Lander University

William Preston Turner School of Nursing



Self Study Report for Accreditation by the Commission on Collegiate Nursing Education 2015

CCNE Standards for Accreditation of Baccalaureate and Graduate Degree Programs Amended 2013

TABLE OF CONTENTS

Introduction	i
Standard I Program Quality: Mission and Governance	1
Key Element I-A	1
Key Element I-B	3
Key Element I-C	5
Key Element I-D	7
Key Element I-E.	9
Key Element I-F	11
Strengths/Areas for Improvement/Action Plan for Standard I	12
Standard II Program Quality: Institutional Commitment and Resources	14
Key Element II-A	14
Key Element II-B	18
Key Element II-C	25
Key Element II-D	29
Key Element II-E	31
Key Element II-F	32
Strengths/Areas for Improvement/Action Plan for Standard II	35
Standard III Program Quality: Curriculum and Teaching-Learning Practices	39
Key Element III-A	39
Key Element III-B	42
Key Element III-C	45
Key Element III-D	53
Key Element III-E	55
Key Element III-F	56
Key Element III-G	57
Key Element III-H	58
Strengths/Areas for Improvement/Action Plan for Standard III	61

Standard IV Program Effectiveness: Aggregate Student and Faculty Outcomes	63
Key Element IV-A	63
Key Element IV-B	66
Key Element IV-C	68
Key Element IV-D	70
Key Element IV-E	71
Key Element IV-F	73
Key Element IV-G	77
Key Element IV-H	78
Strengths/Areas for Improvement/Action Plan for Standard IV	79

LIST OF APPENDICES

Appendix A (Introduction) Lander University Organizational Chart	82
Appendix B (Introduction) School of Nursing Organizational Chart	83
Appendix C (Standard I-A) Congruence of SON Goals and Outcomes with Lander University Strategic Plan Goals	84
Appendix D (Standard I-A) Consistency of SON Mission, Student Goal, and Individual Student Learning Outcomes with Nursing Standards and Guidelines	87
Appendix E (Standard I-B) Faculty and Student Representatives on SON Committees and Advisory Councils Spring 2015	89
Appendix F (Standard I-D) Nursing Faculty Participation in Lander University Governance 2012 – 2015	92
Appendix G (Standard I-F) Examples of Nursing Admission and Progression Policies that Exceed Lander University Policies	93
Appendix H (Standard II-D) Nursing Class Numbers and Laboratory/ Clinical Numbers in 2014–2015	95
Appendix I (Standard II-D) Fulltime Faculty Academic and Experiential Qualifications 2014-2015	97
Appendix J (Standard II-D) Qualifications of Laboratory/Clinical Instructors 2014- 2015	104

Appendix K (Standard II-F) Lander University Grants to Nursing Faculty 2012- 2015	105
Appendix L (Standard III-A) BSN Curriculum Blueprint	106
Appendix M (Standard III-A) MSN Curriculum Blueprint	109
Appendix N (Standard III-B) Essentials of Baccalaureate Education for Professional Nursing Practice in Required Nursing Course Objectives	110
Appendix O (Standard III-B) <i>Essentials of Masters Education in Nursing Practice</i> in Clinical Nurse Leader Course Objectives	115
Appendix P (Standard III-C) BSN Prelicensure Curriculum Worksheet	118
Appendix Q (Standard III-C) RN-BSN Curriculum Worksheet	119
Appendix R (Standard III-C) Congruence of Nursing Mission and Philosophy, Conceptual Framework, and Organizing Variables	120
Appendix S (Standard III-C) MSN Curriculum Worksheet	123
Appendix T (Standard III-C) Mapping of Courses, Major Concepts, and Curriculum Framework Elements for MSN	124
Appendix U (Standard III-G) ATI Remediation Plan	126
Appendix V (Standard IV-A) BSN Nursing Assessment Plan	127
Appendix W (Standard IV-A) MSN Assessment Plan	132

LIST OF TABLES

Table 1 (Standard I-A) Congruence of SON Mission and Philosophy with Lander University Mission and Strategic Plan Goal on Learning	2
Table 2 (Standard III-A) Congruence of SON Student Goal, Aggregate Student Outcomes, Individual Student Learning Outcomes, and Nursing Roles of the BSN Curriculum.	40
Table 3 (Standard III-A) Congruence of SON Student Goal, Aggregate Student Outcomes, Individual Student Learning Outcomes, and Nursing Roles of the MSN Curriculum	41
Table 4 (Standard III-B) Example of BSN Course Objectives that Address AACN Essential VIII, Outcome 5	44
Table 5 (Standard III-B) Example of MSN Course Objectives that Address AACN Essential IX, Outcome 2	44
Table 6 (Standard III-C) Relationship of Organizing Variables, Program Outcomes, Level Objectives, and Selected Course Objectives	49

Table 7 (Standard IV-B) Graduation Rates: Baccalaureate Program (Prelicensure) 2012-2015	67
Table 8 (Standard IV-B) Graduation Rates: Baccalaureate Program (RN-BSN) 2012-2015	67
Table 9 (Standard IV-C) NCLEX-RN Pass Rates for the Last Three Calendar Years (January 1-December 31)	69
Table 10 (Standard IV-D) Employment Data: Baccalaureate Program- Prelicensure (Spring 2012-Fall 2014)	70
Table 11 (Standard IV-F) Faculty Achievement of Outcome #1 (Teaching) for SON Goal #2 for 2012-2015	74
Table 12 (Standard IV-F) Faculty Achievement of Outcome #2 (Advising) for SON Goal #2 for 2012-2015	74
Table 13 (Standard IV-F) Faculty Achievement of Outcome # 3 (Professional Development) for SON Goal #2 for 2012-2015	75
Table 14 (Standard IV-F) Faculty Achievement of Outcome #1 (Scholarship) for SON Goal #3 for 2012-2015	76
Table 15 (Standard IV-F) Faculty Achievement of Outcome #2 (Practice) for SON Goal #3 for 2012–2015	76
Table 16 (Standard IV-F) Faculty Achievement of Outcome #3 (Service) for SON Goal #3 for 2012- 2015	77

INTRODUCTION

The vision of the Lander University School of Nursing states, "The Lander University Nursing Program will be known globally for educating excellent professional nurses to provide holistic care" (*Nursing Policy and Procedure Manual*, Section I). The nursing faculty made the decision in 2008 to seek accreditation by the Commission on Collegiate Nursing Education (CCNE) based on the beliefs that CCNE supports the values and beliefs of nursing as a profession and that accreditation by CCNE would support the of Nursing School in achieving its vision. The Lander University School of Nursing (SON) is seeking reaccreditation for the baccalaureate program and initial accreditation for the Master's in Nursing-Clinical Nurse Leader program from CCNE. This Self Study Report (SSR) presents a comprehensive self-evaluation of the nursing programs based on the *Standards for Accreditation of Baccalaureate and Graduate Nursing Programs* (Amended 2013). The report describes program strengths, areas for continuous improvement, and the action plans for each standard resulting from the selfstudy process that occurred in 2014-2015.

Lander University

Lander University was founded in 1872 as Williamston Female College in Williamston, South Carolina. In 1904 the college was relocated from Williamston to its present location in Greenwood and re-named Lander College in honor of its founder, the Reverend Samuel Lander. During its 143 year history, Lander was first a private institution, then a Methodist college, then a county-supported college, and is now assisted by the state of South Carolina. Lander University has the distinction of being the only four-year liberal arts college in the United States to have been controlled and financed by a county government. Lander remained an all-female institution until 1943 when male students were admitted for the first time; the institution is now fully coeducational. Lander College became Lander University in 1992 and is governed by a seventeen member Board of Trustees.

Lander University offers programs of study leading to the degrees of Bachelor of Arts, Bachelor of Science, Master of Education in Montessori Education, and Master of Education in Teaching and Learning. Lander is the only institution of higher learning in South Carolina that offers a program leading to national certification in Montessori Education. The university offers minors and certificates in a variety of areas including a unique Therapeutic Horsemanship minor. In addition, a Master of Science in Emergency Management and a Master of Science in Nursing, Clinical Nurse Leader were added in 2014. There are five programs including the Nursing RN-BSN option and the MSN Clinical Nurse Leader program offered completely online.

The university is accredited by the Commission on Colleges of the Southern Association of Colleges and Schools as a Level III institution. The initial accreditation was granted in 1952, and was last reaffirmed in 2007. The next reaffirmation will occur in 2017. Many academic departments are accredited by their respective accrediting agencies.

The Lander campus is located on approximately 123 acres within the city of Greenwood. There are several additional off-campus facilities. Cambridge Hall is the former Greenwood Woman's Clubhouse, which was donated to the Lander Foundation

in 2005. Situated on four acres approximately one mile from the main campus, Cambridge Hall is used for special activities such as continuing education, receptions, and social events. The Jeff May Complex, a recreation, wellness, and sports facility occupies about 25 acres less than half a mile from campus. With strong financial support from the city of Greenwood, the sports complex provides stadiums for baseball, soccer, and softball, 12 tennis courts, practice and intramural fields, and a perimeter track. The Lander University Equestrian Center is a partnership between Lander University and Burton Center (a regional center for persons with intellectual disabilities). The Equestrian Center is located on 32 acres about four miles from campus. The Lander University Equestrian Center is the first university-based equestrian center in SC. It offers academic, therapeutic, and sporting opportunities for students and community members. In 2014, Lander purchased the former TD Bank building. This 6.000 square feet centrally located facility houses the Lander Foundation and Alumni Center and is two blocks from the main campus. It was redesigned for office space, Foundation and Alumni meetings, and will have a pavilion for outdoor events. Campus facilities are described fully in the University section of the Lander University Catalog.

In order to position Lander as an educational leader in the 21st century, the university has implemented a variety of programs and initiatives. In academics, an Honors College was started in 2014 offering academically gifted students the opportunity to learn in an environment unlike the typical college classroom. Lander has also made a commitment to double the number of students who choose to study abroad by the end of the decade. Students enhance their college experience by taking advantage of international study opportunities in a variety of foreign universities and cities. Additionally through the Office of International Programs, students from around the world come to Lander for the cultural diversity, challenging learning opportunities, rewarding course work, and exciting student activities. In fall 2014 Lander had 90 international students enrolled.

In fall 2004 Lander initiated an innovative strategy to support faculty and students through a Docent Program. The program began with 12 docents, professional volunteers who share their expertise and knowledge with students, faculty, staff and visitors. The docents are an integral part of the university's educational mission. Efforts are made to match the interests and experience of docents with the needs of the university. Docents perform a variety of duties that are important to the university's operation and they assist with the planning and implementation of campus programs. Today there are 55 docents, including two retired nursing faculty.

As a key element of Lander's 10-year master plan to revitalize the campus, LU broke ground on a three-story, 71,000-square feet residence hall scheduled to open in fall 2015. The 210 bed facility was designed with features based on recommendations from student focus groups .Other infrastructure modifications include the redesign of the main entrance to Lander, a new access road, increased pedestrian walkways, and a focal fountain. Other projects slated for campus renovations include additional dining options and a redesign of the student Assembly Plaza.

Dr. Daniel Ball has served as the President of Lander University for the past 15 years. His tenure ended June 30, 2015. Dr. Richard E. Cosentino became Lander's 13th President on July 1, 2015. Along with the President, administrative officers of the University include the Vice President for Academic Affairs and Provost, Dr. David Mash;

the Vice President for Business and Administration, Gary McCombs; the Vice President for Student Affairs, H. Randall Bouknight; the Vice President for University Advancement, Ralph W.G. Patterson; the Athletics Director and Vice President, Jefferson J. May; and the Vice President for Governmental Relations, J. Adam Taylor. The Lander University organization chart is presented in Appendix A.

The Office of Academic Affairs includes four colleges: Arts and Humanities, Business and Public Affairs, Education, and Science and Mathematics. There are 15 departments within the four colleges; the School of Nursing (SON) is part of the College of Science and Mathematics. In 2014 Lander had 139 full-time faculty members and 130 part-time faculty members (including laboratory instructors). In fall 2014, there were 2,787 students, with an FTE enrollment of 2605.

School of Nursing

The School of Nursing (SON) was established in 1953 as the Self Memorial Nursing Department of Lander College to offer the first associate degree in nursing program in SC. This name recognized the critical support from the local hospital (now Self Regional Healthcare) that has benefited the program since its inception. The associate degree program graduated 632 nurses between 1959 and its closure in 1986. In 1985, Lander made the transition from associate level to baccalaureate level education, and graduated the first Bachelor of Science in nursing class in 1987. There are over 1000 Lander BSN graduates. The nursing program was designated as the William Preston Turner Department of Nursing in 2006 in order to recognize the continuing support of the Self Family Foundation to the nursing program and the contributions of the Turner family to healthcare in the greater Greenwood region. The Lander University Board of Trustees renamed the Department of Nursing the William Preston Turner School of Nursing in fall 2012.

Lander offers two options for completing the Bachelor of Science degree. The prelicensure option was designed for students who seek a traditional campus experience. All required nursing courses are taught in face-to-face classroom settings, although select elective courses may be offered online. The RN-BSN option was designed for registered nurses who are working full-time, so classes are offered online in asynchronous format to accommodate RN students' work schedules. This program was the first asynchronous online degree completion option for registered nurses in SC. The MSN-Clinical Nurse Leader program was approved by the SC Commission of Higher Education in June 2013 and admitted its first cohort in January 2014. The Lander MSN program was the first CNL program offered in South Carolina.

The nursing program is approved by the State Board of Nursing for South Carolina. The Associate Degree Nursing program was accredited by NLN from 1978 until the program closed in 1986. The BSN program was accredited by the National League for Nursing (NLN) and then the National League for Nursing Accrediting Commission (NLNAC) from 1987 until 2011.

The SON functions as one of four departments in the College of Science and Mathematics and is housed in Barratt Hall which was renovated for the nursing program in 2000. Dr. Robbie South, D.H.Ed., MSN, RN, CNE serves as Director. The SON organization chart is presented in Appendix B. In 2014-2015, the SON had 12 full-time

faculty members, one part-time faculty member, and 13 laboratory/clinical instructors. During the spring semester there were 201 students, with 149 in the prelicensure option, 50 in the RN-BSN option, and two in the MSN program. Over 35% of Lander's incoming freshmen are interested in choosing nursing as their major.

The SON has several features that make it unique from other nursing programs. Lander is an attractive choice for students who seek a strong nursing academic experience in a small college setting. It offers a theory-based curriculum, with six semesters in the nursing major and nursing faculty advisors for all students in the major. The SON offers an opportunity for Honors Study in Nursing. Lander provides the academic home for Mu Zeta chapter of Sigma Theta Tau International Honor Society of Nursing. The undergraduate nursing program utilizes the Neuman Systems Model as its conceptual foundation. Nursing faculty have enjoyed a personal relationship with Dr. Betty Neuman since 1985 and have published and presented using the model. Two faculty members are Trustees in the Neuman Systems Model International, Inc. In addition, the SON sponsors the first university-based Medical Reserve Corps (MRC) unit in the state. The MRC has worked with public health in sponsoring educational events and exercises on campus to increase awareness of disaster planning. The SON supports international learning experiences through an annual medical mission trip led by a nursing faculty member. Lander SON has collaborated with the Presbyterian College School of Pharmacy to provide interprofessional education (IPE) for students. The Edward Via School of Osteopathic Medicine joined this collaboration in 2014. The purpose of the IPE collaboration is to promote team-based education and practice, facilitate faculty and student development, and increase professional collaboration among health professionals to promote improved patient-centered care.

The nursing program enjoys a mutually supportive relationship with the Greenwood area medical center, Self Regional Healthcare. Part of that relationship is embodied in the Partners in Preparing for Practice consortium with Self Regional which provides a forum for continuing dialogue between nursing students, faculty, and nursing staff members at Self Regional Healthcare. Through this arrangement, nursing leaders from Self Regional share their expertise with students. The Self Regional Hospital Foundation provides \$50,000 annually "for improvement" of the SON. The complete Partnership description and agreement will be available for review in the Resource Room.

Some of the future plans for the School of Nursing include: a) developing marketing strategies for online programs to increase enrollment, b) pursuing improved technical resources for testing, c) increasing interactions with the community of interest, d) developing creative options for clinical learning experiences, e) exploring additional articulation agreements with SC technical colleges, f) seeking funding sources for scholarships for online degree programs, and g) integrating IPE throughout the curriculum. Long range plans include the additional of a dedicated Simulation Learning Center Coordinator. The addition of this faculty member would optimize the utilization of the Simulation Learning Center and improve clinical learning for undergraduate students.

Standard I Program Quality: Mission and Governance

The mission, goals, and expected program outcomes are congruent with those of the parent institution, reflect professional nursing standards and guidelines, and consider the needs and expectations of the community of interest. Policies of the parent institution and nursing program clearly support the program's mission, goals, and expected outcomes. The faculty and students of the program are involved in the governance of the program and in the ongoing efforts to improve program quality.

I-A. The mission, goals, and expected program outcomes are:

- congruent with those of the parent institution; and
- consistent with relevant professional nursing standards and guidelines for the preparation of nursing professionals.

Elaboration: The program's mission statement, goals, and expected program outcomes are written and accessible to current and prospective students, faculty, and other constituents. Program outcomes include student outcomes, faculty outcomes, and other outcomes identified by the program. A mission statement may relate to all nursing programs offered by the nursing unit or specific programs may have separate mission statements. Program goals are clearly differentiated by level when multiple degree/certificate programs exist. Student outcomes may be expressed as competencies, objectives, benchmarks, or other terminology congruent with institutional and program norms.

The program identifies the professional nursing standards and guidelines it uses. CCNE requires, as appropriate, the following professional nursing standards and guidelines:

- The Essentials of Baccalaureate Education for Professional Nursing Practice [American Association of Colleges of Nursing (AACN), 2008];
- The Essentials of Master's Education in Nursing (AACN, 2011);
- The Essentials of Doctoral Education for Advanced Nursing Practice (AACN, 2006); and
- Criteria for Evaluation of Nurse Practitioner Programs [National Task Force on Quality Nurse Practitioner Education (NTF), 2012].

A program may select additional standards and guidelines.

A program preparing students for certification incorporates professional standards and guidelines appropriate to the role/area of education.

An APRN education program (degree or certificate) prepares students for one of the four APRN roles and in at least one population focus, in accordance with the Consensus Model for APRN Regulation: Licensure, Accreditation, Certification and Education (July 2008).

Program Response:

The mission, goals, and expected program outcomes of the Lander University School of Nursing (SON) are consistent with those of Lander University (LU). The mission and philosophy of the SON are based on the mission of LU and are congruent with the Lander University 2009-2010 Strategic Plan Goal on Learning. These relationships are presented below in Table 1.

Table 1Congruence of SON Mission and Philosophy with Lander University Mission andStrategic Plan Goal on Learning

LU Mission	LU Goal on	SON Mission	SON Philosophy
	Learning		
Grounded in the belief that education is a liberating force Lander University has chosen teaching and learning as its principal concerns and providing a challenging education for qualified students as its missionthe University offers an undergraduate curriculum that combines a broad liberal education with specialized study leading either to immediate application in a career or to more advanced study. The undergraduate programs provide opportunities for students to achieve competence in a major discipline and to explore a broad core curriculum. (Lander University Catalog, 2014-2015, p.12)	LU 2009-2010 Strategic Plan Goal on Learning: We will enhance student learning by promoting academic excellence and public leadership skills. (Lander University Strategic Plan 2009-2010)	Lander University School of Nursing is committed to preparing individuals to provide holistic nursing care in a variety of settings to diverse clients across the lifespan. The purpose of the baccalaureate program is to prepare graduates in professional nursing roles of care provider, leader, consumer of research, applicant for advanced study, and contributing member of the nursing profession. The purpose of the graduate program is to prepare clinical nurse leaders to address the healthcare needs of the 21st century by implementing outcome- based practice through management of care systems, quality improvement strategies, utilization of technology, and advanced clinical reasoning (SON Policy & Procedure, Section 1).	The faculty of the Lander University School of Nursing believes that the theory-based practice of professional nursing is founded on an evolving body of nursing knowledge supported by a strong liberal arts emphasis in behavioral, physical, and analytical sciences as well as the humanities. We further believe that personal education is a lifelong process that is built upon a broad knowledge-base and experience. (SON Policy & Procedure, Section I)

Lander University engages in a strategic planning process designed to support five goals. These goals address learning, enrollment, linkages, environment, and accountability. Progress toward the five goals is evaluated annually. Information about progress toward goal attainment is distributed to all stakeholders in the Strategic Planning Report cards. Lander is currently in the process of developing a vision statement, revising the mission statement, and updating the Strategic Goals and Plans. The SON goals and aggregate student and faculty outcomes are derived from and are consistent with the Lander Strategic Plan Goals, as illustrated in Appendix C.

The mission statements of the SON and Lander University are published in the catalog and on the Lander website. The University mission is posted at <u>http://www.lander.edu/About-Us/Mission-Statement.aspx</u>. The SON mission is posted online at <u>http://www.lander.edu/academics/Colleges-Departments/Science-</u> <u>Mathematics/Nursing/director%27s-message</u>. The Lander University Strategic Plan and Report Cards are published on the Lander website at http://www.lander.edu/Administration/President-Office/Strategic-Plan.aspx.

Consistency with relevant professional nursing standards and guidelines

Curriculum planning for the BSN and MSN nursing programs utilize several sets of professional nursing standards and guidelines. Course syllabi in the BSN and MSN programs refer to the standards that are used in those courses. The BSN program includes the American Association of Colleges of Nursing (AACN) *Essentials of Baccalaureate Education for Professional Nursing Practice* (2008) (available at http://www.aacn.nche.edu/education-resources/BaccEssentials08.pdf) and the curriculum for the MSN program incorporates the AACN *Essentials of Master's Education in Nursing (2011)* (available at http://www.aacn.nche.edu/education-resources/BaccEssentials08.pdf) and the provided with a link to these standards on their respective communication sites.

Both programs are guided by the laws of nursing in the South Carolina Nurse Practice Act (available at http://scstatehouse.gov/code/t40c033.php); and incorporate the American Nurses Association (ANA) *Standards of Practice* (2004) and the ANA *Code of Ethics* (2001). Printed copies of the *Standards of Practice* and the *Code of Ethics* are available in the Jackson Library. Although the programs incorporate the ANA Code of Ethics from 2001 and the ANA Standards of Practice (2004), the revised versions of both documents have been ordered by the library for use by the SON. In addition, framed posters of these standards are displayed throughout the nursing building. Specialty nursing standards are also used in NURS 393: Mental Health Nursing, NURS/NURN 417: Community Health Nursing, NURS 408: Critical Care Nursing, NURS 409: Pediatric Nursing, and NURS/NURN 412: Nursing Leadership and Management. Students are provided information about these specialty standards in the specific courses. Copies of these standards will be available in the Resource Room.

The mission, goals, and expected student outcomes for each program are consistent with the nursing standards and guidelines endorsed by the SON. Appendix D illustrates the consistency among SON mission, goals, student learning outcomes, and nursing standards and guidelines.

I-B. The mission, goals, and expected student outcomes are reviewed periodically and revised, as appropriate, to reflect:

professional nursing standards and guidelines; and

• the needs and expectations of the community of interest.

Elaboration: There is a defined process for periodic review and revision of program mission, goals, and expected student outcomes. The review process has been implemented and resultant action

reflects professional nursing standards and guidelines. The community of interest is defined by the nursing unit. The needs and expectations of the community of interest are reflected in the mission, goals, and expected student outcomes. Input from the community of interest is used to foster program improvement.

Program Response:

The SON reviews its mission, goals, and expected student outcomes annually and revises them as indicated to reflect current professional standards and guidelines. The Vice Chair of the Nursing Faculty Organization (NFO) is charged with presenting the mission, goals, and expected outcomes for this annual review by the NFO. The annual review occurs at the end of the academic year (NFO minutes May 12-13, 2014, May 4[,] 2015).

Community of Interest

The community of interest is defined as "those persons and agencies that have an interest in the nursing program mission, goals, and accomplishment of outcomes. These internal stakeholders include students, nursing faculty, faculty who teach required support courses, Lander University administrators, other Lander academic departments and Schools, and academic support services. External stakeholders include parents and families of students, employers of Lander nursing graduates, prospective students, clinical agency sites, scholarship donors, Lander nursing alumni, government and regulatory agencies, the Chamber of Commerce, political/legislative decision-makers, the community/public as prospective clients, and the nursing profession" (SON Policy and Procedure Manual, Section I Part C Glossary). The needs and expectations of the community of interest are reviewed annually using feedback obtained formally from the Employers Survey, Advisory Board feedback, and informally through faculty interactions with constituents

When considering the development of an MSN program at Lander, the community of interest was consulted and feedback was obtained. For example, a survey was sent to the Chief Nursing Officers across SC to obtain data regarding interest in using the Clinical Nurse Leader (CNL) role in hospitals. Additionally, a focus group consisting of representatives from clinical agencies and potential employers met on May 11, 2012 to discuss the value of the CNL role. A copy of the survey and the minutes from the focus group are available in the Resource Room. Prior to the launch of the MSN program, the SON mission statement was revised to reflect graduate education (NFO minutes: 10/5/2012; 10/17/2012). The first cohort for the MSN Clinical Nurse Leader program was admitted in January 2014.

Nursing Board of Advisors

The Nursing Board of Advisors facilitates the ongoing exchange of information between the SON and the community regarding issues of shared concern. The Board consists of members of the community, including clinical agency site representatives, employers of Lander nursing graduates, Lander nursing faculty, regional technical nursing faculty, the Dean of the College of Science and Mathematics (COSM), and the

Provost of LU. The Board meets each semester. A survey is conducted with attendees to solicit further feedback prior to and/or after each meeting (See invitation dated Sept.25, 2014, January 31, 2014). The decision was made prior to the launch of the MSN program to include the same Board of Advisors for the graduate program.

Further contact with the community of interest is maintained through alumni surveys, employer surveys, professional networking, media coverage of the SON, and nursing faculty participation in community events and volunteerism. Nursing alumni surveys are conducted at one and five years post-graduation. Employer surveys have been conducted annually since 2010. Clinical agency site surveys have been conducted annually since 2012 to solicit feedback from partnering clinical agencies. Feedback from these sources is used to foster program improvement and to better meet the needs and expectations of the community of interest. As a direct result of feedback from the Board of Advisors, changes were made at the Senior II level in student-to-patient clinical ratios to more closely mimic a regular hospital day (Advisory Board minutes, Sept. 25, 2014). Data from surveys from the community of interest are discussed in Standard IV.

Student Input

Student representatives from each nursing class serve on the five standing NFO committees and the Chair's Advisory Council to provide their perspective and suggestions on program improvement (Appendix E). In addition to information from committee representation, student input impacting program decisions can be found in individual course reports (available in the resource room).

The SON uses student input to improve student outcomes and program effectiveness. For example, students on the Recruitment and Retention (R&R) Committee provided suggestions regarding helpful content for the Orientation to the Major (R&R Committee minutes November 13, 2014, April 3, 2015 and NFO minutes, January 6, 2015). Another example of using student feedback occurred in fall 2014 when "Assessment Grand Rounds" was piloted at a long-term care facility in NURS 240: Physical Assessment to add an opportunity for the assessment of abnormal findings. Positive student feedback supported the retention of this enhanced clinical experience (See fall 2014 and spring 2015 NURS 240 course reports in Resource Room).

I-C. Expected faculty outcomes are clearly identified by the nursing unit, are written and communicated to the faculty, and are congruent with institutional expectations.

Elaboration: The nursing unit identifies expectations for faculty, whether in teaching, scholarship, service, practice, or other areas. Expected faculty outcomes are congruent with those of the parent institution.

Program Response:

All nursing faculty are required to meet Lander University faculty role expectations for teaching, advising, and scholarly activity, as set forth in the Lander

University Faculty Handbook at <u>http://www.lander.edu/docs/default-source/academic-affairs/facultyhandbook.pdf?sfvrsn=8</u>. Section IV of the Faculty Handbook describes faculty procedures and regulations for employment, including faculty workload, conditions for appointment, criteria for faculty rank, and evaluation of faculty. In 2012, the Faculty Senate, LU faculty, and Board of Trustees approved a change in the rank of two faculty positions. The rank of "Instructor" was eliminated, and the rank of "Lecturer" was more widely implemented. Descriptions of these positions can be found in Section IV, Part 2 of the Faculty Handbook. Four full-time nursing faculty member's ranks were changed to Lecturer; however, these title changes did not represent a change in the expected faculty outcomes. Although not widely used at the University, all part-time clinical instructors continue to be considered Clinical/Laboratory Instructors in the SON.

Lander University does not define teaching and scholarship specifically. However, faculty members are required to meet the expectations for teaching and scholarship presented in Section IV of the Lander Faculty Handbook. Expectations are outlined on evaluation forms such as the Faculty Performance Report (FPR) (Nursing Policy and Procedure Manual, Section V). Nursing faculty members maintain all expectations of the University for teaching and scholarship. The nursing faculty also endorses the AACN statement "Defining Scholarship for the Discipline of Nursing" (1999), and has requested that the Dean of the College of Science and Mathematics (COSM) consider its implications when evaluating nursing faculty scholarship.

Service is an expectation of Lander faculty members, yet is not defined specifically by the University. The nursing faculty defines service as "activities performed beyond requirements for teaching and advising that support the School, the university, the profession, or the community" (SON Policy and Procedure Manual, Section I Glossary).

Nursing practice is unique to the role of nursing faculty. The nursing faculty defines practice as "activities performed beyond requirements for teaching and advising that provide nursing expertise in application of the nursing process for clients or in support of health-related community initiatives. Practice may be performed for compensation or gratis. Examples of practice may include but are not limited to the following: employment as a nurse or Advanced Practice Nurse, serving on the advisory board of a community agency, acting as a nurse consultant, providing health education for community agencies, or volunteering as a nurse in a community agency" (SON Policy and Procedure Manual, Section I Glossary).

The faculty aggregate outcomes developed in 2009, and reaffirmed annually, were derived from SON goals. In turn, these SON goals are based on Lander University Strategic Plan Goals for 2009 – 2010. These outcomes make explicit the SON expectations for faculty performance in the areas of teaching, scholarship, service, and practice. The faculty outcomes are congruent with the LU mission statement that "Lander University has chosen teaching and learning as its principal concerns . . . Lander faculty engage in scholarly and creative activities appropriate to their teaching fields . . . the faculty and staff recognize Lander's responsibility to the public and to the local economy; therefore the University . . . co-operates with various agencies, schools, and businesses". These expected faculty outcomes are congruent

with expected student outcomes since the faculty activities required to meet the SON goals support the achievement of aggregate student outcomes (Appendix C).

The faculty outcomes and related definitions are included in the SON Policy and Procedure Manual (P&P Manual), and are communicated to new faculty during orientation. New faculty meet with the Director of the SON to discuss nursing faculty outcomes and review expectations using the SON New Nursing Faculty Orientation document (SON P&P Manual, Section V) and with the Dean of the COSM to discuss the expectations related to teaching, scholarship, service and practice. These outcomes are utilized as part of the annual faculty evaluation process. The Initial Faculty Development Plan identifies individual faculty members' plans and goals for teaching, scholarship, service, and practice. Subsequent revisions to the initial plan are self- reported annually in the FPR. Faculty are also required to document this self-evaluation using the Sedona Systems database. The Sedona System is a web-based program that allows faculty to maintain their teaching, research, and service records. The summary and analysis of Nursing Faculty Aggregate Outcomes are presented in Standard IV-E.

I-D. Faculty and students participate in program governance.

Elaboration: Roles of the faculty and students in the governance of the program, including those involved in distance education, are clearly defined and promote participation. Nursing faculty are involved in the development, review, and revision of academic program policies.

Program Response:

Nursing faculty members participate in governance at both the university level and the program level. University governance involves Senate committees and University committees. Senate committees function under the Faculty Senate. The Faculty Senate represents the faculty in conducting academic business of Lander University (LU). The Senate works through a committee structure set forth in Section II-C of the Lander Faculty Handbook. The SON currently has three representatives on the Faculty Senate, including one selected internally from nursing faculty and two elected atlarge from the Lander faculty. The SON representative on Faculty Senate sends a written report of each Senate meeting to SON faculty members and solicits feedback from nursing faculty at NFO meetings as appropriate (SON Senate reports available in the Resource Room). Nursing faculty members also participate in university governance through activity on a variety of LU committees. These committees are listed in Section V-C of the LU Faculty Handbook. Appendix F shows nursing faculty participation in LU governance through committee assignments from 2012-2015.

All undergraduate Lander students have the opportunity to participate in university governance through the Student Government Association (SGA). Student representatives may also be invited to serve on select university committees and to attend Senate meetings. In fall 2014, a SON student was invited to serve as a representative on the Selection Committee for the University President. To foster change, specific student concerns may be channeled from students to appropriate parties through the Vice-President of Student Affairs. The President's Council (comprised of the presidents, or a designated representative, of registered student

organizations) maintains communication between the committee leaders, administrators, and the student body. This council meets at least once a semester. The President of the Lander University Student Nurses Association (LUSNA) is a member of the President's Council. A list of student involvement in university programs and committees and minutes from meetings of the President's Council are available in the Resource Room.

Nursing faculty is involved in the development, review, and revision of academic program policies through the Nursing Faculty Organization (NFO). The membership includes full-time, part-time, and adjunct nursing faculty, with only full-time faculty holding voting privileges. The Director of the SON serves as the Chair of the NFO and exercises overall administrative responsibility and accountability for the development, review, and revision of academic program policies and procedures. The Director is also responsible for budget oversight, faculty recruiting, supervising part-time faculty, student admission screening, and program evaluation. Supportive offices include the Vice-Chair, Secretary, and Treasurer, each elected in May for a one-year term. The Vice-Chair may assume the Chair's duties as delegated by the Chair. The NFO meets at least once per month during the academic year.

NFO has five standing committees for the BSN program, with faculty members appointed for a period of one calendar year. The committees and purposes are as follows:

- Academic Concerns Committee: to promote the academic well-being of the total nursing program including matters relating to faculty and students.
- Assessment and Evaluation Committee: to evaluate and promote the nursing program's effectiveness in relation to internal and external assessment criteria.
- Curriculum Committee: to explore and recommend ways to strengthen the curriculum based on current standards of professional nursing practice.
- Interprofessional Education Committee: to promote health care improvement and patient safety practices across the disciplines.
- Recruitment and Retention Committee: to recommend and initiate strategies to recruit students into the nursing program, to promote retention of qualified students, and to foster the students' professional development.

