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

Program: <u>RN-MSN</u>

Presenter(s): <u>Elena Capella</u>

Date: <u>March 23, 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 this year. See PEC feedback priorities below.
b. Is there an assessment plan? Is it sufficiently comprehensive?	P*		Indicators follow PEP plan but some data (employment) is not being used for ongoing monitoring of program
c. Is there a current sufficiently comprehensive curriculum map(s) in place? For undergraduate programs, are ILOs included?	Y		A particular strength of the RN-MSN program. There are an extensive number of curriculum maps. The curriculum map for CNL content may need to be revised given low CNL pass rate but curriculum maps are in place.
d. Is there a direct measure used to assess if students' learn what is being taught?		N	This is a new PEC requirement and there are a number of opportunities for the RN-MSN program to institute use of a direct measure. As discussed the posters student produced could be graded with a rubric aligned to the PLOs that provides both individual student feedback but also is used to aggregate data to assess the effectiveness of courses.
2. Outcomes data (must minimally include: time to graduation, attrition, 1st time pass rate (NCLEX/NP certification), employment, and results from using one direct measure).			

a. Were the Program Evaluation Plan (PEP) and other program specific benchmarks reached?	N		CNL pass rate is a known area of concern.
b. Were there faculty developed action plans?	Y		CNL pass rate is an area of continued discussion and concern.
c. Based on findings, were faculty develop action plans captured in department committee minutes?	Y		Episodically captured in department minuets.
3. Closing the loop			
a. What was shared and with who? (evidence)	Y		Frequently discussed in faculty meetings. Students learn about the data in a CNL course at the end of the program, s a courses
b. How was it shared?	Y		Faculty meetings, students learn about it in a formal CNL course at the end of the program.
c. What impact did this have and what was learned/revised-captured in department committee minutes?	Y		Previously the CNL exam was required, based on student and faculty feedback-the CNL exam was not required. It is not clear if this is how working-again, faculty are in discussion about more strongly encouraging students to take the exam.

P* Partial
Y Yes
N No

PEC Feedback/Priorities:

1. Develop a comprehensive action plan in response to low CNL pass rates. If faculty decide to continue to not require the CNL exam (history of this as a requirement was not successful in the past), then design some strategies to increase the number of students who sit for this examination. PEC committee member suggested sharing CNL outcome data to students at the start of the program rather than at the end of the program in one of the last CNL courses.

2. Implement a direct measure of a student artifact that will allow aggregate data to be used to evaluate the effectiveness of program courses. This will allow the curriculum maps to generate data used to make course improvements. Curriculum maps therefore become not only a roadmap about where content is taught but also, will then help identify strengths and weaknesses of the courses.

3. Develop a program goal (summary statement from PLOs) for the RN-MSN program. Consider having this goal statement reflect what is unique about USF (e.g. some component of USF mission).

4. While the program evaluation plan identifies employment rates will be monitored, the data presented was from 2014. Institute a process for the collection of employment data that is minimally reviewed by program faculty, students, and prospective applicants.

5. Ensure that faculty dialogue/planning accomplished in RN-MSN meetings is captured in MSN department meetings for purposes of general tracking and documenting