

## Bachelor of Science in Nursing

**Contact Person:** Sue Odom

**Program Accreditation:**

Commission on Collegiate Nursing Education

**Program Mission:**

Consistent with the mission statement of Clayton State University, the School of Nursing is committed to providing comprehensive nursing education to residents from a diverse range of ethnic, socioeconomic, experiential, and geographical backgrounds. The following essential considerations inform and guide the programs offered by the School of Nursing:

- increasingly complex global context of contemporary life;
- promoting community-based, experiential learning;
- continuous education and growth;
- promoting health and human development of the global community in transition;
- providing high quality educational services for the development of competent, caring, and committed professional nurses;
- developing programs which incorporates innovative health care and educational technologies.
- maintaining standards of professional nursing practice that recognize and value the social, economic, ethnic and cultural diversity of individuals as central to the promotion of health and human development.
- promoting collaborative, interdisciplinary practices models.

It is the faculty's mission to use those resources that will promote lifelong learning and enhance the acquisition of skill in modern technology. Mastery of critical thinking skills, comprehensive care, theory-based practice, research, and communication is successfully accomplished by integrating theory, clinical practice, and advanced technologies. The curriculum facilitates the transition of students into professional nursing roles in a multifaceted and multicultural health care environment.

### Learning Outcomes

- Outcome 1.** Demonstrate human caring as a key philosophical basis for the practice of nursing.
- Outcome 2.** Utilize effective communication skills to promote therapeutic nurse-client interactions and good collegial relationships.
- Outcome 3.** Engage in critical thinking by using creative problem solving and making appropriate inferences, based on evidence derived from clinical practice.
- Outcome 4.** Demonstrate client care that reflects the consideration of socioeconomic, political, legal, ethical and human diversity variables in the changing health care environment.
- Outcome 5.** Demonstrate competence in utilizing information technology resources to advance professional practice.
- Outcome 6.** Collaborate with health care providers from other disciplines to improve client outcomes.

- Outcome 7.** Utilize nursing therapeutics based on a synthesis of critical thinking strategies and a theoretical knowledge base in nursing to provide competent professional care and maximize healthy outcomes.
- Outcome 8.** Demonstrate commitment to ongoing professional development as a life-long learner.
- Outcome 9.** Apply selected theoretical frameworks to nursing practice in diverse settings

### SYSTEMATIC EVALUATION PLAN

| Key Elements  | Outcome Measures   | Methods of Evaluation  | Responsible Person   | Time Frame                            |              | Findings / Recommendations  |
|---|--|--|----------------------|---------------------------------------|--------------|---|
|   |  |  |                      | Collection                            | Analysis     |   |
| <b>Standard I. Program Quality: Mission and Governance</b>  |  |  |                      |                                       |              |   |
| The mission, goals, and expected outcomes of the program 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 – all in the pursuit of the continuing advancement and improvement of the program. 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 |  |  |                      |                                       |              |   |
| <b>I. Program Quality: Mission and Governance</b>   |  |  |                      |                                       |              |   |
| I-A. The mission, goals, and expected outcomes of the program are written, congruent with those of the parent institution, and consistent with professional nursing standards and guidelines for the preparation of nursing professionals.  | The school mission, philosophy, and goals/objectives are consistent with those of CSU. | Match concepts of philosophy with values and concepts held in current CSU mission. Review Faculty & Curriculum committee minutes | Curriculum committee | Every 4 years<br>2000<br>2004<br>2008 | 2000<br>2004 | 2000<br>2004<br><br>Our mission/philosophy are consistent with and reflect expectations of the community. |
| I-B. The mission, goals, and expected outcomes of the program are   | The school mission and/or philosophy are consistent with                               | Match concepts with mission and/or philosophy, AACN  | Curriculum committee | Every 4 years<br>2000                 | 2000<br>2004 | 2000<br>2004  |

## SYSTEMATIC EVALUATION PLAN

| Key Elements  | Outcome Measures   | Methods of Evaluation   | Responsible Person | Time Frame   |          | Findings / Recommendations  |
|---|--|---|--------------------|--------------|----------|---|
|   |  |   |                    | Collection   | Analysis |   |
| reviewed periodically and revised, as appropriate, to reflect professional standards and guidelines.                            | AACN essentials of baccalaureate and Master's nursing education and Georgia Board of Nursing Standards<br>The mission, goals, and expected outcomes of the program are reviewed and updated. | essentials of baccalaureate and Master's nursing education and Georgia Board of Nursing Standards<br>Provide copies of nursing standards and guidelines.<br>Provide copies of reports submitted to and official correspondence received from accrediting and regulatory agencies since the last accreditation review.<br>Provide information on scope, breath, and timing of evaluation of mission, goals, and expected outcomes and documentation of review process and changes. |                    | 2004<br>2008 |          | Our mission/philosophy are consistent with and reflect expectations of the community. |
| I-C. The mission, goals, and expected outcomes of the program are reviewed periodically and revised, as appropriate, to reflect | The mission, goals, and expected outcomes reflect demographics and institutional characteristics.  | Compare demographics of community of interest with mission, goals, and expected outcomes  |                    |              |          |   |

