre site, once the site of historic Fort Brady. In 1965, the Michigan State Board of Education approved on a temporary basis, three year programs in Biological Sciences, Business Administration and Medical Technology. In 1966, the Board of Education recommended four-year status and a community college role. In July, 1969 a legislative bill was signed making Lake Superior State College, Michigan's twelfth state-supported, four-year institution of higher learning, effective January 1, 1970. In 1987, University status was granted establishing the institution as Lake Superior State University.

### Lake Superior State School of Nursing

The Lake Superior State School of Nursing (SON) presently resides under the umbrella of the College of Nursing and Health Sciences effective August 1, 2011. Currently, the SON provides an accredited Bachelor of Science in Nursing (BSN) - pre-licensure track and an RN to BSN completion track. Total nursing student enrollment for 2014-2015 is 132 students in the four-year BSN pre-licensure track and 9 part-time students in the RN to BSN completion track for a total of 141 nursing students. The average age of our nursing students is 24; median age of all students is 22 with only about 18 percent representing minority students. Enrollment of male students remains at 16 percent.

LSSU SON is unique with its international nursing and healthcare system experience as some of our clinical sites are located in Canada. However, a vast majority of clinical nursing experience is obtained primarily at hospitals and community agencies within and the surrounding areas of Sault Ste. Marie, Mackinac Straits, Escanaba, and Petoskey, Michigan. Students also have the additional opportunity to practice learned skills in the nursing campus labs at the University and to demonstrate them in the offsite Simulation Center. A combination of these experiences provides students with the opportunity to acquire knowledge, values, and the skills necessary for the practice of professional nursing.

### History of the LSSU School of Nursing

The first nursing education program at Lake Superior State College was a Practical Nursing Program in 1968. In September 1970 the College initiated a two-year Associate Degree in Nursing (ADN) program and ended the Practical Nursing Program. In 1975 the length of the ADN Program was increased to three years in length; a pre-clinical year was added, with nursing course expanded to include more theory and clinical experience. The National League for Nursing accredited the ADN Program from January 1983 until its closure.

The College recognized the trend of entry into professional practice at the baccalaureate level and added the Bachelor of Science (BSN) Program in September 1974. This program was designed as a completion program for registered nurses seeking a baccalaureate degree. In September 1985, a four-year BSN pre-licensure track replaced the ADN Program. Since that time 31 classes have graduated from the four-year BSN for a total of 832 graduates.

The Bachelor of Science in nursing program at Lake Superior State University was initially granted accreditation by the National League for Nursing in 1984. The re-accreditation in 1992

included the four-year BSN pre-licensure track as well as the original RN-BSN completion track. The BSN programs were also reaccredited in 2000 and 2008 by the National League for Nursing and by the Michigan Board of Nursing within the Health Professions Licensing Division of the Department of Licensing and Regulatory Affairs.

### **Faculty at LSSU School of Nursing**

Currently there are 13 full-time and 2 part-time permanent faculty in the SON. Thirteen percent of faculty is doctorate-prepared with another thirteen percent currently enrolled in a doctorate program. The remaining seventy five percent of the permanent nursing faculty are masters level prepared. Refer to LSSU Faculty/Adjunct profile form for a list of faculty and adjunct profiles in the document resource display room.

### **Standard I**

#### **Program Quality: Mission and Governance**

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

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

- congruent with those of the parent institution; and

- consistent with relevant professional nursing standards and guidelines for the preparation of nursing professionals.

### Program Response:

Our mission at the SON is to graduate competent students who are prepared to safely provide compassionate nursing care utilizing theory and evidence-based practice which aligns to the LSSU's mission to help students to develop their full potential. We serve the regional, state, national and global communities by contributing to the growth, dissemination, and application of knowledge. LSSU nursing graduates self report success in a wide variety of nursing roles throughout the United States and Canada. Graduates continue to excel in graduate education and nursing leadership roles as demonstrated by reports of success as faculty in higher education and leadership positions in major health care institutions.

The SON is in alignment with our University Vision Statement "Our programs grow and evolve in ways that keep our graduates at the cutting edge of technological and societal advances". The SON will be viewed by our constituents as:

- The preferred regional choice for students who seek a quality education, which provides a competitive edge in an evolving job market.

While LSSU nursing provides opportunities for quality education for all students, the majority of SON students come from the northern lower and upper peninsula of Michigan.

- An institution where relevant concepts are taught by quality faculty, and are paired with practical real-world experience to provide a well-rounded education.

LSSU prides itself on employing quality faculty with extensive nursing practice experience. Many of our faculty are employed with 15 or more years of practice prior to entering higher education as educators. Student's clinical experiences span a minimum of 5 institutions in the United States and Canada. To expand learning opportunities for students in clinical situations, all nursing clinical courses include use of the high fidelity simulation center for both scenario's and skill development.

- An institution, which capitalizes on its location to instill graduates with an understanding of environmental issues and an overarching desire to be responsible stewards of the environment.

Senior level students are routinely involved in community assessment and are exposed to both county and tribal community health systems.

- A University that is highly student centered and empowers all students to realize their highest individual potential.

Students are encouraged and supported to participate university governance, student nursing association, and nursing honor society. Faculty takes pride in their availability to support students through expanded office hours and open office policies, either physical or virtual. LSSU nursing graduates have gone on to successful

careers in nursing and leadership. Alumni report employment as health system directors, nurse educators and education administrators, leadership positions within state and federal health systems, as well as direct nursing care providers.

The mission statement, goals, and expected program outcomes are listed on the SON [website](#) and also in the [SON Handbook](#). The SON program outcomes were developed from The Essentials of Baccalaureate Nursing Education for Professional Nursing Practice [American Association of Colleges of Nursing (AACN), 2008).

AACN Baccalaureate Essentials	SON Program Learning Outcomes
<p><b>Essential I: Liberal Education for Baccalaureate Generalist Nursing Practice</b> A solid base in liberal education provides the cornerstone for the practice and education of nurses.</p>	<p><b>I. Liberal Education for Baccalaureate Generalist Nursing Practice</b> Appraises a solid base in liberal education for nursing practice</p>
<p><b>Essential II: Basic Organizational and Systems Leadership for Quality Care and Patient Safety</b> Knowledge and skills in leadership, quality improvement, and patient safety are necessary to provide high quality health care.</p>	<p><b>II. Basic Organizational and System Leadership for Quality Care and Patient Safety</b> Synthesizes knowledge and skills in leadership, quality improvement, and patient safety to provide quality health care</p>
<p><b>Essential III: Scholarship for Evidence Based Practice</b> Professional nursing practice is grounded in the translation of current evidence into one's practice.</p>	<p><b>III. Scholarship for Evidence-Based Practice</b> Evaluates research for potential application for evidence-based practice</p>
<p><b>Essential IV: Information Management and Application of Patient Care Technology</b> Knowledge and skills in information management and patient care technology are critical in the delivery of quality patient care</p>	<p><b>IV. Information Management and Application of Patient Care Technology</b> Designs knowledge and skills in information management and patient care technology in the delivery of quality patient care</p>
<p><b>Essential V: Health Care Policy, Finance, and Regulatory Environments</b> Healthcare policies, including financial and regulatory, directly and indirectly influence the nature and functioning of the healthcare system and thereby are important considerations in professional nursing practice.</p>	<p><b>V. Health Care Policy, Finance, and Regulatory Environments</b> Analyzes health care policies, including financial and regulatory, directly and indirectly influencing the nature and functioning of the health care system</p>
<p><b>Essential VI: Interprofessional Communication and Collaboration for Improving Patient Health Outcomes</b> Communication and collaboration among healthcare professionals are</p>	<p><b>VI. Inter-professional Communication and Collaboration for Improving Patient Health Outcomes</b> Appraises communication and collaboration among health care professionals and patients to deliver high quality and safe patient care</p>

critical to delivering high quality and safe patient care.	
<b>Essential VII: Clinical Prevention and Population Health</b> Health promotion and disease prevention at the individual and population level are necessary to improve population health and are important components of baccalaureate generalist nursing practice.	<b>VII. Clinical Prevention and Population Health</b> Determines health promotion and disease prevention at the individual and population health levels
<b>Essential VIII: Professionalism and Professional Values</b> Professionalism and the inherent values of altruism, autonomy, human dignity, integrity, and social justice are fundamental to the discipline of nursing.	<b>VIII. Professionalism and Professional Values</b> Emulates professionalism and inherent values of altruism, autonomy, human dignity, integrity, and social justice
<b>Essential IX: Baccalaureate Generalist Nursing Practice</b> The baccalaureate graduate nurse is prepared to practice with patients, including individuals, families, groups, communities, and populations across the lifespan and across the continuum of healthcare environments. The baccalaureate graduate understands and respects the variations of care, the increased complexity, and the increased use of healthcare resources inherent in caring for patients.	<b>IX. Baccalaureate Generalist Nursing Practice</b> Synthesizes nursing practice with patients, individuals, families, groups, communities, and populations across the lifespan and across the continuum of health care environments and the variations of care, the increased complexity, and the increased use of health care resources inherent in caring for patients

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

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

#### Program Response:

It is the responsibility of the SON outcomes committee to periodically review and revise mission, goals and expected student outcomes, in conjunction with the SON Student Activities Committee (SAC). Recommendations for revision of the mission, goals, and expected student outcomes are made to the SON faculty as a group for discussion and agreement as documented in materials and minutes of the faculty meetings. Input from the communities of interest is obtained through the Nursing Advisory Board, which meets twice a year to discuss relevant nursing program outcomes and make recommendations and provide feedback on graduated students. The membership of the Nursing Advisory Board is primarily composed of representatives of our clinical agencies. Students are included in the communities of interest and actively participate as members of the SON committees and as invited guests at the Nursing Advisory Board meetings.

Faculty schedule a minimum of 2 annual day long retreats to address issues of mission, goals and student learning. There are five standing committees; Nursing Department, Student Affairs, Curriculum, Outcomes, and Learning Resources. See appendix 3. These committees meet a minimum of three times per semester.

The faculty supports the use of accepted standards for program outcomes as evidenced by the inclusion of AACN Baccalaureate Program standards, QSEN, American Nurses Association - Standards and Scopes of Practice, Ontario Compendium of Care Standards, International Nursing Association for Clinical Simulation and Learning - Standards of Best Practice: Simulation, and other practice focus standards.

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

**Program Response:**

The SON expected faculty outcomes are defined by the Agreement between LSSU AND LSSU Faculty Association MEA-NEA: Effective August 4, 2014 through August 31, 2017. In addition to this, the SON expected faculty outcomes are aligned with the LSSU faculty handbook.

The Faculty Contract identifies four outcome categories; student learning, advising/student support, scholarly activities, and service activities. Each school is expected to determine the percentage of weight given to each category for assessment and formal evaluation purposes. The School of Nursing developed and adopted the following model in August of 2014:

Faculty Status	Tenure track 0-2years and Non-tenure track/PT faculty	Tenure track-3 years to tenure	Tenured faculty
Student Learning	80%	70%	65%
Advising/student support	5%	10%	10%
Scholarly activities (as defined by Boyer)	10%	10%	10%
Service activities	5%	10%	15%

Faculty are expected to maintain the necessary expertise in their field of teaching and are strongly encouraged to use accepted teaching and learning principles. Review of appropriate course/faculty assignment is the responsibility of the college Dean. Tenure track and permanent part-time faculty are required by contract to submit a teaching qualification form which includes a list of courses the faculty is qualified to teach, with support either through education or experience for each listed course. The Dean is responsible to review and either accept or deny. It is customary that the Dean will discuss any potential denials of course teaching approval with the school chair. Approval



of adjunct faculty is made by review and approval by the School of Nursing faculty of CV's and transcripts of potential adjuncts. Clinical adjuncts must demonstrate success in their clinical area, with a preferred level of experience of 4 years or greater in the practice area and have earned a minimum of a BSN (MSN preferred). In cases where individuals have demonstrated expertise, but lack 4 years of experience, they are assigned to team taught positions.

All non-tenured permanent faculty are evaluated by the Chief Nurse Administrator annually. Tenured faculty are evaluated no less than once every five years. Per the new contract an annual report of activities that encompasses the areas of student learning, advising, scholarly activities and service activities must be submitted beginning in May 2015. Activities regarding scholarly and service learning are historically viewed as critical factors when faculty seek promotion. To assist faculty to obtain personal educational resources, the university provides \$1000 per year for professional development. Nursing faculty have used their funds in the following manner (documented in PDF binder -Resource Room):

- Graduate tuition reimbursement
- Certification reimbursement (ACLS, BCLS, CNE)
- Continuing education courses
- Professional Conferences (NLN, Simulation, Education, Professional topics)
- Computer hardware and software for teaching and learning

In addition the department may cover entire cost of faculty learning activity if necessary to meet program goals.

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

##### **Program Response:**

Participation in program governance by faculty and students is taking place as documented in the minutes and attendance records of the different committees. The SON faculty created and is governed by the SON Bylaws (APPENDIX III). These Bylaws provide a unified approach to the development, planning, and implementation of the nursing programs in the SON. The Bylaws are consistent with University policies, practices, and agreements in order to provide a systematic process for overall program governance.

One student representative from the generic BSN program is elected to each committee and LSSU SON faculty participates in regular SON committee meetings. Students representatives are nominated by Lake State Student Nursing Association and/or SON faculty. The SON committees are comprised of the Student Affairs Committee (SAC), Curriculum, Outcomes and Learning Resources committees. Under the oversight of the Chief Nurse Administrator, SON committee members discuss items and make program recommendations related to the mission of the SON. The Chief Nurse Administrator and Chair of the SON lead these regular meetings where recommended changes are discussed, approved and a plan for adoption is made. SAC is then responsible for

updating the appropriate policies and disseminating this information to communities of interest.

### **Areas of Concern and Action Plan for Standard I D**

Minor modifications are necessary to the SON bylaws to reflect changes in LSSU governance. Issue will be addressed in 2015.

Currently there is no formal process for attaining student representation and program governance participation on SON committees from the BSN completion track students. Informal meetings are held, usually during the first and last class of the completion cohort with the Dean. Completion student concerns are routinely addressed by the regional center directors in Petoskey and Escanaba, Michigan and forwarded to the student's advisor. In past years, BSN completion students have been offered to participate as student representatives, with little to no response. With the advent of electronic meeting attendance through Skype™/Facetime™, the Chief Nurse Administrator will offer the opportunity for BSN completion students to participate in the Advisory Council meetings held each semester. The Chief Nurse Administrator or SON chair will conduct at least one annual regional site formal meeting with completion students.

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

#### **Program Response:**

The SON handbook and resources are reviewed annually by the SON standing committees and revised regularly in order to assess congruence with LSSU policies and requirements. Recommended changes are discussed and approved by the SON faculty. The BSN SON handbook is the primary resource document. The SAC is responsible for updating the handbook yearly and communicating updates to constituents via the Nursing Student and Faculty Portal on Blackboard, as well as on the SON webpage(<http://www.lssu.edu/nursing/>). Any changes that require student response are communicated through official campus email.

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

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

#### **Program Response:**

LSSU Academic policies related to student recruitment, admission, retention, and progression, support achievement of the program's mission, goals, and expected student outcomes and are available on the LSSU [website](#). A member of the nursing faculty sits on the University Policy and Procedure committee and represents the SON perspective related to the policies being presented to the committee for approval or revision. Currently this same faculty person also sits as the Chair of the SON-SAC, which is responsible for identifying congruence between the SON program policies and procedures defined in the BSN Handbook and the University, LSSU student [handbook](#), as well as

other official documents such as the LSSU Student Consumer Policies [required to be disclosed to students by the Higher Education Opportunity Act of 2008 (HEOA)]. In addition, the SAC follows a defined schedule whereby LSSU-SON policies are regularly reviewed for congruence between the university policies and LSSU-SON policies (Annual SON Systematic Program Evaluation Plan is available in the resource document display room).

Additional university policies are defined in LSSU faculty handbook . The LSSU Faculty Handbook is prepared and maintained by the office of the Provost and Vice President for Academic Affairs Administration, in consultation with the Faculty Association Executive Board, and the LSSU Shared Governance Oversight Committee. These committees regularly review and recommend revisions and additions to policies and procedures affecting LSSU faculty. The electronic version of the Handbook is considered the official version; and changes that may be made throughout the year are communicated via email from the Provost's office. Faculty in the SON are directed to the SON Faculty Bylaws (Nursing Department Bylaws Approved 1-2013.pdf in Appendix III), SON Orientation Handbook (located in the nursing office), or the faculty committee meeting minutes for policies or procedures not found in the university (LSSU) documents.

<b>Policy</b>	<b>LSSU</b>	<b>SON Policies</b>
<b>Grading</b>	C grade is a 70%	C grade is 72%
	Course failure is F	Course failure is C-
<b>Dress Code</b>	No dress code	Specific requirements regarding clinical uniform, physical appearance, and personal hygiene and odor outlined in student BSN handbook.
<b>Tobacco</b>	Smoking or use of tobacco prohibited within any public building on campus and within 20 feet of a university facility.	In addition to LSSU policy, SON prohibits the use of tobacco products in any public health care and clinical setting. This is congruent with State law.
<b>Drug &amp; Alcohol</b>	The use of drugs and alcohol are prohibited on campus in accordance with alcohol policy.	In addition to LSSU's drug and alcohol policy, the SON has additional language to support mandatory drug and alcohol screening when appropriate. This is outlined in the student BSN handbook.
<b>Code of Conduct</b>	<u>Student Code of Conduct</u>	In addition to LSSU's student code of conduct, the SON requires compliance with the 'Student Nurse's Code of Conduct' located in the BSN Nursing handbook.
<b>Attendance</b>	Students expected to attend classes regularly and are responsible for completion of course requirements.	In addition to LSSU's policy, the SON adds language that clinical laboratory and other experiences are required components of course achievement. Components of this policy are found in the BSN student handbook.

<p><b>Grievance</b></p>	<p>Student concerns are addressed through a university-wide grievance procedure managed by the human resources department. An ombudsman is also in place for students.</p>	<p>Student concerns are addressed under the Student Appeals procedure located in the BSN student handbook. Prior to engaging in LSSU's grievance process, students with concerns are required to follow the internal student appeals procedure in the SON.</p>
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Both LSSU and SON policies are in alignment with the Higher Learning Commission (HLC) policy FDCR.A.10.070 Student Achievement.

## Standard II

### Program Quality: Institutional Commitment and Resources

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

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

#### Program Response:

Fiscal allocations from institutional funds, not including grants, gifts, and other restricted resources provide funding for the Nursing Skill's Lab (budgets July 2011 thru June 2014) totaled approximately \$100,000. At the Lake Superior State University Library Nursing Students have access to books, the latest journals, databases, and online video streaming. The library book budget for the School of Nursing and Health Sciences totaled \$80,477.69 during the fiscal years of 2011 thru 2014.

Off campus Lake Superior State University has a 2000 square foot Nursing Simulation Center housed in the SSMartzone business acceleration building about 1 mile from the University. Since its inception (Fall 2013) the total operational expense of the Simulation Center has been approximately \$800,000. These costs include state of the art simulators, as well as their accompanying software and equipment. In addition to donations and grant funding sources, the simulation program depends on \$45 per credit hour in nursing student fees and \$120,000 per year from the university's general fund. The Simulation Center employs a part-time Simulation Director and a full-time Simulation specialist. In support of student financial aid work programs, two senior nursing students have been added to the staff. Actions are occurring to secure funding for development of a permanent Simulation Center. Architectural drawings have been completed and the LSSU Foundation is current in discussion of potential donors.

The SON Chief Nurse Administrator develops and manages the SON budget and faculty provides input when resources are required or requested. This includes needs for equipment, library media purchases, and resources needed in the off-campus Simulation Center (includes equipment and supplies). The Chief nurse administrator reviews these request and presents them to the Finance Department for approval. In addition, contracted services, supplies and main operating expense funds that are not used by the School of Nursing within that fiscal year may be carried into the following school year. Resources support faculty development, research, instruction, practice activities, and community and public service. Professional development funds for full-time nursing faculty are \$1000 per contract year. This amount is prorated for regular part-time faculty and may be carried over to the next year if unused.

The School of Nursing at Lake Superior State University has a large and well-equipped nursing skills lab. The lab contains a variety of practice trainers, low/high fidelity simulators, clinical supplies, 17 hospital beds, a computer lab (8 desktop/6 laptops/4 iPads) with workspace for student activities and study. The lab floor plan includes: three

large practice labs and simulation room, storage areas, supervisor's office and computer lab. A total of 4980 square feet of working and storage space is available. Resources for student and nurse educators include streaming videos, books, DVD's, and online databases with various media. Additional physical facilities include classrooms located primarily in Crawford Hall. In most of the classrooms used by the nursing faculty multi-media tools are available. Crawford hall has a conference room that is utilized for faculty meetings.

All full-time nursing faculties have a fully equipped office (desk, book case, filing cabinet, chairs, and phone with voice-mail, computer, and printer). Part-time adjunct faculty share two fully equipped separate offices. At the clinical facilities room is at a premium. Every effort is made by the clinical agencies to provide students with physical space to hold pre and post clinical conferences, meetings, and student belongings. Instructional aides, technology, software and hardware, and technical support are available in sufficient quantity and quality to be consistent with meeting program objectives and teaching methods. Resources are available to assist students and faculty experiencing difficulty with technology. Our learning resources (library, skills laboratory, computer laboratory and learning/Testing Center) are current and comprehensive. These learning resources are adequate and accessible to all students and nurse educators.

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

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

**Program Response:**

Instructional aides, technology, software and hardware and technical support are available campus-wide in sufficient quantity to be consistent with meeting the BSN program objectives and teaching methods. Resources are also available to assist students or faculty with technology via the Audio-Visual Department and Information Technology Department. Learning resources are evaluated and recommendations are brought by the SON Learning Resources Committee to the SON faculty for discussion and approval.

Supplemental learning program resources include Lippincott's online support products and Elsevier Evolve *Clinical Excursions*™. Lippincott's NCLEX-RN PassPoint™ | Powered by PrepU™ is used by nursing students and provides a multifaceted learning resource uniquely designed to facilitate achievement of learning outcomes. PassPoint™ helps faculty gauge each student's comfort with computerized adaptive testing and progress in synthesizing curricular learning. Detailed summary reports track ongoing performance, which enables users to evaluate weaknesses and strengths and prioritize areas for deeper study. Lippincott's Docucare™ electronic medical record system is currently being integrated into all nursing clinical courses and vSim™ integration was begun for Adult 2 students in Fall 14, with full integration into nursing clinical courses by Fall 2016.

LSSU Nursing students and faculty have access to hard copy and online journals, reference books, and textbooks in all nursing-related topics and online search databases for articles at Kenneth J. Shouldice Library. The students also have access to up-to-date standards and practice references such as: The Canadian Compendium of Standards for Nursing and The American Nurses Association (ANA) Practice Books. The Circulation Desk at the library is the service point for a number of activities, including checking out library materials and class reserves, picking up Interlibrary Loan orders, and obtaining printouts from printing requests sent from library computers. Communities of interest and other constituencies are able to access nursing educational materials from the library as well. The library offers an Interlibrary Loan (ILL) service for learners who need resources not in the library collection; these materials are borrowed from other learning institutions.

The Technical Services Department offers a large variety of services including equipment rentals, equipment reservations for faculty and staff members, Help Desk, video recording and editing, technological support for faculty and staff, ITV classes, video conferencing, audio editing, converting videos, technical support for Blackboard and Wimba, support for faculty, staff and students with AV equipment in the classroom, sale of scantrons, headphones, jump drives, and other small electronics, color copies, scanning, support for evaluation surveys, library room reservations, lamination and checkout services for education videos. The video conferencing or interactive television system allows the University to provide instruction, seminars, conferences, meetings, and many other interactive options to residents of the Upper Peninsula and assisting with BSN completion in the Escanaba and Petoskey areas. Through the use of a Bridge or MCU, one or more sites may be connected interactively.

Additionally, the University is Sprint certified making it possible to interact with any entity in the world that has similar certification. In addition to the digital system, which operates over a VPN, the University is a partner in an Eastern Upper Peninsula H.323 standard over an Internet backbone. This dedicated Internet backbone links all the schools in the Eastern Upper Peninsula School District. The H.232 standard allows conferencing over the Internet to sites in the world, which follow this same standard. LSSU has three interactive television rooms; one is located in a small conference room and two are in classrooms. With the technology in place, it is possible to host three simultaneous interactive conferences.

LSSU has identified the need for evaluation of student academic services and in fall 2014 administered an HLC-LSSU Student Satisfaction Survey. The questions of this survey are designed to gather student input on the institution relative to the criteria for accreditation. A preliminary survey of LSSU student was conducted in the fall 2014 to identify strengths and areas for improvement. A sample of the survey and the results can be located in the resource document display room.

Full time tenure track faculty members are assigned advisees at the end of their second year of employment. For one academic year, no more than 20 students are assigned to new advisers. After one academic year, there is a maximum of 50 advisees for each faculty unless supplemental payment per Faculty Association contract is provided. New faculty members are assigned to faculty mentors during the first two years in order to learn the adviser role as well as for student orientation sessions.

The university also provides both face-to-face and online resources for advising. The School of Nursing is in alignment with University Advising policies as demonstrated in the Nursing Advising

Handbook (a copy is located in the document resource display room). The Faculty Advisor and student advisee meet on a routine basis at least once per semester.

The SON faculty and the chief nurse administrator reviews the SON Admissions Policy on an annual basis. Students may be admitted to the University at any point, but may not be admitted to the BSN program until they have fulfilled all pre-nursing course requirements. The Faculty Advisor assists their advisees in meeting the Entrance Requirements for the Pre-Licensure BSN Program. The School of Nursing complies with the LSSU policy of equal opportunity. Qualified applicants are admitted without discrimination with regard to race, color, national origin or ancestry, gender, age, religion, height, weight, marital status, sexual preference, veteran status or disability (reasonable accommodations will be made within the Americans with Disabilities Act guidelines). Admission to Lake Superior State University's nursing program shall not be denied solely on the basis of a prior felony or misdemeanor conviction. Application requirements are detailed in the BSN Student Handbook on pages nine and ten.

Research Support According to the Carnegie Classification for institutions of higher learning, LSSU is classified as follows: Level 4-year or above Control Public Student Population 2,588 Classification Category Undergraduate Instructional Program: Prof-F/NGC: Professions focus, no graduate coexistence Graduate Instructional Program: S-Postbac/Ed: Single post baccalaureate (education) Enrollment Profile: VHU: Very high undergraduate Undergraduate Profile: FT4/S/HTI: Full-time four-year, selective, higher transfer-in Size and Setting: S4/R: Small four-year, primarily residential Basic Bac/Diverse: Baccalaureate Colleges--Diverse Fields Notes • Graduate degree program classification is based on fewer than 50 degrees. • Undergraduate program classification: the percentage of majors is within 5 percentage points of a category border (arts & sciences direction). • Size and setting classification: the percentage of students in residence is within 5 points of the category below.

As a baccalaureate professional focus university, our primary focus is teaching. Faculty research is supported, but not required. Currently nursing students are encouraged to identify, analyze, and apply evidence-based research. Current nursing faculty research includes: Transition of recent BSN graduates into the hospital workforce (Peters); Use of simulation for mental health nursing clinical replacement (King); and BSN student academic recovery following clinical course failure (Hutchins).

#### **II-C. The chief nurse administrator:**

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

#### **Program Response:**

Ronald S. Hutchins EdD(c), MSN, RN, CNE, Title: Chief Nurse Administrator Credentials: Masters of Science, Nursing Administration; Certified Nurse Educator; Clinical specialty:



Nursing Administration and Public Health Nursing License: RN: #4704118846 expires 03/31/15; RN: # 98-1014 4: Non-Practicing class Ontario Canada expires 12/2015: CNE expires 12/31/2019. LSSU Hire: Regular full time in 1997. Years teaching at LSSU = 16

The academic credentials of the School of Nursing's Chief nurse administrator include a graduate degree with a major in nursing. Dean Hutchins is in the process of earning a doctoral degree in educational leadership from a regionally accredited institution. He has a master's degree in nursing administration and a generalist bachelor's degree in nursing (see curriculum vitae as a related document and in the display room). He is currently enrolled in Eastern Michigan University's Educational Leadership Doctoral program with an anticipated graduation date during the summer of 2015. In addition, in 2005-06 he completed coursework in nursing education and is certified as a Nurse Educator (CNE) through the National League of Nursing. Educational transcripts will be available for review in the document display room. The authority and administrative responsibilities of the nurse administrator at LSSU is documented within the academic Dean's job description, and congruent with the all Deans' positions at LSSU. This is located online at <http://www.lssu.edu/humanresources/apjobsdesc.php?id=233> and available in the document resource display room.

The role of the each college Dean is to facilitate the School's action plan for the vision and strategic direction of the School of Nursing and the University. As a leader of the faculty, the Dean supports, encourages, and promotes excellence in teaching, research, scholarship, and service. The Dean is responsible for the leadership, management and administration of the nursing program, including faculty recruitment and retention, budget development and management, and for facilitating student success. He tends to have a participatory style of management and encourages faculty involvement in most all aspects of the nursing program. He provides faculty with leadership in planning and coordinating the nursing program, which include assessment, evaluation, development and revision of nursing courses and curriculum.

Further, he represents the School of Nursing and its faculty at the administrative level and in the community with reverence and astute understanding of his and the faculty's vision for the School of Nursing. The Chief Nurse Administrator of the School of Nursing has knowledge of the BSN program curriculum and has been employed full time teaching in nursing education at LSSU since 1997. The Chief Nurse Administrator is experienced in nursing curriculum, serving as a member or chair of the School of Nursing curriculum committee and on the university level curriculum committee. He is the author of the School of Nursing's mission statement, which was approved and adopted by nursing faculty in fall of 2009. Prior to his appointment as Dean, his responsibilities were primarily teaching in the baccalaureate nursing education program, including the BSN post-licensure track. Coursework taught has been in the areas of community nursing of populations, nursing management, nursing research, informatics, cultural care and family care, introductory course on professional nursing, and nursing leadership.

Although the Chief Nurse Administrator no longer retains routine teaching responsibilities, he continues to lead the effort on behalf of the LSSU administration to orient and mentor new faculty members into their role; guest lecturers in courses, and participates in the School of Nursing's meetings. By contract, he may teach up to 6 credits. The Chief Nurse Administrator has a history of working in management prior to

coming to the university. With the Tribe of Chippewa Indians, he was program director for 4 years with the Special Health Projects and 3 years as program director of the Tribe's Community Health Nursing division. After his hire at the University, Dean Hutchins taught full time and was also the director of Lake Superior State University Health Center for 9 years. Dean Hutchins has also led the School of Nursing on two other occasions when the then Dean of Nursing had a dual role of Acting Provost. Please see the Dean's curriculum vitae available as a related document and in the document display room.

**II-D. Faculty are:**

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

**Program Response:**

At LSSU, the standards and procedures for awarding a new hire's initial appointment (tenure track, probationary, temporary) and rank (instructor, assistant professor, associate professor or professor) are described and defined in section seven of the Faculty Association Contract (Effective August 4, 2014 through August 31, 2017). This union contract is available as a related document labeled: "University Faculty Association MEA-NEA Contract" or online at <http://www.lssu.edu/humanresources/documents/FacultyContract1417.pdf> . Further, the Faculty Association Contract, defines faculty as "full-time and regular part-time members of the schools, including librarians..." (Section 1.18, pg. 7). Full-time regular faculties are appointed to teach 24 contract hours per academic year using a nine month academic calendar year (Section 1.19, pg. 7).

The Chief Nurse Administrator calculates the needed FTE's for the SON based on the attached faculty profile form (located in Appendix 2) and work load forms for adjunct time. Each permanent employee is 1.0 FTE with the exception of those hired specifically as part-time.

Nursing faculty course loads are prepared by the Chair of Nursing; with the assignments approved by the Chief Nurse Administrator. The required course load assigned to full-time regular nursing faculty is a minimum of 12 contract hours per semester, although faculty may choose to work up to 18 contract hours in a single semester, but no more than 32 contract hours in a given academic year. In addition, the Faculty Association Contract defines one lecture credit as equal to one hour and is equivalent to one contract hour; however, one contract hour of lab/clinical is equal 1 1/2 hours. The University Curriculum Committee allows each discipline to set the number of lab hours per credit hour. The School of Nursing has set the number of lab/clinical hours per credit hour as one credit hour equals three lab (or clinical lab) hours. All faculty load reports are available for review

The Michigan Board of Nursing currently recommends a faculty to student ratio of 1:10 in clinical, although under consideration is to change the ratio to 1:8. Therefore, the SON adheres to the Michigan Board of Nursing recommendation under consideration guidelines of 1:8 faculties to student ratio in clinical for all courses except for NURS 325, 326, and 432 and 433. These courses have the Provost's approval to reduce the ratio to 1:6. This change was supported by the Provost in 2011 and was driven by the feedback received from the clinical agencies used in these courses. Faculties to student ratio in nursing lecture courses are driven by size of the cohort to help determine the cap of students in each class.

There are several types of part-time appointments at LSSU. A part-time regular appointment is a person hired to teach a specified regular workload of less than nineteen contract hours per academic year (Faculty Association Contract, section 1.31,

pg. 7). The School of Nursing currently has two regular part-time faculty teaching courses. The one is a registered nurse who teaches Obstetrics. The other is a registered dietitian hired to teach nutritional course(s) for the School of Nursing's BSN pre-licensure program, practical nursing program, and the School of Nursing's nutrition minor. A second type of part-time appointment is an Adjunct Faculty appointment. The School of Nursing maintains an approved list of adjunct faculty. Both the Chief Nurse Administrator and nursing faculty within the School of Nursing approves these adjuncts to teach. An adjunct appointment cannot exceed 12 contract hours in an academic year (Faculty Association Contract, section 7.16).

A third part-time appointment unique to the School of Nursing is a Clinical Instructor of Nursing and defined as "persons only hired to provide clinical teaching/supervision of nursing students in the clinical setting. These clinical-track nursing instructors must meet the minimal BSN credential requirements for clinical teaching as set forth by the Michigan State Board of Nursing, must be currently licensed to legally practice as an RN in Michigan (USA) and/or Ontario (Canada) without restrictions, and must be current in their specialized field of nursing practice." (Faculty Association Contract, section 7.1.9, pg. 17). The part-time Clinical Instructor of Nursing cannot be assigned more than 18.99 contract hours per academic year. Release time is defined in the Faculty Association Contract (Faculty Association Contract, section 1.32) as "a special assignment for non-teaching duties where the contractual load of such an assignment is counted as part of the faculty member's regular load" (pg.7).

Nursing course coordinators are given 1 contract hour of release time in courses that have three or more lab sections (includes both on campus labs and clinical labs). When faculties are assigned release time not included in their regular load, this time converts to three hours of university work per contract hour (Faculty Association Contract, section 11.6.4.1). Please see Appendix II Table 2-A: LSSU Nursing Faculty Workload for list of contractual load assigned to faculty and adjuncts for the academic year 2013-2014.

The Department of Consumer and Industry Services' Michigan Board of Nursing is the state agency, which has legal authority for educational programs in nursing. Faculty credential requirements are established in R338.10305 ([http://www7.dleg.state.mi.us/orr/Files/AdminCode/105\\_04\\_AdminCode.pdf](http://www7.dleg.state.mi.us/orr/Files/AdminCode/105_04_AdminCode.pdf) ). All full-time and one part-time nursing faculty at LSSU are credentialed with a minimum of a master's degree with a major in nursing. The School of Nursing has one part-time faculty member who teaches nutritional health courses and is credentialed as a registered dietitian. In addition, nursing faculty credentials meet the requirements of the governing organization. The nursing program's Chair prepares annual reports required by the Michigan Board of Nursing. This report must include the School of Nursing's faculty and adjunct credentials and educational degrees.

The academic and experiential preparation and variety of faculty backgrounds (full-time and part-time) are sufficient in number to accomplish the mission, goals, and expected program outcomes of the BSN program. All faculty and adjuncts are academically and experientially prepared for the areas in which they teach. Please see the table labeled: Appendix II Table 2-B: LSSU Nursing Faculty/Adjunct Profile Form for a list of faculty and adjunct profiles located in the document resource display room. In addition, further

information regarding the academic and experiential preparation of faculty is summarized and available in Appendix II Table 2-C LSSU BSN Nursing Faculty Scholarship which includes faculty expertise, continuing education, university and community service in their areas of responsibility: Also available as a related document and in the Document Display Room are faculty's curriculum vitae.

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

**Program Response:**

The BSN program does not use formal preceptors with the exception of the NURS 437 Nursing Leadership course, which is the leadership class for BSN completion students. The preceptor is expected to have at least a BSN in Nursing, is a nurse manager and is a volunteer (the position is unpaid). Preceptors used for the leadership class are provided written information regarding role and expectations. A course contract is developed which includes the student learning objectives and responsibilities. The learning contract is signed by the student, preceptor, and course instructor. The course instructor maintains contact with the preceptor and is responsible for assessment of the student's final grade.

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

**Program Response:**

Lake Superior State University is known for its distinctive programs that provide a great deal of hands on experience and research opportunities for undergraduates that are not often found at other schools (T. Pleger, [www.lssu.edu/president/mission.php](http://www.lssu.edu/president/mission.php)). Faculty members maintain a strong record of scholarship with a focus on linear and end-based models of learning that focus on process-based and experiential student learning. LSSU works from the Boyer Model that includes discovery, integration, application, and teaching as forms of scholarship. The parent institution provides for faculty development and scholarship support through internal resources such as the faculty center for learning. Professional Development Funds as outlined in the current faculty association collective bargaining agreement are allocated to all SON faculty members to enhance the scholarship of teaching and evidenced based nursing practice.

Resources for release time to participate in professional development activities are provided from the current faculty. The SON, and University at large, to enhance faculty educational endeavors at the doctoral level for maximum professional development and ultimate student benefit, also encourages sabbatical leaves. Faculty are also encouraged to sit on Community/Faculty Advisory

Boards to strengthen student learning outcomes as ambassadors to LSSU which can ultimately benefit clinical placement avenues and foster a stronger community based commitment to LSSU. Service is an expected faculty outcome and is emphasized in the evaluation process as defined by the Faculty Association Collective Agreement. Determination of evaluation percentages was made collectively by the SON Faculty and can be noted in SON meeting minutes for August of 2014.

The SON supports faculty development through such activities as, active participation on University wide committees, workshops, encouraging conference attendance, achieving advanced certifications, and support for doctorate achievement. It is also expected that faculty submit plans for continued professional development as part of their annual review process.

### **Standard III**

#### **Program Quality: Curriculum and Teaching-Learning Practices**

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

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

#### **Program Response:**

The SON offers two curricular tracks to the Bachelor of Science degree in nursing which include a 4 year pre-licensure program and a 2 year post licensure program for the registered nurse. Both tracks provide students with the opportunity to acquire knowledge, values and skills necessary for the practice of professional nursing. The School of Nursing's curriculum and student outcomes are congruent with the program's mission, goals and expected student outcomes taking into account University and Professional Standards as described in The Essentials of Baccalaureate Education for Professional Nursing Practice (AACN, 2008). The curriculum for both the generic BSN and the BSN completion nursing programs are based on an eclectic interpretation of the nursing paradigm as outlined in the student handbook. The baccalaureate graduate is prepared to function as a generalist in providing care at the primary, secondary and tertiary levels within a variety of settings.

The SON Curriculum Committee is responsible for the development, implementation, evaluation and revision of BSN courses. The committee's focus is to ensure that curricular outcomes for individual student learning are congruent with BSN Program outcomes. Expectations for student outcomes for each course are articulated in course syllabi and program outcomes are outlined in the Student handbook. Examples of course syllabi can be located in the document resource display room.

The 125 credit generic BSN curriculum was revised for students being admitted starting in the spring 2014 semester as evidenced by the suggested course pattern for BSN nursing curriculum in

Appendix 4 which provides an overview of the new suggested course pattern. The curricular changes that were implemented to prepare students for their professional role are as follows:

- NURS 434 Nursing Research was moved to semester 3 from semester 5, which allows students to concurrently apply learned concepts from MATH 207 Principles of Statistical Methods to this course.
- HLTH 352 Health Issues Aging Population was eliminated from Semester 3 as required core course and has been integrated across the nursing curriculum as it allows students the opportunity to learn about the needs of the elderly population across each practice setting.
- A realignment of a 3 credit elective with Semester 5, allows students the ability to choose a course of their preference to allow for student-life balance.

Students in the Post-licensure BSN track follow a course sequence curriculum plan that is representative in Appendix V which includes courses in nursing, health sciences, general education and other disciplines.

The SON faculty is committed to a developing culture of review, assessment and evaluation with a process in place for doing so on an ongoing basis. The curriculum focuses on an integration of evidenced-based practice and rigorous curricula. The School of Nursing Curriculum committee engages in an annual curriculum review of our BSN Program Objectives by Level to monitor the threading of program outcomes throughout our curriculum. Student outcomes are linked to both course and program objective in alignment with program assessment measures that are tracked and trended within a computer software program called Trac Dat that allows for a targeted review of the curricula. Review of the BSN-completion track resulted in removal of the CHEM110 course, prior to the admission of the last cohort, due to most completion students completing their required general education at Michigan community colleges and successful student completion of all program courses which required CHEM110 as a pre-requisite course. The offering of the CHEM110 course was a major barrier for both completion students and the regional centers, as well removal of the course having no apparent negative outcome related to program objectives.

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

- **Baccalaureate program curricula incorporate *The Essentials of Baccalaureate Education for Professional Nursing Practice* (AACN, 2008).**

**Program Response:**

To ensure that the BSN curriculum facilitates achievements of student outcomes, prepares graduates for entry level practice and reflects The Essentials of Baccalaureate Education for Nursing Education all BSN courses are examined regularly by the SON Curriculum committee. The SON curriculum committee reviews, evaluates and makes recommendation to the SON faculty for revisions as needed.

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

- **Baccalaureate curricula build upon a foundation of the arts, sciences, and humanities.**

**Program Response:**

The LSSU BSN Nursing Program demonstrates clearly that the curriculum is logically structured to achieve expected student outcomes as it builds upon a foundation of the arts, sciences, and humanities. Both the generic BSN, as well as the BSN-completion students follow a suggested course pattern that integrates all general education required courses. For the generic BSN students, this includes the entire preclinical first year courses as available in the Appendix IV. In the next three years of the curriculum, courses such as Humanities, Statistics, and Diversity courses are integrated. The BSN-completion students also have a suggested course curriculum pattern to be followed in order to meet the curriculum course requirements including Humanities, Statistics, and Diversity courses which is available in Appendix V.

In addition to this, LSSU requires all FTIC (first time in college) students on admission to LSSU and upon graduation to take a General Education exam that assesses the students learning of arts, sciences, and humanities.

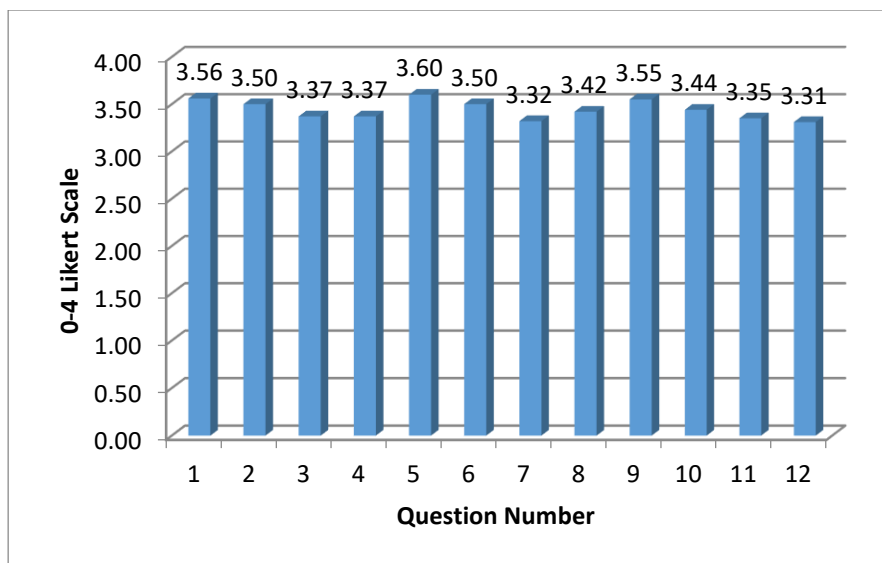


### III-D. Teaching-learning practices and environments support the achievement of expected student outcomes.

#### Program Response:

In both the generic BSN and post BSN-completion programs there are supportive environments that provide students with learning opportunities that incorporate a variety of teaching and learning strategies in alignment with both program and course outcomes. For the generic BSN program, didactic courses teach pathophysiology, pharmacology, nursing concepts and research through classroom lecture. Activities may include classroom discussions, group work and student presentations that allow the student to apply evidenced-based concepts to nursing practice. Students receive additional learning opportunities for courses with clinical components in the nursing campus lab, on site clinical rotations and at the simulation center that allow students to apply knowledge learned in the classroom setting in a real life environment. Online course work in both concentrations may include simple word documentation, threaded discussions, evidenced-based practice websites and streaming videos. Students in the Post RN BSN completion program experience a combination of didactic learning through distance education in the form of face -to-face lecture at regional sites, hands on labs, seminar, Interactive Television (ITV) and an online format (WIMBA) via Blackboard.

The SON has recently implemented high fidelity simulation activities into clinical nursing course. A survey was developed to assess how student genuinely felt regarding achievement of intended learning outcomes. In the 4 weeks that this evaluation has been implemented, 62 students have completed the evaluation. Student evaluation data demonstrates that students are rating their simulation experience (including faculty effectiveness) at an average of 3.44 (range) out of a possible 4 on a Likert scale. The overall distribution by question is demonstrated below. This survey is continuous and a follow up report is in the process of development at the completion of the Fall semester and be available in the Resource Room.



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

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

**Program Response:**

Employment rates are gathered through the use of self-reporting by the graduates of the program (Survey Monkey LSSU BSN End of Program Evaluation), information gained from social media (Facebook Nursing page), and the LSSU Alumni association. Currently LSSU graduates are employed locally and across the United States (Where are Graduates now). Current self reported employment rates for the last calendar years are 99% within 6 months of graduation (Survey Monkey™ End of Program Survey).

The curriculum has planned practice experiences that include various healthcare settings and diverse populations. Currently the program has agreements with 50 clinical practice sites in the United States and Canada, see the LSSU BSN handbook. All contracts with these agencies are currently up to date and on file in the School of Nursing office. The diverse and varied practice sites allow students to have exposure to multiple psychomotor skills and help students develop the affective domain of nursing care. BSN-completion students collaborate with their instructor and the Chief Nurse Administrator to arrange clinical experiences that are tailored to assure program outcomes achievement.

The number of direct hours of clinical practice at each level is outlined on the Theory-Clinical hour's document (located in the document display resource room), for a total of 1020 hours in the campus lab, high fidelity simulation, and direct patient care. The Outcomes committee, course coordinators, and the Chief Nurse Administrator assess clinical sites for effectiveness and feasibility in meeting student learning outcomes on a yearly basis. The summation and evaluation of the clinical sites are shared with the clinical sites each semester during the Advisory Meeting of community stakeholders and faculty in March and October. In the Advisory Meeting the community informs the SON of community needs to help shape the curriculum planning for future healthcare workers. Clinical site evaluation is criterion-based and is measured by using direct observation of student performance by the instructor in the clinical setting, end of course student surveys of the clinical agency, and review of course objectives by the course coordinator. An example of this evaluation form can be located in the document display resource room.

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

The SON collaborates with the program-identified communities of interest in decision-making for the program and curriculum design. The students evaluate each clinical site every semester in order to ascertain whether best learning practices and both student and organizational needs are being met. The results of these evaluations are shared at the Advisory Council meetings hosted twice a year by the SON at LSSU. In attendance at these meetings are representatives from all clinical sites, North Central Michigan College

School of Nursing (ADN: Petoskey Michigan) and Sault College School of Nursing(Sault Ontario). Placement needs, evaluation results, curriculum planning, and unique needs of diverse student populations are discussed with the communities of interest.

The course coordinators in the SON maintain a working relationship with their specific communities of interest to assure that their needs and expectations are met. This may include specific orientation needs, accreditation requirements, training for specific skills, and overall technology requirements.

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

**Program Response:**

The LSSU BSN Program maintains consistency in grading and the evaluation of student outcomes. Grading criteria are outlined clearly in each course syllabi and are in alignment with the Program policy noted in section five of the BSN Program Handbook. Each course aligns assignments with program student outcomes and has specific rubrics in place. The BSN Program Handbook states: A grade of C or better in all nursing and nursing support courses. l. Grading Policy for Clinical Courses and Progression: i. Nursing is an evidence-based applied science program. All nursing students must demonstrate competence in both the theory and clinical components of each clinical course before progressing to the next level of our program. ii. As determined by the LSSU School of Nursing faculty and approved by our accreditors, final grades cannot be determined for the course until after both the exam and clinical components have been evaluated separately. These two key components must meet the following criteria: i.e. minimum of 72% non-rounded exam average for the theory component ii. "Satisfactory" for the clinical component The Grading Scale as noted in section five in the BSN Handbook is as follows:

Letter Grade	Percentage	GPA
A+	98- 100	4.0
A	92- 97	4.0
A-	90 - 91	3.7
B+	88 - 89	3.3
B	82- 87	3.0
B-	80 - 81	2.7
C+	78 - 79	2.3
C	72 - 77	2.0
C-	70 - 71	1.7
D+	68 - 69	1.3

D	62 - 67	1.0
D-	60 - 61	0.7
F	0-59	0

These are the School of Nursing minimal grading standards. See course syllabus for additional requirements. The School of Nursing also maintains a policy that all NURS courses must have a comprehensive final exam which constitutes 35% of the grade. It is felt that having a comprehensive exam of significant value provides greater reliability in assessment of student course material retention.

The BSN Program utilizes a standardized clinical evaluation tool that consistently measures student performance allowing for feedback to the student about their performance in each clinical nursing course. This tool is utilized both as a mid-term evaluation tool and a final evaluation tool for each clinical course. As evidenced by the document in electronic resource room). Competency-based performance evaluation (Satisfactory/Unsatisfactory) is utilized in courses with on-campus laboratory components.

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

#### **Program Response:**

##### **Evaluation of Teaching-Learning Practices**

##### **Faculty**

Until August 4, 2014 the evaluation process was inconsistent throughout the parent institution. As a result a clear process is now outlined in the Faculty Association Collective Bargaining Agreement for faculty to receive a review of their performance with opportunity for improvements in writing that occurs during a scheduled meeting with the Chief Nurse Administrator. The review consists of feedback from an observed peer and Chief Nurse Administrator evaluation in the classroom setting, campus lab and or clinical rotation sites. In addition summative data included incorporates student evaluation of teaching obtained through anonymous surveys provided to students in each lecture, campus lab and clinical sites at the end of each semester. Achievement of student learning outcomes is now an expected component of evaluation both in the School of Nursing and the institution. Documentation of Student Learning Outcomes is compiled within the Tracdat System.

##### **Students**

As previously stated, student's evaluations of teaching-learning practices are obtained through anonymous evaluation surveys as included in the electronic resource room. Students evaluate Instructors within the last three weeks of each course and this data is provided as mentioned above to the faculty member for annual review. Data is collected, and compiled by the SON Academic Assistant who provides the Chief Nurse Administrator and each faculty with a summary report of responses. Each faculty member utilizes this summary to review and evaluate his or her teaching performance.

##### **Preceptors / Mentors**

As described earlier, the LSSU SON does not currently use preceptors within the general curriculum. The school does value the use of mentors within clinical setting. Arrangements for clinical experiences that require mentors are planned and initiated by faculty course coordinators in collaboration with leaders or their designee's at the agencies to where students complete their placements. The course coordinator is responsible for orientating the mentor to course and student outcomes for that placement experience in person or via electronic means. Mentors and their agency supervisors are provided copies of the course syllabus so that they are aware of expected student level and expectations.

##### **Clinical Placement Sites**

The Chief Nurse Administrator, visits the sites, observes faculty and preceptor teaching activities and evaluates the BSN placement sites. Clinical placement sites are visited a minimum of once during the academic school year. However if problems do arise then more frequent visits are arranged. Student evaluations of clinical placement sites are obtained during each experience as to evaluate the value of the placement site. (Samples of the survey and results can be located in the document display resource room). In addition, as noted previously, the SON Advisory meetings are held twice per year for nursing leaders or their appointed representative from clinical placement agencies in conjunction with faculty, to discuss ongoing program improvements.

#### **Areas of Concern and Action Plans for Standard III**

In accordance with the 2014-2017 Lake Superior State University Faculty Association MEA-NEA agreement section 8, faculty now will follow this plan for evaluation of both tenured and untenured (<http://www.lssu.edu/hr/documents/FacultyContract1417.pdf>). The new faculty evaluation process includes Evaluation narratives, Professional activities reports, peer reviews, classroom evaluations, summative of student advising and course comments, a departmental agreed upon professional activities weighing form and yearly activities report.

#### **Standard IV**

##### **Program Effectiveness: Assessment and Achievement of Program Outcomes**

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

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

###### **Program Response:**

A systematic process is used by the SON to determine program effectiveness. Evaluation of faculty, students, clinical sites, and employers are completed via the following timeline:

- Student evaluation of Course and lab - each semester
- Student evaluation of Clinical Site - each semester
- Faculty clinical evaluation of student - each semester
- Student End of Program Curriculum evaluation - 1 year after graduation
- Employer student survey - 18 months after graduation
- Student evaluation of Simulation - following each simulation event

Surveys are available in the Resource Room.

The Outcomes committee as part of the SON developed a tracking grid that outlines the schedule for implementation of this evaluation plan. (Tracking grid can be located in the resource document display room) Links to these evaluations are emailed out by the SON Administrative Assistant with evaluation data collected via Survey Monkey™. The Outcomes committee routinely evaluates this data and presents it to the entire Nursing faculty group, as well as to the Advisory Board.

##### **IV-B. Program completion rates demonstrate program effectiveness.**

###### **Program Response:**

The chair for the SON at LSSU ensures that measurements are tracked, monitored and trended yearly for the BSN program. Measures of student achievement include trending of program completion, withdrawal and attrition rates. This information is compiled in compliance with an annual report that is submitted to the Michigan Board of Nursing. Documents for years 2011-2014 can be located in the document display resource room.

Program completion rates are defined as the number of students who complete the program within the 150% of the time of the stated program length. The program is 4 years in length consisting of 2 semesters each academic year and those being fall and Spring. The length of the program is adjusted to begin with the first required nursing course in the first semester of year 2. Semesters 1 and 2 of the first year are considered pre-nursing where the student is required to complete prerequisite and supporting nursing courses. To calculate the completion rates, the number of students who complete the program within the 150% of the 3 years (adjust program length) is divided by the total number of graduates (May and December) for the academic year.

In 2014, a total of 31 students completed the program; these numbers were calculated from the May and December 2014 graduates. In subsequent years, 2013 there were 35 students completed the program. (18 students graduated in May of 2013 and 17 students graduated in December of 2013). Lastly, 2012 51 students completed the program (27 students graduated in May of 2012 and 24 graduates in December of 2012). These calculations are based upon the graduates from the months of May and December as students are admitted to the BSN program both in the fall and the spring of each academic year. As reported to the Michigan State Board of Nursing, Attrition rates for 2012, 2013 and 2014 have been between 3 to 20% for students admitted to the clinical track. Number of graduates for Student withdrawals and failures from the program are tracked each semester in conjunction with the reasons for these withdrawals and failures.

### Areas for Concern and Action Plan for Standard IV-B

There is no current policy to define the time period for completion for the BSN program should a student fail to remain in alignment with the BSN course pattern. The Chief Nurse Administrator reviews each student case individually. Students are advised to repeat their last completed core nursing course if they have been out of the program for 2 years or greater. For both the generic and BSN completion program, a written policy will need to be developed that will ensure consistency and reflects the above information in a defined format.

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

#### Program Response:

Our BSN program has demonstrated NCLEX-RN licensure pass rates of > 80% for first-time takers for the past 2 years as shown in the below table. Pass rates for first-time test takers in 2014 are currently 78.8%.

**Table Licensure NCLEX-RN Pass Rates for BSN graduates.**

Year (Total)	Exam	First Time Writers	1 <sup>st</sup> X Percent Passing	Final Pass rate: 1 or more attempts
2012	NCLEX-RN	43	100%	100%
2013	NCLEX-RN	42	95.2%	100%
2014	NCLEX-RN	37	78.8%	91.9% as of 12/14/14

### Areas for Concern and Action Plan for Standard IV-C

The 2014 first time pass rate experienced a significant drop from over 95% to 78.8%. Two issues were identified that may have had an impact on the pass rate. The first issue was a perception of over confidence by students of their ability to pass NCLEX-RN without preparation. Comments on the nursing student/alumni Facebook™ site by four students, who did not pass, openly stated that they did not feel they needed to study and that preparation was a low priority due to work, family life, etc. This perception of sufficient preparedness may have been unintentionally instilled by test scores that students obtained using a predictor product in their last semester. Students were allowed to self select topic areas. The majority of students far exceeded the published scores that were stated to predict NCLEX success. Upon review of the patterns of student use of the product it was noted that students limited their selves to taking the test in narrow topic areas. This pattern of test taking had a strong potential of masking weakness in their knowledge base. In the Fall 2014 semester, the assignment was changed to expand both the width and depth of assessment questions that students were required to take as part of a class assignment in NURS436. In addition, the NURS 436 instructor reinforced the need for a NCLEX-RN study plan for each student to use following graduation. All students who graduated in December 2014 reported in class that they had enrolled in some type of NCLEX-RN prep program.



We also identified that students were delaying sitting for NCLEX due to financial concerns. We are addressing this issue by using LSSU Foundation funding to assist students financially for both test prep and/or payment of test registration if they have an identified hardship.

#### IV-D. Employment rates demonstrate program effectiveness.

##### Program Response:

In the past there has been difficulty obtaining hiring information due to privacy issues pertaining to the release of information. Data was obtained through sources such as social media and e-mails from graduates. Students now sign a release of information allowing employers to release this information to the SON. As further defined in Standard IV-H surveys are now sent out at 6 months and 1 year after graduation to acquire data for employment rates from our graduates. As reported at the October 2014 nursing advisory meeting, 60% of those students that replied had immediate employment and 93% of graduates were employed within 6 months. Examples of the survey's sent to graduates will be located in the document display resource room.

