



COMPREHENSIVE ACADEMIC PROGRAM REVIEW

Note: Enter "NA" wherever data are not applicable or not available for the program under review.

Program Characteristics

Academic Program Name: **Nursing (RN-BSN)**

Degree: **Bachelor of Science (B.S.N.)**

Program CIP Code: **51.3801**

School and Department: **School of Health Professions**

Time frame for this review: **2018**

Date of last internal review: This is the first review since the program inception in 2013.

Current date program reviewed for this report: 2020

Program Goal Statement and Student Learning Outcomes

Program goal statement:

Provide accessibility and seamless progression for ASN/ADN-level registered nurses to obtain a BSN degree.

Program outcomes:

- 1) Synthesize knowledge from nursing and related disciplines in the provision and improvement of care to clients within the health-illness continuum throughout the life span.
- 2) Utilize creative leadership to promote quality health care and patient safety in a rapidly changing multicultural, multiethnic, global environment.
- 3) Use appropriate and current technology and skills in the delivery of safe and effective patient care.
- 4) Function as an advocate and change agent in influencing healthcare policies, delivery, economics, and health disparities to improve the quality of health for diverse populations.
- 5) Collaborate and communicate with members of the health care team in the delivery of individualized, cost-effective, and ethical health care services.
- 6) Demonstrate an understanding of accountability, responsibility, values, and standards of moral, ethical, and legal conduct that impact the role and practice of the professional nurse.
- 7) Utilize theoretical knowledge and clinical competencies in caring for culturally diverse populations in a variety of clinical settings.
- 8) Pursue higher degrees in nursing (such as a master's degree or doctorate).

Student learning outcomes

SAFETY - Implements, appraises, critiques, develops, and defends the nursing process to provide safe and effective nursing care applying current evidence-based practice standards appropriate to the needs of the patient or population.



COMPREHENSIVE ACADEMIC PROGRAM REVIEW

PROFESSIONALISM - Implements and formulates professional nursing with the legal, ethical, and regulatory framework of the profession.

PATIENT CENTERED CARE - Designs and implements priority-based patient-centered care that respects the individual preferences, values, and needs.

TEAMWORK AND COLLABORATION - Demonstrates assessment skills when collaborating with the interdisciplinary team using appropriate communication techniques to achieve quality care. Demonstrates leadership skills when directing the interdisciplinary team using appropriate communication techniques to achieve quality care.

EVIDENCE-BASED PRACTICE AND TECHNOLOGY - Differentiates the different uses of evidence-based practice and technology to achieve high quality patient care. Supports and formulates ideas and appraises the different uses of EBP and technology to achieve high quality patient care. Designs capstone using EBP and technology to achieve high quality patient care.



COMPREHENSIVE ACADEMIC PROGRAM REVIEW

Brief Assessment of Previous Program Review

Outcome of previous program review (brief narrative statement).

This is the first comprehensive program review (CPR) for this program since its inception in 2013.

What improvements have occurred since the last program review or assessment?

Since the program's inception in 2013, the original hybrid program has gone completely online. The RN-BSN program went from one cohort a year in the fall to two, fall and spring. Class size increased from a planned initial cohort of 15 students per cohort to 25 students per cohort.

What changes or revisions have been made to the program, its curriculum, or its program/student learning outcomes since the last program review? Please include a follow-up discussion of the previous review's action plan?

N/A



COMPREHENSIVE ACADEMIC PROGRAM REVIEW

Student Demographics for Students Enrolled in NURS 4000 – Fall 2013 – Fall 2017 (will include 2 Spring cohorts – Spring 2016 & Spring 2017)

Enrollment	Fall 2013	Fall 2014	Fall 2015	Spring 2016	Fall 2016	Spring 2017	Fall 2017	% Change
Headcount	23	34	28	25	25	15	24	4.3%
FTE	15.33	19.75	17.75	14.08	14.00	9.58	15.83	3.3%
Enrolled, Full-time	5	2	4	1	0	1	2	-60%
Enrolled, Part-time	18	32	24	24	25	14	22	22.2%
Female	20	27	24	21	23	14	22	10%
Male	3	7	4	4	2	1	2	-33.3%
Alaskan Native/Native American/American Indian	1	0	0	0	0	0	0	-100%
Asian, Hawaiian, Other Pacific Islander	2	1	0	0	0	0	0	-100%
Black/African-American	0	0	0	1	0	0	0	0%
Hispanic	1	2	0	1	1	1	2	100%
Multi-racial	0	0	0	0	1	0	0	0%
Undeclared	0	0	0	0	0	0	0	0%
White	19	31	28	23	23	14	22	15.8%

Analysis and comments on student demographics.