## SYSTEMATIC EVALUATION PLAN

| Key Elements  | Outcome Measures  | Methods of Evaluation   | Responsible Person                         | Time Frame                      |          | Findings / Recommendations  |
|---|---|---|--|---------------------------------|----------|---|
|   |   |   |  | Collection                      | Analysis |   |
| the needs and expectations of the community of interest.  | The community of interest is described in the mission, goals and expected outcomes.   | Examine catalogs, Web sites, and other recruitment materials to see if they reflect the community of interest. Solicitation of third party letters in response to CCNE accreditation visit.   |  |                                 |          |   |
| I-D. Roles of faculty & students in governance of program are clearly defined & enable meaningful participation             | At least 25% of fulltime faculty members & 50% of administrators of department participate in University elected or appointed committees. At least one student representative from each cohort in program participates in committees of department. | <ul style="list-style-type: none"> <li>- Review committee list for all CSU faculty and student appointments.</li> <li>- Review faculty bylaws, rules, and regulations.</li> <li>- Assess faculty &amp; student committee minutes for faculty action committee functions as established by bylaws</li> </ul> | Evaluation committee                       | Annually<br><u>2007</u><br>2008 | Annually | 2003 Revised February bylaws to reflect changes (see revised document)  |
| I-E. Documents and publications are accurate. Any references in promotional materials to the program's offerings, outcomes, | Policies of nursing program are consistent with policies of governing organization or differences are justified by nursing  | - Review annual summary reports of committees for recommendations or changes regarding policies   | Evaluation committee<br><br>Associate Dean | Annually<br><u>2007</u><br>2008 | Annually | 2000<br>2001<br>2002<br>2003<br>2004<br>Publications accurately reflect |

## SYSTEMATIC EVALUATION PLAN

| Key Elements  | Outcome Measures  | Methods of Evaluation  | Responsible Person | Time Frame |          | Findings / Recommendations   |
|---|---|--|--------------------|------------|----------|--|
|   |   |  |                    | Collection | Analysis |  |
| accreditation/approval status, academic calendar, admission policies, grading policies, degree completion requirements, tuition, and fees are accurate.   | program purposes.   | <ul style="list-style-type: none"> <li>- Review of catalog, student handbook, and CSU SHS web site to ensure policies are consistent</li> <li>- Provide copies of catalogs, student handbooks, faculty handbooks, and personnel manuals.</li> </ul>  |                    |            |          | mission, philosophy, & objectives & changes are made in a timely fashion |
| I-F. Policies of the parent institution and the nursing program are congruent with and support the mission, goals, and expected outcomes of the program; these policies are fair, equitable, published, and are reviewed and revised as necessary to reflect ongoing improvement. These policies include, but are not limited to, those relative to student recruitment, admission, | Policies support and are congruent with the program's mission, goals, and expected outcomes; enable the recruitment, admission, and retention of qualified students; support student performance, achievement, and progress | Examine policies for congruency with CSU. Provide copies of current affiliation agreements. Copies of major institutional and nursing unit reports and records for the past three years, such as minutes of faculty meetings, strategic planning documents and annual reports. Copies of policies and examples of application. |                    |            |          |  |

