Annual Departmental Plan Report
May 30, 2019
Submitted by Nancy Duphily
Associate Professor and Chair, Department of Nursing
Fitchburg State University

Program Information

Program/Department: Nursing
Department Chair: Nancy Duphily, Associate Professor and Chair
Department Assessment Committee Contact: Akwasi Duah

Please be as detailed as possible in your responses. We will use this information to fulfill our NECHE requirements and this report will help with your next Program Review or aid with your external accreditation. This file is to be kept in the department and an electronic file is due to the Director of Assessment by May 31 each academic year.

Program Learning Outcomes (PLOs) (Educational Objectives)

1. List all PLOs and the timeline for assessment

Program Learning Outcomes	Expected Timing of Assessment (annual, semester, bi-annual, etc.)	When was the last assessment of the PLO completed?
1. Synthesize knowledge from the liberal arts, sciences, and nursing as a foundation for safe, client-centered care	annual	May 2019 (3 day DON Workshop)
2. Incorporate basic organizational and systems leadership to provide quality care and patient safety	annual	May 2019 (3 day DON Workshop)
3. Incorporate evidence based practice in the management of client care	annual	May 2019 (3 day DON Workshop)
4. Analyze information using information technology to improve patient outcomes	annual	May 2019 (3 day DON Workshop)
5. Examine the impact of health care policy, finance, and regulatory environments on nursing practice	annual	May 2019 (3 day DON Workshop)
6. Integrate principles of communication in professional practice	annual	May 2019 (3 day DON Workshop)

7. Synthesize knowledge of health promotion and disease/injury prevention in designing population focused care	annual	May 2019 (3 day DON Workshop)
8. Integrate professional standards of moral, ethical and legal conduct into nursing practice	annual	May 2019 (3 day DON Workshop)

II. **PLO Assessment** (**Please report on the PLOs assessed and/or reviewed this year; programs should be assessing at least once a year**

Using the table below, list and briefly describe the **direct methods** used to collect information assessing whether students are learning the core sets of knowledge (K), skills (S) and attitudes (A) identified as essential.

PLO#	Assessment Description (exam, observation, national standardized exam, oral presentation with rubric, etc.)	When assessment was administered in student program (internship, 4th year,1st year, etc.)	To which students were assessments administered (all, only a sample, etc.)	What is the target set for the PLO?(criteria for success?	Reflection on the result: How was the "loop closed"?
1. Synthesize knowledge from the liberal arts, sciences, and nursing as a foundation for safe, client-centered care	HESIs (case studies, sample tests, practice questions), clinical experiences/evaluations, exams/quizzes, NCLEX, oral presentations, nursing care plans, scholarly papers, discussion boards, med calc exam, Don Anderson NCLEX preparatory course, lab/simulation experiences, writing assignments	At the end of each semester; for seniors following completion of NURS4800	All (sophomore, junior and senior nursing students)	Successful completion of Exit HESI; Success on the NCLEX examination; Student success with progression in the nursing program	1.During May 2019 workshops, a proposal was introduced during PEC workshop to reconsider the following outcome: "students passing the exit HESI with a score of 850 on a retake of this exam"(second Exit HESI); 2.Collaboration with FSU Math department to create learning modules to increase student success with Med Calc exams, administered prior to all courses affiliated with a clinical experience; 3. Collaboration with Elsevier partners to enroll students in the NEXT –GEN HESI as well as expanding and improving HESI access to student review, practice and refinement of HESI tools with the to achieve test success on all HESIs and ultimately success on NCLEX . 4. Faculty reviewed current 2019 NLN test plan during the Curriculum session, FSU DON 3-day workshop (May 23,2019). 5. Annual faculty peer review of nursing exams.