#### IV-E. Program outcomes demonstrate program effectiveness.

##### Program Response:

There are nine program outcomes identified by the LSSU BSN Program that are being monitored for the demonstration of program effectiveness. Through the collaborative process of curriculum leveling, the SON faculty identified specific assignments in the core BSN courses, which have been targeted as meeting the requirements to achieve these nine program outcomes. See table below:

#### BSN NURSING PROGRAM OUTCOMES

Program Outcomes	Sophomore	Junior	Senior
<b>Liberal Education for Baccalaureate Generalist Nursing Practice</b>	<b>Develops</b> a solid base in liberal education for nursing practice as evidenced by completion of NURS 211 Personal Philosophy Paper	<b>Demonstrates</b> a solid base in liberal education for nursing practice as evidenced by completion of HLTH/NURS 328 presentation integrating culture/diversity/and health practices.	<b>Appraises</b> a solid base in liberal education for nursing practice as evidenced by completion of NURS 435 Nursing Management and Leadership Philosophy paper

<b>Basic Organizational and System Leadership for Quality Care and Patient Safety</b>	<b>Identifies</b> knowledge and skills in leadership, quality improvement, and patient safety to provide quality health care as evidenced by Completion of NURS 213 Medication Administration Skill Check Off	<b>Examines</b> knowledge and skills in leadership, quality improvement, and patient safety to provide quality health care as evidenced by completion of NURS 326 test questions	<b>Synthesizes knowledge and skills in leadership, quality improvement, and patient safety to provide quality health care as evidenced by NURS 431 Change Project and NURS 433 test questions</b>
<b>Scholarship for Evidence-Based Practice</b>	<b>Identifies and describes</b> research for potential application for evidence-based practice as evidenced by completion of NURS 213 Comprehensive Care Plan	<b>Applies</b> research for potential application for evidence-based practice as evidenced by completion of NURS 327 Comprehensive Care Plan	<b>Evaluates research for potential application for evidence-based practice as evidenced by completion of NURS 434 Research Critiques</b>
<b>Information Management and Application of Patient Care Technology</b>	<b>Shows</b> knowledge and skills in information management and patient care technology in the delivery of quality patient care as evidenced by completion of HLTH 235 Technology Presentations and Paper	<b>Applies</b> knowledge and skills in information management and patient care technology in the delivery of quality patient care as evidenced by completion of NURS 325 Simulation Experience	<b>Designs knowledge and skills in information management and patient care technology in the delivery of quality patient care as evidenced by completion of NURS 435 IT Paper</b>
<b>Program Outcomes</b>	<b>Sophomore</b>	<b>Junior</b>	<b>Senior</b>
<b>Health Care Policy, Finance, and Regulatory Environments</b>	<b>Demonstrates</b> or understands health care policies, including financial and regulatory, directly and indirectly influencing the nature and functioning of the health care system as evidenced by completion of HLTH 209 Test Questions and Lecture Material	<b>Identifies health</b> care policies, including financial and regulatory, directly and indirectly influencing the nature and functioning of the health care system as evidenced by completion of NURS 325 National Healthcare Program Comparison	<b>Analyzes health care policies, including financial and regulatory, directly and indirectly influencing the nature and functioning of the health care system as evidenced by completion of NURS 435 Budget Plan Paper</b>
<b>Inter-professional Communication and Collaboration for</b>	<b>Illustrates</b> communication and collaboration among health care professionals	<b>Models</b> communication and collaboration among health care professionals and patients to deliver	<b>Appraises communication and collaboration among health care</b>

<b>Improving Patient Health Outcomes</b>	and patients to deliver high quality and safe patient care as evidenced by completion of NURS 212 and 213 Reflective Journaling and Debriefing	high quality and safe patient care as evidenced by completion of NURS 327 SBAR Tool and Clinical Evaluation, NURS 328 Cultural Origin Paper	<b>professionals and patients to deliver high quality and safe patient care as evidenced by completion of NURS 431 Clinical SBAR Tool and Evaluation Tool</b>
<b>Clinical Prevention and Population Health</b>	<b>Defines</b> health promotion and disease prevention at the individual and population health levels as evidenced by completion of HLTH 208 SMART Project	<b>Applies</b> health promotion and disease prevention at the individual and population health levels as evidenced by completion of NURS 326 Teaching Project	<b>Determines</b> health promotion and disease prevention at the individual and population health levels as evidenced by completion of NURS 432 Journal and Health Promotion and NURS 433 Functional Assessment
<b>Program Outcomes</b>	<b>Sophomore</b>	<b>Junior</b>	<b>Senior</b>
<b>Professionalism and Professional Values</b>	<b>Defines</b> professionalism and inherent values of altruism, autonomy, human dignity, integrity, and social justice as evidenced by completion of NURS 211 Philosophy Paper	<b>Models</b> professionalism and inherent values of altruism, autonomy, human dignity, integrity, and social justice as evidenced by completion of NURS 327 Clinical Evaluation Tool	<b>Emulates</b> professionalism and inherent values of altruism, autonomy, human dignity, integrity, and social justice as evidenced by completion of NURS 431 Clinical Evaluation Tool
<b>Baccalaureate Generalist Nursing Practice</b>	<b>Recognizes</b> nursing practice with patients, individuals, families, groups, communities, and populations across the lifespan and across the continuum of health care environments and the variations of care, the increased complexity, and the increased use of health care resources inherent in caring for patients as evidenced by NURS 212	<b>Applies</b> nursing practice with patients, individuals, families, groups, communities, and populations across the lifespan and across the continuum of health care environments and the variations of care, the increased complexity, and the increased use of health care resources inherent in caring for patients as evidenced by	<b>Synthesizes</b> nursing practice with patients, individuals, families, groups, communities, and populations across the lifespan and across the continuum of health care environments and the variations of care, the increased complexity, and the increased use of health care resources inherent in caring for patients as evidenced by

	<b>Final Head to Toe Assessment</b>	<b>completion of NURS 325 Clinical Evaluation Tool</b>	<b>completion of NURS 432 Community Assessment Project</b>
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#### **IV-F. Faculty outcomes, individually and in the aggregate, demonstrate program effectiveness.**

##### **Program Response:**

All faculty are expected to maintain satisfactory status in regards to annual performance evaluation. Annual assessment includes faculty support of student learning, advising, scholarly activity and service. The School of Nursing follows University policy regarding performance evaluation. In the case of an unsatisfactory assessment, if student learning objectives can be met while insuring the integrity of the program and the University, a corrective action plan will be developed and implemented between the supervisor and faculty member. If the employee is non-tenured and the corrective plan objectives are not met, the option provided by the Faculty Agreement is non-renewal of the individual employment contract. If the involved faculty member is tenured, all remedies permitted by the Faculty Association contract would be applied as appropriate. All current SON faculty within the BSN program have achieved a satisfactory evaluation status.

It is expected that faculty actions will support the School of Nursing mission, vision, philosophy, and program requirements. To this end, SON faculty actively participate in faculty committees, faculty retreats, and university committees. The SON has had two retreats in 2014 focusing on expanded use of high fidelity simulation and use of educational software to promote student centered learning. In 2012, it was noted by ACEN that the program was not in compliance with their expectations regarding the number of faculty with terminal degrees. To meet the education preparation requirements that 25% of faculty held a terminal degree, four faculty members enrolled in doctoral programs. One member of the faculty graduated with a DNP (Faculty development) in December 2014 and the other three anticipate graduation by the summer of 2015 with the following degrees: EdD-Educational Leadership, PhD- Nursing Education, and DNP-Clinical education. The benefits of faculty continuing education has been apparent in regards to inclusion of simulation activities into clinical course experiences, increase faculty collaboration in regards to curriculum development and assessment activities, and increase in use of evidence based teaching and testing modalities throughout the program.

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

##### **Program Response:**

The BSN Student handbook outlines in detail the definition of a formal complaint, as well as the step-by-step procedure for filing a complaint. This process, as well as the entire student handbook, is evaluated and updated yearly by the SAC of the SON. Any changes are communicated to all nursing students through the Nursing Student Blackboard portal. The formal complaint process for other constituents includes communication of complaints to either the nursing faculty or the Chief Nurse Administrator. If the Chief Nurse Administrator is not able to address the complaint through

dissemination to the appropriate faculty and constituents, the information is forwarded to the Provost of the University where the University process is then initiated if necessary. Please refer to chart under Standard I-F for comparison of grievance procedure of LSSU and SON.

#### **Areas for Concern and Action Plan for Standard IV-G**

The School of Nursing has not maintained a formal complaint tracking policy. Any complaints by students are addressed at the lowest level possible, starting with involved parties whenever possible. Students have the ability to address concerns using grievance procedures found in the SON Student Handbook. If issues cannot be resolved at the School level, students are encouraged to use the University defined complaint policy. While our experience has shown this to be effective, it does not meet the formal complaint standard of CCNE. The SON faculty will be asked by the Chief Nurse Administrator to adopt a mirrored policy of formal complaint tracking within the SON that will link students directly into the University system if issues are not resolved at the college level. A complaint form and policy recommendations will be sought from the SON Student Affairs Committee during the Spring 2015 semester.

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

##### **Program Response:**

LSSU's School of Nursing has an Outcomes Committee composed of faculty and student representative. This committee meets monthly during the academic year to review survey data from various points in the program and after graduation to evaluate the effectiveness of teaching, clinical site effectiveness, employer satisfaction, and graduate employment (See evaluation timeline). The only evaluations that are not reviewed by the Outcomes Committee are the Classroom and Lab evaluations that are specific to individual faculty, due to faculty contract restrictions. These are reviewed by the Chief Nurse Administrator and reviewed with the individual faculty during evaluations. The Chair of the Outcomes Committee also reports at the bi-annual Advisory Meeting of Communities of interest. (See Fall Advisory Outcomes Report located in the document resource display room).

Evaluations are distributed by the SON's administrative assistant and aggregate data is compiled by the Outcome Chairperson and examined by the committee by semester and yearly as appropriate. Areas of improvement as identified in the results are investigated and brought to the appropriate SON committee for follow up and action. Survey results that have high percentages (50% or more) of students reporting "Disagree," "Strongly Disagree" or "Minimal Extent/None at All" in any survey category are reviewed and analyzed by the Outcomes committee for report to the SON.

The Outcomes Committee also reviews the semi-annual Reports to the Board of Nursing reports filed by the Chief Nurse Administrator to stay informed of the outcomes and student success by the SON. Review of the National Council of State Boards of Nursing (NCSBN) NCLEX-RN Program Reports bi-annually are also reviewed and analyzed for areas in which the program is achieving national, regional, and

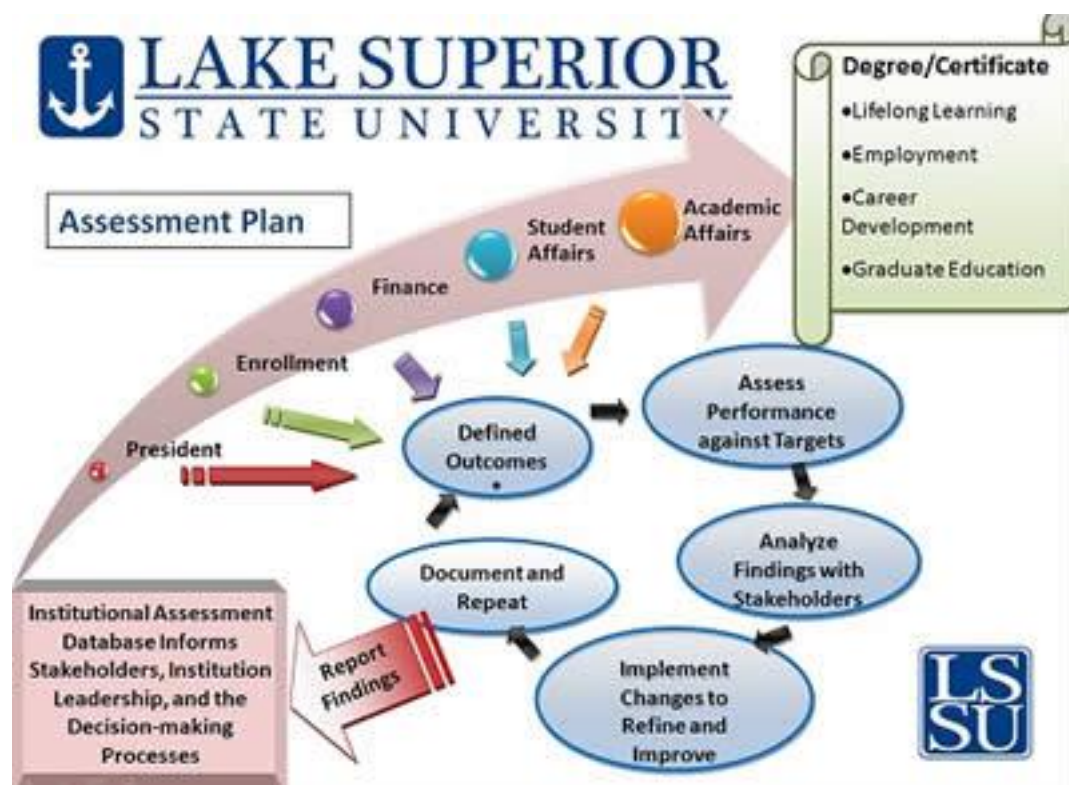
local benchmarks. Areas falling beneath any three-area benchmarks set by NCSBN are referred to the appropriate committee for evaluation and improvement planning.

High fidelity simulation has recently become part of the clinical and didactic teaching repertoire. The Outcomes Committee will be looking at the data from student evaluations both directly (Simulation Evaluations done by students), and indirectly through Clinical Evaluations when simulation is used as clinical time as reported by the Simulation Directors and individual instructors. A representative of the Simulation Center is a member of the Outcomes Committee.

In an effort to obtain post graduation employer data the Outcomes committee experienced a barrier. Employers of graduates declined to complete Survey Monkey 'Employer Evaluations of Graduate (one year out of program), stating that it violated the employee's right to privacy. A process and permission letter signed by the graduate of the program was developed to include with the survey tool to the employer. This permission letter is signed by the student in the last semester of the program prior to graduation and has an expiration of 18 months after signing. This process was initiated in the Spring of 2014 and will be implemented in the Spring of 2015 to collect data on graduates post graduation.

Refer to Standard IV-A for a comprehensive list of all evaluations.

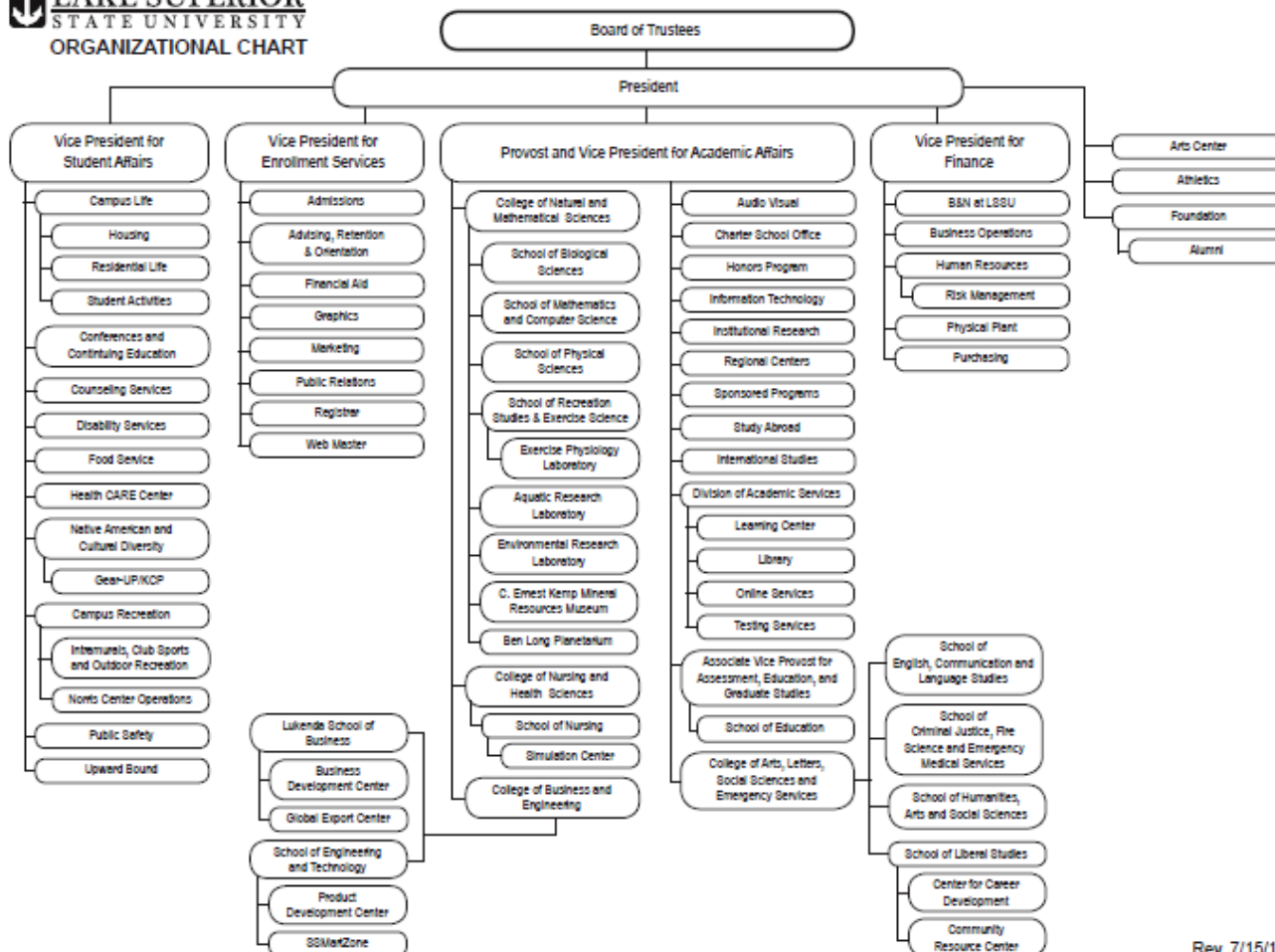
Data analysis for ongoing program development is an area that the SON is continuing to progress on (See Action plan below). The overall goal for ongoing program development is to align with LSSU's Assessment plan as represented by the diagram below.



### Areas for Concern and Action Plan for Standard IV-H

It was recently identified that changes to the program need to be evaluated through student outcomes at the appropriate time, either the next semester through student performance or at the end of the program. A Process Change Grid is currently being developed by the Outcomes committee to track the changes and formulate an action plan to be evaluated by the Outcomes committee for effectiveness. (See School of Nursing Curriculum Change Tracking tool in Appendix VIII).

### Appendix I







## Appendix II

## Faculty Profile Form AFY15.xls

Available in hard copy in the resource room and on blackboard site.

CCNE Self Study 2015						
Section II, Table 2-A LSSU Nursing Faculty Workload						
Faculty Name	Faculty Rank	Teaching Assignment Academic Year 2013-2014	Fall Contract Hours	Spring Contract Hours	Total Contract Hours	Contract Hour Overload
Hutchins, Ronald	FT Associate Dean	NURS 211, 437	0.00	5.00	5.00	0.00
Beckham, Adrienne	FT Assistant Professor	NURS 213, 327 clinical, PNUR 104, 113 Clinical, HLTH 101	12.50	16.00	28.5	4.50
Berchem, Kathy	FT Assistant Professor	Sabbatical	0.00	0.00	0.00	0.00
Butcher, Cynthia	FT Assistant Professor	NURS 212, HLTH/NURS 328	13.00	13.00 *(14.00)	27.00	3.00
(0.55 FTE = 6.6 CH) Donmyer, Andrea	PT Assistant Professor	NURS 325	4.77	7.00 (8.00)	12.77	0.00
Gerrie, Jamiee	FT Assistant Professor	NURS 213, NURS 435	15.67 (16.67)	11.00 (12.00)	28.67	4.67
(5.0?? FTE = ?? CH) Gordon, Charla	PT Temporary Instructor	HLTH 104, 208, 330, 452	5.00	9.75	14.75	0.00

Kabke, Lynn	FT Assistant Professor	PNUR 102 Lab, 113, 201, (Chair release time)	8.67 (16.67)	12.67 (14.83)	31.50	7.5
Kellan, Patricia	FT Assistant Professor	NURS 211, 326, PNUR 102, HLTH 232	12.00 (13.00)	15.17	28.70	4.17
King, Sandra	FT Assistant Professor	NURS 433, 432 Clinical	10.33 (11.33)	13.67 (14.67)	26.00	2.00
Oliver, Lori	FT Assistant Professor	NURS 327, 436, PNUR 107, HLTH 352	12.67	16.67 (17.67)	30.34	6.34
Orm, Jodi	PT Assistant Professor	Simulation Director, no teaching load	(6.00)	(6.00)	12.00	0.00
O'Shea, Maureen (Resigned)	FT Assistant Professor	NURS 326	7.00	4.83 (5.83)	12.83	0.00
Peters, Paula Jo	FT Assistant Professor	NURS 431 Lab and Clinical, HLTH 209	13.00	12.00	25.00	1.00
Reynolds-Keegan, Mary	FT Assistant Professor	NURS 432, 434, HLTH 235	12.67	12.67 (13.67)	26.34	2.34
Verdecchia, Kelli	FT Assistant Professor	NURS 431, NURS 327 Lab	15.00 (16.00)	15.00 (16.00)	32.00	8.00
				<b>TOTALS</b>	<b>341.4</b>	<b>43.52</b>
Dennis, Karen	Adjunct	NURS433 Clinical	3.33	0.00	3.33	0.00
Hodson, Julie	Adjunct	NURS 327 Clinical	6.67	0.00	6.67	0.00

Ignatowski, Roberta	Adjunct	NURS 212 Lab	4.00	4.00	8.00	0.00
Jagger, Andrea	Adjunct	NURS 325 Clinical	1.67	3.33	5.00	0.00
Lehigh, Catherine	Adjunct	NURS 213 Clinical, 433 Clinical	0.00	11.33	11.33	0.00
Melisko, Pamela Sue	Adjunct	NURS 431 Clinical	7.00	0.00	7.00	0.00
Miller, Jennifer	Adjunct	NURS 327 Clinical	6.67	6.67	13.34	0.00
Moreau, Emily	Adjunct	NURS 325 Lab and Clinical	0.00	4.00	4.00	0.00
Moriarty-Smith, Toni	Adjunct	NURS 360	4.00 (5.00)	0.00	5.00	0.00
Murphy, April	Adjunct	NURS 213 Clinical	0.00	4.67	4.67	0.00
Naphan-Armenti, Jaclyn	Adjunct	NURS 325 Clinical	1.67	3.33	5.00	0.00
Norkoli, Evelyn	Adjunct	HLTH/NURS 328, 352	3.00 (4.00)	3.75	7.75	0.00
Parker, Abigail	Adjunct	PNUR 201 Clinical	0.00	13.33	13.33	0.00
Ross, Amanda	Adjunct	NURS 212 Lab	0.00	4.00	4.00	0.00

Sample, Melissa	Adjunct	NURS 327 Clinical	6.67	0.00	6.67	0.00
Smart, Shirley	PT Faculty in Nursing	HLTH 101, 352	5.00	0.00	5.00	0.00
Smith, Devin	Adjunct	NURS 213 Clinical	4.67	0.00	4.67	0.00
				<b>TOTALS</b>	<b>114.73</b>	<b>0.00</b>

**Table 2-B: LSSU Nursing Faculty/Adjunct Profile Form  
BSN Program**

Name of School <b>Lake Superior State University</b>					Type of Program: <b>BSN</b>		Academic or Calendar Year <b>2014 - 2015</b>			
Name and Position Held* * date of termination indicated when applicable	Michigan License # and Expiration Date	FT/PT	Appt Year	Highest Degree Major Year	Highest Nursing Degree Major /Clinical Specialty	Clinical Specialty Teaching (include number of years teaching experience)	Administrative Responsibilities	Courses Taught (within last 3 years)		
								Theory Only	Combination	Clinical Only
Allen-Cary, Sandra Assistant Professor Regular Full Time	4704184353 03/31/15	FT	2014	MSN, University of Cincinnati 2010 BSN, Kaplan University 2006	MSN, Women's Health Nurse Practitioner	Allied Health 6 year teaching as adjunct at community college;	None	HLTH329		NURS213

Beckham, Adrienne Full Time Temporary F08, S09 Adjunct Instructor S10, PT regular F11	4704118745 3/31/15	PT reg	2008	MSN, Regis University 2012  BSN, Lake Superior State University 2001	BSN, Adult Acute Care  ACLS Certified	Nursing Supervisor War Memorial Hospital,  2 years teaching  Full-time 4 years part-time	None			NURS213
Berchem, Kathy Assistant Professor Regular Full time	4704213509 3/31/16	FT	2005	MSN, Michigan State University  2003	FNP; Michigan State University	Family Practice  9 years teaching	None	HLTH329  HLTH209  HLTH232	NURS212  NURS363	
Butcher, Cynthia Assistant Professor Regular Full time	4704106073 03/31/15	FT	2013	MSN, Michigan State University  MA in Admin & Nsg Education, Michigan State University, 1995	MSN  Family Nurse Practitioner	Family Practice since 1995; 1 year at LSSU teaching; previous teaching experience at various universities	None		NURS212	
Copenhaver, Melissa Assistant Professor Regular Full time F08  *Resigned May 2012	4704212488 3/31/16	FT	2008	BSN, Northern Michigan University 1997, MSW, GVSU 2005	MSW, Grand Valley State University	Mental Health, Community Health and Management  6 years; Infant Mental Health Specialist	None	NURS435  NURS432  NURS360  NURS365  NURS437	NURS326  NURS433	
Dennis, Karen Adjunct Clinical Instructor	4704150711 03/31/15	PT	2010	BSN/ Lake Superior State University-2001	BSN/Mental Health and Med/Surgical Nursing	5 years teaching  clinical only	None			NURS 433
Donmyer, Andrea Assistant Professor Regular part time F13	4704231068 03/31/2016	PT	2013	MSN, Nurse Practitioner: Women's health 2009	MSN; Nurse Mid-wife	Nurse Mid-wife Obstetrics   1 year at LSSU teaching	None		NURS325	

Duggan, Rosemary Associate Professor  *Resigned August 2013	4704198600 03/31/15	FT	2005	MSN, University of Texas -1979	MSN/ Acute Care and Oncology APRN-BC-CNS,CNE	Adult Health and Oncology, CNS; 7.5years teaching	None		NURS 431	
Gerrie, Jaimee Assistant Professor Regular Full-time	4704196461 3/31/15	FT	2010	MSN, Walden University, Baltimore, MD	MSN May 2011	Adult Acute Care 4 years teaching	None	NURS435 HLTH352	NURS213	NURS431 NURS327
Gordon, Charla Assistant Professor Regular Part-time 2012-present  Adjunct 2009-2012	Registered Dietitian (RD) #587671 (Expires May 2016)	PT	2012	MA, Central Michigan University;  BS in Dietetics, 1979, Michigan State University	MA August 1993	Public Health Education, Registered Dietitian  5 years teaching	None	HLTH 208		
Hodson, Julie A Adjunct Clinical Instructor	4704216648 03/31/2015	PT	Fall 2013	MSN, Spring Arbor University- 2012	MSN, Nurse Practitioner Board Certified 2012	Medical-Surgical 1 semester teaching	None			NURS327
Hering, Judith RN, BSN Adjunct Clinical Instructor Simulation Specialist	4704269045 03/31/15	PT	2012	BSN, Lake Superior State University	BSN Medical-Surgical	Adult Acute Care	None			NURS327
Ignatowski, Robin Adjunct Clinical Instructor	4704159323 03/31/15	PT	2010	BSN-1997/ Graceland	BSN, ICU Medical-Surgical	Medical-Surgical & Critical Care/ 2 years teaching	None			NURS212
Jagger, Andrea Adjunct Clinical Instructor	College of Nurses Registration: 07315041 12-31-14	PT	2013	BSN/ York University, Toronto CAN 2007	BSN, Pediatrics	Acute Pediatrics 2 years teaching in clinical only	None			NURS326 Ontario

Kabke, Lynn, RN, MSN, CNS Assistant Professor Regular Full time	4704163779 3/31/16	FT temp FT reg	1992 1994	MSN, Northern Michigan University, 1994	MSN, Adult Acute Care	Adult Acute Care 22 years teaching	2006 – present Practical Nursing Program Director; 2011- present Chair School of Nursing	NURS211		
Kellan, Patricia Assistant Professor Regular Full time F13	4704123156 3/31/15	FT	2013	MSN, Nurse Practitioner: Northern Michigan University 1996	MSN Northern Michigan University, Family Nurse Practitioner	Family Nurse Practitioner 1 year at LSSU teaching and history of 3 years teaching in magnet dual enrollment Practical Nursing program	None	NURS 211 HLTH232 NURS434	NURS 326	
King, Sandra Assistant Professor Regular Full time	4704222644 03/31/16	FT	2010	MSN, Regis University- 2010	MSN	Adult Health & LTC/ 3 years teaching	None	HLTH101 HLTH328	NURS432	NURS433 NURS213
Lehigh, Catherine Adjunct Clinical Instructor	4704263509 03/31/2015	PT	2013	BSN, Lake Superior State University- 2007	BSN; Mental Health	Mental Health 1 semester at LSSU, Clinical only	None			NURS 433
Lehocky, Elena Adjunct Clinical Instructor	4704172559 3/31/16	PT	2007	BSN, Lake Superior State University-1989	BSN OB Nursing	OB Nursing 5 years clinical only	None			NURS325
Pamela Sue Melisko	4704161168 03/31/2016	PT	F13	BSN, Lake Superior State University-1998	BSN Medical-Surgical	Medical-Surgical 1 semester at LSSU teaching clinical only	None			NURS431
Miller, Jennifer Mary Adjunct Clinical Instructor	4704283672 03/31/2016	PT	2013	BSN; Lake Superior State University, 2010	BSN Medical-Surgical	Medical-Surgical 1 year at LSSU teaching clinical only	None			NURS327

Moreau, Emily Ann Adjunct Clinical Instructor	4704261706 03/31/2016	PT	S14	BSN; Lake Superior State University, 2007	BSN Obstetrics	obstetrics 1 semester at LSSU teaching clinical only	None			NURS325
Moriarty-Smith, Toni Adjunct Clinical Instructor	4704150154 03/31/2015	PT	F13	MSN, University of Phoenix-2009	MSN Health Education	Health Education 1 semester at LSSU	None		NURS360	
Murphy, April Adjunct Clinical Instructor	College of Nurses Registration 9039033 12-31-14	PT	2013	BSN; Lake Superior State University, 1993	BSN Medical-Surgical	Medical-Surgical 1 year at LSSU teaching clinical only	None			NURS213 Ontario LTC unit only
Murray, Jennifer Adjunct Clinical Instructor; Sault Ste. Marie, ONT, Canada	College of Nurses Registration: 0285643 12-31-14	PT	2008	BScN, Ryerson University, 2008	BScN, Pediatric	Pediatric 5 years teaching clinical only	None			NURS326 Ontario hospital only
Naphan-Armenti, Jaclyn Adjunct Clinical Instructor Sault Ste. Marie, ONT, Canada	College of Nurses Registration: 07305052 12-31-14	PT	2010	BSN, University of Western Ontario, 2007	BSN, Obstetrical	Maternity Nursing 4 year teaching clinical only	None			NURS325 Ontario hospital only
Norkoli, Evelyn Adjunct instructor	4704216770 03/31/2015	PT	2013	MSN, University of Phoenix-2006	MSN Nursing Education	Manager Emergency Department 1 year teaching	None	NURS352 NURS328		
Oliver, Lori, RN Adjunct Instructor F09 FT temp F11 FT Reg F12	4704225818 03/31/2015	PT FT	F09 F11	BSN, 2009; MSNSpring Arbor University 2011	MSN Nurse Education	Geriatric- LTC human resources, infection control; 4 years teaching;	None	HLTH352 NURS436	NURS327	NURS213



Orm, Jodi, RN, MSN Adjunct instructor S06, Full Time Temporary Instructor F07 Assistant Professor F08 Simulation Center Director F12	4704187786 3/31/16	PT	Adj S06, Reg F07	MSN, St. Joseph's College, Maine Dec 2008	MSN, Med/surgical nursing	Adult Acute Care  9 years teaching	None	HLTH208 NURS436	NURS 327	NURS 213
O'Shea, Maureen Assistant Professor  * Resigned summer 2014	4704254861 3/31/15	FT	Adj. S05 Reg F05	MSN, MSU, 2005, Nurse Practitioner	MSN, Family Nurse Practitioner	30 years Obstetrical and Neonatal Nursing  11 years teaching	None	HLTH209	NURS 325	
Perez, Carrie Adjunct Clinical Instructor F14	4704240736 03/31/2016	PT	Adj. F14	BSN, Lake Superior State University, 2003	BSN, Medical- Surgical	Medical-Surgical  1 semester at LSSU teaching clinical only	None			NURS431
Reynolds-Keegan, Mary Assistant Professor Regular Full time	4704120886 03/31/16	FT	2010	DNP, OaklandUniversi ty, Rochester, Michigan	DNP; Nurse Educator Certification	Community Health/ Hospital Nurse educator  Management  4 years teaching	None	HLTH235 NURS434		NURS213 NURS325 NURS432
Ross, Amanda Adjunct Clinical Instructor	4704287960 03/31/2016	PT	F13	BSN; Lake Superior State University, 2010	BSN, Medical- Surgical	Medical/Surgical  1 year at LSSU teaching clinical only	None			NURS212
Sample, Melissa Marie Adjunct Clinical Instructor	4704267470 3/31/15	PT	F13	BSN, Michigan State University 2013	BSN, Medical- Surgical	Medical-Surgical  1 semester teaching	None			NURS327
Shingler-Peters, Paula Jo Assistant Professor	4704179482 03/31/16	FT	2008	MSN, Michigan State University- niversity of Phoenix- 2007	MSN/ Critical Care Nursing	Adult Critical Care and  Nursing Research;  4 years teaching	None	HLTH209 HLTH232 HLTH352 HLTH209		NURS 431

Smith, Devin Lynn Adjunct Clinical Instructor	4704234478 3/31/15	PT	FALL 2013	BSN; Lake Superior State University, 2002	BSN Medical- Surgical	Medical-Surgical 1 semester teaching	None			NURS213
Verdecchia, Kelli Assistant Professor	4704194341 03/31/15	FT	2012	MSN, Regis University 2011	MSN / Management	Medical-Surgical & Critical Care/ Mgt. 3 years teaching	None	NURS435		NURS431 NURS327



Table 2-C LSSU BSN Nursing Faculty Scholarship

<b>Name:</b>	<b>Allen-Cary, Sandra</b>		
<b>Credentials/ Certificates:</b>	RN, M.S.N, A.P.R.N., BSN, ADN		
<b>Years Clinical Experience:</b>	23		
<b>Research:</b>			
<b>Community Service:</b>			
<b>University Service:</b>	<u>School of Nursing:</u> 2014-present School of Nursing Department Committee, member 2014-Present Lake Superior State University Practical Nursing Committee, member		
<b>Clinical Practice Environments:</b>	Registered Nurse Case Manager	Munson Home Health	2013- 2014
	Adjunct Professor	North Central Michigan College	2007- 2013
	Registered Nurse- Case Manager	Hospice of Michigan	2006-2008
	Registered Nurse- MIHP Coordinator/Provider	Northwest Michigan Community	2004-2006
	Registered Nurse House Supervisor	Meadowbrook Medical Care	2002-2006
	Registered Nurse Office Nurse	East Jordan Family Health Center	1998-2002
	Registered Nurse Medical Surgical/ Obstetrics	Charlevoix Area Hospital	1995-1999
	Registered Nurse Case Manager	Munson Home Health	1993-1995
	ICU, Cardiac, ER Registered Nurse	McLaren Regional Medical, Flint	1989-1993
<b>Awards:</b>	1993 ACLS Certified 1993 PALS Certified 1991 Michigan Licensure, Registered Nurse		
<b>Educational Experiences:</b>	University of Cincinnati	3/2010	M.S.N, A.P.R.N.
	Kaplan University	8/2006	BSN
	Mott Community College	12/1991	ADN
	<b>Continuing Education:</b> Understanding Pain: Evaluation, Treatment and Management- Western Schools 20 Hour Certified Lactation Educator Workshop- Frankenmuth, MI Cardiovascular Nursing: A Comprehensive Overview- Western Schools Childhood Trauma: Type, effect and Treatment, Western Schools		

	<p>Geriatric Conference in Indianapolis, Indiana          Intimate Partner Violence: An overview Western Schools          Fetal and Neonatal Drug Exposure, University Cincinnati          Chronic Pain Management Western Schools          Death Dying and Bereavement Conference, Livonia, MI          Holistic and Complementary Therapy Western Schools          Assessment and Care of a Well Newborn, University of Cincinnati          Hemodynamic Monitoring McLaren Regional, Flint, MI          Manual of School Health Western Schools          Women's Health: Contemporary Advances and Trends, University of Cincinnati          Cancer in Women/Breast Cancer Awareness Conference, Grand Rapids, MI</p>
<b>Professional Memberships:</b>	<p>National League of Nursing,          AWHONN Member 2008-2012          ANA Member 1991-1996</p>
<b>Name:</b>	<b>Beckham, Adrienne</b>
<b>Credentials/Certificates:</b>	<p>RN, MSN          AHA BLS Instructor</p>
<b>Years Clinical Experience:</b>	37
<b>Research:</b>	
<b>Community Service:</b>	<p>2012-2013 Volunteer as an RN at the Chippewa Hospice House. Assist in the development of documents for use when providing care to residents. Will complete the training for hospice volunteers when available. Use skills as an RN to provide necessary medical care for residents.          2009-present Volunteer on the Sugar Island Ambulance as an EMT-S providing Emergency care to Sugar Island residents and visitors.          2007-2011 Volunteer as an RN at the Clinic Health Access Coalition (CHAC) Providing health care services for the "working poor" of Chippewa County.</p>
<b>University Service:</b>	<p><u>School of Nursing:</u>          2013-present Learning Resources Committee, Chair          2011- present Practical Nursing Committee, member</p> <p><u>University:</u>          2011-2013 LSSU SON Bookstore Committee member</p>
<b>Clinical Practice Environments:</b>	<p>1990-present Registered Nurse; War Memorial Hospital; Sault Ste. Marie, MI. Staff RN Med/Surg          1990-present Registered Nurse; War Memorial Hospital; Sault Ste. Marie, MI. Nursing Supervisor          1989-2007 Registered Nurse; Michigan Department of Corrections, Kinross, MI Supervisor/Staff Nurse</p>
<b>Awards:</b>	<p>5/2013 MSN degree Regis University          2006 Nursing Excellence Award for Patient Advocate in Region I Kinross Complex, Michigan Department Of Corrections Health Care          1999-2001 LSSU Dr. Dixie and Mr. Morton Light Nursing Growth Scholarship          1998/2000 OPEIU College Scholarship Award (professional supervisor organization)</p>

	1977-present Registered Nurse Licensure Michigan 1993-present Michigan Emergency Medical Technician
<b>Educational Experiences:</b>	<p><u>InstitutionDateDegree</u></p> <p>Regis University 12/12 M.S.N Denver, CO</p> <p>Lake Superior StateUniversity 5/01 B.S.N Sault Ste. Marie, MI.</p> <p>Lake Superior State College 5/77 A.D.N. Sault Ste. Marie, MI.</p> <p>Lake Superior State College 6/67 L.P.N Sault Ste. Marie, MI</p> <p><b>Continuing Education:</b></p> <p>5-5-13 ECC Update BLS Instructor Trainers. AHA BLS CPR current updated skills and instructional webinar presentation.</p> <p><b>4-6-13 Attended the Advanced Cardiac Life Support Program, obtaining a Provider</b> Card Exp 4/13</p> <p><b>9-20-11 Attended the Pediatric Advanced Life Support Program, obtaining a Provider</b> Card Exp 9/13</p> <p><b>11-1-11 Renewal of Emergency Medical Technician Specialist License- Exp 11/13</b></p> <p>5-12-11 The American Heart Association Core Instructor Course. On Line Certification provided by the AHA, Dallas, TX. (9 contact hours provided)</p> <p>5-12-11 ECC Update BLS Instructor Trainers. AHA BLS CPR current updated skills and instructional presentation.</p> <p>4-28-11 Nursing Symposium Conference- 16.5 contact hours awarded for participation in presentations.</p> <p>5-2-09 ECC conference for Updating BLS Instructor/Trainers. Strengthening The Chain of Survival, BLS Updates, Training Center Coordinator Updates, Resuscitation Guidelines Update: Where are we going in Cardiac Care, Sudden Death in the Student Athlete, 12 Lead EKG Interpretation, Heartworks-Intro to EKG (12 contact hours provided).</p>
<b>Professional Memberships:</b>	<p>2012-present National League of Nursing,</p> <p>2013-present Lake Superior Nurse Honor Society-Treasurer</p> <p>2012-present Michigan Nurses Association</p> <p>2012-present Sigma Theta Tau International member</p> <p>1981-1986 Michigan Nurses Association, full membership</p> <p>1977-1979 Michigan Nurses Association, full membership</p>
<b>Name:</b>	<b>Berchem, Kathy</b>

<b>Credentials/ Certificates:</b>	DNP(c), MSN, RN, APRN, BCLS/HCP
<b>Years Clinical Experience:</b>	21
<b>Research:</b>	
<b>Community Service:</b>	<p>Community Health Access Coalition (CHAC) Free Clinic in Sault Sainte Marie, MI Women's Health Blood Pressure Clinics in Sault Sainte. Marie, Ontario, Canada</p> <p><b>Presentations:</b> <i>Blackboard User Experience: Effective Strategies for Creating Student Engagement (August 2014):</i> Presentation to LSSU faculty.</p> <p><i>Simulation Faculty Development Day (August, 2014):</i> 8 hour workshop presented to LSSU School of Nursing faculty. Eight CEU's awarded for participation in development day.</p> <p><i>Breast Cancer Basics (November, 2012).</i> Presentation to residence dorm female students at Lake Superior State University.</p> <p><i>Young Women's Health Issues (February 7<sup>th</sup>, 2011).</i> Presentation to residence dorm female students at Lake Superior State University.</p> <p><i>Let's Talk Breast Cancer (October 24, 2011).</i> Presentation to freshmen students at Lake Superior State University.</p> <p><b>Publications:</b> Williams, L., &amp;Hopper, P. (2014). <i>Understanding medical surgical-nursing (5<sup>th</sup>ed., Ch. 26). Nursing Care of Patients with Heart Failure.</i> Berchem, K. (Ed.). Philadelphia: FA Davis.</p> <p>Williams, L., &amp;Hopper, P. (2011). <i>Understanding medical surgical-nursing (4<sup>th</sup>ed., Ch. 26). Nursing Care of Patients with Heart Failure.</i> Berchem, K. (Ed.). Philadelphia: FA Davis.</p>
<b>University Service:</b>	<p><b>School of Nursing:</b> 2011-13 Outcomes Committee, member 2011-13 Learning Resources, member (chair mentor 2011) 2011-13 Simulation Committee, member</p> <p><b>University:</b> 2012-present Scholastic Standards Committee, member 2012-13 Parents of the Year Committee, member 2012-13 MAP Works Steering Committee, member 2011-13 Distinguished Teacher Committee, member 2011-12 Faculty Association Executive Board, member 2011-12 Teaching and Learning Committee, member</p>

<b>Clinical Practice Environments:</b>	<p>5/2008–8/ 2009    Family Nurse Practitioner at Primary Care Sports Medicine, P .C.</p> <p>3/2004–12/2004    Cardiac Nurse Practitioner, Minneapolis Heart Institute</p> <p>5/2003– 8/ 2007    Family Nurse Practitioner, Petoskey Family Medicine(part-time/per Diem)</p> <p>1/2007- 10/2007    Family Nurse Practitioner, Community Care Clinic War Memorial Hospital</p> <p>7/1997-11/2002    Registered Nurse, McLaren Northern Michigan Hospital, Petoskey, MI</p>
<b>Awards:</b>	<p>2013-14    Awarded 1 years Sabbatical leave</p> <p>5/2011    Guest Speaker Lake Superior State University BSN Graduation Ceremony</p> <p>5/2010    Guest Speaker Lake Superior State University BSN Graduation Ceremony</p> <p>2010    Golden Anchor Award – Lake Superior State University</p> <p>2007-08    Distinguished Teacher of the Year – Lake Superior State University</p>
<b>Educational Experiences:</b>	<p>1/ 2013-12/ 2014    Doctorate of Nursing Practice, Systems Leadership, Rush University. Anticipated Graduation – December 2014.</p> <p>2000-2003    Master of Science in Nursing, Family Nurse Practitioner, Michigan State University</p> <p>1993-1997    Bachelor of Science in Nursing, Lake Superior State University</p> <p>1990-1993    Bachelor of Arts in Sociology, University of Windsor</p> <p>2003-2013    Family Nurse Practitioner Board Certified (FNP-BC)</p> <p><b>Continuing Education:</b></p> <p><i>Simulation: Designing and Developing Simulations:</i> August 2014. NLN SIRC online modules.</p> <p><i>Simulation: Teaching and Learning Strategies:</i> August 2014. NLN SIRC online modules.</p> <p><i>Simulation: Curriculum Integration:</i> August 2014. NLN SIRC online modules.</p> <p><i>Simulation: Evaluating Simulations:</i> August 2014. NLN SIRC online modules.</p> <p><i>Simulation: Debriefing and Guided Reflection:</i> August 2014. NLN SIRC online modules.</p> <p><i>Participant Evaluation: Making it Meaningful webinar:</i> August 22, 2014. International Nursing Association    for Clinical Simulation and Learning (INACSL)</p> <p><i>International Nursing Association for Clinical Simulation and Learning (INACSL) Conference:</i> June 19-21, 2014. Orlando, FL.</p> <p><i>Writing Workshop: Introduction to Graduate Writing and APA 6<sup>th</sup> Edition Style:</i> Rush University Feb 8<sup>th</sup>, 2013 (3CR)</p> <p><i>Development of a Simulation Program:</i> August 2012. WISER Institute, Pittsburgh, PA. 3-day intensive workshop.</p> <p><i>Cardiovascular Pharmacology:</i> April 2012</p>



	<p><i>Cancer in Women: Western Schools.</i> April 2012</p> <p><i>Designing a Simulation Center: (NLN program).</i> February 2012</p> <p><i>Using Simulation to Teach Nursing Health Assessment:</i> October 20, 2011. Webinar</p> <p><i>Emerging Technologies in Nursing Education:</i> August 2-4, 2010. Boston, MA</p>
<b>Professional Memberships:</b>	<p>Lake Superior State Nursing Honor Society</p> <p>National League of Nursing</p> <p>American Nurses Credentialing</p> <p>Michigan Council for Nurse Practitioners</p> <p>National Council for Nurse Practitioners</p> <p>Ontario Nurses Association</p>
<b>Name:</b>	<b>Butcher, Cynthia</b>
<b>Credentials/Certificates:</b>	RN, MSN, BSN
<b>Years Clinical Experience:</b>	40
<b>Research:</b>	<p>Brintnall, Martin, Butcher, Miedema, and Allen (2011, March) Engaging community partnerships to improve immunization rates in Medicaid children in an academic nurse managed center.</p> <p>This research was also presented at the Spring, 2011 International Council of Nurses Conference in Malta by co-investigator Jean Martin, PhD, APN, PNP-BC.</p> <p>Butcher, C. (1995). <i>Psychological and sociodemographic barriers to health care access of rural women diagnosed with breast carcinoma.</i> (Master's Thesis). Michigan State University.</p>
<b>Community Service:</b>	<p>2013 – present Founding member/current vice president - Lake Superior Nursing Honor Society</p> <p><b>Publications</b></p> <p>Butcher, C. (1978). Chronic renal failure: Compensating for physiologic imbalance. In <i>Nursing critically ill patients confidently</i>(pp. x-x). Horsham, PA: Intermed Communications.</p> <p><b>Presentations</b></p> <p>Brintnall, Martin, Butcher, Miedema, and Allen (2011, March) Engaging community partnerships to improve immunization rates in Medicaid children in an academic nurse managed center. National Nursing Centers Consortium National Conference, San Antonio, TX (2011, March 16)</p>
<b>University Service:</b>	<p><u>School of Nursing:</u></p> <p>08/2013 – present Curriculum Committee</p> <p>08/2014 – present Outcomes Committee</p> <p>08/2013 – 08/2014 Student Affairs Committee – Secretary</p> <p>09/2014 – present Co-Advisor – Lake Superior Student Nurses Association</p> <p><u>University:</u></p> <p>08/2014 – present Diversity Committee</p>

<b>Clinical Practice Environments:</b>	<p>Summer, 2014 Part time University of Michigan Biologic Station Health Care Provider</p> <p>1996 – 2013 Full time Multiple practice sites Family Nurse Practitioner</p> <p>1992 – 1996 Full time Michigan Department of Public Health Health Facility Surveyor</p> <p>1990 – 1992 Full time Northern Michigan Hospital Patient Education Coordinator</p> <p>1988 – 1992 FT/PT District Health Department #3 Regional EMS Coordinator</p> <p>1978 – 1988 Full time Michigan Department of Public Health Assistant EMS Division Chief</p> <p>1974 – 1978 Full time Various hospitals Clinical Practice</p>
<b>Awards:</b>	
<b>Educational Experiences:</b>	<p>1974 Bachelor of Science Nursing Michigan State University East Lansing, MI</p> <p>1983 Master of Arts Education Michigan State University East Lansing, MI</p> <p>1995 Master of Science Nursing Michigan State University East Lansing, MI</p>
<b>Professional Memberships:</b>	<p>National League of Nursing 2013 to present</p> <p>American Association of Nurse Practitioners 1995 to present</p> <p>Michigan Council of Nurse Practitioners 2000 to present</p>
<b>Name:</b>	<b>Donmyer, Andrea</b>
<b>Credentials/Certificates:</b>	<p>RN, MSN, BSN, CNM</p> <p>2006-present Neonatal Resuscitation Instructor Lead coordinator for War Memorial Hospital's NRP program. Certified as a provider since 2002.</p>
<b>Years Clinical Experience:</b>	13
<b>Research:</b>	
<b>Community Service:</b>	<p>Community Health Access Coalition (CHAC) Free Clinic in Sault Sainte Marie, MI Women's Health Blood Pressure Clinics in Sault Sainte. Marie, Ontario, Canada</p> <p><b>Presentations:</b></p> <p><b>SDPI Grant Review: How to be Approved without Restrictions</b> 2012 Bemidji Area Diabetes and Wellness Coordinators' Conference, Bloomington, MN</p> <p><b>Diabetes Educator Workshop: Youth Staying Healthy Curricula</b> 2010 Bemidji Area Diabetes and Wellness Coordinators' Conference, Bloomington, MN</p> <p><b>Youth and IHS DDTP Curricula Workshop</b> 2009 Bemidji Area Diabetes Coordinators Conference, Bloomington, MN</p> <p><b>MNT for pre-DM Makes a Big Difference,</b> 2008 Bemidji Area Diabetes Coordinators Conference, Bloomington, MN</p> <p><b>Pregnancy and Nutrition,</b> LSSU Lifecycle Nutrition Class, February 2008, Sault Ste. Marie, MI</p> <p><b>Healthy Eating for the Family,</b> 2007 Bemidji Area Diabetes Coordinators Conference, Bloomington, MN</p> <p><b>Tip the Odds: Food Choices to Prevent Cancer,</b> Michigan Cancer Registrars Association</p>

	2005 Educational Conference, Sault Ste. Marie, MI
<b>University Service:</b>	2013-present School of Nursing Department Committee
<b>Clinical Practice Environments:</b>	1/2009-present <i>Certified Nurse Midwife</i> 12/2004 -12/2008 Registered Nurse-OB; War Memorial Hospital; Sault Ste. Marie, MI 1/2004-12/2004 Registered Nurse-Public Health; <i>Chippewa County Health Department, Sault Ste Marie, MI</i> 2003-2004 Registered Nurse-OB War Memorial Hospital; Sault Ste. Marie, MI 2001-2003 Registered Nurse-Med-Surg; War Memorial Hospital; Sault Ste. Marie, MI
<b>Awards:</b>	
<b>Educational Experiences:</b>	2008: University of Cincinnati: Masters of Science in Nurse Midwifery and Post Graduate Degree: Women's Health Nurse Practitioner. 2001: Lake Superior State University- Bachelor of Science in Nursing. Graduated Cum Laude
<b>Professional Memberships:</b>	2009-present American College of Nurse Midwives 2014 AWHONN
<b>Name:</b>	<b>Gerrie, Jaimee</b>
<b>Credentials/Certificates:</b>	RN, MSN, BSN ANCC Board Certified in Medical Surgical Nursing Expires June 5, 2016 Basic Cardiac Life Support Certification Expires July 2016
<b>Years Clinical Experience:</b>	20
<b>Research:</b>	
<b>Community Service:</b>	JKL Bahweting Grade School, Volunteer Sault Michigan Hockey Association, Volunteer River Rampage Kiwanis, Volunteer Hospice Volunteer Ethics Committee Member, War Memorial Hospital, 1994-2005 and 2011 Kiwanis of Sault Ste. Marie, President 2007 Sault Area Career Center Advisory Council, 2004-2010 Hard Wiring Excellence Team Member, War Memorial, 2004-2010 Quality Assurance Committee: Chippewa County Health Department 2004 Nursing Documentation Committee, 2008-2011 Chairman of WMH Annual Nurse Walk, 2005-2007  <b>Publications</b> Nurse Leader: Published December 2010, Improving Patient Outcomes with Relationship-Based Care. doi:10.1016/j.mnl/2010.03.002
<b>University Service:</b>	<u>School of Nursing:</u> 2009-Present Curriculum Committee, Member 2011-2012 Learning Resources Committee, Chair LSSNA Nursing Student Association Advisor-Present  <u>University:</u> June 2011-2012 Shared Governance Oversight Committee, Member June 2012-Present Shared Governance Oversight Committee, Chair
<b>Clinical Practice Environments:</b>	UPvision Consulting, LLC, Sault Ste. Marie, MI 2013-Present <b>Owner/Nurse Leader</b>

	<p>War Memorial Hospital, Sault Ste. Marie, MI 2010-Present <b>Contracted/Contingent Nurse Leader</b></p> <p>War Memorial Hospital, Sault Ste. Marie, MI 2004-2010 <b>Director of Medical Surgical Nursing</b> <b>Interim Director of Obstetrics</b> 2008-2009</p> <p>Chippewa County Health Department, Sault Ste. Marie, MI 2004 <b>Case Management</b></p> <p>War Memorial Hospital, Sault Ste. Marie, MI 2002-2004 <b>Lead RN: Dialysis</b></p> <p>War Memorial Hospital, Sault Ste. Marie, MI 1994-2004 <b>Registered Nurse: Medical Surgical, ICU/CCU, ER observation/23 hour short stay, OB, Dialysis, and EMS transfers</b></p>
<b>Awards:</b>	
<b>Educational Experiences:</b>	<p><i>Walden University, Baltimore, MD</i> <b>Masters of Science in Nursing</b> Degree Focus: Leadership and Management Graduation Date: May, 2011</p> <p><i>Lake Superior State University, Sault Ste. Marie, MI</i> <b>Bachelor of Science in Nursing</b> Area of Concentration: Nursing Graduation Date: May, 1994</p> <p><b>Continuing Education:</b> Nurse Manager Boot Camp, 2005</p>
<b>Professional Memberships:</b>	<p>National League of Nursing Sigma Theta Tau: Phi NU Chapter National League for Nurses Lake Superior Nursing Honor Society: Board Member</p>
<b>Name:</b>	<b>Gordon, Charla</b>
<b>Credentials/Certificates:</b>	<p>RD, CDE, CHES Certified Diabetes Educator (CDE) Certified Health Education Specialist (CHES)</p>
<b>Years Clinical Experience:</b>	Clinical Experience as Registered Dietitian: 34 years
<b>Research:</b>	
<b>Community Service:</b>	<p>Sault Tribe Diabetes Support Group, April 2009 to present Breastfeeding Education and Support Team coalition, 1991 to present</p>
<b>University Service:</b>	<p><u>School of Nursing:</u> Fall 2013 - present PNC Committee, member Fall 2012- Spring 2014 Curriculum Committee, member</p> <p><u>University:</u> Fall 2014- present Individualized Studies Committee, member</p>