The analysis of the student demographics using students who were enrolled in NURS 4000: Evidenced-Based Practice from Fall 2013 to Fall 2017 shows a 4.3% increase in headcount and a 3.3% increase in FTE. The contributing factor to this increase can be directly attributed to taking two cohorts a year, which started in Spring 2016.

The 60% decrease in full-time enrollment can be attributed to the students who have completed most if not all of the pre-requisites for the RN-BSN program before starting the program. The RN-BSN program does not require 12 hours per semester; therefore, the program is not a full-time per semester program. This also explains the 22.2% increase in part-time enrollment.



COMPREHENSIVE ACADEMIC PROGRAM REVIEW

According to "Minority Nurse" (<https://minoritynurse.com/nursing-statistics/>), 90.9% of registered nurses (RNs) are female, and 9.1% are male. Our 10% increase in RN-BSN female students and the 33.3% decrease in male students is consistent with the gender statistics as reported by "Minority Nurse." The remaining demographic analysis also fits the statistical findings reported in "Minority Nurse."



COMPREHENSIVE ACADEMIC PROGRAM REVIEW

Faculty Indicators of Program Quality	Fall 2013	Fall 2014	Fall 2015	Fall 2016	Fall 2017	% Change
School (not Department) faculty teaching in program (excluding Areas A through E)	3	3	3	4	5	66.6%
Full-time program faculty	2	3	3	4	5	150%
Part-time program faculty	1	0	0	0	0	-100%
Total program faculty	3	3	3	4	5	66.6%
Percent of program classes taught by full-time program faculty	66.6%	100%	100%	100%	100%	50.2%
Gender (full-time and part-time faculty)	Fall 2013	Fall 2014	Fall 2015	Fall 2016	Fall 2017	% Change
Male	0	0	0	0	0	0%
Female	3	3	3	4	5	66.6%
Race/Ethnicity (full-time and part-time faculty)	Fall 2013	Fall 2014	Fall 2015	Fall 2016	Fall 2017	% Change
Alaskan Native/Native American/American Indian	0	0	0	0	0	0%
Asian, Hawaiian, Other Pacific Islander	0	0	0	0	0	0%
Black/African-American	0	0	0	0	0	0%
Hispanic	0	0	0	0	0	0%
Multi-racial	0	0	0	0	0	0%
Undeclared	0	0	0	0	0	0%
White	3	3	3	4	5	66.6%
Tenure Status (full-time faculty)	Fall 2013	Fall 2014	Fall 2015	Fall 2016	Fall 2017	% Change
Tenured	1	0	0	1	2	100%
On-tenure track	1	3	3	3	3	200%
Non-tenure track	0	0	0	0	0	0%
Rank (full-time faculty)	Fall 2013	Fall 2014	Fall 2015	Fall 2016	Fall 2017	% Change
Professor	1	0	0	0	0	0%
Associate Professor	1	1	0	1	2	100%
Assistant Professor	0	2	3	3	3	300%
Instructor/Senior Lecturer/Lecturer	0	0	0	0	0	0%



COMPREHENSIVE ACADEMIC PROGRAM REVIEW

Faculty Indicators of Program Quality

Highest degree (full-time faculty)	2013-14	2014-15	2015-16	2016-17	2017-18	% Change
Doctorate	1	1	1	2	1	0%
Specialist	0	0	0	0	0	0%
Master's	1	2	2	2	4	300%
Bachelor's	0	0	0	0	0	0%
Associate's/Other	0	0	0	0	0	0%

Provide additional details, analysis, and comments regarding faculty indicators of program quality.

When the hybrid RN-BSN program began in Fall 2013, there were two full-time tenured track master's-level shared faculty teaching in the program, one associate professor and one assistant professor. Shared faculty indicates these teachers taught in both the ASN program and taught as an overload in the RN-BSN program. There was also one doctorate prepared adjunct faculty who consulted on the design of the program and also taught two classes in the 2013-2014 year, one per semester. In year two of the program, 2014-2015, there were three full-time tenure-track faculty, one associate professor and two assistant professors. One had achieved her doctorate and the other two were master's prepared. In 2014-2015 and 2015-2016, the data did not change from the 2014-2015 year except for the 2015-2016 year; all three faculty were assistant professors.