					6. Initial discussion, need to review student remediation process 7. Faculty reviewed each Detailed content outlines (2018-2019 work in progress 8. Examination of Clinical evaluation tools(2018-2019 work in progress 9. Collaboration with Assessment Coordinator to review of all surveys (2018-present). 10. All faculty completed the online NLN Test Construction workshop course August 2018
2. Incorporate basic organizational and systems leadership to provide quality care and patient safety	HESIs(case studies, sample tests, practice questions), clinical experiences/evaluations, exams/quizzes,NCLEX,oral presentations, nursing care plans, scholarly papers, discussion boards, med calc exam, Don Anderson NCLEX preparatory course, lab/simulation experiences, writing assignments	At the end of each semester;for seniors following completion of NURS4800	All (sophomore, junior and senior nursing students)	Successful completion of Exit HESI; Success on the NCLEX examination Student success with progression in the nursing program	1.During the May 2019 workshops, a proposal was introduced during PEC workshop to reconsider the following outcome: "students passing the exit HESI with a score of 850 on a retake of this exam"(second Exit HESI); 2.Collaboration with FSU Math department to create learning modules to increase student success with Med Calc exams, administered prior to course affiliated with a clinical experience; 3. Collaboration with Elsevier partners to enroll students in the NEXT –GEN HESI as well as expanding and improving HESI access to student review, practice and refinement of HESI tools with the to achieve test success on all HESIs and ultimately success on NCLEX 4. Faculty reviewed current 2019 NLN test plan during the Curriculum session, FSU DON 3-day workshop (May 23,2019). 5. Annual faculty peer review of nursing exams. 6. Initial discussion, need to review student remediation process 7. Faculty reviewed each Detailed content outlines (2018-2019 work in progress 8. Examination of Clinical evaluation tools(2018-2019 work in progress 9. Collaboration with Assessment Coordinator to review of all surveys (2018-present). 10. All faculty completed the online NLN Test Construction workshop course August 2018

	Outcome	Methods of Assessment	Timing	Population	Benchmark	Actions/Use of Results
3.	Incorporate evidence based practice including current research and critical thinking in the management of client care	HESIs (case studies, sample tests, practice questions), clinical experiences/ evaluations, exams/quizzes, case studies,NCLEX,oral presentations, nursing care plans, scholarly papers, discussion boards, med calc exam, Don Anderson NCLEX preparatory course, lab/simulation experiences, writing assignments	At the end of each semester; for seniors following completion of NURS4800	All (sophomore, junior and senior nursing students)	Successful completion of Exit HESI; Success on the NCLEX examination; Student success with progression in the nursing program	1.During the May 2019 workshops, a proposal was introduced during PEC workshop to reconsider the following outcome: "students passing the exit HESI with a score of 850 on a retake of this exam"(second Exit HESI); 2.Collaboration with FSU Math department to create learning modules to increase student success with Med Calc exams, administered prior to course affiliated with a clinical experience; 3. Collaboration with Elsevier partners to enroll students in the NEXT –GEN HESI as well as expanding and improving HESI access to student review, practice and refinement of HESI tools with the to achieve test success on all HESIs and ultimately success on NCLEX . 4. Faculty reviewed current 2019 NLN test plan during the Curriculum session, FSU DON 3-day workshop (May 23,2019). 5. Annual faculty peer review of nursing exams. 6. Initial discussion, need to review student remediation process 7. Faculty review of each Detailed content outlines (2018-2019 work in progress 8. Examination of Clinical evaluation tools(2018-2019 work in progress 9. Collaboration with Assessment Coordinator to review of all surveys (2018-present).
4.	Analyze information using information technology to improve patient outcomes	HESIs (case studies, sample tests, practice questions), clinical experiences/evaluations, exams/quizzes, case studies,NCLEX,oral presentations, nursing care plans, scholarly papers, discussion boards, med calc exam, Don Anderson NCLEX preparatory course, lab/simulation	At the end of each semester; for seniors following completion of NURS4800	All (sophomore, junior and senior nursing students)	Successful completion of Exit HESI; Success on the NCLEX examination; Student success with progression in the nursing program	1.During the May 2019 workshops, a proposal was introduced during PEC workshop to reconsider the following outcome: "students passing the exit HESI with a score of 850 on a retake of this exam"(second Exit HESI); 2.Collaboration with FSU Math department to create learning modules to increase student success with Med Calc exams, administered prior to course affiliated with a clinical experience; 3. Collaboration with Elsevier partners to enroll students in the NEXT –GEN HESI as well as expanding and improving HESI access to student review, practice and refinement of HESI tools