<p><b>Clinical Practice Environments:</b></p>	<p><b>March 2009 to Present CHARLA J GORDON, RD SERVICES –</b>  Sault Ste. Marie, MI 49783  Independent contractor with IHS Bemidji Area Office for Diabetes Prevention in Youth; IHS DDTP contractor with The Hill Group – Development and review of IHS curricula: <i>Balancing Your Life and Diabetes; Youth Staying Healthy: A Type 2 Diabetes Curriculum for Teens; A Diabetes Prevention Curriculum for Youth Ages 8 to 12</i>  Individual consults and Medical Nutrition Therapy;  Group services for nutrition education</p> <p><b>March 2009 to Present EASTERN UPPER PENINSULA REGISTERED DIETITIANS, LLC –</b> Sault Ste. Marie, MI 49783  Provision of nutrition services in community  Co-leader for FRESH TRACKS Weight Management Program group Classes, Cooking classes, HeartMath, STEPS group for women;  Contractual work with War Memorial Hospital, Bay Mills Community College</p> <p><b>November 2009 to Present WIC NUTRITIONIST –</b>  LMAS District Health Department – Luce and Mackinac Counties  Newberry, MI 49868  -WIC Nutrition Counselor in Luce and Mackinac Counties (two days per month)  -WIC Nutrition Education Coordinator  Development of self-study modules and group education lesson plans for clients  - Provision of staff education via in-service, written materials, emails</p> <p><b>TRIBAL NUTRITIONIST – 30 hours per week – April 1988 to April 2009</b>  Sault Ste. Marie Tribe of Chippewa Indians  Sault Tribe Health and Human Services Center  2864 Ashmun Street  Sault Ste. Marie, MI 49783</p> <p><b>Position Duties and Responsibilities:</b>  -Lead instructor for the <i>Honoring the Gift of Heart Health</i> series, Primary nutrition instructor for the Diabetes Self-Management Education program, Curriculum development and implementation of Diabetes Self-Management Education, Sault Tribe Diabetes Support Group co-facilitator, Community education coordinator for Diabetes, Nutrition and Heart Health, Field reviewer for IHS type 2 diabetes curriculum, Special Time to Express our Positive Selves (STEPS) women’s group co-facilitator, Ten-week TRACKS Weight Management program instructor for groups</p> <p><b>COMMUNITY NUTRITIONIST – Full-Time – December 1986 to April 1988</b>  Keweenaw Bay Indian Community  Tribal Center Route #1  Baraga, MI 49908  -Coordination and provision of Nutrition Services and Diabetes Patient Education  - Coordinator for three western Upper Peninsula American Indian communities  - Trained and supervised WIC program coordinator and nutrition education technician  - Development of WIC Nutrition Education Plan</p> <p><b>COMMUNITY DIETITIAN – Full-Time – April 1983 to April 1984</b></p>
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	<p>Keweenaw Bay Indian Community Tribal Center Route #1 Baraga, MI 49908</p> <ul style="list-style-type: none"> <li>-One year contract coordinating and providing Nutrition Services for Inter-Tribal Council in seven American Indian communities throughout Michigan</li> <li>-Consultant to area hospital and public agencies for community diabetes project and health programs</li> </ul> <p><b>CONSULTANT DIETITIAN – Part-Time – November 1981 to March 1984</b> Newberry Regional Mental Health Center AIS/MR Units 3001 South Newberry Avenue Newberry, MI 49868-1398</p> <ul style="list-style-type: none"> <li>-Monitored kitchen operations, provided staff training, and communicated with interdisciplinary team members regarding individual clients</li> </ul> <p><b>STAFF DIETITIAN – Full-Time – November 1981 to March 1983</b> War Memorial Hospital 500 Osborn Boulevard Sault Ste. Marie, MI 49783</p> <ul style="list-style-type: none"> <li>- Counseled inpatients of 183 bed general hospital and outpatients referred by staff physicians and local health care agencies</li> <li>- Diabetes grant writer and worked as part of team to develop diabetes education program</li> </ul> <p><b>INTERIM DIRECTOR – Full-Time Temporary – May 1981 to October 1981</b> Tri-City Dietetic Internship Area Health Education Center V.A. Medical Center 1500 Weiss Street Saginaw, MI 48602</p> <ul style="list-style-type: none"> <li>- Coordinated one-year program for professional training of Bachelor degree graduates during maternity leave of director</li> </ul> <p><b>CLINICAL DIETITIAN – Full-Time Temporary – October 1980 to March 1981</b> Midland Hospital Center 4005 Orchard Drive Midland, MI 48640</p> <ul style="list-style-type: none"> <li>- Responsible for cardiac, pediatric, and oncology units during maternity leave of staff dietitian</li> <li>- Instructor for ten-week course on behavior modification</li> </ul>
<b>Awards:</b>	<p>2003 Special Employee Recognition Award for Excellence in Nutrition and Specialization in Education and Diabetes, Sault Tribe Health Center April 1998 Employee of the Month, Sault Tribe Health Center</p>
<b>Educational Experiences:</b>	<p>1/1986- 8/1993 CENTRAL MICHIGAN UNIVERSITY - Mt. Pleasant, Michigan Master of Arts in Health Education with an emphasis in Public Health</p> <p>6/1986-8/1987 GRADUATE ASSISTANTSHIP - NORTHERN MICHIGAN AREA HEALTH EDUCATION CENTER (NMAHEC); Saginaw, Michigan Data collection in medically underserved areas of northwestern Michigan and coordination of practical experiences for university students workingwith the</p>

	<p>elderly</p> <p>10/1979- 9/1980 TRI-CITY DIETETIC TRAINEESHIP VAMC-AHEC; Saginaw, Michigan Clinical and Foodservice rotation through six area hospitals and Community Nutrition experiences in WIC and School Health</p> <p>9/1975-6/1979 MICHIGAN STATE UNIVERSITY - East Lansing, Michigan Bachelor of Science in Dietetics</p> <p><b>Continuing Education 2009-2014</b></p> <p>2014 Changing the Conversation: Innovations in the Treatment and Prevention of Eating Disorders, Ann Arbor, MI</p> <p>2014 Blending and Flipping but We are Not Making Pancakes! NEHP Webinar</p> <p>2013 Making the Case – Diabetes Prevention in Michigan, Ann Arbor, MI</p> <p>2013 Can a Parenting Intervention Help to Break the Cycle of Diabetes? IHS Online Seminar 2013 Building Your Bounce, Building Their Bounce, Chippewa County Council for Youth and Families</p> <p>2013 Breastfeeding Support Services: Enhancing Community-Based Efforts to Encourage Breastfeeding, MCHB Webinar</p> <p>2013 Early Weight Gain, Childhood Obesity, and Adult Disease Risk, Ellyn Satter Associates, Webinar</p> <p>2013 ServSafe, LMAS District Health Department</p> <p>2013 New Nutrition and Wellness Handbook: CACFP Creating Healthier Child Care Environments, USDA/HHS Webinar</p> <p>2013 What Are the Nutritional Benefits of MyPlate, NFSMI Webinar</p> <p>2012 Postpartum Gestational Diabetes Follow-up and Care: What Do Women Really Want?" Gestational Diabetes Network Webinar</p> <p>2012 Preventing Child Overweight and Obesity: Raising Children to be Competent Eaters, Ellyn Satter Associates Webinar</p> <p>2012 Bemidji Area Diabetes and Wellness Coordinators' Conference, Bloomington, MN</p> <p>2012 The Diabetic Diet, CE International Online</p> <p>2012 National Wellness Conference, Steven's Point, WI</p> <p>2012 How to Present Like a Pro in a Healthy Cooking Demo, AADE Webinar</p> <p>2011 Promoting Health by Curbing Junk Food Marketing to Kids, CSPI Webinar</p> <p>2010 Bemidji Area Diabetes and Wellness Coordinators' Conference, Bloomington, MN</p> <p>2010 WIC Breastfeeding Grow &amp; Glow Training, Marquette, MI</p> <p>2010 Better Bones, Better Posture, CE International Live Online</p> <p>2010 The Metabolic Syndrome, CE International Live Online</p> <p>2010 Stress &amp; Anxiety, CE International Live Online</p> <p>2010 The D-Lightful Vitamin D for Cardiovascular Health, The Beverage Institute Webinar</p> <p>2010 Understanding Americans' Approach to Weight Management: The Role of Low-Calorie Sweeteners, The Beverage Institute Webinar</p> <p>2009 DM Conversation Maps, Merck, Marquette, MI</p> <p>2009 The Satter Eating Competence Model (ecSatter): Practical Application in Your Life and Practice, Ellyn Satter Associates, Webinar</p> <p>2009 Weight Issues: Which Weigh to Go! UPDON, via Teleconference</p> <p>2009 Pediatric Wt Management Guidelines and the Alliance Healthcare Initiative, ADA webinar</p>
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	<p>2009 ADA Food &amp; Nutrition Conference &amp; Expo, Denver, CO  2009 What are the Youngest American Children Eating? – Findings from the Nestlé  2008 Feeding Infants and Toddlers Study (FITS), at ADA conference, Denver, CO  2009 Deciphering Diets: From Atkins to Zone, UPDON via Teleconference  2009 Bemidji Area Diabetes Coordinators’ Conference, Bloomington, MN  2009 Child Nutrition Reauthorization 2009: Improving Nutrition Education and Promotion for Children &amp; Adolescents, SNE webinar</p>
<b>Professional Memberships:</b>	<p>Academy of Nutrition and Dietetics/Commission on Dietetic Registration, Registered Dietitian (RD) – April 1981, #587671 (Expires May 2016)  National Commission for Health Education Credentialing, Inc., Certified Health Education Specialist (CHES) – October 1991, #2648 (Expires December 2014)  <i>National Certification Board for Diabetes Educators</i>, Certified Diabetes Educator (CDE) – June 2009, #2091-0150 (Expires September 2016)</p>
<b>Name:</b>	<b>Kabke, Lynn</b>
<b>Credentials/Certificates:</b>	<p>RN, MSN, CNS, BSN, ADN, LPN  Chair School of Nursing</p>
<b>Years Clinical Experience:</b>	39
<b>Research:</b>	Thesis: Exploring the Relationship Between Waiting and Psychological Distress in Preoperative Patients
<b>Community Service:</b>	<p>Advised new students in multiple, yearly summer freshman orientations  2001-2013 President Tanglewood Ladies Golf League  2000- present Moose Lodge Children's Christmas Party Committee, member  2004-2008 Co-coordinated “Senior Prom” for residents at Tendercare Nursing Home  2003-2005 Member Chippewa County Health Department’s Community Assessment Focus Group.  2006-2013 Coordinate each fall semester a “Winter Wonderland Social” for residents at Tendercare Nursing Home, War Memorial Hospital’s, Helen Newberry Joy Hospital’s, and or Mackinaw Straights Hospital’s Long Term Care facilities.  1978-2009 I-500 Medical Team. Coordinated with other community health team members in providing basic emergency health care to drivers and spectators of the race. Program includes the provision of health teaching to the racers and setting up management of the medical team.  Spring 1999 “It’s a go for Kosovo”. Worked with faculty and Lake State Student Nurses Association to organize penny drive to raise \$1015.00 for the Kosovo Relief Fund, providing clean water and sewage for Kosovo Refugees.  1995-2003 Cheerleading Coach for McKinley Elementary School promoting the health and self-esteem of 5<sup>th</sup> and 6<sup>th</sup> grade girls. LSSU nursing students help in this project.  Fall 1991 Coordinated Flu Shot Clinics at War Memorial Hospital for Sault area residents.</p> <p><b>Presentations:</b>  2014 Presentation on History of Nursing; Educational Preparation and Licensure for Medicine and Nursing to visiting Chinese medical and nursing students.  2011 Presented: "Medication Administration Safety and the 7 Rights" ” to full staff at</p>



	<p>McKinley Manor (assisted living agency), Sault Ste. Marie, MI</p> <p>2010 Presented: "Privacy and Confidentiality in Assisted Living" to full staff at</p> <p>McKinley Manor (assisted living agency), Sault Ste. Marie, MI</p> <p>2010 Presented: "Meeting your Mission Statement" to full staff McKinley Manor</p> <p>(assisted living agency), Sault Ste. Marie, MI</p> <p>2006 Presented: "Handwashing: What's all the Fuss About?" at War Memorial Hospital Long Term Care; Sault Ste. Marie, MI</p> <p>2006 Presented: "Urinary Tract Infections in the Elderly" at War Memorial Hospital Long Term Care; Sault Ste. Marie, MI</p> <p>2006 Presented: "Handwashing: What's all the Fuss About?" at Tendercare Nursing Home; Sault Ste. Marie, MI</p> <p>2005 Presented: "Ostomy Care Update" at Marquette General Home Health, Sault Ste., MI</p> <p>2004 Presented: "Body Mechanic and Safe Transferring Techniques" at CLM Community Action Agency, Sault Ste. Marie, MI.</p> <p>2002 Presented: "New Faculty Orientation: Advising". Lake Superior State University.</p> <p>2002 Presented : "Suffering/Pain and Hope" at the Connections in End-of-Life Care Conference, Lake Superior State University, Sault Ste. Marie, MI</p> <p>2001 Presented: "New faculty orientation: Advising". Lake Superior State University.</p> <p>2000 Presented "The legal Aspects of Documentation" at Michigan Nursing Student Association Convention. Grayling, MI</p> <p>1999 Presented "The legal Aspects of Documentation" at the Michigan Nursing Student Association Convention. Lansing, MI.</p> <p>1998 Presented "The legal Aspects of Documentation" at the Michigan Nursing Student Association Convention. Lansing, MI.</p> <p><b>Publications:</b></p> <p>2007-present Lab Modules: "PNUR 113 Fundamentals of Practical Nursing: Skills Lab Module Manual"; Updated yearly, published online, Blackboard</p> <p>2000-2006 Editor and publisher online, Lake Superior State University Honor Society of Nursing's Newsletter.</p> <p>7/23/94 Quantitative Research, Master Degree Thesis, "Exploring the relationship between waiting and psychological distress in preoperative patients".</p> <p>12/8/93 Published information on issue of health care reform in The Evening News, Sault Ste. Marie, MI.</p> <p>1988 Published educational article entitled "Uses of Aspirin" in The Evening News, Sault Ste, Marie, MI.</p>
<p><b>University Service:</b></p>	<p><b>School of Nursing: (selected)</b></p> <p>2011-present Chair School of Nursing</p> <p>2005-present Director Practical Nursing Program</p> <p>2011-present NLNAC Practical Nursing Accreditation Committee</p> <p>2005- present Practical Nursing Committee, member (chair2005-2011)</p> <p>1994-present BSN Advisory Committee, Member</p> <p>1992-present School of Nursing Department Committee</p> <p>2011 -2014 Faculty Search Committee, chair</p> <p>2008-2013 Learning Resources Committee, member (chair 2011-12)</p>

	<p>2008 Practical Nursing Board of Nursing 5 year Report Development</p> <p>2010-2012 Simulation Center Team, Member</p> <p>2011-2012 On Campus Simulation Ad Hoc Committee</p> <p>1992-2007 Student Affairs Committee, 1995-2006 Chairperson</p> <p>1997-2001 Departmental Curriculum Revision Committee, Member</p> <p>2010 Assigned by Associate Dean to review curriculum content of Medical-surgical (m/s) courses in BSN program for distribution of content across the three courses and levels with deletion of duplication material.</p> <p><b>University: (selected)</b></p> <p>2014 Distinction by Design Ad Hoc Committee, Member</p> <p>2012-present Laker Gold Scholarship faculty participant</p> <p>2012-present Strategic Planning and Budget Committee</p> <p>2012-present Primary Duties Contract Committee (Union), Member</p> <p>2010-present Deans/Chairs Committee, Member</p> <p>2011 – present Tenure Time-out Committee, Member</p> <p>2007-present LSSU-FA Negotiating Team (3 contracts)</p> <p>1998-2011 University Human Subjects Review Committee, Member</p> <p>1998-2007 University Curriculum Committee, Member</p> <p>2009, 2011/12 Interim Associate Dean School/Chair of Nursing (shared position summer of 2009)</p> <p>1998-2000 Faculty Advisor for the Michigan Student Nursing Association</p> <p>1992-2010 Faculty Advisor for Lake State Student Nurses Association</p>															
<b>Clinical Practice Environments:</b>	Hospital based: Surgical Services; Intra-operative; Medical -Surgical; ER; Community Developmentally Disabled Home Nurse;															
<b>Awards:</b>	<p>2012 Twenty years service Lake Superior State University</p> <p>2002 Ten years service Lake Superior State University.</p> <p>2002-03 Honored as Activities Volunteer at Tendercare Nursing Home.</p> <p>10/01 Awarded by Sault Area Public School Board Volunteer of the Year benefiting McKinley Elementary School.</p> <p>2000 Service Award from Michigan Nursing Student Association for Faculty Advisor February 1998 through February 2000.</p> <p>1998 Awarded tenure at Lake SuperiorStateUniversity.</p> <p>1995 Certificate of Appreciation, Shallows Neighborhood Association.</p> <p>1996 Certificate of Appreciation, US Air Force. Awarded for assistance provided to the US Air Force in coordinating events with LSSU nursing students.</p> <p>1993 Ontario Licensure, Registered Nurse</p> <p>1987 Michigan Licensure, Registered Nurse</p> <p>1987 Awarded Sault District Nurses Association Scholarship</p>															
<b>Educational Experiences:</b>	<table> <tr> <td>09/05 &amp; 01/06</td> <td>6 credit hours earned towards Doctorate</td> <td>Central Michigan University Mt. Pleasant, MI</td> </tr> <tr> <td>8/1994 Marquette, MI.</td> <td>M.S.N., C.N.S.</td> <td>Northern MichiganUniversity</td> </tr> <tr> <td>5/1989</td> <td>B.S.N</td> <td>Lake Superior StateUniversity Sault Ste. Marie, MI.</td> </tr> <tr> <td>5/1987</td> <td>A.D.N.</td> <td>Lake SuperiorState College Sault Ste. Marie, MI.</td> </tr> <tr> <td>6/1977</td> <td>L.P.N</td> <td>Duluth Vocational Technical Institute</td> </tr> </table>	09/05 & 01/06	6 credit hours earned towards Doctorate	Central Michigan University Mt. Pleasant, MI	8/1994 Marquette, MI.	M.S.N., C.N.S.	Northern MichiganUniversity	5/1989	B.S.N	Lake Superior StateUniversity Sault Ste. Marie, MI.	5/1987	A.D.N.	Lake SuperiorState College Sault Ste. Marie, MI.	6/1977	L.P.N	Duluth Vocational Technical Institute
09/05 & 01/06	6 credit hours earned towards Doctorate	Central Michigan University Mt. Pleasant, MI														
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5/1987	A.D.N.	Lake SuperiorState College Sault Ste. Marie, MI.														
6/1977	L.P.N	Duluth Vocational Technical Institute														

	<p>(now Lake SuperiorCollege)</p> <p>Duluth, Minnesota</p> <p><b>Continuing Education</b> (past 10 years)</p> <p>2014 <b>Concept-Based Learning Institute: Curriculum for the 21st Century. Orlando, Florida (12 CEUs)</b></p> <p>2014 University Professional Development Sessions</p> <p>2014 Simulation Development Day</p> <p>2013Clinical Faculty Workshop: Safety Approach to Successful Clinical Teaching: Tools for Clinical Faculty. Howell, MI (5 CEUs)</p> <p>2012 Mental Health First Aid Certification</p> <p>2012 Faculty Development Day, Lake Superior State University;</p> <ol style="list-style-type: none"> <li>1. Online Audits Start this Fall – Are You Ready? Nancy Neve/Luanne Webb, Registrar’s Office. Review of new online degree audits, implementation October 2012.</li> <li>2. Tracdat – Entering Course Assessment Plans, Dave Myton, Associate Provost Tracdat is a web-based software tool selected by the University’s Shared Governance Assessment Committee to facilitate the centralized collection and reporting of evidence related to institutional effectiveness and student learning in all its aspects.</li> <li>3. New Tools in Blackboard Learn, Sara Devaprasad, Information Technology The current course management system Blackboard CE8 (former WebCT) license will be expiring and replacing it with Blackboard Learn 9.1. This workshop will introduce users to the new tools available in this new environment.</li> </ol> <p>5/12 SIMULATION IN NURSING, Pittsburg, Pennsylvania Wisner Institute 2 day faculty development in simulation.</p> <p>5/11 NURSING 2011 SYMPOSIUM, Nashville, Tennessee (25 contract hours)</p> <p>3/11 2011 NLNAC Self-Study Forum Conference; Atlanta, Georgia (1 contract hour)</p> <p>8/10 FACULTY DEVELOPMENT DAY, Lake SuperiorStateUniversity,</p> <ol style="list-style-type: none"> <li>1. Best Practices for Risk Management in Experiential and Service Learning. Presented by Michelle Thalacker</li> <li>2. HLC Self-Study. Presented by Morrie Walworth</li> <li>3. Shared Governance. Presented by Linda Schmitigal</li> </ol> <p>5/09 Nursing 2009 Symposium; Orlando, Florida (26.5 contact hours) Taking the pain out of pain Management; Celebrate your Professional Gifts; Heat Failure 2009; Trauma in the Older Adult; Reclaiming Compassion at the Bedside; New Concepts in Managing Type 2 Diabetes; Metabolic Syndrome; Acute Pancreatitis; Analyzing Lab Values; Difficult to treat Pain</p> <p>4/08 2008 NLNAC Self-Study Forum Conference; Las Vegas, NV (1 contract hour)</p> <p>09/05 EAD 776 (3 credits) Administration in Higher Education; Central Michigan University doctorate coursework</p> <p>01/06 EAD 669 (3 credits) Negotiations in Education; CentralMichigan University doctorate coursework</p>
<b>Professional Memberships:</b>	<p>1992-present National League of Nursing,</p> <p>1990-present American Nurses Association</p> <p>1992-present LSSU Faculty Association, MEA/NEA</p> <p>1993-present College of Nurses of Ontario</p> <p>2000-2007 Lake Superior State University's Nursing Honor Society Secretary 2000-2002; Newsletter Editor 2000-present</p> <p>1992-1998 Northern Michigan University's Nursing Honor Society, transferred membership to Lake Superior State University's Honor Society 1998</p>

<b>Name:</b>	<b>Kellan, Patricia</b>
<b>Credentials/ Certificates:</b>	RN, MSN, FNP, CNS, BSN, ADN
<b>Years Clinical Experience:</b>	36
<b>Research:</b>	Thesis: "An Exploration of the Lived Experience and Human Process of Harmony among Rural Women."
<b>Community Service:</b>	2013- present Actively involved with the Sault Area Schools, LSSU Upward Bound, Chippewa County Health Department Public Health/SHACC components, LSSU summer camps, and our local 4-H program for student placements.
<b>University Service:</b>	<u>School Nursing:</u> 2013-14 Co-chair of Curriculum Committee 2013-15 Practical Nursing Committee, member  <u>University:</u> Representative on the CLM Community Action Early Head Start/Head Start Advisory Board.
<b>Clinical Practice Environments:</b>	2008-10 LPN Program Director (including clinical/didactic instruction) in Ruskin, FL 1996-02 Advanced Practice Nursing CFNP at Sault Tribal & Covenant Health Nursing Care Systems 1988-96 Student Health Center Director at Lake Superior State University as Management and Center Director of Patient Care 1981-88 Case Manager Health/Handicap Coordinator at C-L-M Community Action Agency. Worked in both the Senior & Head Start Program Areas.
<b>Awards:</b>	1988 Nominated for the Outstanding Returning Student Award, 1995-96 Appointed to the MI Board of Nursing by Governor Engler, 1996 Nominated Outstanding Administrative/Professional Employee at Lake Superior State University
<b>Educational Experiences:</b>	1996 MSN FNP/CNS Northern Michigan University 1989 BSN Lake Superior State University 1978 ADN Lake Superior State University
<b>Professional Memberships:</b>	National League of Nursing, American Nurses Association, Michigan Nurses Association, Sigma Theta Tau
<b>Name:</b>	<b>King, Sandra</b>
<b>Credentials/ Certificates:</b>	RN, MSN, BSN State of Michigan Certification: August 1999
<b>Years Clinical Experience:</b>	15
<b>Research:</b>	
<b>Community Service:</b>	
<b>University Service:</b>	<u>School of Nursing:</u>  <u>University:</u>
<b>Clinical Practice Environments:</b>	07/10-12/10: Assistant Health and Human Services Director Ellen Marshall Memorial Wellness Center, Brimley, MI

	<p>12/06-7/10: Developmentally Disabled/OBRA/Crisis Psychiatric Nurse/Case Manager; Hiawatha Behavioral Health, Sault Ste. Marie, MI</p> <p>5/06-12/06: Registered Nurse; Michigan Department of Corrections, Kincheloe, MI</p> <p>1/05- 5/06: Assertive Community Treatment (ACT) Psychiatric Nurse/Case Manager; Hiawatha Behavioral Health, Sault Ste. Marie, MI</p> <p>04/88- 02/91: Substance Abuse and Mental Illness Program Coordinator Portage Path Community Mental Health Center, Akron, OH</p>
<b>Awards:</b>	<p>Honors Graduate (3.97 GPA) Regis University: May, 2010</p> <p>Michigan Works 2000 Outstanding Alumni Award</p> <p>Dean's List: two semesters</p> <p>Ostomy Scholarship: January, 1997</p> <p>BPW (Business &amp; Professional Women) Scholarship: June, 1994</p>
<b>Educational Experiences:</b>	<p><b>Enrolled in DNP program</b></p> <p><b>Masters of Science in Nursing</b> – Leadership in Health Care Systems / Health Care Education Certification (with additional completion of management courses); <i>Regis University, Denver, CO</i>; Graduation Date: April 30, 2010</p> <p><b>Bachelor of Science in Nursing</b>; <i>Lake Superior State University, Sault Ste. Marie, MI., May 1999</i></p>
<b>Professional Memberships:</b>	<p>National League of Nursing,</p> <p>Sigma Theta Tau International Honor Society of Nursing Member</p> <p>Chippewa County Home Health/Hospice Division Professional Advisory Committee Membership</p> <p>National League of Nursing Membership</p> <p>Michigan and American Nurses Associations</p> <p>American Psychiatric Nurse's Association</p> <p>UAW Financial Officer and Membership (previously Union Steward)</p> <p>Bay Mills Community College Curriculum Development Committee Membership</p> <p>Michigan Public Health Association Executive Board Member at Large (Community Health Nursing Section)</p> <p>Lake Superior State University Honor Society of Nursing Member/Former Treasurer</p> <p>American Public Health Association Membership</p> <p>Association of SIDS and Infant Mortality Program Membership</p>
<b>Name:</b>	<b>Oliver, Lori</b>
<b>Credentials/Certificates:</b>	<p>RN, MSN</p> <p>11/14-11/16 Advanced Cardiovascular Life Support. American Heart Association</p>
<b>Years Clinical Experience:</b>	14
<b>Research:</b>	
<b>Community Service:</b>	<p>2012- present Posen Potato Festival: Staff the first aid tent for the annual "Spud Run" marathon. Assist Posen Volunteer Fire Fighters in their annual fundraising dinner.</p> <p>2012 Staff first aid station for 100K marathon from Gaylord to Mackinac City.</p> <p>2013 Arts Center - Obtained grant monies to fund Irish Musical Group Lunasa's appearance on campus</p> <p><b>Presentations:</b></p> <p>2014 Presentation of Respiratory Care Modalities to visiting Chinese medical and nursing students.</p>

<b>University Service:</b>	<p><b>School of Nursing:</b>  2011- present Practical Nursing Committee, chair  2012-13 Learning Resources Committee, member  2013 -14 Faculty Search Committee, member</p> <p><b>University:</b>  University Student Recruitment and Retention Committee, member  Costumer and Seamstress – LSSU University Dance Company</p>																								
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<b>Awards:</b>	2013 – Sigma Theta Tau Nursing Honor Society – Lake Superior Chapter 1998 – Phi Theta Kappa International Honor Society- North Central Michigan College																								
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<b>Professional Memberships:</b>	National League of Nursing, Michigan Licensed Practical Nursing Association <i>International Association for Dance Medicine and Science</i>
<b>Name:</b>	<b>Orm, Jodi (part-time)</b>
<b>Credentials/Certificates:</b>	RN, MSN CNE
<b>Years Clinical Experience:</b>	22
<b>Research:</b>	
<b>Community Service:</b>	<p>Health Education Advisory Committee, Saint Ignace Area Schools Relay for Life, Mackinac County, Co-captain and team member annually Luce, Mackinac, Alger, and Schoolcraft County Health Department (LMAS), Disaster Team Volunteer Annual Employee Influenza Clinic, Cheboygan Memorial Hospital, Cheboygan, MI Band Boosters, Saint Ignace Area Schools, Saint Ignace, MI Sports Boosters, Saint Ignace Area Schools, Saint Ignace, MI</p> <p><b>Publications:</b> Orm, J. (2012, January). Improving upon the textbook. <i>PrepNow, 1</i>, 11-12.</p> <p>Orm, J. (2010). A proposal to use human patient simulators to acquire general clinical skills with an emphasis on critical thinking to reduce the number of hours at clinical agencies for pre-professional baccalaureate nursing students in Michigan [Abstract]. <i>Michigan Academician</i>.</p> <p><b>Presentations:</b> <i>Keep Calm and Do Harm (May, 2014)</i>. Keynote Speaker: Simulation User Network Conference, Melbourne, Australia.</p> <p><i>Good-bye Traditional-Hello Virtual! Engage Your Students in Active Learning Using Technology(May, 2014)</i>. Invited Speaker: National Nurse Educator Conference, Adelaide, Australia.</p> <p><i>International Nursing Association for Clinical Simulation and Learning (INACSL): How to Incorporate DocuCare and PrepU Into Your Program (June, 2013)</i>. Booth Presenter: Las Vegas, NV.</p> <p><i>How to Create NCLEX Alternative-Style Questions: Canadian NCLEX(March, 2013)</i>. Presenter for a nursing webinar workshop: Virtual</p> <p><i>Canadian NCLEX: What to Expect in 2015(March, 2013)</i>. Presenter for a nursing webinar workshop: Virtual</p> <p><i>Academic EHRs: How to Incorporate Into the Clinical Setting(Feb. 15, 2013)</i>. Presenter for a nursing webinar workshop: Virtual</p> <p><i>Academic EHRs: How to Incorporate Into the Clinical Setting(Feb. 1, 2013)</i>. Presenter for a nursing webinar workshop: Virtual</p> <p><i>Active Learning: Tools to Incorporate Into Your Curriculum (Nov, 2012)</i>. Guest Speaker for North Carolina Council of Practical Nurse Educators(NCCPNE) Annual Meeting</p>

*Academic EHRs: How to Incorporate Into the Classroom* (June 19, 2012). Presenter for a nursing webinar workshop: Virtual

*Academic EHRs: How to Incorporate Into the Classroom* (June 5, 2012). Presenter for a nursing webinar workshop: Virtual

*Strengthen Active Learning through Adaptive Quizzing* (April, 2012). Presenter: Ivy Tech Community College, Indianapolis, IN.

*Leveraging Technology to Improve Med-Surg Pass Rates* (Mar 28, 2011). Presenter for a nursing webinar workshop: Virtual

*Leveraging Technology to Improve Med-Surg Pass Rates* (Mar 26, 2011). Presenter for a nursing webinar workshop: Virtual

*How Computerized Adaptive Quizzing Can Strengthen Active Learning* (October, 2011). Presenter for a nursing faculty workshop: Raileigh, NC

*How Computerized Adaptive Quizzing Can Strengthen Active Learning* (Oct 4, 2011). Presenter for a nursing webinar workshop: Virtual

*How Computerized Adaptive Quizzing Can Strengthen Active Learning* (Oct 5, 2011). Presenter for a webinar workshop: Virtual

*How Computerized Adaptive Quizzing Can Strengthen Active Learning* (June, 2011). Presenter for a nursing faculty workshop: Orlando, FL

*Professional Boundaries and Legal Issues in Nursing* (May, 2011). Presenter for professional nurses and unlicensed personnel at Sault Tribe Community Health: Sault Ste. Marie, MI

*Purposeful Learning and the Use of Adaptive Quizzing* (March, 2011). Co-presenter for a nursing faculty workshop: Toledo, Ohio.

*A proposal to use human patient simulators to acquire general clinical skills with an emphasis on critical thinking to reduce the number of hours at clinical agencies for pre-professional baccalaureate nursing students in Michigan* (2010). Presented at The Michigan Academy of Science, Arts, and Letters Annual Conference.

*LSSU Health Care Exploration Camp* (2009). Assisted with coordinating the hospital portion for JuliaRoque.

*Documentation and Legal Issues/Professional Boundaries* (2008). Oral presentation to administration and staff of Chippewa County Health Department and Hospice.

*Are You Litigation Proof?* (2007). Oral presentation to administration and staff of War Memorial Hospital.

*Documentation* (2006). Consultation—1:1 with department directors of War Memorial Hospital.

*Are You Litigation Proof?* (2006). Oral presentation for the Intertribal Council of Michigan.

*Legal and Ethical Issues for Nursing in the 21<sup>st</sup> Century* (2006). Invited guest lecturer for Sigma Theta Tau, LSSU Chapter, Induction Ceremony.



	<p><b>Professional Activities:</b></p> <p><i>Design OSCE: Vignettes in Simulation Facility Design (June, 2014).</i> Contributor: International Nursing Association for Clinical Simulation and Learning (INACSL). Orlando, FL.</p> <p><i>Active Learning and Incorporating Technology Into Your Curriculum (Feb, 2014).</i> Faculty Workshop: Adelphi University, Long Island, NY.</p> <p><i>How to Incorporate Active Learning Into Your Curriculum (Aug, 2013).</i> Faculty Workshop: Weatherford College, Weatherford, TX.</p> <p><i>How to Incorporate Active Learning Into Your Curriculum (Aug, 2013).</i> Faculty Workshop: Lipscomb University, Nashville, TN.</p> <p><i>How to Incorporate Active Learning Into Your Curriculum (April, 2013).</i> Faculty Workshop: Goodwin College, Hartford, CT.</p> <p><i>How to Incorporate Active Learning Into Your Curriculum (Feb, 2013).</i> Faculty Workshop: Gadsden State Community College, Gadsden, AL.</p> <p><i>Academic EHRs: How to Incorporate Into the Curriculum (Jan, 2013).</i> Faculty Workshop: Lorain County Community College, Elyria, OH.</p> <p><i>How to Incorporate Adaptive Quizzing and Academic EHRs Into the Curriculum (Oct. 19, 2012).</i> Faculty Workshop: Lorain County Community College, Elyria, OH.</p> <p><i>How Computerized Adaptive Quizzing Can Strengthen Active Learning and Raise Test Scores (June, 2012).</i> 7th Annual Iowa State Healthcare Educators Conference: Cedar Rapids, IA</p>
<p><b>University Service:</b></p>	<p><u>School of Nursing:</u></p> <p>2013-present Director Simulation</p> <p>2012-2014 Scholarship/Awards, Chair</p> <p>2011-2014 Webmaster</p> <p>2011-2013 Student Affairs Committee, member</p> <p>2011-2013 Practical Nursing Committee, member</p> <p>2011-2013 Pinning, chair</p> <p>2012-2013 Learning Resources, member</p> <p>2012-2013 Simulation Development, Chair</p> <p><u>University:</u></p> <p>2012-present Financial Aid Appeals</p> <p>2012-2014 Scholarship/Awards</p> <p>2012-2014 Simulation Development</p>
<p><b>Clinical Practice Environments:</b></p>	<p>2013 to present Director of Simulation Education</p> <p><b>5/2006-6/2007 Registered Nurse, Cheboygan Memorial Hospital</b></p> <p>6/2002-12/2006 Registered Nurse; Home Health Case Management, Holland, MI</p> <p>1/1998- 6/2002 Registered Nurse; Home Health Case Management, Grand Rapids, MI</p> <p>8/2001-6/2002 Registered Nurse; School Nurse, Kellogsville School District, Kentwood, MI</p>

	9/1994-6/ 2001 Registered Nurse—Level III, Ortho/Neuro, Saint Mary’s Hospital, Grand Rapids, MI
<b>Awards:</b>	<p>2012 Nominated for Distinguished Teacher of the Year, Lake Superior State University</p> <p>2012 Golden Anchor Award – Lake Superior State University</p> <p>2011 Golden Anchor Award – Lake Superior State University</p> <p>2010 Guest Speaker, Lake Superior State University Nursing Graduation Ceremony</p> <p>2010 Nominated for Distinguished Teacher of the Year, Lake Superior State University</p> <p>2009 Golden Anchor Award – Lake Superior State University</p> <p>2008 Golden Anchor Award – Lake Superior State University</p> <p>2006 Guest Speaker, LSSU Sigma Theta Tau Induction Ceremony, Lake Superior State University</p>
<b>Educational Experiences:</b>	<p>2011 Certified Nurse Educator (CNE)</p> <p>2008 Master of Science in Nursing Education, St. Joseph’s College of Maine</p> <p>1992 Bachelor of Science in Nursing, Lake Superior State University</p> <p>Annually Basic Cardiopulmonary Life Support (BCLS) Certified</p> <p>2002-2009 Certified Legal Nurse Consultant (CLNC)</p> <p><b>Continuing Education:</b></p> <hr/> <p><i>NLN Preparation Course for Item Writers: 2014, Phoenix, AZ</i></p> <p><i>The National League for Nursing: Education Summit 2014, September, 2014, Phoenix, AZ</i></p> <p><i>The International Meeting on Simulation in Healthcare, January, 2014, Washington, DC</i></p> <p><i>International Nursing Association for Clinical Simulation and Learning, June, 2013, Las Vegas, NV</i></p> <p><i>The International Meeting on Simulation in Healthcare, January, 2013, Orlando, FL</i></p> <p><i>The National League for Nursing: Education Summit 2012, September, 2012, Anaheim, CA</i></p> <p><i>Foundations of Simulation in Healthcare: Creating Your Simulation Center, June 2012, Pittsburgh, PA</i></p> <p><i>Adaptive Testing: A Best Practices Approach: Sept., 2011, Webinar</i></p> <p><i>NCLEX-RN Online with CAT Logic: May, 2011, Webinar</i></p> <p><i>Writing Multiple Choice Questions to Improve Student Pass Rates: 2011, Webinar</i></p> <p><i>Emerging Technologies in Nursing Education: 2010. Boston, MA</i></p> <p><i>Legal Aspects of Clinical Nursing Education: 2009. Webinar</i></p> <p><i>Diabetes: The Diabetes and Obesity Connection: April 2008. Traverse City, MI</i></p> <p><i>Lab Value Interpretation: 2008. Petoskey, MI</i></p> <p><i>Documentation for Nurses: 2006 (24 CEU)</i></p> <p><i>Nursing and Malpractice Risks: Understanding the Law: 2006 (30 CEU)</i></p>
<b>Professional Memberships:</b>	<p>International Nursing Association of Clinical Simulation</p> <p>Society for Simulation in Healthcare</p> <p>National League of Nursing</p> <p>Michigan Academy of Science, Arts and Letters</p> <p>Sigma Theta Tau, LSSU Chapter</p>
<b>Name:</b>	<b>Reynolds-Keegan, Mary</b>

<b>Credentials/ Certificates:</b>	RN, DNP, MSN, BSN, LPN, Current American Heart Association CPR Provider 05/01-Present American Heart Association Regional Faculty/Instructor Trainer Post Masters Nurse Educator Certificate Program – Northern Michigan Univ. 2009
<b>Years Clinical Experience:</b>	37
<b>Research:</b>	Doctorate of Nursing Practice, December, 2010Oakland University, Rochester, Michigan Research: Postpartum Depression Risk Assessment Questionnaire Validation Study  Master of Science in Nursing; AdministrationNorthern Michigan University, Marquette, Michigan, 1996 Research Graduate Assistant: Elderly Women’s Perspective on Aging
<b>Community Service:</b>	10/2014 Conducted workshop on Omaha System to Marquette General Home Health & Hospice staff 1/2014 Volunteer for U.P. Noquemanon ski marathon at registration desk 10/2011 Marquette General Health System Women’s and Children’s Center fund raiser “Party in the Park” at the Matson Lower Harbor Park Aug.–Dec. 2010 Volunteer instructor/trainer for the Marquette General Health System American Heart Association regional training center for the Heart Saver and Basic Life Support for Health Care Provider CPR. 2007–2011 Marquette General Hospital Volunteer as a consultant in the Postpartum Emotional Support Program 2007–2010 Co-investigator for research conducted through MGHS to identify women at risk for Postpartum Depression 2007–2011 Counselor Postpartum Depression Upper Peninsula Postpartum Emotional Support Program 2002–2006 Committee Member, Marquette Senior High School Committee for Soccer 1999–2002 Treasurer for local Soccer Association for Youth  <u>University Service</u> Coordinated three nursing department features for the “LSSU Fall Flings” Individually met with multiple prospective students and their families  Advised new students in four summer freshman orientations  Mentored colleague on how to conduct Career Day
<b>University Service:</b>	<u>School of Nursing:</u> 2010 - present Nursing Evaluations and Outcomes Committee (Member) 2011 - present Student Affairs Committee (Member) 2011 - 2012 Practical Nursing Committee (Member) 2010 - 2011 Curriculum Committee (Member)  <u>University:</u> 2011 - present LSSU Human Subjects – IRB (Member) 2013 - present University Policy and Procedure Committee (Secretary) 2014 - present Faculty Center for Teaching Workgroup (Member) 2014 - present Distinction by Design Committee (Member)
<b>Clinical Practice Environments:</b>	May 2001 to August, 2010Hospital based: Staff Development Coordinator May 1999 – May 2001 Practice Manager, Occupational Medicine Clinic January 1994 – May 1999 MGHS Home Care R.N.

	<p>May of 1997– December 1993 Marquette County Health Department</p> <p>May 1979 – August 1981 Marquette General Health System: ICU Staff Charge Nurse</p> <p>January 1978 – May 1979 Marquette General Health System: OB Staff Charge Nurse</p>
<b>Awards:</b>	Blue Cross Blue Shield Foundation of Michigan, Student Award Program. \$3,000 to conduct applied research.
<b>Educational Experiences:</b>	<p>2010 Doctorate of Nursing Practice, Oakland University, Rochester, Michigan</p> <p>2009 Post Masters Nurse Educator Certificate Program; Northern Michigan University, Marquette, Michigan</p> <p>1996 Master of Science in Nursing; Administration; Northern Michigan University, Marquette, Michigan,</p> <p>1977 Bachelor of Science in Nursing; Northern Michigan University, Marquette, Michigan</p> <p>1973 Licensed Practical Nursing Diploma; Northern Michigan University, Marquette, Michigan</p> <p>Continuing Education:</p> <p>10/19/10 LSSU Academic Advising Workshop</p> <p>3/9/12 How Nursing Students Study: Kaplan Nursing Webinar</p> <p>7/16-17/12 22<sup>nd</sup> Annual Summer Institute in Nursing Informatics Conference:</p> <p style="padding-left: 40px;">Immersion in Nursing Informatics. University of Maryland School of Nursing (16.5 Credits)</p> <p>2012 It's All About Teaching: Empowering Students to Get on Course, Mark McBride: OnCourseWorkshop.com</p> <p>2012 Second City: How to Speak to Students at LSSU (Sexual harassment workshop)</p> <p>9/24/12 Teaching Workshop for Faculty. T. Zakrajsek, Director, Center for Faculty Excellence</p> <p>8/16/13 Patient Centered Medical Home Conference (3.5 Credits)</p>

8/21/13	The Basics of the Omaha System (5.5 Credits)
9/29/14	The New Science of Learning. Terry Doyle, PhD Doyle's Learner Centered  Teaching Book Featured by Chronicle of Higher Education (2.5 Hrs)
7/16-20/14	Nurse Educator Conference, Recharge Your Focus on Education. Breckinridge, CO (22.5 credits)
9/10/10	Perinatal factors causing neonatal morbidity and mortality. Russ Jelsema, MD
9/17/10	Treatment of Patients with Life Limiting Illness: Hospice & Palliative Care. L. Skendzel, MD
10/15/10	Potential mechanisms of plaque rupture & thrombosis during acute cardiovascular events. G. Bela, MD
10/29/10	Health care providers and grief. Aaron Scholnik, MD & L. Jarvis, Chaplain
1/7/11	Stress Testing in the New World: Who, What, When, Where and Why? (Big Brother is Watching). Pap, MD.
1/21/11	Teenage Pregnancy: Kids Having Kids. S. Saleem, MD
1/28/11	Patient as Teacher: Perioperative Medication Management for the Cardiac Patient. R. Brang, MD & T. Noren, MD
2/4/11	Molecular pathogenesis of endometrial cancer. John Risinger, PhD
2/11/11	Case presentation: Wegener's disease. T. Tanius, MD
2/18/11	Uterine cancers: Updates & challenges; Updates in ovarian cancer treatment. T. Buekers, MD, Amunkarah, MD.
3/18/11	Diagnostic testing of the acutely ill patient: A double edge sword. Narra & Griffith, MD
3/25/11	Osteopathic manual medicine. B Towan, DO
4/1/11	Alzheimer's dementia: Clinical PEARLS. K. Foley, MD
5/4/11	Medical Marijuana. J. Lehtinen, MD
9/16/11	Your Health Matters: Oral Health. E. Ghezzi, DDS
9/30/11	A Reason to Season: What's Spice Got to Do With It? Tieraona Low Dog, MD
10/14/11	Current Management of Hyperparathyroidism. R. Sipple, MD
10/21/11	Patient as Teacher: Recreational Substance Exposure-When the Pursuit of Health and Happiness Diverge. T. Kamerschen & T. Noren
10/28/11	Addressing a Child's Grief. L. Skendzel, MD & Sarah Harnett, Life Specialist
11/3/11	Geriatric Pain Evaluation and Management. L. Skendzel, MD
11/11/11	IM Improving Health Employee Health and Wellness. K. Piggot, MD
12/2/11	Cognitive Screening for Dementia. R. Kroll, RN, BSN
2/3/12	Interventional Radiology Treatment for Complications of Portal Hypertension. T. Getzen, MD
2/10/12	Small Bowel Tumors. M. Bassett, MD

	<p>2/17/12 Patient as Teacher: Care of the Acute Stroke Patient: A Convoluted Challenge. M. Perinot, MD &amp; T. Noren, MD</p> <p>2/24/12 Case Presentation: Cardiac Angiosarcoma. J. Povich</p> <p>3/12/12 Best Practices in Type 2 Diabetes Management: The Role of Insulin Therapy</p> <p>3/16/12 Human Papiloma Virus (HIV). Katie Brang, MD</p> <p>3/23/12 Patient as Teacher: The Complex Obstetrical Patient – Placenta Precreta: Managing Challenges on the Path to the Ultimate Happy Ending. Katie Brang, MD &amp; T. Noren, MD</p> <p>4/13/12 Patient as Teacher: Serotonin Syndrome. Acute Altered Mental Status- It Can Be Discombobulating. M. Chaturvedi, MD, &amp; T. Noren, MD</p> <p>4/20/12 Medical Marijuana in Michigan. M. Celilio, MD</p> <p>11/30/12 BLS Provider Certification.</p> <p>11/7/12 Immunization Update New and Updated Information. Dr. Louma</p> <p>1/25/13 Good Health: It's More Than Health Care. D. Sienko, MD</p> <p>2/1/13 STEMI Care in the Upper Peninsula. T. LeGalle, MD</p> <p>2/8/13 Probiotics. M. Chaturvedi, MD</p> <p>2/15/13 Patient as Teacher: Seems Down to Earth, But Could Be From Uranus. M. Gill, MD &amp; J. Surrell, MD</p> <p>3/8/13 Health Literacy. E. Griffin, MD</p> <p>3/22/13 Bisphosphonate Related Osteonecrosis of the Jaw (BRONJ): Prevention, Management, Documentation &amp; Treatment. F. Farbod, MD, DMD</p> <p>3/13 Practice Under Influence of Drug &amp; Device Industries. T. Tomlinson, PhD</p> <p>9/2/13 Disaster in Franklin County: A Public Health Simulation Online Training. University of Minnesota, School of Public Health.</p> <p>2/7/14 Opiate Use for Chronic Pain. MGH Family Practice Resident</p> <p>3/10/14 FDA Safety Alert: Limit Prescription Acetaminophen Doses (Medscape)</p> <p>3/10/14 First-Time Guidelines Address Stroke Risk, Prevention in Women (Medscape)</p> <p>4/5/14 Current Issues in Pain Management. Andrew Alshab, MD, Anesthesiologist WMH</p> <p>4/5/14 Diabetes Management. Maryanne Stott, RN, MSN CDE</p>
<b>Professional Memberships:</b>	<p>National League of Nursing, Sigma Theta Tau International Nursing Honor Society (Member) National League of Nursing (Member) Michigan Statewide Perinatal Mood Disorder Coalition</p>
<b>Name:</b>	<b>Peters, Paula Jo</b>
<b>Credentials/Certificates:</b>	<p>RN, PhDc, MSN, BSN, LPN 2009-present Progressive Care Certified Nurse (PCCN). AACN Certification Corporation through the American Association of Critical Care. 10/2012-10/2014 Advanced Cardiovascular Life Support. American Heart Association. 08/2012-08/2014 Basic Life Saving Healthcare Provider. American Heart Association.</p>
<b>Years Clinical Experience:</b>	23
<b>Research:</b>	
<b>Community Service:</b>	Lub, Dub, Splash 2010 Cardiac Conference, Volunteer, Boyne Mt. MI.

	<p>Organize and teach certification workshops ,American Nurses Credentialing Center’s Medical Surgical Registered Nurse Certification (RN-BC) and American Association of Critical Care Nurse’s Progressive Critical Care Nurse certification (PCCN), through McLaren Northern Michigan Hospital.</p> <p><b>Publications/Presentations</b>  2009-2011 Preceptor Workshops. McLaren Northern Michigan Hospital.  2009-2011 Co-Creator/Facilitator RN 1 Internship Program McLaren Northern Michigan Hospital.  3/2010 Mentor Workshop. McLaren Northern Michigan Hospital.  2010 Magnet Writer. McLaren Northern Michigan Hospital. Awarded Magnet Status 4/11/2011.  2009-2010 Facilitator for Progressive Care Certified Nurse &amp; Medical Surgical Certified Nurse Workshops/Study. McLaren Northern Michigan Hospital</p>
<b>University Service:</b>	<p><u>School of Nursing:</u>  Fall 2010-Spring 2011 Learning Resources Committee School of Nursing  Fall 2010-Spring 2011 Nurses’ Pinning Committee School of Nursing  Fall 2010-present Curriculum Committee School of Nursing member, Secretary 2013.  Fall 2010-present Outcomes Committee School of Nursing member, Chair 2013</p> <p><u>University:</u>  Fall 2011-present General Education University Committee member.</p>
<b>Clinical Practice Environments:</b>	<p>2002-2014 Cardiovascular Registered Nurse. Cardiovascular Unit, McLaren Northern Hospital  2004-2014 Nursing Preceptor. Cardiovascular Unit, McLaren Northern Michigan Hospital  2005-2006 Manager of Affiliated Medical Practices. Cheboygan Memorial Hospital.  2002-2005 Clinic Registered Nurse, Cheboygan Memorial Hospital, Cheboygan, Michigan  1996-2002 Owner and Manager, The Shingler Home Adult Foster Care. Livingston County, Michigan</p>
<b>Awards:</b>	<p>2010 Nightingale Award for Education and Research. McLaren Northern Michigan Hospital, Michigan.  2010 Nominee for Oakland University Nightingale Award. Excellence in Education-Research. Michigan.  2011 Nominee for Daisy Award for Extraordinary Nurses. McLaren Northern Michigan Hospital, Michigan.</p>
<b>Educational Experiences:</b>	<p>Ph.D. <b>Doctoral Student of Capella University.</b> Ph.D. Nursing Education; <u>Expected completion date 2015.</u> 120 Credits earned currently in the Dissertation phase.  M.S.N. <b>Michigan State University.</b> Masters of Science in Nursing. 2005-2008. Focus in Nursing Education. Graduated with honors.  B.S.N. <b>Mercy College of Detroit.</b> 1988-1992, licensed by State of Michigan in 1991 as Registered Nurse (Active).  L.P.N. <b>Alpena Community College.</b> Completed and licensed by State of Michigan in 1985 as Licensed Practical Nurse (Lapsed 1993).</p> <p><b>Continuing Education:</b>  2009-present Progressive Care Certified Nurse (PCCN). AACN Certification Corporation through the American Association of Critical Care.  10/2012-10/2014 Advanced Cardiovascular Life Support. American Heart Association</p>

	<p>9/26/2011 2011 NCLEX Conference, San Francisco, California. National Council of State Boards of Nursing</p> <p>5/18-5/22/2014, 4/30-5/5/2011 National Institute of Teaching and Critical Care Exposition. American Association of Critical Care Nurses.</p>
<b>Professional Memberships:</b>	<p>2013-present Registered Nurses Association in Michigan.</p> <p>2013-present American Nurses Association.</p> <p>2013-present Preventive Cardiovascular Nurses Association.</p> <p>2008-present National League for Nursing.</p> <p>2010-present Michigan Educational Association.</p> <p>2007-present Sigma Theta Tau International. Honor Society of Nursing. Alpha Psi Chapter.</p> <p>2005-present American Association of Critical Care Nurses. Certification Ambassador 2011-2012.</p> <p>2010-2011 Vice President. Twin Bays Chapter. American Association of Critical Care Nurses. Secretary and VP</p>
<b>Name:</b>	<b>Verdecchia, Kelli</b>
<b>Credentials/Certificates:</b>	<p>RN, MSN, BSN</p> <p>Michigan Nursing Licensure #4704194341 (renewal date April 2015)</p> <p>Ontario Nursing Licensure #9517897 (renewal date December 2014)</p> <p>ACLS from the American Heart Association (renewal date May 2016)</p> <p>BCLS from the American Heart Association (renewal date April 2016)</p>
<b>Years Clinical Experience:</b>	21
<b>Research:</b>	
<b>Community Service:</b>	<p>Past Chair position-St. Francis French Immersion Catholic School Council</p> <p><b>Presentations</b></p> <p>Fall 2014 Guest speaker, Chronic Kidney Disease and Diabetic Neuropathy. Sault Tribe of Chippewa Indians Diabetes Health Fair</p> <p>2012 Care of The Hospitalized Dialysis Patient presentation (1.0 CEU)</p>
<b>University Service:</b>	<p><u>School of Nursing:</u></p> <p>1/2013-present Curriculum Committee, member (9/2013- present Chair)</p> <p>9/2013- present Student Affairs Committee, member</p> <p>1/2013-present CCNE Accreditation Self-study Committee (Lead member)</p> <p>Fall 2014 CCNE Writing Self-Studies Workshop</p> <p>Summer 2012-Fall 2013 Simulation Committee, member</p> <p><u>University:</u></p> <p>9/2013- present Lake Superior State University Curriculum Committee, member</p>
<b>Clinical Practice Environments:</b>	<p>September 2010-December 2010</p> <p>September 2009-December 2009</p> <p>Supervisory Nurse Faculty (Contracted)</p> <p>Sault College Nursing Department</p> <p>Sault Ste. Marie, Ontario, Canada, P6A 5L3</p> <p>August 2012-currently (contractual)</p>



	<p>Nursing Project Coordinator War Memorial Hospital Sault Ste. Marie, Michigan 49783</p> <p>May 2009-January 2012 Director of Renal Services Chippewa Dialysis Services War Memorial Hospital Sault Ste. Marie, Michigan 49783</p> <p>August 1994-April 2009 Staff Nurse War Memorial Hospital Sault Ste. Marie, Michigan 49783</p> <p>September 2004-September 2006 Staff Nurse-Renal Dialysis (Contingent) Moses Dialysis Mackinaw Straits Hospital St. Ignace, Michigan 49781</p>
<b>Awards:</b>	Nancy Figel Nursing Leadership Award (2001) for Leadership Excellence
<b>Educational Experiences:</b>	<p>Masters of Science, Nursing Leadership in Healthcare Systems, Focus-Education (graduated August 2011) Graduate Honours Regis University Rueckert-Hartman College for Health Professionals Denver, Colorado 80221-1099</p> <p>Bachelor's of Science in Nursing (graduated 1993) Lake Superior State University Sault Ste. Marie, Michigan 49783</p> <p><b>Continuing Education:</b> Fall 2014 Lake Superior State University School of Nursing Simulation Development Day Fall 2013 Jehovah's Witnesses-The Medical and Ethical Challenge</p>
<b>Professional Memberships:</b>	<p>National League of Nursing, Honour Society of Nursing-Sigma Theta Tau International-Alpha Kappa-at-Large Chapter National League for Nursing Lake Superior Nursing Honor Society</p>



## Appendix III



650 W. Easterday Ave., Sault Ste. Marie, MI 49783

School of Nursing

**BYLAWS**

Article I. Name:

This organization shall be known as the School of Nursing, College of Nursing and Health Science

Article II. Purpose:

The purpose of this organization is to provide a unified approach to the development, planning, and implementation of the nursing programs in the School of Nursing.

Article III. Objectives and Function:

Section I. Objectives:

Consistent with University policies, practices, and agreements, this organization shall act as a recommending body in:

- A. providing a systematic process for curriculum design and evaluation,
- B. providing opportunities for faculty professional development,
- C. developing and implementing criteria for student admission, readmission, promotion and evaluation,

- D. providing a systematic process for total program evaluation,
- E. providing a mechanism for student input into program development and evaluation, and
- F. providing a systematic process for obtainment, utilization and evaluation of resources and facilities.

Section II. Functions:

- A. Periodically review the philosophy, conceptual framework, goals, and outcomes of the nursing programs.
- B. Formulate, interpret, and implement policies of the School of Nursing
- C. Systematically assess and evaluate all program tracks in the School of Nursing.
- D. Improve the educational program by continuous evaluation and revision based on outcome achievement, current nursing trends and needs, consistent with the criteria of nursing education as established by the National League for Nursing Accrediting Commission and the Michigan Board of Nursing.
- E. Promote communication and collaboration between personnel in clinical facilities and the faculty/administration.
- F. Approve and implement recommendations submitted by School of Nursing committees, appropriate groups and individuals.
- G. Evaluate student services.
- H. Promote the professional growth of faculty members.
- I. Provide students and faculty with adequate library and laboratory resources essential to the maintenance of a progressive nursing program.
- J. Make decisions regarding admission, progression, and graduation of students.

Article IV.

Membership:

- A. Dean/Associate Dean of the School of Nursing.
  
- B. Tenured, tenure track and permanent part-time School of Nursing faculty members

Article V.

Responsibilities of Chairperson:

- A. Role is assumed by Dean/Associate Dean of the School of Nursing

- B. Duties:

1. Preside at all meetings.
  
2. Review all minutes submitted by School of Nursing secretary prior to each meeting, noting corrections on the original copy.
  
3. Direct School of Nursing secretary to distribute copies of approved minutes as follows:
  - a. Original copy for permanent filing in School of Nursing office.
  
  - b. Full and part time nursing faculty.
  
4. Review all minutes at the end of each semester to determine unfinished business.

Article VI.

Meetings:

Section I. School of Nursing Meetings:

- A. Shall meet at least four times each semester. The time and dates shall be decided during the first week of each semester.
- B. The first meeting of the academic year shall be for the purpose of organization and for setting goals for the upcoming year.
- C. Up to two days prior to each regularly scheduled faculty meeting, additional items may be added to the agenda. Any faculty member or student may submit to the Dean/Associate Dean items to be placed on the agenda.

Section II. Special Meetings:

- A. Called at discretion of Dean/Associate Dean.
- B. Any member of the School of Nursing may submit to the Dean/Associate Dean a request for a special meeting.

Article VII.

Voting:

- A. All tenured, tenure track or permanent part-time faculty members of the School of Nursing shall have one vote.
- B. The quorum shall consist of 2/3 of the total membership.
- C. Unless otherwise specified, a majority of the quorum is required for a motion to carry.

Article VIII.

Committees:

Section I. Standing Committees:

Membership on committees shall be appointed by Dean/Associate Dean of the School of Nursing. There shall be a student representative on all standing committees except the Professional Development Committee. Committees meet each semester or more frequently as necessary.

- A. Curriculum
- B. Student Affairs
- C. Learning Resources
- D. Outcomes
- E. Practical Nursing

Section II. Task Forces

Shall be appointed by the Dean/Associate Dean of the School of Nursing to fulfill specific needs.

Section III. Minutes:

Minutes of all committee meetings and task forces shall be recorded and copies shall be distributed to all nursing faculty. They shall be filed appropriately in the School of Nursing office.

Section IV. Functions of Committees:

A. Curriculum Committee

1. Recommend curriculum policies and procedures of the nursing program consistent with School of Nursing and University policies, procedures and practices.
2. Recommend revisions of the nursing philosophy, conceptual framework, goals, outcomes and course content based on evaluation data and current trends in practice, education and research.