In 2016-2017, we started having two cohorts, and one of the RN-BSN faculty completed her doctorate, thereby giving us the numbers of two full-time, tenure-track, doctorate prepared assistant professors and two full-time, tenure-track, master's faculty, one assistant and one associate.

In 2017-2018, one of the doctorate prepared faculty left the Nursing Department to help open the Health Clinic. In addition, the national accrediting body, the Accreditation Commission for Education in Nursing (ACEN), instituted new 2017 Standards that stipulated that full-time nursing faculty should not teach more than one overload per semester. Consequently, an increase in nursing faculty was needed. Under these changes and guidelines, the program had one doctorate prepared, tenure-track, full-time faculty member; two master's-level, tenured, full-time faculty members; and two master's-level, tenure-track, full-time faculty members.

As indicated by the data provided, the program is showing an increase in more tenured (200%), full-time faculty (150%), with a 100% increase in associate professors over the 50% of assistant professors teaching in the program. These increases are comparable with the increase in enrollment of students (4.3%).



COMPREHENSIVE ACADEMIC PROGRAM REVIEW

Indicators of Measures of Quality

Student Input	Fall 2013	Fall 2014	Fall 2015	Fall 2016	Fall 2017	% Change
Mean ACT score	21.6	22	22.4	22.3	22.9	6.0%
Mean SAT score	479	489	486	495	501	4.6%

If applicable to your degree program, provide any additional external quality assurance data/information or results (e.g., professional accreditation results, National Survey of Student Engagement [NSSE], market rankings, etc.).

From our most recent national accreditation site visit, the percentage of program completion is listed below:

Table 6.3.2 RN-BSN Program Completion Three-Year Trend

Semester and Year of Admission	Original Enrollment	Graduated in 6 Semesters or Less	Percentage of Program Completion
Spring 2018	22	21	95
Fall 2017	25	22	88
Spring 2017	16	15	94
Fall 2016	25	24	96
Spring 2016	24	24	100
Fall 2015	28	28	100



COMPREHENSIVE ACADEMIC PROGRAM REVIEW

Indicators of Measures of Quality

Student Output	2013-14	2014-15	2015-16	2016-17	2017-18	% Change
Exit scores on national/state licensure (if applicable)	n/a	n/a	n/a	n/a	n/a	n/a
Graduating majors' mean GPA	3.42	3.51	3.35	3.50	3.43	0.3%
Employment rate of graduates (if available)	100%	100%	100%	100%	100%	0%
Number of students entering graduate/professional programs			70%	60%	75%	7.1%

Describe the extent to which students have achieved current program outcomes during this program review cycle (most recent year).

Program Learning Outcomes (PLOs):

PLO 1: 90% of students will score an 8 on PICOT breakdown and 90% of students will complete a literature review with a 75% or better. Actual Level of Achievement (ALA) for years 2016 to 2018 completion range was 98 to 100%. ALA met, no action taken at this time; maintain current evaluation methods.

PLO 2: 90% of students will complete the classes in N3100 Perspectives on USA Health Systems and N4100 Management/Leadership/Groups/Community. Actual Level of Achievement (ALA) for years 2016 to 2018 completion range was 96 to 100%. ALA met, no action taken at this time; maintain current evaluation methods.

PLO 3: 90% of students will use current technology. Actual Level of Achievement (ALA) for 2018 was 95 to 100%. ALA met, no action taken at this time; maintain current evaluation methods.

PLO 4: 90% of students will achieve an 80% or better class average in N4000 Evidenced-Based Practice. Actual Level of Achievement (ALA) for years 2016 to 2018 completion range was 96 to 100%. ALA met, no action taken at this time; maintain current evaluation methods.

PLO 5: 90% of students will disseminate their evidenced-based practice (EBP) project in N4200 Nursing Capstone through voiceover PowerPoint (PPT) or a poster presentation. Actual Level of Achievement (ALA) for years 2016 to 2018 was 100%. ALA met, no action taken at this time; maintain current evaluation methods.

PLO 6: 80% of students will score 75% or higher on the Head-To-Toe Assessment, quizzes, and tests combined in N3000 Health Assessment. Actual Level of Achievement (ALA) for years 2016 to 2018 completion range was 80 to 100%. ALA met, no action taken at this time; maintain current evaluation methods.

PLO 7: 80% of students will achieve 75% or higher average on assignments in the Shadow Health program in N3000 Health Assessment. Actual Level of Achievement (ALA) for years 2016 to 2018 completion range was 88 to 100%. ALA met, no action taken at this time; maintain current evaluation methods.