	experiences, writing assignments				with the to achieve test success on all HESIs and ultimately success on NCLEX 4. Faculty reviewed current 2019 NLN test plan during the Curriculum session, FSU DON 3-day workshop (May 23,2019). 5. Annual faculty peer review of nursing exams. 6. Initial discussion, need to review student remediation process 7. Faculty review of each Detailed content outlines (2018-2019 work in progress 8. Examination of Clinical evaluation tools(2018-2019 work in progress 9. Collaboration with Assessment Coordinator to review of all surveys (2018-present). 10. All faculty completed the online NLN Test Construction workshop course August 2018
5. Examine the impact of health care policy, finance, and regulatory environments on nursing practice	HESIs (case studies, sample tests, practice questions), clinical experiences/evaluations, exams/quizzes, case studies,NCLEX,oral presentations, nursing care plans, scholarly papers, discussion boards, med calc exam, Don Anderson NCLEX preparatory course, lab/simulation experiences, writing assignments	At the end of each semester; for seniors following completion of NURS4800	All (sophomore, junior and senior nursing students)	Successful completion of Exit HESI; Success on the NCLEX examination; Student success with progression in the nursing program	1.During the May 2019 workshops, a proposal was introduced during PEC workshop to reconsider the following outcome: "students passing the exit HESI with a score of 850 on a retake of this exam"(second Exit HESI); 2.Collaboration with FSU Math department to create learning modules to increase student success with Med Calc exams, administered prior to course affiliated with a clinical experience; 3. Collaboration with Elsevier partners to enroll students in the NEXT –GEN HESI as well as expanding and improving HESI access to student review, practice and refinement of HESI tools with the to achieve test success on all HESIs and ultimately success on NCLEX 4. Faculty reviewed current 2019 NLN test plan during the Curriculum session, FSU DON 3-day workshop (May 23,2019). 5. Annual faculty peer review of nursing exams. 6. Initial discussion, need to review student remediation process 7. Faculty review of each Detailed content outlines (2018-2019 work in progress 8. Examination of Clinical evaluation tools(2018-2019 work in progress

# Outcome	Methods/Tools	Timing	Population	Criteria	Actions
					9. Collaboration with Assessment Coordinator to review of all surveys (2018-present).
					10. All faculty completed the online NLN Test Construction workshop course August 2018
6. Integrate principles of communication in professional practice	HESI (case studies, sample tests, sample questions), clinical experiences/ evaluations, exams/quizzes,NCLEX,oral presentations, nursing care plans, scholarly papers, discussion boards, med calc exam, Don Anderson NCLEX preparatory course, writing assignments	At the end of each semester; for seniors following completion of NURS4800	All (sophomore, junior and senior nursing students)	Successful completion of Exit HESI; Success on the NCLEX examination; Student success with progression in the nursing program	1.During the May 2019 workshops, a proposal was introduced during PEC workshop to reconsider the following outcome: "students passing the exit HESI with a score of 850 on a retake of this exam"(second Exit HESI); 2.Collaboration with FSU Math department to create learning modules to increase student success with Med Calc exams, administered prior to course affiliated with a clinical experience; 3. Collaboration with Elsevier partners to enroll students in the NEXT –GEN HESI as well as expanding and improving HESI access to student review, practice and refinement of HESI tools with the to achieve test success on all HESIs and ultimately success on NCLEX . 4. Faculty reviewed current 2019 NLN test plan during the Curriculum session, FSU DON 3-day workshop (May 23,2019). 5. Annual faculty peer review of nursing exams. 6. Initial discussion, need to review student remediation process 7. Faculty review of each Detailed content outlines (2018-2019 work in progress 8. Examination of Clinical evaluation tools(2018-2019 work in progress 9. Collaboration with Assessment Coordinator to review of all surveys (2018-present). 10. All faculty completed the online NLN Test Construction workshop course August 2018
7. Synthesize knowledge of health promotion and disease/inju	HESIs (case studies, sample tests, sample questions), clinical experiences/evaluations, exams/quizzes, case studies,NCLEX,oral	At the end of each semester; for seniors following completion of NURS4800	All (sophomore, junior and senior nursing students)	Successful completion of Exit HESI; Success on the NCLEX examination;	1.During the May 2019 workshops, a proposal was introduced during PEC workshop to reconsider the following outcome: "students passing the exit HESI with a score of 850 on a retake of this exam"(second Exit HESI); 2.Collaboration with FSU Math department to create learning modules to increase student success with Med Calc exams,