The standing committees meet at least once per semester. Appendix E presents membership of each NFO committee for spring 2015. Membership for fall 2015 may be found in the Resource Room. Ad Hoc committees, such as the Budget Committee and task forces are formed to address specific projects and/or concerns of the SON.

The MSN Committee began as an ad hoc committee during the planning phase of the MSN program, but is now an additional standing committee. It is comprised of the Director of the SON, the SON Graduate Coordinator, and a minimum of two faculty teaching in the graduate program. The MSN Committee retains responsibility for graduate curriculum, recruitment and retention plans, management of the graduate assessment plan, plans for program improvement, and policy and procedures applicable to graduate students. The MSN Committee meets at least once each semester and as needed. All NFO minutes and committee meeting minutes are available in the resource room.

Nursing students participate in governance of the nursing program through representatives on standing and ad hoc committees. One student and one alternate from each academic class are elected to serve on each of the five undergraduate standing committees. In addition to standing and ad hoc committees, a Director's Advisory Council provides a direct line of communication between the Director of the SON and the undergraduate nursing student body, with a representative from each class (prelicensure and RN-BSN). All nursing students (prelicensure, RN-BSN, and MSN) attend an orientation on campus when they begin the nursing program. At that meeting, prelicensure and RN-BSN students are informed of NFO committees and invited to participate. However, involvement in on-campus committees is more difficult for RN students due to work schedules and distance constraints. RN-BSN students may participate on committees through online/virtual committee meetings. Graduate students are afforded an opportunity to provide feedback on proposed policy and procedure changes. Feedback may be solicited through virtual meetings, online polling, and postings on the CNL Communication site.

An additional example of student involvement in the governance of the nursing program is in the process of selecting new faculty members. All nursing students are given the opportunity to participate in the interview process of nursing faculty applicants. Students attend the prospective faculty member's presentation, have an opportunity to ask questions, and use the same rating form as existing faculty to evaluate the applicant. A copy of the rating form is available in the Resource Room.

The IPE Committee was developed in 2012 to address the growing need for interprofessional education for nursing and other healthcare professions as identified by the Institute of Medicine. Collaboration was initially established with the Presbyterian College School of Pharmacy. The Edward Via College of Osteopathic Medicine (VCOM) joined in fall 2014 to foster interprofessional education between nursing, pharmacy, and medicine. Events are held each academic year addressing at least one of the four major IPE competencies. This committee continues to work both on campus and with collaborating institutions to explore programming opportunities and educational prospects for SON students. An IPE folder is located in the Resource Room.

I-E. Documents and publications are accurate. A process is used to notify constituents about changes in documents and publications.

Elaboration: References to the program's offerings, outcomes, accreditation/approval status, academic calendar, recruitment and admission policies, grading policies, degree/certificate completion requirements, tuition, and fees are accurate. Information regarding licensure and/or certification examinations for which graduates will be eligible is accurate. For APRN education programs, transcripts or other official documentation specify the APRN role and population focus of the graduate.^{1, 2}

If a program chooses to publicly disclose its CCNE accreditation status, the program uses <u>either</u> of the following statements:

¹ Consensus Model for APRN Regulation: Licensure, Accreditation, Certification and Education (July 2008).

² Criteria for Evaluation of Nurse Practitioner Programs (National Task Force on Quality Nurse Practitioner Education, 2012).

"The (baccalaureate degree in nursing/master's degree in nursing/Doctor of Nursing Practice and/or post-graduate APRN certificate) at (institution) is accredited by the Commission on Collegiate Nursing Education, One Dupont Circle, NW, Suite 530, Washington, DC 20036, 202-887-6791."

"The (baccalaureate degree in nursing/master's degree in nursing/Doctor of Nursing Practice and/or post-graduate APRN certificate) at (institution) is accredited by the Commission on Collegiate Nursing Education (<u>http://www.aacn.nche.edu/ccne-accreditation</u>)."

Program Response:

All documents and publications, including information presented on the Lander website at http://www.lander.edu/, are accurate and consistent. Eligibility for licensure as a registered nurse in SC is communicated to prospective and current students in the *Lander University Catalog* (2014-2015). This information is obtained from the SC Board of Nursing.

The official repository for all SON information is the Nursing Policy and Procedure Manual (P&P Manual). All definitions, policies, and procedures are maintained on file in this manual. It is reviewed and updated each year through the NFO standing committee structure. Recommendations for revisions are brought to the NFO at the annual end-of-year meeting. However, changes that require immediate action may be implemented as needed through the NFO. Review of the manual is as follows:

Section I Philosophy and Curriculum—review by Curriculum Committee
Section II Academic Policies—review by Academic Concerns Committee
Section III Student Policies—review by Recruitment and Retention Committee
Section IV Program Evaluation—review by Assessment and Evaluation Committee

•Section V Faculty Policies—review by Academic Concerns Committee.

The BSN Nursing Student Handbook consists of Sections I – IV of the P&P Manual. All policies and procedures for the CNL program may be found in the *MSN-CNL Student Handbook*. Both the BSN and MSN student handbooks can be accessed through the LU School of Nursing website and may be found on their respective BSN and MSN Communication sites in Blackboard. Information from the BSN and MSN manuals is included in the *Lander University Catalog* for review by prospective and current students. Program information is accurately presented in recruitment brochures for both programs (copies of brochures available in the Resource Room).

Laboratory/Clinical instructors are notified of changes by the course coordinator as indicated. They are also given access to the "Clinical Instructors Communication Site" in Blackboard. Clinical instructors and part-time faculty are notified of policy and procedure changes via Lander email, as appropriate. Clinical instructors also have access to the Blackboard platform in assigned courses as appropriate.

Students are notified of changes by written communication placed in student mailboxes, announcements posted in the Nursing Majors Communication site, classroom announcements, meetings with advisors, emails, and class meetings.

Students are expected to read the *Nursing Student Handbook* upon admission to the program and to review changes each semester. Changes in policies or procedures in the student handbooks for both BSN and MSN programs are designated in red each semester.

I-F. Academic policies of the parent institution and the nursing program are congruent and support achievement of the mission, goals, and expected student outcomes. These policies are:

- fair and equitable;
- published and accessible; and
- reviewed and revised as necessary to foster program improvement.

Elaboration: Academic policies include, but are not limited to, those related to student recruitment, admission, retention, and progression. Policies are written and communicated to relevant constituencies. Policies are implemented consistently. Differences between the nursing program policies and those of the parent institution are identified and support achievement of the program's mission, goals, and expected student outcomes. A defined process exists by which policies are regularly reviewed. Policy review occurs and revisions are made as needed.

Program Response:

Academic policies of Lander University (LU) and the SON are congruent, with the exceptions outlined below. Lander academic policies are published in the *Lander University Catalog*, available in print and online. SON academic policies are published in the *Nursing Policy and Procedure Manual* (P & P Manual) and are available online. Selected SON policies are included in the *Lander University Catalog* at http://www.lander.edu/academics/Catalog-Course-Lists.aspx.

Nursing faculty members are involved in the development, review, and revision of academic program policies through active participation in Nursing Faculty Organization (NFO) and committee assignments. Each section of the Nursing P & P Manual is reviewed annually by a standing committee of NFO as delineated previously. Academic policies specific for the nursing program support the achievement of the mission, goals, and expected student outcomes of the SON. The nursing program has additional requirements for admission and progression over those of LU. These additional academic requirements in nursing are necessary due to the demanding nursing curriculum that requires a high level of cognitive ability. These policy differences are stated in the *Lander University Catalog*. Appendix G provides examples of nursing admission and progression policies that exceed LU policies.

Lander allows faculty members to establish the grading scale in their courses. Nursing faculty members use a grading scale that is more stringent than that used in other academic departments due to the rigor required for academic success in nursing. The SON grading scale is consistent across all required nursing courses, is defined in the SON *P& P Manual*, and is clearly delineated in each course syllabus.

To maintain compliance with clinical agency contracts, nursing students and faculty must meet specific agency requirements for education and health screening that exceed those for other LU students and faculty. These policies include professional student liability insurance, health and accident insurance, CPR certification, verification of acceptable health status, core competencies, verification of

immune status, satisfactory criminal background check, and drug screening. A thirdparty vendor is contracted to manage tracking of student clinical agency requirements. The clinical laboratory policies are stated in the BSN and MSN handbooks, admission letters upon entering the major, the *Lander University Catalog* (2014-2015), and are relayed in advisement sessions with faculty.

Strengths of Standard I

The strengths of the Lander SON in relation to Standard I are presented below:

- The SON mission, goals, and outcomes directly support the achievement of Lander University Strategic Plan Goals.
- There is strong congruence among the mission, philosophy, goals, and outcomes of the SON.
- Student learning outcomes are congruent with and reflect professional nursing standards and guidelines, including *The Essentials of Baccalaureate Education for Professional Nursing Practice (AACN, 2008) and The Essentials of Master's Education in Nursing (AACN, 2011).*
- Nursing faculty members and students are actively involved in governance and policy decisions.
- A well-developed *Nursing Policy and Procedure Manual* supports decisionmaking and day-to-day functioning of the SON.
- The BSN and MSN *Nursing Student Handbooks* are readily accessible to students and students are notified of changes in the handbooks.
- The SON is actively engaged with and responsive to its community of interest.
- There is an identified method of orientation of new faculty.
- The SON is a leader in the development of an Interprofessional Education Committee to gain understanding about other disciplines.
- The SON has a defined method for the review of policies and procedures and the refinement of the *Nursing Policy and Procedure Manual*.

Areas for Continuous Improvement for Standard I

The areas for continuous improvement in Standard I are presented below:

- Increasing participation in program governance by RN-BSN and MSN students involved in distance education will strengthen the nursing program.
- The student aggregate outcome on critical thinking needs to be further examined and refined.
- Faculty performance outcomes are currently measured by the Dean of the College of Science and Mathematics and this governance structure poses barriers to completion of these measures.

Action Plan for Standard I

The action plan for Standard I is outlined below:

- The SON will continue to seek innovative strategies to involve RN-BSN and MSN students in program governance such as online platforms for virtual meetings.
- The Nursing Assessment and Evaluation Committee will lead nursing faculty members in refining the student aggregate outcome on critical thinking, including exploring ways to enhance critical thinking in students.
- The Nursing Assessment and Evaluation Committee will lead nursing faculty members in evaluating faculty aggregate outcomes and in making recommendations for reaffirmation or revision to the NFO.
- The Director of the SON will continue to advocate for the inclusion of the AACN statement entitled "Defining Scholarship for the Discipline of Nursing" (1999) in the evaluation of nursing faculty.
- The SON will continue to collaborate with Presbyterian School of Pharmacy, Edward Via College of Osteopathic Medicine (VCOM), and other professional entities to foster interprofessional understanding and safer client outcomes.
- The SON will review the expected student outcomes of the MSN-CNL program with attention to the needs of the community of interest
- The SON will continue to refine the *Nursing Policy and Procedure Manual* and handbooks for the BSN and MSN programs.

Standard II

Program Quality: Institutional Commitment and Resources

The parent institution demonstrates ongoing commitment to and support for the nursing program. The institution makes resources available to enable the program to achieve its mission, goals, and expected outcomes. The faculty, as a resource of the program, enable the achievement of the mission, goals, and expected program outcomes.

II-A. Fiscal and physical resources are sufficient to enable the program to fulfill its mission, goals, and expected outcomes. Adequacy of resources is reviewed periodically and resources are modified as needed.

Elaboration: The budget enables achievement of the program's mission, goals, and expected outcomes. The budget also supports the development, implementation, and evaluation of the program. Compensation of nursing unit personnel supports recruitment and retention of qualified faculty and staff. Physical space is sufficient and configured in ways that enable the program to achieve its mission, goals, and expected outcomes. Equipment and supplies (e.g., computing, laboratory, and teachinglearning) are sufficient to achieve the program's mission, goals, and expected outcomes. A defined process is used for regular review of the adequacy of the program's fiscal and physical resources. Review of fiscal and physical resources occurs and improvements are made as appropriate.

Program Response:

Budget and Fiscal Issues, Review and Revision Processes

The fiscal resources for supporting the School of Nursing (SON) include appropriations to Lander University (LU) from the South Carolina legislature and revenues from tuition and fees. The SON has additional resources from a Nursing Endowment account, grant funding through the Partners in Preparing for Practice Memorandum of Agreement with Self Regional Healthcare, and monies from private donors. These funding sources in sum are minimally adequate for the SON to achieve its mission, goals, and expected outcomes.

Lander University continues to employ an incremental budgeting process in which the previous period's budget or actual performance is used as the basis for the next budget period. Incremental amounts are added as needed. The Director of the SON coordinates budget requests from the nursing faculty and presents them to the Dean of the College of Science and Mathematics (COSM). Faculty members are involved in, and informed of, the budget process through meetings with the Director and with the Dean (, NFO Feb. 4, 2015, NFO August 21, 2013, NFO August 17, 2012). The Dean relays requests from each department in the COSM to the Vice President for Academic Affairs, who presents them to the President's Council. The budget is reviewed and approved by the Lander Board of Trustees in June for the new fiscal year, which runs from July 1 to June 30. Although the University endured a substantial budget shortfall in the 2013-2014 academic year, the SON budget was not directly impacted. Copies of budgetary information for the past three years is available in the Resource Room.

Salary and operational funds have been minimally adequate to meet the mission, goals, and expected outcomes of the program. Monies for additional student and faculty educational opportunities, capital improvements, Nursing Advisory Board functions, and other important social and educational events have been funded through the additional resources noted above (NFO minutes May 2, 2012, August 20, 2014). Additionally, both program options will require added faculty resources to reach full capacity and optimally meet the needs of the community of interest. An additional FTE for faculty was anticipated for the 2013-2014 academic year, but was delayed and filled in 2014-2015 (NFO December 10, 2013, NFO January 8, 2014).

The Nursing Endowment account, managed through the Lander Foundation, provides funds to engage speakers for nursing events, enhance collegiality among nursing faculty members, support student development, and aid nursing faculty to attend state, national, and international nursing events. The Lander Foundation receives donations to this fund, manages the corpus, and permits use of 4% each year or currently \$4500 (FY 2014-2015).

The Partners in Preparing for Practice with Self Regional Healthcare was established in 2000. Funds from the Partnership were used to develop and redesign the Simulation Laboratory and to create the new Simulation Center. Funds are also used for major purchases such as a Smartboard and LED screens for the Simulation Center, faculty professional development, and technological purchases not funded by the university such as faculty iPads.

Private donors have provided funding for special events within the SON. One alumni donor has established a discretionary fund to be used for activities not currently funded through the SON budget such as Medical Reserve Corp exercises and interprofessional educational events. For the past two years, another local private donor has provided funding for the expenses related to a reception to honor nursing graduates following the Nursing Recognition Ceremonies held each fall and spring.

Faculty Salaries

Salaries for nursing faculty are comparable to salaries of other LU faculty members. In fact, the mean salary for nursing associate and assistant professors (tenured and tenure-track positions) is at or above the LU mean salaries for faculty in the same rank. The starting salary for lecturers in nursing (tenure-track, Master's prepared) is at least equal to the LU mean salary for lecturers. However, faculty salaries for the SON remain below the state and national average for nurse faculty salaries when compared by rank and educational preparation. According to the American Association of Colleges of Nursing's *Salaries of Instructional and Administrative Nursing Faculty in Baccalaureate and Graduate Programs of Nursing (2014-2015)*, the salary for a non-doctoral instructor (lowest reported rank) at a public institution is \$73,271 (document available in the Resource Room). This is compared to a mean Lander SON non-doctoral lecturer salary of \$46,062. While faculty salaries have not been directly cited as a faculty retention issue over the past three years, lower salaries have posed a problem for recruitment of faculty and remain a threat to faculty retention.

Laboratory/clinical instructors who are employed part-time are compensated based on academic preparation. BSN prepared instructors earn \$30/hour; Master's or doctorally-prepared instructors earn \$35/hour. When full-time faculty members teach laboratory/clinical during the academic year, compensation is considered as part of the expected 12 -15 contact-hour faculty workload.

Staff Support

Staff support for the SON includes one full-time administrative specialist. The administrative specialist is responsible for all clerical and receptionist functions in the SON. The SON is allocated a part-time student worker (non-nursing major) funded through the budget of the COSM. Due to the addition of the new MSN-CNL program and a desire to expand the RN-BSN option, a request was made in 2013-2014 to the university administration for an additional FTE for administrative support. The request for an additional full FTE was denied due to budgetary constraints; however, an administrative specialist from the COSM provides seven hours per week of support for the RN-BSN option (NFO October 2, 2013). The administrative support for the SON is not adequate to meet the needs of the BSN and MSN programs.

Physical Resources

The SON is located within Barratt Hall. The building was shared with Lander University Office of Advancement until August 2013, at which time the University Advancement offices relocated and the SON was granted use of the remaining space in Barratt Hall. Physical resources in Barratt Hall include four classrooms, office space, a conference room, and a student lounge. Additionally, Barratt Hall has a student computer laboratory, a Simulation Learning Center, and three other nursing clinical laboratories. The SON has the first option for use of space in Barratt Hall. After nursing classes are scheduled, other university departments may use classrooms in the building.

Lander University has over 60 SMART (Shared Multimedia Access to Resources for Teaching) classrooms throughout campus; each is equipped with Extron Media Link Control Systems, DVD players, VCRs, sound systems, laptop input, auxiliary video input, and wireless and wired network access. All classrooms in Barratt Hall are equipped with SMART classroom technology.

Clinical space previously provided by Self Regional Healthcare (SRH) is no longer available to the SON. Clinical laboratory sections that had been held at SRH for almost seven years had to be moved into the Barratt Hall simulation laboratory in spring of 2013. This was found to be crowded and a less-than-ideal learning environment. To better meet the needs of the SON, construction was completed in the summer of 2013 to renovate the simulation lab and create the Strategies Laboratory. This renovation required the temporary relocation of simulators into an existing Student Study Room. During this period, student simulation opportunities were limited due to minimal space for simulators. During that transition period, students in the pediatric nursing course were required to use the pediatric simulation laboratory at the local technical school.

The Simulation Learning Center was created during the 2013-2014 academic year in the newly acquired space in Barratt Hall. This new educational resource features four rooms for high-fidelity simulation, two debriefing rooms, a task training room, as well as storage and utility space. The development of the Simulation Learning Center allowed for the opening of a Wellness Lab, which houses the on-campus laboratory component for NURS 235: Lifespan Wellness Nursing and a student study area in the BH-100 suite.

Faculty Offices

Each full-time nursing faculty member has a private office with a computer, access to a network printer, wireless Internet access, telephone, and adequate work space. Part-time nursing faculty teaching didactic coursework are granted office space. The annual SON budget for maintenance and operations includes office and teaching/learning supplies.

Faculty Computer Services

Each full-time faculty member of LU is issued a laptop computer to support instruction and communication. Laptops are replaced on a cyclical 4-year schedule. The Faculty Laptop Program was established to support faculty members in electronic communication and in preparation/delivery of instruction. The Faculty Laptop Program is funded by the South Carolina State Education Lottery and is overseen by Lander University's Lottery Technology Committee. Full-time faculty members in the SON are also issued iPads, purchased with funds from Partners in Preparing for Practice.

Information Technology Services (ITS) provides faculty members with technical support for computer and network related problems. Services and equipment include audio, CD and video duplication services, and also digital cameras, digital camcorders, and other equipment. A Technology Learning Center (TLC) is provided for faculty and staff in Jackson Library, with two fully-equipped training rooms. The TLC offers regular training sessions for university supported software such as Blackboard, Microsoft Office Applications, and E-mail Management. The TLC staff also offer personalized training with desk-side coaching.

Computer-based resources for faculty members include an online directory and printable phone directory. E-mail services allow off-campus Web Mail access, mailbox management, and a faculty/staff listserv. All faculty and staff have access to Bearcat Web, which provides information about course offerings, class schedules, students, and employee status. Department chairs/directors and administrative specialists have access to Banner, an administrative software application developed specifically for higher education institutions. Banner maintains a common database and consists of five integrated systems: advancement, financial aid, finance, human resources, and student information. This system provides ease of record maintenance for all students from application through alumni status. MyLander Portal, a secure site, provides single sign-on access to announcements, e-mail, Bearcat Web, and Blackboard. The Lander Alert System provides optional text message and e-mail notification regarding emergencies on campus, weather-related closings and emergency safety instructions.

II-B. Academic support services are sufficient to ensure quality and are evaluated on a regular basis to meet program and student needs.

Elaboration: Academic support services (e.g., library, technology, distance education support, research support, admission, and advising services) are adequate for students and faculty to meet program requirements and to achieve the mission, goals, and expected program outcomes. There is a defined process for regular review of the adequacy of the program's academic support services. Review of academic support services occurs and improvements are made as appropriate.

Program Response:

Lander University (LU) provides multiple academic support services to enhance student learning and enable academic departments to achieve their mission, goals, and expected outcomes. Students have evaluated academic support services through the Student Opinion Survey (SOS) with some services also using a site-specific survey to obtain student feedback. However, the SOS was discontinued by American College Testing with the last recorded Lander survey in 2011. Lander attained satisfaction ratings at or above the national average on almost all categories. The SOS information and results are posted online at http://www.lander.edu/academics/Institutional-Effectiveness/Student-Opinion-Survey.aspx. Graduate and online students have equal opportunity to provide feedback as traditional students. In spring 2015, Lander students had an opportunity to evaluate academic support services using the Noel Levitz Student Satisfaction Inventory available at http://www.lander.edu/noel-levitz-survey/2015/ssi/institutional-summary.html.

Faculty feedback has been obtained every three years using the Higher Education Research Institute (HERI) survey. It was last completed during the spring 2013-2014 semester. "The Great Colleges to Work For" Survey was also conducted through the *Chronicle of Higher Education*. The Survey Committee of Lander Faculty Senate was tasked with analyzing the HERI and "Great Colleges" data. Past results were shared with university administrative officials. Results from 2013-2014 will be available in the Resource Room. Starting spring 2015, administrators, faculty and staff participated in the Noel Levitz *Institutional Priorities Survey*.

Library Services

The Larry A. Jackson Library, built in 1977, provides students with access to multiple resources for educational support. The 55,000 square foot three-floor library building also houses a student computer laboratory and gourmet coffee shop (Java City). Recent renovations include the addition of several student study rooms as well as updates to seating and gathering spaces for a more comfortable, welcoming atmosphere. The library is staffed by three librarians and three support personnel with additional help from student assistants. The library schedule provides sufficient time for access, with hours extended before and during exams.

The library currently licenses databases through two state consortiums, PASCAL (Partnership Among South Carolina Academic Libraries) and DISCUS (Digital Information for South Carolina Users) including Stat!Ref and Anatomy & Physiology Online (which includes access to Stedman's Medical Dictionary and MedCalc3000) . Specific to the discipline of nursing, the library pays additional monies over the standard membership fees to purchase upgrades on databases to obtain more full-text coverage for patrons. Examples of this include a subscription to CINAHL Complete (versus CINAHL Plus w/FT) and Academic Search Complete (versus Academic Search Premier). In addition to these consortia, the library licenses resources and upgrades to databases offered by the consortia out of the library budget. Examples of these resources include Films on Demand, a streaming documentary database containing over 19,700 titles (2,788 of these are specific to health and medicine). Remote patron authentication permits off-campus faculty and students to access electronic databases.

Jackson Library collaborates with other libraries to provide in-state, national and international interlibrary loan services. Through the library's membership in PASCAL, all Lander students, faculty, and staff have access to a service called PASCAL Delivers which allows patrons to place requests to borrow books owned by other colleges and universities in the state.

The library print and electronic holdings are sufficient to meet the needs of faculty and students in both the on-campus and distance programs. The total collection of the Jackson Library includes items in a variety of formats, including books in the circulation and reference collections, bound periodicals, microfilm reels, and microfiche. An electronic book collection of over 100,000 titles is also available to students, both on- and off-campus, through remote patron authentication.

Lander students have excellent access to professional librarian services. In the fall of 2014, the library began using a single service point model which includes a tiered reference service. Students are trained to answer simple reference questions and the more complex or involved ones are immediately transferred to a professionally qualified librarian. Librarians can be contacted via phone, email, or walk-in. An online form allows students, faculty, and staff to set a specific appointment time with a librarian.

A specific librarian, Adam Haigh, who holds advanced degrees in both Library and Information Science has been assigned to manage requests or needs from the SON students and faculty members. Faculty members can request instruction to introduce students to the literature and research methods in the major. Students are first introduced to library resources specific to nursing in the first semester nursing course NURS 165: History and Trends. In their third semester of nursing, students are given a more in-depth session on research tools and techniques in NURS 303: Nursing Research. RN-BSN and graduate students have an orientation to the library on their Lander Orientation Day.

The need to maintain a current and adequate library reference base continues to remain a priority for the SON. The Nursing Curriculum Committee is charged with coordinating the SON's library requisitions and leads the faculty in updating and diversifying the nursing collection. The librarian assigned to the SON works with the faculty to maintain a collection that is representative of the discipline of nursing and is

kept up to date. Since July 2011, the library has acquired approximately 234 new books on a variety of medical topics. Included are books that deal with application of nursing theories, career advice, care planning, and drug guides. In addition to acquiring new titles, the nursing collection also retains a number of classic nursing publications of historical importance.

Student Technology Support

Because access to technology is a requirement of many classes, LU encourages each student to have access to a mobile computing device equipped with functional keyboards and programs that are compatible with Microsoft Office Suite programs. To enhance the learning experience, students use computers for connecting to the Internet, accessing their Lander e-mail account, instant messaging, taking online courses, taking notes in class, participating in class discussions, conducting research, registering for classes, and accessing course information such as syllabi, assignments, and grades.

While LU no longer specifically requires students to have a computer, the SON requires that students admitted to the nursing major have a laptop based on specifications from Lander Instructional Technology Services (ITS). Students are informed of this requirement and specifications in their acceptance letter. The Student Laptop Recommendations will be available in the Resource Room.

Lander provides several computer lab spaces. Technical resources include software such as the Microsoft Office Suite and the Adobe Creative Suite (limited editions); library printing services including black/white, color, and large format printers, and access to specialized equipment such as scanning stations and largescreen computers. These labs provide access to both Mac OS and Windows-based devices. Lander provides Microsoft Office 365 to all students at no cost.

In addition to their personal computers, students have access to a variety of computers in the library, Learning Center, and Laura Lander Hall. Twenty computers are dedicated to nursing students in the Barratt Hall Technology Center; however, the SON has identified a need for a computer lab that can accommodate forty students for online testing and classrooms with additional computer- equipped capabilities. Additionally, all students are awarded \$30.00 copying credit for fall and spring terms. If they are enrolled in summer classes, they are awarded \$15.00 credit for summer. These amounts reset prior to the start of the term. Additional credit may be purchased through the Business Office.

Information and technical support for computer and network-related problems is provided Monday through Friday. The Technology Resource Assistance Center for Students (TRACS) is a resource that provides assistance in the residence halls when students have laptop or network connection problems. TRACS is located in the library, but through the use of TRACS Connect IT, technicians are able to connect remotely to student laptops to assist them with individual computer problems.

The ITS Help Desk is a resource for all students, including RN-BSN and Clinical Nurse Leader (CNL) graduate students. Issues such as password resets can be resolved with a student technician at the Help Desk. The Help Desk is manned with student technicians during regular hours that typically mirror the same operating hours

as the library. If a student has a problem after normal business hours, a work ticket may be initiated so that the issue is routed to the correct party in a timely manner. Information is available on the ITS website as to how to get support. ITS staff also monitor critical systems at all times, including nights and weekends. If there is a campus-wide service outage or problem that affects faculty and students outside of normal operating hours, it is addressed by the ITS staff, however; there is no individual user support for faculty or students outside the normal business hours.

All students are issued an official LU e-mail account. Students have access to the MyLander Portal and may opt to receive the Lander Alert service for notification of potentially dangerous campus activity or bad weather. Student tutorials and FAQs are provided to help students use Blackboard.

The SON provides equivalent access to campus computer services for students in the RN-BSN option and CNL graduate program. This includes orientation to computer services at the beginning of each semester. All RN-BSN and CNL students receive the same print credit as other students for use when they are on campus. The Blackboard Administrator & Instructional Technology Manager, Karen Minter, provides technology support for students in online completion programs.

Lander has obtained student evaluations of computer services through the Student Opinion Survey (SOS). The Lander results for computer services from spring 2011 were 4.40, significantly better than the national norm of 3.93 (1.0 to 5 scale). This was the highest rating since the SOS was instituted in 1996. In spring 2015 the Noel Levitz Student Satisfaction Inventory (SSI) listed computer lab access and adequacy as a strength.

As a leader in technology on campus, the SON has developed a close working relationship with ITS. For example, when the SON had difficulty with online testing, ITS responded by adding more wireless routers. The connection problem was ultimately managed by hardwiring desks for network access in three of four Barratt Hall classrooms. However, security issues with online testing continue to be a concern. ITS currently is working to eliminate this concern campus-wide through an upgrade to test security software in fall 2015. ITS has worked with the SON in technology in the Simulation Center, upgrading the Barratt Hall Technology Center, and providing SMART Boards in Barratt Hall classrooms.

Financial Aid

Lander University Financial Aid is authorized to participate in federal aid programs through the Program Participation Agreement. The Financial Aid Office complies with the Higher Education Reauthorization Act Title IV eligibility regulations. It is a member of the National Association of Student Financial Aid Administrators and adheres to its code of conduct.

Prelicensure option, RN-BSN option, and CNL graduate students are eligible to apply for the financial resources that are available to all Lander students. The application process is the same for undergraduate and graduate students. The Financial Aid Office uses the Free Application for Federal Student Aid (FAFSA) to award all need-based financial aid. Applicants may access and complete the form online at http://www.fafsa.gov.

The Financial Aid Office meets all federal compliance requirements, including the annual Fiscal Operations Report and Application to Participate (FISAP). Compliance with federal requirements is evaluated annually by Lander's audit firm, Elliot Davis, LLC, and copies of audit results are submitted to appropriate federal and state authorities, as required. Information about financial aid, Title IV, and other financial assistance available to Lander students is available on the Lander University Financial Aid Office's web page at http://www.lander.edu/finaid.

Wellness Center

The Wellness Center provides LU students with ambulatory care that includes Health, Counseling, and Disability Services. The student health service fee paid each semester by all Lander students covers on campus routine nursing assessments and treatments and physician care for ill students during normal office hours. Services include: consultation on health maintenance, immunizations, health education, screenings, and lifestyle management. To support health, LU is a tobacco-free campus.

Counseling Services provides personal counseling and mental health referral at no cost to all students. The Wellness Center serves as a Health Education Resource Center with educational programming targeted at alcohol awareness, smoking cessation, nutrition, sexual assault and abuse, eating disorders, student development, and leadership. Students in NURS 393: Mental Health Nursing collaborate with the Wellness Center in providing educational programming. The duties of the Office of Student Disabilities were incorporated into the Wellness Center in fall 2008. Kimberly Shannon, RN, MPH of Disability Services acts as a liaison to meet accommodation needs for students with documented physical and learning disabilities.

Health Services is a part of the holistic *Student Affairs Behavioral Intervention Team (BEIT).* In its seventh year, the team increases on-campus safety for students and employees to enhance the learning process and the attainment of educational goals. The team members address any critical student behavioral and mental health incidents through the review of Student Concern/Early Alert reports and situations, Lander University Police Department (LUPD) Incident Reports, Student Conduct Incidents, and information gathering and sharing. They provide recommendations to ensure the safety and educational success of Lander University's staff, faculty, students, and employees.

The Wellness Center uses student surveys to evaluate the effectiveness of services provided. The results are used to improve programs and to identify specific education needs. Staff have worked on their goals of developing a more efficient method of survey return, coordinating programming among the three units to increase participation in a cost-efficient manner, developing a Facebook page to increase student awareness of services, increasing offerings for continuing education in the area of physical and mental health, and strict enforcement of tobacco policy violations. In the 2011 Student Opinion Survey, the Student Health Insurance Program, Health Services, Personal Counseling, Parking Services, and Residence Hall Services garnered the "Largest Positive" student responses on campus.

Academic Success Center

The Academic Success Center (ASC) offers support, free-of-charge, to enhance academic skill levels for all Lander students. Located in Genesis Hall, services include free tutoring for all Lander students through the Mathematics Laboratory, Peer Tutoring Laboratory, Writing Center, and PRAXIS I Tutoring Laboratory. The Writing Center also provides an online Writing Tutoring Laboratory to better meet the needs of online students (including those in the RN-BSN option and CNL program). In addition, the ASC administers placement testing for the campus and standardized testing for the Educational Testing Service (ETS). In fall 2014, the ASC became a trained testing site for the TEAS V test. This test is administered in a pilot effort to screen nursing candidates for academic strength prior to admission to the nursing major. The Director of the Academic Success Center coordinates accommodated testing as needed for students with disabilities at LU. All accommodations are implemented according to ADA regulations. ASC coordinates a variety of programs aimed at improving student success (described below).

- The Student Academic Success Program (SASP) provides individualized assessment of students on academic probation. Students are given specific advice on courses to repeat, study skill workshop, courses to attend, and tutorial services.
- Early Alert/Student Concern helps identify students who are having difficulty in coursework early in the term. These students are referred to the Academic Success Center by the student concern/early alert form for tutorial assistance, study skills enhancement, and/or counseling.
- **College Seminar 101 (CSEM 101)** designed to help students develop effective study skills. In College Seminar, students refine their skills through peer interaction and direct application of newly acquired skills to apply to their current coursework. This course examines various topics needed for college success (i.e. note talking, time management, concentration, study strategies, test taking strategies and test anxiety).

• Student Support Services

The Student Support Services (SSS) program helps increase retention and graduation rates for selected students and facilitates their transition from one level of higher education to the next higher level. The requirements for acceptance to the program include documented disabilities, first-generation college student status, and financial need. SSS provides assistance with financial aid, academic counseling, tutoring, mentoring, and career planning.

Faculty Advising

Nursing majors are advised by nursing faculty members, while prenursing students may be advised by a nursing faculty member or a non-nursing faculty member from the College of Science and Mathematics, the Library, or the ASC. The average number of advisees for each nursing faculty member is approximately 25. However, the Director of the RN-BSN option serves as advisor for all RN-BSN students and has approximately 54 advisees. The Coordinator of the CNL graduate program serves as the assigned advisor for the graduate students. In fall 2013, online advising notes were added as a new feature to enhance documentation of advisement sessions and promote communication. Each new faculty member participates in one semester of orientation to the Lander advising policies and procedures prior to being assigned an advising load.