The Curriculum Committee may appoint subcommittees as needed to carry out the functions of the committee

- a. Coordinates review of courses relative to content and selected learning experiences to ensure that courses are congruent with the conceptual framework and program/level outcomes.
  - b. Review recommendations made by faculty and/or students regarding proposed curriculum changes.
  - c. Submit curriculum revisions at School of Nursing meetings for faculty consideration.
3. Evaluate nursing curriculum systematically according to specified program evaluation schedule.
  4. Assure that annual clinical facility evaluations are completed by students.
    - a. Tabulated results reviewed by Dean/Associate Dean of Nursing and course coordinators and recommendations made.
    - b. Major changes in clinical experiences are brought to faculty for approval.

#### B. Student Affairs Committee

1. Recommend admission, readmission, progression and graduation policies for Nursing Programs consistent with university policies.
  - a. Assure admission policies reflect non-discrimination according to the equal opportunity guidelines and in compliance with the Americans with Disabilities Act and any other applicable laws.
  - b. Implement the School of Nursing student grievance policy when necessary.
  - c. Only faculty members will review student grievances and review records for determining student admission, progression and reinstatement.
2. Formulate policies and procedures unique to nursing students.
3. Review and revise pre and post licensure student handbooks annually.
4. Coordinate the selection of recipients of nursing scholarships and awards, making recommendations to the nursing faculty for approval.



5. Provides for representation on the Pinning Ceremony Task Force.

C. Learning Resources Committee

1. Appraise the adequacy of learning resources and services used by nursing students.
2. Make recommendations related to library, other learning resources and university services to faculty.
  - b. Evaluate the use of library, nursing skills lab and computer lab.
  - c. Collaborate with Learning Center in selection of learning resources relevant to nursing students.
  - d. Referral and follow-up for any reported safety related concerns in nursing lab.

D. Outcomes Committee

1. Review for overall Evaluation Plan for the pre and post-licensure nursing programs and make recommendations to nursing faculty
2. Review and monitor reliability and validity of evaluation tools
3. Collate and evaluate data to identify trends
4. Conduct and share with the appropriate committee(s) and School of Nursing graduate alumni (6 mos, 1y) and employer surveys for the BSN program
5. Conduct and review results of student survey of services and facilities
6. Collate and share with the appropriate committee(s) and School of Nursing the attrition rate of BSN students

E. Practical Nursing Committee

1. Review and evaluate the curriculum of the Practical Nursing program

2. Evaluate clinical experiences provided for the practical nursing student
3. Review and revise admission policies and student grievances related to the Practical Nursing program.
4. Review and revise the Practical Nursing Student Policy Handbook annually
5. Recommend Practical Nursing program revisions as appropriate
6. Conduct and share with the appropriate committee(s) and School of Nursing graduate alumni (*6 mos, 1yr*) and employer surveys for the PN program
7. Conduct and review the results of student surveys of services and facilities
8. Collate and share with the appropriate committee(s) and School of Nursing the attrition rate of PN students

Voted in 1/16/13 by faculty. None opposed.

#### Appendix IV

### Suggested Course Pattern for BSN Nursing Curriculum Admission to Nursing Clinical Courses

First Year – Pre-clinical			
Semester 1		Semester 2	
BIOL 121	Human Anatomy & Physiology I	4	
			4
			4

ENGL 110 First-Year Composition I	3	CHEM 108 Applied Chemistry	3
PSYC 101 Introduction to Psychology	4	ENGL 111 First-Year Composition II	3
SOCY 101 Introduction to Sociology	4	PSYC 155 Lifespan Development	3
Elective	<u>3</u>	COMM 101 Human Communication	<u>3</u>
	18		16
<b>Apply for Admission to the Clinical Portion of the BSN program</b>			
<b>Second Year – Clinical Admission Required</b>			
<b>Semester 1</b>		<b>Semester 2</b>	
CHEM 110 Applied Organic & Biochemistry	4	BIOL 223 Clinical Microbiology	3
HLTH 208 Nutrition	3	HLTH 235 Healthcare Informatics	2
HLTH 232 Pathophysiology	3	HLTH 209 Pharmacology	3
NURS 211 Intro. to Professional Nursing	3	NURS 213 Fundamentals of Nursing	<u>6</u>
NURS 212 Health Appraisal	<u>4</u>		14
	17		
<b>Third Year – Clinical Admission Required</b>			
<b>Semester 3</b>		<b>Semester 4</b>	
MATH 207 Prin. of Statistical Methods	3	HUMN 251 Humanities	4
NURS434 Nursing Research	3	HLTH/NURS 328 Multicultural Approach. to Hlth Care	3
NURS 327 Adult Nursing I	<u>8</u>	NURS 325 Nursing of Childbearing Families	5
	14	NURS 326 Parent/Child Nursing	<u>5</u>
			17
<b>Fourth Year – Clinical Admission Required</b>			
<b>Semester 5</b>		<b>Semester 6</b>	
NURS 435 Nursing Management	4	NURS 433 Mental Health Nursing	5

NURS 431 Adult Nursing II	8	NURS 432 Nursing of Populations	5
Elective	<u>3</u>	NURS 436 Nursing Issues	2
	15	Humanities Elective	<u>3 – 4</u>
			15 – 16

#### Appendix V. Course Sequence Post-Licensure BSN Track

Curriculum plan at LSSU: English, speech, social science, natural science and support course requirements must be completed prior to starting NURS-prefix courses. Courses within the Health Sciences, other Disciplines, and General Education are routinely completed at the regional community college, and may have been included within the students Associate Degree. General Education requirements may also be met through achievement of a MACRAO stamp from Michigan community colleges.

NURS360	Prof. Nursing Concepts	4
NURS363	Comprehensive Health Appraisal	3
NURS/HLTH352	Health Issues of Aging Population	3
NURS365	Family Nursing Theory	3
NURS/HLTH328	Multicultural Approach to Health Care	3
NURS434	Nursing Research	3
NURS435	Nursing Management	4
NURS436	Contemporary Issues in Nursing	2
NURS437	Professional Nursing Leadership	2
NURS432	Community Health Nursing	5

#### Health Sciences (11 credits)

- [HLTH208](#) Principles of Human Nutrition\* 3
- [HLTH209](#) Pharmacology\* 3
- [HLTH232](#) Pathophysiology 3
- [HLTH235](#) Healthcare Informatics 2

#### Other Disciplines (13 credits)

- [BIOL121](#) Human Anatomy & Physiology I\* 4
- [BIOL223](#) Clinical Microbiology\* 3
- CHEM108 Life Chemistry I\* 3
- [MATH207](#) Principles of Statistical Methods 3

#### General Education (32 credits)

• <a href="#">PSYC101</a> Introduction to Psychology*		4
• <a href="#">SOCY101</a> Introduction to Sociology*	4	
• <a href="#">BIOL122</a> Human Anatomy & Physiology*		4
• CHEM110 Life Chemistry II	4	
• <a href="#">ENGL110</a> First-Year Composition I*	3	
• <a href="#">ENGL111</a> First-Year Composition II*	3	
• <a href="#">COMM101</a> Human Communication*	3	
• <a href="#">HUMN251</a> Humanities I		4
• Humanities Electives	3-4	
<b>General Electives (6 credits)</b>		

**Total Credits: 125**

*\*Credit by departmental exam (or NLN examination, passing at a 50 percentile or higher) is also available to students upon request. For further information, contact the main campus School of nursing at 906-635-2288, the Petoskey Regional Center at 231-348-6623 or the Escanaba Regional Center at 906-217-4123.*

*\*Prerequisite courses for entrance to the program.*

Appendix VI. School of Nursing Curriculum Change Tracking Tool

<b>Issue</b>	<b>Assessment</b>	<b>Curriculum Map</b>	<b>Action Plan</b>	<b>Evaluation Timeline</b>	<b>Results</b>
Fluid/Electrolytes & IV Administration				MAY 2015Grads: assess NCLEX results	
Infection Control					
Communication/SBAR					
Ethics					
Aging					
Research					

## Appendix Cover Sheet

Use a copy of this cover sheet for each document submitted. Evidence supporting the questions and narratives does *not* need to be electronically added to this Program Review form. One option is to use this cover sheet to add content to directly this Word document. A second option is to submit separate documents along with the form, also using this cover sheet for each document provided.

Send email with supporting documentation to: [TRACDAT@lssu.edu](mailto:TRACDAT@lssu.edu), with a cc to your dean, or submit as a hardcopy to your dean.

<b>School:</b>	<b>Nursing</b>
<b>Document Title (if attached) or Filename (if emailed):</b>	Appendix V: CCNE accreditation approval and compliance letter 12_2015
<b>This documentation is relevant to Question number:</b>	<b>5.</b>
<b>Briefly summarize the content of the file and its value as evidence supporting program review:</b>	<b>Reports and Responses from Commission on Collegiate Nursing Education (CCNE) Program Accreditation</b>



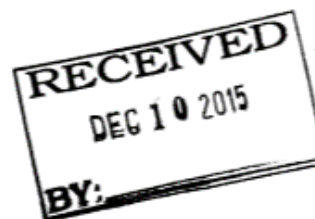
ONE DUPONT CIRCLE NW  
SUITE 530  
WASHINGTON DC 20036-1120

202-887-6791

WWW.AACN.NCHE.EDU/  
CCNE-ACCREDITATION

November 19, 2015

Ronald Hutchins, MSN, RN  
Dean  
School of Nursing  
Lake Superior State University  
650 West Easterday Avenue  
Sault Sainte Marie, MI 49783



Dear Mr. Hutchins:

On behalf of the Commission on Collegiate Nursing Education (CCNE), I am pleased to advise you that the CCNE Board of Commissioners acted at its meeting on October 19-22, 2015, to grant accreditation to the **baccalaureate degree program in nursing** at Lake Superior State University for 5 years, extending to December 31, 2020. The accreditation action is effective as of February 9, 2015, which is the first day of the program's recent CCNE on-site evaluation. You should plan for the next on-site evaluation to take place in the spring of 2020.

At its meeting, the Board determined that the program met all four accreditation standards. The Board additionally determined that there are compliance concerns with respect to Key Elements IV-E, IV-F and IV-H.

A copy of the accreditation team report that was sent to you earlier, along with the program's response to it, is being transmitted to the institution's chief executive officer as the Commission's official report to Lake Superior State University. We hope that both the results of the self-study process and the team report will be useful to the continued growth and development of the nursing program. A certificate of accreditation is enclosed.

In accordance with CCNE policy, if a program or institution elects to make a public disclosure of a program's accreditation status with CCNE, the program or institution must disclose that status accurately. The program or institution disclosing the information must identify the nursing program and its affiliation with CCNE. This statement must include *either* the accrediting agency's full name, address, and telephone number *or* the accrediting agency's full name and address of the website home page, which identifies CCNE's address and telephone number. For more information on CCNE's disclosure policy and to access the statements that CCNE has approved for use, as well as information on use of the CCNE accreditation seal, please visit <http://www.aacn.nche.edu/ccne-accrreditation/seal-policy/baccalaureate-graduate>. Please ensure that the institution's website and other materials are updated to reflect this language, as appropriate.

A Compliance Report must be submitted to demonstrate the program's compliance with the following key elements:

1. Provide evidence that program outcomes demonstrate program effectiveness (Key Element IV-E). Specifically, demonstrate that program outcomes are defined by the program and define expected levels of achievement, and demonstrate that the data are analyzed to determine program effectiveness, as required by the key element.
2. Provide evidence that faculty outcomes, individually and in the aggregate, demonstrate program effectiveness; and, specifically, that actual faculty



outcomes are presented in the aggregate for the faculty as a group, analyzed, and compared to expected outcomes. (Key Element IV-F)

3. Demonstrate that data analysis is used to foster ongoing program improvement. (Key Element IV-H)

The deadline for submitting the Compliance Report to CCNE is December 1, 2016.

As is required for all accredited programs, a Continuous Improvement Progress Report (CIPR) must be submitted at the mid-point of the accreditation term. Please note that the CIPR needs to address and demonstrate the program's compliance with the CCNE standards and key elements that are in effect at the time of its submission. As a courtesy, CCNE will send a reminder letter to the chief nurse administrator approximately five months prior to the CIPR submission deadline, informing the program of the specific standards to be used and providing guidance for the preparation of the report. The deadline for submitting the CIPR to CCNE is June 1, 2018. The Report Review Committee, and then the Board of Commissioners, will review the CIPR. For more information about CIPRs and the report review process, please refer to the CCNE procedures.

As a reminder, programs are expected to continue to comply with the current CCNE standards and procedures throughout the period of accreditation. These documents are available at <http://www.aacn.nche.edu/ccne-accreditation/standards-procedures-resources/baccalaureate-graduate>. This includes advising CCNE in the event of a substantive change affecting the nursing program. Substantive change notifications must be submitted to CCNE no earlier than 90 days prior to implementation or occurrence of the change, but no later than 90 days after implementation or occurrence of the change. These reporting requirements are discussed further in the CCNE procedures.

Thank you for your participation in the CCNE accreditation process and your commitment to quality nursing education. The Commissioners join me in expressing our very best wishes as you continue to promote excellence in nursing education.

Sincerely,



Judith F. Karshmer, PhD, PMHCNS-BC, FAAN  
Chair, Board of Commissioners

cc: President Thomas C. Pleger  
CCNE Board of Commissioners  
CCNE Accreditation Review Committee  
CCNE Evaluation Team

## Appendix Cover Sheet

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Send email with supporting documentation to: [TRACDAT@lssu.edu](mailto:TRACDAT@lssu.edu), with a cc to your dean, or submit as a hardcopy to your dean.

<b>School:</b>	<b>Nursing</b>
<b>Document Title (if attached) or Filename (if emailed):</b>	Appendix VI: LSSU Compliance Report for CCNE 2016 Final
<b>This documentation is relevant to Question number:</b>	5.
<b>Briefly summarize the content of the file and its value as evidence supporting program review:</b>	<b>Reports and Responses from Commission on Collegiate Nursing Education (CCNE) Program Accreditation</b>

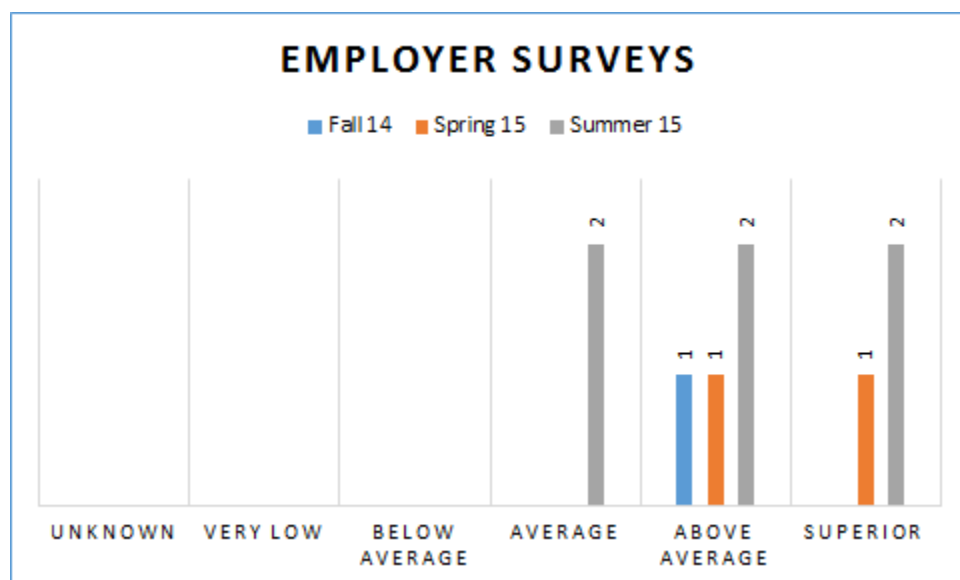
Lake Superior State University (22316)

School of Nursing  
Sault Ste. Marie, Michigan

This document is in response to the request of November 19, 2015 by the Commission on Collegiate Nursing Education (CCNE) for a compliance review of Key Elements IV-E, IV-F and IV-H. The report was compiled by members of the Lake Superior State University School of Nursing Evaluation and Curriculum committee and the Chief Nursing Administrator, Ronald Hutchins, Ph.D, RN.

**IV-E Program outcomes demonstrate program effectiveness.**

An analysis of aggregated data was completed, results demonstrated the Bachelor of Science in nursing program meets or exceeds employers' expectations for skills, knowledge, and demeanor of new graduate nurse(s) performance. A limited response was received and analyzed from fall semester 2014 through summer 2015. In response to limited survey returns, changes were implemented to have students sign permission for employer information to be returned to us. This has demonstrated an upward trend in survey response rates from employers.



In fall 2014, one employer survey was received depicting graduate(s) with above average performance. Spring 2015 semester offered additional information where one employer indicated graduate(s) employees were above average with a second employer rating the new nurse(s) employed as having superior performance. Summer 2015 demonstrated an increase of employer responses with six total and an equal division between average, above average, and superior performance ratings for new graduates employed at their facility. This data is routinely shared and discussed with Nursing faculty and the Community of Interest at bi-annual Nursing Advisory Council meetings.

In addition, indirect assessment and feedback of student performance through recruiter contact and outreach includes a history of exceptional graduate performance clinically and through professional achievement. Recruiters continue to visit campus on a regular basis to actively recruit, hire, and employ our current students.

According to the publications dated spring 2013 - fall 2014, alumni from the LSSU nursing program have prospered in many areas. The Alumni relations publication reports the program graduates working in the state Department of Corrections, doing consulting work, teaching both locally and in other areas of the United States, obtaining additional education including Family Nurse Practitioner (FNP) and PhD in nursing education, participating in community fundraising events that contribute to charitable organizations such as Hospice House, and noteworthy awards such as the Rochester Extraordinary Women's Award.

Personal communication by faculty with the graduates of the program indicate they are gaining employment in emergency departments, intensive care units, neonatal intensive care, rehabilitation centers, and distinguished organizations such as Cleveland Clinic, Mayo Clinic, Vanderbilt University, University of Pennsylvania and the US Navy, to mention a few. Locally, LSSU nursing graduates work at a variety of facilities in a wide range of positions, often self-reporting employment within six months of graduation.

Through social media (SON Facebook page) alumni report alignment with the SON Program outcome: *Appraises a solid base in liberal education for nursing practice.* These results demonstrate graduates in a wide variety of successful nursing careers, pursuing advanced degrees, and engaging in professional leadership roles.

**IV-F: Faculty outcomes, individually and in aggregate, demonstrate program effectiveness.*****Chief Nursing Administrator's Composite Report for Academic Year 2016***

Data for the composite report of School of Nursing faculty members was obtained through annually submitted activity reports, student submitted course evaluations, dean and peer classroom evaluation reports, department meeting documentation, and contract required summative performance evaluations. At the time of our initial CCNE visit, we and the reviewers discussed the use of the new contractual tool "Professional Assessment Weighting" (PAW) to use as a summary instrument to assess composite faculty performance. This tool still has not been demonstrated as valid or reliable and information from this instrument will not be included in this report. The following categories of Student Learning Activities; Advising and Student Support; Scholarly and Creative Activities; and Service Activities are the faculty performance areas that mirror the University and Faculty contract in regards to faculty assessment.

**1) Student Learning Activities:**

a) Instructional Design: All courses have syllabi that include faculty contact information, office hours, course description, course objectives, activities, assignments, grading scale, student learning objectives, and accommodation statements and services. All nursing courses are routinely reviewed by the School of Nursing Curriculum and Outcomes committee. Course material is leveled and treaded to meet the BSN program plan. The plan to incorporate high fidelity simulation into all BSN clinical classes has been met. This integration continues to be refined and expanded.

**b) Instructional Delivery:**

Instructional delivery is assessed annually through peer visits (minimum of 2 per academic year for any non-tenured faculty) and a class room visit by the Academic Dean. In addition, course evaluation surveys are distributed in all courses with 5 or more students. Classroom evaluations have been positive within the School of Nursing. Concerted efforts have been made over the past two years to increase student ownership of learning. This transition from "sage on the stage" to "guide by the side" has not been without friction between all involved. Identification and clarification of both student and faculty roles has been negotiated positively in most instances. There continues to be issues regarding student acceptance of their learning role. There also have been issues related to expectations of faculty regarding student performance that may not be realistic for all learners. These issues are now being addressed in faculty meetings and both workshops for students and faculty are expected during the academic year.

Composite Student Survey Results for BSN Nursing Courses Fall 14 through Spring 16 (Scale 1 to 5: 5 = strongly agree and 1 =strongly disagree)			
	Average	Median	Mode
Design: Regular class attendance was necessary for understanding course material	3.6	4	4
Design: The course was well organized, and objectives were realistic and appropriate	3.8	4	4
Design: The lectures and activities were effective in helping me learn	3.6	4	4
Design: There was ample opportunity to ask questions during class	4.3	4	4
Delivery: The instructor was enthusiastic about the course material	4.5	5	5
Delivery: The instructor clarified complex concepts	3.8	4	4
Delivery: I was encouraged to express my own opinions	3.93	4	4
Delivery: The instructor used student questions to discover points of confusion	3.8	4	4
Assessment: The instructor offered specific suggestions for improving my weaknesses	3.63	4	4
Assessment: The exams concentrated on important aspects of the course	3.66	4	4
Assessment: The instructor adequately explained the grading system	4.1	4	4
Assessment: The instructor was readily available for consultation with students	4.1	4	4
Miscellaneous: This course has increased my capacity for analytical and critical thinking	4	4	4.7
Miscellaneous: I learned a lot from this course	3.9	4	5
Miscellaneous: I participated actively in this classes	4.33	4	4.3

Course survey results support that students are generally very satisfied with instruction with median and mode survey results at either 4 or 5 using a 5 point scale. The two lowest scoring areas, “Regular class attendance was necessary for understanding course material” and “The lectures and activities were effective in helping me learn”, although being categorized in the “agree” side of the survey, show room for

improvement. The neutral to agree perception was most apparent in classes that were transitioning into a flipped environment. These same courses scored very well when students were asked to answer: “This course has increased my capacity for analytical and critical thinking” and “I learned a lot from this course”. These results support the departmental discussions regarding the need for the development and implementation of pre-semester workshops with students to fully describe and promote learner roles in a flipped learning environment. Student understanding of the “learner role” also has the potential of reducing stress related to role conflict.

Faculty members continue to refine course and program assessment through regular departmental communication through monthly curriculum and outcome committee meetings. Two, day long workshops for LSSU nursing faculty were held in the past academic year to integrate simulation debriefing into clinical course curriculums.

Course Assessment: The majority of nursing faculty are maintaining course assessment documents through the use of TracDat™. The School of Nursing tracks course identified student learning outcomes using the 9 essentials of the baccalaureate curriculum as its framework. While course outcomes are regularly documented in TracDat™, program outcomes have been historically reviewed in the outcomes committee. It is the recommendation of the Academic Dean that by the end of Academic year 2018 that the TracDat™ program be used to link all course outcomes to program outcomes in order to have a fully integrated assessment data base for the School of Nursing.

#### Advising & Student Support Activities:

Academic Advising: University distributed academic advising survey forms were distributed to students in Fall 15 and Spring 16. Results for nursing indicated general satisfied with advising. Question validity and reliability of surveys due to low return rate (less than 5 to 10% of students responded for majority of faculty). Faculty routinely maintain posted office hours or will post and maintain alternative hours when necessary. Only one faculty member in the School of Nursing has been identified as missing office hours without posting alternative hours and this has been addressed and continues to be monitored.

Student Mentoring: Students routinely report that faculty members have made themselves available outside of office and class hours to review and discuss course material, and in some cases provide emotional support and referral for those students experiencing stress. It has been identified that while many students are thriving in a flipped class environment, some are struggling due to not understanding their role in the learning process. Discussion has occurred at SON level as to how students may become better prepared for expectations within the learning environment. A pre-semester learning event is developed by the SON

curriculum committee that will involve a pre-semester learning workshop for students that will focus on maximizing learning in a flipped environment, identification of learning resources in an evidence based learning environment, and stress reduction self-care methods.

**Student Support:** Professor Cynthia Butcher continues to provide guidance as faculty advisor for the Lake Superior Student Nurses Association. This student group provides support for nursing students, and actively participates in community activities such as the Red Cross Blood Drive and Cancer Walk.

#### Scholarly & Creative Activities:

**Proficiency:** Two faculty members of the SON are in the final stages of completion of their terminal degrees. One faculty member completed certification as a medical-surgical nurse specialist. Two SON members attended INACSL in both 2015 and 2016. One member attended and graduated from NEA Emerging Leaders Academy 2015-16.

**Dissemination:** Faculty are being encouraged to present either at school meetings or through the University's Faculty Center for Training (FTC) original research or material gained at conference or workshop attendance. Professor Sandi King presented personal research regarding the use of a product that simulates the hearing of voices. She integrated the product into simulations for psychiatric nursing students and has shared the information with both the departments of behavioral health and criminal justice. Professor Jaimee Gerrie published a book "We Are Gatekeepers: A Self-Reflective Nursing Leadership challenge for Nurses at all Levels".

Dr. Kathy Berchem continues to integrate both her personal research and information obtained through workshops into our high fidelity simulation laboratory. Poster presentation at INACSL June 2015 – Applying Benner's Framework in Building & Evaluating a Simulation Faculty Development Program. Presentation May 2015 – Application of Benner's Framework to Simulation Faculty Development.

#### Service Activities by SON faculty members:

- a) To the Institution: Representation and active membership on all university committees including but not limited to curriculum, general education, faculty development, recruitment and retention, diversity, and the arts
- b) To the Profession: Active membership with Michigan Nursing Association, National League of Nursing, full range of specialty nursing groups (Midwifery, Med Surg, Public Health, Nurse Educators, Administrators, Simulation, etc.), Michigan Volunteer Registry for Emergencies, and membership in the local STT chapter.
- c) To the General Community:



Volunteers for: American Cancer Association. Community festivals, Community health and sustainability projects, Service Group memberships, and K-12 presentations, Health Fair education and screening projects.

Projected activities to address identified faculty development needs for Academic Year 2017 include:

- faculty attendance at national simulation conference
- participation in faculty development workshops developed and presented through university
- maintenance of professional development required for specialty certifications and required licensure
- targeted education related to course design, online/distance education, program assessment, and inclusion of simulation to facilitate learning.

### ***Faculty Report***

Since August 2016 two faculty members have resigned from the SON, Sandra Allen-Cary and Adrienne Beckham and replaced with full-time faculty members Charlotte Folkersma, MSN, RN and Marcia Scherer, PhD, RN. Professor Folkersma has extensive and current work experience as a registered nurse with War Memorial Hospital, as well as state-level affiliations with her work in the Legislative Committee for the Michigan Nurses Association. Dr. Scherer recently completed her nursing doctorate with emphasis on nursing education research and has 16 years of full-time teaching experience as well as 21 years of diverse skilled hospital nursing practice. These two nurses were chosen for their student-centered beliefs and similar values with the SON and the university at large. One core university value, opportunity, is implemented in courses taught by providing student opportunities beyond the classroom. For example, in NURS 212 Health Appraisal, nursing students complete a needs assessment at the home of a senior citizen established through the Community Action Agency of Sault Sainte Marie, Michigan.

Both new faculty attend “New Faculty Community of Practice “every other Wednesday morning led by Cathy Chaput, the Co-coordinator for Faculty Center for Teaching. This is congruent with LSSU’s core value of “excellence in teaching and learning.” This orientation program benefits new faculty in learning technology such as course management systems and discussions of broad topics within teaching and learning.

The SON faculty maintains expertise in their areas of responsibility by engaging in ongoing self-development. The SON embraces Boyer’s Model (1990) and definition of scholarship as the discovery or research including:

- researching and maintaining competency in their fields
- dissemination of knowledge through publication
- reading literature and keeping well-informed about trends
- scholarship of integration or interpretation

- fitting into large intellectual patterns through nursing theory
- scholarship of application
- scholarship of teaching

From Boyers Model, the Nursing Faculty use discovery, integration, application, and teaching as scholarship.

The University and the School of Nursing encourages and supports faculty development through such activities as active participation on University and School committees or activities; (including Faculty Association); student organizations; other work such as student recruitment, service in outside agencies as a representative of the University; workshops achieving advanced certifications; and support for doctorate achievement. Other methods of demonstrating scholarship include professional consulting, creative activity, providing educational experiences (course work, seminars, workshops, etc.) outside of teaching responsibilities, grant proposals, licensing and professional certification, participating in professional organizations, presentations, publications, unpublished manuscripts. It is expected that faculty submit plans for continued professional development and scholarship as part of their annual review process. Professionally related activities are evaluated based on the extent to which an activity contributes to the University's mission and strategic plan as an institution of higher education, the faculty's discipline, and his or her performance of professional responsibilities.

The University provides opportunities for faculty development and scholarship through internal resources such as the Faculty Center for Learning, who sponsors developmental workshops for faculty members on topics such as academic advising, course evaluation, teaching techniques, learning styles, and general faculty support when needed. Faculty also participates in SON retreat meetings at the beginning and end of each semester. These retreats often include educational activities for faculty, such as Simulation Faculty Development.

A structured Simulation Faculty Development Plan (SFDP) was considered an essential first step in effectively meeting student learning outcomes with nursing faculty knowledgeable in simulation education best practice. Benner (1984) posits that faculty learners start at the beginning by learning a common simulation language so that they may acquire the same basic knowledge. This was accomplished by utilizing the NLN's online simulation education courses as a foundation for the SFDP. Utilizing these foundational courses ensured consistency and accuracy in simulation concepts, allowing for movement to application of these concepts. Inclusive in this, was practical application of knowledge with active simulation teamwork in the simulation lab, a component of the SFDP Development day. By following directions and guidelines, the faculty learner then moved to Benner's advanced beginner stage (Benner, 1984). This included a full on-campus Development day for faculty at the Simulation Center, which engaged faculty learners in applying the

core concepts of the INACSL Standards of Best Practice for Simulation. Faculty learners spent a half day in the classroom for this process, and then spent the afternoon applying these concepts to simulation events.

Through the process, the faculty learners began making the transition to the competent level.

Benner's Level	Activity	Timeline	Detailed Plan
	<ul style="list-style-type: none"> <li>● <b>Faculty Needs Survey</b></li> </ul>	Spring 2014	<ul style="list-style-type: none"> <li>● Assess need for faculty learning and content</li> </ul>
<b>Level 1: Novice</b>	<ul style="list-style-type: none"> <li>● <b>Basic Training</b></li> <li>● Laerdal: simulator manikin</li> </ul>	Summer 2013 and ongoing	*Note: Simulator training took place upon purchase of manikins prior to the Needs Survey
<b>Level 2: Advanced Beginner</b>	<ul style="list-style-type: none"> <li>● <b>Faculty Development Program</b></li> </ul>		
	<ul style="list-style-type: none"> <li>● NLN SIRC Modules</li> </ul>	July - August 2014	<ul style="list-style-type: none"> <li>● Faculty view NLN modules independently prior to Development Day</li> </ul>
	<ul style="list-style-type: none"> <li>● Development day</li> </ul>	August 18 <sup>th</sup> , 2014	<ul style="list-style-type: none"> <li>● Faculty pre-test</li> <li>● Development day at Sim Center</li> <li>● Faculty post-test</li> <li>● Faculty NLN Evaluation surveys</li> </ul>
	<ul style="list-style-type: none"> <li>● Ongoing learner needs evaluation</li> </ul>	Fall 2014	<ul style="list-style-type: none"> <li>● Student evaluations of simulation events and faculty effectiveness</li> </ul>
<b>Level 3: Competent</b>	<ul style="list-style-type: none"> <li>● <b>4 semesters of Sim teaching</b></li> </ul>	Fall 2014 – Fall 2016	<ul style="list-style-type: none"> <li>● Faculty SIM refresher sessions each academic year.</li> <li>● Student evaluations of simulation events and faculty effectiveness</li> <li>● DASH debriefing evaluation</li> </ul>

<b>Level 4: Proficient</b>	<ul style="list-style-type: none"> <li>● <b>Peer mentorship</b></li> </ul>	Fall 2016 onward	<ul style="list-style-type: none"> <li>● Faculty mentoring of new faculty learners who would have completed online module learning via Moodle.</li> </ul>
<b>Level 5: Expert</b>	<ul style="list-style-type: none"> <li>● <b>Simulation research</b></li> </ul>	Fall 2017 onward	<ul style="list-style-type: none"> <li>● Synthesis of evaluation data for journal publication</li> </ul>

Prior  
to the

Development day, faculty learners were asked via anonymous Survey Monkey “How would you describe your knowledge and skill level of high-fidelity simulation in relationship to Benner’s (1984) Novice to Expert framework”. All eleven learners described themselves as ‘Advanced Beginners’. This same question was posed to them 6 months after the Development day, after they had had opportunity to apply the information they had learned. The responses were distributed as follows:

	Pre-Education Day n=11		6 Months post n=10	
<b>Answer Options</b>	<b>Response Percent</b>	<b>Response Count</b>	<b>Response Percent</b>	<b>Response Count</b>
Novice	0.0%	0	10.0%	1
Advanced Beginner	100.0%	11	40.0%	4
Competent	0.0%	0	40.0%	4
Proficient	0.0%	0	10.0%	1
Expert	0.0%	0	0.0%	0

Faculty rated themselves as having increased their knowledge and skills regarding Simulation Education.

At the competent stage faculty learners began to prioritize actions taken during simulation and understanding the impact of how these measures affect the student's overall learning. Through continued mentoring and experience, the nursing faculty continued through Benner’s proficient and expert stages in their learning of simulation education. It is anticipated that nursing faculty will evolve past the competent stage after approximately 4 semesters of teaching with simulation, approximately in fall 2016.

The progression to proficient and expert stages for each faculty is dependent upon their sustained use and active engagement in continuing education on in this pedagogy. During each of these stages, students and peer mentors will continue the evaluation process, providing continuous valuable data on outcome attainment of faculty knowledge acquisition. This process of continuous evaluation will provide data for continued evidence-based revision and improvement of the SFDP.

In preparing this report, we identified an opportunity to create linkages between individual and aggregate faculty outcomes demonstrating program effectiveness. Utilizing the TracDat Assessment tool provided by LSSU, the Curriculum/Outcomes committee has created a shared repository for Nursing faculty to collect continuing education documentation, demonstrating ongoing achievement that is congruent with institutional and program outcomes.

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

Faculty utilize a data assessment tracking tool titled TracDat. This computerized software is a shared repository where faculty, each semester, input course assessment data, track student outcomes in relationship to the BSN program outcomes and devise action plans if student learning outcomes are not met. Each faculty member, creates student learning goals in alignment with the assignments identified in the BSN program outcomes chart (See original report). This data is tracked and trended until the goal is met to which signifies successful student learning. All nursing faculty have access to view this data ongoing. Additionally this data is reviewed by the Chief Nursing Administrator and discussed with faculty during yearly evaluations.

Additionally, the SON Curriculum committee systematically reviews each nursing course within the program to review course content and make recommendations for improvement in relationship to meeting student learning outcomes. In 2014, this committee completed a review of specific nursing courses to highlight course leveling and identify areas of improvement. (See document titled School of Nursing Curriculum Change Tracking tool in original report). Results of this review are shared with the faculty to enable changes to be made for ongoing process improvement., course review for NURS 435 Leadership and Management was completed and suggestions for revision related to student evaluations was made (see Curriculum Committee minutes from 01/27/2016). Additionally, on 04/13/2016, the Curriculum Committee reviewed course content for NURS 325 & 326 (Pediatrics & Obstetrics). Upon review of these courses and voiced students concerns, scheduling of course content was changed in relationship to simulation preparation to meet student needs.

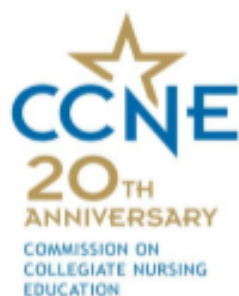


## Appendix Cover Sheet

Use a copy of this cover sheet for each document submitted. Evidence supporting the questions and narratives does *not* need to be electronically added to this Program Review form. One option is to use this cover sheet to add content to directly this Word document. A second option is to submit separate documents along with the form, also using this cover sheet for each document provided.

Send email with supporting documentation to: [TRACDAT@lssu.edu](mailto:TRACDAT@lssu.edu), with a cc to your dean, or submit as a hardcopy to your dean.

<b>School:</b>	<b>Nursing</b>
<b>Document Title (if attached) or Filename (if emailed):</b>	<b>Appendix VII: 2017_12_RRCBAL_B_LSSU_MI</b>
<b>This documentation is relevant to Question number:</b>	<b>5.</b>
<b>Briefly summarize the content of the file and its value as evidence supporting program review:</b>	<b>Reports and Responses from Commission on Collegiate Nursing Education (CCNE) Program Accreditation</b>



655 K STREET NW  
SUITE 750  
WASHINGTON DC 20001

202-887-6791

CCNEACCREDITATION.ORG

December 15, 2017

Ronald Hutchins, MSN, RN, CNE  
Dean  
School of Nursing  
Lake Superior State University  
650 West Easterday Avenue  
Sault Sainte Marie, MI 49783

Dear Mr. Hutchins:

On behalf of the Commission on Collegiate Nursing Education (CCNE), I am writing to advise you that the CCNE Board of Commissioners reviewed the compliance report submitted on November 29, 2016 by the baccalaureate degree program in nursing at Lake Superior State University and determined that the program has demonstrated compliance with Key Element IV-H, but that there are remaining compliance concerns for Key Elements IV-E and IV-F.

The Board directs the program to submit a follow-up report demonstrating compliance with Key Elements IV-E and IV-F, as follows:

Provide evidence that program outcomes demonstrate program effectiveness (Key Element IV-E). Specifically, the report did not present expected levels of achievement and aggregate data.

Provide evidence that faculty outcomes, individually and in the aggregate, demonstrate program effectiveness (Key Element IV-F). Specifically, the report did not present expected levels of achievement and aggregate data.

**The follow-up report must be received in the CCNE office on or before March 15, 2018.** Please email the report, along with appendices, if any, as a PDF attachment to [ccnereports@ccneaccreditation.org](mailto:ccnereports@ccneaccreditation.org). The report will be reviewed by the Board of Commissioners at its next scheduled meeting.

As a reminder, programs are expected to comply with the [current CCNE standards and procedures](#) throughout the period of accreditation. This includes advising CCNE in the event of any substantive change affecting the nursing program. Substantive change notifications must be submitted to CCNE no earlier than 90 days prior to implementation or occurrence of the change, but no later than 90 days after implementation or occurrence of the change. These reporting requirements are discussed further in the CCNE procedures.

CCNE apologizes for the delay in getting this action to you. Such a delay is unacceptable and is not consistent with CCNE practices. Over the past couple of years, CCNE has experienced a significant growth in the number of programs it accredits, and this has resulted in a heavier volume of reports being submitted. I am pleased to share with you that additional staff have been hired to support the report review process and to prevent such lengthy delays from occurring in the future. We appreciate your patience.



Please contact Lina Trullinger, CCNE Associate Director, for guidance or clarification, if needed. She can be reached by telephone at 202-887-6791 x245 or by email at [ltrullinger@ccneaccreditation.org](mailto:ltrullinger@ccneaccreditation.org).

Sincerely,

A handwritten signature in black ink that reads "Susan D. Ruppert". The signature is written in a cursive style with a small "D" in the middle of the first name.

Susan D. Ruppert, PhD, FNP-C, FAANP, FAAN  
Chair, CCNE Board of Commissioners



<b>School:</b>	<b>Nursing</b>
<b>Document Title (if attached) or Filename (if emailed):</b>	Appendix VIII: CCNE Response Report FINAL VERSION
<b>This documentation is relevant to Question number:</b>	<b>5.</b>
<b>Briefly summarize the content of the file and its value as evidence supporting program review:</b>	<b>Reports and Responses from Commission on Collegiate Nursing Education (CCNE) Program Accreditation</b>

**Lake Superior State University (22316)**  
**School of Nursing**  
**Sault Ste. Marie, Michigan**

This document is in response to the request of December 15th, 2017 and by the Commission on Collegiate Nursing Education (CCNE) for a compliance review of Key Elements IV-E and IV-F. The report was compiled by members of the Lake Superior State University School of Nursing Evaluation and Curriculum committee and the Chief Nursing Administrator, Ronald Hutchins, Ph.D., RN.

**IV-E Program outcomes demonstrate program effectiveness.**

The letter referenced above outlined the need for IV-E to provide evidence that program outcomes demonstrate program effectiveness based on the key element associated with section IV-E. Specifically, past reports did not present expected levels of achievement or aggregate data to compare to. With past data collection not being a complete process, we now recognize the critical nature of correlating evaluation data to pre-determined expected outcomes.

As indicated in prior reports, our overall BSN program outcomes are aligned directly with the nine Baccalaureate Essentials from the American Association of Colleges of Nursing (AACN).

**The Baccalaureate Nurse Essentials Program Standards and Expected Program Outcomes  
for the LSSU BSN Program**

- I.** Liberal Education for Baccalaureate Generalist Nursing Practice Appraises a solid base in liberal education for nursing practice
- II.** Basic Organizational and System Leadership for Quality Care and Patient Safety Synthesizes knowledge and skills in leadership, quality Improvement, and patient safety to provide quality health care
- III.** Scholarship for Evidence-Based Practice Evaluates research for potential application for evidence-based practice
- IV.** Information Management and Application of Patient Care Technology Designs knowledge and skills in information management and patient care technology in the delivery of quality patient care

**V. Health Care Policy, Finance, and Regulatory Environments** Analyzes health care policies, including financial and regulatory, directly and indirectly influencing the nature and functioning of the healthcare system

**VI. Inter-professional Communication and Collaboration for Improving Patient Health Outcomes** Appraises communication and collaboration among health care professionals and patients to deliver high quality and safe patient care

**VII. Clinical Prevention and Population Health** Determines health promotion and disease prevention at the individual and population health levels

**VIII. Professionalism and Professional Values** Emulates professionalism and inherent values of altruism, autonomy, human dignity, integrity, and social justice

**IX. Baccalaureate Generalist Nursing Practice** Synthesizes nursing practice with patients, individuals, families, groups, communities, and populations across the lifespan and across the continuum of health care environments and the variations of care, the increased complexity, and the increased use of health care resources inherent in caring for patients

These nine Essentials are guideposts for the LSSU SON and are therefore included in our BSN student handbook, and are accessible on our LSSU SON webpage. Newly admitted students are presented with the expected program outcomes as a part of their initial coursework in NURS 211 Introduction to Professional Nursing. Subsequently, course outcomes created based on the nine essentials, are evaluated in each nursing course and with findings inputted into our campus wide tracking system called Nuventive Improve (TM) (in prior reports known as TracDat). Using the Nuventive Improve (TM) data system, faculty members track results of assignments, test questions, written papers, clinical performances to measure student learning outcomes *in relationship to program outcomes*. The Nuventive Improve (TM) tracking system assists all faculty members to target the beginning tracking date, the assessment method used, the threshold to be met, the findings, a determination of outcome achievement, and any action to be taken in subsequent analysis in the event the threshold target for each course outcome measured is not met. The SON is now in the process of using the Nuventive Improve (TM) assessment data in the aggregate and for decision-making purposes in a more structured way program wide on an ongoing basis.

The curriculum evaluation process that the SON undergoes each year entails evaluation of program outcomes with subsequent discussion and curriculum improvement. In order to evaluate the meeting of program outcomes for the BSN program, each student completes an 'End of Program Curriculum Evaluation' survey. The survey is set up based on the LSSU BSN Program objectives, which are reflective of the nine Baccalaureate Essentials from the American Association of Colleges of Nursing (AACN)

Based upon feedback from these surveys, it was identified that success in meeting program outcomes regarding Evidence-based practice would be best attainable by moving NURS 434 Nursing Research from the senior level to the first semester of the junior level to provide more opportunities for application throughout the entire program. Follow-up survey data from future semesters will be utilized to evaluate whether this change was beneficial to assisting student in meeting the overall program outcome regarding Evidence-based practice.

Additional program curriculum evaluation and discussions have prompted other curriculum changes within our program. The SON Curriculum/Outcomes committee (which meets biweekly during the semester) has developed and is implementing an evaluation plan to assess each course within the program. This process is summarized and reported to the SON faculty during the monthly and bi-annual faculty retreat. During the December 2017 SON Faculty bi-annual retreat, faculty analyzed data from the 2016 NCLEX Pearson report and found that LSSU graduates scored had their lowest scores in the area of Pharmacology. Through threading evaluation of all of the courses within our program, faculty determined that concepts of Pharmacology were indeed being threaded through each nursing course. With input from nursing students, faculty determined that success in achieving program outcomes would further be supported by the addition of an elective Case Study based Pathopharmacology course. Therefore, course development will occur during Summer 2018, with expected trial implementation to occur Spring 19. Success of this strategy will be evaluated with subsequent NCLEX Pearson reports. Other courses have gone through this evaluation process, with some requiring no change (e.g. HLTH 235 Health Informatics).

In addition to this process, the SON also reviews and evaluates aggregate data from Employer surveys regarding program outcomes related to LSSU graduates. From this data, the SON has now developed expected outcomes for employer ratings of new graduates (outlined in the following chart):

<b>Year</b>	<b>LSSU SON Expected Outcome for Employer New Graduate Rating (as compared to other BSN graduates)</b>	<b>Actual Employer New Graduate Rating</b>
Fall 2014	100% at 'Average' or above	100%
Spring 2015	100% at 'Average' or above	100%
Summer 2015	100% at 'Average' or above	100%
Fall 2015	100% at 'Average' or above	data pending
Spring 2016	100% at 'Average' or above	data pending
Fall 2016	100% at 'Average' or above	data pending
Spring 2017	100% at 'Average' or above	Surveys to be sent out May 2018
Fall 2017	100% at 'Average' or above	Surveys to be sent out Jan 2019

The LSSU SON uses the following evaluation to gather data:

**How would you rate the LSSU Nursing graduate with respect to the following characteristics, in comparison with other baccalaureate nurses you know and /or supervise?**

1. Knowledge and Lifelong learning

Example: The graduate participates in continued learning, attends educational inservices, applies and shares learned knowledge to patient care and work environment, may be seeking further formal education.

Very Low      Below average      Average      Above average      Superior      Unknown

2. Technical Skills

Example: Graduate performs physical, environmental, individual, family, or community assessments thoroughly and appropriately as job description dictates, and performs psychomotor skills safely.

3. Management of Responsibilities

Example: Graduate performs assigned tasks in a timely manner, able to utilize information technologies to care for assigned clients, performs medication administration safely, takes initiative to complete tasks, documents care appropriately, is responsible and accountable for actions and delegation to unlicensed staff, can organize and prioritize nursing care.

4. Critical thinking/ clinical judgment

Example: Graduate demonstrates sound judgments, problem solving of patient and organizational issues, analyzes all perspectives and gathers important information about an issue before making judgment or suggestion.

5. Communication

Example: Graduate has interpersonal skills and intra-professional skills, able to conduct patient education appropriately for the level of patient and family understanding, can demonstrate written and verbal communication skills.

6. Customer Service/Ethics

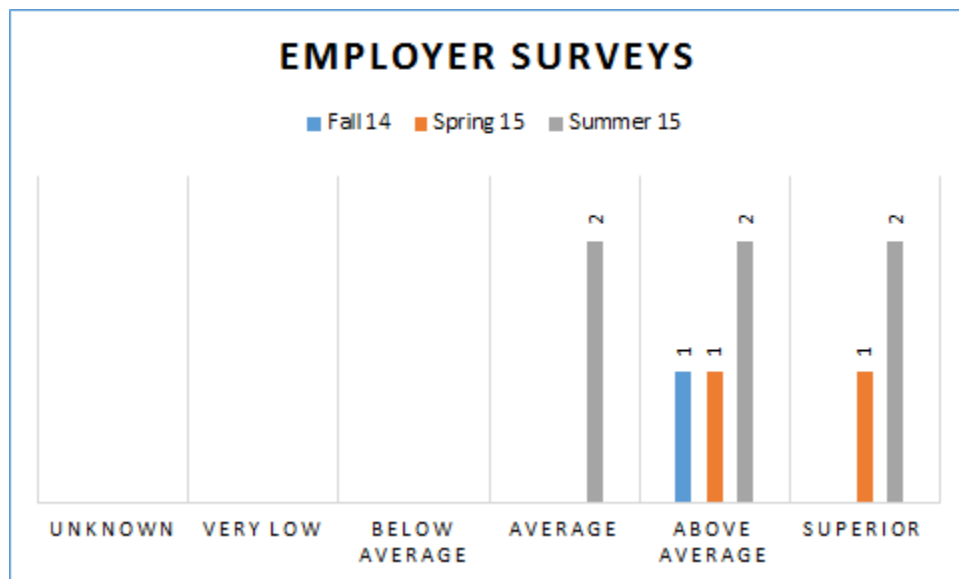
Example: Graduate shows concern for patients, families, and coworkers, demonstrates patient safety as a priority of duty, able to resolve conflicts appropriately, and demonstrates customer service, adheres to the Code of Ethics as set forth by the American Nurses Association

7. Professionalism

Example: Graduate appearance is neat, clean, appropriate, and complies with organizations dress code, verbal communication is professional at all times, acceptance of diversity of clients and coworkers, a contributor to teamwork, and punctual attendance.

8. Overall performance of Graduate
9. What other qualities would you, as an employer of our LSSU graduate nurses, like to see in future LSSU graduates?
10. Additional comments:

The following graph is a visual representation of the results of the survey data from Fall 2014-Summer 2015:



In fall 2014, one employer survey was received depicting graduate(s) with above average performance. Spring 2015 semester offered additional information where one employer indicated graduate(s) employees were above average with a second employer rating the new nurse(s) employed as having superior performance and stated our graduates were “great additions to their professional staff”. Summer 2015 demonstrated an increase of employer responses with six total and an equal division between average, above average, and superior performance ratings for new graduates employed at their facility. This data is routinely shared and discussed with Nursing faculty and the Community of Interest at annual Nursing Advisory Council meetings.

An analysis of aggregated data was completed, results demonstrated that employers’ rated the performance of our graduates in the range of ‘Average’ to ‘Superior’ . A limited response was received and analyzed from fall semester 2014 through summer 2015. In response to limited survey returns, changes were implemented to have students sign permission for employer information to be returned to us. We anticipate an upward trend in survey response rates from employers for our program outcomes committee to continually evaluate responses, on a yearly basis, since surveys are sent to employers one year post graduation. Thus, data from the 2016 – 2017 regarding the performances of our more recent graduates will be compiled at the end of this school year



2017 regarding the performances of our more recent graduates will be compiled at the end of this school year when all employer surveys are returned for both our fall, 2016 and spring, 2017 cohorts. To that end, The School of Nursing (SON) faculty members will continue to strive for employer survey outcome goals to achieve average, above average, or superior graduate outcomes as indicated on the example employer survey used.

According to data that was provided by LSSU Alumni Association, the graduate numbers are as follows:

- 2014: 30 graduates
- 2015: 48 graduates
- 2016: 48 graduates

Out of these 126 students, there were only 11 graduates that had shared actual employment data. The following is a representation of this data and demonstrates the wide distribution of geographic employment locations by our graduates (including International locations); a factor that contributes to challenges in data collection.

<b>Geographic Area</b>	<b>2014 (30 grads)</b>	<b>2015 (48 grads)</b>	<b>2016 (48 grads)</b>
Upper Peninsula, MI	10	20	18
Lower, MI	17	23	20
Out of State	3 total: (WI; SC; WA)	5 total: (MN; TN; OH; WI; Ontario, Canada (1))	10 total: (IL; NM; GA; TX; OH; MN; FLA (2) Ontario, Canada (2))

According to Alumni publications dated spring 2013 - fall 2014, alumni from the LSSU nursing program have prospered in many areas. The Alumni relations publication reports the program graduates are also employed in State Department of Corrections, participating in consulting work, educating both locally and in other areas of the United States, obtaining graduate education, participating in community fundraising events that contribute to charitable organizations such as Hospice House, and noteworthy awards such as the Rochester Extraordinary Women's Award.

Personal communication by faculty with the graduates of the program indicate they are gaining employment in emergency departments, intensive care units, neonatal intensive care, rehabilitation centers, and distinguished organizations such as Cleveland Clinic, Mayo Clinic, Vanderbilt University, University of Pennsylvania and the US Navy, as example. Locally, LSSU nursing graduates work at a variety of facilities in a wide range of positions, often self-reporting employment within three months of graduation. Nursing students in their final year of schooling are also being recruited for positions prior to their graduation.

**IV-F: Faculty outcomes, individually and in aggregate, demonstrate program effectiveness.**  
*Chief Nursing Administrator's Composite Report for Academic Year 2016*

As described in IV-E, the SON became aware of the need for IV-F to provide evidence that faculty outcomes demonstrate program effectiveness based on the key element associated with section IV-F. It was noted that past reports did not present expected levels of achievement or aggregate data to compare. With past data collection not being a complete process, we now recognize the critical nature of correlating evaluation data to pre-determined expected outcomes for facilitation of program effectiveness.

The LSSU nursing faculty follows a structured plan for annual evaluations that utilizes a contractual tool titled Professional Assessment Weighting (PAW). Included in the annual evaluation is an assessment of teaching effectiveness, scholarly activities, service to the university, department, community and the profession. Annual summative faculty reports are submitted to the Chief Nursing Administrator for review and a plan for continued success is discussed regarding tenure, promotion and maintenance of current rank. The annual faculty evaluation, promotion and tenure process (as described in the faculty handbook) are utilized to measure faculty outcomes as they align to program outcomes.

Aggregate faculty outcomes are evaluated in the areas of effective teaching, scholarship and service. The LSSU nursing faculty outcomes are consistent with both the University and program Mission, goals and expected outcomes.

At the time of writing the initial report, no formal process for determining benchmark metrics for faculty effectiveness existed. This process was put in place 2 years ago. At the beginning of each academic year, the SON faculty now determines the faculty evaluation outcomes that must be achieved. The table below is representative of the 2017-2018 academic year determined at the SON meeting 8-22-2017.

	<b>0-2 years</b>	<b>3 years-tenure</b>	<b>Tenure</b>
<b>Student Learning</b>	75%	70%	65%
<b>Advising (including giving advice)</b>	10%	10%	10%
<b>Scholarly Activities</b>	10%	10%	10%
<b>Service Activities</b>	5%	10%	15%

Through assessment of yearly evaluations, the Chief Nursing Administrator reports that 100% of Faculty has achieved these outcomes.

The following represents evaluation data results compiled at the time of writing the initial report:

1) Student Learning Activities:

- a) Instructional Design: All courses have syllabi that include faculty contact information, office hours, course description, course objectives, activities, assignments, grading scale, student learning objectives, and accommodation statements and services. All nursing courses are routinely reviewed by the School of Nursing Curriculum and Outcomes committee. Course material is leveled and treaded to meet the BSN program plan. The plan to incorporate high fidelity simulation into all BSN clinical classes has been met.

This integration continues to be refined and expanded.

- b) Instructional Delivery: Instructional delivery is assessed annually through peer visits (minimum of 2 per academic year for any non-tenured faculty) and a classroom visit by the Academic Dean. In addition, course evaluation surveys are distributed in all courses with 5 or more students. Classroom evaluations have been positive within the School of Nursing. Concerted efforts have been made over the past two years to increase student ownership of learning. This transition from “sage on the stage” to “guide by the side” has not been without friction between all involved. Identification and clarification of both student and faculty roles has been negotiated positively in most instances. There continues to be issues regarding student acceptance of their learning role. There also have been issues related to expectations of faculty regarding student performance that may not be realistic for all learners. These issues are now being addressed in faculty meetings and both workshops for students and faculty are expected during the academic year.

<b>Composite Student Survey Results for BSN Nursing Courses Fall 14 through Spring 16 (Scale 1 to 5: 5 = strongly agree and 1 =strongly disagree)</b>			
	Average	Median	Mode
Design: Regular class attendance was necessary for understanding course material	3.6	4	4
Design: The course was well organized, and objectives were realistic and appropriate	3.8	4	4
Design: The lectures and activities were effective in helping me learn	3.6	4	4
Design: There was ample opportunity to ask questions during class	4.3	4	4
Delivery: The instructor was enthusiastic about the course material	4.5	5	5

Delivery: The instructor clarified complex concepts	3.8	4	4
Delivery: I was encouraged to express my own opinions	3.93	4	4
Delivery: The instructor used student questions to discover points of confusion	3.8	4	4
Assessment: The instructor offered specific suggestions for improving my weaknesses	3.63	4	4
Assessment: The exams concentrated on important aspects of the course	3.66	4	4
Assessment: The instructor adequately explained the grading system	4.1	4	4
Assessment: The instructor was readily available for consultation with students	4.1	4	4
Miscellaneous: This course has increased my capacity for analytical and critical thinking	4	4	4.7
Miscellaneous: I learned a lot from this course	3.9	4	5
Miscellaneous: I participated actively in this classes	4.33	4	4.3

Above Graphic representation - See Appendix A.

Course survey results shown above from Fall 2014 to Spring 2016 support that students are generally very satisfied with instruction with median and mode survey results at either 4 or 5 using a 5-point scale. The two lowest scoring areas, “Regular class attendance was necessary for understanding course material” and “The course was well organized, and objectives were realistic and appropriate”, although being categorized in the “agree” side of the survey, show room for improvement. In the most recent aggregate evaluations (outlined in the paragraph below), both of these areas have shown improvement.

This aggregate data for the composite report of School of Nursing faculty members was obtained through annually submitted activity reports, student submitted course evaluations, dean and peer classroom evaluation reports, department meeting documentation, and contract required summative performance evaluations. At the time of our initial CCNE visit, there was discussion regarding the implementation of the new contractual tool “Professional Assessment Weighting”

(PAW) to use as a summary instrument to assess composite faculty performance. At that time this tool did not demonstrated as valid or reliable and information from this instrument was not included in the report. However in the 2017 academic year a new online student evaluation process and data collection tool was implemented that demonstrated validity while evaluating faculty effective teaching (see attached copy titled School of Nursing Compilation F17 included in the end of this report). Within this 5 point Likert scale are the following overall indicators of instructional design, instructional delivery, instructional assessment and miscellaneous. This faculty performance evaluation tool is in alignment with both the University and LSSU SON's program mission, goals and expected student outcomes. In addition this online faculty evaluation tool is representative of the University Faculty contract in regards to faculty assessment as representative of the attached document titled LSSU All-courses-Compilation F17 included in the end of this report.