ry prevention in designing population focused care	presentations, nursing care plans, scholarly papers, discussion boards, med calc exam, Don Anderson NCLEX preparatory course, lab/simulation experiences, writing assignments			Student success with progression in the nursing program	administered prior to course affiliated with a clinical experience; 3. Collaboration with Elsevier partners to enroll students in the NEXT –GEN HESI as well as expanding and improving HESI access to student review, practice and refinement of HESI tools with the to achieve test success on all HESIs and ultimately success on NCLEX . 4. Faculty reviewed current 2019 NLN test plan during the Curriculum session, FSU DON 3-day workshop (May 23,2019). 5. Annual faculty peer review of nursing exams. 6. Initial discussion, need to review student remediation process 7. Faculty review of each Detailed content outlines (2018-2019 work in progress 8. Examination of Clinical evaluation tools(2018-2019 work in progress 9. Collaboration with Assessment Coordinator to review of all surveys (2018-present). 10. All faculty completed the online NLN Test Construction workshop course August 2018
8. Integrate professional standards of moral, ethical and legal conduct into nursing practice	HESIs (case studies, sample tests, sample questions), clinical experiences/evaluations, exams/quizzes, case studies,NCLEX,oral presentations, nursing care plans, scholarly papers, discussion boards, med calc exam, Don Anderson NCLEX preparatory course, lab/simulation experiences, writing assignments	At the end of each semester; for seniors following completion of NURS4800	All (sophomore, junior and senior nursing students)	Successful completion of Exit HESI; Success on the NCLEX examination; Student success with progression in the nursing program	1.During the May 2019 workshops, a proposal was introduced during PEC workshop to reconsider the following outcome: "students passing the exit HESI with a score of 850 on a retake of this exam"(second Exit HESI); 2.Collaboration with FSU Math department to create learning modules to increase student success with Med Calc exams, administered prior to course affiliated with a clinical experience; 3. Collaboration with Elsevier partners to enroll students in the NEXT –GEN HESI as well as expanding and improving HESI access to student review, practice and refinement of HESI tools with the to achieve test success on all HESIs and ultimately success on NCLEX . 4. Faculty reviewed current 2019 NLN test plan during the Curriculum session, FSU DON 3-day workshop (May 23,2019). 5. Annual faculty peer review of nursing exams.

					6. Initial discussion, need to review student remediation process 7. Faculty review of each Detailed content outlines (2018-2019 work in progress 8. Examination of Clinical evaluation tools(2018-2019 work in progress 9. Collaboration with Assessment Coordinator to review of all surveys (2018-present). 10. All faculty completed the online NLN Test Construction workshop course August 2018

III. Summary of Findings: Briefly summarize the results of the assessments reported in Section II above combined with other relevant evidence gathered and show how these are being reviewed/discussed. How are you "closing the loop"?

Other than GPA, what data/evidence is used to determine that graduates have achieved the stated outcomes for the degree? (e.g., capstone course, portfolio review, licensure examination)	Who interprets the evidence? What is the process? (e.g. annually by the curriculum committee) ANNUALLY to evaluate trends, by:	What changes have been made as a result of using the data/evidence?
TK 20 results	DON Chair ,Program Evaluation Committee (PEC) Curriculum Committee; results brought to faculty	Curricular examination/proposal for changes/improvements
SIR II results	DON Chair ,Program Evaluation Committee (PEC) Curriculum Committee; results brought to faculty	Curricular examination/proposal for changes/improvements
Licensure Examination (NCLEX)	DON Chair ,Program Evaluation Committee (PEC) Curriculum Committee; results brought to faculty	Curricular examination/ proposal for changes/improvements
HESI score results	DON Chair ,Program Evaluation Committee (PEC) Curriculum Committee	Curricular examination /proposal for changes/improvements; tutoring
C 4 results (clinical /lab evaluations)	DON Chair ,Program Evaluation Committee (PEC) Curriculum Committee; results brought to faculty	Impacts DON decision to re-use clinical site /clinical faculty each semester

Student Evaluation of Simulation survey	DON Chair ,Program Evaluation Committee (PEC) Curriculum Committee; results brought to faculty	Examination of simulation process/proposal for curricular changes/improvements
Senior Exit survey	DON Chair ,Program Evaluation Committee (PEC) Curriculum Committee;results brought to faculty	Curricular examination/proposal for changes/improvements
Evaluation of clinical site survey	DON Chair ,Program Evaluation Committee (PEC) Curriculum Committee; results brought to faculty	Impacts DON decision to continue to use clinical sites and clinical faculty each semester
Evaluation of preceptor survey	DON Chair ,Program Evaluation Committee (PEC) Curriculum Committee; results brought to faculty	Impacts DON decision continue to employ preceptor

Assessment Plan for Program/ Department

I Insert the Program or Department Assessment Plan

(As the FSU DON Program Assessment Plan is 34 pages in length, please see this and related attachments to Annual Department Report, in email of 5.30.2019)

II Explain any changes in the assessment plan including new or revised PLOs, new assessments that the program/department plans to implement and new targets or goals set for student success **. Please see narrative above**

 III If you do not have a plan, would you like help in developing one? ☐ yes

University Data

I. SSC Data

Indicate **at least one** Student Success Performance Measure that the department/program has identified for planned change or improvement. Freshman retention, bottleneck courses, graduation rates, at risk student retention, etc.

a. What was the focus this year?