Lander evaluates all faculty advisors each semester through the use of an advising survey. Students complete the survey anonymously online through the MyLander portal and are required to participate in the advising survey in order to register for courses. The survey results become part of each faculty member's annual evaluation conducted by the College Dean (See Standard IV). The Dean verifies that each faculty member has met the evaluation criteria related to academic advising. A copy of the advising survey is available in the Resource Room.

Each nursing class (including prenursing, prelicensure, RN-BSN, and MSN) has a faculty class advisor. This advisor serves as a means of communication between the SON and the class as a whole, keeping members of the class informed of deadlines and other information, and conducting elections for class representatives to the nursing committees. Out-of-sequence students have a faculty coordinator, Director of SON, who keeps students informed of deadlines and other information. Care is taken to assign a faculty class advisor for prelicensure students that does not have a teaching responsibility with that particular cohort of students to avoid a conflict of interest and ensure an open line of communication between the faculty and student group.

The Enhanced Advising Program is a freshmen retention initiative created by a faculty and student team which included Dr. Rebecca Cox-Davenport of nursing. It was formed to create a learning community of freshmen in similar fields of study guided by an academic advisor and an upperclassman peer mentor. This project's goal is to facilitate the transition from high school to university life while guiding students to become responsible and active participants in their matriculation process. A combination of social experiences and intense faculty guidance create a sense of bonding and community to optimize student success. The program is in the third year of implementation and has involved approximately 500 students and 25 faculty, including two nursing faculty.

Based on initial data supporting the effectiveness of the Enhanced Advising Program, the SON plans to implement a new retention initiative in fall 2015. This Five Minute Nursing Retention Check-In is a novel program utilizing coaching between an assigned advisor and at-risk students. The targeted student groups will be first and second sophomore nursing students and students repeating a course. The goals of the coaching sessions will be to address time management, study skills, goal setting, feedback, and referrals as appropriate (Section III, Policy & Procedure Manual).

The SON faculty provide an orientation to the nursing major for incoming sophomore nursing students. This orientation is mandatory and provides information about the curriculum, study hints, time management, academic policies, and provides a question-and-answer session with upper level students and faculty. Students receive a copy of the current *BSN Nursing Student Handbook*, obtain their nursing identification badge, and are fitted for the lab coat required for their initial clinical course. Students hear about opportunities for participation in the LU Student Nurses Association, the Lander Medical Reserve Corp, and nursing committees. Likewise students entering the RN-BSN and MSN programs are required to attend a similar orientation which includes the aforementioned information and provides acclimation to the online learning environment.

Lander Assessment of Institutional Effectiveness

Lander University has a well-developed process for assessing institutional effectiveness and the adequacy of resources. The Director of Assessment and Institutional Effectiveness is responsible for coordinating the assessment efforts of all units within the University, including academic and support units. The schedule for collecting and reporting assessment data changed from an eight-year to a five-year cycle with all areas reporting in 2013-2014. The calendar for collecting and reporting assessment data is located in the Annual Operational Assessment Plan at http://www.lander.edu/docs/assessment-

documents/Master_Schedule_for_Assessment.pdf?sfvrsn=0.

Full-time Lander faculty members evaluate the President, Vice-President for Academic Affairs, Deans, and Chairs on an annual basis. The Survey Committee of the Faculty Senate coordinates the process using online evaluations. The evaluations of the Department Chairs are distributed to the appropriate College Dean; the Dean's evaluations are submitted to the Vice-President for Academic Affairs; the Vice-President for Academic Affairs evaluations are proffered to the President; and the President's evaluations are submitted to the Chairman of the Board of Trustees. Copies of the evaluation forms will be available in the resource room.

II-C. The chief nurse administrator:

- is a registered nurse (RN);
- holds a graduate degree in nursing;
- holds a doctoral degree if the nursing unit offers a graduate program in nursing;
- is academically and experientially qualified to accomplish the mission, goals, and expected program outcomes;
- is vested with the administrative authority to accomplish the mission, goals, and expected program outcomes; and
- provides effective leadership to the nursing unit in achieving its mission, goals, and expected program outcomes.

Elaboration: The administrative authority of the chief nurse administrator is comparable to that of chief administrators of similar units in the institution. He or she consults, as appropriate, with faculty and other communities of interest to make decisions to accomplish the mission, goals, and expected program outcomes. The chief nurse administrator is perceived by the communities of interest to be an effective leader of the nursing unit. The program provides a rationale and a plan to come into compliance if the chief nurse administrator does not hold a graduate degree in nursing and a doctoral degree (if applicable).

Program Response:

Dr. Robbie South, D.H.Ed., MSN, RN, CNE was appointed Director of the SON in 2011 with the concurrence of the nursing faculty members and according to the appointment criteria set forth in the *Lander Faculty Handbook* (Section IV). She earned an Associate Degree in Nursing from the University of South Carolina in Spartanburg, a Bachelor of Science degree from the University of South Carolina in Columbia, a Master of Science in Nursing degree with a concentration in Community Health Nursing from the University of South Carolina in Doctor of Health Education from A. T. Still University.

Dr. South came to Lander in 2003 with extensive experience in public health nursing and nursing leadership. She held supervisory positions in the Department of Health and Environmental Control (DHEC) and the Department of Disabilities and Special Needs (DDSN). Dr. South has the nursing experience, and leadership and management base, to support the SON in accomplishing its purposes. She is licensed in South Carolina as a Registered Nurse and was previously certified as a Clinical Nurse Specialist (CNS) through the American Nurses Credentialing Center (ANCC).

Dr. South has responsibility as the Director of the prelicensure nursing option, the online RN-BSN nursing option, and the Clinical Nurse Leader graduate program. She is a member of all of the Nursing Faculty Organization committees. Dr. South holds a nine-month appointment, as do other department chairs at Lander. She is granted an additional one-month contract in the summer to enable her to continue managing the administrative responsibilities of the SON during the summer months.

Along with maintaining the legal and professional requirements for the nursing programs, Dr. South also maintains a full teaching load of 18-24 hours per year. Each chair/director at LU receives a stipend for serving in their position. With that stipend they can choose to 1) take the full stipend and teach a full load, or 2) take part of the stipend and with the other part, purchase release time. Due to the extra administrative responsibilities in nursing, this system does not allow for both adequate administrative time for the Director to manage the responsibilities of the SON and receive financial remuneration for those duties. The responsibilities of the Director of the SON are more extensive than that of others chairs at LU; however, the University does not have a system in place that recognizes this distinction. According to the AACN Salaries of Deans in Baccalaureate and Graduate Programs in Nursing, the mean salary of a dean/director of a BSN and higher degree program is \$109,540. According to the SC Department of Administration Accountability portal, the mean salary of four of the Deans/Directors of South Carolina BSN programs comparable in size to Lander's (USC-Aiken, USC-Beaufort, Francis Marion University, and USC-Upstate) is \$104,049. The salary of the Director of the SON of Lander, including the \$6000 stipend for serving as Director is \$69,666.

In May of 2013 and July 2014, Dr. South met with the Dean of the College of the Science and Mathematics to voice several concerns related to the workload and remuneration associated with the chief nursing administrator position. The Dean indicated that he was not in a position to grant her requests and referred her to the Vice President for Academic Affairs. Due to the growth in the SON, including the recent addition of the graduate program, Dr. South requested a reduction of teaching load to allow for adequate administrative time and a change to a 12-month contract. The contract change would provide more time for the administration of the two programs that are currently being taught in the summer. At present, there is limited faculty availability in the summer to address student questions, program concerns, and to manage other administrative issues. Dr. South also requested that the positional salary stipend be examined in relation to other similarly-sized schools in South Carolina. All three requests were denied. An attempt will be made again to request the aforementioned changes, particularly those that would facilitate administration of the SON, with a heightened focus on the South Carolina Nurse Regulations, Chapter 91 Article 2 Section 93-11, A.3.d. This regulation states that an approved nursing program's administrator must have "adequate time designated for administrative responsibilities".

Since becoming Director, Dr. South has primarily taught in her focus areas of community health and leadership. However, since joining the nursing faculty she has shown her versatility and flexibility by teaching eleven different nursing courses, including at least seven online courses. She has been a leader in the development of online courses and the enhancement of the RN-to-BSN option. She also was instrumental in the development of the curriculum for the Clinical Nurse Leader graduate program, admitting its first cohort in spring 2014. In fact, she developed and taught a course in this program in summer 2014. All of her nursing and teaching experiences demonstrate that Dr. South is academically and experientially qualified to serve as Director of the Lander University SON. Her curriculum vita is available in the Resource Room.

In addition to teaching, her current responsibilities also encompass all other aspects of the university faculty role: advising, scholarly and professional development, and service to Lander University, the nursing profession, and the community. Dr. South was promoted to the rank of Associate Professor and granted tenure effective fall 2009. In spring 2015, she was promoted to the rank of Professor. Dr. South's scholarly activities include presentation of a refereed paper entitled "Perceived Confidence of Baccalaureate Nursing Students in Providing Spiritual Care" at the 13th Biennial International Neuman Systems Model Symposium in Lehigh Valley, Pennsylvania (June, 2011) and presentation of a paper entitled "Exploring Spirituality and Spiritual Care in a Baccalaureate Nursing Program" to the Mu Zeta Chapter of Sigma Theta Tau (September 2011). She has also served as cocoordinator of the Lander University Medical Reserve Corps. A poster highlighting one of the LU exercises was presented in Nashville, TN at a national bioterrorism preparedness conference in May 2012. Her manuscript entitled "Virtual Excursion to the Legislature," (manuscript #JNE-2014-413 Version 1) has been published in the Journal of Nursing Education as a "Syllabus Selections" article. She is currently working on a manuscript to be included with a book to be published on the Neuman
Systems website. She also completed the course of study and passed the certification to be a Certified Nurse Educator. She is an active member of the prestigious Sigma Theta Tau International Honor Society of Nursing and maintains membership in ANA, SCNA, NLN, SCNLN, and SCPHA.

Dr. South's responsibility for managing the budget is comparable to that of other department chairs. She manages the SON maintenance and operations budget of \$20,000, the Nursing Endowment, the Partners in Preparing for Practice fund, and private donations. She makes periodic reports to the nursing faculty on the fiscal affairs of the school and solicits and honors requests from faculty members regarding equipment and supplies needed to improve the learning resources and environment for students. She supports faculty professional development and attendance at conferences.

Dr. South serves as an advocate for students, faculty, and the nursing program for achieving program outcomes. Her past service on the Lander Faculty Senate, on the University Grants Committee, and other senate committees strengthens her knowledge of university policies and provides information in orienting new nursing faculty. She advocated effectively with university administration to increase space allocated to the nursing program in Barratt Hall. She worked tirelessly in developing the new Simulation Center that opened in fall 2014. She represents the SON at meetings of the chairs of the COSM. She works effectively with the Chief Executive Officer and the Chief Nursing Officer from Self Regional Healthcare to maintain support for the Lander nursing program. She represents Lander on the South Carolina Council of Deans and Directors of Nursing Education, and serves as the Secretary for the SC League for Nursing. She was the original point-of-contact with Presbyterian College School of Pharmacy in the development of an Interprofessional Education Program and serves on this committee. Dr. South further serves the university as the chair of the Health Advisory Committee and as a member of the Blood Borne Pathogens Committee and University Graduate Committee.

She has been instrumental in the development of articulation agreements with other schools to streamline the transition from the technical schools to Lander. To further understand the community of interest, she serves on the Nursing Advisory Board for Piedmont Technical College and has been invited to serve on the Nursing Advisory Boards of Midlands Technical College in Columbia, SC. To share her expertise in developing nursing programs, she has also been invited to serve on the Nursing Advisory Board of Mars Hill College in Mars Hill, NC.

Dr. South is evaluated annually by faculty members through use of an anonymous online survey (the Chair's Evaluation). The process is coordinated by the Survey Committee of the Faculty Senate. All full-time nursing faculty members have an opportunity to complete this survey; the results are summarized and communicated to the Dean of the COSM. She is a strong, fair, effective Director of the SON and has been recognized as a nursing leader in SC as a Palmetto Gold Honoree. As a result of her leadership, Lander now has the CNL graduate program. In NURS 417: Community Health Nursing, she has helped students develop scholarships to promote professionalism and positively affect retention of nursing students. She has been a champion for evaluating fair load and salary compensation and securing monies for faculty development. She provides encouragement and support to all faculty. She

continues to exemplify professionalism in nursing through her dedication to students, nursing faculty, the community, and the university. Dr. South clearly meets or exceeds all of the criteria for the chief nursing administrator of the Lander University Nursing Program.

II-D. Faculty are:

- sufficient in number to accomplish the mission, goals, and expected program outcomes;
- academically prepared for the areas in which they teach; and
- experientially prepared for the areas in which they teach.

Elaboration: The full-time equivalency (FTE) of faculty involved in each program is clearly delineated, and the program provides to CCNE its formula for calculating FTEs. The overall faculty (whether full-time or part-time) is sufficient in number and qualifications to achieve the mission, goals, and expected program outcomes. Faculty-to-student ratios ensure adequate supervision and evaluation and meet or exceed the requirements of regulatory agencies and professional nursing standards and guidelines.

Faculty are academically prepared for the areas in which they teach. Academic preparation of faculty includes degree specialization, specialty coursework, or other preparation sufficient to address the major concepts included in courses they teach. Faculty teaching in the nursing program have a graduate degree. The program provides a rationale for the use of any faculty who do not have a graduate degree.

Faculty who are nurses hold current RN licensure. Faculty teaching in clinical/practicum courses are experienced in the clinical area of the course and maintain clinical expertise. Clinical expertise may be maintained through clinical practice or other avenues. Faculty teaching in advanced practice clinical courses meet certification and practice requirements as specified by the relevant regulatory and specialty bodies. Advanced practice nursing tracks are directly overseen by faculty who are nationally certified in that same population-focused area of practice in roles for which national certification is available.

Program Response:

Nursing Faculty

In 2014-2015 there were twelve full-time faculty members, one part-time faculty member, and 13 clinical instructors. Qualified preceptors are also used to support clinical teaching in senior level courses as well as in the RN-BSN option and Clinical Nurse Leader (CNL) program. This support is sufficient to accomplish the mission, goals, and expected outcomes of the program, but does not allow for growth in enrollment. The instructor-to-student ratio in laboratory/clinical groups varied from 1:2 to 1:10. The average class size for the RN-BSN option over the past three years was 13 with one-to-one instruction in clinical through the use of preceptors. In spring 2014, the SON admitted its first CNL cohort of two students. Class sizes for 2014-2015 are illustrated in Appendix H.

A full-time equivalent (FTE) for a Lander nursing faculty position is an employee who teaches 12-15 contact hours per week, advises a caseload of students, participates in assigned committee work, maintains at least six scheduled office hours

per week and participates in service and scholarship as defined by the university (SON Policy and Procedure Manual, Section V, Nursing Faculty Position Descriptions). FTEs of part-time laboratory/clinical instructors are determined by the following formula: total hours worked by all part-time instructors per week divided by 37.5 hours. In 2014 – 2015, the FTEs for laboratory/clinical instructors were 2.8 in the fall and 2.3 in the spring.

All nursing faculty members are licensed as registered nurses or advanced practice registered nurses and are academically prepared for the areas in which they teach. Academic preparation of faculty members includes degree specialization, specialty coursework, or other preparation sufficient to address the major concepts included in courses they teach. The SON has consistently attempted to recruit and retain faculty members prepared at the doctoral level. The number of doctorally prepared faculty has increased significantly since the last comprehensive review, with six full-time faculty members holding doctoral degrees in nursing or related fields in spring 2015. However, two doctorally prepared faculty plan to resign their fulltime positions effective May 15, 2015. The SON is currently recruiting additional doctorally prepared faculty, but have had limited interest. All other full-time and part-time faculty members hold at least a master's degree in nursing. Appendix I shows qualifications including academic preparation for each nursing faculty member in 2014-2015. Additionally, the nursing program requires all faculty members and laboratory/clinical instructors to have clinical experience in the areas they teach. Curriculum vita showing academic preparation and clinical nursing experience will be available for review in the Resource Room.

Laboratory/Clinical Instructors

Part-time laboratory/clinical instructors are hired by the SON on a semester-bysemester basis according to need. The South Carolina Board of Nursing (BON) regulations state that clinical instructors in a BSN program must hold the minimum of a baccalaureate degree in nursing. All laboratory/clinical instructors hired by the SON over the past three years hold at least a BSN degree; instructors with a master's degree in nursing are hired when available. Appendix J shows qualifications including academic preparation of the current clinical instructors in 2014-2015.

The SON strictly adheres to the South Carolina BON regulations for the maximum number of students that may be supervised by one instructor in clinical settings. The BON requires the following instructor-to-student ratios:

- One instructor to eight students (1:8) in acute inpatient settings where students are providing direct patient care
- One instructor to 10 students (1:10) in non-acute clinical settings
- One instructor to 15 students (1:15) when supervising preceptored clinical experiences.

Lander consistently maintains faculty-to-student ratios that meet this state regulation. Appendix H shows didactic class sizes and laboratory/clinical group sizes in 2014 – 2015. A record of current instructor-to-student ratios for fall 2015 will be available in the Resource Room.

II-E. Preceptors, when used by the program as an extension of faculty, are academically and experientially qualified for their role in assisting in the achievement of the mission, goals, and expected student outcomes.

Elaboration: The roles of preceptors with respect to teaching, supervision, and student evaluation are:

- clearly defined;
- congruent with the mission, goals, and expected student outcomes; and
- congruent with relevant professional nursing standards and guidelines.

Preceptors have the expertise to support student achievement of expected outcomes. Preceptor performance expectations are clearly communicated to preceptors and are reviewed periodically. The program ensures preceptor performance meets expectations.

Program Response:

Nursing students are paired with preceptors to enhance clinical learning experiences when appropriate. The nursing faculty defines a "preceptored learning experience" as follows:

The preceptored experience allows the student to work in the clinical area with a Registered Nurse who has been identified as a preceptor. The student is allowed to perform nursing care under the direct supervision of and at the discretion of the preceptor. Preceptors are expected to provide input to the course coordinator to facilitate the evaluation of student performance (Nursing Policy and Procedure Manual, Section I Part D: Glossary).

This definition clearly differentiates a preceptored learning experience from an "observation learning experience", which is defined as:

An observation experience allows the student to observe patient care activities/treatment modalities in a health care/community setting. The student activities will be agreed upon by course coordinator and the representative for the facility at which the observation occurs. Evaluation procedures for students in observation experiences are at the discretion of the course coordinator (Nursing Policy and Procedure Manual, Section I Part D: Glossary).

The SON strictly adheres to the South Carolina Board of Nursing (BON) regulations on the use of clinical preceptors. The BON requires that a preceptor must be a registered nurse with a minimum of two years clinical experience and with demonstrated competency in the area of assigned clinical teaching. Lander makes every effort to select preceptors who hold at least a bachelor's degree in nursing, in addition to meeting the BON requirements for clinical experience and demonstrated competency. In the prelicensure option, preceptors are used only in nursing courses offered in Level III (senior year). Preceptors are selected by course faculty members who assure that the preceptor meets SON qualification guidelines.

Each preceptored experience has an associated Preceptor Agreement that is signed and dated by the faculty member and the preceptor. A copy is kept on file in the SON and a copy returned to the preceptor. The responsibilities of the SON, clinical preceptor, affiliating agency, and student are stated in the written agreement. The

faculty member provides an orientation that includes the SON program outcomes, course and clinical objectives, preceptor role description, and methods of student and preceptor assessment. Faculty members are available to students and preceptors by cell phone while students are with preceptors. They communicate regularly with students and preceptors to monitor the clinical learning experiences as the course progresses. The preceptor supervises the student's safe performance of nursing activities and achievement of course objectives. The course faculty member obtains feedback from preceptors in order to evaluate the student's achievement of learning outcomes. The preceptor does not assign grades. The course faculty member also seeks suggestions informally from preceptors for program development.

Preceptor-related procedures for registered nurse and CNL students differ slightly from those for prelicensure students. RN-BSN or CNL students arrange laboratory/clinical experiences with preceptors according to the schedules of the RN or CNL student and the preceptor. The faculty member communicates electronically with the students and preceptors and is available by phone during clinical experiences to answer questions. Course-specific preceptor agreements, preceptor manuals, and examples of evaluations will be available in the Resource Room.

II-F. The parent institution and program provide and support an environment that encourages faculty teaching, scholarship, service, and practice in keeping with the mission, goals, and expected faculty outcomes.

Elaboration: Institutional support is available to promote faculty outcomes congruent with defined expectations of the faculty role and in support of the mission, goals, and expected faculty outcomes. For example:

- Faculty have opportunities for ongoing development in the scholarship of teaching.
- If scholarship is an expected faculty outcome, the institution provides resources to support faculty scholarship.
- If practice is an expected faculty outcome, opportunities are provided for faculty to maintain practice competence, and institutional support ensures that currency in clinical practice is maintained for faculty in roles that require it.
- If service is an expected faculty outcome, expected service is clearly defined and supported.

Program Response:

As described in Section II-A, the SON, through internal and external funding sources, has minimally adequate resources to support faculty members in achieving expected faculty outcomes in teaching, advising, scholarship, service, and practice. Institutional resources are supplemented by funding obtained from the Partners in Preparing for Practice through Self Regional Healthcare. In addition to financial support, Lander provides a variety of programs to promote faculty development. Lander also provides an opportunity for fulltime faculty and staff to take classes at Lander free-of-charge.

Lander Faculty Teaching Support

The Lander University Mission Statement specifies that LU "has chosen teaching and learning as its principal concerns . . ." As part of its Quality Enhancement Plan (QEP), the university focuses on improving teaching to support student learning. To strengthen faculty effectiveness in teaching and advising, LU provides a variety of faculty development programs.

Faculty EXPO

The Office of Academic Affairs hosts a variety of workshops the first two weeks of each fall semester to enhance faculty knowledge and interaction. These Faculty EXPO teaching workshops and classes are offered to all Lander faculty members. A total of 19 workshops were offered in fall 2014. Three of the workshops were mandatory: Campus Safety, Counseling Services, and Title IX. An additional half-day educational conference included sessions on Computer Safety, Financial Aid, Disability Services, and Reasonable Accommodations. The complete list of topics is available in the Resource Room. Additionally, the Lander Center for Effective Undergraduate Teaching (CEUT) promotes the exchange of ideas and increases the adoption of effective assessment practices throughout the institution through publication of a monthly newsletter, *The White Board.* This newsletter presents educational topics designed to stimulate, encourage, and inform. Archived copies of the newsletter may be found at http://www.lander.eu/Effective-Undergraduate-Teaching.aspx

Laerdal Training for Nursing Faculty

Nursing faculty received two full days of on-site training conducted by a representative of the Laerdal Company in 2012. The Laerdal Company is the manufacturer of all of the simulation mannequins in the Simulation Learning Center. The training included didactic and application activities related to a newly acquired obstetrics simulation mannequin and associated computer equipment. The training also included information on how to develop specific simulation scenarios.

Lander Faculty Scholarship

All full-time Lander faculty members are expected to maintain competency in the areas in which they teach by attending workshops or conferences or by maintaining certifications as appropriate. Tenured and tenure-track faculty members are expected to engage in scholarly activities in the form of research projects, presentations, and publications. Limited funds for faculty scholarship are available through Lander Foundation Faculty Grants and Lander University Faculty Development Grants. The SON supports faculty scholarship internally through scheduling flexibility, when possible and additional financial support. Faculty in the SON have received funding from all three sources for scholarly activities. Evidence of

the faculty's involvement in scholarship will be available in faculty curriculum vitae in the Resource Room.

Lander Foundation Faculty Grants

The Lander Foundation Faculty Grants (LFFG) program assists individual faculty members financially for scholarly and creative activities that contribute to professional growth and the enhancement of LU programs. LFFG grants support research, artistic endeavors, and course/curriculum development. Faculty members apply for these grants by submitting a project proposal. The project should result in a product to enhance Lander's academic status. All ranked academic and administrative faculty members and all teaching staff employed full time at Lander are eligible to apply. A university committee composed of representatives from each college determines the funding. Individual grant funding for one or more projects is limited to a maximum of \$5000 per year. LFFG grant money can be used for release time from teaching, grant-related travel, student wages, equipment and supplies, secretarial or other professional aid, and project costs.

Lander University Faculty Development Grants

The Lander University Faculty Development Grants program provides funds for scholarly and professional development activities with all Lander faculty members eligible to apply. This resource primarily funds professional travel and costs for faculty members to present their work at professional meetings. A faculty member may receive no more than \$2000 per academic year through this account. In the past three years, six nursing faculty members received partial support through Faculty Development Grants to support scholarship and professional development. Appendix K lists nursing faculty grants for 2012 – 2015.

Lander Faculty Service

Lander University recognizes the value of "service to others as a neighbor and a citizen" in its mission statement. Consequently, service is an expected outcome for all faculty members. Opportunities for service at LU include committee work, recruitment events, professional consultation, and service events such as flu clinics and tuberculosis screening clinics for the Education faculty and students. Service to the nursing profession is an additional expectation for SON faculty. Faculty members serve on professional and civic boards at the local, state, national, and international levels. Evidence of faculty member involvement in professional service will be available on site in the Resource Room.

New Faculty Orientation

Lander provides new faculty members with an orientation at the beginning of the fall semester. Nursing faculty members hired in the spring receive orientation in the SON during their first semester and attend the LU faculty orientation the following fall.

The LU faculty orientation includes information sessions with university officials and explanations regarding the requirements in the *Lander University Faculty Handbook*. Peer evaluations further assist new faculty members in gaining skills in the teaching role. In addition to the University orientation, the SON uses a New Faculty Orientation Checklist to structure the orientation process for new faculty members (copy in Resource Room). The Director orients new nursing faculty members to the *Nursing Policy and Procedure Manual* and to selected university policies during their first semester. Committee chairs are tasked with orienting new faculty to various SON functions. A faculty memory is assigned by the Dean of the COSM to assist with orientation to advising and to the curriculum.

Nursing Faculty Practice

Nursing faculty members are expected to maintain clinical expertise in the appropriate areas. This expectation for the nursing faculty exceeds requirements for other Lander faculty. Faculty members engage in a variety of practice opportunities to maintain clinical expertise. With the goal to provide service to the university coupled with nursing faculty practice, an attempt was made by the SON in 2011 to secure an opportunity for faculty practice on the Lander campus. The venture was to be a collaboration with Student Affairs and the Wellness Center. However, an agreement could not be reached due to the university having a long-standing contract with a local provider. A majority of the faculty continue to maintain practice outside of the university to maintain clinical competence and to meet clinical practice requirements for licensure and certification. For example, nursing faculty members are employed in staff level and supervisory positions, and provide nurse practitioner and staff level support of a local free medical clinic. Evidence of faculty practice will be available in *curriculum vitae* in the Resource Room.

Strengths of Standard II

The strengths of the Lander SON in relation to Standard II are presented below:

- The SON has a history of sustained support from external funding sources such as the Partners in Preparing for Practice and private donors.
- The Lander Library has ensured the adequacy of nursing resources required for the prelicensure and RN-BSN options and the MSN program, and has added new, innovative resources like *Films on Demand*.
- The SON has access to all of Barratt Hall for teaching, laboratories, and simulation.
- New nursing faculty members and laboratory instructors are provided a comprehensive orientation to role expectations.
- With external funding through Partners in Preparing for Practice, the SON established the new Simulation Learning Center that included purchases of high-fidelity simulators and the SimView System.

- The Director of the SON is educationally and experientially prepared to meet the needs of both undergraduate and graduate students.
- Nursing faculty members are involved in many professional organizations to strengthen their teaching and professional practice.
- Nursing faculty members maintain clinical excellence through professional practice in a variety of settings.
- Nursing faculty members engage in multiple service activities to the university, the discipline, and the community to demonstrate responsible citizenship and to role model nursing professionalism.

Areas for Continuous Improvement for Standard II

The areas for continuous improvement of the Lander SON are presented below:

- The SON needs financial resources to support marketing for the recruitment of RN-BSN and MSN students.
- Nursing faculty members need additional funding to support research and professional development.
- The SON needs increased financial resources to support continued growth in the prelicensure and RN-BSN options and the MSN program.
- The SON needs additional faculty to support growth in the prelicensure and RN-BSN options and the MSN program.
- The SON needs additional staff to provide administrative support, especially for the RN-BSN option and MSN program.
- The SON needs funding for the Nursing Simulation Center to update equipment, buy supplies, provide maintenance, and offer faculty training.
- The Director of the SON should be included in the institutional review of the adequacy of fiscal and physical resources that impact the SON.
- The SON needs a funding source to provide a stipend to faculty for the costs of required liability insurance, licenses, professional memberships, and certifications.
- The Director of the SON needs appropriate administrative time allowed for the management of the prelicensure and RN-BSN options and the MSN program.
- Since the SON is the only department of the University that is required to maintain a teaching contact load of 24-30 hours/annually, there is not adequate time for nursing faculty to engage in scholarly activities, professional development, maintenance of clinical expertise, and service within the Lander work week.

- The time required for faculty to coordinate clinical learning experiences using clinical instructors and/or preceptors is not consistently considered when calculating faculty workloads and/or overloads.
- The SON needs a dedicated Laboratory Manager/Simulation Technician for the new Simulation Learning Center to develop additional scenarios, order supplies for the SON, execute simulations, maintain equipment, and manage simulation scheduling.

Action Plan for Standard II

The action plan of the Lander SON for Standard II is outlined below.

- The SON will work closely with incoming Administration to address areas that need to be improved or strengthened.
- The Director of the SON will engage in dialogue with Administration regarding the current organizational structure and its impact on the compliance of the SON with the laws governing nursing in South Carolina and problems that the current structure imposes on evaluation of nursing performance.
- The Director of the SON will discuss with Administration the need for the SON's Director to be included in a defined process for regular review of the adequacy of the programs' fiscal and physical resources.
- The SON will explore the reinstitution of Monday-Thursday class scheduling in the nursing major to allow for time for professional development including practice, service, recruitment/retention efforts, and continuing education.
- The Nursing Assessment and Evaluation Committee will continue to review the adequacy of fiscal and physical resources on an annual basis for consideration by NFO.
- The SON will continue to inform Administration of the resources needed (personnel, physical, and fiscal) to support continued growth in all programs.
- Nursing faculty members will continue to engage in dialogue with Administration regarding calculation of faculty workloads and expectations for scholarly activity, professional development, practice, and service.
- The SON will explore the development of additional ways to orient Laboratory/Clinical Instructors (such as online orientation modules).
- The SON will seek additional faculty and administrative personnel for the SON programs, including a dedicated Laboratory Manager/Simulation Technician for the new Simulation Learning Center.
- The SON will continue to explore support for recruitment and marketing, especially for the RN-BSN option and the MSN program.

- The SON will seek to obtain additional scholarships for students, especially for those in the RN-BSN option and the MSN program.
- The SON will explore the feasibility of a designated computer laboratory or enhanced classroom for secure online computerized testing.
- The SON will seek funding for stipends for reimbursement of required professional expenses such as liability insurance, licenses, professional memberships, and costs of credentialing.
- The SON will explore more comprehensive Electronic Medical Record (EMR) programs for the Simulation Learning Center and Strategies Lab.
- The SON will define clinical coordination and continue dialogue with Administration regarding its consistent inclusion when calculating nursing faculty workload and overload.
- Ultimately the SON plans for program growth that will require the inclusion of a new nursing building in the Lander Strategic Plan.

STANDARD III

PROGRAM QUALITY: CURRICULUM AND TEACHING-LEARNING PRACTICES

The curriculum is developed in accordance with the program's mission, goals, and expected student outcomes. The curriculum reflects professional nursing standards and guidelines and the needs and expectations of the community of interest. Teaching-learning practices are congruent with expected student outcomes. The environment for teaching-learning fosters achievement of expected student outcomes.

III-A. The curriculum is developed, implemented, and revised to reflect clear statements of expected student outcomes that are congruent with the program's mission and goals, and with the roles for which the program is preparing its graduates.

Elaboration: Curricular objectives (e.g., course, unit, and/or level objectives or competencies as identified by the program) provide clear statements of expected learning that relate to student outcomes. Expected outcomes relate to the roles for which students are being prepared.

Program Response:

The curricula for both the undergraduate and graduate programs are congruent with both the University's mission and the mission of the School of Nursing (SON). In anticipation of the addition of the MSN program, the mission statement for the SON was revised in 2013 to broaden its scope in order to encompass graduate education (NFO minutes, August 21, 2013). The mission statement is the basis for the SON goal for students in both the BSN and MSN programs. This student goal was used to direct development of the aggregate student outcomes and individual student learning outcomes. Therefore, the individual student learning outcomes (program outcomes) are derived from the SON mission. These individual student learning outcomes summarize what students will accomplish as a result of their nursing education at Lander. Graduates achieve the aggregate student outcomes through the development of critical thinking, graduation, licensure, and employment.

The Curriculum Committee is charged with overseeing the consistent incorporation of the SON mission, philosophy, and expected student outcomes. The aggregate student outcomes and program outcomes are reviewed and reaffirmed annually by the NFO (NFO minutes, May 11, 2015). The mission, philosophy, conceptual framework, and individual student learning outcomes (program outcomes) are presented in the *Nursing Policy and Procedure Manual* Section I Philosophy and Curriculum. Tables 2 and 3 illustrate the congruence of the SON goal with the student outcomes and program outcomes for both the BSN and MSN programs. The BSN and MSN curricula incorporate course objectives that are clearly linked with program outcomes and are congruent with SON mission and goals.

The individual student learning outcomes are consistent with the roles for which the Lander SON is preparing its graduates. The plan for the BSN and MSN curricula are set forth in curriculum blueprints (Appendices L and M). The BSN curriculum is based on 12 organizing variables that were derived from the conceptual framework

and are consistent with the philosophy and mission of the SON. The MSN curriculum was derived from *The Essentials for Master's Education for Nursing* (AACN, 2011), The White Paper on the Education and Role of the Clinical Nurse Leader (AACN, 2007), and *Competencies and Curricular Expectations for Clinical Nurse Leader Education and Practice* (AACN, 2013). The curriculum is designed to prepare graduates to assume the roles associated with a Clinical Nurse Leader: advocate, educator, expert clinician, system analyst, and integrator of evidence-based practice (EBP). Tables 2 and 3 illustrate how the individual student learning outcomes correlate to the roles of the BSN and MSN nursing graduates.