PLO 8: 50% of RN-BSN graduates will express an intent to enroll in a master's program within 2 years post-graduation. Results were obtained from Survey Monkeys emailed to graduates 6 to 12 months post-graduation. Actual Level of Achievement (ALA) for years 2016 to 2018 completion range was 60 to 75%. ALA met, no action taken at this time; maintain current evaluation methods.



COMPREHENSIVE ACADEMIC PROGRAM REVIEW

Describe the extent to which students have achieved current student learning outcomes during this program review cycle (most recent year).

SLO 1 – SAFETY: 80% of students will score 75% or higher on the Head-To-Toe Assessment, quizzes, and tests combined in N3000 Health Assessment. Actual Level of Achievement (ALA) for years 2016 to 2018 completion range was 80 to 100%. ALA met, no action taken at this time; maintain current evaluation methods.

SLO 2 – PROFESSIONALISM: 90% of students will disseminate their Evidenced-Based practice (EBP) project in N4200 Nursing Capstone through voiceover PowerPoint (PPT) or a poster presentation. Actual Level of Achievement (ALA) for years 2016 to 2018 was 100%. ALA met, no action taken at this time; maintain current evaluation methods. 50% of RN-BSN graduates will express an intent to enroll in a master's program within 2 years post-graduation. Results obtain from Survey Monkey emailed to graduates 6 to 12 months post-graduation. Actual Level of Achievement (ALA) for years 2016 to 2018 completion range was 60 to 75%. ALA met, no action taken at this time; maintain current evaluation methods.

SLO 3 – PATIENT CENTERED CARE: 90% of students will achieve an 80% or better class average in N4000 Evidenced-Based Practice. Actual Level of Achievement (ALA) for years 2016 to 2018 completion range was 96 to 100%. ALA met, no action taken at this time; maintain current evaluation methods.

SLO 4 – TEAMWORK AND COLLABORATION: 80% of students will achieve 75% or higher average on assignments in the Shadow Health program in N3000 Health Assessment. Actual Level of Achievement (ALA) for years 2016 to 2018 completion range was 88 to 100%. ALA met, no action taken at this time; maintain current evaluation methods.

SLO 5 – EVIDENCE-BASED PRACTICE AND TECHNOLOGY: 90% of students will achieve an 80% or better class average in N4000 Evidenced-Based Practice. Actual Level of Achievement (ALA) for years 2016 to 2018 completion range was 96 to 100%. ALA met, no action taken at this time; maintain current evaluation methods. 90% of students will use current technology. Actual Level of Achievement (ALA) for 2018 was 95 to 100%. ALA met, no action taken at this time; maintain current evaluation methods.

Indicators of Measures of Quality

If available, provide additional information and/or results of other indicators of quality related to student output such as completer satisfaction surveys, employer satisfaction surveys, stakeholder satisfaction surveys, completion and continuation rates, attrition rates, starting salaries of graduates, etc.

From our most recent national accreditation site visit, the percentages of program completion and job placement from Standard 6 are listed below:

Criterion 6.3 The program demonstrates evidence of students' achievement in completing the nursing program.

- The expected level of achievement for program completion is determined by the faculty and reflects student demographics.
- There is ongoing assessment of the extent to which students complete the nursing program.

- There is analysis of assessment data and documentation which demonstrates that the analysis of data is used in program decision-making for the maintenance and improvement of students' completion of the nursing program.
- There is a minimum of three most recent years of annual program completion data.
- Data are aggregated for the nursing program as a whole as well as disaggregated by program option, location, and date of program completion or entering cohort.

PLAN			IMPLEMENTATION							
Assessment Method	Expected Level of Achievement (ELA)	Assessment Method and Time Frame	Results of Data Analysis Including Actual Level(s) of Achievement (ALA)	Action(s) Taken for Development, Maintenance, or Revision						
<p>Program Completion:</p> <p>The nursing department will gather data and track students entering the program and completing within three semesters.</p>	80% of students entering the program will complete the program within three semesters.	Assessed at the end of each semester with final cohort evaluation reported in May.	<p>For years 2016-2018, ELA met.</p> <p>Aggregated 2018 ALA: 92%</p> <p>Disaggregated 2018 Completion Rate:</p> <table border="1" data-bbox="922 1293 1214 1670"> <thead> <tr> <th>Fall 2018</th> <th>Spring 2018</th> <th>2018 Total by Cohort Graduation</th> </tr> </thead> <tbody> <tr> <td>96%</td> <td>88%</td> <td>92%</td> </tr> </tbody> </table> <p>Aggregated 2017 ALA: 95%</p> <p>Disaggregated 2017 Completion</p>	Fall 2018	Spring 2018	2018 Total by Cohort Graduation	96%	88%	92%	<p>There is no action that is needed at this time. The results are presented at the annual Nursing Advisory Committee meeting and on DSC's nursing webpage.</p> <p>ALAs have trended above ELA for past three years. No changes required at this time. Will continue to meet our</p>
Fall 2018	Spring 2018	2018 Total by Cohort Graduation								
96%	88%	92%								