Student Success Measure (data point from SSC)	Planned or implemented intervention	Update on Implemented Intervention(i.e. change in target, satisfied with outcome, not satisfied, will continue or not
Retention (Rationale**:** To improve student retention rates	**NURPS** -NURPs (Freshman nursing students) must successfully complete all prerequisite courses by the end of the spring semester of the first year to be guaranteed a seat in sophomore nursing courses.	132 students were admitted to the nursing program as Freshman NURPs (pre-nursing majors). The DON was not aware of this approximately 30% increase. Our concern was that once these students were admitted as NURPs, we would not have the resources to accommodate them when they became Sophomores. The rationale

In the DON through the establishment of clear expectations of students)	From the Department of Nursing Student Handbook: "To be in good standing in the major, nursing students must achieve a MINIMUM GRADE OF 2.5 OR BETTER IN EACH NURS COURSE. A student may either fail one nursing course once or withdraw from one nursing course once throughout the entire nursing program… Failure to comply will result in dismissal from the program…Failure to achieve a grade of 2.5 or better when the course is repeated will result in dismissal from the major. Any subsequent grade of less than 2.5 in any other nursing course will result in dismissal from the major..." **HESIs: Implementation and Evaluation** -after each course associated with a clinical component -identify high risk nursing students by tracking any HESI score lower than 850	given to us by Administration was that unsuccessful students could then be advised into other majors. We have a philosophical issue with this rationale. We feel that it is our responsibility to truly mentor and encourage the success of students who want to major in Nursing. In May 23, 2019, upon review of their standing in prerequisite courses, many of these students were unsuccessful in the Freshman year courses , particularly A&P I and II and Chemistry); as the Nursing Handbook states, they are unable to progress on to Sophomore year (NURS status). These **24** students who have not been successful (as of list generated by our Administrative Assistants' "fail" letters as of May 24,2019)are now designated as "Pre-major" status The student numbers entering the sophomore year still are still high enough to preclude our acceptance of sophomore transfer students. At this time, only one transfer student has been accepted. We have encouraged Admissions and Administration to work more closely with us in the upcoming years to prevent this serious issue from recurring.
Remediation Rationale: To foster success in those nursing students repeating courses	**Remediation** -The Department of Nursing Academic Policies require that all nursing majors successfully complete all nursing courses with a grade of 2.5 Students who do not achieve this benchmark are required to complete 30 hours of study at the Peer Tutor Center, reviewing content related to the course failed. Students must also contact Christine Coffin, Director of the Peer Tutor and Placement Center, during the first week of classes to schedule tutoring sessions. Concurrent with repeating the failed course,students are required to complete 15 hours in the clinical skills lab, reviewing physical assessment and foundational/med.surgical skills acquired. The purpose of this is to keep skills current. Students need to contact the Nursing Lab/Simulation Coordinator, at the start of the spring semester to schedule clinical skills sessions. Attendance is monitored to ensure completion of this requirement. Failure to adhere to the policies outlined above will remove the opportunity to	The DON is currently reviewing the remediation policy that was instituted a decade ago to assist in the success of students who were unsuccessful in the Sophomore yea. Remediation proposal as follows was brought to faculty at the three day workshop on May 23,2019: **Proposal for Change to Remediation Process** Discussion related to the Remediation process included: **History** – Previous to the current model, students who failed a course at the sophomore level were required to take the 3-credit course "Strategies for Success". There was concern from University Administration that attrition was high and asked the department to look at alternative strategies to successfully retain students who had a fail at the sophomore level. **Current Policy** – States that '*traditional sophomores who fail or withdraw from one nursing course are required to participate in 30 hours of tutoring at the Fitchburg State Tutoring Center, as well as completed 15 hours of skills in the Nursing Lab during the following*

	remediate, and the student will no longer be considered a nursing major.	*semester. Failure to comply will result in dismissal from the program'.* **Data** – This model has been in place for 11 years. Data has been collected and trends have been looked at. There is some data that *suggests* that students who fail a spring course are more likely to be successful in the major than those that fail a fall course but would need more analysis. **Concerns** – Students participating in the Remediation process often have too much free time as they are out of nursing courses for an entire semester. Students may experience an impact on their Financial Aide and Housing due to their credit load; students may choose to be unenrolled for the semester, coming to campus to participate in tutoring and/or lab remediation (without cost to the student); students report that not continuing with "their class" is difficult. **Proposal** – to pilot a change in the current remediation process for 2019 Fall Semester. For those students who were not successful with NURS2600 (Pathopharmacology II), we would like to offer Pathopharmacology II in the fall semester. These students would enroll in NURS2600 and their electives. In addition, they would participate in 30 hours of Tutor Center remediation for the course as well as 15 hours in the lab. Upon successful completion of the course and the required hours the student would progress to junior level courses. This would enable them to continue to work with and graduate with their class. **Future** – Currently, we feel this pilot can only be offered to NURS2600 fails, however, if the pilot appears successful, sophomore fall semester fails should be explored to follow this model. **Process** – Present to faculty, get approval for a new course, discuss need for further approvals.
Communication: consistency, transparency and congruency To clarify and maintain clear guidelines among faculty and students	**Clinical instructor handbook** developed; Weekly clinical report submissions to level coordinators;	The Clinical instructor handbook continues to be revised and updated as additional issues come to light that need to be addressed to ensure continuity and consistency in adhering to FSU guidelines for all faculty in the clinical agency.