Table 2

Congruence of SON Student Goal, Aggregate Student Outcomes, Individual Student Learning Outcomes, and Nursing Roles of the BSN Curriculum

Goal	Aggregate BSN	Individual BSN	Roles
	Student Outcomes	Student Learning Outcomes	
Educate professional nurses for current and future practice to meet healthcare needs, and to	1. Eighty percent (80%) of each cohort entering the BSN option will graduate with a BSN within 10 semesters.	 The graduates are prepared to: Apply the nursing process within the Neuman Systems Model to promote an optimal level of wellness through the use of primary, secondary, and tertiary prevention/interventions for individuals, families, and groups. 	Caregiver
advance professionally.	2. The School of Nursing will maintain a program success rate on the NCLEX-RN	2. Synthesize nursing theory with knowledge from selected other disciplines as a basis for care giving, communication, therapeutic interventions, and critical thinking.	Consumer of Research Caregiver
	licensing exam within 5% of the national mean.	 Use appropriate problem-solving approaches in varied settings to promote wellness for diverse client systems. 	Caregiver
	 One hundred percent (100%) of Lander nursing graduates who seek employment 	 Demonstrate leadership strategies to advance nursing practice and the nursing profession. 	Leader Consumer of
	in nursing will be employed as registered nurses	5. Utilize nursing research findings to improve the quality of nursing practice.	Research
	within six months of graduation.	 Incorporate established standards of professional nursing as the foundation for own nursing practice. 	Professional
	4. Students will demonstrate achievement in critical thinking ability at each level of the nursing major.	 Prelicensure program graduates are eligible to take the licensing examination to qualify as registered nurses (does not apply to the RN BSN Option) 	Professional

Table 3Congruence of SON Student Goal, Aggregate Student Outcomes, IndividualStudent Learning Outcomes, and Nursing Roles of the MSN Curriculum

Goal	Aggregate MSN	Individual MSN	Roles
	Student	Student Learning Outcomes	
	Outcomes		
Educate	1. Outcome 1:		Advocate
professional	Eighty percent	The graduates are prepared to:	
nurses for	(80%) of each	1. Effect change through advocacy for the	
current and	cohort entering	profession, interdisciplinary health care team and the client.	
future	the MSN nursing major will		Educator
practice to meet	graduate with an	2. Communicate effectively to achieve	Educator
healthcare	MSN within five	quality client outcomes and lateral	
needs, and to	academic years.	integration of care for a cohort of clients.	Educator/Expert
advance			Clinician
professionally	2. Outcome 2:	3. Actively pursue lifelong learning as the	Member of the
	Seventy five	CNL role, needs of clients, and the health	Profession
	percent (75%) of	care system evolve.	
	MSN graduates		Expert Clinician/
	seeking	4. Delegate and utilize the nursing team	Educator
	certification will	resources and provide leadership when	Team Manager
	successfully	partnering with the inter-professional health	
	complete the	care team.	
	CNL	C Identific allocidate and finantly recorded the	Outcomes
	certification.	5. Identify clinical and fiscally responsible	Manager
	3. Outcome 3:	outcomes that improve safe, quality, client- centered care.	
	Eighty percent		Information
	(80%) of MSN	6. Use information systems and technology	Manager
	graduates who	at the point of care to improve health care	Manager
	seek	outcomes.	
	employment in		Systems
	expanded	7. Participate in systems review by	Analyst
	nursing roles will	evaluating client safety risks to improve	
	be employed	quality of client care.	
	within one year		Expert Clinician/
	of graduation.	8. Assume accountability for health care	Systems
		outcomes, recognizing systems influences	Analyst
		on a specific group of clients.	
		0 Litilize information to design implement	Export Olinician
		9. Utilize information to design, implement	Expert Clinician
		and evaluate client plans of care. 10. Synthesize evidence to evaluate and	Manager
		achieve optimal client and care environment	manayer
		outcomes.	Evidence Based
			Practice
		11. Use appropriate teaching/learning	Integrator
		principles, strategies, and technology to	
		facilitate the learning of clients, groups, and	Educator
		the other health care professionals.	

- III-B. Curricula are developed, implemented, and revised to reflect relevant professional nursing standards and guidelines, which are clearly evident within the curriculum and within the expected student outcomes (individual and aggregate).
 - Baccalaureate program curricula incorporate The Essentials of Baccalaureate Education for Professional Nursing Practice (AACN, 2008).
 - Master's program curricula incorporate professional standards and guidelines as appropriate.
 - a. All master's degree programs incorporate *The Essentials of Master's Education in Nursing* (AACN, 2011) and additional relevant professional standards and guidelines as identified by the program.
 - b. All master's degree programs that prepare nurse practitioners incorporate *Criteria for Evaluation of Nurse Practitioner Programs* (NTF, 2012).
 - Graduate-entry program curricula incorporate The Essentials of Baccalaureate Education for Professional Nursing Practice (AACN, 2008) and appropriate graduate program standards and guidelines.
 - DNP program curricula incorporate professional standards and guidelines as appropriate.
 - a. All DNP programs incorporate *The Essentials of Doctoral Education for Advanced Nursing Practice* (AACN, 2006) and additional relevant professional standards and guidelines if identified by the program.
 - b. All DNP programs that prepare nurse practitioners incorporate *Criteria for Evaluation of Nurse Practitioner Programs* (NTF, 2012).
 - Post-graduate APRN certificate programs that prepare nurse practitioners incorporate Criteria for Evaluation of Nurse Practitioner Programs (NTF, 2012).

Elaboration: Each degree/certificate program incorporates professional nursing standards and guidelines relevant to that program, area, role, population focus, or specialty. The program clearly demonstrates where and how content, knowledge, and skills required by identified sets of standards are incorporated into the curriculum.

APRN education programs (degree and certificate) (i.e., Clinical Nurse Specialist, Nurse Anesthesia, Nurse Midwife, and Nurse Practitioner) incorporate separate comprehensive graduate level courses to address the APRN core, defined as follows:

- Advanced physiology/pathophysiology, including general principles that apply across the lifespan;
- Advanced health assessment, which includes assessment of all human systems, advanced assessment techniques, concepts and approaches; and
- Advanced pharmacology, which includes pharmacodynamics, pharmacokinetics, and pharmacotherapeutics of all broad categories of agents.

Additional APRN core content specific to the role and population is integrated throughout the other role and population-focused didactic and clinical courses.

Separate courses in advanced physiology/pathophysiology, advanced health assessment, and advanced pharmacology are not required for students enrolled in post-master's DNP programs

who hold current national certification as advanced practice nurses, unless the program has deemed this necessary.

Master's programs that have a direct care focus but are not APRN education programs (e.g., nursing education and Clinical Nurse Leader), incorporate graduate level content addressing the APRN core. They are not required to offer this content as three separate courses.

Program Response:

The BSN curriculum incorporates three sets of professional nursing standards and guidelines: The Essentials of Baccalaureate Education for Professional Nursing Practice (AACN, 2008), the American Nurses' Association (ANA) Nursing: Scope and Standards of Practice (ANA, 2010), and the ANA Code of Ethics (ANA, 2001). The ANA Standards and Code of Ethics are incorporated into the curriculum through course objectives that specify what the student is expected to achieve in relation to each specific statement. As an example, Table 4 illustrates how Essential VIII, Outcome 5 is addressed in the nursing curriculum through course objectives. Appendix N details how The Essentials of Baccalaureate Education for Professional Nursing Practice were used to develop the course objectives in the BSN program. The BSN nursing curriculum incorporates additional standards, developed by the ANA in collaboration with other professional associations, to support professional decisionmaking in specific areas of nursing. These standards are clearly listed in course syllabi and are incorporated into the courses where appropriate. For example, Critical Care Nursing uses the Scope and Standards for Acute and Critical Care Nursing Practice (ANA, 2008).

The MSN curriculum incorporates *The Essentials for Master's Education for Nursing* (AACN, 2011). The MSN program also incorporates guidelines from *The White Paper on the Education and Role of the Clinical Nurse Leader* (AACN, 2007) and *Competencies and Curricular Expectations for Clinical Nurse Leader Education and Practice* (AACN, 2013). MSN course objectives were carefully developed by the MSN Committee of the SON to ensure integration of all aforementioned standards, guidelines, and recommendations. As a track with a direct care focus, the MSN curriculum includes the APRN core requirements in NUR 611: Advanced Clinical Assessment, NUR 612: Advanced Pharmacology, and NUR 613: Advanced Pathophysiology. Syllabi from each course will be available in the Resource Room. Table 5 illustrates how Essential IX, Outcome 2 is addressed in the MSN curriculum through course objectives. Appendix O illustrates how course objectives incorporate these standards in the MSN curriculum.

A comprehensive document that illustrates how undergraduate nursing course objectives correlate with *The Essentials of Baccalaureate Education for Professional Nursing Practice* (AACN, 2008) and how graduate course objectives correlate with *The Essentials of Master's Education in Nursing* is available in the Resource Room. Copies of standards used in various courses are available in the Resource Room.

Table 4 Example of BSN Course Objectives that Address AACN Essential VIII, Outcome 5

Essential VIII: Professionalism and Professional Values Professionalism and the inherent values of altruism, autonomy, human dignity, integrity, and social		
justice are fundamental to the discipline of nursing.		
AACN Essential	NURS Course Objectives	
Outcomes		
5. Demonstrate an	NURS 165 #15. Discuss the historical context of nursing and	
appreciation of the history of and contemporary	contemporary issues that influence nursing practice.	
issues in nursing and their impact on current nursing practice.	NURS 393 #10. Explore the role of the professional nurse and recognize factors that impact the provision of mental health care in the changing healthcare scene.	
	NURS 408: Clinical Objective 3. Investigate and utilize current research findings to nursing care of clients in the critical care environment.	
	NURS/NURN 417 #20. Demonstrate an appreciation of the history of public health nursing and its impact on current nursing practice.	
	NURS/NURN 499 #4. Analyze the evolution of selected issues, including healthcare quality, safety and dissemination of information, and the recognition of the impact that the implementation of changes in care procedures have upon the nature of professional nursing.	
	NURS 499 #5. Identify/propose strategies that have the highest potential for influence in the best interest of professional nursing and the clients served.	

Table 5 Example of MSN Course Objectives that Address AACN Essential IX, Outcome 2

Essential IX: Master's-Level Nursing Practice			
	Recognizes that nursing practice, at the master's level, is broadly defined as any form of nursing		
intervention that influences	healthcare outcomes for individuals, populations, or systems. Master's-		
level nursing graduates mus	level nursing graduates must have an advanced level of understanding of nursing and relevant		
sciences as well as the abili	ty to integrate this knowledge into practice. Nursing practice interventions		
include both direct and indir	ect care components.		
AACN Essential	NUR Course Objective		
Outcome			
2. Apply the best available evidence from nursing and other sciences as the foundation for practice.	NUR 611: Integrate best available evidence from nursing and related sciences as the foundation for advanced assessment of diverse patients and populations.		
	NUR 612: Integrate best available evidence from nursing and related sciences to enhance understanding of pharmacological principles in advanced nursing care of diverse patients and populations.		
	NUR 613: Integrate best available evidence from nursing and related sciences to enhance understanding of normal physiologic and pathologic alterations that contribute to illness and disease.		

NUR 630: Within systems, integrate theory, evidence, practice guidelines, clinical judgment, and interprofessional perspectives to improve practice, safety, quality of care, and health outcomes for diverse populations.
NUR 640: Within systems, integrate theory, evidence, practice guidelines, clinical judgment, and interprofessional perspectives to improve practice, safety, quality of care, and health outcomes for acute and chronic health conditions.
NUR 651: Utilize best available evidence as foundation for nursing practice to determine appropriate application of interventions across diverse populations

III-C. The curriculum is logically structured to achieve expected student outcomes.

- Baccalaureate curricula build upon a foundation of the arts, sciences, and humanities.
- Master's curricula build on a foundation comparable to baccalaureate level nursing knowledge.
- DNP curricula build on a baccalaureate and/or master's foundation, depending on the level of entry of the student.
- Post-graduate APRN certificate programs build on graduate level nursing competencies and knowledge base.

Elaboration: Baccalaureate program faculty and students articulate how knowledge from courses in the arts, sciences, and humanities is incorporated into nursing practice. Post-baccalaureate entry programs in nursing incorporate the generalist knowledge common to baccalaureate nursing education as delineated in The Essentials of Baccalaureate Education for Professional Nursing Practice (AACN, 2008) as well as advanced course work.

Graduate curricula are clearly based on a foundation comparable to a baccalaureate degree in nursing. Graduate programs delineate how students who do not have a baccalaureate degree in nursing acquire the knowledge and competencies comparable to baccalaureate education in nursing as a foundation for advanced nursing education. Accelerated programs that move students from basic nursing preparation (e.g., associate degree or diploma education) to a graduate degree demonstrate how these students acquire baccalaureate level knowledge and competencies delineated in The Essentials of Baccalaureate Education for Professional Nursing Practice (AACN, 2008), even if they do not award a baccalaureate degree in nursing in addition to the graduate degree.

DNP programs, whether post-baccalaureate or post-master's, demonstrate how students acquire doctoral-level competencies delineated in The Essentials of Doctoral Education for Advanced Nursing Practice (AACN, 2006). The program provides a rationale for the sequence of the curriculum for each program.

Program Response:

BSN Curriculum Overview

The School of Nursing (SON) offers two options for completing the BSN: a traditional four-year option for prelicensure nursing students and an RN-BSN option for registered nurses. The RN-BSN option is delivered online through asynchronous format. Courses in the prelicensure option carry the prefix 'NURS'. Courses in the RN-BSN option carry the prefix 'NURN'. The curriculum worksheets for both options are presented in Appendices P and Q.

In keeping with Lander's emphasis on liberal arts education, the BSN nursing curriculum includes a broad liberal arts foundation. Nursing students are encouraged to complete their general education courses throughout the curriculum rather than prior to admission to the nursing major. This recommendation is based on the belief that enriching discipline-specific learning with liberal arts throughout the curriculum enhances the overall student learning experience.

Lander University initiated a revised set of general education competencies in 2010. Expected student competencies include:

- University-level knowledge and comprehension
- The ability to apply information
- The ability to analyze information
- The ability to communicate effectively and appropriately.

The general education program of 44 hours is divided into twelve categories including: Writing, Mathematics, Logic and Analytical Thought, Laboratory Science, Behavioral Science, History, Political/ Economy, Fine Arts, Humanities, Humanities/ Literature, Wellness, and Global Non-Western Studies (copy of current Lander University Catalog in Resource Room). Students must complete a Foreign Language requirement (based on placement testing) and a Fine Arts and Lectureship Series (FALS) requirement. First-time freshmen and all new transfer students with less than 24 semester hours of college-level work are also required to take University 101 (UNI 101). Students in online degree programs (including RN-BSN) are not required to complete FALS or UNI 101. Articulation agreements with the technical schools in SC were established for the RN-BSN option in 2014. Students are required to have equivalent hours; however, students are allowed some flexibility in choosing general education coursework from the institution's approved list of general education courses.

The BSN curriculum is logically structured and sequenced, originating from the SON mission. Organized through the conceptual framework, it progresses deductively from program outcomes (individual student learning outcomes) through level objectives to individual course objectives. The curriculum is based on the Neuman Systems Model (NSM). This model addresses the metaparadigm concepts which provide the philosophical foundation of the nursing curriculum: Person, Environment, Health, and Nursing. The conceptual framework provides the structure for the nursing curriculum through the use of organizing variables. The curriculum is divided into three levels, with prelicensure students entering the curriculum at Level I and students in the RN-BSN option entering at Level II.

Appendix R illustrates the congruence of the SON mission and philosophy, conceptual framework, and organizing variables for the BSN program. The major precepts in the mission and philosophy flow into the conceptual framework. For example, the philosophy states that "The metaparadigm of person, environment, health and nursing is integrated throughout the curriculum using the Neuman Systems Model . . .," and the conceptual framework states that, "The Neuman Systems Model addresses the four concepts which are basic to the nursing profession and the philosophical foundation of the Lander nursing curriculum: Person, Environment, Health, and Nursing". The organizing variables are taken from the conceptual framework. These variables provide the linking structure between the conceptual framework and the program outcomes, thus creating the structure for the curriculum.

There are six program outcomes (individual student learning outcomes) for the BSN program that apply to students in both options. The program outcomes set forth what is expected of nursing graduates when they complete the program of study. A seventh program outcome, referencing success on the NCLEX-RN, applies only to prelicensure students. Each program outcome has specific learning objectives for each level of the program. The learning objectives specify the level of achievement needed to meet the program outcome.

Program outcomes and level objectives for the BSN program express the concepts of the mission and philosophy of the SON as expected accomplishments for nursing graduates. The outcomes and objectives are based on the 12 organizing variables taken from the conceptual framework—Nursing Process, Communication, Critical Thinking, Therapeutic Interventions, Caregiver, Professional, Leader, Consumer of Research, Level of Wellness/Intervention, Clinical Setting, Client Focus, and Theoretical Base (NSM). The organizing variables are consistent with *The Essentials of Baccalaureate Education for Professional Nursing Practice,* as well as the ANA *Scope and Standards of Practice,* and *Code of Ethics for Nurses.* The level objectives for Level III are the same as the program outcomes, since those objectives set forth what is expected of students at the point of graduation.

Prelicensure Option

The required program of study for prelicensure students is divided into levels with content that progresses from simple to complex. This includes prerequisite coursework plus major Levels I through Level III. The prerequisite coursework includes a minimum of 30 hours of credit and requires completion of specified English, math, and science courses, each with a grade of C or better.

Level I includes courses that are taken at the sophomore level. Building on prerequisite courses, Level I courses focus on the foundations of nursing practice, growth and development, nutrition, physical assessment, and fundamental nursing concepts. Level II includes courses taken at the junior level. It expands focus to acute patient problems and application of basic nursing knowledge gained in the Level I courses, and incorporates nursing research as the basis of evidence-based practice. This level builds on liberal arts coursework in statistics as well as an additional biological science course. Level III includes courses taken at the senior level. It introduces increasingly complex concepts, both in relation to patient acuity and patient

populations, as well as the degree of critical thinking application. Building on Level II coursework, Level III enables the student to synthesize nursing and liberal arts knowledge.

RN-BSN Option

The curriculum for registered nurses in the RN-BSN option was developed based on the South Carolina Statewide Articulation Model. It meets requirements of the *Transfer Policy for Public Two-Year and Four-Year Institutions in South Carolina* (Revised 12/2009) from the South Carolina Commission on Higher Education. A copy of this document is available for review in the Resource Room. In accordance with the model, students who meet eligibility requirements receive credit for previous nursing education completed in an accredited nursing program.

Prerequisites for entry to the RN-BSN completion option include the RN license; a 2.6 GPA at the last school of attendance; and six specified prerequisite classes in English, science, and statistics. Registered nurses who graduated from an accredited nursing program are granted 39 hours of advanced standing toward the BSN degree following the successful completion of the bridging course, NURN 307: Professional Transition for Registered Nurses, with a grade of B or better.

The nursing core requirements for registered nurses include 21 credits in six required nursing courses. RN-BSN courses are tailored specifically to meet the needs of registered nurse students. For example, content and delivery of Physical Assessment and Pathophysiology is tailored to better meet the needs of practicing nurses who have developed skills based on previous clinical experiences.

BSN Curriculum Design

The nursing curriculum design is structured using program outcomes (individual student learning outcomes), level objectives, and course objectives. Each program outcome is divided into level objectives that specify learning outcomes for each of the three levels. The level objectives are then divided into course objectives. The course objectives for required nursing courses are listed in each syllabus as they relate to the objectives for each level. All syllabi are available for review in the Resource Room. Table 6 illustrates the relationship among the organizing variables, program outcomes and level objectives, with examples of selected course objectives. The organizing variables provide the linking structure between the conceptual framework and the program outcomes (individual student learning outcomes). The objectives for all required nursing courses are linked through level objectives to program outcomes. This information is included in course syllabi and is available for review in the Resource Room.

Table 6

Relationship of Organizing Variables, Program Outcomes, Level Objectives, and Selected Course Objectives

Organizing Variables	Program Outcomes, Level Objectives, & Selected Course Objectives*	
Nursing Process Neuman Systems Model	Program Outcome 1 Apply the nursing process according to the Neuman Systems Model to promote an optimal level of wellness through the use of primary, secondary, and tertiary prevention/intervention strategies for individuals, families, groups, and communities.	
Level of Wellness/ Intervention Client Focus	Level I. Apply the nursing process by utilizing primary and secondary prevention/ intervention strategies to assist the individual in the retention and attainment of wellness. NURS 235 - Examine the components of the individual's normal line of defense across the lifespan.	
	Level II. Apply the nursing process by utilizing primary, secondary, and tertiary prevention/intervention strategies to influence individuals and families in the retention, attainment, and maintenance of wellness. NURS 345 - Utilize the nursing process to assist adults whose lines of resistance have been penetrated by selected stressors in attaining and maintaining health.	
	Level III. Same as Program Outcome 1 NURS/NURN 417 – Apply the nursing process using the NSM to the individual and family living within the community and to population aggregates to assess and plan appropriate interventions.	
Neuman Systems Model Caregiver	Program Outcome 2 Synthesize nursing theory with knowledge from selected other disciplines as a basis for care giving, therapeutic interventions, critical thinking, and communication in its broadest application.	
Therapeutic Interventions Critical Thinking	Level I. Assimilate concepts from nursing, physical, biological, and social sciences as the basis for care giving, goal-directed communication and group process, critical thinking, and imitation of clinical skills. NURS 165 - Apply nursing theory and knowledge from other disciplines to examine the nurse's role in performing therapeutic interventions and providing care.	
Communication	Level II. Apply concepts from nursing, physical, biological, and social sciences as the basis for care giving, therapeutic communication, critical thinking, and therapeutic interventions with accuracy, beginning confidence, and proficiency. NURS 393 - Apply concepts from nursing, physical, biological, and social sciences as the basis for culturally-appropriate care giving, therapeutic communication, critical thinking and therapeutic interventions with accuracy, beginning with accuracy, beginning confidence and proficiency.	
	Level III. Same as Program Outcome 2. NURS 409 - Incorporate knowledge of children, families, supportive disciplines, and nursing theory into nursing practice.	

Organizing Variables	Program Outcomes, Level Objectives, & Selected Course Objectives*
Clinical	Program Outcome 3
Settings	Use appropriate problem-solving approaches in varied settings to promote wellness for diverse client systems.
Client Focus	
Critical	Level I. Apply the nursing process as a problem-solving approach to promote wellness for clients in selected community settings and long-term care facilities.
Thinking	NURS 235 - Perform selected basic health assessment skills used in screening clinics.
Therapeutic	
Interventions	<u>Level II.</u> Incorporate the nursing process and other problem-solving approaches to promote wellness for clients in selected community and in-patient settings.
Level of	NURS 345 - Use the nursing process and other problem-solving approaches to make
Wellness/	health care judgments to attain wellness for adults in secondary care settings.
Intervention	
	Level III. Same as program Outcome 3.
Nursing	NURS 409 – Demonstrate critical thinking as it pertains to planning and
Process	communicating interventions that promote social justice for at-risk individuals,
Communication	families, aggregates, and vulnerable populations at various stages of the human experience.
Leader	Program Outcome 4
	Demonstrate leadership strategies to advance nursing practice and the nursing
Professional	profession.
Consumer of	Level I. Assume the accountability for personal actions as a team member.
Research	NURS 235 – Demonstrate professional accountability in accord with the standards,
Communication	values, and ethical, moral, and legal parameters of professional nursing.
	Level II. Function as a coordinator of nursing care.
	NURS 345 - Collaborate with other health care team members as a provider and coordinator of nursing care for young, middle, and elderly adults.
	Level III. Same as Program Outcome 4.
	NURS 412 – Use critical thinking in analyzing questions of importance to nursing
	practice and leadership.
Consumer of	Program Outcome 5
Research	Utilize nursing research findings to improve the quality of nursing practice.
Therapeutic	Level I. Demonstrate ability to locate, read and identify the problem being studied in
Interventions	research articles. NURS 235 - Explain the relationship between nursing research and nursing practice
Caregiver	Level II. Generate researchable problems and applyze/oveluate research articles in order
Professional	Level II. Generate researchable problems and analyze/evaluate research articles in order to improve quality of own nursing practice.
Client Focus	NURS/NURN 303 - Explain how current research findings may be utilized to improve nursing practice and influence nursing system change.
	Level III. Same as Program Outcome 5
	NURS 408 - Incorporate results of research regarding complex stressors and nursing strategies into nursing practice.

Organizing Variables	Program Outcomes, Level Objectives, & Selected Course Objectives*
Caregiver	Program Outcome 6 Incorporate established standards of professional nursing as the foundation for
Professional	own nursing practice.
Client Focus	Level I. Demonstrate understanding of basic elements of the ANA Code for Nurses and the ANA Standards of Clinical Nursing Practice.
Communication	NURS 242- Demonstrate the importance of professional accountability in accord with the standards, values, ethical, moral, and legal parameters of professional nursing in a changing healthcare environment.
	Level II. Assimilate elements of the ANA Code for Nurses and the ANA Standards of Clinical Nursing Practice into own nursing practices.
	NURS 345 - Incorporate professional standards and ethical codes into professional nursing practice.
	Level III. Same as Program Outcome 6. NURN/NURS 417 – Function in the role of a generalist professional nurse within the parameters of the ANA Code of Nurses and the ANA Standards of Community Health Nursing Practice to promote health retention, attainment, and maintenance for the community.

The master plan for the BSN curriculum is set forth in a curriculum blueprint, which structures the curriculum by levels, using organizing variables taken from the conceptual framework. Appendix L presents the blueprint for the nursing curriculum. The curriculum blueprint is expanded into a set of Course Design Maps, which serve as the comprehensive planning document for each course in the curriculum. These maps set forth a detailed plan for the didactic content, laboratory/clinical content, instructional strategies, and methods of evaluation. The Course Design Maps offer a resource for faculty to ensure appropriate coverage of curricular content and are available for review in the Resource Room.

MSN Curriculum Overview

The SON began to offer a Master of Science in Nursing: Clinical Nurse Leader program in January 2014. This program is delivered online in an asynchronous format. Courses in the MSN program carry the prefix 'NUR'. In accordance with AACN requirements, the MSN curriculum presupposes a strong baccalaureate nursing preparation. Admission requirements include graduation from an Accreditation Commission for Education in Nursing (ACEN), National League for Nursing Accrediting Commission (NLNAC) or Commission on Collegiate Nursing Education (CCNE) accredited BSN program and successful completion of an undergraduate statistics course. The curriculum blueprint for the MSN program is presented in Appendix M.

The MSN curriculum is logically structured to achieve individual and aggregate student outcomes and is built upon a foundation of knowledge derived from the baccalaureate level. This program is comprised of 39 credit hours. The program is designed so that advanced coursework in pathophysiology, physical assessment, and

pharmacology are taken before students enroll in the first clinical practicum course. Introductory coursework also includes theoretical and conceptual foundations of nursing and the CNL role. Courses addressing clinical decision-making explore primary and secondary interventions first, followed by courses exploring complex secondary and tertiary interventions. Courses must be taken in sequence and students must complete all coursework prior to the final clinical immersion experience. Students engage in CNL practica at three points in the curriculum with the focus of each practicum increasing in complexity. CNL practica are sequenced to build upon previous knowledge and provide students with increasing responsibility and independence within the CNL role. MSN students are required to complete 500 clinical hours over the duration of the program. This clinical hour requirement meets the criterion from the Center for Nurse Certification which makes students eligible to take the CNL certification exam. Appendix S illustrates the MSN Curriculum Worksheet to guide CNL students.

There are eleven program outcomes (individual student learning outcomes) for the MSN program. The program outcomes set forth what is expected of CNL graduates upon completion of the program. The program outcomes convey the concepts of the mission of the SON as well as the expected roles of the CNL. The program outcomes and roles are consistent with all guiding documents used in the program. Mapping of courses, major concepts, and curriculum framework elements for the MSN curriculum is illustrated in Appendix T.

MSN Curriculum Design

The MSN curriculum design is structured using program outcomes (individual student learning outcomes) and course objectives. To ensure integration of all guidelines and recommendations appropriate for the program, the MSN course objectives were carefully developed by the MSN Committee of the SON using *The White Paper on the Education and Role of the Clinical Nurse Leader* (AACN, 2007), *Competencies and Curricular Expectations for Clinical Nurse Leader Education and Practice* (AACN, 2013), and *The Essentials for Master's Education for Nursing* (AACN, 2011). The course objectives for each of the graduate nursing courses are listed in each course syllabus as they relate to the objectives for each course. All syllabi are available for review in the Resource Room.

The master plan for the MSN curriculum is set forth in a curriculum blueprint, presented in Appendix M. The curriculum blueprint is expanded into a set of Course Design Maps, which serve as the comprehensive planning document for each course in the curriculum. These maps set forth a detailed plan for course content, clinical experiences, instructional strategies, and methods of evaluation. As is true at the undergraduate level, the Course Design Maps for the graduate level offer a resource for faculty to ensure appropriate coverage of curricular content.

III-D. Teaching-learning practices and environments support the achievement of expected student outcomes.

Elaboration: Teaching-learning practices and environments (classroom, clinical, laboratory, simulation, distance education) support achievement of expected individual student outcomes identified in course, unit, and/or level objectives.

Program Response:

In both the BSN and MSN programs, didactic and clinical instruction follows a logical and sequential design that increases in complexity as the student progresses through the program. All courses follow a curriculum blueprint that lead to the attainment of program and student learning outcomes. Teaching-learning practices are appropriate to support students in achieving the individual student learning outcomes (program outcomes). Teaching-learning practices are selected to meet each course objective for didactic and laboratory/clinical learning. They are presented in the Course Design Maps and are also delineated by faculty members in each syllabus. The Course Design Maps are available for review in the Resource Room. Examples of specific teaching-learning practices and methods for assessment are noted below.

- Teaching-learning practices used in didactic settings include lecture/lecturediscussion, critical thinking activities, case studies, audiovisual presentations, computer-assisted instruction, guided virtual clinicals utilizing ATI Real Life Clinical Reasoning Scenarios, small group assignments, papers, projects, online discussion forums, gaming, testing, application of evidence to practice, Internet-based classroom response systems, "flipped classroom", and group discussion of test items.
- Teaching-learning practices used in online instruction include assigned reading, class notes and handouts, critical thinking activities, guided virtual excursions, team assignments, online discussion boards, instructor-student discussion, individual assignments, Internet-based videos, modules developed by content experts, incorporation of activities provided by textbook publishers, and testing.
- Teaching-learning practices used in campus laboratory include demonstrations, guided psychomotor practice, role play, simulated client assessments, application of evidence to practice using case studies, journaling, testing, audiovisual presentations, educational program development, virtual clinical excursions, and simulated clinical experiences using mid-fidelity and highfidelity mannequins.
- Teaching-learning practices used in clinical laboratory include direct patient care assignments, teaching projects, application of evidence to practice, critical thinking activities, case presentations, care planning exercises, service-learning activities, interprofessional activities, and client/patient rounds.
- Teaching-learning practices used in simulation settings include simulated patient care scenarios followed by debriefing, reflective journaling, application of evidence to practice, and role playing. The SON also engages in Medical

Reserve Corp exercises twice each year that simulate various public health crises.

 Teaching-learning practices used in clinical laboratories for students enrolled in the RN-BSN and MSN online programs include preceptored experiences, psychomotor practice with return demonstration, the application of evidence to nursing practice, critical thinking activities, reflective journaling, virtual clinical excursions, volunteer activities and case presentations. Additionally, CNL students are expected to develop a synthesis project during completion of the role immersion experience during CNL Practicum III.

In the fall of 2014, a Simulation Learning Center was added to enhance the teaching and learning for the students in the prelicensure BSN option. Simulation provides a safe environment in which students can apply and integrate knowledge, skills, and critical thinking. Courses in Level II and Level III of the prelicensure option incorporate the use of high-fidelity patient simulators in the Simulation Learning Center. Following the increase in the use of simulation, student feedback was obtained at a Curriculum Committee meeting regarding developing a philosophy of simulation to guide its use. The philosophy was approved by the Nursing Faculty (Curriculum Committee Minutes, 10/27/14; NFO minutes, 12/3/14) and is available for review in the Resource Room.

Faculty members evaluate teaching-learning practices and laboratory/clinical experiences at the end of each course. Students in the BSN program complete Individual Development and Educational Assessment (IDEA) evaluations and clinical site evaluations at the end of each fall and spring semester. The aggregate data from IDEA are reviewed by the course faculty, the SON Director, and the Dean of the College of Science and Mathematics (COSM). Faculty members and the Director of the SON review the data from all evaluations for program improvement. For example, overwhelmingly positive feedback on women's health clinics in NURS 392 led to the increased use of this experience, ensuring that all students engaged in this rotation. For the MSN cohorts admitted in 2014 and 2015, IDEA evaluations were not utilized due to a small class size. Confidential feedback was obtained by the Director of the SON and shared with faculty to guide recommendations for course improvement.

The classroom, campus laboratory, clinical laboratory, simulation, and distance education environments in which teaching-learning occurs are appropriate to support students in achieving the individual student learning outcomes in the BSN and MSN programs. Faculty and students evaluate the efficacy of settings as part of the course evaluation process. Clinical agencies provide additional feedback each semester regarding their ability to provide for the students' learning needs. The specific clinical environments utilized in each course may be changed with various course offerings. Course reports, available for review in Resource Room, document the environments used in clinical.

III-E. The curriculum includes planned clinical practice experiences that:

- enable students to integrate new knowledge and demonstrate attainment of program outcomes; and
- are evaluated by faculty.

Elaboration: To prepare students for a practice profession, each track in each degree program and post-graduate APRN certificate program affords students the opportunity to develop professional competencies in practice settings aligned to the educational preparation. Clinical practice experiences are provided for students in all programs, including those with distance education offerings. Clinical practice experiences involve activities that are designed to ensure students are competent to enter nursing practice at the level indicated by the degree/certificate program. The design, implementation, and evaluation of clinical practice experiences are aligned to student and program outcomes.

Program Response:

The SON maintains contracts with approximately 56 clinical agencies (spring 2015) that support student learning across the full spectrum of wellness-illness. Clinical learning experiences for the pre-licensure option are offered on campus and at a variety of off-campus sites. Community-based learning experiences include assisted living, long-term care, free medical clinics, home health, hospice, school health, physicians' offices, public health, outpatient behavioral health, child and adult day care, and a comprehensive genetics center. Acute care learning experiences include medical-surgical care, perioperative care, pediatrics, critical care, and labor/delivery/recovery/postpartum care.

In the RN-BSN option, the various clinical experiences enable the students to integrate new knowledge and demonstrate student learning outcomes. These opportunities vary based on students' prior experiences and include clinical opportunities in a variety of areas such as public health, home health, free medical clinics, hospice, physician offices, and exposure to leadership roles in acute and community-based settings.

