## School of Nursing and Health Professions Program Evaluation Committee (approved January 2017) Score Card 2016-2017

| Program: | ME-MSN | CNL |
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|          |        |     |

Presenter(s): Helen Nguyen

Date: <u>January 30, 2017</u>

| PEC Scorecard   | Yes | No | Feedback   |
|---|-----|----|--|
| 1. Program's assessment/evaluation plan (must include one direct measure)   |     |    |  |
| a. Is there a program goal? (summary statement of PLOs)   |     | N  | This is a new PEC requirement.   |
| b. Is there an assessment plan? Is it sufficiently comprehensive?   | P   |    | The curriculum maps are impressive and there is one direct measure with faculty developed action plansremarkable effort from Summer 2016 till now. It is not clear how all the other curriculum maps are being used to assess if courses in the curriculum are effectively teaching this content. There has been some effort to track time to graduation, attrition/retention, 1st time pass rates (NCLEX, CNL) and employment rate-it has not been consistently collected and then used to make program improvements. |
| c. Is there a current sufficiently comprehensive curriculum map(s) in place? For undergraduate programs, are ILOs included? | Y   |    | Old curriculum maps were revised (Summer 2016)-well done! Numerous curriculum maps (MSN PLOs, BRN Required Content, QSEN Competencies, CNL Competencies, Exit HESI Blueprint)-unclear if all are necessary or if they have been used to assess the efficacy of content taught in these courses   |

| 2. | d. Is there a direct measure used to assess if students' learn what is being taught?  Outcomes data (must minimally include: time to graduation, attrition, 1st time pass rate (NCLEX/NP certification), employment, and results from using one direct measure). | Y | Analysis of exit HESI outcomes is an excellent example of using a direct measure-lots of great work accomplished to put this in place and to make genuine use of this direct measure.  |
|----|--|---|--|
|    | a. Were the Program Evaluation Plan (PEP) and other program specific benchmarks reached?   | Р | Data is collected but not consistently. Information has not been consistently reported out to faculty/students and faculty have not consistently developed action plans in response to the data.   |
|    | b. Were there faculty developed action plans?  | Р | Not consistently   |
|    | c. Based on findings, were faculty develop action plans captured in department committee minutes?  | Р | Not consistently but for the exit HESI this was fully addressed.   |
| 3. | Closing the loop   |   |  |
|    | a. What was shared and with who? (evidence)  | Р | With faculty but not with others (students, applicants, community)   |
|    | b. How was it shared?  | Υ | With faculty this occurred during several faculty meetings and during 2016 Summer retreats.  |
|    | c. What impact did this have and what was<br>learned/revised-captured in department committee<br>minutes?  | Y | Faculty developed authentic meaningful action plans to improve courses. For the 1st time this information was also shared at a department meeting (1/30/17). Impressive work, significant positive impact to make genuine improves in this program |

## PEC Feedback/Priorities:

- 1. URGENT PRIRORITY CNL pass rates that fall below CCNE standards
  - a. Assess if the CNL Competencies curriculum map is correct (see information reported at national 2017 CNL conference)
  - b. Assess CNL course content with the most current/accurate curriculum map
  - c. Faculty/student to develop action plans to make course improvements deemed necessary
  - d. Report findings to faculty, students, applicants, community
- 2. Develop a program goal basically a summary statement of the MSN PLOs

- 3. Assess the effectiveness of the content being taught in courses using the curriculum maps (MSN PLOs, BRN Required Content, QSEN Competencies, CNL Competencies, Exit HESI Blueprint-accomplished but continue to monitor given low NCLEX pass rate). Determine if all curriculum maps are necessary-are there redundancies among the curriculum maps so that one may be eliminated? In the ME-MSN Assessment Plan, identify a timeline for the frequency of this activity.
- 4. For program outcome data required by the Program Evaluation Plan (PEP), develop a timeline for collecting, reporting out and generating action plans for continuous program improvement.
- 5. Close the loop with students, applicants and the community. When closing the loop (e.g. with students, community) use this as an opportunity for student input and overall engagement in supporting program improvement initiatives (reporting employment, CNL exam outcomes, etc.). In the ME-MSN Assessment Plan, identify a timeline for the frequency of this activity