#### Faculty Scholarship and Publication

The SON faculty maintains expertise in their areas of responsibility by engaging in ongoing self-development. The SON embraces Boyer's Model (1990) and definition of scholarship as the discovery or research including:

- researching and maintaining competency in their fields
- dissemination of knowledge through publication
- reading literature and keeping well-informed about trends
- scholarship of integration or interpretation
- fitting into large intellectual patterns through nursing theory
- scholarship of application
- scholarship of teaching

From Boyers (1990) Model, the Nursing faculty use discovery, integration, application, and teaching as scholarship. Faculty outcomes for scholarship include the doctoral prepared faculty in the SON, publications, national certifications and continuing education. The SON of LSSU has gradually increased the number of doctorally prepared faculty over the last 3 years. Applicants for tenure-track positions are preferred and supported by the university. One current

faculty member is enrolled in a doctoral program and a new hire tenure-track with a PhD is a recent addition to the LSSU nursing faculty in 2016-2017 academic year. Noted below is a chart depicting the LSSU SON's faculty aggregated percentage outcome for the academic years of 2015 through to the current year.

<b>Year</b>	<b>Expected Outcome</b>	<b>Percentage of LSSU Faculty Doctorally Prepared</b>
2015	25 %	18 %
2016	25 %	27 %
2017	25 %	40 %
2018	25 %	40 %

This definition of faculty scholarship and publication is also reflective of Lake Superior State University's faculty collective bargaining contractual language that denotes the extent to which an activity contributes to the faculty member's performance. Scholarly and Creative activities are clearly defined within the faculty contract: (<https://www.lssu.edu/wp-content/uploads/2017/05/LSSU-Faculty-Contract-2017-2018-Final.pdf>).

LSSU nursing faculty have presented at local and national conferences over the past three years on a variety of topics including Faculty Development, Simulation and Information Management. Additional faculty members have accomplished the following:

- Completed certification as a Medical-Surgical Nurse Specialist
- Graduated from NEA Emerging Leaders Academy 2015-16.
- Earned credentialing as a Certified Simulation Healthcare Educator (CHSE)
- Ongoing Certification as a Certified Nurse Education (CNE)

The following table represents the percentage of faculty who are engaged in Scholarship to achieve faculty outcomes to demonstrate program effectiveness.

<b>Year</b>	<b>Expected Outcomes</b>	<b>Percentage of LSSU Nursing Faculty Engaging in Scholarship</b>
2015	100 %	100%
2016	100 %	100%
2017	100 %	100%
2018	100 %	data not yet available

#### Continuing Education

The LSSU nursing faculty are required to complete a minimum of 25 contact hours every two years in order to meet the RN nursing license renewal in alignment with the Michigan State Board of Nursing and to support our Teaching Qualification requirements for the Higher Learning Commission (HLC) accreditation for LSSU. This is an absolute expectation of nursing faculty, and most faculty will exceed the minimum 25 contact hours required. ([http://www.ana-michigan.org/wp-content/uploads/2017/03/Continuing\\_Education\\_Information\\_for\\_Nurses\\_554819\\_7.corrected.pdf](http://www.ana-michigan.org/wp-content/uploads/2017/03/Continuing_Education_Information_for_Nurses_554819_7.corrected.pdf)).

The following table shows the percentage of faculty who participated in continuing education for the academic years of 2015-2018.

<b>Year</b>	<b>Expected Outcome</b>	<b>Percentage of LSSU Nursing Faculty completing Continuing Education</b>
-------------	-------------------------	---



2015	100%	100%
2016	100%	100%
2017	100%	100%
2018	100%	data not yet available

### Student Mentoring

Students routinely report that faculty members have made themselves available outside of office and class hours to review and discuss course material, and in some cases provide emotional support and referral for those students experiencing stress. Discussion has occurred at SON level as to how students may become better prepared for expectations within the learning environment and post-graduation. A pre-semester learning workshop titled “JumpStart Nursing” was developed in 2017 by the SON and the LSSU Student Nurses Association (LSSNA) for students that focused on maximizing learning, identification of learning resources in an evidence-based learning environment, and stress reduction self-care methods.

### Student Support

Professor Cynthia Butcher continues to provide guidance as faculty advisor for the Lake Superior Student Nurses Association. This student group provides support for nursing students, and actively participates in community activities such as the Red Cross Blood Drive and Cancer Walk. The LSSNA is a component of role modeling for evolving into the role of Professional Nurse, which aligns with the *AACN Baccalaureate Essential Program Standard VIII:*

#### *Professionalism*

### Service Activities by SON faculty members

- a) To the Institution: Representation and active membership on all university committees including but not limited to Curriculum, General education, faculty development, recruitment and retention, diversity, and the arts

- b) To the Profession: Active membership with Michigan Nursing Association, National League of Nursing, full range of specialty nursing groups (Midwifery, Med Surg, Public Health, Nurse Educators, Administrators, Simulation, etc.), Michigan Volunteer Registry for Emergencies, and membership in the local STTI chapter (Chi Omega). At the junior level in the BSN program, the top 35% gpa students are invited to become members of our STTI chapter, which supports the *AACN Baccalaureate Essential Program Standard VI: Interprofessional Communication and Collaboration*
- c) To the General Community:  
 Volunteers for: American Cancer Association. Community festivals, Community health and sustainability projects, Service Group memberships, and K-12 presentations, Health Fair education and screening projects.

### Faculty Development

The University and the School of Nursing encourages and supports faculty development through such activities as active participation on University and School committees or activities; (including Faculty Association); student organizations; other work such as student recruitment, service in outside agencies as a representative of the University; workshops achieving advanced certifications; and support for doctorate achievement. Other methods of demonstrating scholarship include professional consulting, creative activity, providing educational experiences (course work, seminars, workshops, etc.) outside of teaching responsibilities, grant proposals, licensing and professional certification, participating in professional organizations, presentations, publications, unpublished manuscripts. It is expected that faculty submit plans for continued professional development and scholarship as part of their annual review process. Professionally related activities are evaluated based on the extent to which an activity contributes to the faculty's effectiveness in facilitating student success in meeting program outcomes.

The University provides opportunities for faculty development and scholarship through internal resources such as the Faculty Center for Learning, who sponsors developmental workshops for faculty members on topics such as academic advising, course evaluation, teaching techniques, learning styles, and general faculty support when needed. All new faculty attend "New Faculty

Community of Practice” every other Wednesday morning led by Dr. Cathy Chaput, the Co-coordinator for Faculty Center for Teaching. This is congruent with LSSU’s core value of “excellence in teaching and learning.” This orientation program benefits new faculty in learning technology such as course management systems and discussions of broad topics within teaching and learning, aligning with the overarching goal of student success in meeting program outcomes.

LSSU SON has identified planned activities to address identified faculty development needs for the 2017-2018 Academic Year, further support student success in meeting program outcomes.

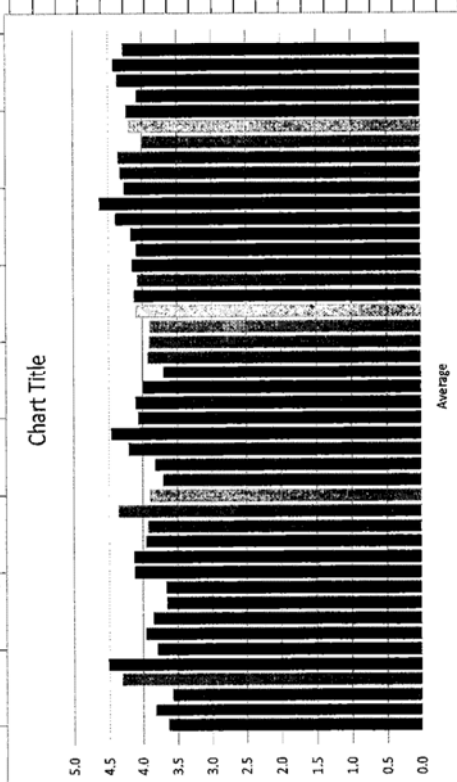
These include:

- Attendance at national education & simulation conferences
- Participation in faculty development workshops developed and presented through university
- Maintenance of professional development required for specialty certifications and required licensure
- Targeted education related to course design, online/distance education, program assessment, and inclusion of simulation to facilitate learning

In preparing this report, the LSSU SON identified an opportunity to create linkages between individual and aggregate faculty outcomes demonstrating program effectiveness. Utilizing the Nuventive (TM) Improve Assessment tool provided by LSSU, the Curriculum/Outcomes committee has created a shared repository for Nursing faculty to collect continuing education documentation, demonstrating ongoing achievement that is congruent with institutional and program outcomes.

Appendix A:

Aggregated student survey results for all Lake Superior State University (F14,15,S16) NURS Courses and Faculty (Scale 1-5; 5 being optimal)																
Fall 14	1. Design: attendance	3.6	3.8	3.6	4.0	3.8	3.7	3.7	4.1	4.1	4.0	3.9	4.4	14. Misc: learning	4.0	4.4
	Average	4	4	4	4	4	4	4	4	4	4	4	4	15. Misc: participation	4	4
	Median	4	4	4	4	4	4	4	4	4	4	4	4	13. Misc: thinking	5	5
Fall 15	2. Design: organization and objectives	3.6	3.8	3.6	4.0	3.8	3.7	3.7	4.1	4.1	4.0	3.9	4.3	12. Assessment: grading system	4.0	4.4
	Average	4	4	4	4	4	4	4	4	4	4	4	4	11. Assessment: student suggestions	4	4
	Median	4	4	4	4	4	4	4	4	4	4	4	4	10. Assessment: exams	4	4
Spring 16	3. Design: lectures and activities	3.6	3.8	3.6	4.0	3.8	3.7	3.7	4.1	4.1	4.0	3.9	4.3	9. Assessment: student questions	4.0	4.4
	Average	4	4	4	4	4	4	4	4	4	4	4	4	8. Delivery: express options	4	4
	Median	4	4	4	4	4	4	4	4	4	4	4	4	7. Delivery: clarify concepts	4	4
	4. Design: opportunity for questions	3.6	3.8	3.6	4.0	3.8	3.7	3.7	4.1	4.1	4.0	3.9	4.3	6. Delivery: enthusiasm	4.0	4.4
	Average	4	4	4	4	4	4	4	4	4	4	4	4	5. Delivery: arduous	4	4
	Median	4	4	4	4	4	4	4	4	4	4	4	4	4. Design: lectures and activities	4	4
	5. Delivery: enthusiasm	3.6	3.8	3.6	4.0	3.8	3.7	3.7	4.1	4.1	4.0	3.9	4.3	3. Design: organization and objectives	4.0	4.4
	Average	4	4	4	4	4	4	4	4	4	4	4	4	2. Design: attendance	4	4
	Median	4	4	4	4	4	4	4	4	4	4	4	4	1. Design: opportunity for questions	4	4
	6. Delivery: enthusiasm	3.6	3.8	3.6	4.0	3.8	3.7	3.7	4.1	4.1	4.0	3.9	4.3	1. Design: attendance	4.0	4.4
	Average	4	4	4	4	4	4	4	4	4	4	4	4	1. Design: opportunity for questions	4	4
	Median	4	4	4	4	4	4	4	4	4	4	4	4	1. Design: organization and objectives	4	4
	7. Delivery: clarify concepts	3.6	3.8	3.6	4.0	3.8	3.7	3.7	4.1	4.1	4.0	3.9	4.3	1. Design: organization and objectives	4.0	4.4
	Average	4	4	4	4	4	4	4	4	4	4	4	4	1. Design: opportunity for questions	4	4
	Median	4	4	4	4	4	4	4	4	4	4	4	4	1. Design: attendance	4	4
	8. Delivery: express options	3.6	3.8	3.6	4.0	3.8	3.7	3.7	4.1	4.1	4.0	3.9	4.3	1. Design: opportunity for questions	4.0	4.4
	Average	4	4	4	4	4	4	4	4	4	4	4	4	1. Design: organization and objectives	4	4
	Median	4	4	4	4	4	4	4	4	4	4	4	4	1. Design: attendance	4	4
	9. Assessment: student questions	3.6	3.8	3.6	4.0	3.8	3.7	3.7	4.1	4.1	4.0	3.9	4.3	1. Design: organization and objectives	4.0	4.4
	Average	4	4	4	4	4	4	4	4	4	4	4	4	1. Design: opportunity for questions	4	4
	Median	4	4	4	4	4	4	4	4	4	4	4	4	1. Design: attendance	4	4
	10. Assessment: student suggestions	3.6	3.8	3.6	4.0	3.8	3.7	3.7	4.1	4.1	4.0	3.9	4.3	1. Design: opportunity for questions	4.0	4.4
	Average	4	4	4	4	4	4	4	4	4	4	4	4	1. Design: organization and objectives	4	4
	Median	4	4	4	4	4	4	4	4	4	4	4	4	1. Design: attendance	4	4
	11. Assessment: exams	3.6	3.8	3.6	4.0	3.8	3.7	3.7	4.1	4.1	4.0	3.9	4.3	1. Design: organization and objectives	4.0	4.4
	Average	4	4	4	4	4	4	4	4	4	4	4	4	1. Design: opportunity for questions	4	4
	Median	4	4	4	4	4	4	4	4	4	4	4	4	1. Design: attendance	4	4
	12. Assessment: grading system	3.6	3.8	3.6	4.0	3.8	3.7	3.7	4.1	4.1	4.0	3.9	4.3	1. Design: opportunity for questions	4.0	4.4
	Average	4	4	4	4	4	4	4	4	4	4	4	4	1. Design: organization and objectives	4	4
	Median	4	4	4	4	4	4	4	4	4	4	4	4	1. Design: attendance	4	4
	13. Misc: consultation	3.6	3.8	3.6	4.0	3.8	3.7	3.7	4.1	4.1	4.0	3.9	4.3	1. Design: organization and objectives	4.0	4.4
	Average	4	4	4	4	4	4	4	4	4	4	4	4	1. Design: opportunity for questions	4	4
	Median	4	4	4	4	4	4	4	4	4	4	4	4	1. Design: attendance	4	4
	14. Misc: learning	3.6	3.8	3.6	4.0	3.8	3.7	3.7	4.1	4.1	4.0	3.9	4.3	1. Design: opportunity for questions	4.0	4.4
	Average	4	4	4	4	4	4	4	4	4	4	4	4	1. Design: organization and objectives	4	4
	Median	4	4	4	4	4	4	4	4	4	4	4	4	1. Design: attendance	4	4
	15. Misc: participation	3.6	3.8	3.6	4.0	3.8	3.7	3.7	4.1	4.1	4.0	3.9	4.3	1. Design: opportunity for questions	4.0	4.4
	Average	4	4	4	4	4	4	4	4	4	4	4	4	1. Design: organization and objectives	4	4
	Median	4	4	4	4	4	4	4	4	4	4	4	4	1. Design: attendance	4	4





**Appendix Cover Sheet**

Use a copy of this cover sheet for each document submitted. Evidence supporting the questions and narratives does *not* need to be electronically added to this Program Review form. One option is to use this cover sheet to add content to directly this Word document. A second option is to submit separate documents along with the form, also using this cover sheet for each document provided.

Send email with supporting documentation to: [TRACDAT@lssu.edu](mailto:TRACDAT@lssu.edu), with a cc to your dean, or submit as a hardcopy to your dean.

<b>School:</b>	<b>Nursing</b>
<b>Document Title (if attached) or Filename (if emailed):</b>	Appendix IX: CIPR LSSU FINAL
<b>This documentation is relevant to Question number:</b>	<b>5.</b>
<b>Briefly summarize the content of the file and its value as evidence supporting program review:</b>	<b>Reports and Responses from Commission on Collegiate Nursing Education (CCNE) Program Accreditation</b>

## Continuous Improvement Progress Report Template

**Official Name of Institution:** Lake Superior State University

**Program(s) Under Review:**

- |                                |                                     |
|--------------------------------|-------------------------------------|
| Baccalaureate                  | <input checked="" type="checkbox"/> |
| Master's                       | <input type="checkbox"/>            |
| Post-Graduate APRN Certificate | <input type="checkbox"/>            |
| Doctor of Nursing Practice     | <input type="checkbox"/>            |

## Instructions

### Programs Under Review

The Continuous Improvement Progress Report (CIPR) should address only the program(s) under review. Tables in the template may be edited to remove program(s) that are not subject to review at this time, however, **the standard, key element, and elaboration statements must not be altered or deleted** by the institution.

### Page Limit

The completed CIPR should not exceed seventy (70) pages.

### Submission

All reports must be submitted on or before the due date (but no sooner than 30 days before the due date) to ensure that the information provided is current. Email the completed report and appendices, if any, as one document in PDF format, to [ccnereports@ccneaccreditation.org](mailto:ccnereports@ccneaccreditation.org).

Please do not send hard copies to CCNE.



## Standard I

### Key Element I-A

The mission, goals, and expected program outcomes are:

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

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

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

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

*A program may select additional standards and guidelines.*

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

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

**I-A 1. Affirm that the following documents are written and accessible to all constituents:**

- x Mission statement
- x Goals
- x Expected program outcomes

**I-A 2. Affirm that the mission statement, goals, and expected program outcomes are congruent with those of the parent institution:**

- x Yes
- No

**I-A 3. Have there been any changes in the mission, goals, and/or expected program outcomes since the last on-site evaluation?**

- Yes
  - Date changes were implemented:
- No

If yes, include an appendix or link with the new statements of mission, goals, and expected program outcomes, and in the space below, explain how the program remains in compliance with this key element.

**I-A 4. Identify the professional nursing standards/guidelines that are in use by CCNE-accredited programs (note different dates of documents):**

*The program may delete sections that for programs that are not under review at this time. At its May 2016 meeting, the CCNE Board of Commissioners determined that programs may choose to address either the 2012 or the 2016 edition of the NTF Criteria when submitting CCNE reports or self-study documents until CCNE has the opportunity to update the accreditation standards to reflect the latest edition of the document.*

Baccalaureate Program:

- Not Applicable (no CCNE-accredited baccalaureate offerings)
- The Essentials of Baccalaureate Education for Professional Nursing Practice* (AACN, 2008)
- Other (please specify below):

**I-A 5. Have there been any changes in the professional nursing standards and guidelines used by the program(s) under review in this CIPR since the last on-site evaluation?**

Program(s) Under Review:	Yes	No
Baccalaureate	<input type="checkbox"/>	x

If yes, please describe the changes in the space below and validate that the standards include/continue to include those identified above.

Insert text here.

If yes, and the changes affect the preparation of students for certification, describe in the space below the relevance of the selected professional standards and guidelines for the role/area of education.

- The changes do not affect the preparation of students for certification.

Insert text here.

**I-A 6. Does the institution offer any APRN program(s) under review in this CIPR?**

- Yes  
 No

If yes, indicate the role(s) and population foci below. (The tables may be adapted to include as many population foci as necessary.)

- Nurse Practitioner  
 Population Focus:
- Clinical Nurse Specialist  
 Population Focus:
- Nurse-Midwife  
 Population Focus:
- Nurse Anesthetist  
 Population Focus:

**Optional: Key Element I-A**

Is there any other information that the program would like to provide related to this key element?

Our mission at the SON is to graduate competent students who are prepared to safely provide compassionate nursing care utilizing theory and evidence-based practice which aligns to the [LSSU's mission](#) to help students to develop their full potential. We serve the regional, state, national and global communities by contributing to the growth, dissemination, and application of knowledge. LSSU nursing graduates self report success in a wide variety of nursing roles throughout the United States and Canada. Graduates continue to excel in graduate education and nursing leadership roles as demonstrated by reports of success as faculty in higher education and leadership positions in major health care institutions.

The SON is in alignment with our University [Vision Statement](#) "Our programs grow and evolve in ways that keep our graduates at the cutting edge of technological and societal advances". The mission statement, goals, and expected program outcomes are listed on the SON [website](#) and also in the SON [Handbook](#). The SON program outcomes were developed in alignment with The Essentials of Baccalaureate Nursing Education for Professional Nursing Practice [American Association of Colleges of Nursing (AACN), 2008). Each AACN Essential is directly linked to a SON Program Outcome.

The SON annually reviews the Program Outcomes for congruence and continued alignment with AACN Essentials and University Outcomes. This was last reviewed on April 30, 2018 at our biannual SON retreat.

## Key Element I-B

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

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

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

### I-B 1. Indicate the date the mission, goals, and expected student outcomes were last reviewed, and the frequency with which they are reviewed for the program(s) under review in this CIPR.

Program(s) Under Review:	Date of Last Review	Frequency of Review
Baccalaureate	<u>Spring 2018</u>	<u>annually</u>
Master's		
Post-Graduate APRN Certificate		
Doctor of Nursing Practice		

Describe the outcome of those reviews:

The SON Outcomes committee reviewed the mission, goals, and expected student outcomes with input from student representatives and the Nursing Advisory Board. It was recommended that no revisions of the mission or goals of the SON were necessary. The mission and goals were affirmed to continue to represent the overarching focus in the Nursing Baccalaureate program at LSSU.

### I-B 2. Define the nursing unit's community of interest.

The nursing unit's community of interest includes our clinical agencies, employers, and students. The membership of the Nursing Advisory Board is primarily composed of representatives of our clinical agencies. Students are included in the communities of interest and actively participate as members of the SON committees and as invited guests at the Nursing Advisory Board meetings.

Have there been any changes to the program's community of interest since the last on-site evaluation?

- Yes  
 No

If yes, describe the changes:

Insert text here.

### Optional: Key Element I-B

Is there any other information that the program would like to provide related to this key element?

Communication to students occurs through a centralized email from the SON, generated through the University. The SON also has a faculty-monitored Facebook page and

Twitter site via our Simulation Center (Superior Simulation). Each SON Committee has a student representative as well.

## Key Element I-C

**Expected faculty outcomes are clearly identified by the nursing unit, are written and communicated to the faculty, and are congruent with institutional expectations.**

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

### I-C 1. Identify the expected faculty outcomes in the space below:

The SON expected faculty outcomes are defined by the [Agreement](#) between LSSU AND LSSU Faculty Association MEA-NEA: Effective August 4, 2014 through August 31, 2017. A one-year extension is in place with a new contract anticipated by August 2018. In addition to this, the SON expected faculty outcomes are aligned with the LSSU faculty [handbook](#).

The Faculty Contract identifies four outcome categories; student learning, advising/student support, scholarly activities, and service activities. Each school is expected to determine the percentage of weight given to each category for assessment and formal evaluation purposes.

### I-C 2. Have there been any changes in expected faculty outcomes, institutional expectations, and/or the way they are communicated since the last on-site evaluation?

- Yes
- No

If yes, attach appendices as necessary, and in the space below and explain how the program remains in compliance with this key element.

	<b>0-2 years</b>	<b>3 years-tenure</b>	<b>Tenure</b>
<b>Student Learning</b>	75%	70%	65%
<b>Advising (including giving advice)</b>	10%	10%	10%
<b>Scholarly Activities</b>	10%	10%	10%
<b>Service Activities</b>	5%	10%	15%

**Optional: Key Element I-C**

Is there any other information that the program would like to provide related to this key element?

Insert text here.

Faculty are expected to maintain the necessary expertise in their field of teaching and are strongly encouraged to use accepted teaching and learning principles. Review of appropriate course/faculty assignment is the responsibility of the Chief Nursing Administrator and permanent part-time faculty are required by contract to submit a teaching qualification form which includes a list of courses the faculty is qualified to teach, with support either through education or experience for each listed course. The Chief Nursing Administrator is responsible to review and either accept or deny. It is customary that the Chief Nursing Administrator will discuss any potential denials of course teaching approval with the school chair. Approval of adjunct faculty is made by annual review (last completed March 2018) and approval by the School of Nursing faculty of CV's and transcripts of potential adjuncts. Clinical adjuncts demonstrate clinical competency in their practice area, with a preferred level of experience of 4 years or greater in the practice area and have earned a minimum of a BSN (MSN preferred). In cases where individuals have demonstrated expertise, but lack 4 years of experience, they are assigned to team taught positions. An adjunct clinical instructor orientation curriculum was piloted in the Spring 18 semester and was formally adopted in April 2018. All non-tenured nursing faculty continue to meet institutional standards as demonstrated through satisfactory administrative reviews.

All non-tenured permanent faculty are evaluated by the Chief Nursing Administrator annually. Tenured faculty are evaluated no less than once every five years. Per the contract an annual report of activities that encompasses the areas of student learning, advising, scholarly activities and service activities must be submitted. Activities regarding scholarly and service learning are historically viewed as critical factors when faculty seek promotion. SON Faculty Scholarship Outcome attainment is as follows:

<b>Year</b>	<b>Expected Outcomes</b>	<b>Percentage of LSSU Nursing Faculty Engaging in Scholarship</b>
2015	100%	100%
2016	100%	100%
2017	100%	100%
2018	100%	Data not yet available

To assist faculty to obtain personal educational resources, the university provides \$1000 per year for professional development. Each faculty member's professional development is monitored and recorded at both the SON and university level via the electronic program titled Nuventive Improve.

**Key Element I-D**

**Faculty and students participate in program governance.**

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

**I-D 1. Has there been a change in faculty and/or student participation in program governance since the last on-site evaluation?**

- Yes  
 No

If yes, attach appendices as necessary (highlighting or citing the relevant changes), and in the space below describe how the program remains in compliance with this key element.

Though there has not been a change in student participation in program governance, the SON faculty identified an opportunity for improvement of the process of identifying candidates for representation on SON committees. This was discussed at the April 2018 SON retreat where it was decided that a formal process will be adopted after further discussion in Fall 2018.

**Optional: Key Element I-D**

Is there any other information that the program would like to provide related to this key element?

Participation in program governance by faculty and students is taking place as documented in the minutes and attendance records of the different committees. The SON faculty created and is governed by the SON Bylaws. These Bylaws provide a unified approach to the development, planning, and implementation of the nursing programs in the SON. The Bylaws are consistent with University policies, practices, and agreements in order to provide a systematic process for overall program governance.

One student representative from the generic BSN program is elected to each committee and LSSU SON faculty participates in regular SON committee meetings. Student representatives are nominated by Lake State Student Nursing Association and/or SON faculty. The SON committees are comprised of the Student Affairs Committee (SAC), Curriculum, Outcomes and Learning Resources committees. Under the oversight of the Chief Nursing Administrator, SON committee members discuss items and make program recommendations related to the mission of the SON. The Chief Nursing Administrator and Chair of the SON lead these regular meetings where recommended changes are discussed, approved and a plan for adoption is made. SAC is then responsible for updating the appropriate policies and disseminating this information to communities of interest.

Currently there is no formal process for obtaining student representation and program governance participation on SON committees from the BSN completion track students. Completion student concerns are routinely addressed by the regional center directors in Petoskey and Escanaba, Michigan and forwarded to the student's advisor. In past years, BSN completion students have been offered to participate as student representatives, with little to no response. With the advent of electronic meeting

attendance through Skype™/ZOOM™, the Chief Nursing Administrator will offer the opportunity for BSN completion students to participate in the Advisory Council meetings. The Chief Nursing Administrator or SON chair will conduct at least one annual regional site formal meeting with completion students.

## Key Element I-E

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

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

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

*"The (baccalaureate degree in nursing/master's degree in nursing/Doctor of Nursing Practice and/or post-graduate APRN certificate) at (institution) is accredited by the Commission on Collegiate Nursing Education, 655 K Street, NW, Suite 750, Washington, DC 20001, 202-887-6791."*

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

**I-E 1. Please affirm that program's documents and publications have remained accurate since the last on-site evaluation, and that a process is in place to notify constituents about changes.**

- x Documents are accurate
  - Date of last review to confirm accuracy: April  
2018
- x Constituents have been notified of any changes

**I-E 2. Does the program publish disclosure of its CCNE accreditation?**

- x Yes
- No

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

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



If yes, provide the URL (citing a page number if appropriate) where the disclosure statement is presented:

<http://www.lssu.edu/nursing>

**Optional: Key Element I-E**

Is there any other information that the program would like to provide related to this key element?

The SON confirmed that documents and publications are accurate and consistent. Information located in the university catalog and the student handbook includes the program’s offerings, program outcomes, course of study for pre-licensure and degree completion students, accreditation status, academic calendar, recruitment and admission requirements, transfer credit policies, grading policies, degree completion requirements, tuition, and fees. Information regarding the NCLEX-RN®, which the pre-licensure graduates will be eligible to take, is available in the student handbook. Degree completion graduates are not eligible for additional licensure; therefore, no information is provided regarding their ability to obtain a license.

**Key Element I-F**

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

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

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

**I-F 1. Have there been any changes in the academic policies of the parent institution and/or the nursing program since the last on-site evaluation?**

- Yes
- No

If yes, attach appendices as necessary, and explain how the program remains in compliance with this key element.

Insert text here.

**Optional: Key Element I-F**

Is there any other information that the program would like to provide related to this key element?

The SON confirmed that academic program policies support achievement of the program's mission, goals, and student learning outcomes. Policies regarding student recruitment, admission, retention and progression are written and available in the student handbook and university website. The SON Student Handbook is reviewed and updated annually, most recently in Spring 2018.

There is congruence between the academic policies of LSSU and the SON. Where policies differ, it is in support of the program's achievement of its mission, goals, and student learning outcomes. Policy differences include a higher grading scale in nursing, a dress code policy, tobacco use, drug and alcohol screening, a code of conduct for nursing, attendance policies, and grievance policies. This was confirmed in a meeting with student support staff, including a representative from admissions. As an example of a difference between LSSU and nursing admission criteria, admission to the degree completion track requires proof of a current Michigan or Ontario professional nursing license and transcripts from previous nursing school(s) or college(s).

Student nursing committee representatives confirmed that policies related to student recruitment, admission, retention, and progression are written, fair, equitable, and implemented consistently. Students reported that they are made aware of changes to policies and procedures through announcements in class and email.

## Standard II

### Key Element II-A

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

*Elaboration: The budget enables achievement of the program's mission, goals, and expected outcomes. The budget also supports the development, implementation, and evaluation of the program. Compensation of nursing unit personnel supports recruitment and retention of qualified faculty and staff. Physical space is sufficient and configured in ways that enable the program to achieve its mission, goals, and expected outcomes. Equipment and supplies (e.g., computing, laboratory, and teaching-learning) are sufficient to achieve the program's mission, goals, and expected outcomes.*

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

**II-A 1. Affirm that fiscal resources are sufficient to enable the program(s) under review in this CIPR to achieve their mission, goals, and expected outcomes:**

Program(s) Under Review:	Yes	No
Baccalaureate	x	<input type="checkbox"/>

If no to any program, identify any deficiencies, the reason(s) these resources have not been provided, and the plan to provide needed resources if one exists.

Insert text here.

**II-A 2. Affirm that physical resources are sufficient to enable the program(s) under review in this CIPR to achieve their mission, goals, and expected outcomes:**

Program(s) Under Review:	Yes	No
Baccalaureate	x	<input type="checkbox"/>

If no to any program, identify any deficiencies, the reason(s) these resources have not been provided, and the plan to provide needed resources if one exists.

Insert text here.

**II-A 3. Have any of the program(s) under review in this CIPR experienced an increase in enrollment that has resulted in the need for additional resources?**

Program(s) Under Review:	Yes	No
Baccalaureate	<input type="checkbox"/>	x

If yes for any program, has a substantive change notification been submitted to CCNE related to either an increase in enrollment or the development of a new track or program?

- Yes
- No

If yes for any program, provide documentation of the fiscal and physical resources to support the expansion.

Insert text here.

**II-A 4. Have there been any changes in the review process to evaluate the adequacy of the program’s fiscal and physical resources since the last on-site evaluation?**

- Yes
- x No

If yes, describe the change in the process and the outcomes.

Insert text here.

Indicate the date that each program was last evaluated for adequacy of fiscal and physical resources, and the frequency with each program is evaluated.

Program(s) Under Review:	Date of Last Review	Frequency of Review
Baccalaureate	<u>February 2018</u>	<u>annually</u>
Master's		
Post-Graduate APRN Certificate		
Doctor of Nursing Practice		

### **Optional: Key Element II-A**

Is there any other information that the program would like to provide related to this key element?

The SON confirmed that the SON's financial resources are adequate to enable the achievement of the program's mission, goals, and expected outcomes. The SON's revenue sources include tuition, fees, state funding, and indirect cost recovery. Additionally, restricted discretionary funds are used to support specific projects and faculty development. The average SON faculty compensation is below the College and University Professional Association for Human Resources (CUPA) mean annual salary. The Chief Nursing Administrator reported no difficulty in hiring qualified faculty.

The SON observations of the facilities confirmed the physical space is sufficient and configured to enable the program to achieve its mission, goals, and expected outcomes. The SON occupies 4,980 square feet that include three labs with 17 beds, storage and office space, a computer laboratory, multi-media classrooms, and other resources. There is a temporary 2,000-square-foot Nursing Simulation Center located within one mile of the campus. Through a partnership with a member of our Community of Interest (War Memorial Hospital), a new Simulation Center is being constructed on-campus projected to be open September 2018. This will expand learning spaces for nursing and provide opportunities for interprofessional collaborations.

Laboratories are staffed with a full RN Lab Coordinator and nursing students as part of work study. Equipment and supplies for computing, the laboratory, and teaching-learning are sufficient to achieve the mission, goals, and expected outcomes. On an annual basis, the Learning Resources Committee, as part of the SON, provides a survey as an opportunity for feedback from our community of interest (nursing students). The survey (n=32) completed February 2018 demonstrated that 78.13% of respondents chose either agree or strongly agree to the question "There is enough open lab hours for me to practice", 15.63% chose neutral or no opinion. For the question "The nursing lab has enough equipment for me to learn the skills required within the nursing program", 71.88% chose agree or strongly agree, 15.63% were neutral. These results will be shared with faculty by the Learning Resources Committee in Fall 2018 for discussion.

## Key Element II-B

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

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

### II-B 1. Affirm that academic support services are sufficient to meet program and student needs for program(s) under review in this CIPR:

Program(s) Under Review:	Yes	No
Baccalaureate	x	<input type="checkbox"/>

If no to any program, identify any deficiencies, the reason(s) these resources have not been provided, and the plan to obtain the necessary services.

Insert text here.

Indicate the date that each program was last evaluated for adequacy of academic support services, and the frequency with each program is evaluated.

Program(s) Under Review:	Date of Last Review	Frequency of Review
Baccalaureate	<u>February 2018</u>	<u>annual</u>
Master’s		
Post-Graduate APRN Certificate		
Doctor of Nursing Practice		

### II-B 2. Have any of the program(s) under review in this CIPR been converted to a distance education and/or hybrid format since the last on-site evaluation?

Program(s) Under Review:	Yes	No
Baccalaureate	<input type="checkbox"/>	x

If yes for any program, has a substantive change notification been submitted to CCNE related to this change in modality?

- Yes
- No

If yes for any program, describe any additional academic support services in place to meet program and student needs.

Insert text here.
-------------------

### **Optional: Key Element II-B**

Is there any other information that the program would like to provide related to this key element?

The academic support services are adequate for students and faculty to achieve the program's mission, goals, and program outcomes. There is adequate library space, current textbooks and journals, and databases specifically dedicated to nursing. The online resources for students and faculty are easily accessed through the LSSU library home page and the Learning Management System (Moodle).

Faculty and students are surveyed annually by the Library about suggestions for changes in the library holdings. Additionally, SON faculty recently reviewed clinical video resources in conjunction with the library maximized learning resources for the students.

The SON and university utilize Nuventive TracDat, a software system that supports Institutions of Higher Learning to align planning initiatives, to review and reflect on academic and non-academic outcomes and take action to improve performance.

## **Key Element II-C**

**The chief nurse administrator:**

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

*Elaboration: The administrative authority of the chief nurse administrator is comparable to that of chief administrators of similar units in the institution. He or she consults, as appropriate, with faculty and other communities of interest to make decisions to accomplish the mission, goals, and expected program outcomes. The chief nurse administrator is perceived by the communities of interest to be an effective leader of the nursing unit. The program provides a rationale and a plan to come into compliance if the chief nurse administrator does not hold a graduate degree in nursing and a doctoral degree (if applicable).*

**II-C 1. Has the individual appointed as chief nurse administrator changed since the last on-site evaluation?**

- Yes  
 No

If yes, has a substantive change notification been submitted to CCNE related to this change in chief nurse administrator?

- Yes  
 No

If the program has a new chief nurse administrator, and a substantive change notification was not submitted to CCNE, attach a CV, and explain how the program remains in compliance with this key element.

Insert text here.

Does the chief nurse administrator continue to meet all criteria required by the key element?

- Yes  
 No

**II-C 2. Has the role of the chief nurse administrator changed since the last on-site evaluation?**

- Yes  
 No

If yes, please describe how the role has changed.

Insert text here.

**Optional: Key Element II-C**

Is there any other information that the program would like to provide related to this key element?

As a leader of the faculty, the Chief Nursing Administrator supports, encourages, and promotes excellence in teaching, research, scholarship, and service. The Chief Nursing Administrator is responsible for the leadership, management and administration of the nursing program, including faculty recruitment and retention, budget development and management, and for facilitating student success. He tends to have a participatory style of management and encourages faculty involvement in most all aspects of the nursing program. He provides faculty with leadership in planning and coordinating the nursing program, which include assessment, evaluation, development and revision of nursing courses and curriculum.

Further, he represents the School of Nursing and its faculty at the administrative level and with our communities of interest. The Chief Nursing Administrator leads the Nursing Advisory Council meetings to facilitate communication among the SON and our communities of interest. The Chief nursing administrator of the School of Nursing has knowledge of the BSN program curriculum and has been employed full time teaching in nursing education at LSSU since 1997.

## Key Element II-D

**Faculty are:**

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

*Elaboration: The full-time equivalency (FTE) of faculty involved in each program is clearly delineated, and the program provides to CCNE its formula for calculating FTEs. The overall faculty (whether full-time or part-time) is sufficient in number and qualifications to achieve the mission, goals, and expected program outcomes. Faculty-to-student ratios ensure adequate supervision and evaluation and meet or exceed the requirements of regulatory agencies and professional nursing standards and guidelines.*

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

*Faculty who are nurses hold current RN licensure. Faculty teaching in clinical/practicum courses are experienced in the clinical area of the course and maintain clinical expertise. Clinical expertise may be maintained through clinical practice or other avenues. Faculty teaching in advanced practice clinical courses meet certification and practice requirements as specified by the relevant regulatory and specialty bodies. Advanced practice nursing tracks are directly overseen by faculty who are nationally certified in that same population-focused area of practice in roles for which national certification is available.*

**II-D 1. Provide the formula used to calculate faculty full-time equivalencies (FTEs) :**

Insert text here. Contractual full time credit =12 credits teaching load per semester. FTE=  
 $(\text{lecture credit hrs} + (\text{clinical credit hrs} \times 2))/12$

**II-D 2. Affirm that faculty are sufficient in number to accomplish the mission, goals, and expected program outcomes:**

Program(s) Under Review:	Yes	No
Baccalaureate	x	<input type="checkbox"/>

If no to any program, identify the reason(s) for the insufficiency, and the plan to hire additional faculty if one exists.

Insert text here.

**II-D 3. Affirm that faculty are academically and experientially prepared to accomplish the mission, goals, and expected program outcomes:**

Program(s) Under Review:	Yes	No
Baccalaureate	x	<input type="checkbox"/>



If no to any program, identify the reason(s) for the lack of academic and experiential preparation, and the plan to address this concern.

Insert text here.

**II-D 4. Affirm that faculty are appropriately credentialed for the tracks and/or programs they teach:**

Program(s) Under Review:	Yes	No
Baccalaureate	x	<input type="checkbox"/>

If no to any program, identify the reason(s), and the plan to address this concern.

Insert text here.

**II-D 5. Affirm that APRN track directors and/or leads are appropriately certified and/or credentialed:**

x The program(s) under review have no APRN offerings.

Program(s) Under Review:	Yes	No
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If no to any program, identify the reason(s), and the plan to address this concern.

Insert text here.

**Optional: Key Element II-D**

Is there any other information that the program would like to provide related to this key element?

Insert text here. The academic and experiential preparation and variety of faculty backgrounds (full-time and part-time) are sufficient in number to accomplish the mission, goals, and expected program outcomes of the BSN program. All faculty and adjuncts are academically and experientially prepared for the areas in which they teach. On an annual review, SON faculty qualifications are evaluated to maintain alignment with Higher Learning Commission (HLC) guidelines and Michigan State Board of Nursing requirements. All Faculty's curriculum vitae are maintained in the Human Resources department.

The SON faculty set a benchmark outcome for maintaining Continuing Education Unit (CEU) requirements of 100%. The results of this assessment demonstrate compliance and are as follows:

Year	Expected Outcome	Percentage of LSSU Nursing Faculty completing Continuing Education

2015	100%	100%
2016	100%	100%
2017	100%	100%
2018	100%	data not yet available

## Key Element II-E

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

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

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

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

### II-E 1. Are preceptors used in the nursing program(s) under review in this CIPR?

Program(s) Under Review:	Yes	No
Baccalaureate	x	<input type="checkbox"/>

### II-E 2. Has the process for selection, orientation, and evaluation of preceptors changed since the last on-site evaluation?

Program(s) Under Review:	Yes	No
Baccalaureate	x	<input type="checkbox"/>

Not applicable: the program(s) under review do not use preceptors.

If yes, describe the change(s), and attach appendices as necessary.

Since the last on-site evaluation, we provided an Adjunct Orientation program for all adjunct faculty for our School of Nursing. Seven (53.84%) of the 13-current adjunct nursing faculty attended the formal orientation program. The orientation program was presented in a formalized six and one-half-hour, single-day, face-to-face setting that was held on campus between the hours 9:00 am and 3:30 pm. Agenda items included mission and vision, introductions, adjunct faculty role, instructor resources, full-time faculty meet and greet, reporting structure, and the BSN handbook overview with particular emphasis on grading, dress code, and attendance policies. Additional agenda items included a hands-on Moodle demonstration, simulation overview, hands-on academic electronic health record demonstration, testing services, accessibility services, Family Educational Rights and Privacy Act (FERPA), anchor access, and my degree plan.

On three separate surveys conducted throughout the orientation process respondents rated their level of opinion using a 5-point Likert type scale. Results of the needs assessment survey show 50% (10) disagreed with having an orientation and 52.36% (10) strongly agreed they would like to have had an orientation. The orientation evaluation shows 100% (7) strongly agreed they would recommend a formal orientation program and the intent to stay teaching survey shows 63.64% (7) agreed with intending to stay teaching. Since the survey data shows the orientation program was beneficial, needed, and recommended, the decision to continue the formal orientation program was approved by faculty.

**II-E 3. Has the preceptor role changed since the last on-site evaluation?**

Program(s) Under Review:	Yes	No
Baccalaureate	<input type="checkbox"/>	x

Not applicable: the program(s) under review do not use preceptors.

If yes, describe the change(s).

Insert text here.

**Optional: Key Element II-E**

Is there any other information that the program would like to provide related to this key element?

Insert text here.

**Key Element II-F**

**The parent institution and program provide and support an environment that encourages faculty teaching, scholarship, service, and practice in keeping with the mission, goals, and expected faculty outcomes.**

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

*For example:*

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

**II-F 1. Affirm that the parent institution and/or program continues to provide support for faculty teaching, scholarship, service, and practice:**

Program(s) Under Review:	Yes	No
Baccalaureate	x	<input type="checkbox"/>

If no for any program, identify any deficiencies, the reason(s) support has not been provided, and the plan to provide needed support if one exists.

Insert text here.

**Optional: Key Element II-F**

Is there any other information that the program would like to provide related to this key element?

Faculty members maintain a strong record of scholarship with a focus on linear and end-based models of learning that focus on process-based and experiential student learning. LSSU works from the [Boyer Model](#) that includes discovery, integration, application, and teaching as forms of scholarship. LSSU provides for faculty development and scholarship support through internal resources such as the Faculty Center for Teaching (FCT). Professional Development Funds as outlined in the current faculty association collective bargaining agreement are allocated to all SON faculty members to enhance the scholarship of teaching and evidenced based nursing practice.

Resources for release time to participate in professional development activities are provided from the current faculty. The SON, and University at large, to enhance faculty educational endeavors at the doctoral level for maximum professional development and ultimate student benefit, also encourages sabbatical leaves. Faculty are also encouraged to sit on Community/Faculty Advisory Boards to strengthen student learning outcomes as ambassadors to LSSU which can ultimately benefit clinical placement avenues and foster a stronger community based commitment to LSSU. Service is an expected faculty outcome and is emphasized in the evaluation process as defined by the Faculty Association Collective Agreement.

The SON supports faculty development through such activities as, active participation on University wide committees, workshops, encouraging conference attendance, achieving

advanced certifications, and support for doctorate achievement. It is also expected that faculty submit plans for continued professional development as part of their annual review process.

## Standard III

### Key Element III-A

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

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

**III-A 1. Affirm that expected student outcomes, course unit or level objectives, and/or competencies for any programs offered are congruent with the program’s mission and goals, and with the roles for which the program is preparing its graduates.**

*The program may delete sections that for programs that are not under review at this time. The information may be adapted to include as many tracks as necessary.*

Baccalaureate:

- Track:
- Track:
- Track:

If no to any track, identify any deficiencies, the reason(s) for the variance, and the plan to address the concern if one exists.

Insert text here.

Indicate the date that each program was last evaluated for congruency between curriculum and mission, and the frequency with each program is evaluated.

Degree Program	Date of Last Review	Frequency of Review
Baccalaureate	<u>Spring 2018</u>	<u>annually</u>
Master’s		
Post-Graduate APRN Certificate		
Doctor of Nursing Practice		

### **Optional: Key Element III-A**

Is there any other information that the program would like to provide related to this key element?

The SON faculty is committed to a developing culture of review, assessment and evaluation with a process in place for doing so on an ongoing basis. The curriculum focuses on an integration of evidenced-based practice and rigorous curricula. The School of Nursing Curriculum committee engages in an annual curriculum review of our BSN Program Objectives by Level to monitor the threading of program outcomes throughout our curriculum. Most recently, the content in HLTH 235 Healthcare Informatics was assessed, as a component of the overall plan in assessing all courses for alignment with program outcomes.

Student outcomes are linked to both course and program objective in alignment with program assessment measures that are tracked and trended within a computer software program called Nuventive Improve that allows for a targeted review of the curricula. For example, the SON Curriculum Committee engaged in some discussion regarding Pharmacology scores on the NCLCEX-RN exam. The threading of Pharmacology concepts was evaluated within all courses in the BSN Curriculum. An identified area of opportunity to support student learning in this area was to integrate an elective Pathopharmacology course for students who had already taken the Pathophysiology and Pharmacology courses. This course is being created this summer for implementation in Spring 2019 and will be case-study, application-based learning. A program called SafeMedicate will also be integrated throughout all Nursing clinical courses as of Fall 2018.

## Key Element III-B

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

- **Baccalaureate program curricula incorporate *The Essentials of Baccalaureate Education for Professional Nursing Practice* (AACN, 2008).**
- **Master's program curricula incorporate professional standards and guidelines as appropriate.**
  - a. **All master's degree programs incorporate *The Essentials of Master's Education in Nursing* (AACN, 2011) and additional relevant professional standards and guidelines as identified by the program.**
  - b. **All master's degree programs that prepare nurse practitioners incorporate *Criteria for Evaluation of Nurse Practitioner Programs* (NTF, 2012).**
- **Graduate-entry program curricula incorporate *The Essentials of Baccalaureate Education for Professional Nursing Practice* (AACN, 2008) and appropriate graduate program standards and guidelines.**
- **DNP program curricula incorporate professional standards and guidelines as appropriate.**
  - a. **All DNP programs incorporate *The Essentials of Doctoral Education for Advanced Nursing Practice* (AACN, 2006) and additional relevant professional standards and guidelines if identified by the program.**
  - b. **All DNP programs that prepare nurse practitioners incorporate *Criteria for Evaluation of Nurse Practitioner Programs* (NTF, 2012).**
- **Post-graduate APRN certificate programs that prepare nurse practitioners incorporate *Criteria for Evaluation of Nurse Practitioner Programs* (NTF, 2012).**

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

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

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

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

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

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

⚠ For the following section, refer to the nursing standards and guidelines previously identified in Key Element I-A.

**III-B 1. Affirm that curricula are developed, implemented, and revised to reflect relevant professional nursing standards and guidelines.**

- Yes  
 No

In the space below, provide examples of how the nursing standards and guidelines have been integrated into the curriculum. Appendices may be attached as necessary.

To ensure that the BSN curriculum facilitates achievements of student outcomes, the SON prepares graduates for entry level practice and reflects The Essentials of Baccalaureate Education for Nursing Education all BSN courses are examined regularly by the SON Curriculum committee. The SON curriculum committee reviews, evaluates and makes recommendation to the SON faculty for revisions as needed. On an annual basis, the SON reviews the BSN Program Outcomes (See document in Appendix) for alignment of integrating nursing standards and guidelines in the BSN curriculum. Each SON Program outcome is assessed by level (sophomore-junior-senior) in order to purposefully address program objectives reflective of relevant professional nursing standards and guidelines.

Does the institution offer APRN programs (for programs under review in this CIPR)?

- Yes  
 No

If yes, affirm that APRN curricula have three separate comprehensive, graduate level courses in the following areas:

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

If the response above indicated that any coursework is lacking, describe the plan to modify the curriculum for its inclusion.

Insert text here.

Does the institution offer nurse education programs (for programs under review in this CIPR)?

- Yes  
 No

If yes, affirm that nursing education curricula includes graduate level content/coursework in the following areas:

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

If the response above indicated that any content/coursework is lacking, describe the plan to modify the curriculum for its inclusion.

Insert text here.

### **Optional: Key Element III-B**

Is there any other information that the program would like to provide related to this key element?

Insert text here.

## **Key Element III-C**

**The curriculum is logically structured to achieve expected student outcomes.**

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



- **Post-graduate APRN certificate programs build on graduate level nursing competencies and knowledge base.**

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

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

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

### **III-C 1. Affirm that curriculum remains logically structured to achieve expected student outcomes for program(s) under review in this CIPR:**

Program(s) Under Review:	Yes	No
Baccalaureate	x	<input type="checkbox"/>

If no for any program, describe the plan to modify the curriculum to support logical sequencing.

Insert text here.

Does the institution offer a RN-MSN and/or a direct-entry master's program (for programs under review in this CIPR)?

Yes  
 No

If yes, affirm that students enrolled in those programs:

- acquire the knowledge and competencies comparable to baccalaureate education in nursing as a foundation for advanced nursing education
- acquire baccalaureate level knowledge and competencies delineated in *The Essentials of Baccalaureate Education for Professional Nursing Practice* (AACN, 2008)

If the response above indicated that any coursework is lacking, describe the plan to modify the curriculum for its inclusion.

Insert text here.

**III-C 2. Have there been any changes in the curricular foundation since the last on-site evaluation?**

Program(s) Under Review:	Yes	No	Date of Implementation
Baccalaureate	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Master's	<input type="checkbox"/>	<input type="checkbox"/>	
Post-Graduate APRN Certificate	<input type="checkbox"/>	<input type="checkbox"/>	
Doctor of Nursing Practice	<input type="checkbox"/>	<input type="checkbox"/>	

If yes for any program, describe the changes in the space below along with rationale for how the change continues to build upon the required foundation for the program. Include any changes in student outcomes if applicable.

Insert text here.

**Optional: Key Element III-C**

Is there any other information that the program would like to provide related to this key element?

The LSSU BSN Nursing Program demonstrates clearly that the curriculum is logically structured to achieve expected student outcomes as it builds upon a foundation of the arts, sciences, and humanities. Both the generic BSN, as well as the BSN-completion students follow a suggested course pattern that integrates all general education required courses. For the generic BSN students, this includes the entire preclinical first year courses as available in the Appendix IV. In the next three years of the curriculum, courses such as Humanities, Statistics, and Diversity courses are integrated. The BSN-completion students also have a suggested course curriculum pattern to be followed in order to meet the curriculum course requirements including Humanities, Statistics, and Diversity courses.

**Key Element III-D**

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

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

**III-D 1. Have there been any change in teaching-learning practices and environments or learning outcome attainment since last review for program(s) under review in this CIPR?**

Program(s) Under Review:	Yes	No	Date of Implementation
Baccalaureate	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Master's	<input type="checkbox"/>	<input type="checkbox"/>	
Post-Graduate APRN Certificate	<input type="checkbox"/>	<input type="checkbox"/>	

Doctor of Nursing Practice

If yes for any program, describe the process and result of the curriculum revision. Include a description of how the change(s) continue to support the achievement of expected student outcomes.

Insert text here.

### **Optional: Key Element III-D**

Is there any other information that the program would like to provide related to this key element?

In both the generic BSN and post BSN-completion programs there are supportive environments that provide students with learning opportunities that incorporate a variety of teaching and learning strategies in alignment with both program and course outcomes. For the generic BSN program, didactic courses teach pathophysiology, pharmacology, nursing concepts and research through classroom lecture. Activities may include classroom discussions, group work, service learning, and student presentations that allow the student to apply evidenced-based concepts to nursing practice. Students receive additional learning opportunities for courses with clinical components in the nursing campus lab, on site clinical rotations and at the simulation center that allow students to apply knowledge learned in the classroom setting in a real life environment. Online course work in both concentrations may include simple word documentation, threaded discussions, evidenced-based practice websites and streaming videos. Students in the Post RN BSN completion program experience a combination of didactic learning through distance education in the form of face –to-face lecture at regional sites, seminar, and an online format via the Learning Management System (Moodle). Simulation continues to be integrated into the Nursing curriculum, with expanded opportunities for simulation learning increasing with the construction of the new Simulation Center on campus Fall 2018. Virtual world simulation software is also being implemented: VSIM, and an Electronic Health Record (DocuCare).

## **Key Element III-E**

**The curriculum includes planned clinical practice experiences that:**

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

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

**III-E 1. Have there been any changes in the planned clinical practice experiences since the last on-site evaluation for program(s) under review in this CIPR?**

Program(s) Under Review:                      Yes              No

Baccalaureate	<input type="checkbox"/>	x
Master's	<input type="checkbox"/>	<input type="checkbox"/>
Post-Graduate APRN Certificate	<input type="checkbox"/>	<input type="checkbox"/>
Doctor of Nursing Practice	<input type="checkbox"/>	<input type="checkbox"/>

If yes for any program, describe the changes and how the key element remains in compliance.

Insert text here.

If the baccalaureate degree program is under review, and the program offers a post-licensure baccalaureate (RN-BSN) track, affirm that students enrolled in that track complete clinical practice experiences:

- Yes
- No
- The baccalaureate program is not under review.

If the master's degree program is under review, and the institution offers an APRN preparation program, affirm that students enrolled the program complete at least 500 hours of clinical practice experiences:

- Yes
- No
- The master's program is not under review.

If no, please explain.

Insert text here.

If the master's degree program is under review, and the institution offers a nurse education track, please explain how students enrolled in the track complete clinical practice experiences consistent with AACN's *Master's Essentials* definition of the direct-care role, including "sustained clinical experiences designed to strengthen patient care delivery skills" at the master's level (*Master's Essentials*, AACN, 2011, pp. 8-9).

Insert text here.

If the DNP degree program is under review, affirm that students enrolled in the degree complete at least 1,000 hours of clinical practice experiences:

- Yes
- No
- The DNP program is not under review.

If no was selected for any response, describe the plan to modify the curriculum for its inclusion.

Insert text here.

If the program(s) under review offer APRN preparation programs and/or tracks, affirm that the faculty-student ratio in APRN preparation clinical courses does not exceed 1:6:

- Yes
- No
- The post-graduate APRN program is not under review.

If the faculty-student ratio exceeds 1:6, please provide a rationale.

Insert text here.

### III-E 2. Are planned clinical practice experiences evaluated by faculty?

Program(s) Under Review:	<i>Yes</i>	<i>No</i>
Baccalaureate	x	<input type="checkbox"/>
Master's	<input type="checkbox"/>	<input type="checkbox"/>
Post-Graduate APRN Certificate	<input type="checkbox"/>	<input type="checkbox"/>
Doctor of Nursing Practice	<input type="checkbox"/>	<input type="checkbox"/>

If no for any program, please explain.

Insert text here.

### Optional: Key Element III-E

Is there any other information that the program would like to provide related to this key element?

Planned clinical experiences in inpatient and community settings provide students the opportunity to develop professional competencies in practice settings aligned to baccalaureate preparation. Clinical practice experiences are provided for all students, including those completing the program through distance education. The local hospital provides a variety of clinical experiences for LSSU students exclusively, as no other nursing program utilizes the facility. Students also utilize clinical facilities in Canada, providing a unique opportunity to compare healthcare systems internationally. Our community of interest (potential employers and clinical placement partners), state that the curriculum and its clinical practice experiences ensure students are competent to enter nursing practice as baccalaureate-prepared nurses.

In addition, the SON maintain an ongoing relationship with the local Tribal Health Center, which presents unusual opportunities for enhanced cultural experiences for LSSU nursing students. The degree completion students complete a clinical community health experience under the supervision of a community health faculty member.

### Key Element III-F

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

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

**III-F 1. Please describe how the curriculum and teaching-learning practices consider the needs and expectations of the identified community of interest:**

The SON collaborates with the program-identified communities of interest in decision-making for the program and curriculum design. The students evaluate each clinical site every semester in order to ascertain whether best learning practices and both student and organizational needs are being met. The results of these evaluations are shared at the Advisory Council meetings hosted twice a year by the SON at LSSU. In attendance at these meetings are representatives from all clinical sites, and the two other nursing schools in the area. Placement needs, evaluation results, curriculum planning, and unique needs of diverse student populations are discussed with the communities of interest.

The course coordinators in the SON maintain a working relationship with their specific communities of interest to assure that their needs and expectations are met. This may include specific orientation needs, accreditation requirements, training for specific skills, and overall technology requirements.

**III-F 2. Have there been any changes to the curriculum and teaching-learning practices since the last on-site evaluation?**

Program(s) Under Review:	<i>Yes</i>	<i>No</i>	<i>Date of Implementation</i>
Baccalaureate	<input type="checkbox"/>	x	
Master's	<input type="checkbox"/>	<input type="checkbox"/>	
Post-Graduate APRN Certificate	<input type="checkbox"/>	<input type="checkbox"/>	
Doctor of Nursing Practice	<input type="checkbox"/>	<input type="checkbox"/>	

If yes for any program, describe the changes (including examples) and how the program remains in compliance with this key element.

Insert text here.

**Optional: Key Element III-F**

Is there any other information that the program would like to provide related to this key element?

Insert text here.

**Key Element III-G**

**Individual student performance is evaluated by the faculty and reflects achievement of expected student outcomes. Evaluation policies and procedures for individual student performance are defined and consistently applied.**

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

**III-G 1. Please affirm that individual student performance is evaluated by the faculty.**

Program(s) Under Review:	<i>Yes</i>	<i>No</i>
Baccalaureate	x	<input type="checkbox"/>
Master's	<input type="checkbox"/>	<input type="checkbox"/>
Post-Graduate APRN Certificate	<input type="checkbox"/>	<input type="checkbox"/>
Doctor of Nursing Practice	<input type="checkbox"/>	<input type="checkbox"/>

If no for any program, please explain.