			<p>Rate:</p> <table border="1"> <tr> <td>Fall 2017</td> <td>Spring 2017</td> <td>2017 Total by Cohort Graduation</td> </tr> <tr> <td>94%</td> <td>96%</td> <td>95%</td> </tr> </table> <p>Aggregated 2016 ALA: 100%</p> <p>Disaggregated 2016 Completion Rate:</p> <table border="1"> <tr> <td>Fall 2016</td> <td>Spring 2016</td> <td>2016 Total by Cohort Graduation</td> </tr> <tr> <td>100%</td> <td>100%</td> <td>100%</td> </tr> </table>	Fall 2017	Spring 2017	2017 Total by Cohort Graduation	94%	96%	95%	Fall 2016	Spring 2016	2016 Total by Cohort Graduation	100%	100%	100%	ELA.
Fall 2017	Spring 2017	2017 Total by Cohort Graduation														
94%	96%	95%														
Fall 2016	Spring 2016	2016 Total by Cohort Graduation														
100%	100%	100%														

Criterion 6.4

The program demonstrates evidence of graduates' achievement in job placement.

- The expected level of achievement for job placement is determined by the faculty and reflects program demographics.
- There is ongoing assessment of the extent to which graduates are employed.
- There is analysis of assessment data and documentation that the analysis of assessment data is used in program decision-making for the maintenance and improvement of graduates being employed.
- There is a minimum of the three most recent years of available job placement data.

- Data are aggregated for the nursing program as a whole.

PLAN			IMPLEMENTATION							
Assessment Method	Expected Level of Achievement (ELA)	Assessment Method and Time Frame	Results of Data Analysis Including Actual Level(s) of Achievement (ALA)	Action(s) Taken for Development, Maintenance, or Revision						
<p>Data is collected through Survey Monkey sent out 6 months to one-year post graduation to recent graduates.</p> <p>Survey Monkey question #3: "Which of the following categories best describes your employment status?"</p> <ul style="list-style-type: none"> Employed, working 40 or more hours Employed, working 1 to 39 hours Not employed, looking for work Retired Disabled, not able to work 	<p>90% of graduates will be employed and will show positive job changes due to obtaining a BSN degree.</p>	<p>Survey Monkey</p> <p>Reported in Spring</p>	<p>For years 2016-2018, ELA met based on part- and full-time employment as a registered nurse.</p> <p>Aggregated Employed as RN 2018 ALA: Pending</p> <p>Disaggregated Employed as RN 2018:</p> <table border="1" data-bbox="906 1172 1263 1549"> <tr> <td>Fall 2018</td> <td>Spring 2017</td> <td>2018 Total Part & Full-Time Employed</td> </tr> <tr> <td>Pending</td> <td>Q3: 94%</td> <td>94% YTD</td> </tr> </table> <p>Aggregated Employed as RN 2017 ALA: 100%</p> <ul style="list-style-type: none"> No disaggregated data obtained, annual survey sent out for both 2017 	Fall 2018	Spring 2017	2018 Total Part & Full-Time Employed	Pending	Q3: 94%	94% YTD	<p>There is no action that is needed at this time. The results are presented at the annual Nursing Advisory Committee meeting.</p> <p>ALA's have trended above ELA for past three years. No changes required at this time. Will continue to meet our ELA.</p>
Fall 2018	Spring 2017	2018 Total Part & Full-Time Employed								
Pending	Q3: 94%	94% YTD								



COMPREHENSIVE ACADEMIC PROGRAM REVIEW

<p>And question #8: "Which of the following best describes your job changes after BSN graduation?"</p> <ul style="list-style-type: none"> • Team leader • Increased salary • Middle management • Intermediate management • More responsibility • Other 			<p style="text-align: center;">cohorts.</p> <p>Aggregated Employed as RN 2016 ALA: 97.6%</p> <ul style="list-style-type: none"> • No disaggregated data obtained, annual survey sent out for both 2016 cohorts.
--	--	--	--

Describe efforts undertaken to achieve and maintain curricular alignment within the program and currency to the discipline.