In the MSN program, clinical practica are designed to allow the students to integrate new knowledge and demonstrate student learning outcomes. Students in the MSN program utilize preceptored experiences in advanced physical assessment, risk management, quality improvement, microsystem and macrosystem leadership and management, and immersion in the CNL role. Clinical experiences in the MSN program are designed based on the requirements outlined by AACN (2007). In planning the CNL curriculum, the MSN Committee mapped the required clinical experiences to individual courses for appropriate fit and to assure that all clinical requirements would be met. A document outlining these clinical plans is available in the Resource Room.

This wealth of clinical learning opportunities provides excellent support for the education of professional nurses in both the registered nurse and CNL roles. Students in the pre-licensure BSN option receive direct and indirect clinical supervision by full-time and adjunct clinical faculty, while students in the RN-BSN option and MSN programs are supervised indirectly by full-time faculty. Qualified preceptors are utilized as appropriate in both programs.

Clinical sites for students' experiences in the RN-BSN option and MSN program are approved by course faculty prior to engagement in the experience to ensure the appropriateness of sites in meeting course objectives. Clinical sites utilized in the prelicensure BSN option are evaluated each semester by students and faculty to determine their suitability for meeting student learning needs. MSN and RN-BSN students provide feedback on the appropriateness of selected clinical sites when completing preceptor evaluations. The results of the clinical site evaluations and preceptor evaluations are reviewed by the course coordinator and reported on the course reports. The Curriculum Committee periodically reviews utilization of clinical sites, with the most recent review occurring in fall 2014 (Curriculum Committee minutes, 10/27/14). The current list of agency contracts will be available for review in the Resource Room.

III-F. The curriculum and teaching-learning practices consider the needs and expectations of the identified community of interest.

Elaboration: The curriculum and teaching-learning practices (e.g., use of distance technology, didactic activities, and simulation) are appropriate to the student population (e.g., adult learners, second language students, students in a post-graduate APRN certificate program) and consider the needs of the program-identified community of interest.

Program Response:

Teaching-learning practices are selected based on the learning needs of the student population. They build on prior learning through the use of course objectives that move from simple to complex by semester/year of study and guide the learner progressively toward achievement of program outcomes (individual student learning outcomes). Teaching-learning practices in campus and clinical laboratories are course-specific and comply with the South Carolina Board of Nursing's recommendations for faculty- to- student ratios.

The RN-BSN option and MSN program were designed to meet the specific learning needs of registered nurses whose schedules typically do not allow them to attend class on campus. All required RN-BSN nursing courses (NURN courses) and MSN courses (NUR) are offered online in an asynchronous format so that registered nurses can complete teaching-learning activities at their convenience (within the timeframe of the course calendar). Students in both programs are assisted with securing clinical sites in their geographic area to facilitate appropriate clinical experiences that meet course objectives and provide scheduling flexibility.

The program outcomes (individual student learning outcomes) for both the BSN and MSN programs are available to the community of interest via the Lander website, in the *Lander University Catalog* or the *Lander University Graduate Catalog*, and in associated student handbooks. They are also included as appropriate in course syllabi. Input from the community of interest is obtained through student and faculty representatives on the Nursing Curriculum Committee, through community representatives on the Lander Nursing Advisory Board, and from ongoing informal contact between the nursing faculty and the community.

III-G. Individual student performance is evaluated by the faculty and reflects achievement of expected student outcomes. Evaluation policies and procedures for individual student performance are defined and consistently applied.

Elaboration: Evaluation of student performance is consistent with expected student outcomes. Grading criteria are clearly defined for each course, communicated to students, and applied consistently. Processes exist by which the evaluation of individual student performance is communicated to students. In instances where preceptors facilitate students' clinical learning experiences, faculty may seek input from preceptors regarding student performance, but ultimately faculty are responsible for evaluation of individual student outcomes. The requirement for evaluation of student clinical performance by qualified faculty applies to all students in all programs. Faculty evaluation of student clinical performance may be accomplished through a variety of mechanisms.

Program Response:

Nursing faculty members evaluate student achievement of program outcomes (individual student learning outcomes) through the assessment of student mastery of course objectives. Each nursing course specifies the objectives to be achieved in relation to individual student learning outcomes, the teaching-learning practices used to enable their achievement, and the mechanisms for evaluation. This information is delineated in Course Design Maps and is presented to students in course syllabi.

The SON utilizes a standard grading scale to assign letter grades in both the BSN and MSN programs. This scale is used in each required nursing course and is stated in each course syllabus:

- The grading scale as designated below applies to all required NURS, NURN, and NUR nursing courses with the exclusion of those courses that are designated as pass/fail or courses that satisfy general education requirements.
 - A 93-100 B 85-92 C 76-84 D 68-75 F 67 or below

• Clinical/Laboratory:

Students are evaluated as satisfactory or unsatisfactory in the laboratory/clinical nursing courses based on the results of the designated clinical assessment tool. Students who are evaluated as unsatisfactory in clinical receive a grade no higher than a D in the course. (Policy and Procedure Manual, Section II).

The teaching-learning methods and procedures for evaluation in each course are stated in Course Design Maps and in course syllabi, and are presented to students at the beginning of each course. Nursing faculty members use a variety of mechanisms to assess student achievement of course objectives. For didactic learning objectives, these mechanisms include unit tests, final examinations, care plans, oral presentations, projects, and writing assignments. Course-specific and

comprehensive standardized testing via Assessment Technologies Institute (ATI) are utilized in the prelicensure option. Students in the MSN program will complete a comprehensive Self-Assessment Examination via AACN prior to graduation. The MSN program has yet to evaluate the results from the CNL Self-Assessment Evaluation, as the first administration of this examination will occur in fall 2015.

Evaluation of prelicensure students' achievement of laboratory/clinical learning objectives is based on several mechanisms that include a standardized clinical assessment tool used across all clinical courses, a skills checklist used in laboratory courses, clinical logs, care plans, and patient teaching assignments. Student performance is evaluated using the standardized Clinical/Laboratory Assessment Tool or an alternate method of assessment. Pre-licensure students' clinical evaluations are retained in their permanent files. Student clinical evaluations are available for review in the School of Nursing Administrative Office. Examples of clinical assessment tools are available in the Resource Room.

RN-BSN and MSN students' achievement of clinical learning objectives are evaluated for course-specific behaviors and through preceptor feedback. Faculty members in both programs use clinical assessment results on an ongoing basis during the semester for formative evaluation to identify strengths and areas which need improvement. Faculty members in both programs discuss summative and formative findings with students individually as needed. Examples of clinical assessment tools and preceptor feedback for RN-BSN and MSN students are available in the Resource Room.

The nursing faculty uses ATI test results to evaluate prelicensure student performance (NFO minutes, 12/11/12; 1/4/13; 12/10/13; 5/7/14; 1/6/15; 1/21/15; 5/7/15; and 5/11/15). When students do not meet the expected benchmark, they are required to follow the current ATI Remediation Policy to improve their mastery of the content. Students utilize ATI's Focused Review to complete this remediation and are encouraged to seek assistance from the Lander University Academic Success Center (ASC) for counseling to improve test-taking skills. Appendix U presents the ATI Remediation Policy.

Laboratory/clinical instructors and preceptors participate in assessing student performance by providing feedback to the course faculty. The course faculty is responsible for evaluating students and assigning grades. Neither clinical instructors nor preceptors assume full responsibility for evaluating student performance.

III-H. Curriculum and teaching-learning practices are evaluated at regularly scheduled intervals to foster ongoing improvement.

Elaboration: Faculty use data from faculty and student evaluation of teaching-learning practices to inform decisions that facilitate the achievement of student outcomes. Such evaluation activities may be formal or informal, formative or summative. Curriculum is regularly evaluated by faculty and other communities of interest as appropriate. Data from the evaluation of curriculum and teaching-learning practices are used to foster program improvement.

Program Response:

The nursing curriculum and teaching-learning practices are evaluated on a regular basis using a variety of mechanisms. These mechanisms include student evaluations of faculty members and courses, curriculum evaluations, and evaluation of faculty effectiveness. The results are used to support ongoing program improvement.

Nursing faculty members and students in both options of the BSN program evaluate each nursing course during the academic year (fall and spring semesters); these evaluations occur in the fall, spring, and summer terms for the MSN program. At the end of each course, faculty members obtain student feedback regarding clinical laboratory sites and preceptors. These results are analyzed by the course faculty member and are recorded in a course report; course reports are available for review in the Resource Room. In addition, students in both options of the BSN program complete IDEA (Individual Development and Educational Assessment) evaluations. These evaluations provide scaled numeric feedback as well as an opportunity for comments about the course and the instructor. Faculty members receive IDEA summaries the following semester, so this information is not available for inclusion in current course reports. However, faculty members use trended data outcomes from both course-based evaluations and IDEA evaluations to make course revisions to improve effectiveness. For example, the Childbearing Family course revised clinical laboratory scheduling to include more time in simulation laboratory and alterations in community clinical experiences. Course reports are available in the Resource Room.

The efficacy of teaching-learning practices is evaluated both through student evaluations of faculty/course effectiveness and through the assessment of students' achievement of course objectives. Multiple mechanisms are used to evaluate the degree to which the students have achieved course objectives, as discussed in Section III G. Teaching-learning practices are modified based on their effectiveness in supporting student learning. For example in NURS 409: Pediatric Nursing, integrated clinical teaching projects were utilized to address knowledge deficits identified from ATI performance. Subsequently students have demonstrated an improvement in the ATI proctored exam. ATI reports will be available in the Resource Room.

In order to foster program improvement, the curriculum is evaluated on an ongoing basis. This process is led by the Nursing Curriculum Committee (CC) for the BSN program and by the MSN Committee for the MSN program. These committees are responsible for monitoring the curriculum in their respective programs and recommending changes to the Nursing Faculty Organization (NFO). Through these mechanisms, the curricula are evaluated at least annually. The Nursing CC consists of two appointed faculty members, the Director as an ex-officio member, and one student representative from each academic class. The CC solicits input regarding the effectiveness of the nursing faculty members, College of Science and Mathematics faculty members, and employers). Suggestions and recommendations are processed by the committee and submitted to the NFO for consideration. For example, effective fall 2015, the allotment of didactic and clinical time was revised for the NURS 392: Childbearing Family and Women's Health course to be consistent with other specialty courses in the prelicensure curriculum.

The MSN Committee consists of the Director of the SON, the Nursing Graduate Coordinator, and a minimum of two faculty teaching in the graduate program. Informal feedback is solicited regularly from graduate students. Additional feedback via virtual meetings, online polling, and postings on the CNL Communication Board is obtained as necessary. Minutes of both the SON Nursing CC and the MSN Committee are available for review in the Resource Room.

The teaching effectiveness of nursing faculty members is also evaluated on an ongoing basis to foster program improvement. In accordance with Section IV of the Lander University Faculty Handbook, the evaluation process differs somewhat according to position—laboratory/clinical instructor appointments, pre-tenure faculty appointments, and post-tenure appointments. In each case, the University uses the results of IDEA evaluations completed by students to inform decision-making.

Laboratory/clinical instructors are evaluated each semester by the course coordinators in collaboration with the Director of the SON. This evaluation includes the effectiveness of teaching approaches used by the instructor. The results are discussed with the instructor by the course coordinator on an individual basis as indicated and are used to improve teaching effectiveness.

Tenure-track faculty members are to be evaluated on an annual basis. Data sources include evaluations by students of teaching and advising effectiveness, selfevaluation of accomplishments throughout the year, input from assigned peer evaluators, and evaluation by the Dean of the College of Science and Mathematics (COSM). The results are to be discussed with the faculty member by the Dean of the COSM on an individual basis and should be used to support ongoing improvement in teaching effectiveness.

Tenured faculty members are also to be evaluated annually by the Dean of the COSM, with data being obtained via self-evaluation of accomplishments and student evaluations. In addition, tenured faculty members complete a streamlined post-tenure review process every six years. The results of the annual evaluation are to be discussed with the faculty member by the Dean, while the results of the post-tenure review are to be reviewed with the Dean and the Vice President of Academic Affairs. Results of these evaluations are used to support ongoing improvement in teaching-learning practices to facilitate student achievement of program outcomes (Individual student learning outcomes).

Strengths of Standard III

The strengths of the Lander SON in relation to Standard III are presented below.

- The nursing faculty exhibits a spirit of continuous improvement for all facets of the curriculum and teaching-learning practices.
- The SON maintains a well-developed and effective curriculum.
- The SON responds with enthusiasm to input from its community of interest.
- The nursing curriculum exhibits goodness of fit with *The Essentials of* Baccalaureate Education for Professional Nursing Practice (AACN, 2008), the ANA Scope and Standards of Nursing Practice, and the ANA Code of Ethics.
- The MSN program is scheduled to graduate the first CNL student in SC in December 2015.
- The MSN program was developed based on *The Essentials of Master's Education in Nursing* (AACN, 2011).
- Use of the Neuman Systems Model as a theoretical framework in the BSN program supports students in developing a holistic approach to clients and client care and prepares graduates for further study in nursing.
- The RN-BSN and MSN programs are designed to meet the needs of working professional Registered Nurses.
- The SON added clinical site surveys to obtain feedback from the community of interest in fall 2011.
- Level II and Level III prelicensure clinical courses are enhanced with the incorporation of simulation experiences.
- The MSN program will utilize the Self-Assessment Examination (AACN) to foster success on the CNL certification exam.
- The community of interest supported the development and launch of the MSN program.

Areas for Continuous Improvement for Standard III

The areas for continuous improvement of the Lander SON for Standard III are presented below.

- The BSN and MSN programs will be strengthened by ongoing communication and collaboration with the community of interest and clinical partners.
- The quality of student learning will be enhanced by ongoing emphasis on professional nursing standards and guidelines.
- To strengthen mastery of course content by prelicensure students, weak areas identified from ATI test results will be considered for course revisions and curricular changes.
- Since the SON relies heavily upon technology for curricula delivery, the nursing programs will be enhanced by continued expansion of technology.

• Since the MSN program has not graduated the first cohort, data will first become available for evaluation of program improvement after fall 2015.

Action Plan for Standard III

The action plan of the Lander SON for Standard III is outlined below.

- The nursing program will seek additional formal mechanisms to obtain input from the community of interest.
- The nursing program will seek opportunities for increased interaction with the community of interest.
- Course coordinators will provide clinical site evaluation results when appropriate with clinical partners to foster improved student clinical learning experiences.
- The SON will increase the utilization of technology in teaching-learning.
- Nursing faculty members will continue to emphasize professional nursing standards and guidelines and their implications for practice.
- Nursing faculty members will use the revised ATI Remediation Policy to support student mastery of course content.
- Nursing faculty members will analyze data from ATI test results to identify implications for curriculum improvement.
- The SON will evaluate the results of the CNL student's performance on the Self-Assessment Exam to evaluate program effectiveness.

Standard IV Program Effectiveness: Assessment and Achievement of Program Outcomes

The program is effective in fulfilling its mission and goals as evidenced by achieving expected program outcomes. Program outcomes include student outcomes, faculty outcomes, and other outcomes identified by the program. Data on program effectiveness are used to foster ongoing program improvement.

IV-A. A systematic process is used to determine program effectiveness.

Elaboration: The program uses a systematic process to obtain relevant data to determine program effectiveness. The process:

- is written, ongoing, and exists to determine achievement of program outcomes;
- is comprehensive (i.e., includes completion, licensure, certification, and employment rates, as required by the U.S. Department of Education; and other program outcomes);
- identifies which quantitative and/or qualitative data are collected to assess achievement of the program outcomes;
- includes timelines for collection, review of expected and actual outcomes, and analysis; and
- is periodically reviewed and revised as appropriate.

Program Response:

BSN Assessment Plan

Each program in the School of Nursing (SON) has a written assessment and evaluation plan that assesses student, faculty, and program outcomes. The assessment plan for the BSN program is published in the SON Policy and Procedure Manual and is reviewed and updated annually (Appendix V). The plan includes formative and summative evaluation measures and the timeframe for completion. Qualitative and quantitative data are collected using surveys, standardized test results, formative assessment results, NCLEX-RN program success rates, critical thinking measures, student/alumni feedback, employer feedback, evaluation of students and faculty members, course evaluations, program completion rates, and graduate employment rates.

The Nursing Assessment and Evaluation (A and E) Committee is responsible for coordinating program assessment and evaluation. The committee is composed of at least two faculty members with the Director of the SON as an ex-officio member, plus one student from each academic class. Its purpose is "to evaluate the nursing program's effectiveness in relation to internal and external assessment criteria" (SON Policy and Procedure Manual, Section V Faculty Policies).

BSN Program Satisfaction

Program satisfaction is assessed using feedback from students, alumni, and members of the community of interest. Students complete course evaluations and evaluations of clinical agencies each semester. Senior students complete the Program Exit Survey on perceived satisfaction and attainment of program outcomes (individual learning outcomes) prior to graduation. Alumni are surveyed at one and five years
following graduation using the Alumni Survey to obtain comparable information. Nursing Advisory Board members and clinical facilities are surveyed each semester. The Employer Satisfaction Survey is used to obtain feedback annually from graduates' employers.

Achievements of BSN Graduates

The SON evaluates program effectiveness using graduation rates, NCLEX-RN success rates, employment rates, and achievement in critical thinking. Data for each of these indicators are compared to the relevant aggregate student outcome. The aggregate student outcomes are stated in the Nursing Assessment and Evaluation Plan:

- Aggregate Student Outcome #1 states, "Eighty percent (80%) of each cohort entering either option will graduate with a BSN within five academic years". Data for graduation rates are collected and analyzed by the Recruitment and Retention (R and R) Committee, then reported to the Nursing Faculty Organization (NFO) for consideration.
- Aggregate Student Outcome #2 states, "The School of Nursing will maintain a program success rate on the NCLEX-RN licensing exam within 5% of the national mean." This level of achievement is an expectation of the SC Board of Nursing (SC BON) but was formalized by the SON as an aggregate outcome in 2007. Data on NCLEX-RN success rates is provided by the SC BON, examined by the Director and the A and E Committee, and presented to NFO for consideration.
- Aggregate Student Outcome #3 states, "One hundred percent (100%) of Lander nursing graduates who seek employment in nursing will be employed as registered nurses within six months of graduation". This information is collected through alumni contact, information from local healthcare facilities, and social networking. Data are analyzed by the A and E Committee and presented to NFO for consideration.
- Aggregate Student Outcome #4 states, "Students will demonstrate achievement in critical thinking ability at each level of the nursing major." The faculty defines critical thinking as "the identification and evaluation of evidence to guide decision-making. The critical thinker uses broad in-depth analysis of evidence to make decisions and communicate his/her beliefs clearly and accurately" (Nursing Policy and Procedure Manual, Section IV, Part D: Glossary). Specific critical thinking assignments at each level of the curriculum are used to assess achievement in critical thinking. The SON is in the process of evaluating the utility of this method of assessment. Data for critical thinking assessments are collected and analyzed by the Curriculum Committee (C C), then reported to NFO for consideration.

MSN Assessment Plan

The MSN Assessment Plan (Appendix W) is published in the *MSN-CNL Student Handbook* and on the nursing website. The plan includes formative and summative evaluation measures, has timeframes for completion, and will be reviewed and updated annually by the MSN Committee. The initial review will be after the graduation of the first cohort. The data sources include surveys, student/alumni feedback, evaluations of students and faculty, graduation rates, certification rates, student self-assessment measures, and feedback from the community of interest.

MSN Program Satisfaction

The SON will use formal and informal mechanisms to obtain ongoing data from students, alumni, employers, and the community of interest regarding their satisfaction with the MSN program. Students are asked ongoingly to complete evaluation of courses, preceptors, faculty, and clinical sites. In their last semester students will be asked to complete a Graduate Exit Survey on perceived satisfaction and attainment of program outcomes. Alumni will be surveyed at one year and five years after graduation using the MSN Alumni Survey. The Nursing Advisory Board and employers will be surveyed at least annually to determine their satisfaction with graduates of the program.

Achievements of MSN Graduates

The SON will evaluate program effectiveness using graduation rates, certification success rates, and employment rates of graduates in an expanded nursing role. Aggregate student outcomes are listed in the MSN Assessment Plan:

- Outcome 1: Eighty percent (80%) of each cohort entering the MSN nursing major will graduate with an MSN within five academic years. The MSN Committee will compile this data for the MSN program for review in the nursing faculty organization (NFO).
- Outcome 2: Seventy five percent (75%) of MSN graduates seeking certification will successfully complete the CNL certification. The MSN Committee will compile this data for review in NFO.
- Outcome 3: Eighty percent (80%) of MSN graduates who seek employment in expanded nursing roles will be employed within one year of graduation. The MSN Committee will compile this data for review in NFO.

Faculty Outcomes

Faculty outcomes measure satisfactory teaching and advising from the first year of employment; however, in the second year faculty are also expected to demonstrate service and practice. Professional development, including faculty scholarship, is

evaluated by levels. Lander identifies relevant faculty scholarship activities for each of three levels. Each faculty member is expected to have one activity in each of three levels and at least 10 activities over a six year period. Aggregate faculty goals and outcomes are the same for faculty teaching in BSN and MSN programs and are evaluated annually. The NFO Tenure and Promotion Committee reviews and analyzes all data and considers implications for faculty excellence and the impact on program effectiveness.

IV-B. Program completion rates demonstrate program effectiveness.

Elaboration: The program demonstrates achievement of required program outcomes regarding completion. For each degree program (baccalaureate, master's, and DNP) and post-graduate APRN certificate program:

- The completion rate for each of the three most recent calendar years is provided.
- The program specifies the entry point and defines the time period to completion.
- The program describes the formula it uses to calculate the completion rate.
- 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 provides a written explanation/analysis with documentation for the variance.

This key element is not applicable to a new degree or certificate program that does not yet have individuals who have completed the program.

Program Response:

The Assessment and Evaluation (A and E) Committee leads the faculty in comparing graduation results to the expected outcome of 80% in order to evaluate program effectiveness. Nursing faculty members discuss graduation rates annually for both prelicensure and RN-BSN students (NFO minutes May 8, 2013, May 12, 2014, May 5, 2015). The MSN program does not yet have graduates. Prelicensure students are admitted to the nursing major in the sophomore year, but graduation/attrition is analyzed for each cohort beginning with students at the junior level. RN-BSN students are admitted at the junior level and graduation/attrition is analyzed for students admitted each academic year. Prelicensure and RN-BSN students are expected to graduate within five years of admission to the nursing major. The graduation rate is calculated for both prelicensure and RN-BSN students as a percentage of the cohort who graduate within five academic years of admission to the major. The formula used for this calculation is: Number of students graduating from the cohort divided by the number of students in the cohort x 100 = graduation percentage. Table 7 shows graduation rates for prelicensure students for the past three years. including those students progressing to graduation. Table 8 shows the graduation

rates of RN-BSN students for the same time period.

Table 7
Graduation Rates: Baccalaureate Program (Prelicensure) 2012- 2015

Term/Year Admitted to Upper Level Nursing Classes (Jr 1)	Students Admitted to Upper Level Nursing	Term/Year of Graduation	Students Graduated within 5 years	Graduation Rate	Progre	lents essing o uation
Spring 2011	N=11	Fall 2012	10	91% graduation	N	%
Fall 2011	N=32	Spring 2013	31	97% graduation		
Spring 2012	N=22	Fall 2013	20	91% graduation		
Fall 2012	N=34	Spring 2014	32	94% graduation		
Spring 2013	N=24	Fall 2014	21	88% graduation	1	4%
Fall 2013	N=35	Spring 2015	24	69% graduation	4	11%

Table 8 Graduation Rates: Baccalaureate Program (RN-BSN) 2012-2015

Year of Admission	Students Admitted to Cohort	Students Graduated within 5 years of Admission	Graduation Rate	Progre	dents ssing to uation
2006-2007	25	15	60%	Ν	%
2007-2008	29	16	55%		
2008-2009	15	7	47%		
2009-2010	17	9	53%		
2010-2011	38	24	63%	2	5%
2011-2012	24	17	71%	5	21%
2012-2013	19	8	42%	8	42%
2013-2014	12	2	17%	10	83%
2014-2015	14	0	0	14	100%

The program completion rate for the prelicensure option is calculated by cohorts. The completion rate for students graduating within five years of being admitted to the major has ranged from 69-97% for the past three years, however, there are students still progressing to graduation from the spring and fall 2013 cohorts. The average graduate

rate for the prelicensue option for the past three years is 88.33%. The RN-BSN option's completion rate for students graduating within five years of admission to the major has ranged from 47-60%, however, all students lost to attrition have identified their reasons for leaving as financial constraints, family obligations, transfer to another institution, or medical reasons. The program completion rate for cohorts admitted since 2010-2011 is incomplete since there are students still progressing toward graduation. The prelicensure and RN-BSN option both meet the standard of a 70% program completion rate when consideration is given to valid reasons for attrition and those still progressing to graduation.

IV-C. Licensure and certification pass rates demonstrate program effectiveness.

Elaboration: The pre-licensure program demonstrates achievement of required program outcomes regarding licensure.

- The NCLEX-RN[®] pass rate for each campus/site and track is provided for each of the three most recent calendar years.
- The NCLEX-RN[®] pass rate for each campus/site and track is 80% or higher for first-time takers for the most recent calendar year. However, if the NCLEX-RN[®] pass rate for any campus/site and track is less than 80% for first-time takers for the most recent calendar year, (1) the pass rate for that campus/site or track is 80% or higher for all takers (first-time and repeat) for the most recent calendar year, (2) the pass rate for that campus/site or track is 80% or higher for first-time takers when the annual pass rates for the three most recent calendar years are averaged, or (3) the pass rate for that campus/site or track is 80% or higher for all takers (first-time and repeat) when the annual pass rates for the three most recent calendar years are averaged.

A campus/site or track with an NCLEX-RN[®] pass rate of less than 80% for first-time takers for the most recent calendar year provides a written explanation/analysis with documentation for the variance and a plan to meet the 80% NCLEX-RN[®] pass rate for first-time takers. The explanation may include trend data, information about numbers of test takers, data relative to specific campuses/sites or tracks, and data on repeat takers.

The graduate program demonstrates achievement of required program outcomes regarding certification. Certification results are obtained and reported in the aggregate for those graduates taking each examination, even when national certification is not required to practice in a particular state.

- Data are provided regarding the number of graduates and the number of graduates taking each certification examination.
- The certification pass rate for each examination for which the program prepares graduates is provided for each of the three most recent calendar years.
- The certification pass rate for each examination is 80% or higher for first-time takers for the most recent calendar year. However, if the pass rate for any certification examination is less than 80% for first-time takers for the most recent calendar year, (1) the pass rate for that certification examination is 80% or higher for all takers (first-time and repeat) for the most recent calendar year, (2) the pass rate for that certification examination is 80% or higher for first-time takers when the annual pass rates for the three most recent calendar years are averaged, or (3) the pass rate for that certification examination is 80% or higher for all takers (first-time and repeat) when the annual pass rates for the three most recent calendar years are averaged.

A program with a pass rate of less than 80% for any certification examination for the most recent calendar year provides a written explanation/analysis for the variance and a plan to meet the 80% certification pass rate for first-time takers. The explanation may include trend data, information about numbers of test takers, and data on repeat takers.

This key element is not applicable to a new degree or certificate program that does not yet have individuals who have taken licensure or certification examinations.

Program Response:

The nursing faculty analyzes program success rates on the NCLEX-RN based on the aggregate student outcome that the SON will maintain a program success rate on the licensing exam within 5% of the national mean. SON program success rates on the NCLEX-RN are shared with prospective students at Open House events, with the Nursing Advisory Board each semester, and with university administration (Advisory Board Minutes October 10, 2012, October 9, 2013, February 26, 2014, & April 8, 2015). The SC Board of Nursing (SC BON) publishes NCLEX-RN pass rates on their website. NCLEX-RN pass rates are analyzed in NFO after each graduating class (NFO Minutes August 15, 2012, February 20, 2013, August 20, 2014, & February 4, 2015). The NCLEX pass rates for the spring 2014 class were discussed on August 20, 2014 and plans were made for further analysis. A root cause analysis was conducted and possible causes for the decreased pass rate were identified (NFO minutes 9/3/2014). In addition, one faculty member attended an NCLEX workshop in October 2014 and the Mountain Measure Report comparing the Lander nursing program to other nursing programs was obtained from NCSBN. The Mountain Measure report was analyzed for weak areas in Lander student performance (NFO minutes 9/17/2014). With consideration of all analyses, faculty discussed means of increasing rigor in individual courses, assessment strategies to model NCLEX testing, and possible student- specific causes that may have contributed to the decreased pass rate of the spring 2014 class. Although the aggregate student outcome for NCLEX pass rate was met, the faculty addressed this decrease in NLCEX pass rate to foster program improvement. Table 9 includes NCLEX-RN success pass rates from 2012-2014.

Table 9

NCLEX-RN® Pass Rates for the Last Three Calendar Years (January 1-December 31)

Year	# Students Taking NCLEX-RN® for 1st Time	NCLEX-RN® Pass Rate for 1st Time Test Takers	Mean of State NCLEX-RN Pass Rate	Mean of National NCLEX-RN Pass Rate
2012	49	97.96%	93.45	90.12
2013	43	95.35%	86.85	83.04
2014	54	81.63%	87.08	81.79

IV-D. Employment rates demonstrate program effectiveness.

Elaboration: The program demonstrates achievement of required outcomes regarding employment rates.

- The employment rate is collected separately for each degree program (baccalaureate, master's, and DNP) and post-graduate APRN certificate program.
- Data are collected within 12 months of program completion. For example, employment data may be collected at the time of program completion or at any time within 12 months of program completion.
- The employment rate is 70% or higher. However, if the employment rate is less than 70%, the employment rate is 70% or higher when excluding graduates who have elected not to be employed.

Any program with an employment rate less than 70% provides a written explanation/analysis with documentation for the variance.

This key element is not applicable to a new degree or certificate program that does not yet have individuals who have completed the program.

Program Response:

The nursing faculty analyzes employment rates based on the aggregate student outcome that 100% of Lander nursing graduates who seek employment in nursing will be employed as registered nurses within six months of graduation. The SON reports employment rates to prospective students and their families at university Open House events and to the Nursing Advisory Board meeting each semester. Data for employment of graduates are collected in various ways including social media and student report at 6 months after graduation. RN-BSN students are usually already employed when entering the BSN program, therefore are not seeking employment. The first MSN cohort will graduate December 2015 and data will be obtained regarding their employment status. The SON has consistently achieved this outcome of employment of prelicensure graduates. Table 10 shows the employment rates of prelicensure graduates from spring 2012-fall 2014.

Table 10

Employment Data: Baccalaureate Program- Prelicensure (Spring 2012-Fall 2014)

Term/Year of Graduation	# Students Graduated	% Graduates Employed
Spring 2012	30	97%
Fall 2012	10	100%
Spring 2013	33	100%
Fall 2013	17	100%
Spring 2014	30	100%
Fall 2014	24	100%

IV-E. Program outcomes demonstrate program effectiveness.

Elaboration: The program demonstrates achievement of outcomes <u>other than</u> those related to completion rates (Key Element IV-B), licensure and certification pass rates (Key Element IV-C), and employment rates (Key Element IV-D); and those related to faculty (Key Element IV-F).

Program outcomes are defined by the program and incorporate expected levels of achievement. Program outcomes are appropriate and relevant to the degree and certificate programs offered and may include (but are not limited to) student learning outcomes; student and alumni achievement; and student, alumni, and employer satisfaction data.

Analysis of the data demonstrates that, in the aggregate, the program is achieving its outcomes. Any program with outcomes lower than expected provides a written explanation/analysis for the variance.

BSN Program Outcomes

The SON BSN program outcomes (individual learning outcomes) are published in the *BSN Nursing Student Handbook* and in the *Lander University Catalog* (Appendix V). The program outcomes (individual learning outcomes) are included in course syllabi and linked to individual course objectives. The Course Design Map for each course in the curriculum lists the program outcomes, individual course objectives, teaching/learning strategies, and the methods used for assessing each objective.

Individual learning outcomes are also assessed in some courses through standardized testing using Assessment Technologies Institute (ATI). Scores are used by faculty to evaluate the effectiveness of instruction and to make programmatic decisions in the curriculum. Benchmarks for student progression within the program were set by program policy for implementation fall 2008. Students must complete ATI practice exams in preparation for ATI proctored exams and are expected to achieve the established benchmark of at least Level 2 for each ATI exam. Students not achieving a Level 2 or Level 3 on ATI exams must complete the required remediation plan in order to progress in the program. The Curriculum Committee coordinates the reports by nursing faculty for review in NFO. A document showing ATI performance on all tests for the past three years is available in the Resource Room. The Assessment and Evaluation Committee is examining the effectiveness of the current ATI remediation plan and a pilot using the PrepU product for remediation, the ATI Enrichment Plan. The PrepU pilot remediation is for students who were unsuccessful in meeting the expected ATI benchmark in the Level 1-NURS 242 ATI. This remediation must be completed in order to take the proctored Level II ATI in NURS 393 (See NURS 242 and NURS 393 Syllabi, Assessment and Evaluation Committee Minutes March 25, 2011).

Critical thinking is assessed in each level of the BSN program. In selected prelicensure courses (NURS 242, NURS 346, NURS 417) and RN-BSN courses (NURN 307, NURN 340, NURN 417), an assignment is evaluated for critical thinking skills using a rubric developed by SON faculty. These results serve as a means of assessing achievement of the critical thinking expected for each academic level. Results are analyzed each semester by the Curriculum Committee and presented to NFO for consideration. NFO continues to evaluate the effectiveness of this measure of critical thinking and to seek a more valid and reliable measure for use with nursing

students. Results of critical thinking assessments for the past three years are available in the Resource Room.

Each clinical course includes an assessment of students' mastery of clinical objectives using the Clinical Evaluation Tool or a modified course-specific clinical evaluation tool. In courses using clinical preceptors, feedback on student clinical performance is obtained by course coordinators. The results of these performance observations are used to help faculty in making decisions regarding clinical objectives, clinical sites selected, and specific clinical learning experiences.

In the final semester of the BSN program, prelicensure students take three predictor exams to practice for the NCLEX-RN. Students must pass at least one of the predictor exams or must sign up for an additional review course prior to graduation. The exam results are discussed by NFO and considered for programmatic changes or course revisions. Aggregate data from each nursing class is compiled by A & E Committee and presented to NFO for consideration. The benchmark used by the Lander Nursing program for the three standardized predictor exams is a 95% probability of passing the NCLEX-RN examination.