Insert text here.

**III-G 2. Please affirm that individual student performance reflects achievement of expected student outcomes.**

Program(s) Under Review:	<i>Yes</i>	<i>No</i>
Baccalaureate	x	<input type="checkbox"/>
Master's	<input type="checkbox"/>	<input type="checkbox"/>
Post-Graduate APRN Certificate	<input type="checkbox"/>	<input type="checkbox"/>
Doctor of Nursing Practice	<input type="checkbox"/>	<input type="checkbox"/>

If no for any program, please explain.

Insert text here.

**III-G 3. Please affirm that evaluation policies and procedures for individual student performance are defined and consistently applied.**

Program(s) Under Review:	<i>Yes</i>	<i>No</i>
Baccalaureate	x	<input type="checkbox"/>
Master's	<input type="checkbox"/>	<input type="checkbox"/>
Post-Graduate APRN Certificate	<input type="checkbox"/>	<input type="checkbox"/>
Doctor of Nursing Practice	<input type="checkbox"/>	<input type="checkbox"/>

If no for any program, please explain.

Insert text here.

**Optional: Key Element III-G**

Is there any other information that the program would like to provide related to this key element?

The LSSU BSN Program maintains consistency in grading and the evaluation of student outcomes. Grading criteria are outlined clearly in each course syllabi and are in alignment with the Program policy noted in section five of the BSN Program Handbook. Each course aligns assignments with program student outcomes and has specific rubrics in place. The BSN Program Handbook outlines policies and procedures regarding grading, progression, clinical expectations, and appropriate achievement of student outcomes. The BSN Program utilizes a standardized clinical evaluation tool that consistently measures student performance allowing for feedback to the student about their performance in each clinical nursing course. This tool is utilized both as a mid-term evaluation tool and a final evaluation tool for each clinical course. Competency-based performance evaluation (Satisfactory/Unsatisfactory) is utilized in courses with on-campus laboratory components.

**Key Element III-H**

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

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

**III-H 1. Indicate the date that the curriculum and teaching-learning practices were last reviewed, and the frequency with which they are reviewed:**

Program(s) Under Review:	Date of Last Review	Frequency of Review
Baccalaureate	<u>Spring 2018</u>	<u>annually</u>
Master’s		
Post-Graduate APRN Certificate		
Doctor of Nursing Practice		

Describe the outcome of those reviews:

Prior to August 2014 the evaluation process was inconsistent throughout the parent institution. As a result a clear process is now outlined in the Faculty Association Collective Bargaining Agreement for faculty to receive a review of their performance with opportunity for improvements in writing that occurs during a scheduled meeting with the Chief Nurse Administrator. The new faculty evaluation process includes Evaluation narratives, Professional activities reports, peer reviews, classroom evaluations, summative of student advising and course comments, a departmental agreed upon professional activities weighing form and yearly activities report. The review consists of feedback from an observed peer and Chief Nurse Administrator evaluation in the classroom setting, campus lab and or clinical rotation sites. In addition



summative data included incorporates student evaluation of teaching obtained through anonymous surveys provided to students in each lecture, campus lab and clinical sites at the end of each semester. Achievement of student learning outcomes is now an expected component of evaluation both in the School of Nursing and the institution. Documentation of Student Learning Outcomes is compiled within the Nuventive Improve System

Student's evaluations of teaching-learning practices are obtained through anonymous evaluation surveys as included in the electronic resource room. Students evaluate Instructors within the last three weeks of each course and this data is provided as mentioned above to the faculty member for annual review. Data is collected, and compiled by the SON Academic Assistant who provides the Chief Nurse Administrator and each faculty with a summary report of responses. Each faculty member utilizes this summary to review and evaluate his or her teaching performance.

*Need to add OUTCOME Data from the evaluation of curriculum and teaching-learning practices and how they are used to foster program improvement.*

**III-H 2. Have there been any changes to the curriculum and teaching-learning practices since the last on-site evaluation?**

- Yes  
 No

If yes, attach appendices as necessary, and in the space below and explain how the program remains in compliance with this key element:

Insert text here.

**Optional: Key Element III-H**

Is there any other information that the program would like to provide related to this key element?

Insert text here.

## Standard IV

### Key Element IV-A

**A systematic process is used to determine program effectiveness.**

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

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

**IV-A 1. Include an appendix or URL of the program’s current written systematic process (plan) used to determine the effectiveness of the educational program.**

*Note:* The process must address completion rates, licensure and/or certification pass rates, employment rates, and other program outcomes. The process must have timelines for collection, review of expected and actual outcomes, and analysis.

Identify the appendix or URL where the systematic process is found:

The SON Outcomes committee developed an Evaluation Timeline:

Title of Evaluation	March	April	May	November	December
End of Program Evaluation for Graduates 1 yr out	Electronic			electronic	
Clinical Site Evaluations to current students		Week 13			Week 13
Classroom/Lab Evaluations to current students		Week 14			Week 14
Employer Evaluations To graduate's employer			paper or electronic	paper or electronic	
Simulation Evaluation to Students		Week 13/14			Week 13/14

This accompanies our Evaluation Process (included in Appendix) which outline the schedule for implementation of our Evaluation Plan. Links to these evaluations are emailed out by the SON Administrative Assistant with evaluation data collected via Survey Monkey™. The Outcomes committee annually evaluates this data and presents it to the entire Nursing faculty group, as well as to the Advisory Board.

Identify the date the process was last reviewed, and how the review was conducted:

Insert text here.

**Optional: Key Element IV-A**

Is there any other information that the program would like to provide related to this key element?

Insert text here.

**Key Element IV-B**

**Program completion rates demonstrate program effectiveness.**

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

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

*completion rate is 70% or higher when excluding students who have identified factors such as family obligations, relocation, financial barriers, and decisions to change major or to transfer to another institution of higher education.*

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

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

**IV-B 1. Enter the formula(e) used to determine completion rates (e.g., graduation rates) for each program offered that is under review in the CIPR. Include the entry point and time frame for completion for each program.**

Insert text here.

**IV-B 2. In the following table(s), provide completion rates for each program under review for the most recent three calendar years.**

⚠ *Note: While completion rate formula(e) may vary by track, the key element requires completion rates to be provided by degree and/or certificate program. Students who have left the program due to identified factors such as family obligations, relocation, financial barriers, decision to change majors, or transfer to another institution of higher learning may be excluded.*

*The program may delete sections that for programs that are not under review at this time.*

Baccalaureate Program:

- The CIPR was submitted before the expected timeframe for completion concluded.

Calendar Year of Graduation	Calendar Year of Admission	# Students Admitted	# Students Excluded	# Students Completing	% Students Completing
2017	2014-15	47	3	43	97.7%
2016	2013-14	52	5	47	100%
2015	2012-13	54	1	52	100%

If any program has a completion rate of less than 70% for the most recent calendar year, please provide an explanation/analysis with documentation for the variance in the space below:

Insert text here.

**Optional: Key Element IV-B**

Is there any other information that the program would like to provide related to this key element?

Insert text here.

## Key Element IV-C

### **Licensure and certification pass rates demonstrate program effectiveness.**

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

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

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

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

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

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

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

**IV-C 1. Does the institution offer a pre-licensure program that is under review in the CIPR?**

- Yes
- No

Complete the following table for each track and/or site that offers a pre-licensure nursing program. Record the campus/site and track’s NCLEX-RN pass rate for the three past calendar years. (The table may be adapted to include as many tracks/sites as necessary.)

Track and/or Site:	Calendar Year	# Graduates taking NCLEX-RN for First Time by Year	% Pass Rate for First-time Takers by Year
BSN	2017	49	73%
	2016	42	80.95%
	2015	38	97.37%
	20		
	20		
	20		
	20		
	20		
	20		

For any campus/site and track where the rate reported in the table above was less than 80%, has a substantive change notification been submitted to CCNE related to this change in student achievement?

- Yes
- No

If the NCLEX-RN pass rate for any campus/site and track is less than 80% for the most recent calendar year, provide a written explanation/analysis with documentation for the variance in the space below for each track or site not meeting the 80% pass-rate requirement. Include a plan to meet the 80% NCLEX-RN pass rate first-time takers. The explanation may include trend data, information about numbers of test takers, data relative to specific campuses/sites or tracks, and data on repeat takers.

- Applicable
- Not Applicable

*Track and/or site:* BSN/Lake Superior State University - **PLEASE SEE APPENDIX TITLED: CCNE Response Report 2018.** This report was submitted March 2018, currently awaiting feedback from CCNE on this report.

*Explanation/Analysis:*

*Plan:*

For any campus/site and track where the NCLEX-RN pass rate is less than 80% for the most recent calendar year, complete the table below. The table should provide data for the past three calendar years. (The table may be adapted to include as many tracks/sites as necessary.)

Track and/or Site:	Range of Calendar Years	# Graduates Testing NCLEX-RN for the first time	% Three Year Average Pass Rate for First-Time Takers	# Graduates Testing NCLEX-RN for First Time and Successful Repeaters	% Three Year Average Pass Rate for First-time Takers and Repeaters
BSN	2017	49	87.1%	48	97.8%
	2016	42	85.5%	42	100%
	2015	38	91.5%	40	100%

**IV-C 2. Does the institution offer graduate programs (currently under review in the CIPR) that prepare students to sit for one or more certification examination(s)?**

- Yes  
 No

Complete the following table for each graduate program that prepares students to sit for a certification examination. Record the certification examination pass rate for the three past calendar years. (The table may be adapted to include as many certification examinations as necessary.)

Certification Exam Specialty Area	Certification Organization	Calendar Year	# Taking By Year	# Passing by Year	% Cert. Pass Rate By Year
		20			
		20			
		20			
		20			
		20			
		20			
		20			
		20			
		20			

For any certification exam where the rate reported in the table above was less than 80%, has a substantive change notification been submitted to CCNE related to this change in student achievement?

- Yes  
 No

If the certification pass rate for any certification examination is less than 80% for the most recent calendar year, please provide a written explanation/analysis with documentation for the variance in the space below for each examination by program not meeting the 80% pass-rate requirement and a plan to meet the 80% certification pass rate for first-time takers.

*Certification examination:*

*Explanation/Analysis:*

*Plan:*

For any certification examination where the pass rate is less than 80% for the most recent calendar year, complete the table below. The table should provide data for the past three calendar years. (The table may be adapted to include as many certification examinations as necessary.)

Certification Exam	Certification Organization	Range of Calendar Years	# Graduates Testing for the first time	% Three Year Average Pass Rate for First-Time Takers	# Graduates Testing for First Time and Successful Repeaters	% Three Year Avg Pass Rate for First-time and Repeat Takers
		20—20				
		20—20				

**Optional: Key Element IV-C**

Is there any other information that the program would like to provide related to this key element?

Please see previously mentioned document “**CCNE Response Report 2018**” in Appendix

**Key Element IV-D**

**Employment rates demonstrate program effectiveness.**

*Elaboration: The program demonstrates achievement of required outcomes regarding employment rates.*

- *The employment rate is collected separately for each degree program (baccalaureate, master’s, and DNP) and post-graduate APRN certificate program.*
- *Data are collected within 12 months of program completion. For example, employment data may be collected at the time of program completion or at any time within 12 months of program completion.*
- *The employment rate is 70% or higher. However, if the employment rate is less than 70%, the employment rate is 70% or higher when excluding graduates who have elected not to be employed.*

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

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

*Note:* This key element is only applicable to programs who have graduates.

**IV-D 1. Complete the following employment rate table for each program offered under review in the CIPR. Please provide data for the most recent calendar year.**

 *Note:* Data may reflect employment immediately following completion of the program or any time frame within 12 months of completion. Graduates who elect not to be employed

should not be included in the calculation. The institution may report employment in any field, not just nursing.

Program(s) Under Review:	Calendar Year	# Graduates	% Employed within 12 months of Graduation
Baccalaureate	2017	43	100%
Master's	20		
Post-Graduate APRN Certificate	20		
Doctor of Nursing Practice	20		

For any program where the rate reported in the table above was less than 70%, has a substantive change notification been submitted to CCNE related to this change in student achievement?

- Yes
- No

For any program where the rate reported in the table above was less than 70%, provide a written explanation/analysis with documentation for the variance in the space below.

<p><i>Program:</i></p> <p><i>Explanation/Analysis:</i></p>
--

**Optional: Key Element IV-D**

Is there any other information that the program would like to provide related to this key element?

<p>In the past there has been difficulty obtaining hiring information due to privacy issues pertaining to the release of information. Data was obtained through sources such as social media and e-mails from graduates. Students now sign a release of information while still and LSSU student, allowing employers to release this information to the SON. As further defined in Standard IV-H surveys are now sent out at 6 months and 1 year after graduation to acquire data for employment rates from our graduates.</p>
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**Key Element IV-E**

**Program outcomes demonstrate program effectiveness.**


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

*Program outcomes are defined by the program and incorporate expected levels of achievement. Program outcomes are appropriate and relevant to the degree and certificate programs offered and may include (but are not limited to) student learning outcomes; student and alumni achievement; and student, alumni, and employer satisfaction data.*

*Analysis of the data demonstrates that, in the aggregate, the program is achieving its outcomes. Any program with outcomes lower than expected provides a written explanation/analysis for the variance.*



**IV-E 1. Complete the following program for each expected program outcome. (The table may be adapted to include as many outcomes as necessary.)**

 *Note: Do not include outcomes related to completion rates (Key Element IV-B), licensure and certification pass rates (Key Element IV-C), and employment rates (Key Element IV-D); and those related to faculty (Key Element IV-F).*

Program Outcome	Timeframe	Expected Level of Achievement	Actual Outcome
Liberal Education for Baccalaureate Generalist Nursing Practice	2017—2018	Appraises a solid base in liberal education for nursing practice as evidenced by <i>100% of students will achieve minimum 85% of NURS 436 Critical Analysis paper</i>	100% Satisfactory level
Basic Organizational and System Leadership for Quality Care and Patient Safety	2017—2018	Synthesizes knowledge and skills in leadership, quality improvement, and patient safety to provide quality health care as evidenced by completion of NURS 435 Nursing Management and Leadership capstone project ( <i>100% will complete capstone project</i> ) and paper, NURS 431 Change Project, and NURS 433 test questions -	94% of students completed project. One student was given an “Incomplete” grade for health reasons and will finish this summer.
Scholarship for Evidence-Based Practice	2017—2018	Evaluates research for potential application for evidence-based practice as evidenced by completion of NURS 436 Critical Analysis Paper. - <i>100% of students will achieve minimum 85%</i>	100% Satisfactory level
Information Management and Application of Patient Care Technology	2017—2018	Designs knowledge and skills in information management and patient care technology in the delivery of quality patient care as evidenced by completion of NURS 431 Cardiogenic Shock and Sepsis Simulation, VSIM (Virtual Simulation), DocuCare Electronic Health Record - <i>100% will complete at Satisfactory level</i>	100% Satisfactory level
Health Care Policy, Finance, and	2017—2018	Analyzes health care policies, including financial and regulatory, directly and	94% of students achieved 80% grade. One student

Regulatory Environments		indirectly influencing the nature and functioning of the healthcare system as evidenced by completion of NURS 435 Financial Projection and Feasibility Study Paper - <i>100% of students will achieve minimum 80% grade</i>	was given an “Incomplete” grade for health reasons and will finish this summer.
Inter-professional Communication and Collaboration for Improving Patient Health Outcomes	<u>2017—2018</u>	Appraises communication and collaboration among health care professionals and patients to deliver high quality and safe patient care as evidenced by completion of NURS 431 Clinical SBAR Tool and Evaluation Tool - <i>100% will complete at Satisfactory level</i>	100% Satisfactory level
Clinical Prevention and Population Health	<u>2017—2018</u>	Determines health promotion and disease prevention at the individual and population health levels as evidenced by completion of NURS 432 Ongoing Veterans Health Project and NURS 433 Family Assessment and Teaching Plan	Data pending
Professionalism and Professional Values	<u>2017—2018</u>	Emulates professionalism and inherent values of altruism, autonomy, human dignity, integrity, and social justice as evidenced by completion of NURS 431 Clinical Evaluation Tool - <i>100% will complete at Satisfactory level</i>	100% Satisfactory level
Baccalaureate Generalist Nursing Practice	<u>2017—2018</u>	Synthesizes nursing practice with patients, individuals, families, groups, communities, and populations across the lifespan and across the continuum of health care environments and the variations of care, the increased complexity, and the increased use of health care resources inherent in caring for patients as evidenced by completion of NURS 432 Clinical Evaluation Tool - <i>100% will complete at Satisfactory level</i>	100% Satisfactory level

For any outcome where the expected level of achievement was not met, provide a written explanation/analysis with documentation for the variance in the space below.

<p><i>Program Outcome:</i></p> <p><i>Explanation/Analysis:</i></p>
--

**Optional: Key Element IV-E**

Is there any other information that the program would like to provide related to this key element?

<p>Program Outcome assessment as shown above is a process we are currently focusing on. The use of Nuventive over this academic year has facilitated documentation of this process, though it is a work in progress.</p>
--

**Key Element IV-F**

**Faculty outcomes, individually and in the aggregate, demonstrate program effectiveness.**

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

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

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

**IV-F 1. Complete the following table to demonstrate that actual faculty outcomes in the aggregate are analyzed and compared to expected outcomes. (The table may be adapted to include as many outcomes as necessary.)**

Faculty Outcome	Timeframe	Expected Level of Achievement	Actual Outcome
Scholarship	2017	100% of SON faculty will engage in scholarship as defined by Boyer’s model and Faculty Association contract	100% achievement
Continuing Education	2017	100% of SON faculty will achieve required 25 CEUs	100% achievement
Student Evaluation of Faculty	2017	aggregate average of 4 out of a 5-point scale	4.08

For any outcome where the expected level of achievement was not met, provide a written explanation/analysis with documentation for the variance in the space below.

<p><i>Faculty Outcome:</i></p>
--------------------------------

*Explanation/Analysis:*

**IV-F 2. Provide examples of individual faculty accomplishments.**

LSSU nursing faculty have presented at local and national conferences over the past three years on a variety of topics including Faculty Development, Simulation and Information Management. Additional faculty members have accomplished the following:

- Completed certification as a Medical-Surgical Nurse Specialist
- Graduated from NEA Emerging Leaders Academy 2015-16.
- Earned credentialing as a Certified Simulation Healthcare Educator (CHSE)
- Ongoing Certification as a Certified Nurse Education (CNE)

**IV-F 3. Have the expected faculty outcomes changed since the last on-site evaluation?**

Yes

x No

If yes, provide examples and a description of how the current expected faculty outcomes continue to reflect expectations of the faculty in their roles and evaluation of performance.

Insert text here.

If yes, describe how the current expected faculty outcomes continue to be consistent with and contribute to the achievement of the program's mission and goals.

Insert text here.

If yes, describe how the current expected faculty outcomes continue to be congruent with institution and program expectations.

Insert text here.

**Optional: Key Element IV-F**

Is there any other information that the program would like to provide related to this key element?

Insert text here.

## Key Element IV-G

**The program defines and reviews formal complaints according to established policies.**

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

**IV-G 1. Identify the URL (citing a page number if appropriate) where the program defines what constitutes a formal complaint, or provide the definition below:**

The BSN Student handbook outlines in detail the definition of a formal complaint, as well as the step-by-step procedure for filing a complaint. This process, as well as the entire student handbook, is evaluated and updated yearly by the SAC of the SON. Any changes are communicated to all nursing students through the Nursing Student Moodle portal. The formal complaint process for other constituents includes communication of complaints to either the nursing faculty or the Chief Nurse Administrator. If the Chief Nurse Administrator is not able to address the complaint through dissemination to the appropriate faculty and constituents, the information is forwarded to the Provost of the University where the University process is then initiated if necessary.

**IV-G 2. Have there been any changes to the complaint definition and/or process since the last on-site evaluation?**

- Yes  
 No

If yes, provide details below.

Insert text here.

**Optional: Key Element IV-G**

Is there any other information that the program would like to provide related to this key element?

Insert text here.

## Key Element IV-H

**Data analysis is used to foster ongoing program improvement.**

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

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

**IV-H 1. Provide at least two examples of the use of aggregate data to improve program outcomes.**

The examples may address completion, licensure, certification, and employment rates; other program outcomes; and formal complaints. The examples should reflect that actual outcomes were compared to expected outcomes and any discrepancies resulted in changes to the program to foster improvements. The example should also demonstrate that faculty were engaged in the program improvement process.

Example:

*Program Outcome:* Improved NCLEX Pass Rates

*Expected Level of Achievement:* December 2017 graduates will achieve minimum 80% pass rate

*Actual Outcome:* final results pending (90%) pass rate as of May 1, 2018

*Explanation:* 2016 pass rates: 80.9%, 2017 pass rates 73% for first time test-takers.

*Action Plan:* NCSBN NCLEX review program purchased for Spring 2017 graduates, individual NCLEX Success Plans created with students, tracking and trending of ATI Predictor scores, adjustment of ATI Predictor testing time frame, NCLEX test-taking strategies threaded throughout program, development of Pathopharmacology course

*Faculty Participation:* Multiple faculty meeting discussions took place regarding low pass rate trends and influencing factors. Faculty mentoring of NCSBN study sessions took place, each faculty integrated test-taking strategies into courses. All decisions for this issue were done as a faculty group after discussion

Example:

*Program Outcome:* Simulation Integration

*Expected Level of Achievement:* 100% of Nursing clinical courses will engage in a minimum of one simulation experience

*Actual Outcome:* 8 of 9 courses (88.8%) engage in simulation activities

*Explanation:* Simulation has been threaded throughout our BSN Curriculum with the exception of NURS 433 Nursing Care of Populations.

*Action Plan:* Work has begun to integrate one simulation experience into this course for the Fall 2018 semester.

*Faculty Participation:* Each course coordinator has collaborated with Simulation faculty to create outcomes and design a meaningful simulation experience for students. Faculty are actively involved in all simulation activities, including faculty development, simulation education, and simulation evaluation.

**Optional: Key Element IV-H**

Is there any other information that the program would like to provide related to this key element?

## Verification

- x The Chief Nurse Administrator, Dr. Ronald Hutchins, has approved the program information form and completed report, and confirms its contents as of June 1, 2018.

## Appendix A

## BSN NURSING PROGRAM OUTCOMES

Program Outcomes	Sophomore	Junior	Senior
<b>Liberal Education for Baccalaureate Generalist Nursing Practice</b>	<b>Develops</b> a solid base in liberal education for nursing practice as evidenced by completion of NURS 211 Personal Philosophy Paper	<b>Demonstrates</b> a solid base in liberal education for nursing practice as evidenced by completion of HLTH/NURS 328...	<b>Appraises</b> a solid base in liberal education for nursing practice as evidenced by presentation of NURS 436 Critical Analysis paper
<b>Basic Organizational and System Leadership for Quality Care and Patient Safety</b>	<b>Identifies</b> knowledge and skills in leadership, quality improvement, and patient safety to provide quality health care as evidenced by Completion of NURS 213 Medication Administration Skill Check Off	<b>Examines</b> knowledge and skills in leadership, quality improvement, and patient safety to provide quality health care as evidenced by completion of NURS 326 test questions	<b>Synthesizes</b> knowledge and skills in leadership, quality improvement, and patient safety to provide quality health care as evidenced by completion of NURS 435 Nursing Management and Leadership capstone project and paper. NURS 431 Change Project and NURS 433 test questions
<b>Scholarship for Evidence-Based Practice</b>	<b>Identifies and describes</b> research for potential application for evidence-based practice as evidenced by completion of NURS 213 Comprehensive Care Plan and HLTH 235 Library Search and Definitions & Compare and Contrast of Research Articles Paper	<b>Applies</b> research for potential application for evidence-based practice as evidenced by completion of NURS 327 Comprehensive Care Plan. NURS 434 Research Critiques	<b>Evaluates</b> research for potential application for evidence-based practice as evidenced by completion of NURS 436 Critical Analysis Paper.
<b>Information Management and Application of</b>	<b>Shows</b> knowledge and skills in information management and	<b>Applies</b> knowledge and skills in information management and	<b>Designs</b> knowledge and skills in information management and



<b>Patient Care Technology</b>	patient care technology in the delivery of quality patient care as evidenced by completion of HLTH 235 Technology Presentations and Paper	patient care technology in the delivery of quality patient care as evidenced by completion of NURS 325 Simulation Experience	<b>patient care technology in the delivery of quality patient care as evidenced by completion of NURS 431 Cardiogenic Shock and Sepsis Simulation, VSIM (Virtual Simulation), DocuCare Electronic Health Record</b>
<b>Program Outcomes</b>	<b>Sophomore</b>	<b>Junior</b>	<b>Senior</b>
<b>Health Care Policy, Finance, and Regulatory Environments</b>	<b>Demonstrates</b> or understands health care policies, including financial and regulatory, directly and indirectly influencing the nature and functioning of the health care system as evidenced by completion of NURS 211 Test Questions and Assignment	<b>Identifies health</b> care policies, including financial and regulatory, directly and indirectly influencing the nature and functioning of the health care system as evidenced by completion of NURS 325 National Healthcare Program Comparison	<b>Analyzes health care policies, including financial and regulatory, directly and indirectly influencing the nature and functioning of the health care system as evidenced by completion of NURS 435 Financial Projection and Feasibility Study Paper</b>
<b>Inter-professional Communication and Collaboration for Improving Patient Health Outcomes</b>	<b>Illustrates</b> communication and collaboration among health care professionals and patients to deliver high quality and safe patient care as evidenced by completion of NURS 212 Health History and NURS 213 Transitional Simulation	<b>Models</b> communication and collaboration among health care professionals and patients to deliver high quality and safe patient care as evidenced by completion of NURS 328 Cultural Origin Paper	<b>Appraises communication and collaboration among health care professionals and patients to deliver high quality and safe patient care as evidenced by completion of NURS 431 Clinical SBAR Tool and Evaluation Tool</b>
<b>Clinical Prevention and Population Health</b>	<b>Defines</b> health promotion and disease prevention at the individual and population health levels as evidenced by completion of HLTH 208 SMART Project	<b>Applies</b> health promotion and disease prevention at the individual and population health levels as evidenced by completion of NURS 326 Teaching Project	<b>Determines health promotion and disease prevention at the individual and population health levels as evidenced by completion of NURS 432 Ongoing Veterans Health Project and NURS</b>

			<b>433 Family Assessment and Teaching Plan</b>
<b>Program Outcomes</b>	<b>Sophomore</b>	<b>Junior</b>	<b>Senior</b>
<b>Professionalism and Professional Values</b>	<b>Defines</b> professionalism and inherent values of altruism, autonomy, human dignity, integrity, and social justice as evidenced by completion of NURS 213 Clinical Evaluation Tool	<b>Models</b> professionalism and inherent values of altruism, autonomy, human dignity, integrity, and social justice as evidenced by completion of NURS 327 Clinical Evaluation Tool	<b>Emulates professionalism and inherent values of altruism, autonomy, human dignity, integrity, and social justice as evidenced by completion of NURS 431 Clinical Evaluation Tool</b>
<b>Baccalaureate Generalist Nursing Practice</b>	<b>Recognizes nursing practice with patients, individuals, families, groups, communities, and populations across the lifespan and across the continuum of health care environments and the variations of care, the increased complexity, and the increased use of health care resources inherent in caring for patients as evidenced by NURS 212 Clinical Evaluation Tool</b>	<b>Applies nursing practice with patients, individuals, families, groups, communities, and populations across the lifespan and across the continuum of health care environments and the variations of care, the increased complexity, and the increased use of health care resources inherent in caring for patients as evidenced by completion of NURS 325/326 Clinical Evaluation Tool</b>	<b>Synthesizes nursing practice with patients, individuals, families, groups, communities, and populations across the lifespan and across the continuum of health care environments and the variations of care, the increased complexity, and the increased use of health care resources inherent in caring for patients as evidenced by completion of NURS 432 Clinical Evaluation Tool</b>

Revised 4/30/2018

## Appendix B

School of Nursing Outcomes CommitteeEvaluation Plan Process

1. Outcomes Chairperson responsible for oversight of this process
2. Please see the Evaluation Timeline document
3. The implementation of the SON Evaluations will proceed as follows:
  - a. **End of Program Evaluation for Graduates (1year out):** SON Academic Assistant will send out electronic Survey Monkey evaluations to graduating class from one year ago in March and December of each year.
  - b. **Clinical Site Evaluations to Current Students:** SON Academic Assistant will send out electronic Survey Monkey evaluations to the main clinical cohort at each level on Week 13 of each semester.
    - i. NURS 213, NURS 327, NURS 325, NURS 431, NURS 432, NURS 433
  - c. **Classroom/Lab Evaluations:** SON Academic Assistant to give evaluations to each instructor for their class/lab at week 13-14 of each semester.
  - d. **Employer Evaluations of Graduate:** Outcomes Chairperson (or designee) and Academic Assistant will aggregate graduate places of employment from End of Program Survey Monkey evaluation, Alumni Association, Social media, and self-reported employment spreadsheet. In May and November of each year, an electronic employer letter with embedded Survey Monkey link, and a PDF of graduate permission letter will be emailed to the Human Resources department/Nurse Recruiter of the graduate from 1 year ago.
  - e. **Simulation:** SON Academic Assistant will send out electronic Survey Monkey evaluations to the main clinical cohort at each level on Week 13/14 of each semester.
    - i. NURS 212, NURS 213, NURS 325, NURS 326, NURS 327, NURS 431, NURS 433

## Appendix C

### Lake Superior State University (22316)

#### School of Nursing

#### Sault Ste. Marie, Michigan

This document is in response to the request of December 15th, 2017 and by the Commission on Collegiate Nursing Education (CCNE) for a compliance review of Key Elements IV-E and IV-F.

The report was compiled by members of the Lake Superior State University School of Nursing Evaluation and Curriculum committee and the Chief Nursing Administrator, Ronald Hutchins, Ph.D., RN.

#### **IV-E Program outcomes demonstrate program effectiveness.**

The letter referenced above outlined the need for IV-E to provide evidence that program outcomes demonstrate program effectiveness based on the key element associated with section IV-E. Specifically, past reports did not present expected levels of achievement or aggregate data to compare to. With past data collection not being a complete process, we now recognize the critical nature of correlating evaluation data to pre-determined expected outcomes.

As indicated in prior reports, our overall BSN program outcomes are aligned directly with the nine Baccalaureate Essentials from the American Association of Colleges of Nursing (AACN).

### **The Baccalaureate Nurse Essentials Program Standards and Expected Program Outcomes for the LSSU BSN Program**

- I.** Liberal Education for Baccalaureate Generalist Nursing Practice Appraises a solid base in liberal education for nursing practice
- II.** Basic Organizational and System Leadership for Quality Care and Patient Safety Synthesizes knowledge and skills in leadership, quality Improvement, and patient safety to provide quality health care
- III.** Scholarship for Evidence-Based Practice Evaluates research for potential application for evidence-based practice
- IV.** Information Management and Application of Patient Care Technology Designs knowledge and skills in information management and patient care technology in the delivery of quality patient care
- V.** Health Care Policy, Finance, and Regulatory Environments Analyzes health care policies, including financial and regulatory, directly and indirectly influencing the nature and functioning of the healthcare system
- VI.** Inter-professional Communication and Collaboration for Improving Patient Health Outcomes Appraises communication and collaboration among health care professionals and patients to deliver high quality and safe patient care
- VII.** Clinical Prevention and Population Health Determines health promotion and disease prevention at the individual and population health levels

**VIII.** Professionalism and Professional Values Emulates professionalism and inherent values of altruism, autonomy, human dignity, integrity, and social justice

**IX.** Baccalaureate Generalist Nursing Practice Synthesizes nursing practice with patients, individuals, families, groups, communities, and populations across the lifespan and across the continuum of health care environments and the variations of care, the increased complexity, and the increased use of health care resources inherent in caring for patients

These nine Essentials are guideposts for the LSSU SON and are therefore included in our BSN student handbook, and are accessible on our LSSU SON webpage. Newly admitted students are presented with the expected program outcomes as a part of their initial coursework in NURS 211 Introduction to Professional Nursing. Subsequently, course outcomes created based on the nine essentials, are evaluated in each nursing course and with findings inputted into our campus wide tracking system called Nuventive Improve (TM) (in prior reports known as TracDat). Using the Nuventive Improve (TM) data system, faculty members track results of assignments, test questions, written papers, clinical performances to measure student learning outcomes *in relationship to program outcomes*. The Nuventive Improve (TM) tracking system assists all faculty members to target the beginning tracking date, the assessment method used, the threshold to be met, the findings, a determination of outcome achievement, and any action to be taken in subsequent analysis in the event the threshold target for each course outcome measured is not met. The SON is now in the process of using the Nuventive Improve (TM) assessment data in the aggregate and for decision-making purposes in a more structured way program wide on an ongoing basis.

The curriculum evaluation process that the SON undergoes each year entails evaluation of program outcomes with subsequent discussion and curriculum improvement. In order to evaluate the meeting of program outcomes for the BSN program, each student completes an 'End of

Program Curriculum Evaluation' survey. The survey is set up based on the LSSU BSN Program objectives, which are reflective of the nine Baccalaureate Essentials from the American Association of Colleges of Nursing (AACN)

Based upon feedback from these surveys, it was identified that success in meeting program outcomes regarding Evidence-based practice would be best attainable by moving NURS 434 Nursing Research from the senior level to the first semester of the junior level to provide more opportunities for application throughout the entire program. Follow-up survey data from future semesters will be utilized to evaluate whether this change was beneficial to assisting student in meeting the overall program outcome regarding Evidence-based practice.

Additional program curriculum evaluation and discussions have prompted other curriculum changes within our program. The SON Curriculum/Outcomes committee (which meets biweekly during the semester) has developed and is implementing an evaluation plan to assess each course within the program. This process is summarized and reported to the SON faculty during the monthly and bi-annual faculty retreat. During the December 2017 SON Faculty bi-annual retreat, faculty analyzed data from the 2016 NCLEX Pearson report and found that LSSU graduates scored had their lowest scores in the area of Pharmacology. Through threading evaluation of all of the courses within our program, faculty determined that concepts of Pharmacology were indeed being threaded through each nursing course. With input from nursing students, faculty determined that success in achieving program outcomes would further be supported by the addition of an elective Case Study based Pathopharmacology course. Therefore, course development

will occur during Summer 2018, with expected trial implementation to occur Spring 19. Success of this strategy will be evaluated with subsequent NCLEX Pearson reports. Other courses have gone through this evaluation process, with some requiring no change (e.g. HLTH 235 Health Informatics).

In addition to this process, the SON also reviews and evaluates aggregate data from Employer surveys regarding program outcomes related to LSSU graduates. From this data, the SON has now developed expected outcomes for employer ratings of new graduates (outlined in the following chart):

<b>Year</b>	<b>LSSU SON Expected Outcome for Employer New Graduate Rating (as compared to other BSN graduates)</b>	<b>Actual Employer New Graduate Rating</b>
Fall 2014	100% at 'Average' or above	100%
Spring 2015	100% at 'Average' or above	100%
Summer 2015	100% at 'Average' or above	100%
Fall 2015	100% at 'Average' or above	data pending
Spring 2016	100% at 'Average' or above	data pending
Fall 2016	100% at 'Average' or above	data pending
Spring 2017	100% at 'Average' or above	Surveys to be sent out May 2018
Fall 2017	100% at 'Average' or above	Surveys to be sent out Jan 2019

The LSSU SON uses the following evaluation to gather data:

---

**How would you rate the LSSU Nursing graduate with respect to the following characteristics, in comparison with other baccalaureate nurses you know and /or supervise?**

### 1. Knowledge and Lifelong learning

Example: The graduate participates in continued learning, attends educational inservices, applies and shares learned knowledge to patient care and work environment, may be seeking further formal education.

Very Low

Below average

Average

Above average

Superior

Unknown

### 2. Technical Skills

Example: Graduate performs physical, environmental, individual, family, or community assessments thoroughly and appropriately as job description dictates, and performs psychomotor skills safely.

### 3. Management of Responsibilities

Example: Graduate performs assigned tasks in a timely manner, able to utilize information technologies to care for assigned clients, performs medication administration safely, takes initiative to complete tasks, documents care appropriately, is responsible and accountable for actions and delegation to unlicensed staff, can organize and prioritize nursing care.

### 4. Critical thinking/ clinical judgment

Example: Graduate demonstrates sound judgments, problem solving of patient and organizational issues, analyzes all perspectives and gathers important information about an issue before making judgment or suggestion.

### 5. Communication

Example: Graduate has interpersonal skills and intra-professional skills, able to conduct patient education appropriately for the level of patient and family understanding, can demonstrate written and verbal communication skills.

### 6. Customer Service/Ethics

Example: Graduate shows concern for patients, families, and coworkers, demonstrates patient safety as a priority of duty, able to resolve conflicts appropriately, and demonstrates customer service, adheres to the Code of Ethics as set forth by the American Nurses Association

### 7. Professionalism

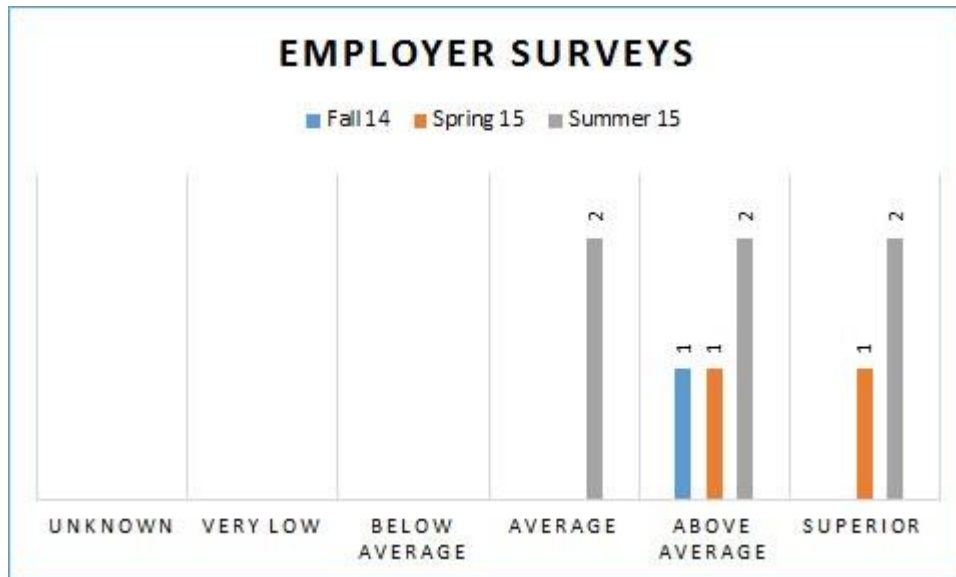
Example: Graduate appearance is neat, clean, appropriate, and complies with organizations dress code, verbal communication is professional at all times, acceptance of diversity of clients and coworkers, a contributor to teamwork, and punctual attendance.

### 8. Overall performance of Graduate

### 9. What other qualities would you, as an employer of our LSSU graduate nurses, like to see in future LSSU graduates?

## 10. Additional comments:

The following graph is a visual representation of the results of the survey data from Fall 2014 Summer 2015:



In fall 2014, one employer survey was received depicting graduate(s) with above average performance. Spring 2015 semester offered additional information where one employer indicated graduate(s) employees were above average with a second employer rating the new nurse(s) employed as having superior performance and stated our graduates were “great additions to their professional staff”. Summer 2015 demonstrated an increase of employer responses with six total and an equal division between average, above average, and superior performance ratings for new graduates employed at their facility. This data is routinely shared and discussed with Nursing faculty and the Community of Interest at annual Nursing Advisory Council meetings.

An analysis of aggregated data was completed, results demonstrated that employers’ rated the performance of our graduates in the range of ‘Average’ to ‘Superior’ . A limited response was received and analyzed from fall semester 2014 through summer 2015. In response to limited survey returns, changes were implemented to have students sign permission for employer information to be returned to us. We anticipate an upward trend in survey response rates from employers for our program outcomes committee to continually evaluate responses, on a yearly basis, since surveys are sent to employers one year post graduation. Thus, data from the 2016 – 2017 regarding the performances of our more recent graduates will be compiled at the end of this school year when all employer surveys are returned for both our fall, 2016 and spring, 2017 cohorts. To that end, The School of Nursing (SON) faculty members will continue to strive for employer survey outcome goals to achieve average, above average, or superior graduate outcomes as indicated on the example employer survey used.

According to data that was provided by LSSU Alumni Association, the graduate numbers are as follows:

- 2014: 30 graduates
- 2015: 48 graduates
- 2016: 48 graduates

Out of these 126 students, there were only 11 graduates that had shared actual employment data. The following is a representation of this data and demonstrates the wide distribution of geographic employment locations by our graduates (including International locations); a factor that contributes to challenges in data collection.



<b>Geographic Area</b>	<b>2014 (30 grads)</b>	<b>2015 (48 grads)</b>	<b>2016 (48 grads)</b>
Upper Peninsula, MI	10	20	18
Lower, MI	17	23	20
Out of State	3 total: (WI; SC; WA)	5 total: (MN; TN; OH; WI; Ontario, Canada (1))	10 total: (IL; NM; GA; TX; OH; MN; FLA (2) Ontario, Canada (2))

According to Alumni publications dated spring 2013 - fall 2014, alumni from the LSSU nursing program have prospered in many areas. The Alumni relations publication reports the program graduates are also employed in State Department of Corrections, participating in consulting work, educating both locally and in other areas of the United States, obtaining graduate education, participating in community fundraising events that contribute to charitable organizations such as Hospice House, and noteworthy awards such as the Rochester Extraordinary Women's Award.

Personal communication by faculty with the graduates of the program indicate they are gaining employment in emergency departments, intensive care units, neonatal intensive care, rehabilitation centers, and distinguished organizations such as Cleveland Clinic, Mayo Clinic, Vanderbilt University, University of Pennsylvania and the US Navy, as example. Locally, LSSU nursing graduates work at a variety of facilities in a wide range of positions, often self-reporting employment within three months of graduation. Nursing students in their final year of schooling are also being recruited for positions prior to their graduation.

#### **IV-F: Faculty outcomes, individually and in aggregate, demonstrate program effectiveness.**

##### ***Chief Nursing Administrator's Composite Report for Academic Year 2016***

As described in IV-E, the SON became aware of the need for IV-F to provide evidence that faculty outcomes demonstrate program effectiveness based on the key element associated with section IV-F. It was noted that past reports did not present expected levels of achievement or aggregate data to compare. With past data collection not being a complete process, we now recognize the critical nature of correlating evaluation data to pre-determined expected outcomes for facilitation of program effectiveness.

The LSSU nursing faculty follows a structured plan for annual evaluations that utilizes a contractual tool titled Professional Assessment Weighting (PAW). Included in the annual evaluation is an assessment of teaching effectiveness, scholarly activities, service to the university, department, community and the profession. Annual summative faculty reports are submitted to the Chief Nursing Administrator for review and a plan for continued success is discussed regarding tenure, promotion and maintenance of current rank. The annual faculty evaluation, promotion

and tenure process (as described in the faculty handbook) are utilized to measure faculty outcomes as they align to program outcomes.

Aggregate faculty outcomes are evaluated in the areas of effective teaching, scholarship and service. The LSSU nursing faculty outcomes are consistent with both the University and program Mission, goals and expected outcomes.

At the time of writing the initial report, no formal process for determining benchmark metrics for faculty effectiveness existed. This process was put in place 2 years ago. At the beginning of each academic year, the SON faculty now determines the faculty evaluation outcomes that must be achieved. The table below is representative of the 2017-2018 academic year determined at the SON meeting 8-22-2017.

	<b>0-2 years</b>	<b>3 years-tenure</b>	<b>Tenure</b>
<b>Student Learning</b>	75%	70%	65%
<b>Advising (including giving advice)</b>	10%	10%	10%
<b>Scholarly Activities</b>	10%	10%	10%
<b>Service Activities</b>	5%	10%	15%

Through assessment of yearly evaluations, the Chief Nursing Administrator reports that 100% of Faculty has achieved these outcomes.

The following represents evaluation data results compiled at the time of writing the initial report:

1) Student Learning Activities:

- a) Instructional Design: All courses have syllabi that include faculty contact information, office hours, course description, course objectives, activities, assignments, grading scale, student learning objectives, and accommodation statements and services. All nursing courses are routinely reviewed by the School of Nursing Curriculum and Outcomes committee. Course material is leveled and treaded to meet the BSN program plan. The plan to incorporate high fidelity simulation into all BSN clinical classes has been met.  
This integration continues to be refined and expanded.
- b) Instructional Delivery: Instructional delivery is assessed annually through peer visits (minimum of 2 per academic year for any non-tenured faculty) and a classroom visit by the Academic Dean. In addition, course evaluation

surveys are distributed in all courses with 5 or more students. Classroom evaluations have been positive within the School of Nursing. Concerted efforts have been made over the past two years to increase student ownership of learning. This transition from “sage on the stage” to “guide by the side” has not been without friction between all involved. Identification and clarification of both student and faculty roles has been negotiated positively in most instances. There continues to be issues regarding student acceptance of their learning role. There also have been issues related to expectations of faculty regarding student performance that may not be realistic for all learners. These issues are now being addressed in faculty meetings and both workshops for students and faculty are expected during the academic year.

<b>Composite Student Survey Results for BSN Nursing Courses Fall 14 through Spring 16</b> <b>(Scale 1 to 5: 5 = strongly agree and 1 =strongly disagree)</b>			
	Average	Median	Mode
Design: Regular class attendance was necessary for understanding course material	3.6	4	4
Design: The course was well organized, and objectives were realistic and appropriate	3.8	4	4
Design: The lectures and activities were effective in helping me learn	3.6	4	4
Design: There was ample opportunity to ask questions during class	4.3	4	4
Delivery: The instructor was enthusiastic about the course material	4.5	5	5
Delivery: The instructor clarified complex concepts	3.8	4	4

## CCNE Continuous Improvement Progress Report Template

Delivery: I was encouraged to express my own opinions	3.93	4	4
Delivery: The instructor used student questions to discover points of confusion	3.8	4	4
Assessment: The instructor offered specific suggestions for improving my weaknesses	3.63	4	4
Assessment: The exams concentrated on important aspects of the course	3.66	4	4
Assessment: The instructor adequately explained the grading system	4.1	4	4
Assessment: The instructor was readily available for consultation with students	4.1	4	4
Miscellaneous: This course has increased my capacity for analytical and critical thinking	4	4	4.7
Miscellaneous: I learned a lot from this course	3.9	4	5
Miscellaneous: I participated actively in this classes	4.33	4	4.3

Above Graphic representation - See Appendix A.

Course survey results shown above from Fall 2014 to Spring 2016 support that students are generally very satisfied with instruction with median and mode survey results at either 4 or 5 using a 5-point scale. The two lowest scoring areas, "Regular class attendance was necessary for understanding course material" and "The course was well organized, and objectives were realistic and appropriate", although being categorized in the "agree" side of the survey, show room for improvement. In the most recent aggregate evaluations (outlined in the paragraph below), both of these areas have shown improvement.

This aggregate data for the composite report of School of Nursing faculty members was obtained through annually submitted activity reports, student submitted course evaluations, dean and peer classroom evaluation reports, department meeting documentation, and contract required summative performance evaluations. At the time of our initial CCNE visit, there was discussion regarding the implementation of the new contractual tool “Professional Assessment Weighting” (PAW) to use as a summary instrument to assess composite faculty performance. At that time this tool did not demonstrated as valid or reliable and information from this instrument was not included in the report. However in the 2017 academic year a new online student evaluation process and data collection tool was implemented that demonstrated validity while evaluating faculty effective teaching (see attached copy titled School of Nursing Compilation F17 included in the end of this report). Within this 5 point Likert scale are the following overall indicators of instructional design, instructional delivery, instructional assessment and miscellaneous. This faculty performance evaluation tool is in alignment with both the University and LSSU SON’s program mission, goals and expected student outcomes. In addition this online faculty evaluation tool is representative of the University Faculty contract in regards to faculty assessment as representative of the attached document titled LSSU All-courses-Compilation F17 included in the end of this report.

## Faculty Scholarship and Publication

The SON faculty maintains expertise in their areas of responsibility by engaging in ongoing selfdevelopment. The SON embraces Boyer’s Model (1990) and definition of scholarship as the discovery or research including:

- researching and maintaining competency in their fields
- dissemination of knowledge through publication
- reading literature and keeping well-informed about trends
- scholarship of integration or interpretation
- fitting into large intellectual patterns through nursing theory
- scholarship of application
- scholarship of teaching

From Boyers (1990) Model, the Nursing faculty use discovery, integration, application, and teaching as scholarship. Faculty outcomes for scholarship include the doctoral prepared faculty in the SON, publications, national certifications and continuing education. The SON of LSSU has gradually increased the number of doctorally prepared faculty over the last 3 years. Applicants for tenure-track positions are preferred and supported by the university. One current faculty member is enrolled in a doctoral program and a new hire tenure-track with a PhD is a recent addition to the LSSU nursing faculty in 2016-2017 academic year. Noted below is a chart depicting the LSSU SON’s faculty aggregated percentage outcome for the academic years of 2015 through to the current year.

<b>Year</b>	<b>Expected Outcome</b>	<b>Percentage of LSSU Faculty Doctorally Prepared</b>
2015	25 %	18 %
2016	25 %	27 %

## CCNE Continuous Improvement Progress Report Template

2017	25 %	40 %
2018	25 %	40 %

This definition of faculty scholarship and publication is also reflective of Lake Superior State

University's faculty collective bargaining contractual language that denotes the extent to which an activity contributes to the faculty member's performance. Scholarly and Creative activities are clearly defined within the faculty contract:

(<https://www.lssu.edu/wpcontent/uploads/2017/05/LSSU-Faculty-Contract-2017-2018-Final.pdf>).

LSSU nursing faculty have presented at local and national conferences over the past three years on a variety of topics including Faculty Development, Simulation and Information Management.

Additional faculty members have accomplished the following: ● Completed certification as a Medical-Surgical Nurse Specialist ● Graduated from NEA Emerging Leaders Academy 2015-16.

- Earned credentialing as a Certified Simulation Healthcare Educator (CHSE)
- Ongoing Certification as a Certified Nurse Education (CNE)

The following table represents the percentage of faculty who are engaged in Scholarship to achieve faculty outcomes to demonstrate program effectiveness.

<b>Year</b>	<b>Expected Outcomes</b>	<b>Percentage of LSSU Nursing Faculty Engaging in Scholarship</b>
2015	100 %	100%
2016	100 %	100%
2017	100 %	100%
2018	100 %	data not yet available

## Continuing Education

The LSSU nursing faculty are required to complete a minimum of 25 contact hours every two years in order to meet the RN nursing license renewal in alignment with the Michigan State Board of Nursing and to support our Teaching Qualification requirements for the Higher Learning Commission (HLC) accreditation for LSSU. This is an absolute expectation of nursing faculty, and most faculty will exceed the minimum 25 contact hours required.

(<http://www.anamichigan.org/wp->

The following table shows the percentage of faculty who participated in continuing education for the academic years of 2015-2018.

<b>Year</b>	<b>Expected Outcome</b>	<b>Percentage of LSSU Nursing Faculty completing Continuing Education</b>
2015	100%	100%
2016	100%	100%
2017	100%	100%
2018	100%	data not yet available

## Student Mentoring

Students routinely report that faculty members have made themselves available outside of office and class hours to review and discuss course material, and in some cases provide emotional support and referral for those students experiencing stress. Discussion has occurred at SON level as to how students may become better prepared for expectations within the learning environment and post-graduation. A pre-semester learning workshop titled “JumpStart Nursing” was developed in 2017 by the SON and the LSSU Student Nurses Association (LSSNA) for students that focused on maximizing learning, identification of learning resources in an evidence-based learning environment, and stress reduction self-care methods.

## Student Support

Professor Cynthia Butcher continues to provide guidance as faculty advisor for the Lake Superior Student Nurses Association. This student group provides support for nursing students, and actively participates in community activities such as the Red Cross Blood Drive and Cancer

Walk. The LSSNA is a component of role modeling for evolving into the role of Professional Nurse, which aligns with the *AACN Baccalaureate Essential Program Standard VIII: Professionalism*

## Service Activities by SON faculty members

- a) To the Institution: Representation and active membership on all university committees including but not limited to Curriculum, General education, faculty development, recruitment and retention, diversity, and the arts
- b) To the Profession: Active membership with Michigan Nursing Association, National League of Nursing, full range of specialty nursing groups (Midwifery, Med Surg, Public Health, Nurse Educators, Administrators, Simulation, etc.), Michigan Volunteer Registry for Emergencies, and membership in the local

STTI chapter (Chi Omega). At the junior level in the BSN program, the top 35% gpa students are invited to become members of our STTI chapter, which supports the *AACN Baccalaureate Essential Program Standard VI: Interprofessional Communication and Collaboration*

c) To the General Community:

Volunteers for: American Cancer Association. Community festivals, Community health and sustainability projects, Service Group memberships, and K-12 presentations, Health Fair education and screening projects.

## Faculty Development

The University and the School of Nursing encourages and supports faculty development through such activities as active participation on University and School committees or activities; (including Faculty Association); student organizations; other work such as student recruitment, service in outside agencies as a representative of the University; workshops achieving advanced certifications; and support for doctorate achievement. Other methods of demonstrating scholarship include professional consulting, creative activity, providing educational experiences (course work, seminars, workshops, etc.) outside of teaching responsibilities, grant proposals, licensing and professional certification, participating in professional organizations, presentations, publications, unpublished manuscripts. It is expected that faculty submit plans for continued professional development and scholarship as part of their annual review process. Professionally related activities are evaluated based on the extent to which an activity contributes to the faculty's effectiveness in facilitating student success in meeting program outcomes.

The University provides opportunities for faculty development and scholarship through internal resources such as the Faculty Center for Learning, who sponsors developmental workshops for faculty members on topics such as academic advising, course evaluation, teaching techniques, learning styles, and general faculty support when needed. All new faculty attend "New Faculty Community of Practice" every other Wednesday morning led by Dr. Cathy Chaput, the Coordinator for Faculty Center for Teaching. This is congruent with LSSU's core value of

"excellence in teaching and learning." This orientation program benefits new faculty in learning technology such as course management systems and discussions of broad topics within teaching and learning, aligning with the overarching goal of student success in meeting program outcomes.

LSSU SON has identified planned activities to address identified faculty development needs for the 2017-2018 Academic Year, further support student success in meeting program outcomes.

These include:

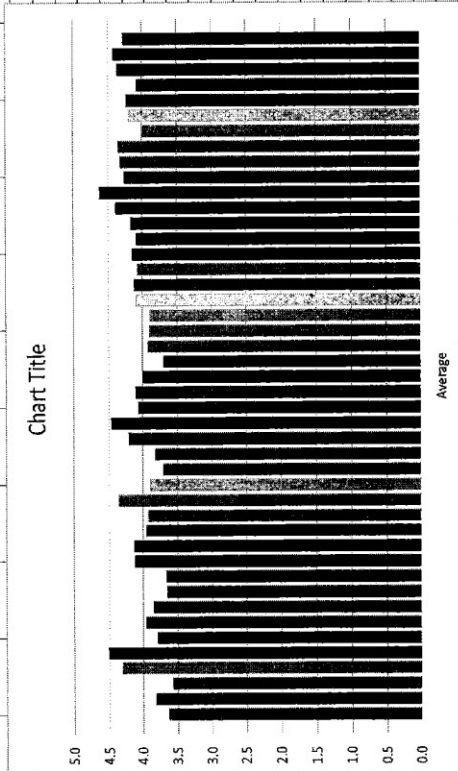
- Attendance at national education & simulation conferences
- Participation in faculty development workshops developed and presented through university
- Maintenance of professional development required for specialty certifications and required licensure
- Targeted education related to course design, online/distance education, program assessment, and inclusion of simulation to facilitate learning



In preparing this report, the LSSU SON identified an opportunity to create linkages between individual and aggregate faculty outcomes demonstrating program effectiveness. Utilizing the Nuventive (TM) Improve Assessment tool provided by LSSU, the Curriculum/Outcomes committee has created a shared repository for Nursing faculty to collect continuing education documentation, demonstrating ongoing achievement that is congruent with institutional and program outcomes.

Appendix A:

Aggregated student survey results for all Lake Superior State University (F14,15,S16) NURS Courses and Faculty (Scale 1-5; 5 being optimal)																	
Fall 14	Average	3.6	3.8	3.6	4.3	4.5	3.8	4.0	3.8	3.7	3.7	4.1	4.1	4.1	4.0	3.9	4.4
	Median	4	4	4	4	5	4	4	4	4	4	4	4	4	4	4	4
	Mode	4	4	4	4	5	4	4	4	4	4	4	4	4	5	5	5
Fall 15	Average	3.6	3.8	3.6	4.3	4.5	3.8	3.9	3.8	3.6	3.7	4.1	4.1	4.0	3.9	3.9	4.3
	Median	4	4	4	4	5	4	4	4	4	4	4	4	4	4	4	4
	Mode	4	4	4	4	5	4	4	4	4	4	4	4	4	5	5	4
Spring 16	Average	3.6	3.8	3.6	4.3	4.5	3.8	3.9	3.8	3.6	3.6	4.1	4.1	3.9	3.9	3.9	4.3
	Median	4	4	4	4	5	4	4	4	4	4	4	4	4	4	4	4
	Mode	4	4	4	4	5	4	4	4	4	4	4	4	4	4	5	4



**Appendix D**



650 W. Easterday Ave., Sault Ste. Marie, MI 49783

School of Nursing

**BACHELOR OF SCIENCE IN NURSING PROGRAM**

NCLEX Improvement Report

Submitted March 2018

To The

Michigan Board of Nursing

**NCLEX-RN Remediation Report**

Lake Superior State University (LSSU) School of Nursing (SON) recently received notification of our 2017 NCLEX-RN pass rates, at 75%. This document serves two functions:

1. Acknowledgement to the Michigan State Board of Nursing of our NCLEX-RN pass rate of 75% for 2017
2. Remediation plan to address 2017 pass rate below 80%

### **LSSU SON Pass Rate History**

The data presented in the following table is representative of the measurement of LSSU's BSN program graduates' performance on NCLEX-RN licensure examinations during the period of 2014-2017.