## SYSTEMATIC EVALUATION PLAN

| Key Elements  | Outcome Measures  | Methods of Evaluation  | Responsible Person   | Time Frame                        |          | Findings / Recommendations |
|---|---|--|--|-----------------------------------|----------|----------------------------|
|   |   |  |  | Collection                        | Analysis |                            |
| and retention.  |   | Provide copies of program advertising directed at students.  |  |                                   |          |                            |
| <p><b>Standard II. Program Quality: Institutional Commitment and Resources</b></p> <p><b>Standard II. Program Quality: Institutional Commitment and Resources</b></p> <p>The parent institution demonstrates ongoing commitment and support. The institution makes available resources to enable the program to achieve its mission, goals, and expected outcomes. The faculty, as a resource of the program, enables the achievement of the mission, goals, and expected outcomes of the program</p> |   |  |  |                                   |          |                            |
| <p><b>Program Quality: Institutional Commitment and Resources</b></p> <p>II-A. II-A. 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 outcomes of the program.</p>   | There is an environment that allows the diversity of talent among the nursing faculty to demonstrate recognition of the functions of scholarship through reaching, application, integration, and discovery of knowledge (Boyer Model of Scholarship). | Review annual lists of faculty achievements to determine that their scholarship of teaching, application, integration, and discovery of knowledge is appropriate and in keeping with the university's mission. | Associate Dean of Nursing. Summary report provided to Evaluation Committee | Annually<br><u>2007</u><br>2008   | Annually |                            |
| II-B. Fiscal and physical resources are sufficient to enable the program to fulfill its mission, goals, and   | The budget of the nursing unit is comparable to the budget of other units with similar numbers  | Review department budget, school budget, budget planning process, strategic plan and planning process.   | Associate Dean of Nursing and Dean School of Health                        | How often?<br><u>2007</u><br>2008 | 2004     |                            |

### SYSTEMATIC EVALUATION PLAN

| Key Elements  | Outcome Measures   | Methods of Evaluation  | Responsible Person   | Time Frame   |                            | Findings / Recommendations |
|---|--|--|--|--|----------------------------|----------------------------|
|   |  |  |  | Collection   | Analysis                   |                            |
| <p>expected outcomes. These resources are reviewed, revised, and improved as needed</p> | <p>of students and requirements for field supervision. The nursing unit receives an equitable distribution of capital and equipment funds. Program changes, modifications, and enhancements are approved/funded equitably across the university.</p> | <p>Review committee meeting minutes and visual inspection of physical facilities</p> | <p>Sciences</p> <p>Summary report submitted to Evaluation Committee for review</p>                     | <p>How often?<br/>2002</p>   | <p>2004</p>                |                            |
|   | <p>The nursing unit has appropriate classrooms, laboratory and office facilities to support the nursing program. Office space allocation is comparable to that of other units at the university.</p>   | <p>Review committee meeting minutes, web sites, purchase requisitions</p>            | <p>Associate Dean of Nursing, Faculty, Resource and Technology Committee, and Evaluation Committee</p> |  | <p>How often?<br/>2000</p> |                            |
|   | <p>Learning resources are appropriate to meet the established goals of the nursing unit and the learning outcomes of the</p>   |  |  | <p>Associate Dean of Nursing with Resource and Technology Committee and Evaluation Committee</p> |                            |                            |

## SYSTEMATIC EVALUATION PLAN

| Key Elements   | Outcome Measures  | Methods of Evaluation   | Responsible Person   | Time Frame  |                         | Findings / Recommendations |
|--|---|---|--|---|-------------------------|----------------------------|
|  |   |   |  | Collection  | Analysis                |                            |
|  | curriculum. Learning resources include print materials, audio, video, lab supplies, and web-based materials.  |   |  |   |                         |                            |
| II-C. Academic support services are sufficient to ensure quality and are evaluated on a regular basis to meet program and student needs.   |   |   |  |   |                         |                            |
| II-D. The chief nurse administrator is academically and experientially qualified and is vested with the authority required to accomplish the mission, goals, and expected outcomes. The chief nurse administrator provides effective leadership to the nursing unit in achieving its mission, goals, and expected outcomes | <p>The Associate Dean for Nursing will be a registered nurse in the State of Georgia with an earned doctorate in nursing or a related field and experience in nursing education and administration.</p> <p>The Associate Dean of Nursing will be responsible for the day-to-day</p> | <p>Review curriculum vitae of the Associate Dean for Nursing and academic transcripts as necessary. Review job descriptions for Associate Dean. Review aggregate evaluation data to determine fit between job requirements and job performance.</p> <p>Review of financial reports. Examine existing institutional and department</p> | <p>Evaluation conducted by Associate Dean of Nursing and Dean of School of Health Sciences. Summary to be submitted to Evaluation Committee</p> <p>Evaluation conducted by Associate</p> | <p>How often?<br/>2000</p> <p>How often?<br/>2000</p> | <p>2003</p> <p>2003</p> |                            |