	Advising improvements (SOAR, intrusive advising)	-"Intrusive" advising is working: three faculty members have volunteered and are currently advising LPN to BS students. -Frequent meetings with LPN students on all levels (Fr and Soph) -Summer advising "script" of scheduled courses for Freshman nursing students - Increased numbers of DON faculty summer volunteers during summer orientation (SOAR) to be able to view the students' schedules at this time to ensure students are correctly enrolled in the appropriate course -Recommendation for all fulltime and adjunct faculty to meet prior to fall and spring semesters to orient to the role, receive orientation to the lab/simulation network, and receive the clinical instructor handbook. Currently the DON holds one meeting in September. Due to the lack of faculty preparation when in the simulation/lab setting, it has become necessary to institute and review training in this setting, as more and more clinical groups will need to use this setting in lieu of reduction of allotted students numbers in the clinical agencies.
	Three day nursing department workshop following each semester	Continues, with specific agenda items and faculty "homework" prior to and following these three-day sessions.
Data analysis and Improvement Planning : Surveys	Nursing Student Survey Data Outcomes Analysis Ad Hoc DON Survey Committee	The AdHoc committee will continue to explore and facilitate the DON survey process through 2019-2020;Move the DON survey into its own file in the I drive;Survey data identified: level specific; general DON survey data Survey data discussions to be held at level meetings beginning fall 2019; action pans will be documented in level meeting minutes; A draft of the FSU Nursing Data Review Process Map, designed in collaboration with PEC and DIRP was presented to faculty during the three day DON workshop May 2019; As the DON levels and committees review survey data, they should be asking the following: are the questions clear? providing useful data about the program and external communities of interest? what was the N?;Explore the possibility of migrating all DON surveys into an electronic format(via TK 20 platform); Discuss factors that impact the Employer Survey process.

b. What will be your focus for the upcoming year?

Student Success Measure (data point from SSC)	Rationale for selection	Planned or implemented intervention	Current score/Target Score	This measure was selected because of last Program Review or Accreditation (yes/no)
Student Retention	Please see narratives above	Please see narratives above		no
Faculty and Student Development: med calc,simulation	Please see narratives above	Please see narratives above		no

II.   Trend Data

Indicate **at least one** Department Performance Measure that the program/department identified for change or improvement. Number of graduates, number of majors, credit production, substitutions etc.

a. What was the focus this year?

Department Performance Measure (data point from Trend Data)	Implemented Intervention	Update on Implemented Intervention(i.e. change in target, satisfied with outcome, not satisfied, will continue or not
Retention	**HESIs :Implementation and Evaluation** -after each course associated with a clinical component -identify high risk nursing students by tracking any HESI score lower than 850	Working with Elsevier/ HESI to improve student access and use of this resource
Remediation	**NURPS** -NURPs (Freshman nursing students) must successfully complete all prerequisite courses by the end of the spring semester of the first year to be guaranteed a seat in sophomore nursing courses. From the Department of Nursing Student Handbook: "To be in good standing in the major, nursing students must achieve a MINIMUM GRADE OF 2.5 OR BETTER IN EACH NURS COURSE. A student may either fail one nursing course once or withdraw from one nursing course once throughout the entire nursing program… Failure to	**Concerns** – Students participating in the Remediation process often have too much free time as they are out of nursing courses for an entire semester. Students may experience an impact on their Financial Aide and Housing due to their credit load; students may choose to be unenrolled for the semester, coming to campus to participate in tutoring and/or lab remediation (without cost to the student);

