

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

Program: BSN Program

Presenter(s): Anna Kwong

Date: April 26, 2017

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 PL0s)		N	No program goal was presented.
b. Is there an assessment plan? Is it sufficiently comprehensive?	P		Components are well developed e.g. employment and NCLEX outcomes. Time frames for how frequently the data is collected is not consistently adhered to.
c. Is there a current sufficiently comprehensive curriculum map(s) in place? For undergraduate programs, are IL0s included?	P		There are 7 IL0s, one was mapped to the BSN program. It is unclear if the other 6 IL0s relate to the BSN program.
d. Is there a direct measure used to assess if students' learn what is being taught?	P		The direct measure (HESI scores S02 and Sr2) are used to hold students accountable but, of critical importance, it is not being used for continuous course/program improvement.
2. Outcomes data (must minimally include: time to graduation, attrition, 1 st 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?	Y	A particular strength of the BSN program, when data is collected the end outcome metrics are monitored and shared with faculty.
b. Were there faculty developed action plans?	N	Data is presented, faculty need to develop action plans for course/program improvements.
c. Based on findings, were faculty develop action plans captured in department committee minutes?	N	Not consistently.
3. Closing the loop		
a. What was shared and with who? (evidence)	Y	Sometimes with BSN department faculty and at other times during BSN CIRP meetings.
b. How was it shared?	Y	Sometimes by the BSN Department Chair with department faculty, at other times during CIRP meetings.
c. What impact did this have and what was learned/ revised-captured in department committee minutes?	N	No action steps were developed in response to the data (e.g. gaps in HESI outcomes).

P Partial

N No

Y Yes

PEC Feedback/Priorities:

1. Remaining 6 ILOs (7 total) must be presented to the BSN department to assess if they are addressed in the BSN program.
2. Develop a BSN program goal.
3. Using HESI as the direct measure for course/program improvements, gaps in HESI outcomes must result in course improvements. Use trend data not one time test results. It is recommended to use 3 sets of HESI outcome data to confirm trends related to strengths and gaps in HESI outcomes.
4. Determine if program assessment/evaluation should occur at CIRP meetings or BSN department meetings.
5. There is a need for greater consistency in collecting, reporting and creating action steps in response to student outcome data. Develop a systematic plan that fits to a timeline. Lastly, provide direct support for faculty to generate action steps in response to program outcome data.
6. 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, NCLEX outcomes, etc.). In the BSN Assessment Plan, identify a timeline for the frequency of this activity