The Nursing Department committee structure includes a curriculum committee. Each semester the RN-BSN team reviews curriculum alignment to meet the standards of our program, the Nursing Department, the Georgia Board of Nursing, and our national accrediting body, the Accreditation Commission for Education in Nursing (ACEN). This evaluation is reported to our curriculum committee for review and evaluation.

Any structural or curriculum changes determined to be needed by the course faculty and approved by the RN-BSN teaching team as well as the RN-BSN director will then be sent by the director to the curriculum committee. If approved by the curriculum committee, the changes will go before the whole nursing faculty for approval.

Each semester, each faculty member will evaluate the student learning and program outcomes per course. This evaluation is reported at the end of semester RN-BSN Program meetings and in the Full Nursing Faculty Meeting. If an SLO or PLO is not met, then a plan of action is presented when the report is given.

Further information can be reviewed in the Curriculum Committee bylaws:

CURRICULUM COMMITTEE BYLAWS

Name: Curriculum Committee

Curriculum development in nursing education is a scholarly and creative process intended to produce an evidence-informed, context-relevant, unified curriculum. Curriculum development is an ongoing activity in nursing education, based on empirical evidence and educational theory. These bylaws are a guide for the

curriculum committee to assure articulation of student learning and program outcomes, and to support nurse educators in knowing how to achieve these goals.

These are the four main approaches involved in the change of curriculum.

Addition: - New elements are added to the existing curriculum.

Deletion: - Some elements are deleted to modify the curriculum.

Re-organization: - Nothing is added or deleted but only reconstruction of the existing curriculum is done.

Curriculum revision: - Making modifications and changes in the current curriculum to give new direction.

Revision involves making changes in the existing curriculum in its aims, objectives, course contents, learning outcomes, and assessment strategies.

Objective:

The purpose of the curriculum committee is to assure that the curriculum of each course of study in the Nursing Department reflects the knowledge and skills identified as necessary for competent progression of student learning outcomes.

The objective of the committee is to:

1. Annually evaluate the mission, philosophy, purposes objectives, curriculum, and courses for the ASN, BSN, and LPN nursing programs.
2. Evaluate the curriculum in an ongoing manner.
3. Recommend curricular changes to the Department of Nursing faculty for vote.
4. Forward proposed curricular changes to the chair of the Nursing Program.
5. Write designated section(s) of Self-Study Reports for accreditation.
6. Review and recommend revisions of these bylaws.

Membership:

Membership is reflective of selected members of all nursing faculty (LPN, ASN, BSN) with each member having one voting right. The term of membership shall be two years with members rotating off after serving two years. The chair of the Nursing Department will determine new faculty members after a vacancy occurs. Committee assignments are based on faculty responsibilities and required faculty participation in departmental governance.

Officers:

The Curriculum Committee chair is appointed by the chair of the Nursing Department from the returning committee members to ensure experience with committee responsibilities. The Curriculum Committee Chair will abide by Robert's Rule of Order and shall be responsible for scheduling the meetings and taking minutes using the meeting template.

Meetings:

Meetings will be held at least twice a semester. Authority for special meetings will be the decision of the chair of the committee based on need. A quorum for meetings shall be 75% of appointed members if a vote is required.

Responsibilities of Committee Members and Faculty:



COMPREHENSIVE ACADEMIC PROGRAM REVIEW

Curriculum Committee Responsibilities:

It is the responsibility of the Curriculum Committee members to ensure that proper steps are taken when curriculum is added, modified, or eliminated and that such changes are communicated at the full faculty meeting to all faculty and programs.

Individual voting members of the Curriculum Committee are thereby expected to fulfill the following duties:

1. Attend all Curriculum Committee meeting.
2. Serve as a resource to assist faculty in the development of curriculum proposals.
3. Compile course evaluations as submitted by the faculty at the close of each semester.

It is the responsibility of the Nursing Faculty to submit curriculum additions, modifications, or eliminations to the Curriculum Committee for approval:

4. Evaluate courses based on Student and Program Learning Outcomes
5. Modification of an Existing Course
6. Creation of a New Course
7. Modification of an Existing Program
8. Creation of a New Program

Indicators of Measures of Viability

Internal Demand for the Program	Fall 2013	Fall 2014	Fall 2015	Fall 2016	Fall 2017	Fall 2018	% Change
Number of students enrolled in the degree program	24	34	27	25	24	22	-8.33%
Number of students who applied to the program (if applicable)	49	56	70	38	26	24	-51.0%
Number of students admitted to the program (if applicable)	24	34	27	25	24	22	-8.33%
Percent of classes taught by full-time faculty	66.6%	100%	100%	100%	100%	100%	50.2%

Describe additional details as deemed appropriate.