### SYSTEMATIC EVALUATION PLAN

| Key Elements   | Outcome Measures  | Methods of Evaluation   | Responsible Person  | Time Frame                      |          | Findings / Recommendations |
|--|---|---|---|---------------------------------|----------|----------------------------|
|  |   |   |   | Collection                      | Analysis |                            |
|  | operations of the nursing program and will function collaboratively with the Dean of the School of Health Sciences and other university administrators within the university. | policies regarding financial responsibility of administrator.<br>Interview faculty and appropriate administrators | Dean of Nursing, Dean of School of Health Sciences, and nursing faculty.<br>Summary to be submitted to Evaluation Committee |                                 |          |                            |
| II-E. Faculty members are academically and experientially qualified and sufficient in number to accomplish the mission, goals, and expected outcomes of the program. | All faculty members in nursing hold a minimum of the master's degree in nursing.  | Faculty qualification records are updated annually as a part of the GA Board of Nursing report.                   | Associate Dean of Nursing<br>Nursing Faculty  | Annually<br><u>2007</u><br>2008 | Annually |                            |
|  | Workload is equitable across the faculty and is consistent with the needs of the department and the profession.   | Schedule of classes, faculty self-evaluations, peer evaluations.  | Associate Dean of Nursing   | Annually<br><u>2007</u><br>2008 | Annually |                            |
|  | The minimum numbers of faculty per student headcount as established in the rules of the Georgia Board of Nursing are  | Annual reports to GA Board of Nursing and AACN document numbers and ratio of faculty to students.                 | Associate Dean of Nursing   | Annually<br><u>2007</u><br>2008 | Annually |                            |

### SYSTEMATIC EVALUATION PLAN

| Key Elements   | Outcome Measures   | Methods of Evaluation  | Responsible Person                         | Time Frame                      |          | Findings / Recommendations |
|--|--|--|--|---------------------------------|----------|----------------------------|
|  |  |  |  | Collection                      | Analysis |                            |
|  | met including at least 1 full-time faculty member for every 20 students enrolled in nursing courses and 1 faculty member for every 10 students engaged in clinical practice (GA Board of Nursing).   |  |  |                                 |          |                            |
| II-F. The faculty roles in teaching, scholarship, service, and practice are identified clearly and are congruent with the mission, goals, and expected outcomes of the program | Teaching assignments reflect clinical expertise of faculty as well as related field expertise. Use of faculty members outside the educationally identified areas of expertise is justified based on specialized preparation or continuing education. | The GA Board of Nursing report reflects the educational and experiential qualifications of faculty as they relate to teaching assignments. | Associate Dean of Nursing, Nursing Faculty | Annually<br><u>2007</u><br>2008 | Annually |                            |
|  | Nurse practitioner faculty is provided with opportunities to meet practice requirements to maintain certification.   | Reports of faculty practice and continuing education are reviewed along with self-evaluation   | Associate Dean of Nursing, Nursing Faculty | Annually<br><u>2007</u><br>2008 | Annually |                            |
|  |  | Schedules for required   |  | Annually<br><u>2007</u>         | Annually |                            |

### SYSTEMATIC EVALUATION PLAN

| Key Elements | Outcome Measures   | Methods of Evaluation   | Responsible Person   | Time Frame                      |          | Findings / Recommendations |
|--------------|--|---|--|---------------------------------|----------|----------------------------|
|              |  |   |  | Collection                      | Analysis |                            |
|              | At least 25% of all courses are coordinated by faculty members who hold doctoral degrees (SACS requirement).                         | nursing courses are reviewed for achievement of 25% of courses being coordinated by faculty members who hold a doctoral degree.                           | Associate Dean of Nursing  | 2008                            |          |                            |
|              | Clinical preceptors are oriented to the role. They meet the requirements for preceptors established by the Georgia Board of Nursing. | Preceptor packet, notebook, preceptor evaluations by students, preceptor evaluations of the experience kept in central location.                          | Clinical faculty will provide aggregate data to the Evaluation Committee | Annually<br><u>2007</u><br>2008 | Annually |                            |
|              | Clinical preceptor selection process is consistent with rules and regulations of the Georgia Board of Nursing.                       | Letters of agreement are sent to preceptors who practice in agencies with current clinical contracts. Evaluations of preceptors and agency are conducted. | Associate Dean of Nursing  | Annually<br><u>2007</u><br>2008 | Annually |                            |
|              | The clinical preceptors are sufficient and appropriate to meet   | Associate Dean of Nursing and Clinical Faculty review preceptor needs, and current preceptor information.   | Associate Dean of Nursing, Clinical Nursing Faculty                      |                                 |          |                            |