	comply will result in dismissal from the program…Failure to achieve a grade of 2.5 or better when the course is repeated will result in dismissal from the major. Any subsequent grade of less than 2.5 in any other nursing course will result in dismissal from the major..." **Remediation** -The Department of Nursing Academic Policies require that all nursing majors successfully complete all nursing courses with a grade of 2.5 Students who do not achieve this benchmark are required to complete 30 hours of study at the Peer Tutor Center, reviewing content related to the course failed. Students must also contact Christine Coffin, Director of the Peer Tutor and Placement Center, during the first week of classes to schedule tutoring sessions. Concurrent with repeating the failed course, students are required to complete 15 hours in the clinical skills lab, reviewing physical assessment and foundational/med-surgical skills acquired. The purpose of this is to keep skills current. Students need to contact the Nursing Lab/Simulation Coordinator, at the start of the spring semester to schedule clinical skills sessions. Attendance is monitored to ensure completion of this requirement. Failure to adhere to the policies outlined above will preclude the opportunity to remediate, and the student will no longer be considered a nursing major.	students report that not continuing with "their class" is difficult. **Proposal** – to pilot a change in the current remediation process for 2019 Fall Semester. For those students who were not successful with NURS2600 (Pathopharmacology II), we would like to offer Pathopharmacology II in the fall semester. These students would enroll in NURS2600 and their electives. In addition, they would participate in 30 hours of Tutor Center remediation for the course as well as 15 hours in the lab. Upon successful completion of the course and the required hours the student would progress to junior level courses. This would enable them to continue to work with and graduate with their class. **Future** – Currently, there is the belief feel this pilot can be offered to NURS2600 failures alone; however, if the pilot appears successful, sophomore fall semester failures should be explored to follow this model. **Process** – Presentation to faculty (initial talks on May 23, 2019), to obtain approval for a pilot for fall 2019
Communication	Clinical instructor handbook developed	Continual review and additional improvements
Consistency	Advising improvements (SOAR, intrusive advising)	Continual review and additional improvements
Transparency	Weekly clinical report submissions to level coordinators Formative and summative clinical evaluations	Improved communication and timely intervention as a result of weekly reporting
Congruency	Continuation of Interdisciplinary meetings (Chemistry)	Needs further examination and continuation of meetings to improve communication ,congruency and to foster student success
Professional development	Three day nursing department workshop following each semester	Necessary at the end of spring semester

Data analysis and Improvement Planning : Surveys	Nursing Student Survey Data Outcomes Analysis Ad Hoc DON Survey Committee	The AdHoc committee will continue to explore and facilitate the DON survey process through 2019-2020;Move the DON survey into its own file in the I drive; Survey data identified: level specific; general DON survey data Survey data discussions to be held at level meetings beginning fall 2019; action pans will be documented in level meeting minutes; A draft of the FSU Nursing Data Review Process Map, designed in collaboration with PEC and DIRP was presented to faculty during the three day DON workshop May 2019; As the DON levels and committees review survey data,they should be asking the following: are the questions clear? Providing useful data about the program and external communities of interest? What was the N?; Explore the possibility of migrating all DON surveys into an electronic format(via TK 20 platform); Discuss factors that impact the Employer Survey process.

b. What will the focus next year?*

Department Performance Measure (data point from Trend Data)	Rationale for selection	Planned on Implemented Intervention	Current score/Target Score	This measure was selected because of last Program Review or Accreditation (yes/no)
Student Retention	Please see narratives above	Please see narratives above		no

Faculty and Student Development: med calc simulation	Please see narratives above	Please see narratives above		no

- Note: Programs may wish to monitor or review the same data point over multiple years

Program Review Action Plan or External Accreditation Action Letter/Report

    i.   Date of most recent review **October 2015**

    ii.   Insert the Action Plan table from your last Program Review and give any progress towards completing the tasks or achieving targets set forth in the plan.

ACTION PLAN

Specific area where improvement is needed	Evidence to support the recommended change	Person(s) responsible for for implementing the change	Timeline for implementation	Resources needed	Assessment Plan	Progress
Standard III Program Quality: Curriculum and Teaching - Learning Practices	Key Element III H: Curriculum and teaching-learning practices are evaluated at regularly scheduled intervals to foster ongoing improvement.	Faculty, PEC and Curriculum Committee; Curriculum is evaluated by faculty and other communities of interest as appropriate.	Within six months	Data from the evaluation of curriculum and teaching-learning practices are used to foster program improvement.	In response to the Visitors' report, the program made the following changes: The frequency of review of this Key Element in our Program Evaluation Map (PEM) has been changed from every two years to every year during the fall semester. This will allow the curriculum committee to report on data collected the previous academic year. In addition, benchmarks and the review plan for III H were revised. The department formed a Sim Team in 2016 with the primary task of that committee to review the Simulation Evaluation Tool. The team ensured the use of the tool after each simulation during the spring, 2016 semester.	Faculty use data from faculty and student evaluation of teaching-learning practices to inform decisions that facilitate the achievement of student outcomes.