**Table A. LSSU SON Pass Rate History**

<b>Year</b>	<b>First Time Testers (n)</b>	<b>ATI Predictor Scores (#)</b>	<b>First Time Pass Rate</b>	<b>Overall End Pass Rate</b>
2014	38	66.7%	78.94%	100%
2015	38	66.7%	97.37%	100%
2016	42	60.95%	80.95%	100%
2017	49	63.8%	73%	100%

**(# predictor scores are combined for both spring and fall semesters in this table.)**

The SON faculty assesses our pass rate data as a critical metric, on an ongoing basis as a component of our program evaluation and assessment plan. This data is a foundational step towards process improvement and formulation of a plan to address this downward trend in pass rates. It was critical for us to visualize a trend in this data to better guide us in a proactive corrective action plan.

### **ATI Predictor and NCLEX Success Plan**

To further evaluate contributing factors related to the changes in our NCLEX-RN pass rates, the SON implemented the ATI Predictor test in the Capstone course in the students senior year prior to graduation. The ATI Predictor score is an indicator used by the SON faculty to identify areas of student success, and also areas

where students demonstrate weakness in specific content area, and predict student NCLEX success. Table B is a representation of the LSSU Pass Rate by Cohort that integrates the ATI Predictor scores.

**Table B. LSSU Pass Rate by Cohort with ATI Predictor Scores**

Cohort	Students (n)	ATI Predictor Scores	First time pass rate	Repeat pass rate (2 or more attempts)
Spring 2014	21	62.5%	66.66%	100%
Fall 2014	11	70.9%	90.9%	100%
Spring 2015	29	68.2%	100%	n/a
Fall 2015	20	65.2%	70%	100%
Spring 2016	20	65.2%	87.5%	100%
Fall 2016	25	56.7%	60%	100%
Spring 2017	24	67.6%	83.33%	100%
Fall 2017	18	60.0%	Students currently testing	No data yet

SON faculty facilitate the process of students analyzing their personal ATI predictor test results and incorporating them into their NCLEX Success Plan. They are now required to achieve at least Level 6 (out of 8) using the Lippincott PassPoint product in their three weakest client need areas, as a requirement to completing their Capstone course.

The ATI predictor score is now counted as 10% of the student's grade in the Capstone course, with the purpose of engaging students in active learning and application. Students are counseled one-on-one by faculty in the development of an individualized Success plan for the best outcome on NCLEX-RN testing. All students who scored below 80% probability of passing the NCLEX-RN are strongly encouraged to attend a live or online review course.

The LSSU School of Nursing Curriculum Committee has performed an evaluation of the data presented noting that there is not consistency in the prediction of student success. This has raised questions and further discussion of continued use of this tool is taking place. Consideration has been taken in regards to student perception of the

importance and value of taking this predictor test. Although ATI has been an integrated tool since 2010 within the BSN program, it has been noted that semester student activities and concurrent course requirements may have impact on the student's commitment to the testing.

The predictor test is currently given at mid-term in the Capstone course. This decision was a result of previous trials of testing at different times in the Capstone course, including end-of-semester and beginning-of-semester examination times. As seen in the data from Table B, first time pass rate for Fall 2016 of 60% was highly correlated to the ATI Predictor score of 56.7%. In this semester, the Predictor test was administered at the end of the semester, which limited the remediation timeframe and opportunity. Therefore, the faculty decided to administer the Predictor test at midterm of the Capstone course to provide opportunity for the development of an individualized success plan. As representative to the effectiveness of this change, the pass rate for the Spring 2017 cohort, showed an increase from the Predictor scores.

### **NCSBN Review**

On recognition of the downward trend of NCLEX-RN pass rates, the SON purchased the NCSBN three week review course for the students in the Capstone course for Spring 2017 and Fall 2017. Students were required to attend 16 hours self-review, facilitated by the SON faculty. As the Fall 2017 cohort is currently testing, no comprehensive data is yet available to evaluate the effectiveness of adding the NCSBN review course. This will be assessed once all students from this cohort compete testing.

### **Live NCLEX Review Course**

The SON Curriculum Committee is currently assessing and discussing the possibility of incorporating a live NCLEX review course into the curriculum in the final semester immediately prior to graduation. The SON faculty has voted unanimously in support of this, but evaluation of the predicted effectiveness is ongoing. A significant barrier to inclusion of a live NCLEX review course into the curriculum includes cost to the students, who typically at LSSU come from a lower socioeconomic background and rely heavily on Financial Aid. In response to the assessment of this barrier, and in addition to provided program education, independent student NCLEX preparation that starts at the onset of the nursing program is being encouraged. Students are provided with the knowledge of where to locate supplemental resources, and test taking strategies are incorporated into each course beginning at the sophomore level when admitted into the nursing program.

### **Analysis of Issue and Corrective Action Plan**

Upon receipt of January-June 2016 NCLEX-RN pass rates, the SON faculty increased discussion for a more focused assessment of this issue and to strategically plan. Minutes from the Curriculum/Outcomes and SON Faculty/Staff meetings outline these discussions.

### **Curriculum Assessment**

The SON Curriculum Committee members in collaboration with School of Nursing faculty have performed an evaluation of current Curriculum course content, leveling of that content, and methods for delivery of that content for all core required nursing courses. Findings from this assessment conclude that course objectives are in alignment with School of Nursing program outcomes and that pedagogy and concepts are appropriate for student learning at all levels.

### **Focused Areas of Concern**

With analysis of NCLEX-RN reports from the past 2 years, Pharmacology was identified as a weak content area for our nursing students. This is also in alignment with the ATI predictor noting pharmacology as an area for concern over four semesters, Spring 2016, Fall 2016, Spring 2017, and Fall 2017. In response to this identification, the SON Curriculum Committee identified during evaluation of course content that all clinical core courses do in fact thread pharmacology content into their courses and students apply this content in their clinical and lab settings.

However, a concern was identified by this committee that students take a pharmacology course in their sophomore year and in each consecutive year this content is reinforced through threading. Student input was sought and presented by the committee's student representative supportive of stronger pharmacology reinforcement with application. Based on this finding, the SON faculty voted to create a case study based Pathopharmacology course, bringing application of Pathophysiology and Pharmacology concepts to the lab and simulation bedside for reinforcement of concepts. This course will be created Summer 2018 with a target implementation date of Spring of 2019.

The SON Curriculum Committee assessed the Curriculum plan and identified that the second semester in the student's junior year could support this Pathopharmacology course. This inclusion does not alter the credit requirement for the program, as it will be an elective course as its effectiveness is evaluated by the SON.

### **Course and Instructor Changes**

At the course level, the Chief Nursing Administrator made changes in instruction beginning Spring 2018 semester, in one senior level course after identifying the need to better align faculty skills and content. In past years, the Chief Nursing Administrator reports that this course has been a core course for critical thinking application, which is a necessary component for NCLEX-RN exam success. The outcome of this change will begin to be measured with the spring 2018 graduating cohort.

### **Accessibility Services**

Students are also reminded that if they need testing accommodations due to disabilities, they should use these when they take the NCLEX-RN exam. This was not the pattern for students in the past, who reported not using testing accommodations for the NCLEX exam, even though they completed their entire nursing program using these accommodations.

### **Outcomes**

In order to measure and validate the effectiveness of these changes and the overall NCLEX Remediation Plan, the SON has set the following Outcomes. These will be assessed at designated intervals as described.

1. All graduating seniors in NURS 436 taking the ATI Predictor exam will achieve minimum 68.2% (adjusted group score) for the NCLEX-RN ATI predictor test. This will be evaluated each semester.
2. December 2017 BSN graduates will achieve an overall pass rate greater than 80% on NCLEX-RN exam.
3. April 2018 graduates will achieve an overall pass rate greater than 85% on NCLEX-RN exam.

### **Conclusion**

The LSSU School of Nursing is committed to continued monitoring, assessment, and evaluation of NCLEX Remediation plan strategies and student success from these strategies.



## Appendix Cover Sheet

Use a copy of this cover sheet for each document submitted. Evidence supporting the questions and narratives does *not* need to be electronically added to this Program Review form. One option is to use this cover sheet to add content to directly this Word document. A second option is to submit separate documents along with the form, also using this cover sheet for each document provided.

Send email with supporting documentation to: [TRACDAT@lsu.edu](mailto:TRACDAT@lsu.edu), with a cc to your dean, or submit as a hardcopy to your dean.

<b>School:</b>	<b>Nursing</b>
<b>Document Title (if attached) or Filename (if emailed):</b>	<b>Appendix X: Assessment Program Four Column School of Nursing</b>
<b>This documentation is relevant to Question number:</b>	<b>7</b>
<b>Briefly summarize the content of the file and its value as evidence supporting program review:</b>	<b>4 Column Nuventive report which includes CAFE goals</b>

# Assessment: Program Four Column

## Program (CoHB) - Nursing BSN Pre-Licensure

### Program Notes: Purpose of BSN Program

The Bachelor of Science in nursing program is designed to provide the student with the knowledge, values and skills necessary for the practice of professional nursing. The curriculum builds upon a liberal arts and science foundation. The graduate uses theoretical and empirical knowledge from the disciplines of nursing, humanities, and the physical, behavioral and social sciences as a basis for making nursing decisions. The baccalaureate graduate is prepared to function as a generalist in providing care at the primary, secondary and tertiary levels within a variety of settings.

**Assessment Contact:** Dr. Kathy Berchem, Chair

Dr. Ron Hutchins  
Dean of the School of Nursing  
906-635-2446

**Mission Statement:** To graduate competent students who are prepared to safely provide compassionate nursing care utilizing theory and evidence-based practice.

<i>Student Learning Outcomes</i>	<i>Assessment Criteria &amp; Procedures</i>	<i>Assessment Results</i>	<i>Use of Results</i>
<p><b>Leadership</b> - Students will synthesize knowledge and skills in leadership, quality improvement, and patient safety to provide quality health care</p> <p><b>Goal Status:</b> Active</p> <p><b>Goal Level (Bloom/Webb):</b> High-Level (Creating/Evaluating) [Bloom]</p>	<p><b>Direct - Group project, collaborative learning</b> - 100% of students will achieve a minimum final grade of 85% or higher on their Clinical Environment Change Project</p> <p><b>Criteria Target:</b> Graduates will identify the evidence-based need to apply the change to improve quality health care within their clinical environment</p> <p><b>High Impact Program Practices 2:</b> Collaborative Assignments, Projects</p> <p><b>Related Documents:</b> <a href="#">Change Project Presentation.pdf</a></p>	<p><b>Finding Reporting Year:</b> 2017-2018</p> <p><b>Goal met:</b> Yes</p> <p>100% of students achieved a minimum final grade higher than 85%. N=21students. Overall average grade 94.1% Spring 2018 (05/29/2018)</p> <p><b>Related Documents:</b> <a href="#">Change Project Presentation Grading Rubric .pdf</a> <a href="#">Change Project - IV Line Tracing and Labeling.pdf</a></p>	<p><b>Use of Result:</b> Changes for Fall 2018 will include a submission of a literature review that exhibits a minimum of 3 scholarly research articles that provide theoretical and methodological support for the proposed clinical environmental change in conjunction with a problem statement. Both of these documents will need to be submitted for approval before the group project can begin. This allows the students to identify data sources that may or may not have contributed to the research.</p>

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			<p>Additionally, it will assist to the student with their understanding and critical thinking. (05/29/2018)</p> <p><b>Update:</b> Change Project Grading Rubric Updated for Fall 2018 (08/23/2018)</p>
		<p><b>Finding Reporting Year:</b> 2016-2017 <b>Goal met:</b> Yes 100% of students received a minimum grade higher than 72% when identifying a SMART goal to improve patient safety and improve quality care (12/19/2016)</p>	<p><b>Use of Result:</b> No actions to be take for Spring 2017. Continue to utilize the SMART goal format as a communication tool to identify quality care improvements (12/19/2016)</p>
		<p><b>Finding Reporting Year:</b> 2015-2016 <b>Goal met:</b> Yes 100% of students have met the performance criteria and received a grade of 72% or above in alignment with the grading rubric (12/17/2015) (12/17/2015)</p>	<p><b>Use of Result:</b> Replace and monitor different criterion/target/threshold for Spring 2016 to include 80% of students will demonstrate a minimum grade of 72% when answering the question "State the problem to be addressed, be specific, measurable, achievable, realistic and timely. (SMART). The development of a SMART goal provides a tool to improve communication and identify specific actions to be taken to improve quality healthcare. (08/29/2018)</p>
		<p><b>Finding Reporting Year:</b> 2014-2015 <b>Goal met:</b> Yes 100% of students met the performance criteria (Change Project grading rubric) as evidenced by the overall student grades greater than 72% for this completion of this assignment. (12/04/2014)</p>	<p><b>Use of Result:</b> No action to be taken for Spring 2015. Continue to utilized the performance criteria (Change Project grading rubric) as the marker assessing student identification of quality health care improvements in a hospital clinical setting. (12/04/2014)</p>

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	<p><b>Direct - Capstone Project - including undergraduate research</b> - Direct Assessment. Student will present a capstone project and paper in a professional setting.</p> <p><b>Criteria Target:</b> 100% of students will present a capstone project and paper in which they evaluate and create a program or project that improves outcomes in nursing by addressing multiple quality and patient safety issues. Students will identify a minimum of 5 specific quality and/or patient safety issues to which they will provide an evidence based solution, guided by The National Patient Safety Goals or other appropriate quality and safety indicators and either a management or leadership philosophy.</p> <p><b>High Impact Program Practices 1:</b> Capstone Course(s), Projects</p> <p><b>High Impact Program Practices 2:</b> Collaborative Assignments, Projects</p> <p><b>Related Documents:</b>  <a href="#">Capstone Grading Tool.pdf</a>  <a href="#">Holistic grading scale for f2018.pdf</a></p>	<p><b>Finding Reporting Year:</b> 2017-2018</p> <p><b>Goal met:</b> Yes</p> <p>N19=100% of students achieved a minimum of 80% on their Nursing Management and Leadership NURS 435 Capstone Project/Paper and Presentation. This Capstone is focused on the Roles and Responsibilities of the Nurse Manager and Leader as well as the nurse to improve outcomes in nursing and health care delivery for improved outcomes in patient care. (05/01/2018)</p>	<p><b>Use of Result:</b> Will continue with the use of the NURS 435 Capstone Project/Paper and Presentation to demonstrate achievement of course and program outcomes. (05/01/2018)</p>
<p><b>Interprofessional communication -</b> Appraises communication and collaboration among health care professionals and patients to deliver high quality and safe patient care</p> <p><b>Goal Status:</b> Active</p> <p><b>Goal Category:</b> Student Learning</p> <p><b>Goal Level (Bloom/Webb):</b> Mid-Level (Analyzing/Applying) [Bloom]</p> <p><b>Institutional Learning:</b> ILO1 - Formal Communication - Students will develop and clearly express complex</p>	<p><b>Other Findings</b></p>	<p><b>Finding Reporting Year:</b> 2013-2014</p> <p><b>Goal met:</b> No</p> <p>Currently students are often mentored by LSSU alumni who evaluate student inter-professional communication. Faculty routinely collect this information from the mentors for student individually. This data can be found in each individual student file and has been reported to be positive in nature. Through assessment of this process it has been identified that an area of deficiency is the aggregate collection of this data and an action plan will be put in place. (08/27/2015)</p>	<p><b>Use of Result:</b> An action plan will be developed and implemented by the SON Outcomes Committee in the 2015-2016 academic year (08/27/2015)</p>

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<p>ideas in written and oral presentations.</p>	<p><b>Other Findings</b></p> <p><b>Direct - Writing Intensive Assignment</b> - Each student in Nursing Health Appraisal course will be provided the opportunity to look more closely at the components of communication techniques such as Introduction, open ended questions, closed or direct questions, and closure of the interview, as guided by the questions used in the health history assignment part 1 and 2 attached. A health history is a broad overview of a clients past medical history, family medical history, overall health state (nutritional, social habits/behaviors, developmental history as they age and view of health/promotion.</p> <p>This exercise will aid the student in learning and achieving confidence in their communication with developing interviewing skills, documentation skills, and recognizing the importance of making the time to conduct a thorough health history without tiring the client.</p> <p><b>Criteria Target:</b> Each student in Nursing Health Appraisal course will complete both Health History Part I and Part II assignments with revisions at a satisfactory level 72% (C) or higher.</p> <p><b>High Impact Program Practices 1:</b></p>	<p><b>Related Documents:</b>  <a href="#">MENTOR_EVALUATION_OF_STUDENT[15].doc</a></p> <p><b>Finding Reporting Year:</b> 2017-2018  <b>Goal met:</b> Yes  All 14 students completed the Part I and Part II assignments with as satisfactory grade ranging from 86% to 100%. Part Two scores increased after feedback and revisions from part I with ranges between 97% to 100%. Qualitative feedback: students felt more prepared for Part II assignment and were able to meet goals for communication and health history interviews. (05/11/2018)</p>	<p><b>Use of Result:</b> Continue to use the Health History interviews as markers for interpersonal communication skills. Consider the population for future assignments. (05/11/2018)</p>

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	<p>Service Learning, Community-based learning</p> <p><b>Related Documents:</b>  <a href="#">Health History Assignment Part 2.docx</a>  <a href="#">Health History Assignment Part I</a></p> <p><b>Direct - Laboratory, Clinical, Skill/Competency Assessments -</b> 100% of students in Adult Med/Surg II will achieve a satisfactory on their final 8-week clinical evaluation for the use of a reporting template that includes situation, background, assessment and recommendation (SBAR) for patient hand-offs</p> <p><b>Criteria Target:</b> Graduates will use (SBAR is a reporting template - S=situation, B=Background, A=Assessment, R=Recommendation) to improve communication and collaboration among healthcare professionals. It assists to provide high quality and safe healthcare.</p> <p><b>High Impact Program Practices 1:</b> Not applicable to this outcome</p> <p><b>High Impact Program Practices 2:</b> Not applicable to this outcome</p>	<p><b>Finding Reporting Year:</b> 2017-2018</p> <p><b>Goal met:</b> Yes  N=21 100% of Adult Med/Surg II students achieved a satisfactory in their final 8 weeks clinical evaluation (Spring 2018) (05/29/2018)</p> <p><b>Related Documents:</b>  <a href="#">SBARCommTool.pdf</a></p> <hr/> <p><b>Finding Reporting Year:</b> 2016-2017</p> <p><b>Goal met:</b> Yes  100% of the Adult Med/Surg II students achieved satisfactory on their final 8 week clinical evaluation while utilizing the situation, background, assessment and recommendation (SBAR). (04/29/2016)</p>	<p><b>Use of Result:</b> Continue to utilize the Clinical Evaluation tool as a maker to evaluate professional communication and collaboration among healthcare professionals within the hospital environment for the 2018-2019 academic year. (05/29/2018)</p> <hr/> <p><b>Use of Result:</b> No action to be taken. Continue to utilize the final clinical evaluation as a marker to assess communication and improve student collaboration among healthcare professionals. (12/30/2016)</p>
	<p><b>Direct - Exam/Quiz - within the course -</b> Students ability to assess patient(s) suicide risk in NURS433 Community Health Nursing course will be assessed using multiple choice essay questions on mid-term and/or final course exams. National Patient Safety Goal (Goal #15) related to behavioral health care identifies assessing patients for suicide risk as an important focus.</p> <p><b>Criteria Target:</b> 100% of students</p>	<p><b>Finding Reporting Year:</b> 2017-2018</p> <p><b>Goal met:</b> No  24% of students (n=5/21) answered all (6) multiple choice questions (#'s 1, 6, 22, 23, 46, 47) on mid-term exam correctly related to suicide assessment earning 12/12 points and providing appropriate rationale on response. 43% of students (n=9/21) answered 2 questions correctly and 33 % (n=7/31) answered only one question correctly pertaining to suicide risk and assessment. (05/14/2018)</p> <p><b>Related Documents:</b>  <a href="#">NURS433 Sp18 Exam.Midterm.doc</a></p>	<p><b>Use of Result:</b> The plan will be to cover all topics in greater depth in class lecture to help students to understand of the seriousness of chronic and devastating life situations that can have the potential to precipitate suicide. The question on patient with BDD will be used and assessed for one more semester. If results still show a disconnect with NCLEX-style question as written, a</p>

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	<p>will achieve a minimum of 75% on all multiple choice essay questions on mid-term and/or final course exam(s) related to suicide assessment focused questions (2 points ea. question).</p> <p><b>High Impact Program Practices 1:</b> Not applicable to this outcome</p> <p><b>High Impact Program Practices 2:</b> Not applicable to this outcome</p> <p><b>Related Documents:</b>  <a href="#">NURS433 F15 Exam.midterm.doc</a>  <a href="#">NURS433 Sp16 Exam.Midterm.doc</a></p>		<p>revision of question will be considered. Another question missed related to assessing a newly-admitted patient to an inpatient psychiatric unit and the nursing priority for assessment and patient safety. More in depth education will be given in lecture on nursing assessment and patient safety in relation to patients with serious emotional/mental illness. (08/30/2018)</p>
		<p><b>Finding Reporting Year:</b> 2017-2018</p> <p><b>Goal met:</b> No</p> <p>67% of students (n=14/21) answered all (4) multiple choice questions (#'s 12, 21, 36, 44) on final exam correctly related to suicide assessment earning 8/8 points and providing appropriate rationale on response. 33% of students (n=7/21) answered 2 questions correctly. BDD was not a question this exam. Two new questions were added to this exam regarding the recognition of suicide potential in a person with severe transgender struggles and loss of a child through an accident and struggles with acceptance and severe depression and suicidal ideation. For the students who missed 1 question regarding suicide assessment and safety, about half missed each of the new questions. (05/14/2018)</p> <p><b>Related Documents:</b>  <a href="#">NURS433 Sp18 Exam.Final.docx</a></p>	<p><b>Use of Result:</b> The plan will be to cover both new question topics in greater depth in class lecture to help students to understand the seriousness of chronic and devastating life situations that can have the potential to precipitate suicide. Plan is to continue using this final exam with no revisions. (05/14/2018)</p>
		<p><b>Finding Reporting Year:</b> 2017-2018</p> <p><b>Goal met:</b> No</p> <p>61% of students (n=11/18) answered all (7) multiple choice questions (#'s 1, 3, 6, 13, 15, 22, &amp; 46) on mid-term exam correctly related to suicide assessment earning 14/14 points and providing appropriate rationale on response. 33% of students (n=6/18) answered 2 questions correctly; however, most missed question regarding patient with Body Dysmorphic Disorder and suicide risk. (12/20/2017)</p>	<p><b>Use of Result:</b> There continues to be a disconnect with students understanding of BDD symptoms and how it affects patient's lives. For the students who are not getting this question correct, there seems to be some confusion on the verbal and non-verbal</p>

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		<p><b>Related Documents:</b>  <a href="#">NURS433 F17 Exam.Midterm.doc</a></p>	<p>signs/symptoms that patients with BDD experience and portray. The plan will be to cover this topic in greater depth, in a different manner (patient video discussion, journal articles), along with lecture material, in class lecture to help students to understand of the seriousness of BDD and the potential for suicide. (12/20/2017)</p>
		<p><b>Finding Reporting Year:</b> 2017-2018  <b>Goal met:</b> No            17% of students (n=3/18) answered all (3) multiple choice questions (#'s 13, 36, 44) on final exam correctly related to suicide assessment earning 6/6 points and providing appropriate rationale on response. 61% of students (n=111/18) answered 2 questions correctly. A new question was added to this exam regarding the recognition of suicide potential in a person (working in an academic setting) accused of a serious sexual offense by a student. For the students who missed 2 questions, about half missed the new question, as well as the question regarding patient with Body Dysmorphic Disorder and suicide risk. (12/20/2017)</p>	<p><b>Use of Result:</b> The plan will be to cover both topics in greater depth, in a different manner (patient video discussion, journal articles), along with lecture material, in class lecture to help students to understand of the seriousness of chronic and devastating life situations that can have the potential to precipitate suicide. The question on patient with BDD will be used and assessed for one more semester. If results still show a disconnect with NCLEX-style question as written, a revision of question will be considered. (12/20/2017)</p>
		<p><b>Finding Reporting Year:</b> 2016-2017  <b>Goal met:</b> Yes            83% of students (n=20/24) answered all (5) multiple choice questions (#'s 1, 6, 10, 12, 21) on mid-term exam correctly related to suicide assessment earning 10/10 points and providing appropriate rationale on response. (05/22/2017)</p>	<p><b>Use of Result:</b> Body Dysmorphic Disorder (BDD) was the main question missed. The plan will be to cover this topic in greater depth in class lecture for better student understanding of the seriousness of BDD and the potential for suicide, along with content in the other questions that students missed related to</p>



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			safety, assessment and potential for suicide. (05/22/2017)
		<p><b>Finding Reporting Year:</b> 2016-2017  <b>Goal met:</b> No            46% of students (n=11/24) answered all (3) multiple choice questions (#'s 9, 13, &amp; 41) on final exam correctly related to suicide assessment earning 6/6 points and providing appropriate rationale on response. 50% of students (n=12/24) answered 2 questions correctly; however, most missed question regarding patient with Body Dysmorphic Disorder and suicide risk. (05/22/2017)</p>	<p><b>Use of Result:</b> There continues to be a disconnect with students understanding of BDD symptoms and how it affects patient's lives. The plan will be to cover this topic in greater depth in class lecture to help students to understand of the seriousness of BDD and the potential for suicide. (05/22/2017)</p>
		<p><b>Finding Reporting Year:</b> 2016-2017  <b>Goal met:</b> Yes            100% of students (n = 25) answered all (3) multiple choice questions (#'s 4, 8, &amp; 10) correctly on midterm exam related to suicide assessment earning 6/6 points and providing appropriate rationale on response. (12/21/2016)</p>	<p><b>Use of Result:</b> No changes planned as goal was met for this objective. (12/21/2016)</p>
		<p><b>Finding Reporting Year:</b> 2016-2017  <b>Goal met:</b> Yes            88% of students (n=22/25) answered all (3) multiple choice questions (#'s 10, 13, &amp; 14) on final exam correctly related to suicide assessment earning 6/6 points and providing appropriate rationale on response. (12/21/2016)</p>	<p><b>Use of Result:</b> A new question was added for this exam on body dysphoric disorder (BDD) and the potential for suicide. This is the question that 3 (or 12%) of students lost points on. The plan will be to cover this topic in greater depth in class lecture for better student understanding of the seriousness of BDD and the potential for suicide. (12/21/2016)</p>
		<p><b>Finding Reporting Year:</b> 2015-2016  <b>Goal met:</b> Yes            0% of students (n=20) answered all 3 questions (#'s 4, 8, &amp; 10) correctly on mid-term exam. 100% of students answered (2) of (3) multiple choice questions correctly earning 4/6 points and providing appropriate rationale on response. (05/02/2016)</p>	<p><b>Use of Result:</b> No action to be taken. Will continue with current education and examination relating to suicide and patient safety. (05/02/2016)</p>
		<p><b>Related Documents:</b>  <a href="#">NURS433 Sp16 Exam.Midterm.doc</a></p>	

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<p><b>Scholarship</b> - Evaluates research for potential application for evidence-based practice  <b>Goal Status:</b> Active  <b>Goal Category:</b> Student Learning  <b>Goal Level (Bloom/Webb):</b> High-Level (Creating/Evaluating) [Bloom]</p>	<p><b>Other Findings</b></p>	<p><b>Finding Reporting Year:</b> 2015-2016  <b>Goal met:</b> Yes            100% of students (n = 20) answered all (3) multiple choice questions (#'s 4, 8, &amp; 10) correctly related to suicide assessment earning 6/6 points and providing appropriate rationale on response.            (11/28/2015)</p> <p><b>Related Documents:</b>  <a href="#">NURS433 F15 Exam midterm.doc</a></p> <hr/> <p><b>Finding Reporting Year:</b> 2014-2015  <b>Goal met:</b> Yes            Prior to our decision to seek accreditation with CCNE the School of Nursing identified via the Outcomes Committee that available data related to the achievement of program outcomes by alumni was an area of deficiency.            In response to this issue an action plan was put in place. Known employers were contacted and it was reported that the lack of response to the employer survey was a direct result of risk to the organization related to HIPAA and an employee's right to privacy.            In response to this feedback, the Outcomes Committee sought input from students as well. Students were educated as to the necessity of the SON's ability to gather this data. As a result, a new employer survey was created in alignment with the nine program outcomes for the LSSU SON and a student release of information form was created. An action plan was created; students now sign this form in their senior year providing employers with permission to provide requested information via survey to the LSSU SON. Between 2009 and 2014, employer surveys had not been returned by the employer. As a result of the changes made in identification of this deficiency, the SON received 100 percent of signatures from senior students giving permission for employers to release data. Six employer survey responses have been received in the 2014-2015 academic year, and these surveys have identified data in all nine of the LSSU SON Program Outcomes.            In regard to student and alumni scholarship we have broadly assessed that students and alumni are</p>	<p><b>Use of Result:</b> No action to be taken. Will continue with current education and examination methods. (12/28/2015)</p>

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	<b>Other Findings</b>	<p>demonstrating ongoing professionalism. This demonstration has been assessed in the form of publication, honor society membership, leadership and management positions within their community, graduate program completion, military service including one Naval nurse assigned to the White House, US Public Health Service, faculty, and professional presentations at international, national, state, and local conferences. (08/27/2015)</p>	
		<p><b>Finding Reporting Year:</b> 2014-2015 <b>Goal met:</b> Yes Employer Satisfaction - (08/27/2015)</p>	<p><b>Use of Result:</b> * Aggregated data will be shared with Advisory Committee members to encourage responses. * Advisory Committee Members will be notified during the Biannual Advisory Council Meetings that the employer satisfaction survey will be forthcoming, in an effort to gather more responses in the coming year. *An email will be sent out to Advisory Council members prior to the survey to make contact with potential respondents. * The Chief Administrator will make personal contact with respondents when visiting sites in order to discuss the surveys and encourage participation in survey process and further assess employer satisfaction. (08/27/2015)</p>
		<p><b>Finding Reporting Year:</b> 2013-2014 <b>Goal met:</b> No There were challenges identified in obtaining employer satisfaction data. Prior to our decision to seek accreditation with CCNE the School of Nursing identified via the outcomes committee</p>	

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	<p><b>Other Findings</b></p>	<p>that data related to the achievement of program outcomes by alumni was an area of deficiency. In response to this issue an action plan was put in place. Known employers were contacted and it was reported that the lack of response to the employer survey was a direct result of risk to the organization related to HIPAA and an employee's right to privacy. In response to this feedback, the Outcomes Committee sought input from students as well. Students were educated as to the necessity of the SON's ability to gather this data. As a result, a new employer survey was created in alignment with the nine program outcomes for the LSSU SON and a student release of information form was created. Students in their senior year will sign this form providing employers with permission to provide requested information via survey to the LSSU SON. Prior to 2014, data was not received from surveys sent. As a result of the changes made in identification of this deficiency, the SON received 100 percent of signatures from senior students giving permission for employers to release data and has received 6 employer survey responses in the 2014-2015 academic year and these surveys have identified data in all nine of the LSSU SON Program Outcomes. (02/03/2014)</p> <p><b>Related Documents:</b>  <a href="#">Mtg Mins-Nurs Adv Brd-3-13-13.docx</a>  <a href="#">Mtg Mins-Nurs Adv Brd-10-10-12.docx</a>  <a href="#">S14 Nursing Adv Brd Mtg Minutes 3-12-14.docx</a>  <a href="#">F13 Nursing Adv Brd Mtg Minutes 10-30-13.docx</a></p>	
	<p><b>Direct - Capstone Project - including undergraduate research</b> - Each student will submit a NURS 436 Contemporary Issues in Nursing Critical Analysis Paper concerning an issue or problem confronting professional nursing today. The student must do a literature search to obtain current research and</p>	<p><b>Finding Reporting Year:</b> 2017-2018  <b>Goal met:</b> Yes  N=21. 100% of learners scored at least 85% on this project. (05/03/2018)</p> <p><b>Related Documents:</b>  <a href="#">Critical Analysis Paper Rubric.doc</a>  <a href="#">Guide to Creating an Outstanding CAP.docx</a></p>	<p><b>Use of Result:</b> Given the favorable results of the critical analysis papers from the spring 2018 semester, continue to stress the importance of critically analyzing contemporary issues in nursing using evidence based research to support view points. Continue to stress to newly graduating nurses,</p>

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	<p>reputable information on the topic.  <b>Criteria Target:</b> Professionally present the current information regarding the topic by submitting a high quality in-depth paper that synthesizes the data. All students will score at least 85% on this paper.  <b>High Impact Program Practices 1:</b> Capstone Course(s), Projects  <b>Related Documents:</b>  <a href="#">Critical Analysis Paper Rubric.doc</a>  <a href="#">Guide to Creating an Outstanding CAP.docx</a>  <b>Direct - Laboratory, Clinical, Skill/Competency Assessments -</b> Students in the clinical setting function in the role of the nurse by providing bedside nursing care. Part of the criteria for successful completion of the clinical portion of NURS 327 Adult I Medical/Surgical Nursing is completion of two Comprehensive Care Plans (CCPs). These CCPs include application of research which justifies interventions the nurse uses to provide optimal patient care with positive patient outcomes.  <b>Criteria Target:</b> Each student will submit two CCP's of which they will obtain at least 72% on each.</p>	<p><b>Finding Reporting Year:</b> 2017-2018  <b>Goal met:</b> Yes            Fall 2017 and Spring 2018 cohorts in NURS 327 Adult I Medical/Surgical Nursing all produced the required CCPs with scores above 80%. (Fall 17 n=22, Spring 18 n=22). (04/20/2018)  <b>Related Documents:</b>  <a href="#">Comprehensive Care Plan Guidelines.docx</a>  <a href="#">CCP packet.pdf</a></p>	<p>that managers will need evidence to support changes made to the work environment. (08/26/2018)</p> <p><b>Use of Result:</b> This is a worthwhile activity for these junior level nursing students as it forces the student to have frank conversations with their patients, promotes a detailed physical assessment of the patient, demands the use of current evidence based interventions, and is a means of helping the student connect all aspects of patient care into one comprehensive package. Will continue this activity, monitoring for deficiencies in the quality of these care plans. (08/29/2018)</p>
	<p><b>Direct - Laboratory, Clinical, Skill/Competency Assessments -</b> In this HLTH 235 Healthcare Informatics assignment, students are asks to define and compare and contrast the differences in the type of research articles. Students write an "encyclopedia" type definition of</p>	<p><b>Finding Reporting Year:</b> 2017-2018  <b>Goal met:</b> Yes            95% of the students received at least 80% on the assignment and were able to retrieve and identify key components of the different types of research articles. When students are quizzed the following semester in their research course, they are successful at recalling the data when put into think, pair, share groups.</p>	<p><b>Use of Result:</b> The results of the students success with this assignment helps prepare them for being able to quickly assimilate the concept that there are different kinds of Evidence Based Practice articles used in Nursing. I use the results of this assignment</p>

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	<p>articles such as primary and secondary studies; quantitative and qualitative studies; literature reviews, systematic reviews, meta-analysis, and meta-synthesis, and then they are asked to compare the similarities and differences between them. They are not allowed to use quotes, I want them to practice the fine art of paraphrasing and referencing. They must write a reference list of all your sources using APA checklist I developed for them.</p> <p><b>Criteria Target:</b> 90% of students will properly define various research definitions such as primary quantitative and qualitative research; secondary research including literature reviews, systematic reviews, meta-analysis, and meta-synthesis, and identify key components of each of the different types of research articles.</p> <p><b>Schedule/Notes:</b> The guidelines.gov website is no longer available due to budget cuts</p> <p><b>High Impact Program Practices 1:</b> Common Intellectual Experiences</p> <p><b>Direct - Group project, collaborative learning</b> - Students are given a primary nursing quantitative &amp; qualitative research study to "actively read" and critique. They are given critique guidelines that identifies ALL the research concepts and they answer the questions and identify the concepts directly on the article, providing citations using APA.</p>	<p>(08/31/2018)</p> <p><b>Finding Reporting Year:</b> 2017-2018</p> <p><b>Goal met:</b> Yes</p> <p>100% of the students so marked improvement on the research article critique after reviewing their original answers and discussing the differences between the groups answers. There is a great deal of engagement during this class and pertinent discussion about the research concepts being critiqued. The student much prefer to dialogue about the article, rather than being alone in a room writing a scholarly critique.</p>	<p>to assess their retention of these concepts Research class the following semester. The students do a "Think, Pair, Share" exercise to recall the terms such as primary and secondary studies, systematic reviews, meta-analysis &amp; metasynthesis, and clinical practice guidelines. Students use these related to searching and appraising different types of research articles.</p> <p>The results of this assignment are also shared with colleagues because students are asked in every clinical class to find a "research article" that relates to their patient's diagnosis and write a bibliography on the paper. (08/31/2018)</p> <p><b>Use of Result:</b> Research critique assignments in previous semesters I did not have students make a copy of their work before they met in groups to discuss the critique, therefore I was unable to know what improvements were added to their critiques. Now that I have them make a copy of their original submission, they seem to</p>

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<p><b>Liberal Education</b> - Appraises a solid base in liberal education for nursing practice  <b>Goal Status:</b> Active  <b>Goal Category:</b> Student Learning  <b>Goal Level (Bloom/Webb):</b> Mid-Level (Analyzing/Applying) [Bloom]</p>	<p>Active reading involves underlining, bracketing, and writing in the margins of the article (use the back of the article if they need additional room). The definitions and explanation of the concepts or terms are paraphrased (they are not allowed to use quotes), and properly referenced to reflect their grasp of the concepts. Students bring a "copy" of the marked up article to class along with the original (which they submit to prior to class). Then, they use their photo copy and get into teams to discuss and share their unique perspectives on the critique, and they make additions to their copy to submit at the end of the class.</p> <p><b>Criteria Target:</b> 100% of students will actively participate in the group critique assignment and will include additional written insights &amp; perspectives on the second critique they conducted as a group as compared to the original critique they did on their own.</p> <p><b>Related Documents:</b>  <a href="#">Quantitative Critique Guidelines.docx</a>  <a href="#">Qualitative Critique Guidelines.docx</a></p>	<p>(08/31/2018)</p> <p><b>Related Documents:</b>  <a href="#">Quantitative Critique Guidelines and Scoring Rubric.docx</a></p> <hr/> <p><b>Finding Reporting Year:</b> 2017-2018  <b>Goal met:</b> No  2 out of 14 students (14.2%) did not meet this criterion. Class average was 82.3% (08/27/2018)</p>	<p>put more effort in their initial paper. (08/31/2018)</p> <hr/> <p><b>Use of Result:</b> Revising emphasis on the connection between Nursing theory and the Metaparadigm for this years class. Adding a writing exercise that links the two prior to the development of each student's</p>

Student Learning Outcomes	Assessment Criteria & Procedures	Assessment Results	Use of Results
	Professional Nursing) <b>Criteria Target:</b> A scoring rubric will be used to evaluate application of concepts. 100% of students will complete paper at grade of 72% (C) or higher. <b>Related Documents:</b> <a href="#">NURS211 Theory Paper guidelines.docx</a> <a href="#">NURS211 Theory Paper RUBRIC.docx</a>	<b>Finding Reporting Year:</b> 2016-2017 <b>Goal met:</b> No 25 of 26 students met benchmark with one student at 67%. Class average 90% (12/22/2017)	paper (08/27/2018) <b>Use of Result:</b> Quality of papers improved in 2nd draft (after adding a first draft). Continue this method even with one student not achieving benchmark (05/01/2017)
		<b>Finding Reporting Year:</b> 2015-2016 <b>Goal met:</b> Yes 100% of students achieved benchmark with class average of 93% on paper (04/30/2016)	<b>Use of Result:</b> Even with students achieving appropriate scores and meeting target, student feedback in evaluations demonstrates need for a 'draft' submission of paper. This will be implemented for the next academic year. (05/01/2016)
		<b>Finding Reporting Year:</b> 2014-2015 <b>Goal met:</b> No 23 of 24 students (95.8%) met criteria. Class average of 86.1% on paper. (05/01/2015)	<b>Use of Result:</b> As class average well above criterion, continue to revise focus of class material and monitor. (09/23/2015)
		<b>Finding Reporting Year:</b> 2014-2015 <b>Goal met:</b> No 23 of 24 students (95.8%) of students earned grade of 72% (C) or higher (12/19/2014)	<b>Use of Result:</b> Revise course content to provide more focus on applying nursing theory to metaparadigm and nursing practice. (12/19/2014)
	<b>Direct - Capstone Project - including undergraduate research - Critical Analysis Paper</b> <b>Criteria Target:</b> Learner will submit a paper concerning an issue or problem confronting professional nursing practice. The paper will contain an in-depth analysis of the issue. The learner will then formulate two points of view regarding the topic, analyze the ethical aspects of the issue, how the nursing scope of practice is impacted by the issue, and synthesize the data	<b>Finding Reporting Year:</b> 2017-2018 <b>Goal met:</b> Yes N=21. 100% of the learners scored at least 85% on this project in the spring 2018 semester. (08/26/2018) <b>Related Documents:</b> <a href="#">Critical Analysis Paper Rubric.doc</a>	<b>Use of Result:</b> Given the favorable results of the critical analysis papers from the spring 2018 semester, continue to stress the importance of critically analyzing contemporary issues in nursing using evidence based research to support view points. Continue to stress to newly graduating nurses, that managers will need evidence to support changes made to the work environment. LO (08/26/2018)



<i>Student Learning Outcomes</i>	<i>Assessment Criteria &amp; Procedures</i>	<i>Assessment Results</i>	<i>Use of Results</i>
	<p>to formulate their own opinion. Finally, the learner will then make a recommendation to resolve the issue. The critical analysis paper is a project assigned in NURS 436 Contemporary Issues in Nursing. 100% of learners will score at least 85% on this paper.</p> <p><b>High Impact Program Practices 1:</b> Capstone Course(s), Projects</p> <p><b>High Impact Program Practices 2:</b> Capstone Course(s), Projects</p> <p><b>Related Documents:</b> <a href="#">Critical Analysis Paper Rubric.doc</a> <a href="#">Guide to Creating an Outstanding CAP.docx</a></p>		
<p><b>Information management</b> - Designs knowledge and skills in information management and patient care technology in the delivery of quality patient care</p> <p><b>Goal Status:</b> Active</p>	<p><b>Direct - Laboratory, Clinical, Skill/Competency Assessments</b> - 100% of NURS 431 Adult Nursing II students will actively participate to deliver and document quality patient care in a Cardiogenic Shock and Sepsis simulation via an electronic health record</p> <p><b>Criteria Target:</b> 100% of graduates will assess, identify, analyze and document patient findings for a simulated patient in acute distress.</p> <p><b>High Impact Program Practices 1:</b> Not applicable to this outcome</p> <p><b>High Impact Program Practices 2:</b> Not applicable to this outcome</p> <p><b>Related Documents:</b> <a href="#">Adult Med Surg II Cardiogenic Shock Simulation.pdf</a></p>	<p><b>Finding Reporting Year:</b> 2017-2018</p> <p><b>Goal met:</b> Yes</p> <p>100% of students actively participated to deliver quality patient care during simulation and 50% documented patient care in Docu care which is the electronic patient record. (05/29/2018)</p> <p><b>Related Documents:</b> <a href="#">Example of Docu Care Electronic Health Record.pdf</a></p>	<p><b>Use of Result:</b> Continue the utilization of this interactive approach for students in the 2018-2019 academic year. The web-based interactive approach allows the student to apply critical thinking and demonstrate technical skills. The exchange of patient healthcare information allows for the student to a higher quality, safe and efficient care. Changes for Fall 2018 will include requiring each student to document a minimum of 1 patient care related electronic entry during both simulations to replace the current process of assigning 1 student from each group to complete documentation. (05/29/2018)</p>
		<p><b>Finding Reporting Year:</b> 2016-2017</p> <p><b>Goal met:</b> No</p>	<p><b>Use of Result:</b> Lack of patient documentation during both the</p>

Student Learning Outcomes	Assessment Criteria & Procedures	Assessment Results	Use of Results
	<p><b>Direct - Group project, collaborative learning</b> - This assignment is designed to provide students the opportunity to research and present various aspects of the latest information technology used in the healthcare system today. Students work in groups of two (2) or three (3) and select a health information technology topic from the list in the syllabus. The students work as a team and write a 3-4 page paper, develop a PowerPoint presentation, and give a 20 to 30-minute presentation on the topic to the class. Each student participates in researching the topic and each will present an equitable portion of the information to the class. After the paper and PowerPoint are completed, each student on the team completes a peer evaluation form.</p> <p><b>Criteria Target:</b> 90% of the students will receive at least 80% on the paper and Power Point with 90% of peer evaluations indicating equitable effort from each of the team members.</p>	<p>100% of students actively participated to deliver patient care in the Cardiogenic Shock and Sepsis simulation. Less than 50% of students participated in the patient documentation in both simulations. (12/30/2016)</p> <p><b>Finding Reporting Year:</b> 2017-2018</p> <p><b>Goal met:</b> Yes</p> <p>100% of students received at least 80% and 90% received at least 88%. 100% of the students received 100% on the presentation and Power Point. Over 95% of the peer evaluations indicated that there was equity in the share of the group work. (08/31/2018)</p> <p><b>Related Documents:</b>  <a href="#">APA Checklist for Scholarly Papers.docx</a></p>	<p>Cardiogenic Shock and Sepsis simulation identifies the importance of demonstrating continuity of safe patient care. Emphasize the importance of real-time bedside electronic patient documentation to demonstrate accurate delivery of patient care in the Spring 2018 during both simulations. (08/29/2018)</p> <p><b>Use of Result:</b> The results of this assignment are used to assess students understanding of writing a scholarly paper, in the 3rd person, and their understanding of how to use APA. Each semester, students struggle with both of these and each semester I provide additional resources on Moodle, and I spend more time teaching about writing, citing, and formatting using APA. I also created an APA check list for students to submit along with their paper (see attached document). (08/31/2018)</p>

<i>Student Learning Outcomes</i>	<i>Assessment Criteria &amp; Procedures</i>	<i>Assessment Results</i>	<i>Use of Results</i>
<p><b>Policy and Regulations</b> - Analyzes health care policies, including financial and regulatory, directly and indirectly influencing the nature and functioning of the health care system.</p> <p><b>Goal Status:</b> Active</p> <p><b>Goal Category:</b> Student Learning</p>	<p><b>Related Documents:</b> <a href="#">Informatics Topics.docx</a></p> <p><b>Direct - Writing Intensive Assignment</b> - Students will apply concepts related to health policy in completing NURS211 Introduction to Professional Nursing written assignment to discuss impact on health care system and patient health.</p> <p><b>Criteria Target:</b> 100% of students will complete this assignment at a Satisfactory level (S/U)</p> <p><b>High Impact Program Practices 1:</b> Not applicable to this outcome</p> <p><b>High Impact Program Practices 2:</b> Not applicable to this outcome</p> <p><b>Related Documents:</b> <a href="#">NURS211 Health Policy Issues assignment info.docx</a> <a href="#">NURS211 Online Journal Rubric.docx</a></p>	<p><b>Finding Reporting Year:</b> 2017-2018</p> <p><b>Goal met:</b> Yes</p> <p>100% of students (n=14) completed assignment at a Satisfactory level (05/03/2018)</p>	<p><b>Use of Result:</b> Since this is an assignment that students complete individually, a classroom discussion after completion would enhance student consideration of other perspectives on these healthcare policy issues. Will incorporate this semester. (08/27/2018)</p>
	<p><b>Direct - Capstone Project - including undergraduate research</b> - Direct Assessment. Students will perform a financial analysis and evaluation of their capstone plan or project and submit a three to five paper outlining and discussing these financial projections</p> <p><b>Criteria Target:</b> 80% of student groups will achieve a minimum of 80% on the completion of a minimum of three and maximum of five page paper using APA 6th edition and a minimum of three current resources outlining the financial projections in budget format and discussing the feasibility of the implementation of their</p>	<p><b>Finding Reporting Year:</b> 2017-2018</p> <p><b>Goal met:</b> Yes</p> <p>N19=100% of students completed a financial feasibility assignment including a budget preparation and presentation within the Capstone Assignment for NURS 435. (05/01/2018)</p>	<p><b>Use of Result:</b> Will continue with this assessment outcome and course assignment. Nurses must understand how they impact the financial and regulatory process of an organization and health care arena and be able to communicate and apply this impact. This assignment allows them the opportunity to explore this impact. (05/01/2018)</p>

Student Learning Outcomes	Assessment Criteria & Procedures	Assessment Results	Use of Results
	<p>capstone nursing plan or project.</p> <p><b>High Impact Program Practices 1:</b> Capstone Course(s), Projects</p> <p><b>High Impact Program Practices 2:</b> Collaborative Assignments, Projects</p> <p><b>Related Documents:</b> <a href="#">Financial Assignment Rubric for Tracdat.pdf</a></p> <p><b>Direct - Writing Intensive Assignment -</b> A worksheet in NURS 325 will be assigned asking the student to identify and discuss several policies in the United States related to maternity care services, including how the Affordable Health Care act applies to maternity care as well as other pending legislation. As well, the student will be asked to identify the major organizations that impact maternity care policy in the United States. (Active)</p> <p><b>Criteria Target:</b> 100% of students will obtain a score of over 80% on this assignment.</p>	<p><b>Finding Reporting Year:</b> 2016-2017</p> <p><b>Goal met:</b> Yes 100% of students scored &gt;80% on this assignment. (05/03/2017)</p> <p><b>Related Documents:</b> <a href="#">Policy reading assignment.docx</a> <a href="#">Moher Maternal Health Policy Worksheet.docx</a></p>	<p><b>Use of Result:</b> Will change assignment to include student led group discussion as although typically students perform well on this assignment based off the last few evaluations, the goal is being met and a change in delivery format is due. (05/03/2017)</p>
	<p><b>Direct - Group project, collaborative learning -</b> Students in NURS 325 will participate in a collaborative learning project in which different maternal healthcare organizations (grassroots, government and professional), as well as both sides of controversial maternity care issues that is student led during class.</p> <p><b>Criteria Target:</b> 100% of students will participate by leading a section and come to class being prepared to lead a short discussion on the topic by giving a synopsis of the topic. A participation grade will be given.</p>	<p><b>Finding Reporting Year:</b> 2017-2018</p> <p><b>Goal met:</b> Yes 100% of students received full credit for their participation. (05/07/2018)</p>	<p><b>Use of Result:</b> Will require the oral synopsis to be written and turned in so that there is documentation of preparation of the collaborative session. Will otherwise continue with the learning exercise. (08/28/2018)</p>

<i>Student Learning Outcomes</i>	<i>Assessment Criteria &amp; Procedures</i>	<i>Assessment Results</i>	<i>Use of Results</i>
<p><b>Health promotion</b> - Determines health promotion and disease prevention at the individual and population health levels  <b>Goal Status:</b> Active  <b>Start Date:</b> 08/21/2017  <b>Goal Level (Bloom/Webb):</b> Level 4 (Extended Thinking) [Webb]  <b>Institutional Learning:</b> ILO4 - Professional Responsibility - Students will demonstrate the ability to apply professional ethics and intercultural competence when answering a question, solving a problem, or achieving a goal.  <b>Assessment Year:</b> AY17-18</p>	<p><b>Related Documents:</b>  <a href="#">Policy reading assignment (1).docx</a></p> <p><b>Direct - Group project, collaborative learning</b> - Determines health promotion and disease prevention at the individual and population health levels as evidenced by use of the Precede/Proceed Model to assess and, when possible, reduce the health risks of local teens and military veterans.  <b>Criteria Target:</b> In the Spring, 2018 semester, 100% of students will demonstrate competency in nursing care related to health promotion and disease prevention by designing and implementing a health education project receiving at least a B grade from the teens interacting at their Rudyard Teen Health Fair booth.  <b>Schedule/Notes:</b> NURS 432 is the capstone clinical nursing course.  <b>High Impact Program Practices 1:</b> Collaborative Assignments, Projects  <b>Related Documents:</b>  <a href="#">432 Teen Health Fair Reflections.docx</a>  <a href="#">S18 RUBRIC Teen Health Fair.docx</a>  <a href="#">Teen Health Fair Final Report.pdf</a></p>		
	<p><b>Direct - Experiential, including Service Learning Experience Evaluation</b> - NURS 325: Nursing of Childbearing Families: A Comprehensive Care Plan will be completed for both a mother and baby dyad that the student has assessed, planned care for and</p>	<p><b>Finding Reporting Year:</b> 2017-2018  <b>Goal met:</b> Yes  100% of students in F17 achieved a score of 80% or higher on their CCP. The lowest score was 85% (01/08/2018)</p> <hr/> <p><b>Finding Reporting Year:</b> 2016-2017  <b>Goal met:</b> No</p>	<p><b>Use of Result:</b> As this is the first year that the target criteria was fully met for 100% of students achieving a score of 80%, we will continue to evaluate this at this standard. (01/08/2018)</p> <hr/> <p><b>Use of Result:</b> In 2016 the</p>

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	<p>implemented. Nursing interventions for health promotion and disease prevention to be demonstrated, as well as a list of priority interventions. Communication to be demonstrated by documenting mutually set pt goals and client response. Clinical instructor input is utilized in final grading for actual implementation of the care plan. (Active)</p> <p><b>Criteria Target:</b> 100% of students will achieve 80% or higher on their Comprehensive Care Plan</p> <p><b>High Impact Program Practices 1:</b> Not applicable to this outcome</p> <p><b>Related Documents:</b>  <a href="#">CCP Template 2015 NURS 325.doc</a>  <a href="#">Student example (good) CCP.docx</a>  <a href="#">Student example (fair) CCP.doc</a></p> <p><b>Direct - Group project, collaborative learning</b> - Determines health promotion and disease prevention at the individual and population health levels as evidenced by use of the Precede/Proceed Model to assess and, when possible, reduce the health risks of local teens and</p>	<p>95% of students in S17 achieved 80% or higher on CCP (21/22)</p> <p>1 student achieved at 72%, and was given a chance to remediate and achieved an 86%. (05/08/2017)</p> <p><b>Finding Reporting Year:</b> 2017-2018</p> <p><b>Goal met:</b> Yes</p> <p>The results from the Spring, 2018 Teen Health Fair were that 100% of the NURS 432 students earned a B or better grade on their health education projects. Beyond that, the teens participating in the Health Fair cited that information they learned from their interactions at the NURS 432 students' booths was likely to make them change their</p>	<p>Achievement goal was 100% of students would achieve a score of 75% or more. This was achieved several semesters, so the goal was increased to 80%, which would demonstrate greater competence above the minimum passing score of 72% for the class. If students were to achieve between 72-79% they were given an opportunity to remediate their work to be able to achieve above an 80%. The idea was that it would allow those students to identify their issues and have an opportunity to correct them and move towards greater competence. Students had to achieve a minimum of 72% to qualify for this. The Spring 17 cohort was the first time that this was implemented and one student was able to increase their score from 75% to 86%. The remainder of the students in the Spring 17 cohort achieved a score of above 80% on their first effort. We will continue to evaluate this and work with students to improve their evaluation of patient outcomes, which was frequently where students had deficiencies. (05/09/2017)</p> <p><b>Use of Result:</b> The Rudyard School Nurse reported that teens continued to ask questions about or were seen to implement some of the health promotion strategies conveyed to them by the NURS 432 students during the Teen</p>

<i>Student Learning Outcomes</i>	<i>Assessment Criteria &amp; Procedures</i>	<i>Assessment Results</i>	<i>Use of Results</i>
	<p>military veterans. (Active)</p> <p><b>Criteria Target:</b> In the Fall, 2018 semester, 100% of students will demonstrate competency in nursing care related to health promotion and disease prevention by building a coalition with local veterans to assess and, where possible, reduce their health risks.</p> <p><b>Schedule/Notes:</b> This work began in the Spring, 2018 semester when five students from NURS 432, a faculty member, and one Junior Nursing student who is not in the course but who is a military veteran met with the leadership of the local Veterans of Foreign Wars (VFW) to explain their plans for a project where the health risks of local veterans could be assessed and, when possible, reduced. The VFW leadership agreed to work with the NURS 432 students by informing their membership and other local veteran groups regarding this project. The students performed health assessments via assessing blood pressure, pulse, respirations, temperature, and blood glucose levels, and provided health education regarding those health findings.</p> <p>In June, 2018, faculty members and two students who will be in the Fall, 2018 NURS 432 course volunteered to perform health assessments for veterans participating in the Engineers' Day Honor Ceremony for Veterans. Thirty three veteran</p>	<p>current practices to ones that are more conducive to health. A final report of the findings and recommendations was prepared by the NURS 432 students and delivered to the sponsoring agencies, Chippewa County Health Department and Rudyard Consolidated Schools. (08/29/2018)</p> <p><b>Related Documents:</b></p> <p><a href="#">Teen Health Fair Final Report.pdf</a></p> <p><a href="#">432 Teen Health Fair Reflections.docx</a></p> <p><a href="#">S18 RUBRIC Teen Health Fair.docx</a></p>	<p>Health Fair. Sunscreen use and water consumption rose significantly, and the students were more likely to use the gym for exercise in their free time. (08/29/2018)</p>

Student Learning Outcomes	Assessment Criteria & Procedures	Assessment Results	Use of Results
	<p>participants had health screenings performed and were given verbal and written health education about the outcomes.</p> <p>The work to build this local coalition and provide health risk assessments will continue in the Fall, 2018 semester and will include providing health education to veterans regarding Per- and Polyfluoroalkyl Substances (PFAS) recently identified in the ground water and soil at several current and former military bases where these veterans may have served.</p> <p><b>Direct - Case Analysis</b> - Students in NURS 326 were assigned their growth and development Omaha care plan on a pediatric patient that they encountered through a outpatient clinical pediatric site.</p> <p><b>Criteria Target:</b> All students will receive a target score of 80% and above on their Omaha Care Plan.</p> <p><b>High Impact Program Practices 1:</b> Service Learning, Community-based learning</p>	<p><b>Finding Reporting Year:</b> 2017-2018</p> <p><b>Goal met:</b> Yes</p> <p>All students successfully wrote their care plans with the lowest grade being 86% and the highest being 98%. (05/18/2018)</p>	<p><b>Use of Result:</b> We will continue to utilize this Course Assessment Method as it aligns with completing course objections for Health Promotion. No changes. (08/29/2018)</p>
	<p><b>Direct - Writing Intensive Assignment</b> - All students in NURS433 - Community Mental Health Nursing course will complete a Family Assessment and Care Plan. Students will choose a family in community of choice and assess this family according to the concepts and components of Marilyn Friedman</p>	<p><b>Finding Reporting Year:</b> 2017-2018</p> <p><b>Goal met:</b> Yes</p> <p>94% (n=17/18) students attained 90% or higher on family assessment assignment. 6% (n=1/18) students attained 75% on family assessment assignment. (08/30/2018)</p>	<p><b>Use of Result:</b> Plan is to incorporate more education on OMAHA Care Plan. Most points lost for assignment centered around nursing interventions not being written for nurse to accomplish but as client focus, in a manner that could be measured,</p>