Student and alumni satisfaction with the program is assessed using multiple methods including course evaluations, Program Exit Surveys from senior students, and Alumni Surveys at one and five years following graduation. Although the response rates to surveys have been low, responses to alumni surveys have been positive indicating graduates felt they mostly or fully achieved the outcomes of the program. Data from the Clinical Site Survey are collected at least annually and provides a mechanism for feedback of students' clinical performance by affiliating clinical partners. This feedback provides information for faculty to make program improvements in the clinical components of courses. Employer surveys are distributed annually to employers to obtain feedback on nursing graduates from the previous year. Employer surveys from 2011-2014 have been positive. Surveys of the Nursing Advisory Board also provide feedback from the community of interest. Discussions during Nursing Advisory Board meetings are helpful to gain perspective from the community of interest. Survey results, informal discussions, and student evaluations are all considered and used when making individual course revisions and programmatic changes. The A & E Committee reviews results of surveys and reports to NFO. Results of all surveys are available in the Resource Room.

MSN Program Outcomes

The assessment plan for the MSN program contains formative and summative assessments and program outcomes. Formative evaluations will include the assessment of CNL competencies through selected course-specific behaviors and through clinical practica, and feedback from the community of interest. Summative evaluations will include the CNL Self-Assessment Exam (SAE) and the Program Exit Survey during the last semester, the Alumni Survey administered at one and five years following graduation, and an Employer Survey annually. The CNL SAE, provided by AACN, is the online assessment designed to familiarize students with the CNL Certification Examination. It parallels the content, difficulty, and format of the CNL Certification Examination and will be used as a diagnostic tool to assist CNL students to

identify their strengths and weaknesses. This data will also be used for curricular changes and program improvement. Data for assessing the MSN program are incomplete at present because the first cohort has not graduated, but will be used by the MSN Committee to assess program effectiveness and to recommend programmatic changes to NFO.

IV-F. Faculty outcomes, individually and in the aggregate, demonstrate program effectiveness.

Elaboration: The program demonstrates achievement of expected faculty outcomes. Expected faculty outcomes:

- are identified for the faculty as a group;
- incorporate expected levels of achievement;
- reflect expectations of faculty in their roles and evaluation of faculty performance;
- are consistent with and contribute to achievement of the program's mission and goals; and
- are congruent with institution and program expectations.

Actual faculty outcomes are presented in the aggregate for the faculty as a group, analyzed, and compared to expected outcomes.

Program Response:

The SON aggregate faculty outcomes reflect Lander University's (LU) mission as a teaching institution. They are consistent with the SON's mission, goals, and student outcomes. There are six aggregate faculty outcomes with three outcomes specific to SON goal #2 and three specific to SON goal #3. The SON goals and aggregate faculty outcomes are stated in the Nursing Policy and Procedure Manual, Section IV Program Evaluation. Each individual faculty member's emphasis on each goal varies by rank and by years at Lander. When considered in sum, the achievement of aggregate nursing faculty outcomes is consistent with the expectations of faculty members in the teaching institution.

School of Nursing Goal #2

The SON goal #2 states, "Maintain a nursing faculty complement that achieves the SON mission through excellence in teaching, advising, and role modeling professional development". Three aggregate faculty outcomes relate specifically to this goal.

Faculty Outcome #1 (Teaching) for SON Goal #2

The Aggregate Faculty Outcome #1 for SON Goal #2 states, "Ninety percent of fulltime faculty who are in at least the second year at Lander will achieve an evaluation rating of 'Satisfactory' on overall teaching for the academic year." Students evaluate faculty effectiveness in teaching in each course during fall and spring semesters. Non-tenured faculty members are observed and evaluated by peer evaluators. These components are available to the Dean for use in annual faculty evaluations in the

teaching role. Table 11 presents a summary of the evaluations of nursing faculty effectiveness in the teaching role for the past three years.

Table 11

Faculty Achievement of Outcome #1 (Teaching) for SON Goal #2 for 2012-2015

Academic years	Total Faculty in at least 2 nd year of employment	Total Faculty in at least 2 nd year achieving 'Satisfactory' on teaching	Percentage of faculty in at least 2 nd year achieving 'Satisfactory' on teaching
2012-2013	10	10	100%
2013-2014	10	10	100%
2014-2015	10	10	100%

Faculty Outcome #2 (Advising) for SON Goal #2

Aggregate Faculty Outcome #2 for the SON Goal #2 states, "Ninety percent of fulltime faculty who are in at least the second year at Lander will achieve an evaluation rating of 'Satisfactory' on effectiveness as an academic advisor". Students evaluate the effectiveness of their academic advisor each semester. This data is available to the Dean for use in annual faculty evaluations. Table 12 presents faculty achievement in academic advising for the past three academic years.

Table 12

Faculty Achievement of Outcome #2 (Advising) for SON Goal #2 for 2012-2015

Academic years	Total Faculty in at least 2 nd year of employment	Total Faculty in at least 2 nd year achieving 'Satisfactory' on advising	Percentage of faculty in at least 2 nd year achieving 'Satisfactory' on advising
2012-2013	10	10	100%
2013-2014	10	10	100%
2014-2015	10	10	100%

Faculty Outcome #3 (Professional Development) for SON Goal #2

The Aggregate Faculty Outcome #3 for SON Goal #2 states, "Ninety percent of full-time faculty will role model professional development each academic year through attendance at professional conferences and seminars, completing graduate level courses, earning CEUs or demonstrating intellectual curiosity". Faculty members submit a Faculty Performance Report (self-evaluation) annually to the Dean and enter

professional development activities into Sedona Systems, a self-service web database for capturing faculty data. This data is available to the Dean for use in annual faculty evaluations. Table 13 presents a summary of faculty outcomes related to professional development from 2012-2015.

Table 13

Faculty Achievement of Outcome #3 (Professional Development) for SON Goal #2 for 2012-2015

Academic years	Total Full- time faculty members	Total Faculty Role Modeling Professional Development	Percentage of Faculty Role Modeling Professional Development
2012-2013	11	11	100%
2013-2014	11	11	100%
2014-2015	12	12	100%

School of Nursing Goal # 3

The SON Goal #3 states, "Maintain a nursing faculty complement that achieves the Lander University mission through scholarship, practice, and service to the institution, the community, and the profession." Three aggregate faculty outcomes relate specifically to this goal.

Faculty Outcome #1 (Scholarship) for SON Goal #3

Aggregate Faculty Outcome #1 for SON Goal #3 states, "Ninety percent of fulltime faculty will meet the University requirement that 'over a six year period...each faculty member (will) have at least one activity in each level and at least 10 total activities". LU does not define scholarship specifically. All faculty members are required to meet university expectations for scholarship as noted in the *Dean's Evaluation Faculty Performance Report* in the Faculty Section of the Nursing Faculty Handbook (Nursing Policy and Procedure Manual, Section V). Nursing faculty members adhere to Lander expectations for scholarship. The faculty has endorsed the AACN definition of scholarship, *Defining Scholarship for the Profession of Nursing* and has requested the Dean consider its implications for evaluation of scholarship by the nursing faculty (Nursing Policy and Procedure Manual, Section I).

Faculty members submit a Faculty Performance Report annually to the Dean that includes scholarly accomplishments for the year. The Dean uses information from this report to evaluate faculty members' achievements of scholarship. Table 14 presents a summary of evaluations of nursing faculty effectiveness in achieving this outcome for the past three years. Achievements of scholarship by individual faculty members for the past three years will be available in the Resource Room.

Table 14

Academic Year	Total Full-time Faculty	# and % of Faculty Achieving Level 1	# and % of Faculty Achieving Level 2	# and % of Faculty Achieving Level 3
2012-2013	11	N=5, 45.5%	N=10, 90.9%	N=11, 100%
2013-2014	11	N=6, 55%	N=11, 100%	N=11, 100%
2014-2015	12	N=3, 25%	N=6, 50%	N=12, 100%

Faculty Achievement of Outcome #1 (Scholarship) for SON Goal #3 for 2012-2015

Faculty Outcome #2 (Practice) for SON Goal #3

Aggregate Faculty Outcome #2 for SON Goal #3 states, "Ninety percent of fulltime faculty who are in at least the second year at Lander will demonstrate practice in accord with the School of Nursing definition." Practice is defined as "activities performed beyond the requirements for teaching and advising that provide nursing expertise in application of the nursing process for clients, or in support of healthrelated community initiatives. Practice may be performed for compensation or gratis. Examples of practice may include but are not limited to: employment as a nurse or advanced practice nurse, serving on the advisory board of a community agency, acting as a nurse consultant, providing health education for community agencies, or volunteering as a nurse in a community agency" (Nursing Policy and Procedure Manual, Section I).

The Assessment and Evaluation Committee collects practice data from each faculty member annually. A summary of faculty practice is presented to NFO. Table 15 presents a summary of the achievement of this outcome for 2012-2015.

Table 15

Faculty Achievement of Outcome #2 (Practice) for SON Goal #3 for 2012-2015

Academic Year	Total Faculty in at least 2 nd year	Total # of Faculty in at least 2 nd year demonstrating practice	Percent of Faculty in at least 2 nd year demonstrating practice
2012-2013	10	10	100%
2013-2014	11	10	91%
2014-2015	10	10	100%

Faculty Outcome #3 (Service) for Goal #3

The Aggregate Faculty Outcome #3 for the SON Goal #3 states, "Ninety percent of full-time faculty who are in at least the second year at Lander will demonstrate service in accord with the School of Nursing definition." Service is defined as "activities performed beyond requirements for teaching and advising that support the department/school, the university, the profession, or the community" (Nursing Policy and Procedure Manual, Section I).

The Faculty Performance Report, submitted to the Dean annually, lists service to the SON, the university, the community, and the profession. This information is available to the Dean to use to evaluate achievement of service. Table 16 presents a summary of faculty achievement of this outcome. Faculty service activities for 2012-2015 will be available for review in the Resource Room.

Table 16

Academic Year	Total Faculty in at least 2 nd year	Total # of Faculty in at least 2 nd year demonstrating service	Percentage of Faculty in at least 2 nd year demonstrating service
2012-2013	10	10	100%
2013-2014	11	11	100%
2014-2015	10	10	100%

Faculty Achievement of Outcome #3 (Service) for SON Goal #3 for 2012-2015

For the past three years, the SON faculty have met or exceeded the faculty outcomes of teaching, advising, professional development, scholarship, practice, and service.

IV-G. The program defines and reviews formal complaints according to established policies.

Elaboration: The program defines what constitutes a formal complaint and maintains a record of formal complaints received. The program's definition of formal complaints includes, at a minimum, student complaints. The program's definition of formal complaints and the procedures for filing a complaint are communicated to relevant constituencies.

Program Response:

The SON defines a formal complaint as "a concern about a specific aspect of the nursing program that is expressed by or on behalf of the individual (s) affected, and that (1) is communicated in writing to one or more persons at the university who

have the authority to respond and (2) is clearly designated as a formal complaint "(Nursing Policy and Procedure Manual, Section III, Student Policies and Procedures).

If a formal complaint is received, the following steps will be used to attempt resolution. The written complaint and all related documentation will be maintained on file by the Office of the School of Nursing.

- The Director or Dean will acknowledge receipt of the complaint in writing to the person (s) who initiated the complaint within five Lander business days following receipt.
- 2. The Director or Dean will notify in writing all persons at the university who are affected by the complaint within five Lander business days following receipt.
- 3. The Director or Dean will notify in writing the University administration (Dean, Vice-President) of areas affected by the complaint within five Lander business days following receipt.
- 4. The Director or Dean will attempt to resolve the complaint within 10 Lander business days following receipt.
- 5. If unable to resolve the complaint, the Director or Dean will arrange a face-toface meeting of all involved persons to attempt resolution of the complaint through negotiation within 15 Lander business days following receipt.
- 6. If unable to resolve the complaint through negotiation, the Director or Dean will refer the complaint to the appropriate vice president for administrative action. There has not been a complaint designated as a formal complaint since 2009;

There has not been a complaint designated as a formal complaint since 2009; however, one written complaint was submitted to Dr. Daniel Ball, University President, in fall 2014 regarding NURS 235: Lifespan Wellness, a sophomore level 1 nursing course. The email to Dr. Ball from a parent of a student expressed frustration regarding the rigor of NURS 235. Dr. Ball forwarded the email to the Director of the SON and requested a conference be held between the Provost and the SON Director. The Director and Provost discussed the importance of rigor in all nursing courses. There were no recommendations for change resulting from the conference. The Provost was charged with reporting to the President. The President recommended to the parent that any concerns with the nursing program be discussed with the SON Director. The SON received no additional communications regarding this concern. A copy of the correspondence to Dr. Ball is available in the Resource Room.

IV-H. Data analysis is used to foster ongoing program improvement.

Elaboration: 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.

- Data regarding actual outcomes are compared to expected outcomes.
- Discrepancies between actual and expected outcomes inform areas for improvement.
- Changes to the program to foster improvement and achievement of program outcomes are deliberate, ongoing, and analyzed for effectiveness.
- Faculty are engaged in the program improvement process.

Program Response:

Assessment data are reviewed and analyzed on an ongoing basis. The Recruitment and Retention Committee analyzes graduation and attrition rates and reviews the exit survey results for the BSN program. The Academic Concerns Committee analyzes faculty outcomes. The Curriculum Committee analyzes results from ATI assessments and critical thinking. The Assessment and Evaluation Committee analyzes NCLEX-RN pass rates, employment rates, and surveys from alumni, Nursing Advisory Board, and clinical sites. Results of all assessment data are reported to NFO during year-end meetings. All course reports are discussed to identify areas for recommended changes or program improvement. Examples of BSN program changes resulting from data analyses to foster program improvement include:

- 1. After review of academic performance by sophomores, the admission policy was changed by the addition of the TEAS-V test effective fall 2014.
- 2. Withdrawal policy and Earned Grade Policy were modified in 2011.
- 3. After reviewing literature and considering student feedback, the medication calculation testing policy was revised in 2013 (implemented in spring 2014).
- 4. After reviewing feedback from 2013 Clinical Site Surveys, clinical instructor assignments were changed.
- 5. When NCLEX-RN pass rates declined in 2014, a root cause analysis was conducted and faculty implemented recommended changes to enhance rigor and to model assessments on NCLEX-RN testing format.
- 6. To address the low enrollment in the RN-BSN option, the SON proactively sought articulation agreements with technical colleges in SC during the 2014-2015 academic year. Increased enrollment is anticipated. Supporting documents will be available in the Resource Room.

The new MSN program has collected limited data due to the small cohorts and the short period of time the program has been offered; however, the MSN Committee will monitor data and present any concerns to NFO for consideration of programmatic changes.

Strengths of Standard IV

The strengths of the Lander SON in relation to Standard IV are presented below.

- The SON has a well-developed BSN program and well executed assessment plan.
- The nursing faculty demonstrates a clear commitment to program excellence.
- Faculty are involved in multiple professional organizations to enhance teaching and practice.
- Nursing faculty have met or exceeded aggregate faculty outcomes for the past three years.
- Prelicensure BSN nursing graduate employment rates have exceeded the aggregate student outcomes on employment for the past three years.

- Program completion rates in the BSN program exceed expected standards.
- Nursing graduate NCLEX-RN success rates have met or exceeded the aggregate student outcome on NCLEX-RN pass rates for the past three years.
- The SON has a well- developed assessment plan for MSN program.
- The SON committees have a continual improvement process including the annual review of the nursing program in relation to the CCNE standards.
- The SON is able to accomplish its mission, goals and outcomes as a result of a dedicated diverse faculty.
- A positive SON reputation has increased student acceptances in extern programs in the state, has created opportunities for new clinical sites, and has afforded new employment opportunities to graduates.

Areas for Continuous Improvement for Standard IV

The areas for continuous improvement of the Lander SON for Standard IV are presented below.

- Low response rate on surveys limits value of data to use for program improvement.
- The reliability and validity of the critical thinking measure continues to be a concern.
- Governance and organizational structure of the university, fiscal limitations, and faculty workloads in the SON create barriers to the full execution of the assessment plan related to faculty outcomes.
- Increasing numbers of out- of- sequence students and reapplications to the nursing major precipitates a need to examine admission and progression criteria.
- ATI Remediation Plan needs added value to fully engage students.
- Lander University has not formally recognized the AACN definition of scholarship in evaluating nursing faculty.

Action Plan for Standard IV

The action plan of the Lander SON for Standard IV is outlined below.

- Continue to explore additional methods of data collection.
- Explore the development of a standardized case study to improve the validity and reliability of the measure of critical thinking.
- Engage the new Lander President in reconsideration of the governance structure, organizational structure, fiscal resources, and faculty workloads.
- Continue to gather data regarding student performance on the TEAS-V test in relation to success in the nursing program.
- Examine admission criteria to ensure the admission of cohorts capable of successful completion of the nursing program.
- Explore addition of tutoring opportunities for at-risk students and the development of a retention program to foster student success.

- Continue discussion with administration, including the Dean of COSM, regarding the inclusion of the AACN definition of scholarship in evaluations of nursing faculty.
- Explore alternative methods to improve student engagement in the ATI remediation plan.
- Add the evaluation of students' and graduates' critical thinking abilities to surveys that are sent to the community of interest.
- Fully implement the MSN program assessment plan following graduation of the first cohort.
- Collect professional accomplishments of alumni on surveys.
- Consider additional methods for alumni data collection.

Appendix A Lander University Organizational Chart









Appendix C

Congruence of SON Goals and Outcomes with Lander University Strategic Plan Goals

LU Strategic Plan Goals	SON Goals	SON Outcomes
LU 2009 – 2010	Goal #1	Student Aggregate Outcomes
Strategic Plan Goal on Learning: <i>We will</i> enhance student learning by promoting academic excellence	Educate professional nurses for current and future practice	 Eighty percent (80%) of each cohort entering the nursing major will graduate with a BSN within five academic years.
and public leadership skills. To realize this goal we will 'revise and improve the curriculum to enhance individual	to meet healthcare needs, and to advance professionally.	 The School of Nursing will maintain a program success rate on the NCLEX-RN licensing exam within 5% of the national mean.
student development and produce regionally and nationally competitive graduates.' (Lander University Strategic Plan 2010)	p. c. c. c. c	 One hundred percent (100%) of Lander nursing graduates who seek employment in nursing will be employed as registered nurses within six months of graduation.
		 Students will demonstrate achievement in critical thinking ability at each level of the nursing major.
		Student Learning Outcomes (Program Outcomes)
		 The graduates are prepared to: 1. Apply the nursing process within the Neuman Systems Model to promote an optimal level of wellness through the use of primary, secondary, and tertiary prevention/ interventions for individuals, families, groups, and communities across the lifespan.
		 Synthesize nursing theory with knowledge from selected other disciplines as a basis for care giving, communication, therapeutic interventions, and critical thinking.
		 Use appropriate problem-solving approaches in varied settings to promote wellness for diverse client systems.
		4. Demonstrate leadership strategies to advance nursing practice and the nursing profession.
		5. Utilize nursing research findings to improve the quality of evidence-based nursing practice.

LU Strategic Plan Goals	SON Goals	SON Outcomes	
		 Incorporate established standards of professional nursing as the foundation for one's own nursing practice. Prelicensure option graduates are eligible to take the licensing examination to qualify as registered nurses. 	
LU 2009 – 2010 Strategic Plan Goal on Learning: We will enhance student learning by promoting academic excellence and public leadership skills. To realize this goal we will 'improve the instructional effectiveness of all faculty.' (Lander University Strategic Plan 2010)	<u>Goal #2</u> Maintain a nursing faculty complement that achieves the School of Nursing mission through excellence in teaching, advising, and role modeling professional development.	 Faculty Outcomes for Goal #2 Ninety percent (90%) of full-time faculty who are in at least the second year at Lander will achieve an evaluation rating of "Satisfactory" on overall teaching for the academic year. Ninety percent (90%) of full-time faculty who are in at least the second year at Lander will achieve an evaluation rating of "Satisfactory" on effectiveness as an academic advisor. Ninety percent (90%) of full-time faculty will role model professional development each academic year through attendance at professional conferences and seminars, completing graduate level courses, earning CEU's, or demonstrating intellectual curiosity. 	
LU 2009 – 2010 Strategic Plan Goal on Linkages: We will strengthen connections with the local, regional and statewide community in order to promote experiential learning opportunities, innovative career resources and lifelong learning interests for students while also strengthening the Lander campus community. To realize this goal we will 'increase involvement of all Lander	<u>Goal #3</u> Maintain a nursing faculty complement that achieves the Lander University mission through scholarship; practice; and service to the institution, the community, and the profession.	 Faculty Outcomes for Goal #3 Ninety percent (90%) of full-time faculty will meet the University requirement that "over a six year periodeach faculty member (will) have at least one activity in each level and at least 10 total activities." Ninety percent (90%) of full-time faculty who are in at least the second year at Lander will demonstrate practice in accord with the School of Nursing definition. Ninety percent (90%) of full-time faculty who are in at least the second year at Lander will demonstrate practice in accord with the School of Nursing definition. 	

LU Strategic Plan Goals	SON Goals	SON Outcomes
employees to become more visible in the region'; and 'ensure high quality service to internal and external constituents.' (Lander University Strategic Plan 2010)		

Reference: Nursing Policy and Procedure Manual, Section I

Appendix D

Consistency of SON Mission, Student Goal, and Individual Student Learning Outcomes

with Nursing Standards and Guidelines

SON Mission	SON Student	SON Student Outcomes	Nursing Standards and Guidelines
	Goal #1	(Program Outcomes)	AACN Essential VI
Lander University	<u>Goal #1</u>	1. Apply the nursing	AACIN Essential VI
School of Nursing is	Educate	process within the Neuman	ANIA Otomologia 1
committed to	professional	Systems Model to promote	ANA Standard 1
preparing individuals	nurses for current	an optimal level of wellness	ANA Standard 2
to provide holistic	and future	through the use of primary,	ANA Standard 3
nursing care in a	practice to meet	secondary, and tertiary	ANA Standard 4
variety of settings to	healthcare needs,	prevention/interventions for	ANA Standard 5
diverse clients	and to advance	individuals, families, groups,	ANA Standard 6
across the lifespan.	professionally.	and communities across the	
The purpose of the		lifespan.	CoE Provision 4
baccalaureate			
program is to		2. Synthesize nursing	AACN Essential II
prepare graduates in		theory with knowledge from	AACN Essential V
professional nursing		selected other disciplines as	
roles of care		a basis for care giving,	ANA Standard 8
provider, leader,		communication, therapeutic	
consumer of		interventions, and critical	
research, applicant		thinking.	
for advanced study,		3. Use appropriate problem-	AACN Essential II
and contributing		solving approaches in	AACN Essential VI
member of the		varied settings to promote	AACN Essential VII
nursing profession.		wellness for diverse client	AACN Essential VIII
The purpose of the		systems.	
graduate program is			ANA Standard 4
to prepare Clinical			ANA Standard 5
Nurse Leaders to			ANA Standard 14
address the			
healthcare needs of			CoE Provision 6
the 21 st century by			CoE Provision 8
implementing		4. Demonstrate leadership	AACN Essential II
outcome-based		strategies to advance	AACN Essential V
practice through		nursing practice and the	AACN Essential VIII
management of care		nursing profession.	
systems, quality		<u> </u>	ANA Standard 7
improvement			ANA Standard 10
strategies, utilization			ANA Standard 11
of technology, and			ANA Standard 15
advanced clinical			
reasoning.			CoE Provision 5
(SON Policy &			CoE Provision 6
Procedure Manual,			CoE Provision 7
Section I)			CoE Provision 9
, ,		5. Utilize nursing research	AACN Essential III
		findings to improve the	
		quality of evidence-based	ANA Standard 7
		nursing practice.	ANA Standard 13
	1		1

SON Mission	SON Student Goal	SON Student Outcomes (Program Outcomes)	Nursing Standards and Guidelines
		6. Incorporate established standards of professional nursing as the foundation for one's own nursing	AACN Essential II AACN Essential VIII ANA Standard 9
		practice.	ANA Standard 12
			CoE Provision 1
			CoE Provision 2 CoE Provision 3
			CoE Provision 4
			CoE Provision 5
			CoE Provision 6
			CoE Provision 7 CoE Provision 9
		7. Pre-licensure program graduates are eligible to	
		take the licensing examination to qualify as registered nurses.	

References:

- American Association of Colleges of Nursing (2008). Essentials of Baccalaureate Education for Professional Nursing Practice.
- American Nurses Association (2001). Code of Ethics for Nurses with Interpretative Statements.
- American Nurses Association (2004). Scope and Standards of Nursing Practice.

Nursing Policy and Procedure Manual, Section I.

Appendix E

Faculty and Student Representatives on SON Committees and Advisory Councils

Spring 2015

<u>NFO Chair</u> Robbie South	<u>NFO Vice Chair</u> Ashley Lee	<u>NFO Secretary</u> Holisa Wharton	<u>NFO Treasurer</u> Erica Sisiam
Class/Organization	<u>Advisors</u>	Representatives	
2 nd Sem Seniors 1 st Sem Seniors 2 nd Sem Juniors 1 st Sem. Juniors 2 nd Sem Sophomores 1 st Sem Sophomores Prenursing LUSNA RN-BSN MSN	Lawson/Myers McDowell LM Myers Wharton Cox-Davenport Lee Sisiam/Cromer Cox-Davenport/Lee Haynes McDowell	Christian Carroll/Ashle Tori Major/Casey Hym Stacy Simpkins/Aman Chelsea Hall/Jessica Bethany Drake/Corinn Tiffany Holcombe/Lau Mariah Henry/Alexis M Chelsea Hall (Presider Fernanda DeZayas N/A	ian da Whaley Trotter ie Jackson ren Babb IcGraw
Academic Concerns	Committee		
Faculty Faculty Faculty		Liz McDowell Rachel Coats Ashley Lee	
2 nd sem Senior 1st sem Senior 2nd sem Junior 1 st sem Junior 2 nd sem Sophomore 1st sem Sophomore RN-BSN		<u>Student Representati</u> Samantha Campbell/ Roni Noffz/ Laquisha Tiesha Spicer- Jones Kieara Johnson/ Kara Jennifer Fraser/ Hanr Jasmine Macon/ Krist Luci (Katie) Hare	Rachel Sheppard Pickens / Shatequa Gamble a Lowery nah Strong

Assessment and Evaluation Committee

Faculty Faculty Faculty

2nd Sem Senior 1st sem Senior 2nd sem Junior 1st sem Junior 2nd sem Sophomore 1st sem Sophomore Leslie Myers Rebecca Cox- Davenport Erica Sisiam

<u>Student Representative/Alternate</u> Emily Dye/ Shannon Butler Baileigh Brock/ Steven Fuller Mary Beth Joyner/ Gina Martin Tiffany Genwright/ Veronica Legrand Katlyn Boulware/ Taylor Ayers Braden McNeil/ Alexis Jackson

Curriculum Committee

Faculty Faculty Faculty

2nd sem Senior 1st sem Senior 2nd sem Junior 1st sem Junior 2nd sem Sophomore 1st sem Sophomore RN-BSN

Recruitment and Retention Committee

Faculty Faculty

2nd sem Senior 1st sem Senior 2nd sem Junior 1st sem Junior 2nd sem Sophomore 1st sem Sophomore RN-BSN Prenursing

Chair's Advisory Council

Faculty

2nd Sem Senior 1st Sem Senior 2nd Sem Junior 1st Sem Junior 2nd Sem Sophomore 1st Sem Sophomore Prenursing RN-BSN Teri Lawson Mary Cromer Paula Haynes

Elizabeth Rackley/ Rebecca Stewart Lauren Floyd/ Lindsey Teal Lindsey Heath/ Brianna Barth Bria Sims/ Channing Warren Corrine Jackson/ Bethany Drake Kristen Ollison/ Jasmine Macon Freda Armstrong

Leisa Weston Myers Holisa Wharton

<u>Student Representative/Alternate</u> Karla Sargent/ Kaitlyn Rector Beatriz Lopz Martinez/ Erin Watters Andrea Marshall/ Jackie Baker Kaiti Roberts/ Kathryn Hellyer Mackenzie White/ Jennifer Fraser Kristen Byrd/ Alexis Jackson Meghan Douglas Justin Suber/ September Jones

Robbie South

Student Representative/Alternate Christian Carroll/ Ashley Jabara Tori Major/ Casey Hyman Stacy Simpkins/ Amanda Whaley Chelsea Hall/ Jessica Trotter Bethany Drake/ Corinne Jackson Tiffany Holcombe/ Lauren Babb Mariah Henry/ Alexis McGraw Fernanda DeZayas

Interprofessional Education Committee

Faculty Faculty Faculty Faculty

2nd Sem Senior 1st Sem Senior 2nd Sem Junior 1st Sem Junior 2nd Sem Sophomore 1st Sem Sophomore Prenursing Ashley Lee Robbie South Leisa Myers Erica Sisiam

<u>Student Representative/Alternate</u> Heather Gosnell/ Emily Sharpe Kevona Ware/ Michael Simmons Linda Starks/ Ebony Garrick None Kristen Jeffers/ Karlee Hoitt Jolee Young/ Melissa Hanna Kimberly White/ Taylor Keefer

MSN Committee

Rebecca Cox-Davenport Teri Lawson Liz McDowell Leisa Weston Myers Leslie M. Myers Robbie South Holisa Wharton Ashley Lee (recorder)

Appendix F

Nursing Faculty Participation in Lander University Governance 2012-2015

Faculty	Committee Assignments	Years
Rebecca Cox- Davenport	Enhanced Advising Program	2011-2015
·····	Lander University Faculty Senate	2011-2014
	Faculty Senate Committee B (Chair)	2012-2013
Donna Gause	SACSCOC 5 th Year Interim Report Team	2012-2013
Paula Haynes	Lander University Faculty Senate	2014-2015
	Advisory Committee for the Disabled	2012-2014
Theresa Gunter Lawson	Faculty Senate Chair	2013-2014
	Faculty Senate Member	2012-2014
	University Graduate Committee	2013-2015
	Institutional Review Board	2012-2015
	SACSCOC Committee	2014-2015
	Student Conduct Committee	2014-2015
	Faculty Senate Chair-Elect	2012-2013
	University Tenure and Promotion Committee	2014-2015
Ashley Lee	SACSCOC Standards Team FR 4.9	2012-2015
-	SACSCOC 5 th Year Interim Report Team	2011-2013
	Institutional Animal Care and Use Committee	2014-2015
Liz McDowell	Graduate Programs Committee	2014-2015
	Foundation Grants Committee	2014-2015
	Faculty Senate	2014-2015
	Faculty Senate Committee B (Chair)	2014-2015
	Faculty Grants Committee	2014-2015
Leisa Weston Myers	SACSOC 5 th Year Interim Report Team	2012-2013
,	Consultant for Counseling and Health Services	2012-2014
Leslie M. Myers	Faculty Senate Member-at-Large	2009-2012
-	Faculty Co-Advisor for Lander Medical Reserve Corps	2012-2015
	University Admissions and Petitions Committee	2013-2015
	University Study Abroad Committee	2013-2014
	SACSCOC Report Committee	2014-2015
Erica Sisiam	Advisory Committee on the Disabled	2014-2015
	Enhanced Advising Program	2014-2015
	SACSCOC Standards Team 3.7.3	2014-2015
Robbie South	University Graduate Committee	2013-2015
	Blood-borne Pathogens Committee	2012-2015
	Health Advisory Committee (Chair)	2011-2015
	Faculty Co-Advisor for Lander Medical Reserve Corps	2012-2015
Holisa Wharton	Senate Proxy Member	2014-2015
	Foundation Grants Committee	2014-2015

Appendix G

Examples of Nursing Admission and Progression Policies that Exceed

Lander University Policies

Admission Policies (Examples)	Progression Policies (Examples)
Admission to Prenursing for First-time	Continuation in the Nursing Major for Pre-
Pre-licensure Students	licensure Students
Must earn a combined verbal and quantitative SAT score of at least 1000 or better or an ACT score of 22 or better.	1. Maintain a cumulative Lander institutional GPA of 2.6 (not rounded) assessed each semester including summers.
Admission to Nursing Major for Pre-licensure Students	2. Complete the following courses on schedule with a grade of "C" or above: MATH 211, BIOL 204,
1. Required Prerequisite Courses:	NURS 165, 232, 233, 235, 240, 242 NURS 303, 304, 345, 346, 392, 393
Earn a grade of C or higher in these required courses and a GPA of at least 2.6 on these	NURS 408, 409, 412, 417, 460, 499
courses - ENGL 101-102, MATH 121/123/131, CHEM 105/111, CHEM 106/112, BIOL 202, BIOL 203.	3. May not repeat any required courses more than one time each.
2. GPA requirement:	 May not repeat more than two (2) required courses, ONLY one of which can be a required nursing course.
A) If a <u>current Lander student (prenursing or</u> other majors): Earn cumulative Lander GPA (Institutional GPA	Continuation in the Nursing Major for RN-BSN Students
on Bearcat Web) of at least 2.6 (not rounded) on 30 semester hours (not counting developmental courses).	 Must complete required nursing major courses within five years prior to graduation. NURN 307, 303, 304, 340
B) If a <u>transfer student</u> :	NURN 412, 417. 499
Earn at least 30 semester hours (not counting developmental courses) of college credit including 12 semester hours at Lander University with a cumulative Lander GPA	2. May not repeat any required nursing courses more than one time each.
(Institutional GPA on Bearcat Web) of at least 2.6 (not rounded).	3. May not repeat more than two (2) required courses, ONLY one of which can be a required nursing course.
C) If already possess a <u>baccalaureate degree:</u> Earn cumulative GPA of at least 2.6 (not rounded) on previous college degree; otherwise, must meet transfer student GPA requirements listed in B above.	4. Maintain a cumulative Lander GPA of 2.6 (not rounded) assessed each semester including summers.
3. Earned Grade Requirement:	5. Maintain a current unencumbered nursing license.
Students must not earn a grade of less than C in any one required course more than once each at any institution of higher education.	 Complete clinical health screening requirements by specified deadlines.
Students must not earn a grade below C in more than two required courses taken at any institution of higher education.	 Complete General Education courses per articulation agreements with SC technical schools.

Admission Policies (Examples)	Progression Policies (Examples)
4. TEAS-V (Test of Essential Academic Skills):	8. Students are awarded 39 hours of advanced standing credit after completing NURN 307 with a grade of at least a B.
Students must earn a score of at least PROFICIENT on the TEAS-V test.	with a grade of a fload a D.
5. Core Performance Standards and Clinical Agency Health Screening Requirements:	
Students must meet Core Performance Standards and complete clinical health screening requirements by specified deadlines.	
Admission to Nursing Major for RN-BSN Students	
1. Graduated from an accredited nursing program and maintains a current unencumbered nursing license as an RN in the state where the student will be doing clinicals.	
2. Earn "C" or higher in 6 required prerequisite courses – ENGL 101-102, BIOL 202 (Human Anatomy), BIOL 203 (Human Physiology) (2 semesters combined A&P course accepted), BIOL 204 (Microbiology), and MATH 211 (statistics).	
3. Achieve GPA of at least 2.6 (not rounded) at last school attended.	