## SYSTEMATIC EVALUATION PLAN

| Key Elements  | Outcome Measures   | Methods of Evaluation   | Responsible Person  | Time Frame  |   | Findings / Recommendations |
|---|--|---|---|---|---|----------------------------|
|   |  |   |   | Collection  | Analysis                                      |                            |
|   | the objectives for courses and program outcomes.   |   |   |   |   |                            |
| 2001III-F Documents and publications accurately reflect resources available to the program.   | All information about the program intended to inform the general public, prospective students, employers, and other interested parties are current, accurate, clear, and consistent reflecting the resources available to the program. | Review of catalog, applications, web site and any additional material including handbook and fact sheets.     | Associate Dean of Nursing, Nursing faculty and Evaluation Committee | Every 2 years<br>2000<br><br>2002<br>2004<br>2006<br>2008 | Every 2 years<br>2000<br>2002<br>2004<br>2006 | 2004<br>2006               |
| <b>STANDARD III. PROGRAM QUALITY: CURRICULUM AND TEACHING-LEARNING PRACTICES</b>  |  |   |   |   |   |                            |
| The curriculum is developed in accordance with the mission, goals, and expected outcomes of the program and reflects professional nursing standards and guidelines and the needs and expectations of the community of interest. There is congruence between teaching-learning experiences and expected outcomes. The environment for teaching, learning and evaluation of student performance fosters achievement of the expected outcomes. |  |   |   |   |   |                            |
| <b>III. PROGRAM QUALITY: CURRICULUM AND TEACHING-LEARNING PRACTICES</b><br><br>III-A. The curriculum is developed, implemented, and revised to reflect clear  | Develops curriculum that contains essential content which will enable students to practice as professional   | Compare course outlines/test blueprints to AACN Essentials and NCLEX –RN Examination test plan, ANA Scope and | Curriculum Committee  | Every 4 years<br>2000<br>2004<br>2008                     | Every 4 years<br>2000<br>2004                 |                            |

## SYSTEMATIC EVALUATION PLAN

| Key Elements   | Outcome Measures   | Methods of Evaluation  | Responsible Person | Time Frame                            |                               | Findings / Recommendations |
|--|--|--|--------------------|---------------------------------------|-------------------------------|----------------------------|
|  |  |  |                    | Collection                            | Analysis                      |                            |
| statements of expected student learning outcomes that are consistent with professional nursing standards and guidelines and congruent with the program's mission, goals, and expected outcomes.  | nurse.<br><br>Create an environment conducive to learning.       | Standards of Practice and National Council of State Boards of Nursing Role Delineation Study.<br><br>Review NCLEX pass rate to national averages |                    |                                       |                               |                            |
| III-B. The curriculum is developed, implemented, and revised to reflect professional nursing standards and guidelines. These standards and guidelines are clearly evident within the curriculum structure and expected learning outcomes. Course/unit/level outcomes are consistent with the roles for which the program is preparing its graduates.<br><br>1. The | Core requirements provide the foundation for nursing curriculum. | Compare nursing core requirements with university core requirements. Revise as needed.   | Curriculum         | Every 4 years<br>2000<br>2004<br>2008 | Every 4 years<br>2000<br>2004 |                            |

## SYSTEMATIC EVALUATION PLAN

| Key Elements  | Outcome Measures                      | Methods of Evaluation                  | Responsible Person     | Time Frame            |                | Findings / Recommendations |
|---|---------------------------------------|--|------------------------|-----------------------|----------------|----------------------------|
|   |                                       |  |                        | Collection            | Analysis       |                            |
| <p>baccalaureate curriculum incorporates knowledge and skills identified in <i>The Essentials of Baccalaureate Education for Professional Nursing Practice</i> (AACN, 1998).</p> <p>2. The master's curriculum incorporates knowledge and skills identified in <i>The Essentials of Master's Education for Advanced Practice Nursing</i> (AACN, 1996). Any specialty standards adopted for the master's program are incorporated into the curriculum.</p> |                                       |  |                        |                       |                |                            |
| III-C. The curriculum is logically structured to  | Learning activities are structured in | Student evaluations of courses, course | Information technology | <u>Every semester</u> | Every semester |                            |