16

					-The PEM has also been revised to reflect the use of all surveys, including the Simulation Evaluation Tool in evaluating this key element. The DON has addressed the issue of data analysis. The department has done all data aggregation internally, and it has become difficult to rely on faculty members to add this task to their other workload. After the site visit, a meeting with the DON Chair was held to discuss data aggregation for all nursing surveys. was agreed that course and clinical evaluation data for the past two years would be aggregated by student outcome; results were received by the department.	
-Standard IV Program Effectiveness: Assessment and Achievement of Program Outcomes	Key Element IV B. Program completion rates demonstrate program effectiveness.	Faculty, PEC and Curriculum Committee;	Within six months	Completion rates for the most recent calendar year (70% or higher)	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 requires a written explanation/analysis with documentation for the variance. The undergraduate program tracks completion rates for the RN to BS track separately from the generic and LPN tracks, because the populations are very different. Going forward, data from all

						three tracks will also be combined to reflect baccalaureate program completion rates.
-Standard IV Program Effectiveness: Assessment and Achievement of Program Outcomes 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.	Key Element IV-H: Data analysis is used to foster ongoing program improvement.	Faculty, PEC and Curriculum Committee	Within six months	Resources needed: DIRP, PEC	Action Plans are in place with follow-up for items within the Evaluation Tools which do not meet the benchmarks. Since November 2015,PEC met several times to revise the Program Evaluation Map. Standard IV has been completely revised, with specific benchmarks for each program outcome identified. PEC revised the Program Evaluation Report Worksheet, and added two more tools: the Program Evaluation Post-Workshop Tracking Table to prompt an action plan for those elements not meeting the benchmark with follow-up and final evaluation. A Tracking Table for Evaluation Tool Items Not Meeting Benchmarks has also been developed The Program Evaluation Tools-Timeline and Responsibility Table is a collaboration between the UG Curriculum Committee and the Program Evaluation Committee to share responsibility for administration of the selected tools and for evaluation of the results with follow-up.	The new PEM was approved by the faculty at the faculty meeting. The new PEM has been used since spring 2016 semester, along with the aforementioned tracking tools. With the help of DIPR, data aggregation has fostered timely data evaluation and action. Other: Data analysis and decisions regarding the Preceptor and Learning Experience Evaluation form were discussed in Key Element II E; tabulation of data for this evaluation tool was filed under Key Element II E in the Resource Room. Analysis of data and interventions related course outcomes scoring below the benchmark scores in course evaluations are presented in Key Element III E.

 iii. If you do not have an action plan, would you like help in developing one based on your last program review and needs of the program.

☐
Yes

 I. **Programs with external Accreditation**
 i Accreditor: **CCNE**
 ii Date of last review **October 2015**
 iii Date of next review and type of review **October 2026 CCNE**
 iv List key performance indicators: CCNE Standards III B and IV B; IV H

List key issues for continuing accreditation identified in accreditation action letter or report	Key performance indicators as required by agency or selected by program (licensure , board or bar pass rates; employment rates ,etc.) (If required)	Update on fulfilling the action letter/report or on meeting the key performance indicators
See above section	See above section	See above section

Campus Climate

Each department was asked to review the Campus Climate Survey information distributed by the Leading for Change Committee and determine what your department has been doing to contribute to the positive outcomes identified

The survey data may be found through this link: https:www.fitchburgstate.edu/offices-services-directory/institutional-research-and-planning/office-of-assessment/campus-climate-survey/

Please list the feedback and recommendations that your department provided to the Leading for Change Committee, along with any additional plans that you might have to further explore this.

As you are reviewing your Department or Program's report below, think about the following:
• How does your program/department compare to the University as a whole? **Very well**
• What are the positives or strengths as perceived by the students in your program/department?
Communication;Caring;Respect;Opportunity for success
• What are the negatives or weaknesses as perceived by the students in your program/department?**Improve welcoming environment for non-whites**
• Is there an area the department/program could work on to have an even more positive impact on the experience of our students? **Improve welcoming environment for non-whites**

• Is there something in the data that the department/program should have in its Action Plan going forward? **Improve the "ability to interact more with people who have very different opinions from me"; provide experiences in the classroom that are culturally and socially diverse; respect everyone's opinions; encourage student enrollment in Expanding Horizons (Jason Smith and Beth Schwartz).**

• Is there something that truly resonates with the faculty in the program/department after reviewing the data?**Becoming more culturally sensitive to the needs of our growing diverse nursing student population**

• If you are a service department, examine the University-wide data with an eye to how your courses could positively impact the student experience. **Civility pledge; create more culturally sensitive programs and opportunities for learning**

Respectfully submitted,
Nancy Duphily
Associate Professor and Chair
Department of Nursing
May 30, 2019

(5/30/2019 NHD)