Lander University Catalog, 2014-2015, pp. 244-257.

Appendix H

Nursing Class Numbers and Laboratory/Clinical Numbers in 2014-2015

NURS Courses	Class Number		Laboratory/Clinical Number	
	Fall	Spring	Fall	Spring
165 History and Trends	40	26	Not applicable	Not applicable
232 Pharmacology Basics	40	26	Not applicable	Not applicable
233 Pharmacology	19	18	Not applicable	Not applicable
235 Lifespan Wellness Nursing	40	36	6 - 9	5 - 8
240 Physical Assessment	20	19	4 - 9	9 – 10
242 Strategies for Nursing Care	19	19	4 - 9	6 - 7
303 Nursing Research	23	17	Not applicable	Not applicable
304 Pathophysiologic Bases	56	N/A	Not applicable	Not applicable
345 Medical-Surgical I	26	22	6 - 7	5 - 6
346 Medical-Surgical II	29	22	5-8	5-8
392 Childbearing Family	29	31	4-10	5-10
393 Mental Health Nursing	26	17	6 – 7	8 - 9
408 Critical Care	32	15	5 - 6	3 - 5
409 Pediatric Nursing	32	13	5 – 6	5 - 6
412 Leadership and Management	23	26	6-8	6 - 8
417 Community Nursing	24	26	Preceptored	Preceptored
460 Clinical Problem Solving	23	26	Not applicable	Not applicable
480 Nursing Honors Synthesis	1	0	Not applicable	Not applicable
499 Professional Development	31	13	Not applicable	Not applicable

NURS Courses Summer 2015	Class Number	Laboratory/Clinical Number
304 Pathophysiologic Bases	7	Not applicable

NURN Courses (online for RN-BSN)	Class Number		Laboratory/Clinical Number	
	Fall	Spring	Fall	Spring
307 Professional Transition RN's	8	7	Not applicable	Not applicable
303 Nursing Research	N/A	3	Not applicable	Not applicable
304 Pathophysiologic Bases	N/A	7	Not Applicable	Not applicable
340 Enhanced Physical Assessment	9	0	Preceptored	Not applicable
412 Leadership and Management	0	19	Not applicable	Preceptored
417 Community Nursing	13	N/A	Preceptored	Not applicable
499 Professional Development	N/A	19	Not applicable	Not applicable

NURN Courses Summer 2015 (online for RN-BSN)	Class Number	Laboratory/Clinical Number
303 Nursing Research	10	Not applicable
340 Enhanced Physical Assessment	4	Preceptored

Appendix I

Full-time Faculty Academic and Experiential Qualifications, 2014-2015

Name, Appointment Year, Rank	Academic Credentials	Teaching Responsibilities	Preparation/ Experience	Maintenance of Expertise
South, Robbie M. 2003 Professor Tenured	ADN University of South Carolina (1975) BSN, University of South Carolina (2000) MSN, University of South Carolina (2002) Doctor of Health Education, A.T. Still University of Health Sciences (2011)	Community Health Nursing Complementary and Alternative Therapies in Nursing Spirituality in Nursing Healthcare Structure and Finance (MSN)	MSN in Community Health Nursing Doctorate in Health Education with emphasis in leadership in higher education 40 years of nursing experience in a variety of health care settings 18 years experience in Public Health 13 years experience as nurse educator	Conferences and workshops related to specialty and nursing education Previously certified as CNS in community health (2003-2013); Previously certified in gerontological nursing Serve as Coordinator of Congregational Health Ministry in church Maintains certification as a CNE (Certified Nurse Educator Serves on Nursing Advisory Board for Piedmont Technical College, Midlands Technical College; and Mars Hill
Myers, Leisa Weston 2003 Associate Professor Tenured	AB Biology, Erskine College (1978) BSN, Lander University (1995) MSN, University of South Carolina (2002)	Mental Health Nursing Pathophysiologic Bases Advanced Pharmacology (MSN)	MSN: Community Mental Health ANCC Certification: Psychiatric Mental Health Nurse Generalist Nursing experience in inpatient psychiatric nursing; past prescriptive authority;	College. Continuing education related to mental health, pharmacology, and nursing education Maintain certification as PMHRN-BC Health & medication information resource to local behavioral counseling 2015

Myers, Leslie M. 2005 Associate Professor Tenured	BSN, Clemson University (2002) MSN, University of South Carolina (2006) DNP, University of South Carolina (2008)	Childbearing, Family, and Women's Health Nursing Leadership and Management Enhanced Physical Assessment (on- line) International Service-Learning in Nursing Strategies for Wellness Advanced Physical Assessment (MSN) CNL Practicum I (MSN)	bachelor's degree in biology. Experience teaching pharmacology. MSN emphasis in community health DNP emphasis in adult health Past nursing experience in ob/gyn office, labor and delivery, mother/baby, newborn nursery, and women's health ANP certification and prescriptive authority Current practice as ANP (adult family practice, gerontology, gynecology, and obstetrics) Director of Health Services/ Co- Medical Director of Clinica Gratis Free Medical Clinic	Consultant & Human Rights Committee for Burton Center fall 2014 Teach clinical for mental health nursing Trained as SANE/Forensic Nurse Examiner Serve on Burton Center Board of Visitors 2015 Practice as ANP in primary care settings (adult family practice, gerontology, gynecology, and obstetrics). Developed and lead cancer screening initiatives for Lakelands area in collaboration with Self Regional Healthcare Leads clinical teaching in Women's Health & Childbearing Clinical preceptor for MSN/DNP students in nurse practitioner and nurse educator programs. Conferences & workshops related to ANP, nursing education, breastfeeding, & women's health. Maintains certification as a CNE (Certified Nurse Educator)
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	PSN Londor	Physical	MS with omphasis	Maintains certification and prescriptive authority as ANP; certified breastfeeding advisor Directs free medical clinic, public relations director for SC Breastfeeding Coalition, Chairman of Board of Directors of Community Initiatives, Inc. Volunteers as sexual trauma responder for Beyond Abuse.
Lawson, Theresa	BSN, Lander University (2002)	Physical Assessment	MS with emphasis in Family Nurse Practitioner	Attends conferences and workshops related to FNP and
2005	MS, Clemson University (2005)	Health Promotion		nursing education
Assistant Professor	PhD, Medical	and Disease Prevention	PhD emphasis in nursing research	Maintains certification
Tenured	University of South Carolina	(MSN)	and vulnerable populations	as FNP
	(2011)	Theory and Conceptual Foundations (MSN) Management of Clinical Outcomes (MSN) Nursing Research	Past experience in medical-surgical, critical care, primary care, and gerontology FNP certification	Maintains certification as a CNE (Certified Nurse Educator) Member of Neuman Systems Model Board of Trustees
Cox-Davenport, Rebecca A.	Nursing Diploma, Lancaster	Lifespan Wellness Nursing	MSN in Nursing Education	Practice in Hospice of Laurens County
Repetted A.	General Hospital,			
2008	School of Nursing (1996)	Clinical Problem Solving	12 years experience as a nurse educator	Member of the American Holistic Nursing Association
Assistant Professor	BSN, University of Pittsburgh (1998)	Nursing Research	High School Health Educator: 2000-	Attends conferences and workshops
	MSN, Waynesburg University (2005)	Nursing Honors Medical-Surgical	2008	related to nursing practice and nursing education
	PhD, University of Nevada-Las Vegas (2010)	Nursing I	Previous experience in Med	
		December for	Quart Otar Dist	[]
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		Research for	Surg/ Step Down/	
		Evidence-based Practice (MSN)	ED/ICU: 1996-2007	
			Hospice nursing	
			experience: 2009-	
			2015	
Haynes, Paula B.	BSN, Lander	Transitions in	MSN emphasis in	Practice as APRN as
	University	Nursing	family practice	a FNP in primary
2008	MSN, Clemson			care office.
	University of	Professional	Past experience in	
Assistant	South Carolina	Development	medical-surgical,	Conferences and
	(2008)	De l'action de salar	telemetry, pediatric, and community	workshops related to FNP, nursing
		Pediatric Nursing	health nursing	education, pediatrics
		NL	noular naroing	and diabetes.
		Nursing Honors	FNP certification	
		Synthesis	and prescriptive	Maintains certification
		Clinical Problem	authority	and prescriptive
		Solving	-	authority as FNP.
		g	Certified Diabetes	
			Educator	Maintains certification
				as CDE (Certified
			Current practice as FNP	Diabetes Educator).
				Maintains certification
				as a CNE (Certified
				Nurse Educator)
Lee, Ashley	BSN, Georgia	Critical Care	MSN with health	Practice as RN in
	Baptist College of	Nursing	care education	Critical Care at Self
2011	Nursing, 1999		emphasis	Regional Healthcare
• • • •	MSN Pogie	Pharmacology	Past bedside	Maintains ACLS and
Assistant	MSN, Regis University, 2010	Internetional	experience with	telemetry
	Oniversity, 2010	International Service Learning	telemetry,	certifications
		in Nursing	progressive care,	
		innearchig	and critical care	Attends conferences
		Nursing Honors		related to content
		5 5 5 5 5		taught and nursing
				education
				Maintains certification
				as a CNE (Certified Nurse Educator)
Sisiam, Erica	BSN, Lander	Strategies and	Women's health,	Practice as RN in
	University 2005	Techniques of	neonatal intensive	Women's Center at
2011		Nursing Care	care, and pediatric	Self Regional
	MSN, University of		nursing work	Healthcare
Lecturer	Phoenix 2010	Pharmacology	experience 2005-	
-		Basics	2015	
		1		
Tenure-track		_		
Tenure-track		Strategies for		Attends conferences
Tenure-track		Strategies for Wellness		Attends conferences and workshops related to nursing

Wharton, Holisa 2011 Assistant Professor Tenure-track	BS Biology, Wofford College, 1994 BS Nursing, USC- Upstate 1998 MS Nursing, Clemson University, 2007 PhD Healthcare Genetics, Clemson University, 2012	Medical-Surgical Nursing II Professional Development in Nursing Healthcare Genetics Pathophysiology Advanced Pathophysiology (MSN)	Childbirth Educator for Self Regional Healthcare 2008- 2015 MSN in Nursing Education Past Clinical Instructor of Lander MSN emphasis in geriatrics and nursing education PhD emphasis in biological sciences with emphasis on genetics. Past clinical experience: assistant director of Long Term Care Facility (2+ years); occupational health nurse (1 year); staff nurse rehabilitation unit (2+ years);	education and nursing knowledge Teach childbirth education classes for Self Regional Maintains certification of OB-ACLS, BLS, and NRP Ongoing clinical practice as a staff nurse on medical- surgical units (resource pool) Serve as vice- president of Nurses Foundation and president of Mu Zeta Chapter of STTI. Attends conferences related to nursing education and genetics Maintain certification
			resource nurse on psychiatric unit (1 year) Experience on medical surgical units (4 years)	as an instructor of AHA BLS for Healthcare Providers Maintains certification as a CNE (Certified Nurse Educator)
Liz McDowell 2012 Assistant Professor Tenure-track	Nursing Diploma, Greenville General Hospital School of Nursing (1973) BSN, University of South Carolina (2000) MDiv, Vanderbilt University (2004) PhD, Vanderbilt University (2012)	Nursing Leadership and Management History and Trends in Nursing Nursing Research Current Perspectives in World Health	PhD in Nursing Science Nursing faculty, ECPI University (2009-2012) Research Assistant, University of South Carolina (2007- 2009)	Attends conferences and workshops related to nursing education, nursing research, psychiatric/mental health nursing and global health. Maintains certification as a CNE (Certified Nurse Educator)
			Research Assistant, Vanderbilt	Serves on Board of SC League for Nursing

Mary Cromer 2014	BSN, Lander University (2008)	Clinical Nurse Leader Practicum II (MSN) Leadership in Healthcare (MSN) Clinical Nurse Leader Immersion Practicum (MSN)	University (2004- 2005) Case Manager, Columbia Area Mental Health Center (1995-2001) Head Nurse, State Hospital Department of Mental Health (1991-1995) Intake Coordinator, Charter Rivers Psychiatric Hospital (1991-1995) Nurse Supervisor, Department of Corrections (1983- 1991) Staff Nurse, Oncology, Dermatology and Neurology (1973- 1981) MSN emphasis in nursing education	Attends Webinars and CEUs related to nursing and nursing
Lecturer Tenure-track	MSN, Grand Canyon University (2013)	Current Perspectives in World Health	Past experience in school nursing and home health nursing	education
Rachel Coats	BSN, Lander	History and	MS with emphasis	Active practice as a
	University 2009	Trends in Nursing	in Nursing Education	registered nurse
2015	MS, Clemson	Strategies for		ACLS provider
Lecturer	University 2014	Wellness	6 years experience	
Tenure-track		Lifespan Wellness Nursing Clinical	in emergency nursing Certified Emergency Nurse	PALS provider Member Emergency Nurses Association STTI Counselor

Part-tir	ne Nursing Faculty A	cademic and Experie	ntial Qualifications, 20	14 -2015
Name	Academic Credentials	Teaching Responsibilities	Preparation/ Experience	Maintenance of Expertise
Daugherty, Bernice	BSN, Arizona State University (1970)	Physical Assessment	Past experience in medical-surgical and community	Attends nursing conferences and workshops
Professor of Nursing Emeritus	MSN, University of Kansas (1992)		health nursing Practiced as FNP	Serves on Community Board
2014-2015 Instructor, part-time	Family Nurse Practitioner,		1997-2008 Administrative	(Community Initiatives Health Services Committee
	Valparaiso University (1996)		experience as chair	Lander Docent
Freese, Barbara T. Professor of Nursing Emeritus 2014-2015 Instructor, part-time	BSN, University of Missouri (1967) MSN, Clemson University (1980) EdD, University of Georgia (1989)	Lifespan Wellness Nursing (laboratory) Current Perspectives in World Health	BLS certified Clinical nursing experience in med- surgical, & orthopedic nursing, mental health & ambulatory care	Workshops and conferences on wellness/community concepts. Volunteers as nurse at United Ministry Free Clinic.
			Administrative experience as Dean of Nursing	Medical mission experiences in Central & S. America Lander Docent

Key to abbreviations:

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ACLS = Advanced Cardiac Life Support

AHA = American Heart Association

- BLS = Basic Life Support
- CCE = Certified Childbirth Educator
- = Certified Emergency Nurse CEN
- CNE = Certified Nurse Educator
- ENPC = Emergency Nurse Pediatric Curriculum NRP = Neonatal Resuscitation Program
- PALS = Pediatric Advanced Life Support
- TNCC = Trauma Nurse Core Curriculum

Appendix J

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Instructors	Courses	Academic Preparation	Certification	Clinical Experience
Addy, Kelly	NURS 346	BSN MSN student	BLS	Practices as a registered nurse
Bateman, Elizabeth	NURS 408	BSN	BLS, PALS	Practices as a registered nurse: staff nurse- pediatrics
Dahlberg, Dori	NURS 240	MSN	BLS AANP	Current FNP practice
Daugherty, Bernice	NURS 240	MSN	BLS	Practice as FNP 1997-2008
Dominick, Kimberly	NURS 345	BSN	BLS	Practices as a registered nurse
Dupont- Hurst, Natalie	NURS 408	BSN	BLS	Practices as a registered nurse
Edwards, Crystal	NURS 242 NURS 345	BSN MSN student	BLS	Practices as registered nurse in hospice
Foley, Francis	NURS 408	BSN	BLS, PALS	Practices as registered nurse at Shriner's Children's Hospital
Harrison, Katrina	NURS 412	BSN	BLS, ACLS Stroke certified Aquaphoresis certified	Staff Nurse in Progressive Care Unit (7.5 years)
Henderson, Katie Suber	NURS 392	BSN	BLS, NRP ACLS-OB	Practices as a registered nurse
Pamacheche, Christopher	NURS 346	BSN	BLS ACLS	Staff nurse in critical care
Partridge, Louise	NURS 242 NURS 393	BSN	BLS	Staff nurse in home health: experience in inpatient & community mental health
Reed, Brittany	NURS 345	BSN	BLS	Practices as registered nurse
Seaborn, Misty	NURS 408	BSN MSN student	CEN, TNCC Instructor in ENPC, ACLS, PALS, BLS	Emergency Department
Simons, Suzanne	NURS 409	BSN	BLS, ACLS, PALS, TNCC	Practices as a registered nurse
Tugwell, Katie	NURS 393	BSN	BLS, NRP ACLS-OB	Practices as a registered nurse
Timms, Bonnie	NURS 409	BSN MSN student	BLS, PALS, RN-BC Peds	Staff Nurse in Pediatrics and Neonatal ICU

Qualifications of Laboratory/Clinical Instructors 2014 - 2015

Key to abbreviations:

ACLS = Advanced Cardiac Life Support

BLS = Basic Life Support

CCE = Certified Childbirth Educator

CEN = Certified Emergency Nurse

ENPC = Emergency Nurse Pediatric Curriculum NRP = Neonatal Resuscitation Program

PALS = Pediatric Advanced Life Support

TNCC = Trauma Nurse Core Curriculum

Appendix K

Lander University Grants to Nursing Faculty 2012 – 2015

Lander Foundation Faculty Grants

2012- Erica Sisiam, Theresa Lawson and Leslie Myers received a Lander University Foundation Grant for \$4585.25 to fund project: The Effectives of Electronic Medical Record Use in the Clinical Laboratory Setting on Perceived Self-Efficacy in Electronic Nursing Documentation by Baccalaureate Nursing Students.

Lander University Faculty Development Grants

2012- Leslie Myers and Robbie South received a Faculty Development Grant to attend the 2012 Integrated Medical, Public Health, Preparedness and Response Training Summit in Nashville, TN for a poster presentation entitled *Developing a Medical Reserve Corp at Lander University in Greenwood, South Carolina.*

2013- Ashley Lee and Leslie Myers received a Faculty Development Grant for a podium presentation entitled *International Service- Learning in Education* at the 2013 Neuman Systems Model Symposium in Vancouver, BC. (Funded \$500)

2014- Theresa Lawson, Ashley Lee, and Leslie Myers received a Faculty Development Grant for a podium presentation entitled *Reflective Journaling to Enhance International Service- Learning* at the Research on Teaching and Learning Summit at Kennesaw State University.

2014- Paula Haynes received a Faculty Development Grant (\$525) for a podium presentation at Research on Teaching and Learning Summit, Kennesaw State University, Kennesaw, Georgia.

2015- Holisa C Wharton received a Faculty Development Grant to attend the 2015 Neuman Systems Model Symposium in Philadelphia, Pennsylvania for a poster presentation entitled: *Posting worries: A comparative analysis of stressors between professional education majors*

Appendix L

BSN Curriculum Blueprint

		NURSING PRACTICE		
Level of Program/Courses	Nursing Process	Communication	Critical Thinking	Therapeutic Intervention
Level I	Assessment	Active Listening	Recognize and	
			respond to	
NURS 165	Analysis	Verbal/nonverbal	clinical/ethical	
NURS 232	-		dilemmas for:	
NURS 235		Electronic	Nurse or patient	
	Planning			
NURS 304		Goal Directed		
	Intervention			
NURS 233		Medical/Nursing		
NURS 240	Evaluation	Vocabulary		
NURS 242		Group Communication		
Level II	Assessment	Active Listening	Recognize and	Imitate clinical
		· · · · · · · · · · · · · · · · · · ·	respond to	skills
NURS /NURN 303	Analysis	Verbal/nonverbal	clinical/ethical	
			dilemmas for:	Perform basic
NURN 304	Planning	Electronic	Nurse or patient	skills with
NURN 307	r laining	Liootionio	Nurses and	accuracy,
NURN 340	Intervention	Goal Directed	patient	beginning
	Intervention		Healthcare team	confidence and
NURS 345	Evaluation	Medical/Nursing		proficiency
NURS 393	Lvaluation	Vocabulary		pronoicities
		Vocabulary		
NURS 392		Group Process		
NURS 346				
		Therapeutic		
Level III	Assessment	Active Listening	Recognize and	Imitate clinical
	Analysis	Active Elsterning	respond to	skills
NURS 408	Analysis	Verbal/nonverbal	clinical/ethical	31113
NURS 409	Planning	verbai/nonverbai	dilemmas for:	Perform basic
NURS/NURN 499	T lanning	Electronic	Nurse or patient	skills with
	Intervention	Liectionic	Nurse and patient	
NURS/NURN 412	Intervention	Goal Directed	Healthcare team	accuracy, beginning
NURS/NURN 412	Evaluation		community	confidence and
		Modical/Nuraina	Community	
NURS 460		Medical/Nursing Vocabulary		proficiency
NUR3 400		vocabulary		Adapt akilla ta fit
		Thoropoutic		Adapt skills to fit
		Therapeutic		special
NURS 480				circumstances or
		Group Evaluation		to meet a problem
				situation

Approved by NFO 2010; Reaffirmed 5/ 2011; 5/2012; 5/2013; 5/2014; 5/2015

		NURSING ROLES		
Level of	Provider of	Professional	Leader	Consumer of
Program/Courses	Care			Research
Level I	Provider	Basic elements	Team Leader	Locate and read
		Confidentiality		research articles
NURS 165		Privacy		
NURS 232	Teacher	Preparedness		State problems
NURS 235		Precautions		being studied
		Honesty		
NURS 304	Advocate	Responsibility		
		Accountability		
NURS 233		Safety		
NURS 240				
NURS 242				
Level II	Provider	Basic elements	Team Leader	Locate and read
				research articles
NURS /NURN 303		Participate in		
	Teacher	organized	Coordinator	State problems
NURN 304		professional		being studied
NURN 307		activities		
NURN 340	Advocate			Generate
				researchable
NURS 345				problems
NURS 393	Collaborator			-
				Analyze and
NURS 392				evaluate research
NURS 346				articles
Level III	Provider	Basic elements	Team Leader	Locate and read
				research articles
NURS 408		Participate in		
NURS 409	Teacher	organized	Coordinator	State problems
NURS/NURN 499		professional		being studied
		activities		
NURS/NURN 412	Advocate		Delegator	Generate
NURS/NURN 417		Develop career	-	researchable
		projection		problems
NURS 460	Collaborator		Consultant	
		Mentor lower		Analyze and
		classmen		evaluate research
NURS 480	Manager		Team Leader	problems
-		Practice the		
		graduate role		Use research in
		0		practice

Approved by NFO 2010; Reaffirmed 5/ 2011; 5/2012; 5/2013; 5/2014; 5/2015

	CL	IENT CHARACTERIS Theoretical Base	STICS	
Level of Program/ Courses	Level of Wellness/ Intervention	Clinical Settings	Client Focus	Neuman System Model
Level I	Primary/	Community	Individual	NSM Terminology
	Retention	Preschool		
NURS 165		Schools	Simple problems	Wholistic
NURS 232	Secondary/	Senior Centers	associated with	Perspective
NURS 235		Industry	life cycle	
	Attainment			NSM-Based
NURS 304		Nursing Homes		assessment
NURS 233				Cultural
NURS 240				differences
NURS 242				
Level II	Primary/ Retention	Community	Individual	NSM Terminology
NURS /NURN 303		Nursing Homes	Simple problems	Wholistic
	Secondary/	Ū	associated with	Perspective
NURN 304	Attainment	Hospitals	life cycle	
NURN 307				NSM-Based
NURN 340	Tertiary/		Complex	assessment
	Maintenance		individual	
NURS 345			problems	NSM-Based plan
NURS 393			associated with	of care
			illness and life	
NURS 392			cycle	Client/nurse
NURS 346				perspective
				Cultural sensitivity
Level III	Primary/	Community	Individual	NSM Terminology
NURS 408	Retention	Nursing Homes	Simple &	Wholistic
NURS 409	Secondary/		complex	Perspective
NURS/NURN 499	Attainment	Hospitals	individual	
	Addimient	Tiospitais	problems	NSM-based
NURS/NURN 412	Tertiary/	Rehabilitation	associated with	assessment
NURS/NURN 417	Maintenance	Centers	illness & life	400000110111
	Maintenance	Ochicis	cycle	NSM-Based plan
NURS 460				of care
			Complex	
			population	Client/nurse
NURS 480			problems	perspective
			Multiple patient	Cultural
				competence
Approved by NEO 20			assignments	comp

Approved by NFO 2010; Reaffirmed 5/2011; 5/2012; 5/2013; 5/2014; 5/2015

Appendix M

MSN Curriculum Blueprint

Course	Advocate	Educator	Expert Clinician	Systems Analyst	EBP Integrator
NUR 600	Х	X		Х	
NUR 611			Х		X
NUR 612	Х	Х	Х		X
NUR 613			Х		
NUR 620	Х			X	
NUR 630		Х	Х		X
NUR 635	Х			Х	Х
NUR 640		Х	Х		X
NUR 645	Х			Х	Х
NUR 651					Х
NUR 660	Х			X	
NUR 675	Х	Х	Х	Х	Х

Appendix N

Essentials of Baccalaureate Education for Professional Nursing Practice in Required Nursing Course Objectives

Essential I	Essential I: Liberal Education for Professional Nursing Practice																								
A solid base	A solid base in liberal education provides the cornerstone for the practice and education of nurses.																								
	Pre-licensure Courses RN-BSN Cours															ses									
Essential	1	2	2	2	2	2	3	3	3	3	3	3	4	4	4	4	4	4	3	3	3	3	4	4	4
Outcomes	6	3	3	3	4	4	0	0	4	4	9	9	0	0	1	1	6	9	0	0	0	4	1	1	9
	5	2	5	3	0	2	3	4	5	6	2	3	8	9	2	7	0	9	3	4	7	0	2	7	9
#1	*	*	*	*	*	*		*	*	*	*	*	*	*	*	*		*		*	*	*	*		*
#2			*		*	*		*	*		*	*	*		*	*		*		*		*	*	*	*
#3	*	*	*		*	*	*	*	*		*		*		*				*	*		*	*	*	
#4	*			*	*	*	*				*	*	*		*			*	*			*	*		
#5	*		*		*	*		*	*		*	*	*	*	*					*		*	*		
#6	*	*	*			*	*		*		*		*		*	*		*	*				*	*	*
#7		*	*	*		*		*	*	*	*	*	*		*	*				*			*	*	
#8	*	*				*					*				*								*		
#9	*						*						*		*			*	*				*		*

	Essential II: Basic Organizational and Systems Leadership for Quality Care and Patient Safety Knowledge and skills in leadership, quality improvement, and patient safety are necessary to provide																								
	igh quality health care.																								
	Pre-licensure Courses RN-BSN Course															ses	1								
Essential	1	2	2	2	2	2	3	3	3	3	3	3	4	4	4	4	4	4	3	3	3	3	4	4	4
Outcomes	6	3	3	3	4	4	0	0	4	4	9	9	0	0	1	1	6	9	0	0	0	4	1	1	9
	5	2	5	3	0	2	3	4	5	6	2	3	8	9	2	7	0	9	3	4	7	0	2	7	9
#1										*	*			*	*						*		*		
#2													*		*								*		
#3	*														*	*							*	*	
#4	*														*	*							*	*	
#5		*		*		*					*				*	*							*	*	
#6		*				*	*		*	*	*				*	*			*				*	*	
#7	*	*	*	*	*	*		*	*	*		*	*		*	*				*		*	*	*	
#8	*	*	*	*		*		*	*	*	*	*		*	*	*				*	*		*	*	
#9															*								*		
#10	*					*	*						*		*				*				*		
#11	*					*									*	*							*	*	
#12							*								*				*				*		

Essential II	Essential III: Scholarship for Evidence-Based Practice																								
Professiona	Professional nursing practice is grounded in the translation of current evidence into one's practice.).									
	Pre-licensure Courses															RN-BSN Courses									
Essential	1	2	2	2	2	2	3	3	3	3	3	3	4	4	4	4	4	4	3	3	3	3	4	4	4
Outcomes	6	3	3	3	4	4	0	0	4	4	9	9	0	0	1	1	6	9	0	0	0	4	1	1	9
	5	2	5	3	0	2	3	4	5	6	2	3	8	9	2	7	0	9	3	4	7	0	2	7	9
#1	*		*			*	*	*	*	*	*	*	*	*	*	*			*	*	*		*	*	
#2	*		*				*		*	*	*		*	*		*			*		*			*	
#3							*		*			*			*				*				*		
#4							*		*				*		*	*			*		*		*		
#5							*		*				*		*	*			*				*	*	
#6			*			*			*	*	*	*	*	*	*	*	*				*		*	*	
#7							*			*		*	*			*			*					*	
#8	*	*					*			*			*		*			*	*				*		*
#9	*					*	*		*	*	*				*				*				*		*

Essential IV: Information Management and Application of Patient Care Technology

Knowledge and skills in information management and patient care technology are critical in the delivery of quality patient care.

•	Pre	e-lic	ens	ure	Cοι	irse	s												RN	I- B	SN (Cou	rses	5	
Essential	1	2	2	2	2	2	3	3	3	3	3	3	4	4	4	4	4	4	3	3	3	3	4	4	4
Outcomes	6	3	3	3	4	4	0	0	4	4	9	9	0	0	1	1	6	9	0	0	0	4	1	1	9
	5	2	5	3	0	2	3	4	5	6	2	3	8	9	2	7	0	9	3	4	7	0	2	7	9
#1	*					*			*	*	*		*	*	*	*					*		*	*	
#2									*		*		*	*	*	*							*	*	
#3						*			*	*	*		*	*	*	*							*	*	
#4									*		*				*	*					*		*	*	
#5	*	*			*	*			*	*	*	*	*		*										
#6	*		*		*				*	*	*	*		*	*							*	*		
#7	*								*		*	*	*	*	*	*							*	*	
#8	*	*	*			*			*		*	*	*	*	*	*							*	*	
#9	*					*			*		*	*	*	*	*	*							*	*	
#10	*														*								*		
#11															*								*		
#12																							*		*

Essential V: Health Care Policy, Finance, and Regulatory Environments

Healthcare policies, including financial and regulatory, directly and indirectly influence the nature and functioning of the healthcare system and thereby are important considerations in professional nursing practice.

	P	re-li	cen	sure	e Co	urs	es												RN	I — E	BSN	Οοι	irse	S	
Essential	1	2	2	2	2	2	3	3	3	3	3	3	4	4	4	4	4	4	3	3	3	3	4	4	4
Outcomes	6	3	3	3	4	4	0	0	4	4	9	9	0	0	1	1	6	9	0	0	0	4	1	1	9
	5	2	5	3	0	2	3	4	5	6	2	3	8	9	2	7	0	9	3	4	7	0	2	7	9
#1	*														*	*		*					*	*	*
#2	*														*	*		*					*	*	*
#3	*														*	*							*	*	
#4	*	*										*			*	*		*					*	*	*
#5	*	*	*			*					*	*	*		*	*		*					*	*	*
#6	*	*				*					*	*			*	*		*				*	*	*	*
#7	*	*				*									*			*					*		*
#8	*					*						*			*	*						*	*	*	
#9	*	*	*			*						*	*		*	*							*	*	
#10															*	*		*					*	*	*
#11	*															*		*						*	*
#12						*						*	*		*	*		*					*	*	*

Essential VI:	Inter	orof	ess	iona	al Co	omn	nuni	cati	on a	nd	Coll	abo	ratio	on fo	or In	npro	ovin	g Pa	itien	t He	alth	۱Ou	tcoi	nes	
Communication patient care.	on and	d co	llabo	orati	on a	mor	ng h	ealth	ncare	e pro	ofess	siona	als a	ire c	ritica	al to	deli	verir	ng hi	gh c	quali	ty ai	nd s	afe	
Essential	1	2	2	2	2	2	3	3	3	3	3	3	4	4	4	4	4	4	3	3	3	3	4	4	4
Outcomes	6	3	3	3	4	4	0	0	4	4	9	9	0	0	1	1	6	9	0	0	0	4	1	1	9
	5	2	5	3	0	2	3	4	5	6	2	3	8	9	2	7	0	9	3	4	7	0	2	7	9
#1			*			*						*			*	*							*	*	
#2	*		*		*	*	*		*	*	*	*	*	*	*	*			*			*	*	*	
#3	*		*									*			*								*		
#4	*		*			*			*	*	*	*	*		*	*							*	*	
#5	*								*	*	*	*			*	*							*	*	
#6	*		*			*			*	*		*			*	*							*		

Essential VII:	: Clini	cal	Pre	vent	tion	and	l Po	pula	tior	h He	alth														
Health promo													opul	latio	n lev	/el a	re n	eces	ssar	y to	impi	rove	pop	ulat	ion
health and are																				,	•		• •		
	P	re-li	cen	sure	e Co	urs	es				•				• .				RN	I-BS	SN C	our	ses		
Essential	1	2	2	2	2	2	3	3	3	3	3	3	4	4	4	4	4	4	3	3	3	3	4	4	4
Outcomes	6	3	3	3	4	4	0	0	4	4	9	9	0	0	1	1	6	9	0	0	0	4	1	1	9
	5	2	5	3	0	2	3	4	5	6	2	3	8	9	2	7	0	9	3	4	7	0	2	7	9
#1	*	*	*	1	*	*		*	*	*	*	*	*	*		*				*		*		*	
#2			*		*	*			*	*		*	*			*						*		*	
#3	*		*		*	*			*	*		*	*			*						*		*	
#4	*					*				*		*			*	*	*					*	*	*	
#5			*			*			*	*	*	*		*		*	*							*	
#6											*					*						*		*	*
#7											*	*		*	*	*						*	*	*	
#8			*												*	*						*		*	
#9	*											*				*								*	
#10			*	1								*	*			*							*	*	
#11			*	1		*						*				*								*	
#12	*			1								*	*		*	*		*						*	*
#13				1							*											*	*		*

Essential VIII: Professionalism and Professional Values

Professionalism and the inherent values of altruism, autonomy, human dignity, integrity, and social justice are fundamental to the discipline of nursing.

fundamental to																									
	Pre	e-lic	ens	ure	Cou	rse	S												RN	I-BS	SN C	our	ses		
Essential	1	2	2	2	2	2	3	3	3	3	3	3	4	4	4	4	4	4	3	3	3	3	4	4	4
Outcomes	6	3	3	3	4	4	0	0	4	4	9	9	0	0	1	1	6	9	0	0	0	4	1	1	9
	5	2	5	3	0	2	3	4	5	6	2	3	8	9	2	7	0	9	3	4	7	0	2	7	9
#1	*	*	*		*	*			*	*	*	*	*	*	*	*						*	*	*	
#2	*	*	*		*	*			*	*	*	*	*	*	*	*					*	*	*	*	
#3	*		*		*	*	*		*	*	*	*	*	*	*	*			*		*	*	*	*	
#4	*		*		*	*			*	*		*	*	*	*	*								*	
#5	*											*	*			*		*						*	*
#6	*					*					*	*			*	*		*			*		*	*	*
#7												*	*		*	*		*			*		*	*	*
#8	*					*			*	*	*	*	*		*	*							*	*	
#9						*			*	*	*	*			*	*							*	*	
#10	*	*	*			*			*	*	*	*				*					*			*	
#11	*		*										*		*								*		
#12	*	*	*	*		*			*	*	*	*	*		*	*							*	*	
#13	*		*			*	*		*			*	*		*		*	*	*				*		*
#14	*											*			*		*	*					*		*

Essential IX: Baccalaureate Generalist Nursing Practice

The baccalaureate-graduate nurse is prepared to practice with patients, including individuals, families, groups, communities, and populations across the lifespan and across the continuum of healthcare environments.