## SYSTEMATIC EVALUATION PLAN

| Key Elements  | Outcome Measures   | Methods of Evaluation  | Responsible Person   | Time Frame  |  | Findings / Recommendations |
|---|--|--|--|---|--|----------------------------|
|   |  |  |  | Collection  | Analysis   |                            |
| <p>meet expected program outcomes.</p> <ol style="list-style-type: none"> <li>1. The baccalaureate curriculum builds upon a foundation of the arts, sciences, and humanities.</li> <li>2. The master's curriculum builds on the baccalaureate level foundation</li> </ol> | such a way as to assure that students achieve learning outcomes and are provided with adequate resources for interaction with faculty and other students | <p>syllabi, review of web sites, CID</p> <p>Faculty Course Evaluation Form</p> <p>ERI results</p>  | <p>committee</p> <p>Course coordinators</p> <p>Curriculum</p>  | <p><u>Annually</u></p> <p>2007</p> <p>2008</p>                              | Annually   | 2004                       |
| III-D. Curriculum and teaching-learning practices are evaluated at regularly scheduled intervals to foster ongoing improvement  | Curriculum and teaching-learning practices foster ongoing improvement.   | <p>Review Curriculum content and teaching-learning practices</p> <p>Student success in courses</p> <p>ERI results</p> <p>Research study results related to predictors of success</p> | <p>Faculty members and curriculum committee</p> <p>A &amp; P Committee</p> <p>Curriculum Committee</p> <p>Faculty Task Force</p> | <p>Every 2 years</p> <p>2001</p> <p>2003</p> <p>2005</p> <p><u>2007</u></p> | <p>Every 2 years</p> <p>2001</p> <p>2003</p> <p>2005</p> |                            |
| III-E. The didactic and clinical teaching-learning practices and  |  |  |  |   |  |                            |

### SYSTEMATIC EVALUATION PLAN

| Key Elements  | Outcome Measures  | Methods of Evaluation   | Responsible Person   | Time Frame  |   | Findings / Recommendations                   |
|---|---|---|--|---|---|--|
|   |   |   |  | Collection  | Analysis                                  |  |
| learning environments support the achievement of student learning outcomes.   |   |   |  |   |   |  |
| III-F. The curriculum and teaching-learning practices consider the needs and expectations of the identified community of interest.  | Clinical facilities are utilized appropriately to achieve the outcomes of the program and course objectives | Agencies, student evaluations, agency contracts   | Clinical coordinators, Associate Dean  | Every three years<br>2000<br>2003<br>2006<br>2009 | Every three years<br>2000<br>2003<br>2006 |  |
|   |   |   |  |   |   |  |
| III-F. Curriculum is sequentially and logically organized to facilitate student achievement of expected results. Curriculum incorporates content and learning experiences essential to practice in professional nursing | The curriculum prepares graduate for professional practice.   | Rate of success on NCLEX is 80% or above.<br><br>Results of graduate surveys and employer surveys.  | Associate Dean and Curriculum Committee<br><br>Systematic Evaluation Committee | Annually  | Annually<br>2007<br>2008                  | 2003<br>2004<br>2005<br>2006<br>2007<br>2008 |
| III-G. Academic policies related to students are fair, equitable, published and are reviewed & revised as   | Student policies of the nursing unit are congruent with those of the governing organization, publicly       | Student Handbooks of the Department of Nursing and CSU. University Catalog, course syllabi, minutes | Student and Community Relations Committee, Associate                           | Annually  | Annually                                  | 2003<br>2004<br>2005<br>2006<br>207          |



## SYSTEMATIC EVALUATION PLAN

| Key Elements   | Outcome Measures   | Methods of Evaluation  | Responsible Person   | Time Frame |   | Findings / Recommendations                   |
|--|--|--|--|------------|---|--|
|  |  |  |  | Collection | Analysis  |  |
| necessary to reflect ongoing improvement.  | accessible, and non-discriminatory; differences are justified by nursing unit purposes   | of Admissions and Progression Committee.   | Dean and Dean  |            |   | 2008   |
| III-H. Academic policies are justifiable. Academic policies relate to and support the mission, philosophy and goals/objectives of the program and institution.   | Policies of the Department of Nursing are consistent with policies of the governing organization or differences are justified by nursing unit policies | Review of Catalog, Student Handbook, Committee Minutes, CSU Web site for materials distributed in that manner.                               | Student and Community Relations Committee, Associate Dean and Dean | Annually   | Annually  | 2003<br>2004<br>2005<br>2006<br>2007<br>2008 |
| <b>Standard IV. Program Effectiveness: Student Performance and Faculty Accomplishments</b>   |  |  |  |            |   |  |
| The program is effective in fulfilling its mission, goals, and expected outcomes. Actual student learning outcomes are consistent with the mission, goals, and expected outcomes of the program. Alumni satisfaction and the accomplishments of graduates of the program attest to the effectiveness of the program. Actual faculty outcomes are consistent with the mission, goals, and expected outcomes of the program. Data on program effectiveness are used to foster ongoing improvement. |  |  |  |            |   |  |
| <b>IV Program Effectiveness: Student Performance and Faculty Accomplishments</b><br>IV-A. Student performance is evaluated by the faculty and reflects achievement of expected outcomes.   | Faculty and students evaluate student clinical performance (formative and summative).<br><br>Goals for clinical improvement are identified by a        | Review of Clinical Evaluation forms<br><br>Portfolios reviewed for individual and aggregate data.<br>Writing assessment and remediation data | Evaluation committee<br>Dean and associate dean<br>Role            | Annually   | Every 3 years<br>2001<br>2004<br><u>2007</u><br><u>2010</u> |  |