The RN-BSN program began a second Spring cohort starting spring 2016. Here are the Spring indicators of measures of viability for Spring 2016, 2017, and 2018:

Spring 2016:

Enrolled – 25

Applied – 37

Admitted – 25

Full-time faculty taught – 100%



COMPREHENSIVE ACADEMIC PROGRAM REVIEW

Spring 2017:

Enrolled – 15

Applied – 19

Admitted – 15

Full-time faculty taught – 100%

Spring 2018:

Enrolled – 20

Applied – 24

Admitted – 20

Full-time faculty taught – 100%

Indicators of Measures of Productivity

Graduation	2013-14	2014-15	2015-16	2016-2017	2017-18	% Change
Number of degrees conferred	21	34	28	49	48	128%
Total student credit hours earned	126.8	112.3	121.9	125.2	115.4	-9.0%

Describe any institutional-specific factors impacting time to degree.

One of the biggest, if not the only, institutional-specific factor impacting time of the RN-BSN degree is the non-nursing courses. The RN-BSN program is an all online degree program. Most of the additional undergraduate courses required for this degree are not. With the majority (usually all) of the students working full-time, the RN-BSN all online component is more conducive to their work and life schedules. The feedback we get from students targeting the hardest factor to overcome is finding time to come to campus for the additional core courses.

One of the most beneficial institutional-specific solutions would be to continue to have more, if not all, of our core courses have both a face-to-face and online capability.



COMPREHENSIVE ACADEMIC PROGRAM REVIEW

Evidence of Program Viability

Based on evidence from **ALL** of the above information, data, and analysis, discuss whether continued resources should be devoted to this program. This discussion must be evidence-based. Your comments should consider external factors and address questions such as the following: Are your students getting jobs? What is the job outlook for graduates? Are students prepared for the jobs they get? How is the field changing? Are program faculty members in contact with employers and getting back feedback on graduates' job performance? Do employers state or suggest a need for changes in the program?

The Institute of Medicine's (IOM) The Future of Nursing report (2011), which recommends that 80% of nurses have a bachelor's degree by the year 2020. Most health care agencies agree that nurses educated at the baccalaureate level are better positioned to lead the charge on holistic, preventative care. Many health care organizations, especially those with Magnet designation, already require a BSN for entry-level employment (ANCC, 2018).

Disciplinary trends show that nurse executives, federal agencies, the military, leading nursing organizations, health care foundations, magnet hospitals, and minority nurse advocacy groups all recognize the unique value that baccalaureate-prepared nurses bring to the practice setting (AACN, 2017a). BSN-trained nurses are more apt to use and apply evidenced-based standards of care. And research suggests hospitals that employ nurses with their BSN achieve lower mortality rates, meaning patients receive a higher quality of care overall (AACN, 2017b).

The program is accessible for ASN graduates who are working a full-time job. The students are encouraged to come back to get their BSN by the facilities whom they are working for and will continue to work for after they graduate. Many are given reimbursement to obtain their degree if they pass the classes. Feedback has been



COMPREHENSIVE ACADEMIC PROGRAM REVIEW

overwhelmingly positive with 98% of students who say they are satisfied with their education. Feedback from employers has been very positive. Facilities that are desiring to have more BSN level students have been the driving force that continues to motivate our program to continue and grow.

References

American Association of Colleges of Nursing (AACN). (2017a). The baccalaureate degree in nursing as minimal preparation for professional practice. Retrieved from <https://www.aacnnursing.org/News-Information/Position-Statements-White-Papers/Bacc-Degree-Prep>.

American Association of Colleges of Nursing (AACN). (2017b). Baccalaureate education. Retrieved from <https://www.aacnnursing.org/Nursing-Education-Programs/Baccalaureate-Education>.

American Nurses Credentialing Center (ANCC). (2018). ANCC magnet recognition program. Retrieved from <https://www.nursingworld.org/organizational-programs/magnet/>.

Institute of Medicine (IOM). (2011). *The future of nursing: Leading change, advancing health*. Washington, DC: The National Academies Press. Retrieved from https://download.nap.edu/catalog.php?record_id=12956.