Student Learning Outcomes	Assessment Criteria & Procedures	Assessment Results	Use of Results
	<p>family nursing theory while focusing on mental health. A written formal APA paper will be submitted. The paper should be at least 15 pages in length, including Genogram, Eco map, relevant OMAHA nursing focus area, goals, and proposed nursing interventions (do not need to carry them out). The intent of the assignment is for students to use their communication skills to gain assessment data from the family. Students need to ensure that the assessment includes data that provides a clear picture of the status of the family. For example, communication skills need to be expanded beyond "family communicates well". There should also be consistency between the assessment narrative, OMAHA care plan(s) which includes family teaching, Genogram and Eco map. A rubric is used to assess.</p> <p><b>Criteria Target:</b> 100% of students will obtain at least a score of 18/20 points or 90% on comprehensive family assessment assignment.</p> <p><b>High Impact Program Practices 1:</b> Collaborative Assignments, Projects</p> <p><b>High Impact Program Practices 2:</b> Service Learning, Community-based learning</p> <p><b>Related Documents:</b>  <a href="#">Friedman Family Assessment Short Form.pdf</a>  <a href="#">Omaha System Worksheet.docx</a>  <a href="#">family assessment consent.doc</a>  <a href="#">NURS 433 Family Assessment Rubric.</a></p>	<p><b>Finding Reporting Year:</b> 2017-2018</p> <p><b>Goal met:</b> No</p> <p>76% (n=16/21) students attained 90% or higher on family assessment assignment. 24% (n=5/21) students attained 80% or below on family assessment assignment. (05/17/2018)</p> <hr/> <p><b>Finding Reporting Year:</b> 2016-2017</p> <p><b>Goal met:</b> No</p> <p>88% (n=21/24) students attained 90% or higher on family assessment assignment. 12% (n=3) students attained 85% or lower on family assessment assignment. (05/24/2017)</p>	<p>nor had appropriate or missing time frames. Additionally, the other area where students lost points were for grammar and APA formatting. Plan will be to offer resources for APA formatting and suggestions to utilize grammar/spell checker within Word program. Will continue with this outcome measurement. (12/20/2017)</p> <hr/> <p><b>Use of Result:</b> Plan is to incorporate more education on OMAHA Care Plan. Most points lost for assignment centered around nursing interventions not being written for nurse to accomplish but as client focus, in a manner that could be measured, nor had appropriate or missing time frames. One students earned a 75% due to missing many areas of paper content but did good work on OMAHA Care Plan. Additionally, the other area where students lost points were for grammar and APA formatting. Plan will be to offer resources for APA formatting and suggestions to utilize grammar/spell checker within Word program. Will continue with this outcome measurement. (05/17/2018)</p> <hr/> <p><b>Use of Result:</b> Plan is to incorporate more education about need for pertinent theory identification and inclusion of family dynamics. Most points lost</p>

Student Learning Outcomes	Assessment Criteria & Procedures	Assessment Results	Use of Results
	<a href="#">doc</a>		for assignment centered around the exclusion of theory into written family assessment. Additionally, the other area where students lost points were for grammar and APA formatting. Plan will be to offer resources for APA formatting and suggestions to utilize grammar/spell checker within Word program. Will continue with this outcome measurement. (05/24/2017)
		<p><b>Finding Reporting Year:</b> 2016-2017</p> <p><b>Goal met:</b> No</p> <p>84% (n=21/25) students attained 90% or higher on family assessment assignment. 160% (n=4/25) students attained 80% or lower on family assessment assignment. (12/19/2016)</p>	<p><b>Use of Result:</b> Plan is to incorporate more education about need for pertinent theory identification and inclusion of family dynamics. Most points lost for assignment centered around the exclusion of theory into written family assessment. Additionally, the other area where students lost points were for grammar and APA formatting. Plan will be to offer resources for APA formatting and suggestions to utilize grammar/spell checker within Word program. Will continue with this outcome measurement. (12/19/2016)</p>
		<p><b>Finding Reporting Year:</b> 2015-2016</p> <p><b>Goal met:</b> No</p> <p>80% (n=16/20) students attained 95% or higher on family assessment assignment. 20% (n=43/20) students attained 80% on family assessment assignment. (05/02/2016)</p>	<p><b>Use of Result:</b> Plan is to incorporate more education about need for pertinent theory identification and inclusion of family dynamics. Most points lost for assignment centered around the exclusion of theory into written family assessment. Additionally, the other area where</p>

<i>Student Learning Outcomes</i>	<i>Assessment Criteria &amp; Procedures</i>	<i>Assessment Results</i>	<i>Use of Results</i>
		<p><b>Finding Reporting Year:</b> 2015-2016  <b>Goal met:</b> No            45% (n=9/20) students attained 95% or higher on family assessment assignment. 15% (n=3/20) students attained 90% and 40% (n=8/20) attained 85% or lower on family assessment assignment. (12/28/2015)</p>	<p>students lost points were for grammar and APA formatting. Plan will be to offer resources for APA formatting and suggestions to utilize grammar/spell checker within Word program. Will continue with this outcome measurement. (05/02/2016)</p> <hr/> <p><b>Use of Result:</b> Most of points lost were due to students omitting required theory information and inappropriate APA formatting. Plan is to cover theory inclusion and APA formatting in greater detail during class session on completing Family Assessment. (08/29/2018)</p>
<p><b>Professionalism</b> - Emulates professionalism and inherent values of altruism, autonomy, human dignity, integrity, and social justice  <b>Goal Status:</b> Active  <b>Goal Category:</b> Student Learning</p>	<p><b>Other Findings</b></p>	<p><b>Finding Reporting Year:</b> 2013-2014  <b>Goal met:</b> Yes            Students-Students demonstrate professionalism through professional presentations in the classroom and clinical settings, adhere to the SON Handbook and code of conduct, and professional appearance. See employee survey results 2014-2015. (08/27/2015)</p> <p><b>Related Documents:</b>  <a href="#">Employer Evaluation AY15.pdf</a></p> <hr/> <p><b>Finding Reporting Year:</b> 2013-2014  <b>Goal met:</b> Yes            Alumni-We have broadly assessed that alumni are demonstrating ongoing professionalism through publication, honor society membership, leadership and management positions within their communities, graduate program completion, military service including one Naval nurse assignment to the White House, US Public Health Service faculty and professional presentation at International, National, State and Local conferences.</p>	

Student Learning Outcomes	Assessment Criteria & Procedures	Assessment Results	Use of Results
	<b>Other Findings</b>	(08/27/2015) <b>Related Documents:</b> <a href="#">S15 Conference Agenda Final.doc</a> <a href="#">LSNHS Alumni Night.pdf</a> <a href="#">Annual Spring Conference Agenda April 2014.docx.pdf</a> <a href="#">Professional Scholarship award.doc</a>	
	<b>Direct - Laboratory, Clinical, Skill/Competency Assessments -</b> Each student models professionalism in the clinical setting as evidenced by progressively integrating critical thinking and decision making skills in order to practice nursing safely and with minimal direction for more than one patient and demonstrating competent, caring behaviors by respecting the legal, ethical and moral rights and values of others. <b>Criteria Target:</b> By the end of the semester, performance is either satisfactory or unsatisfactory. <b>High Impact Program Practices 1:</b> Not applicable to this outcome <b>High Impact Program Practices 2:</b> Not applicable to this outcome <b>Related Documents:</b> <a href="#">327 Clinical Evaluation Tool.doc</a> <a href="#">Clinical evaluation tool definitions.docx</a>	<b>Finding Reporting Year:</b> 2017-2018 <b>Goal met:</b> Yes N=22. 100% of students in NURS 327 performed at the satisfactory level by the end of the Spring 18 semester clinical rotation. (05/03/2018)	<b>Use of Result:</b> Continue to focus on modeling nursing professionalism using the criterion established in clinical evaluation tool. (08/27/2018)
	<b>Direct - Laboratory, Clinical, Skill/Competency Assessments -</b> 100% of students will achieve a satisfactory on their final clinical evaluation to adhere to the current ANA Code of Ethics for Nurses <b>Criteria Target:</b> Graduates will emulate professionalism and inherent values of altruism,	<b>Finding Reporting Year:</b> 2017-2018 <b>Goal met:</b> Yes N=21 100% of Adult Med/Surg II students achieved satisfactory on their final clinical evaluation demonstrating professional nonnegotiable ethical standards. (05/29/2018)	<b>Use of Result:</b> Continue to utilize the clinical evaluation tool as a marker for qualitative feedback for professional ethics, obligations and duties for the academic year 2018-2019. (05/29/2018)

<i>Student Learning Outcomes</i>	<i>Assessment Criteria &amp; Procedures</i>	<i>Assessment Results</i>	<i>Use of Results</i>
<p><b>Nursing Practices</b> - Synthesizes nursing practice with patients, individuals, families, groups, communities, and populations across the lifespan and across the continuum of health care environments and the variations of care, the increased complexity, and the increased use of health care resources inherent in caring for patients</p> <p><b>Goal Status:</b> Active</p> <p><b>Goal Category:</b> Student Learning</p>	<p>autonomy, human dignity, integrity and social justice.</p> <p><b>High Impact Program Practices 1:</b> Not applicable to this outcome</p> <p><b>High Impact Program Practices 2:</b> Not applicable to this outcome</p> <p><b>Related Documents:</b>  <a href="#">Clinical Evaluation Template 2013 revised 3_20_13CCNE.docx</a></p> <p><b>Direct - Field Placement/Internship Evaluation</b> - Synthesizes nursing practice with patients, individuals, families, groups, communities, and populations across the lifespan and across the continuum of health care environments and the variations of care, the increased complexity, and the increased use of health care resources inherent in caring for patients as evidenced by completion of NURS 432 Clinical Evaluation Tool</p> <p><b>Criteria Target:</b> 100% of students completing the nursing program will have demonstrated competency in nursing care as measured by the NURS 432 Clinical Evaluation Tool (Fall, 2017) or by providing in-home health assessment and nursing care for a patient, and developing, implementing, and evaluating (when possible) a comprehensive plan of care for that patient (Spring, 2018).</p> <p><b>Schedule/Notes:</b> NURS 432 is the capstone clinical course for the BSN program.</p> <p>NURS 432 students are precepted and evaluated in the home by experienced home health, hospice,</p>	<p><b>Finding Reporting Year:</b> 2017-2018</p> <p><b>Goal met:</b> Yes</p> <p>In the Spring, 2018 semester, 100% of the students prepared and implemented an appropriate plan of care. Their clinical care of patients was sometimes limited to a single visit so evaluation and sometimes even implementation was impaired by circumstances outside of the student's control, but students were able to identify essential patient problems and develop strategies for addressing them. (08/29/2018)</p> <p><b>Related Documents:</b>  <a href="#">Abby L. and Nina B's Omahas.pdf</a></p>	<p><b>Use of Result:</b> The plans of care developed by the students were used by the student and the other clinical staff providing health care services to the patient to improve each patient's overall health status or provide them with a dignified, caring, supportive end of life experience. The outcomes may eventually be used by the students in their care of other patients but the primary outcome was to improve the care of a specific patient. (08/29/2018)</p>

### Student Learning Outcomes

### Assessment Criteria & Procedures

### Assessment Results

### Use of Results

and maternal and infant health nurses regarding their care of patients in their homes. Each student prepares a plan of care which identifies the patient's physical, social, psychological, and spiritual health deficits and the strategies for improving the patient's health status or offering end of life care when health improvement is not possible. This approach will be continued in the Fall, 2018 semester.

**High Impact Program Practices 1:**

Service Learning, Community-based learning

**High Impact Program Practices 2:**

Collaborative Assignments, Projects

**Related Documents:**

[BSN NURSING PROGRAM](#)

[OUTCOMES-2018.docx](#)

[Comprehensive Care Plan Guidelines.docx](#)

[NURS432.Clinical Eval Forms.docx](#)

[Example of Nursing of Populations](#)

[Complete Clinical Evaluation.pdf](#)

**Direct - Laboratory, Clinical, Skill/Competency Assessments -**

Applies nursing practice with patients, individuals, families, groups, communities, and populations across the lifespan and across the continuum of health care environments and the variations of care, the increased complexity, and the increased use of health care resources inherent in caring for patients as evidenced by completion of NURS 325 Clinical Evaluation Tool.

**Criteria Target:** 100% of students

**Finding Reporting Year:** 2017-2018

**Goal met:** No

95% of students were able to demonstrate competency in nursing care as measured by the NURS 325 Clinical Eval Tool. One student out of 23 students had several areas of deficiencies that resulted in unsatisfactory clinical performance. (05/07/2018)

**Finding Reporting Year:** 2017-2018

**Goal met:** Yes

100% of students achieved a satisfactory on the clinical evaluation tool. (12/15/2017)

**Finding Reporting Year:** 2016-2017

**Goal met:** Yes

**Use of Result:** Continue to use the clinical evaluation tool to demonstrate student application of nursing practice. (08/28/2018)

**Use of Result:** Will continue to utilize this clinical evaluation tool

Student Learning Outcomes	Assessment Criteria & Procedures	Assessment Results	Use of Results
	<p>completing the nursing program will have demonstrated competency in nursing care as measured by the NURS 325 Clinical Evaluation Tool</p> <p><b>Schedule/Notes:</b> NURS 325 has 36 hours of direct patient care clinical experience.</p> <p><b>High Impact Program Practices 1:</b> Service Learning, Community-based learning</p> <p><b>Related Documents:</b>  <a href="#">Clinical Evaluation Template 2016 revised NUR 325 326.docx</a></p>	<p>100% of students were able to demonstrate competency in nursing care as measured by the NURS 325 Clinical Eval Tool. All students had several areas of deficiencies that resulted in unsatisfactory clinical performance.</p> <p>(05/05/2017)</p>	<p>to evaluate student performance in applying nursing practice.</p> <p>(05/05/2017)</p>
<p><b>Program Review</b> - The Program provides evidence in support of Program Review in accordance with the Higher Learning Commission Criteria for Accreditation (4.A. The institution demonstrates responsibility for the quality of its educational programs. 1. The institution maintains a practice of regular program reviews.)</p> <p><b>Goal Status:</b> Active</p> <p><b>Goal Category:</b> Periodic Program Review</p>	<p><b>Indirect - Report/Audit - Internal</b> - The Program conducts evidence-supported regular program review. The Program addresses the key components of the , incorporates feedback from assessment activities, and documents the impact of assessment findings and subsequent actions on student learning.</p> <p><b>Criteria Target:</b> The Program Review will address the following criteria:</p> <ol style="list-style-type: none"> <li>Contribution to LSSU Mission/Vision</li> <li>Metrics of Productivity</li> <li>Internal and External Program Demand</li> <li>Program Quality</li> <li>Program Assessment</li> <li>Opportunity Analysis</li> </ol> <p><b>Schedule/Notes:</b> A re-assessment of the overall BSN Program outcomes is completed yearly by the School of Nursing, with the listed criteria addressed during SON committee meetings.</p> <p><b>High Impact Program Practices 1:</b></p>	<p><b>Finding Reporting Year:</b> 2017-2018</p> <p><b>Goal met:</b> Yes</p> <p>A Response report was written by the School of Nursing to our Accreditor (CCNE: Commission on Collegiate Nursing Education) regarding two Outcomes requiring clarification. They included: IV-E Program outcomes demonstrate program effectiveness, and IV-F: Faculty outcomes, individually and in aggregate, demonstrate program effectiveness. We have not yet received notification of their approval of these program assessment reports</p> <p>(08/28/2018)</p> <p><b>Related Documents:</b>  <a href="#">CCNE Response Report 3-14-2018.pdf</a></p> <hr/> <p><b>Finding Reporting Year:</b> 2017-2018</p> <p><b>Goal met:</b> Yes</p> <p>In Spring of 2018 the School of Nursing submitted a Continuous Improvement Progress Report (CIPR) to our Program Accreditor (Commission on Collegiate Nursing Education - CCNE) that updated them on our continuous assessment in meeting our BSN Program outcomes.</p> <p>(08/28/2018)</p> <p><b>Related Documents:</b>  <a href="#">CIPR CCNE 6-11-2018.pdf</a></p> <hr/> <p><b>Finding Reporting Year:</b> 2016-2017</p>	<p><b>Use of Result:</b> As we are still waiting for approval or comment on these documents, we will continue to evaluate program effectiveness related to program outcomes and faculty outcomes.</p> <p>(05/01/2018)</p> <hr/> <p><b>Use of Result:</b> We have not yet received feedback or contact regarding this report, so will continue our assessment process.</p> <p>(08/28/2018)</p> <hr/> <p><b>Use of Result:</b> Feedback was</p>

Student Learning Outcomes	Assessment Criteria & Procedures	Assessment Results	Use of Results
	<p>Collaborative Assignments, Projects  <b>High Impact Program Practices 2:</b>            Capstone Course(s), Projects  <b>Related Documents:</b>  <a href="#">Plan for Program Review V4a.pdf</a>  <a href="#">BSN NURSING PROGRAM OUTCOMES-2018.docx</a></p>	<p><b>Goal met:</b> Yes            The School of Nursing submitted a Response Report to our Accreditor (Commission on Collegiate Nursing Education - CCNE) regarding Key Elements IV-E Program outcomes demonstrate program effectiveness, IV-F Faculty outcomes, individually and in aggregate, demonstrate program effectiveness, and IV-H Data analysis is used to foster ongoing program improvement. (11/29/2016)</p>	<p>received about one year later that only one Key Element (IV-H) was satisfactory to them. They requested more information regarding the remaining 2 elements. (09/04/2017)</p>
		<p><b>Finding Reporting Year:</b> 2014-2015  <b>Goal met:</b> Yes            Recommendations included to develop and document evidence of the school's successes in 'closing the loop', showing how what you found relative to student learning was used to make changes and how those changes impacted student learning/achievement. (10/09/2014)  <b>Related Documents:</b>  <a href="#">9. Nursing BSN Letter.pdf</a>  <a href="#">9. Nursing BSN Program Review 2014 - reviewed.pdf</a></p>	<p><b>Use of Result:</b> The next full program review for the BSN degree is scheduled for May 2019. (10/13/2014)</p>
		<p><b>Finding Reporting Year:</b> 2013-2014  <b>Goal met:</b> Yes            The School was a leader in innovation using Tracdat to collect and document their program review. (07/08/2014)  <b>Related Documents:</b>  <a href="#">BSN-Nursing-ProgramReview-2014.pdf</a>  <a href="#">BS-NursingProgram-Unit Assessment Report - 2014.pdf</a>  <a href="#">NURS ALL Course Assessment Report July2014.pdf</a></p>	
	<p><b>Indirect - Report/Audit - Internal - CULTURE:</b> School-level Goal is in alignment with the Commission on Collegiate Nursing Education (CCNE) Key Element III-F: The curriculum and teaching-learning practices consider the needs and expectations of the identified community of interest. We cultivate continuous self-improvement through service, assessment, and accountability. This is accomplished by inclusion and</p>	<p><b>Finding Reporting Year:</b> 2017-2018  <b>Goal met:</b> Yes            100% of SON Committees had a student representative (10/15/2018)</p>	<p><b>Use of Result:</b> SON formal discussion took place Spring 2018 regarding development of a standardized formal application process for student representation on committees. This will be further developed during AY 2018-2019 (10/15/2018)</p>
		<p><b>Finding Reporting Year:</b> 2016-2017  <b>Goal met:</b> Yes</p>	<p><b>Use of Result:</b> Faculty continue to encourage students to participate</p>



Student Learning Outcomes	Assessment Criteria & Procedures	Assessment Results	Use of Results
	<p>engagement of students, faculty and SON staff in committee discussions and decision-making.</p> <p><b>Criteria Target:</b> One student representative from the generic BSN program is elected to each SON committee during each academic year and LSSU SON faculty participates in regular SON committee meetings.</p> <p><b>Schedule/Notes:</b> Students representatives are nominated by Lake State Student Nursing Association and/or SON faculty. The SON committees are comprised of the Student Affairs Committee (SAC), Curriculum, Outcomes and Learning Resources committees.</p> <p><b>Indirect - Report/Audit - Internal - ACADEMICS:</b> School-level Goal: is in alignment with the Commission on Collegiate Nursing Education (CCNE) Key Element III-A: The curriculum is developed, implemented, and revised to reflect clear statements of expected student outcomes that are congruent with the program's mission and goals, and with the roles for which the program is preparing its graduates. We will cultivate continuous academic and co-curricular improvement to provide relevant programs and support services.</p> <p><b>Criteria Target:</b> The School of Nursing Curriculum/Outcomes committee will evaluate Predictor test, NCLEX-RN pass rates, and item performance of BSN graduates each</p>	<p>100% of SON committees had a student representative for the academic year (10/15/2016)</p> <p><b>Finding Reporting Year:</b> 2018-2019 <b>Goal met:</b> Yes SON faculty continue to meet to assess NCLEX-RN and predictor test data. HLTH 310 PathoPharmacology course was created Summer 2018 and approved by the University Curriculum Committee in October 2018. This course will be offered during the Spring 2019 semester (10/15/2018)</p> <p><b>Finding Reporting Year:</b> 2017-2018 <b>Goal met:</b> Yes Assessment of Pharmacology scores on NCLEX-RN: students scored in 33rd percentile compared to all test-takers nationally (10/15/2017)</p>	<p>on SON Committee (10/15/2017)</p> <p><b>Use of Result:</b> Continue to track and trend Pharmacology item scores on Predictor and NCLEX-RN exams beginning Fall 2019 (10/15/2018)</p> <p><b>Use of Result:</b> The threading of Pharmacology concepts was evaluated within all courses in the BSN Curriculum by the SON faculty. An identified area of opportunity to support student learning in this area was to integrate an elective Pathopharmacology course for students who had already taken the Pathophysiology and Pharmacology courses. This course will be created in the Summer of 2018 (10/15/2018)</p>

Student Learning Outcomes	Assessment Criteria & Procedures	Assessment Results	Use of Results
	<p>semester, to engage in academic and co-curricular improvement</p> <p><b>Schedule/Notes:</b> Student outcomes are linked to both course and program objective in alignment with program assessment measures that are tracked and trended.</p> <p><b>Indirect - Report/Audit - Internal - FINANCE:</b> School-level Goal: is in alignment with the Commission on Collegiate Nursing Education (CCNE) Key Element II-A: Fiscal and physical resources are sufficient to enable the program to fulfill its mission, goals, and expected outcomes. Adequacy of resources is reviewed periodically and resources are modified as needed. We will cultivate data-informed budgetary processes that are open, transparent, and in alignment with institutional priorities</p> <p><b>Criteria Target:</b> SON Learning Resources Committee to engage in continuous data collection related to sufficient fiscal and physical resources through student and faculty surveys</p> <p><b>Related Documents:</b></p>	<p><b>Finding Reporting Year:</b> 2016-2017</p> <p><b>Goal met:</b> Yes</p> <p>Faculty assessed Pharmacology scores on NCLEX-RN results for graduates and found that students scored in the 48 percentile compared to all test takers nationally. (04/21/2017)</p> <p><b>Related Documents:</b> <a href="#">Curriculum Threading for Test Plan.docx</a></p> <p><b>Finding Reporting Year:</b> 2017-2018</p> <p><b>Goal met:</b> Yes</p> <p>The survey (n=32) completed February 2018 demonstrated that 78.13% of respondents chose either agree or strongly agree to the question "There is enough open lab hours for me to practice", 15.63% chose neutral or no opinion. For the question "The nursing lab has enough equipment for me to learn the skills required within the nursing program", 71.88% chose agree or strongly agree, 15.63% were neutral. (04/27/2018)</p> <p><b>Finding Reporting Year:</b> 2016-2017</p> <p><b>Goal met:</b> No</p> <p>The Learning Resources survey was not completed this Academic Year (04/28/2017)</p>	<p><b>Use of Result:</b> Through continuous assessment of curricular improvement, this result of 48th percentile began a formal discussion among the School of Nursing and the Curriculum committee to assess threading of Pharmacological concepts through the BSN curriculum. See supportive document titled "Curriculum Threading for Test Plan" page 23 for discussion and plan.</p> <p>- begin discussion on the creation of a PathoPharmacology course to support the student application of these concepts (10/15/2018)</p> <p><b>Use of Result:</b> These results will be shared with faculty by the Learning Resources Committee in Fall 2018 for discussion. (04/27/2018)</p> <p><b>Use of Result:</b> Implement Learning Resources Survey during next Academic Year (04/28/2017)</p>

Student Learning Outcomes	Assessment Criteria & Procedures	Assessment Results	Use of Results
	<p><a href="#">Lab Resources Survey.pdf</a></p> <p><b>Indirect - Report/Audit - Internal - ENROLLMENT:</b> The SONHS will increase the number of qualified pre-nursing students admitted to the BSN program, after completion of pre-nursing courses, from 24 to 28 students during both the fall and spring admissions cycles beginning in the 2015-2016 AY</p> <p><b>Criteria Target:</b> 100% of 28 available openings will be filled by qualified pre-nursing students each semester (or total 56 per AY)</p>	<p><b>Finding Reporting Year:</b> 2017-2018</p> <p><b>Goal met:</b> No</p> <p>Total # of students for 2018: 42</p> <p>Spring 2018: 15</p> <p>Fall 2018: 27 (10/15/2018)</p> <hr/> <p><b>Finding Reporting Year:</b> 2016-2017</p> <p><b>Goal met:</b> No</p> <p>Total # of students for 2017: 50</p> <p>Spring 2017: 22</p> <p>Fall 2017: 28 (12/15/2017)</p> <hr/> <p><b>Finding Reporting Year:</b> 2015-2016</p> <p><b>Goal met:</b> No</p> <p>Total students in 2016 accepted: 46</p> <p>Spring 2016: 19</p> <p>Fall 2016: 27 (12/16/2016)</p>	<p><b>Use of Result:</b> Focus on recruitment for Spring semesters. Academic Assistant to work with Admissions to assist transfer students to evaluate transfer credits and review previous coursework. Update website to market 'no waiting list' for Spring semesters (10/15/2018)</p> <hr/> <p><b>Use of Result:</b> Facilitate ease of application to program by having application open on website full 12 months. Increase outreach to transfer students (10/15/2018)</p> <hr/> <p><b>Use of Result:</b> Continue to target transfer students, increase marketing (12/16/2016)</p>
<p><b>2.1 Program Enrollment - Strategy</b></p> <p>2.1 The Program establishes realistic goals for program enrollment that are optimistic, realistic, achievable.</p> <p><b>Goal Status:</b> Active</p> <p><b>Goal Category:</b> Enrollment</p>	<p><b>Regular, recurring -</b> The program sets goals for program enrollment which are time-based, progressive, achievable and quantitative.</p> <p><b>Criteria Target:</b> Please see Enrollment section under Program Review</p>		

## Appendix Cover Sheet

Use a copy of this cover sheet for each document submitted. Evidence supporting the questions and narratives does *not* need to be electronically added to this Program Review form. One option is to use this cover sheet to add content to directly this Word document. A second option is to submit separate documents along with the form, also using this cover sheet for each document provided.

Send email with supporting documentation to: [TRACDAT@lsu.edu](mailto:TRACDAT@lsu.edu), with a cc to your dean, or submit as a hardcopy to your dean.

<b>School:</b>	<b>Nursing</b>
<b>Document Title (if attached) or Filename (if emailed):</b>	<b>Appendix XI: Faculty Qualifications Nursing F17</b>
<b>This documentation is relevant to Question number:</b>	<b>11</b>
<b>Briefly summarize the content of the file and its value as evidence supporting program review:</b>	<b>Faculty Qualifications form</b>

	A	B	C	D	E	F
1	Disciplinary Field/Subfield	Courses within this Field/subfield			Minimum Academic Credential	Policy on Tested Experience See SONHS policy on tested experience. Additional preferred credentials:
2	Nursing	NURS 211		1	Minimum MSN, RN License; Minimum 2 years experience	Nursing theory background
3	Nursing	NURS 212		1	Minimum MSN, RN License, 2 years tested experience in content area of course;	Nurse Practitioner
4	Nursing	Labs	A, B, C		Minimum of BSN with 2 years tested experience in content area of course, RN License; or related health degree and/or certification for non-nursing allied	MS or higher degree in topical area
5	Nursing	NURS 213		1	Minimum MSN; MI Nursing License; 2 years tested experience in content area of course;	
6	Nursing		A, B, C		BSN or higher with topical area; RN licensure in state or province clinical held, 2 years tested experience in content area of course	
7	Nursing	Labs	X, Y, Z		BSN or higher with 2 years tested experience in content area of course; MI Nursing License	
8	Nursing	NURS 290		1	Minimum MSN with 2 years tested experience in content area of course	
9					Registration or licensure when required for discipline	
10	Nursing	NURS 325		1	Minimum MSN with 2 years tested experience in content area of course; RN License;	NRP certified, MSN or Nurse Practitioner in Women's Health
11	Nursing		A, B, C		BSN or higher with 2 years tested experience in content area of course; RN licensure in state or province clinical held	
12	Nursing	Labs	X, Y, Z		BSN or higher with 2 years tested experience in content area of course; MI Nursing License	
13	Nursing	NURS 326		1	Minimum MSN with 2 years tested experience in content area of course; RN License	PALS certified; Nurse Practitioner with experience in Pediatric Nursing
14	Nursing		A, B, C		BSN 2 years tested experience in content area of course; RN licensure in state or province clinical held	
15	Nursing	Labs	X, Y, Z		BSN or higher with 2 years tested experience in content area of course; MI Nursing License	
16	Nursing	NURS 327		1	Minimum MSN with 2 years tested experience in content area of course; MI Nursing License	
17	Nursing		A, B, C		BSN or higher with 2 years tested experience in content area of course; RN licensure in state or province clinical held	
18	Nursing	Labs	X, Y, Z		BSN or higher with 2 years tested experience in content area of course; MI Nursing License	
19	Nursing	NURS 352		1	Minimum MSN 2 years experience in Geriatric nursing or Master degree with 18 credits in related field	
20	Nursing	NURS 360		1	Minimum MSN; with 2 years experience, MI Nursing License	Nursing theory background
21	Nursing	NURS 363		1	Minimum MSN, RN License, and 2 years tested experience in content area of course	
22	Nursing	Labs	A, B, C		BSN or higher with 3 years tested experience in content area of course; RN licensure in state or province clinical held	

23	Nursing	NURS 431		1	Minimum MSN with 2 years experience in Critical Care and Medical-Surg Nursing; MI Nursing License	ACLS certified
24	Nursing		A, B, C		BSN or higher with 3 years tested experience in content area of course; RN licensure in state or province clinical held	
25	Nursing	Labs	X, Y, Z		BSN or higher with 2 years tested experience in content area of course: MI Nursing License	
26	Nursing	NURS 432		1	Minimum MSN; MI Nursing License; 2 years experience in community and/or public health nursing	
27	Nursing		A, B, C		MSN or higher with 3 years tested experience in content area of course; RN licensure in state or province clinical held	
28	Nursing	Labs	X, Y, Z		MSN or higher with 3 years tested experience in content area of course; RN License	
29	Nursing	NURS 433		1	Minimum MSN; MI Nursing License; 2 years experience in mental health nursing	
30	Nursing		A, B, C		BSN or higher with 2 years tested experience in content area of course; RN licensure in state or province clinical held	
31	Nursing	Labs	X, Y, Z		BSN or higher with 2 years tested experience in content area of course; MI Nursing License	
32	Nursing	NURS 434		1	Minimum MSN with ; RN License	Doctorate with nursing research (dissertation), nursing research (thesis)
33	Nursing	NURS 435		1	Minimum MSN; MI Nursing License; 3 years experience in Management/Leadership	
34	Nursing	NURS 436		1	Minimum MSN; MI Nursing License; 3 years experience in nursing	
35	Nursing	NURS 437		1	Minimum MSN; 3 years experience in nursing; 3 years experience in Management/Leadership	
36	Disciplinary	Course			<b>Minimum Qualifications</b>	See policy on tested experience. Additional credentials:
37	Field/Subfield					
38	Practical Nursing	PNUR 102		1	Minimum MSN; 2 years experience in setting passing medications; MI Nursing License; demonstrated experience as LPN or understanding of LPN role	
39	Practical Nursing	Labs	A, B, C		****BSN or higher with 3 years experience in topical area; RN licensure in state or province clinical held;	
40					demonstrated experience as LPN or understanding of LPN role	
41	Practical Nursing	PNUR 104		1	Minimum MSN; MI Nursing License; demonstrated experience as LPN or understanding of LPN role	
42	Practical Nursing	PNUR 113		1	Minimum MSN with 2 years experience in geriatric or acute care nursing; MI Nursing License; demonstrated experience as LPN or understanding of LPN role	
43	Practical Nursing		A, B, C		****BSN or higher with 3 years experience in topical area; RN licensure in state or province clinical held; demonstrated experience as LPN or understanding of	
44	Practical Nursing	Labs	X, Y, Z		****BSN or higher with 3 years experience in topical area; MI Nursing License; demonstrated experience as LPN or understanding of LPN role	
45	Practical Nursing	PNUR 201		1	Minimum MSN with 2 years experience in Medical/Surgical acute care nursing; demonstrated experience as LPN or understanding of LPN role	

46	Practical Nursing		A, B, C	****BSN or higher with 3 years experience in topical area; RN licensure in state or province clinical held	
47	Practical Nursing	Labs	X, Y, Z	****BSN or higher with 3 years experience in topical area; MI Nursing License; demonstrated experience as LPN or understanding of LPN role	
48	Practical Nursing	PNUR 202		1 Minimum MSN; MI Nursing License; demonstrated experience as LPN or understanding of LPN role	
49	Practical Nursing	PNUR 205		1 Minimum MSN with 2 years experience in family nursing care (OB and Pediatrics); MI Nursing License; demonstrated experience as LPN or	
50	Practical Nursing		A, B, C	****BSN or higher with 3 years experience in topical area; RN licensure in state or province clinical held; demonstrated experience as LPN or understanding of	
51	Practical Nursing	Labs	X, Y, Z	****BSN or higher with 3 years experience in topical area; MI Nursing License;	
52				demonstrated experience as LPN or understanding of LPN role	
53	Practical Nursing	PNUR 206		Minimum MSN; MI Nursing License; with 2 years experience in Medical Surgical ambulatory care nursing; demonstrated experience as LPN or understanding of	
54	Practical Nursing		A, B, C	****BSN or higher with 3 years experience in topical area; RN licensure in state or province clinical held;	
55				demonstrated experience as LPN or understanding of LPN role	
56	Practical Nursing	Labs	X, Y, Z	****BSN or higher with 3 years experience in topical area; MI Nursing License;	
57				demonstrated experience as LPN or understanding of LPN role	
58	Disciplinary Field/Subfield	Course		Minimum Qualifications	See SONHS policy on tested experience. Additional credentials:
60	Health	HLTH 101		1 Minimum health related Bachelors degree (course only required for Associate & Certificate programs)	
62	Health	HLTH 104		1 Minimum MS; MI Nursing or Registered Dietitian (or eligible for)	
63					
64	Health	HLTH 208		1 Minimum MS; MI Nursing or Registered Dietitian (or eligible for)	
65	Health	HLTH 209		1 Minimum MSN; MI Nursing or Pharmacist Licensure***	
66	Health	HLTH 210		1 Minimum MS	
67	Health	HLTH 232		1 Minimum MSN	
68				MI Nursing License for RN or graduate level coursework in Health related field	
69	Health	HLTH 235		1 Minimum MSN or MS with graduate work in health informatics; MI Nursing License	2 years experience working in the healthcare field with understanding of nursing informatics and its application
70	Health	HLTH/ NURS 328		1 Minimum MSN, MI Nursing License	Graduate level coursework in cultural topics, or certification in Transcultural Nursing
71					
72	Health	HLTH 329		1 Minimum MSN	Women's health or Family Nurse Practitioner
73				MI Nursing License	
74	Health	HLTH 330		1 Minimum MS; MI Nursing or Registered Dietitian (or eligible for)	
75					

74	Health	HLTH 330	1	Minimum MS; MI Nursing or Registered Dietitian (or eligible for)	
75					
76	Health	HLTH 352	1	Minimum MS with 2 years experience working with the geriatric population in healthcare	
77	Health	HLTH 452	1	Minimum MS; MI Nursing or Registered Dietitian (or eligible for)	
78					
79	Health	HLTH 490	1	Minimum MSN with 2 years tested experience in content area of course; Registration or licensure when required for discipline	
80	Disciplinary	Course		Minimum	See SONHS policy on tested experience.
81	Field/Subfield				
82	Paramedic	EMED 189	1	Bachelor Degree or higher in related field with 3 years experience in EMS and topical area; MI EMS I/C; 3 years experience in BLS instructor certification	
83	Paramedic	Labs	A, B,	Bachelor Degree or higher in related field with 3 years experience in topical area; BLS instructor certification.	
84	Paramedic	EMED 190	1	Bachelor Degree or higher in related field with 3 years experience in EMS and topical area; MI EMS IC, BLS instructor certification.	
85	Paramedic	Labs	A, B,	Bachelor Degree or higher in related field with 3 years experience in EMS and topical area; BLS instructor certification.	
86	Paramedic	EMED 191	1	Bachelor Degree or higher in related field with 3 years experience in EMS topical area; BLS instructor certification.	
87	Paramedic	Labs	A, B,	Bachelor Degree or higher in related field with 3 years experience in EMS and topical area; BLS instructor certification., MI EMS I/C	
88	Paramedic	EMED 211	1	Bachelor Degree or higher in related field with 3 years experience in EMS and topical area; MI EMS I/C, ACLS, PALS, Trauma course	3 years experience in delivery of pre-hospital medicine; AHA instructor level for
89	Paramedic	EMED 212	1	Bachelor Degree or higher in related field with 3 years experience in EMS and topical area; MI EMS I/C, ACLS, PALS, Trauma course	3 years experience in delivery of pre-hospital medicine; AHA instructor level for
90	Paramedic	EMED 251	1	Bachelor Degree in related field with 3 years experience in pre-hospital medicine; ACLS, PALS, Trauma course, MI EMS I/C	3 years experience in delivery of pre-hospital medicine; AHA instructor level for
91	Paramedic	EMED 252	1	Bachelor Degree or higher in related field with 3 years experience in topical area; ACLS, PALS, Trauma course, MI EMS I/C	3 years experience in delivery of pre-hospital medicine; AHA instructor level for
92	Paramedic	EMED 261	1	Bachelor Degree or higher in related field with 3 years experience in topical area; ACLS, PALS, Trauma course, MI EMS I/C	3 years experience in delivery of pre-hospital medicine; AHA instructor level for
93	Paramedic	EMED 262	1	Bachelor Degree or higher in related field with 3 years experience in topical area; ACLS, PALS, Trauma course, MI EMS I/C	3 years experience in delivery of pre-hospital medicine; AHA instructor level for
94	Paramedic	EMED 271	1	Bachelor Degree or higher in related field with 3 years experience in topical area; ACLS, PALS, MI EMS I/C.	AHA instructor levels for ACLS and PALS
95	Paramedic	EMED 284	1	Bachelor Degree or higher in related field with 3 years experience in topical area; ACLS, PALS, Trauma course, MI EMS I/C	AHA instructor level for ACLS and PALS desired.
96	Paramedic	Labs	A, B,	Bachelor Degree or higher in related field with 3 years experience in topical area; ACLS, PALS, Trauma course, MI EMS I/C	AHA instructor level for ACLS and PALS
97	Paramedic	EMED 285	1	Bachelor Degree in related field; MI EMED License; 3 years experience in pre-hospital medicine. ACLS, PALS, Trauma course, MI EMS I/C	AHA instructor level for ACLS and PALS



98	Paramedic	Labs	A, B,	Bachelor Degree or higher in related field with 3 years experience in topical area; ACLS, PALS, Trauma course, MI EMS I/C.	AHA instructor level for ACLS and PALS
99	Paramedic	EMED 286	1	Bachelor Degree in related field with 3 years experience in topical area; ACLS, PALS, trauma course, MI EMS I/C.	AHA instructor level for ACLS and PALS; NIMS 100, 200, 700, 800
100	Paramedic	Labs	A, B,	Bachelor Degree or higher in related field with 3 years experience in topical area; ACLS, PALS, trauma course, MI EMS I/C.	AHA instructor level for ACLS and PALS
101	Paramedic	EMED 297 Clinicals	1	Bachelor Degree or higher in related field with 3 years experience in topical area; ACLS, PALS, trauma course, MI EMS I/C.	AHA instructor level for ACLS and PALS
103	Paramedic	EMED 298 Clinicals	1	Bachelor Degree or higher in related field with 3 years experience in topical area; ACLS, PALS, trauma course, MI EMS I/C.	AHA instructor level for ACLS and PALS
104	Paramedic	EMED 299 Internship	1	Bachelor Degree or higher in related field with 3 years experience in topical area; ACLS, PALS, trauma course, MI EMS I/C.	AHA instructor level for ACLS and PALS
105	Paramedic	EMED 301	1	Bachelor Degree or higher in related field with 3 years experience in topical area; ACLS, PALS, trauma course, MI EMS I/C.	AHA instructor level for ACLS and PALS
106	Paramedic	EMED 490	1	Bachelor Degree or higher in related field with 3 years experience in topical area;	
107	Paramedic				

109 **School of Nursing and Health Sciences policy on Tested Experience**

110

111 **Definition:** "Tested experience" is a factor beyond credentials that the School of Nursing and Health Sciences  
 112 uses to determine faculty and adjunct qualifications which implies that the individual has sufficient knowledge and  
 113 expertise to determine what students should learn and have learned.

114 The following are the minimum thresholds to be used to determine tested experience and include skill sets  
 115 where appropriate, specialty certification, and amount of real-world experience to be considered adequate to  
 116 meet the minimum qualification standard in the School of Nursing and Health Sciences.

117 **A. Nursing Faculty** - MSN required, doctorate desired, + 2 years' experience in the  
 118 nursing specialty area, and/or specialty certification when available. Previous teaching  
 119 experience preferred.

120 1.) Master's in a non-nursing subject with Bachelor's in nursing + 2 years' experience in the  
 121 nursing specialty area and/or specialty certification when available.

122 **B. Adjunct Nursing Faculty** - BSN required, MSN desired, + 5 years' experience in the  
 123 occupation/specialty area assigned to teach. Previous teaching experience preferred.

124 1.) Master's in the related subject + 2 years' experience in the nursing specialty area, or  
 125 2.) Bachelor's in the related subject + 3 years' experience in the nursing specialty area, or  
 126 3.) Bachelor's in unrelated subject with AD in nursing + 5 years' experience in the  
 127 nursing specialty area

128 **C. Nursing faculty qualifications as defined in the State of Michigan's Public Health Code, section**  
 129 R 338.10305 Program requirements; generally. Rule 305. (Excerpt from subrule 32)

130 (2) The director of the program of nursing education and the faculty who provide the nursing  
 131 sequence shall comply with the following requirements as applicable:

132 (b) For registered nurse programs, the following requirements shall be complied with by September 1, 1989.

133 (i) The director of the nursing program shall hold a minimum of a master's degree with a major in nursing.

134 (ii) Every member of the nursing faculty providing didactic instruction shall hold a minimum of a  
 135 master's degree, the majority of which shall hold a master's degree with a major in nursing.

136 If the master's degree is not in nursing, the faculty member shall hold a minimum of a  
 137 baccalaureate degree in nursing science.

138 (iii) Every member of the nursing faculty who provides instruction in the clinical laboratory or cooperating  
 139 agencies shall hold a minimum of a baccalaureate degree in nursing science.

140 (c) For practical nurse programs, the following requirements shall be complied with by September 1, 1989:

141 (i) The program director shall hold a minimum of a baccalaureate degree in nursing science.

142 (ii) Every member of the nursing faculty shall hold a minimum of a baccalaureate degree in nursing science.

143 (3) Any exception made to the provisions of subrule (2) of this rule for full-time or part-time nursing faculty  
 144 shall be based on the faculty member's progress toward meeting the requirements of these rules  
 145 during each year for which the exception is requested. A maximum of 5 yearly exceptions  
 146 shall be granted to any 1 full-time or part-time faculty member.

147 (source: [http://w3.lara.state.mi.us/orr/Files/AdminCode/1152\\_2013-003LR\\_AdminCode.pdf](http://w3.lara.state.mi.us/orr/Files/AdminCode/1152_2013-003LR_AdminCode.pdf))

148 **D. Faculty teaching in Occupational Specialization** – Requires a degree in subject matter directly related to  
 149 the teaching assignment or degrees in unrelated area plus substantial technical education and/or work  
 150 experience in subject area directly related to teaching assignment. Previous teaching experience preferred.  
 151 Recommend the following standards:

- 152 1.) Master's in the related subject + 2 years' experience in the occupation, or
- 153 2.) Bachelor's in the related subject + 3 years' experience in the occupation, or
- 154 3.) Bachelor's in unrelated subject + 5 years' experience in the occupation, or
- 155 4.) Associate's in the related subject matter + state or national certification in the occupational  
 156 area + 5 years' experience in the occupation area, or
- 157 5.) No degree, but with state or national certification in the occupational area + 7 years'  
 158 experience in the occupation/specialty area.

159 - Teaching is not considered to be experience in the occupation.

160 - Three years of occupational experience = 1 year of college coursework, except time in an  
 161 apprenticeship program where the ratio is 2 years of experience = 1 year of college  
 162 coursework.

163 **E. Test Experience using CEUs to meet qualifications, subfield or related field: Nursing**

164 1.) Continuing education requirements for renewal of licensure is defined in the State of  
 165 Michigan's Public Health Code. Specifically, pursuant to R338.10601 – "ALL RELICENSURE  
 166 APPLICANTS MUST HAVE EARNED 25 HOURS APPROVED CONTINUING EDUCATION  
 167 CONTACT HOURS WITH AT LEAST ONE (1) CONTACT HOUR IN PAIN & PAIN SYMPTOM  
 168 MANAGEMENT DURING THE 2-YEAR PERIOD PRIOR TO THE APPLICATION FOR RELICENSURE."  
 169 Further, as delineated in the Public Health Code section R 338.10602, acceptable continuing education  
 170 are clearly stated.

171 a.) R 338.10602 Rule 2(c) – Academic Credit - Five (5) continuing education contact hours for each  
 172 semester credit earned for academic courses related to nursing practice offered in an accredited education  
 173 program approved by the board. A licensee may earn all 25 continuing education contact hours  
 174 through this process. For example, a 4-credit class would be worth 20 CE credits.  
 175 (source: LARA\_Nursing\_CE\_Brochure\_5-11\_376431\_(1).pdf. May also be found in  
 176 [http://w3.lara.state.mi.us/orr/Files/AdminCode/1152\\_2013-003LR\\_AdminCode.pdf](http://w3.lara.state.mi.us/orr/Files/AdminCode/1152_2013-003LR_AdminCode.pdf))

177 2.) CEUs can be used to demonstrate tested experience in a specialty area. According to LARA  
 178 ([http://www.michigan.gov/lara/0,4601,7-154-72600\\_72603\\_27529\\_27542-76170--,00.html](http://www.michigan.gov/lara/0,4601,7-154-72600_72603_27529_27542-76170--,00.html)), one contact hour  
 179 consists of 50-60 minutes. A continued education credit and a contact hour are the same. A CONTINUING  
 180 EDUCATION UNIT (CEU) consists of ten (10) contact hours/credits. When a faculty member earns  
 181 contract hours/credits or CEUs in a nursing specialty area to meet tested experience in a subfield  
 182 or related field for nursing and/or health courses, the School of Nursing and Health Sciences will use Carnegie's  
 183 guidelines for conversion of continued education credits to college credit as guide.

184 **F. How Tested Experience can be evaluated:** The following list is not all inclusive, but are examples of  
 185 potential sources used to determine tested experience:

- 186 1) Resume/CV;
- 187 2) Earned credentials;
- 188 3) Graduate level coursework/transcripts;
- 189 4) CEU certificates;
- 190 5) Conference and professional development;
- 191 6) Years of experience in topical/specialty area;
- 192 7) Full-Time faculty or Dean recommendation

194 **School of Nursing and Health Sciences Key:**

195 CEU = Continuing Educational Units

196 MI EMS I/C = Michigan Emergency Medical Services Instructor Coordinator

197 BLS = Basic Life Support certification

198 AHA = American Heart Association

199 ACLS = Advanced Cardiac Life Support

## Appendix Cover Sheet

Use a copy of this cover sheet for each document submitted. Evidence supporting the questions and narratives does *not* need to be electronically added to this Program Review form. One option is to use this cover sheet to add content to directly this Word document. A second option is to submit separate documents along with the form, also using this cover sheet for each document provided.

Send email with supporting documentation to: [TRACDAT@lsu.edu](mailto:TRACDAT@lsu.edu), with a cc to your dean, or submit as a hardcopy to your dean.

<b>School:</b>	<b>Nursing</b>
<b>Document Title (if attached) or Filename (if emailed):</b>	<b>Appendix XII: 4 Year Audit as of Fall 2018 Pre-licensure</b>
<b>This documentation is relevant to Question number:</b>	<b>15</b>
<b>Briefly summarize the content of the file and its value as evidence supporting program review:</b>	<b>BSN Degree Audit</b>

LAKE SUPERIOR STATE UNIVERSITY

School of Nursing

Program Start: \_\_\_\_\_

FALL 2018 or later

SCHOOL DEGREE AUDIT

BACHELOR OF SCIENCE IN NURSING - PRE-LICENSURE TRACK

Program

End: \_\_\_\_\_

Name \_\_\_\_\_ ID#

\_\_\_\_\_ Advisor \_\_\_\_\_

Intended month of graduation \_\_\_\_\_ Dept. Chair Approval \_\_\_\_\_

Date \_\_\_\_\_

Nursing Dean Note: All information below should be from the student's most recent transcript and/or transfer evaluation sheet. Attach substitution/waiver forms as necessary.

Copies: Original to Registrar, Dept. Chair, Student, Advisor.

**GENERAL EDUCATION REQUIREMENTS**

**SCHOOL REQUIREMENTS**

Communication- 9 Credits

ENGL 110-3 \_\_\_\_\_

ENGL 111-3 \_\_\_\_\_

COMM \_\_\_\_-3 \_\_\_\_\_

Mathematics - 3-4 Credits

\*met by MATH207

Humanities - 7-8 Credits

HUMN \_\_\_\_-4 \_\_\_\_\_

HUMN \_\_\_\_-3-4 \_\_\_\_\_

Social Science - 7-8 Credits

\_\_\_\_\_ -4 \_\_\_\_\_

\_\_\_\_\_ -3/4 \_\_\_\_\_

\*met by PSCY101.SOCY101

Natural Science - 8 Credits

\_\_\_\_\_ -4 \_\_\_\_\_

\_\_\_\_\_ -4 \_\_\_\_\_

\*met by BIOL122, CHEM 110

Diversity - 3-4 Credits

# met by HLTH328

\_\_\_\_\_ At least 125 total credits

\_\_\_\_\_ Residency (30 credits at LSSU/50% of 300/400 major courses)

\_\_\_\_\_ 2.0 Overall GPA

\_\_\_\_\_ 2.0 GPA in School Requirements

USEM 101	_____	ENGL111-3	_____
ENGL110-3	_____	PSYC101-3	_____
COMM____-3	_____	HLTH232-3	_____
SOCY101-3	_____	BIOL122-4	_____
BIOL121 - 4	_____	HLTH235-2	_____
BIOL223 - 3	_____	CHEM110-4	_____
CHEM 108-3	_____	MATH207-3	_____
HLTH208-3	_____	PSYC155-3	_____
HLTH209-3	_____		



## Appendix Cover Sheet

Use a copy of this cover sheet for each document submitted. Evidence supporting the questions and narratives does *not* need to be electronically added to this Program Review form. One option is to use this cover sheet to add content to directly this Word document. A second option is to submit separate documents along with the form, also using this cover sheet for each document provided.

Send email with supporting documentation to: [TRACDAT@lssu.edu](mailto:TRACDAT@lssu.edu), with a cc to your dean, or submit as a hardcopy to your dean.

<b>School:</b>	<b>Nursing</b>
<b>Document Title (if attached) or Filename (if emailed):</b>	<b>Appendix XIII: Policy on Tested Experience</b>
<b>This documentation is relevant to Question number:</b>	<b>11</b>
<b>Briefly summarize the content of the file and its value as evidence supporting program review:</b>	<b>The School of Nursing developed a Policy on Tested Experience to further classify Faculty Qualifications</b>



## School of Nursing and Health Sciences policy on Tested Experience

**Definition:** “Tested experience” is a factor beyond credentials that the School of Nursing and Health Sciences uses to determine faculty and adjunct qualifications which implies that the individual has sufficient knowledge and expertise to determine what students should learn and have learned.

The following are the minimum thresholds to be used to determine tested experience and include skill sets where appropriate, specialty certification, and amount of real-world experience to be considered adequate to meet the minimum qualification standard in the School of Nursing and Health Sciences.

**A. Nursing Faculty** - MSN required, doctorate desired, + 2 years’ experience in the nursing specialty area, and/or specialty certification when available. Previous teaching experience preferred.

1) Master’s in a non-nursing subject with Bachelor’s in nursing + 2 years’ experience in the nursing specialty area and/or specialty certification when available.

**B. Adjunct Nursing Faculty** - BSN required, MSN desired, + 5 years’ experience in the occupation/specialty area assigned to teach. Previous teaching experience preferred.

- 1) Master’s in the related subject + 2 years’ experience in the nursing specialty area, or
- 2) Bachelor’s in the related subject + 3 years’ experience in the nursing specialty area, or
- 3) Bachelor’s in unrelated subject with AD in nursing + 5 years’ experience in the nursing specialty area

**C. Nursing faculty qualifications as defined in the State of Michigan's Public Health Code, section R 338.10305**

Program requirements; generally. Rule 305. (Excerpt from subrule 32)

2) The director of the program of nursing education and the faculty who provide the nursing sequence shall comply with the following requirements as applicable:

b) For registered nurse programs, the following requirements shall be complied with by September 1, 1989:

- i) The director of the nursing program shall hold a minimum of a master's degree with a major in nursing.
- ii) Every member of the nursing faculty providing didactic instruction shall hold a minimum of a master's degree, the majority of which shall hold a master's degree with a major in nursing. If the master's degree is not in nursing, the faculty member shall hold a minimum of a baccalaureate degree in nursing science.
- iii) Every member of the nursing faculty who provides instruction in the clinical laboratory or cooperating agencies shall hold a minimum of a baccalaureate degree in nursing science.

c) For practical nurse programs, the following requirements shall be complied with by September 1, 1989:

- i) The program director shall hold a minimum of a baccalaureate degree in nursing science.
- ii) Every member of the nursing faculty shall hold a minimum of a baccalaureate degree in nursing science.

3) Any exception made to the provisions of subrule (2) of this rule for full-time or part-time nursing faculty shall be based on the faculty member's progress toward meeting the requirements of these rules during each year for which the exception is requested. A maximum of 5 yearly exceptions shall be granted to any 1 full-time or part-time faculty member.

(source: [http://w3.lara.state.mi.us/orr/Files/AdminCode/1152\\_2013-003LR\\_AdminCode.pdf](http://w3.lara.state.mi.us/orr/Files/AdminCode/1152_2013-003LR_AdminCode.pdf))

**D. Faculty teaching in Occupational Specialization** – Requires a degree in subject matter directly related to the teaching assignment or degrees in unrelated area plus substantial technical education and/or work experience in subject area directly related to teaching assignment. Previous teaching experience preferred. Recommend the following standards:

- 1) Master's in the related subject + 2 years' experience in the occupation, or
- 2) Bachelor's in the related subject + 3 years' experience in the occupation, or
- 3) Bachelor's in unrelated subject + 5 years' experience in the occupation, or
- 4) Associate's in the related subject matter + state or national certification in the occupational area + 5 years' experience in the occupation area, or
- 5) No degree, but with state or national certification in the occupational area + 7 years' experience in the occupation/specialty area.
  - Teaching is not considered to be experience in the occupation.
  - Three years of occupational experience = 1 year of college coursework, except time in an apprenticeship program where the ratio is 2 years of experience = 1 year of college coursework.

#### **E. Test Experience using CEUs to meet qualifications, subfield or related field: Nursing**

1) Continuing education requirements for renewal of licensure is defined in the State of Michigan's Public Health Code. Specifically, pursuant to R338.10601 – “ALL RELICENSURE APPLICANTS MUST HAVE EARNED 25 HOURS APPROVED CONTINUING EDUCATION CONTACT HOURS WITH AT LEAST ONE (1) CONTACT HOUR IN PAIN & PAIN SYMPTOM MANAGEMENT DURING THE 2-YEAR PERIOD PRIOR TO THE APPLICATION FOR RELICENSURE.” Further, as delineated in the Public Health Code section R 338.10602, acceptable continuing education are clearly stated.

a) R 338.10602 Rule 2(c) – Academic Credit - Five (5) continuing education contact hours for each semester credit earned for academic courses related to nursing practice offered in an accredited education program approved by the board. A licensee may earn all 25 continuing education contact hours through this process. For example, a 4-credit class would be worth 20 CE credits.

(source: LARA\_Nursing\_CE\_Brochure\_5-11\_376431\_(1).pdf. May also be found in [http://w3.lara.state.mi.us/orr/Files/AdminCode/1152\\_2013-003LR\\_AdminCode.pdf](http://w3.lara.state.mi.us/orr/Files/AdminCode/1152_2013-003LR_AdminCode.pdf))

2) CEUs can be used to demonstrate tested experience in a specialty area. According to LARA ([http://www.michigan.gov/lara/0,4601,7-154-72600\\_72603\\_27529\\_27542-76170--,00.html](http://www.michigan.gov/lara/0,4601,7-154-72600_72603_27529_27542-76170--,00.html)), one contact hour consists of 50-60 minutes. A continued education credit and a contact hour are the same. A CONTINUING EDUCATION UNIT (CEU) consists of ten (10) contact hours/credits. When a faculty member earns contact hours/credits or CEUs in a nursing specialty area to meet tested experience in a subfield or related field for nursing and/or health courses, the School of Nursing and Health Sciences will use Carnegie's guidelines for conversion of continued education credits to college credit as guide.

**F. How Tested Experience can be evaluated-** The following list is not all inclusive, but are examples of potential sources used to determine tested experience:

- Resume/CV;
- Earned credentials;
- Graduate level coursework/transcripts;
- CEU certificates;
- Conference and professional development;
- Years of experience in topical/specialty area;
- Full-Time faculty or Dean recommendation