### SYSTEMATIC EVALUATION PLAN

| Key Elements   | Outcome Measures  | Methods of Evaluation  | Responsible Person  | Time Frame                      |                       | Findings / Recommendations |
|--|---|--|---|---------------------------------|-----------------------|----------------------------|
|  |   |  |   | Collection                      | Analysis              |                            |
| Evaluation policies and procedures are defined and consistently applied. | <p>student in conjunction with faculty.</p> <p>Master's students are eligible to sit for certification exams in either administration or education</p> <p>Communication<br/>Critical Thinking<br/>Patterns of Employment<br/>Graduation rates<br/>NCLEX pass rates<br/>Program satisfaction<br/>Professional development<br/>Policies of the Department of Nursing are consistent with those of CSU specifically related to grading scale, co-requisite courses, and dismissal.</p> | <p>Review of Catalog, Student Handbook, Committee Minutes, CSU Web site for materials distributed in that manner.</p> <p>Examples of courses that prepare Master's students for certification.</p> | <p>Transitions Course Nursing 4502 faculty Evaluation Committee with review and approval by faculty as indicated.</p> |                                 |                       |                            |
| IV-B. Surveys and other data sources are used to collect information     | Data collected is sufficient to support and improve the   | Review graduation and employer surveys; review Board of  | Evaluation committee, Dean SHC  | Annually<br><u>2007</u><br>2008 | Every 3 years<br>2001 | 2001<br>2004<br>2007       |

## SYSTEMATIC EVALUATION PLAN

| Key Elements   | Outcome Measures   | Methods of Evaluation  | Responsible Person                           | Time Frame                      |                                       | Findings / Recommendations   |
|--|--|--|--|---------------------------------|---------------------------------------|--|
|  |  |  |  | Collection                      | Analysis                              |  |
| about student, alumni, and employer satisfaction and demonstrated achievements of graduates. Student outcome data include, but are not limited to, graduation rates, NCLEX-RN® pass rates, certification examination pass rates, and job placement rates, as appropriate | program.   | Nursing data regarding NCLEX performances;<br>Review graduation rates<br>Student portfolio analysis.<br>Review certification and job rates.<br><br>Identify how NCSBN is used to guide curriculum changes. | Associate Dean of Nursing<br>Nursing Faculty |                                 | 2004                                  | Findings: Data from student performance on NCLEX, Benchmark I survey, & student portfolio analysis provide strong & convincing evidence of program effectiveness. Alumnae & employer survey return rate is poor and data collected is of questionable value. |
| IV-C. Program outcome data are analyzed to provide evidence of program effectiveness and are used to foster ongoing program improvement  |  |  |  |                                 |                                       |  |
| IV-D. Faculty outcomes demonstrate achievement of the program's mission, goals, and expected outcomes, and enhance program quality and   | All faculty members in nursing hold a minimum of the master's degree in nursing.<br>Teaching assignments reflect | Faculty qualification records are updated annually as part of the Board of Nursing report. These records reflect the education and experiential  |  | Annually<br><u>2007</u><br>2008 | Every 3 years<br>2001<br>2004<br>2007 | Recommendation: Continue monitoring NCLEX performance, & EBI analysis. Add qualitative   |

## SYSTEMATIC EVALUATION PLAN

| Key Elements   | Outcome Measures   | Methods of Evaluation  | Responsible Person | Time Frame |          | Findings / Recommendations  |
|----------------|--|--|--------------------|------------|----------|---|
|                |  |  |                    | Collection | Analysis |   |
| effectiveness. | <p>clinical expertise of faculty as well as related field expertise. Use of faculty members outside the educationally identified areas of expertise is justified based on specialized preparation or continuing education (p.4)</p> <p>Workload is equitable across the faculty and is consistent with the needs of the department and the profession.</p> <p>Nurse practitioner faculty is provided with opportunities to meet practice requirements to maintain certification. At least 25% of all courses are coordinated by doctorally prepared faculty members (SACS requirement)</p> <p>The minimum numbers of faculty</p> | <p>qualifications of faculty as they relate to teaching assignments.</p> <p>Schedule of classes, faculty self evaluation, peer evaluations.</p> <p>Reports of faculty practice and continuing education are reviewed along with the self-evaluation.</p> <p>Schedules for required nursing courses are reviewed for achievement of these outcomes.</p> <p>Annual reports to Board of Nursing, AACN, and NLN (CCNE) document numbers and ratios of faculty to students.</p> |                    |            |          | <p>questions to EBI exit survey. Investigate GBON help in tracking employment rates &amp; focus groups of graduates and employers. Revise method of assessing</p> |