COMPREHENSIVE ACADEMIC PROGRAM REVIEW

Program Strengths and Weaknesses

Based upon this review, what are the strengths and weaknesses of the program?

Strengths:

The program fulfills a need for BSN nurses that are 100% employed by the hospitals and facilities in the area. The Office of Disease Prevention and Health Promotion's (DPHP) Healthy People 2020 initiative, the National Health Service (NHS), and the American Nurses Association (ANA) have all recognized a need to have at least 80% of nurses with a BSN degree to provide safe and effective care. Our RN-BSN graduates meet these standards and needs.

The RN-BSN program is online for the major courses, and most all core courses can be obtained online through eCore classes making the whole program a distance education degree. If a student has completed all core courses, the program can be completed in 2 to 3 semesters.

The program takes two cohorts a year, fall and spring, and is one of the most affordable RN-BSN programs on the market.

Weaknesses and concerns:

There was a concern that the first spring cohort would not have enough interest for a full class as students were not aware that there were two cohorts.

A weakness for our RN-BSN program is the lack of knowledge in the community. Due to weak marketing, most of the northwest Georgia and southeast Tennessee region are not aware that we have an online RN-BSN program. This weakness becomes a concern when enrollment is down.

Recommendations for Follow-Up and/or Action Plans (if needed)

Issue/Concern: The Nursing Department underwent administration changes in Spring 2017. The Nursing Department had two departments (ASN and RN-BSN) with two department chairs.

Specific action(s): Beginning August 1, 2017, the ASN Nursing Department chair became the overall Nursing Department chair and ASN program director. The RN-BSN chair became the RN-BSN program director.

Expected outcomes: The Nursing Department would become more consistent in design and structure as related to the other two departments in the School of Health Professions.

Time frame for achievement: Beginning August 1, 2017

Person(s) responsible: Dr. Gina Kertulis-Tartar, Dean, School of Health Professions

Resources needed: None

Issue/Concern: Marketing of the RN-BSN Program.

Specific action(s): Meet with Marketing to go over a plan of action. The director of Marketing plans to spend \$5K supporting Health Professions programs in the 2019-2020 academic year. The majority of the budget will be spent on Pay Per click ads that appear in Google search results with some social media and digital banner ads.



COMPREHENSIVE ACADEMIC PROGRAM REVIEW

Expected outcomes: To bring more awareness of the all the programs of the School of Health Professions. Increase in awareness and enrollment of the RN-BSN program is expected.

Time frame for achievement: By Fall 2020

Person(s) responsible: Dr. Gina Kertulis-Tartar, Dean, School of Health Professions and Dr. Sylvia Driver, Chair, Nursing Department.

Resources needed: Marketing department and budget set aside for the project.

Issue/Concern: Scheduled national accreditation site visit by the Accreditation Commission for Education in Nursing (ACEN) for February 25th to the 28th, 2019. This is the first site visit for the RN-BSN program since its inception.

Specific action(s): Preparation and collaboration of all faculty in writing the self-study report to be sent to ACEN prior to the scheduled visit.

Expected outcomes: After site visit, continued accreditation for eight more years.

Time frame for achievement: By Fall 2019 after review by ACEN's Board of Commissioners (BOC) final report.

Person(s) responsible: Dr. Sylvia Driver, Chair, Nursing Department.

Resources needed: All faculty to write up and review the ACEN standards and criteria.



COMPREHENSIVE ACADEMIC PROGRAM REVIEW

Prepared by: Dr. Sylvia Driver, Nursing Department Chair and RN-BSN Director

Signature: *Sylvia Driver* Date: December 12, 2019

Dean's Approval:

Signature: *Quina M. Kertulis-Jartar* Date: 02/01/2020

Approval of the Chair of the DSC Comprehensive Program Review Committee:

Signature: *Marvin M. Adams* Date: 2/11/2020

Vice President of Academic Affairs (VPAA) Categorical Summation:

Check any of the following to categorically describe action(s) the institution will take concerning this program.

- Program **MEETS** Institution's Criteria
 - Program is critical to the institutional mission and will be retained.
 - Program is critical to the institutional mission and is growing, or a high demand field, and thus will be enhanced.
- Program **DOES NOT MEET** Institution's Criteria for continuation.
 - Program will be placed on monitoring status.
 - Program will undergo substantive curricular revisions.
 - Program will be deactivated.
 - Program will be voluntarily terminated.
 - Other (Please elaborate):

VPAA Signature: *Bruno Hicks* Date: 2/17/2020

Dr. Bruno Hicks
Vice President of Academic Affairs
Dalton State College