### SYSTEMATIC EVALUATION PLAN

| Key Elements | Outcome Measures   | Methods of Evaluation   | Responsible Person | Time Frame |          | Findings / Recommendations |
|--------------|--|---|--------------------|------------|----------|----------------------------|
|              |  |   |                    | Collection | Analysis |                            |
|              | <p>per student headcount as established in the rules of the Georgia Board of Nursing are met including at least 1 full-time faculty member for every 20 student enrolled in nursing courses and 1 faculty member for every 10 students engaged in clinical practice. (Georgia Board of Nursing)</p> <p>Clinical preceptors are oriented to the role. They meet the requirements for preceptors established by the Georgia Board of Nursing</p> <p>Clinical preceptor selection process is consistent with rules and regulations of the Georgia Board of Nursing.</p> <p>The clinical preceptors are sufficient and</p> | <p>Review faculty recruitment and retention reports. Examine teaching loads policy and practices.</p> <p>Preceptor packet, notebook kept in central location, preceptor evaluations by students, preceptor evaluations of the experience.</p> <p>Review numbers of faculty enrolled in doctoral studies</p> |                    |            |          |                            |

**SYSTEMATIC EVALUATION PLAN**

| Key Elements | Outcome Measures   | Methods of Evaluation   | Responsible Person                 | Time Frame |          | Findings / Recommendations |
|--------------|--|---|------------------------------------|------------|----------|----------------------------|
|              |  |   |                                    | Collection | Analysis |                            |
|              | <p>appropriate to meet the objectives for the course and program outcomes</p> <p>The academic environment provided for continuing education of non-doctorally prepared faculty, including release time or educational leave to pursue advanced degrees. At least 95% of full-time faculty members meet the departmentally established criteria for full-time faculty in a baccalaureate degree program. Documentation of a performance improvement plan exists in any case where the criteria are not met. Faculty achievements will reflect the scholarship of teaching, application,</p> | <p>Review of aggregate data related to annual faculty evaluations.</p> <p>Review of aggregate data related to any performance improvement plans.</p> <p>Review of annual lists of faculty achievements.</p> <p>Review of catalog, applications, web site and any additional material including handbook and fact sheets.</p> <p>Review course evaluations</p> | <p>Dean<br/>Associate<br/>Dean</p> |            |          |                            |

**SYSTEMATIC EVALUATION PLAN**

| Key Elements   | Outcome Measures  | Methods of Evaluation  | Responsible Person                                | Time Frame                       |          | Findings / Recommendations |
|--|---|--|---|----------------------------------|----------|----------------------------|
|  |   |  |   | Collection                       | Analysis |                            |
|  | <p>integration, and discovery of knowledge as is appropriate and in keeping with the mission of CSU</p> <p>Faculty achievements will reflect the scholarship of teaching, application, integration, and discovery of knowledge as is appropriate and in keeping with the mission of CCSU</p> <p>All information about the program is reviewed and revised if necessary.</p> |  |   |                                  |          |                            |
| IV-E. The program has established policies and procedures by which it defines and reviews formal complaints; analyses of aggregate data regarding formal complaints are used to foster ongoing program | Complaints about the program are addressed and records of actions are available.  | <p>Grievances are received by the associate dean and referred to the appropriate committee or individual for resolution.</p> <p>Records of actions are</p> | <p>Dean, Associate</p> <p>Course Coordinators</p> | As needed<br><u>2007</u><br>2008 |          |                            |

**SYSTEMATIC EVALUATION PLAN**

| Key Elements  | Outcome Measures  | Methods of Evaluation   | Responsible Person   | Time Frame               |          | Findings / Recommendations                           |
|---|---|---|----------------------|--------------------------|----------|--|
|   |   |   |                      | Collection               | Analysis |  |
| improvement.  |   | maintained by the associate dean  | Associate Dean       |                          |          |  |
| IV-E. Current documents & publications distributed accurately reflect student performance & satisfaction, as well as faculty accomplishments. | All information about the program intended to inform the general public, prospective students employers, and other interested parties is current, accurate, clear and consistent. | Review of Catalog, applications, web site and any additional material including handbook and fact sheets. | Associate Dean, Dean | Annually<br>2007<br>2008 | Annually | 2003<br>2004<br>2005<br>2006<br>2007<br>2008<br>2009 |

1/25/07 date revision/BG

4/12/07 date revision/BG