The baccalaureate graduate understands and respects the variations of care, the increased complexity, and the increased use of healthcare resources inherent in caring for patients.

						irse					<i>.</i>								RN	I-BS	SN C	our	ses		
Essential	1	2	2	2	2	2	3	3	3	3	3	3	4	4	4	4	4	4	3	3	3	3	4	4	4
Outcomes	6	3	3	3	4	4	0	0	4	4	9	9	0	0	1	1	6	9	0	0	0	4	1	1	9
	5	2	5	3	0	2	3	4	5	6	2	3	8	9	2	7	0	9	3	4	7	0	2	7	9
#1			*	*	*	*			*	*	*	*	*	*	*	*					*	*	*	*	
#2				*	*									*		*						*		*	
#3		*	*	*		*			*	*	*	*	*	*		*					*			*	
#4	*		*		*	*			*	*	*	*	*		*	*						*	*	*	
#5	*	*				*			*	*	*		*	*		*					*			*	
#6	*					*			*	*		*	*			*								*	
#7		*				*			*	*	*	*	*	*		*					*			*	
#8	*			*		*			*	*	*	*	*	*	*	*					*		*	*	
#9		*				*			*	*	*	*				*					*				
#10						*			*	*	*			*		*					*			*	
#11		*		*		*			*	*	*	*				*							*	*	
#12		*		*		*			*	*	*	*	*	*	*								*		
#13	*	*		*		*			*	*	*	*	*	*	*										
#14		*			*	*				*					*								*		
#15															*										
#16			*	*	*	*							*	*		*						*			
#17			*									*	*												
#18	*		*		*				*		*	*			*	*						*	*	*	
#19		l	*	*	*	*	l		*	*		*	*			*	l	l						*	
#20		l					l		l	l		*	l			*	l	l						*	
#21	*	l	*			*	l		*	*	*	*	*		*	l	l	l				*			
#22	*					*					*		*		*								*		

Appendix O

Essentials of Masters Education in Nursing Practice in

Clinical Nurse Leader Course Objectives

Essential I: Background for Practice from Sciences and Humanities Integrates scientific findings from nursing, biopsychosocial fields, genetics, public health, quality improvement, and organizational sciences for the continual improvement of nursing care across diverse settings

Essentials	600	611	612	613	620	630	635	640	645	651	660	675
1.		*	*	*	*	*		*				
2.			*	*		*		*				
3.						*		*				
4.	*	*	*				*		*			
5.										*		*
6.							*	*		*		*
7.										*		*
8.	*											

Essential I Recognizes safe patient effective wo	s that or t care; le	ganizati eadersh	ional an ip skills	d systen are nee	ns leade ded tha	ership ar t empha	size eth					
Essentials	600	611	612	613	620	630	635	640	645	651	660	675
1.									*		*	*
2.							*					*
3.					*							
4.											*	*
5.					*							
6.							*		*			*
7.							*		*			*

Essential III: Quality Im	provement and Safety
---------------------------	----------------------

Articulate in the methods, tools, performance measures, and standards related to quality, as well as prepared to apply quality principles within an organization.

Essentials	600	611	612	613	620	630	635	640	645	651	660	675
1.							*			*		
2.												*
3.											*	
4.							*					
5.									*		*	
6.					*	*	*	*	*			
7.							*		*			
8.												*

Essential I Applies research agent, and	earch o	utcome	s within						problem	s, works	as a ch	ange
Essentials	600	611	612	613	620	630	635	640	645	651	660	675
1.	*	*	*	*		*		*				
2.										*		
3.										*		*
4.							*		*			*
5.		*	*		1	*		*				*
6.										*		

Essential V: Informatics and Healthcare Technologies

Uses patient-care technologies to deliver and enhance care and uses communication technologies to integrate and coordinate care.

Essentials	600	611	612	613	620	630	635	640	645	651	660	675
1.		*	*		*							
2.						*		*				
3.					*							
4.									*			
5.			*			*		*			*	
6.											*	

Essential VI: Health Policy and Advocacy

Ability to intervene at the system level through the policy development process and to employ advocacy strategies to influence health and health care.

Essentials	600	611	612	613	620	630	635	640	645	651	660	675
1.					*							
2.					*							*
3.					*						*	
4.					*					*		
5.					*	*						

Essential VII: Interprofessional Collaboration for Improving Patient and Population Health Outcomes

As a member and leader of interprofessional teams, communicates, collaborates, and consults with other health professionals to manage and coordinate care.

Essentials	600	611	612	613	620	630	635	640	645	651	660	675
1.	*										*	
2.	*											
3.								*				*
4.									*			
5.									*		*	
6.									*		*	

Essential A Applies and planning, de care and se	l integra elivery,	ates broa manage	ad, orga ement, a	nization nd eval	al, clien uation o	t-center f eviden	ed, and ce-base	cultural d clinica	ly appro al preve	priate c		
Essentials	600	611	612	613	620	630	635	640	645	651	660	675
1.						*		*				
2.				*		*		*				
3.						*		*			*	*
4.					*	*						
5.						*						

Essential IX: Master's-Level Nursing Practice

Recognizes that nursing practice, at the master's level, is broadly defined as any form of nursing intervention that influences healthcare outcomes for individuals, populations, or systems. Master's-level nursing graduates must have an advanced level of understanding of nursing and relevant sciences as well as the ability to integrate this knowledge into practice. Nursing practice interventions include both direct and indirect care components.

	r	n		n								
Essentials	600	611	612	613	620	630	635	640	645	651	660	675
1.					*							
2.		*	*	*		*		*		*		
3.											*	
4.					*		*	*		*		
5.									*		*	
6.						*		*				
7.						*		*				
8.	*				*						*	
9.						*		*				
10.					*							
11.							*		*			*
12.						*						
13.		*					*					
14.											*	
15.	*										*	*

Appendix P

BSN Prelicensure Curriculum Worksheet

NAME

_____ ID # _____

UNIVERSITY/COLLEGES ATTENDED: _____CATALOG YEAR _____

MAJOR PROGRAM REQUIREMENTS

Courses	Hrs	Term	Grade
*CHEM 105/111	4		
*CHEM 106/112	4		
*ENGL 101	3		
*ENGL 102	3		
*MATH 121/123/131	3		
*BIOL 202 – Anatomy	4		
*BIOL 203 – Physiology	4		
*Admission Poquiromonts			

*Admission Requirements

SOPHOMORE - 1st Semester

SOPHOMORE – 2nd Semester Hrs Term Grade Courses Hrs Term Grade Courses **NURS 304** BIOL 204 Microbiology OR 4 3 NURS 304Pathophysiology Pathophysiology OR 4 3 BIOL 204 Microbiology 2 NURS 165 History & Trends NURS 233 Pharmacology 3 NURS 232 Pharmacology NURS 240 Physical Assess 1 3 Basic NURS 235 Wellness Nursing 4 NURS 242 Basic Nsg. 5 Strat. 3 MATH 211 Gen Ed (Wellness)* 3 16/17 14/15

JUNIOR – 1st Semester

JUNIOR SPRING – 2nd Semester

Courses	Hrs	Term	Grade	Courses	Hrs	Term	Grade
NURS 303 Research	3			NURS 346 Med Surg II	5		
NURS 345 Med Surg I	5			NURS 392 Childbearing	4		
NURS 393 Mental Health	4			Gen Ed*	3		
Gen Ed*	3			Gen Ed*	3		
	15				15		

SENIOR – 1st Semester

SENIOR – 2nd Semester

Courses	Hrs	Term	Grade	Courses	Hrs	Term	Grade			
NURS 408 Critical Care	4			NURS 412 Leadership	4					
NURS 409 Pediatric Nursing	4			NURS 417 Community	5					
				Nursing						
NURS 499 Prof. Devel in	2			NURS 460 Clinical Problem	2					
Nsg.				Solving						
Gen Ed*	3			Gen Ed*	3					
Gen Ed*	3									
	16				14					

Appendix Q

RN-BSN Curriculum Worksheet

NAME_____ ID # _____CATALOG YEAR _____

MAJOR PROGRAM REQUIREMENTS

Hrs	Term	Grade
4		
4		
3		
3		
4		
3		
21		
	4 4 3 3 4 3	4 4 3 3 4 3

*Admission Requirements

Junior Courses

Junior Courses				Advance Placement S	Standing		
Courses	Hrs	Term	Grade	Courses	Hrs	Term	Grade
NURN 307: Profession	4			NURS 232 Pharmacology	2		
Transition for RNs				Basic			
NURN 303 Research	3			NURS 235 Wellness Nsg.	4		
NURN 304 Pathophysiology	3			NURS 233 Pharmacology	3		
NURN 340 Adv. Physical	3			NURS 242 Basic Nsg. Strat.	5		
Assessment for RNs *							
				NURS 345 Med Surg I	5		
*Clinical component				NURS 393 Mental Health	4		
				NURS 346 Med Surg II	5		
				NURS 392 Childbearing	4		
				NURS 408 Critical Care	4		
				NURS 409 Pediatric Nursing	4		
				Total	39		

General Education Courses and University Requirements (May be taken in any order)

Courses	Hrs	Term	Grade	Courses	Hrs	Term	Grade
Logical/Analytical	3			Wellness- NURN 203 or	3		
				PEES 176/175			
Behavior Science	3			Global/Non-western	3		
				NURN 310			
Chemistry 105/111	4			Political Economy	3		
Humanities	3			History	3		
Humanities Literature	3			Foreign Language	3		
Fine Arts	3			Foreign Language	3		

Senior Courses				Electives			
Courses	Hrs	Term	Grade	Courses	Hrs	Term	Grade
NURS 417 Community	5			NURN 291-Complementary &	1		
Health Nursing*				Alternative Therapies			
NURS 412 Leadership *	4			NURN 373 Spirituality in Nsg.	3		
NURS 499 Prof. Dev. In	2			NURN 480- Honors Synthesis	3		
Nsg.							

Appendix R

Congruence of Nursing Mission and Philosophy, Conceptual Framework, and Organizing Variables

Mission and Philosophy	Conceptual Framework	Organizing Variables
Lander University School of Nursing is a baccalaureate nursing program which prepares men and women who	The baccalaureate nursing curriculum at Lander University is based on the Neuman Systems Model.	Neuman Systems Model
demonstrate evidence of potential academic success to provide high	The Neuman Systems Model is wellness	Professional
quality, wholistic nursing care in a variety of settings to diverse clients	oriented, wholistic, open and dynamic.	Caregiver
across the lifespan. ('Wholistic' is the spelling used by Neuman.)	The Neuman Systems Model provides the framework for organizing the	Clinical Settings
The purpose of the School of Nursing is to prepare graduates for entry level	nursing curriculum into courses and prepares graduates for wholistic, client- centered nursing practice in diverse	Consumer of Research
professional nursing roles of caregiver, leader, and consumer of research, and for advanced study in nursing.	settings.	Leader
The faculty of the Lander University School of Nursing believes that the theory-based practice of nursing is	The Neuman Systems Model addresses the four concepts which are basic to the nursing profession and the philosophical	Neuman Systems Model
founded on an evolving body of nursing knowledge supported by a	foundation of the Lander nursing curriculum: Person, Environment, Health,	Communication
strong liberal arts emphasis in behavioral, physical and analytical	and Nursing. The model focuses on two components: the nature of the client's	Critical Thinking
sciences as well as the humanities.	response to stressors in the environment	Therapeutic
We further believe that personal education is a life-long process that is	and the nurse's intervention to assist the client to best respond to those stressors.	Interventions
built upon a broad knowledge base and experience.		Professional
		Caregiver
		Level of Wellness
The Lander University nursing	The Neuman Systems Model addresses	Neuman
program adheres to standards of practice established by the American	the four concepts which are basic to the nursing profession and the philosophical	Systems Model
Nurses Association as they apply to individuals, families, groups, and the	foundation of the Lander nursing curriculum: Person, Environment, Health,	Nursing Process
community-at-large. The	and Nursing.	Level of
metaparadigm of Person,		Wellness/
Environment, Health and Nursing is integrated throughout the curriculum	PERSON The client or client system may refer to an	Intervention
using the Neuman Systems Model as the conceptual framework for clinical practice.	individual person, family, group, or community. As such, it is a dynamic composite of inter-relationships among five variables:	Client Focus
	physiologicalpsychological	
	 sociocultural 	
	 developmental spiritual 	

Mission and Philosophy	Conceptual Framework	Organizing Variables
	 ENVIRONMENT The client/client system is constantly exposed to environmental stressors that may alter the system's stability. There are three types of stressors: intrapersonal stressors—forces occurring within the client interpersonal stressors—forces occurring between two or more clients extrapersonal stressors—forces occurring outside the client. If stressors are perceived by the client as strengthening factors, they are being viewed as positive and may result in a beneficial outcome. If, however, stressors are perceived as detrimental to the wellbeing of the client system they may disrupt the system's equilibrium and result in negative outcomes. HEALTH The client possesses various lines of resistance and defense designed to promote health by protecting against stressors and by maintaining stability of the system. The flexible and normal lines of defense and the lines of resistance are protective mechanisms which surround the client system and respond to nursing prevention strategies in protecting the stability of the client. When the protective mechanisms are all in place, the client	
	system is well, stable, and in equilibrium. When the lines of defense and the lines of resistance are penetrated by stressors, the client system's survival is at risk. NURSING Three types of nursing interventions are identified in the Neuman Systems Model.	
	Primary prevention is utilized as wellness retention strategy when a threat to health exists but no stressor invasion has occurred. The goal of primary prevention is to retain the stability of the client system.	
	Secondary prevention is used for wellness attainment and provides appropriate treatment after symptoms have occurred as the result of stressor	

Mission and Philosophy	Conceptual Framework	Organizing Variables
	invasion. In secondary prevention, the system strives to attain stability.	
	Tertiary prevention focuses on returning the client system to wellness following treatment. The goal of tertiary prevention is to maintain an optimal level of wellness by supporting existing strengths and the conservation of client energy.	
The nursing faculty value, teach, and role model the attributes of critical	Learning occurs in the cognitive (understanding), affective (attitude), and	Critical Thinking
thinking, effective written and oral communication, clinical and technological skills, cultural sensitivity,	psychomotor (motor skill) domains. The concepts of Person , Environment ,	Communication Leader
and community service. The faculty believes that students are responsible for their own learning. However, they share a strong commitment to teaching, personalized faculty advisement, and mentoring. Inherent in the faculty role in a liberal arts institution are responsibilities for professional development, as well as service to the university, profession and community. In an effort to respond to issues generated by a changing healthcare environment, the School of Nursing partners with area nursing professionals and healthcare constituents to address the critical needs of the region and state for baccalaureate nurses. These activities support student success in the educational program and facilitate the transition of students into the nursing profession.	Health, and Nursing are operationalized in the baccalaureate curriculum by the use of educational methodologies selected to guide learning in each domain.	Professional

Reference: Nursing Policy and Procedure Manual, Section I.

Appendix S

MSN Curriculum Worksheet

NAME	L# C	CATALOG YR
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MAJOR PROGRAM REQUIREMENTS

COURSES	HRS	TERM	YEAR	GRADE
NUR 600	3	Spring		
Theory and Conceptual Foundation				
NUR 611	3	Spring		
Advanced Clinical Assessment *				
NUR 612	3	Spring		
Advanced Pharmacology				
NUR 613	3	Summer		
Advanced Pathophysiology				
NUR 620	3	Summer		
Health Care Structure and Finance				
NUR 630	3	Fall		
Health Promotion and Disease Prevention				
NUR 635	3	Fall		
CNL Practicum I *				
NUR 640	3	Spring		
Management of Clinical Outcomes				
NUR 645	3	Spring		
CNL Practicum II *				
NUR 651	3	Summer		
Research for Evidence-based Practice				
NUR 660	3	Summer		
Leadership in Health Care				
NUR 675	6	Fall		
CNL Immersion Practicum III *				
TOTAL	39			

* clinical component

Advisor _____

Coordinator of Graduate Studies _____

Appendix T

Mapping of Courses, Major Concepts, and Curriculum Framework Elements for MSN

Course Number	Course Name	Concepts/Topics	Curriculum Framework Elements
NUR 600	Theory and Conceptual Foundation	 Theoretical foundations Complexity theory Change theories CNL role introduction Concept analysis of CNL Role Advocacy Ethics Professional values 	Nursing Leadership
NUR 611	Advanced Clinical Assessment	 Client assessment/health problems Utilization of information systems and standardized languages Application of the nursing process using distance and varied technology Effective communication with diverse groups using variety of strategies Genetic assessment/counseling Assessment of individuals, family, community and groups 	Clinical Outcomes Management
NUR 612	Advance Pharmacology	 Pharmacological and non- pharmacological therapies Awareness of complementary modalities 	Clinical Outcomes Management
NUR 613	Advanced Pathophysiology	Emphasis on chronicity & sequelae of illness	Clinical Outcomes Management
NUR 620	Health Care Structure and Finance	 Healthcare systems/organizations Organizational theory Microsystems Healthcare policy Healthcare finance/economics and Medicaid reimbursement Resource allocation Steward of material resources Healthcare technologies Healthcare finance and socioeconomic principles Informatics 	Care Environment Management
NUR 630	Health Promotion and Disease Prevention	 Health promotion Disease reduction Prevention management Risk assessment/reduction Health literacy 	Clinical Outcomes Management

Course Number	Course Name	Concepts/Topics	Curriculum Framework Elements
		Health education and counselingSocial justiceHealth disparities	
NUR 635	CNL Practicum I	 Quality management Risk reduction/anticipation Tools for risk analysis Patient safety 	Care Environment Management
NUR 640	Management of Clinical Outcomes	 Illness/Disease Management Care management Client outcomes Epidemiology Biostatistics Measurement of client outcomes 	Clinical Outcomes Management
NUR 645	CNL Practicum	 Care environment management Team coordination Delegation Supervision Interdisciplinary care Group process Handling difficult people Conflict resolution 	Care Environment Management
NUR 651	Research for Evidence-based Practice	 Clinical decision making Critical thinking Problem identification Outcome measurement 	Clinical Outcomes Management
NUR 660	Leadership in Health Care	 Horizontal leadership Effective use of self Advocacy Ethical decision making Lateral integration of care Global environment 	Nursing Leadership
NUR 675	CNL Immersion Practicum III	Elements from entire curriculum	Nursing Leadership Clinical Outcomes Management Care Environment Management

Appendix U

ATI Remediation Plan

ATI Proctored Assessments

These tests yield individual and group percentages normed against a national population for comparison. Group percentile scores are used by faculty to evaluate the effectiveness of instruction and to make programmatic decisions regarding course offerings in the curriculum. Benchmarks for student progression within the program were set by program policy for implementation fall 2008. The Curriculum Committee coordinates reports by pertinent nursing faculty for review in NFO.

ATI Preparation

Students will take mandatory practice assessment(s) prior to taking proctored ATI assessments for formative outcomes 1-8. Completion of practice assessment(s) will be verified by instructor.

ATI Progression During Program

Progression policy is in effect for the following ATI proctored assessments: Fundamentals for Nursing Practice (NURS 242), Maternal Newborn Nursing (NURS 392), Mental Health Nursing (NURS 393), Pharmacology (NURS 408), and Pediatric Nursing (NURS 409). Completing the ATI exam with Level II Competency = progression to the next course (Revised May 2015).

Phase One Remediation

- 1. If a Level 2 is not reached on a course's ATI, the student will print out the ATI report.
 - The student is required to create an ATI Focused Review based on the ATI test that needs to be remediated.
- Note cards will be written based on <u>each</u> topic identified as a weak content area on the ATI report. NO typed or printed note cards will be accepted.
- 3. The note cards will be turned in all together to the instructor prior to taking the second scheduled ATI.

Phase Two Remediation

- 1. If a Level 2 is not reached on the second ATI, the student will print out the ATI report.
 - Another ATI Focused Review is required to be created by the student. This focused review will be based on the second ATI test.
- 2. Note cards will be written based on *each* topic identified as a weak content area on the ATI report. NO typed or printed note cards will be accepted.
- 3. Note cards must be turned in all together within 24 hours of completing the final exam for the course to which the ATI is administered.

Students are encouraged to visit the Academic Success Center for support on test taking issues. Any student who does not complete any phase of this remediation will receive an incomplete in the course. ATI test administered in the second semester of the senior year are exempt from this policy. Approved by NFO 12/4/2009, effective 1/1/10; Reaffirmed 2010; reaffirmed 5/2011, 5/2012, & 5/2013; revised May 2015

Appendix V

BSN NURSING ASSESSMENT PLAN

I. PROGRAM OUTCOMES

Students graduating from Lander University with a baccalaureate degree in nursing should be prepared to:

- 1. Apply the nursing process within the Neuman Systems Model to promote an optimal level of wellness through the use of primary, secondary, and tertiary prevention/intervention strategies for individuals, families, groups, and communities across the lifespan;
- 2. Synthesize nursing theory with knowledge from selected other disciplines as a basis for care giving, communication, therapeutic interventions, and critical thinking;
- 3. Use appropriate problem-solving approaches in varied settings to promote wellness for diverse client systems;
- 4. Demonstrate leadership strategies to advance nursing practice and the nursing profession;
- 5. Utilize nursing research findings to improve the quality of evidence-based nursing practice;
- 6. Incorporate established standards of professional nursing as the foundation for one's own nursing practice; and
- 7. Prelicensure option graduates are eligible to take the licensing examination to qualify as registered nurses.

II. MEANS OF ASSESSMENT

Practice

<u>Assessment</u>	Program Outcome <u>Addressed</u>	Frequency of <u>Measurement</u>
Formative Outcomes in Prelicensure Option		
 ATI Fundamentals for Nursing Practice Exam ATI Medical-Surgical Nursing Exam ATI Maternal Newborn Nursing Exam ATI Mental Health Nursing ATI Pharmacology Exam ATI Nursing Care of Children ATI Nursing Leadership ATI Community Health Clinical Laboratory Evaluation: 	$1,2,3,6 \\ 1,2,3,6 \\ 1,2,3,6 \\ 1,2,3,6 \\ 1,2,3,6 \\ 1,2,3,6 \\ 1,2,3,6 \\ 1,2,3,6 \\ 1,2,3,6 \\ 1,2,3,6 \\ 1,2,3,6 \\ 1-7 $	At completion of NURS 242 At beginning of NURS 460 At completion of NURS 392 At completion of NURS 393 At completion of NURS 408 At completion of NURS 409 At completion of NURS 412 At completion of NURS 417 Each semester in clinical courses by course faculty
Formative Outcomes in the RN-BSN Option		
 Nursing Care Plan Care Studies Family Assessment Analysis of Journal Articles Analysis of Neuman Systems Model Clinical Evaluation of Student Critical Thinking Exercises Research Utilization Project Annotated Bibliography Assignment Discussion Forums on Standards of 	1,3 1 1,3 2 4,6 4 5 5 6	During NURN 307 During NURN 340 During NURN 417 During NURN 499 During NURN 307 During NURN 340/412 During NURN 412 During NURN 303 During NURN 307 During NURN 499

Summative Outcomes:

1)	National NCLEX Predictor Examinations	1-7	During NURS 460
2)	NCLEX-RN Program Success Rate	1-7	Following graduation
3) (Critical Thinking Assessment	1-3	Rubric evaluation in NURS 242/346/417 & NURN 307/340/417
4) (Graduation/Attrition Rates	7	Each semester by Recruitment and Retention Committee
5) (Graduate Employment Record	7	Bi-Annually by Assessment and Evaluation Committee
<u>Stu</u>	ident/Alumni Feedback:		
1)	Alumni Survey	1-7	First & fifth years after graduation
2)	Program Exit Survey by Graduating Seniors	1-7	Graduating seniors pre-licensure NURS 460 and NURN 499
Co	mmunity of Interest Feedback:		
1) 2) 3)	Nursing Advisory Board Employer Survey Clinical Site Survey	1-7 1-6 1-6	Bi-Annually Annually in December Each semester in clinical courses

III. EXPECTED STUDENT OUTCOMES

FORMATIVE OUTCOMES

ATI Proctored Assessments

These tests yield individual and group percentages normed against a national population for comparison. Group percentile scores are used by faculty to evaluate the effectiveness of instruction and to make programmatic decisions regarding course offerings in the curriculum. Benchmarks for student progression within the program were set by program policy for implementation fall 2008. The Curriculum Committee coordinates reports by pertinent nursing faculty for review in NFO.

ATI Preparation

Students will take mandatory practice assessment(s) prior to taking proctored ATI assessments for formative outcomes 1-8. Completion of practice assessment(s) will be verified by instructor.

ATI Progression During Program

Progression policy is in effect for the following ATI proctored assessments: Fundamentals for Nursing Practice (NURS 242), Maternal Newborn Nursing (NURS 392), Mental Health Nursing (NURS 393), Pharmacology (NURS 408), and Pediatric Nursing (NURS 409). Completing the ATI exam with Level II Competency = progression to the next course. Revised May 2015.

Phase One Remediation

- 1. If a Level 2 is not reached on a course's ATI, the student will print out the ATI report.
 - The student is required to create an ATI Focused Review based on the ATI test that needs to be remediated.
- Note cards will be written based on <u>each</u> topic highlighted by ATI report as a weak area in content. NO typed or printed note cards will be accepted.
- 3. The note cards will be turned in all together to the instructor prior to taking the second scheduled ATI.

Phase Two Remediation

- 1. If a Level 2 is not reached on the second ATI, the student will print out the ATI report.
 - Another ATI Focused Review is required to be created by the student. This focused review will be based on the second ATI test.
- 2. Note cards will be written based on <u>each</u> topic highlighted by ATI report as a weak area in content. NO typed or printed note cards will be accepted.
- 3. Note cards must be turned in all together within 24 hours of completing the final exam for the course to which the ATI is administered.

Students are encouraged to visit the Academic Success Center for support on test taking issues. Any student who does not complete any phase of this remediation will receive an incomplete in the course. ATI tests administered in the second semester of the senior year are exempt from this policy. Approved by NFO 2008, 12/4/2009, Revised 5/13/2015

Clinical Laboratory Evaluation

Nursing faculty have developed a standardized clinical performance assessment tool. Students' clinical performance is evaluated by faculty in each clinical nursing course. In courses where preceptors are utilized, feedback is given to the course coordinator. The results of these performance observations are used to help faculty in making decisions regarding clinical objectives, clinical sites selected, and specific clinical experiences.

Course specific Assessments

Program outcomes are assessed for RN-BSN students using specific assignments in required nursing courses.

SUMMATIVE OUTCOMES

National NCLEX Predictor Examinations

These tests serve as practice/predictor tests to indicate potential graduate success on the professional nurse licensing examination. Prelicensure students must pass at least one of these at a level predictive of NCLEX success or register for a review course prior to graduation. Aggregate data from each nursing class is compiled by Assessment and Evaluation Committee to make programmatic decisions regarding course offerings, evaluate content mastery by the current senior class, and to make related programmatic decisions regarding subsequent course offerings.

The benchmark used by the Lander Nursing program is a .95 probability of passing the NCLEX-RN examination on three predictor exams.

NCLEX-RN Program Success Rate

The State Board of Nursing for South Carolina reports the percentage of prelicensure graduates who have been successful on their initial attempt to take the professional nurse licensing examination (the NCLEX-RN). Graduates test by computer at individually scheduled times throughout the year; data are compiled quarterly by the Board. The School of Nursing uses Board reported data to analyze program success rates for each graduating class. The program's goal is to maintain the success rate within 5% of the national mean. Program success results are compiled by Assessment and Evaluation Committee to analyze the effectiveness of programmatic decisions (e.g., admission and progression policies) in facilitating graduates' successful entry into professional nursing practice.

Critical Thinking Assessment

This assesses students' achievement of the critical thinking standard at each level. A rubric evaluation is administered during NURS 242, Nurs 346, and Nurs 417 and NURN 307, NURN 340 and NURN 417. These results serve as a means of assessing achievement in critical thinking. Results are analyzed each semester by the Curriculum Committee and are used to make programmatic decisions regarding content emphasis in the BSN program.

AGGREGATE STUDENT OUTCOMES

School of Nursing Goal #1

Educate professional nurses for current and future practice to meet healthcare needs, and to advance professionally.

- Outcome 1: Eighty percent (80%) of each cohort entering the nursing major will graduate with a BSN within 5 academic years. The Recruitment & Retention Committee compiles program data for review in NFO.
- Outcome 2: The School of Nursing will maintain a program success rate on the NCLEX-RN licensing exam within 5% of the national mean. The Assessment and Evaluation Committee compiles this data for review in NFO.
- Outcome 3: One hundred percent (100%) of Lander prelicensure nursing graduates who seek employment in nursing will be employed as registered nurses within six months of graduation. The Assessment and Evaluation Committee compiles this data for review in NFO.
- Outcome 4: Students will demonstrate achievement in critical thinking ability at each level of the nursing major. The Curriculum Committee compiles the data for review in NFO.

STUDENT/ALUMNI FEEDBACK

Program Exit Survey by Graduating Seniors

The School of Nursing Exit Survey is administered electronically each semester to graduating seniors. This survey obtains data regarding program outcomes, strengths, weaknesses, and recommendations for the nursing program. Responses are compiled by the Nursing Recruitment & Retention Committee and reported to the nursing faculty for use in making programmatic decisions.

Alumni Survey

The School of Nursing Graduate Survey is administered electronically annually in the spring to classes that graduated one and five years previously. This survey obtains data regarding state of residence, current employment, preparation for professional practice, and recommendations for the nursing program. Responses are compiled by the Nursing Assessment and Evaluation Committee and reported to the nursing faculty for use in making programmatic decisions.

COMMUNITY OF INTEREST FEEDBACK

Nursing Advisory Board

The Nursing Board of Advisors consists of representative agency heads from health care agencies throughout Greenwood and surrounding counties. The Board meets once each semester to discuss issues of shared concern regarding the educational preparation of professional nurses. Nursing Assessment and Evaluation Committee compiles feedback from representatives on the Board through meeting minutes and a survey administered online or on paper during meetings. Information is used to make programmatic decisions.

Employer Survey

The survey tool is administered annually in December to employers throughout the region to obtain feedback on the previous (Summer, Spring, and Fall) graduating classes of prelicensure Lander Nursing students. The survey is administered electronically. Responses are compiled by the Nursing Assessment and Evaluation Committee and reported to the nursing faculty for use in making programmatic decisions.

Clinical Site Survey

The survey tool is administered by clinical course coordinators in the prelicensure option during final exam week each semester. The survey provides clinical sites with an opportunity to evaluate students and instructors in their facilities. Surveys are distributed by the Nursing Assessment and Evaluation Committee to course coordinators. Responses are compiled by the Nursing Assessment and Evaluation Committee and reported to the nursing faculty for use in making programmatic decisions. Effective Spring 2012

IV. FACULTY AGGREGATE OUTCOMES

Data to support faculty aggregate outcomes are collected by the Dean of the College of Science and Mathematics during annual faculty evaluations. Faculty are evaluated each semester by students using the Individual Development and Educational Assessment (IDEA) form and the Evaluation of Academic Advisor Form. Faculty are also peer evaluated by tenured faculty per Lander University policy. The Academic Concerns committee is responsible for reporting on these outcomes annually.

School of Nursing Goal #2

Maintain a nursing faculty complement that achieves the School of Nursing mission through excellence in teaching, advising, and role modeling professional development. See School of Nursing Faculty Handbook Section IV.

- Outcome 1: Ninety percent of full-time faculty who are in at least the second year at Lander will achieve an evaluation rating of "Satisfactory" on overall teaching for the academic year. See SON Faculty Handbook Section IV Evaluation of Teaching.
- Outcome 2: Ninety percent of full-time faculty who are in at least the second year at Lander will achieve an evaluation rating of "Satisfactory" on effectiveness as an academic advisor. See SON Faculty Handbook Section IV Evaluation of Advising.
- Outcome 3: Ninety percent of full-time faculty will role model professional development each academic year through attendance at professional conferences and seminars, completing graduate level courses, earning CEUs or demonstrating intellectual curiosity.

School of Nursing Goal #3

Maintain a nursing faculty complement that achieves the Lander University mission through scholarship, practice, and service to the institution, the community, and the profession. See School of Nursing Faculty Handbook Section IV.

- Outcome 1: Ninety percent of full-time faculty will meet the University requirement that "over a six year period... each faculty member (will) have at least one activity in each level and at least 10 total activities."
- Outcome 2: Ninety percent of full-time faculty who are in at least the second year at Lander will demonstrate practice in accord with the School of Nursing definition.
- Outcome 3: Ninety percent of full-time faculty who are in at least the second year at Lander will demonstrate service in accord with the School of Nursing definition.

V. NEXT INSTITUTIONAL EFFECTIVENESS (IE) REPORT

This major reported in 2013-2014. The next report will be 2016-2017.

Appendix W

MSN Assessment Plan

The assessment plan for the MSN proposed program contains formative and summative assessment and program goals. The detail of the assessment plan is outlined below. Licensed registered nurses graduating from Lander University with a Master of Science degree in nursing should be prepared to:

Program Outcomes

- 1. Effect change through advocacy for the profession, interdisciplinary health care team and the client.
- 2. Communicate effectively to achieve quality client outcomes and lateral integration of care for a cohort of clients.
- 3. Actively pursue lifelong learning as the CNL role, needs of clients, and the health care system evolve.
- 4. Delegate and utilize the nursing team resources and provide leadership when partnering with the inter-professional health care team.
- 5. Identify clinical and fiscally responsible outcomes that improve safe, quality, client-centered care.
- 6. Use information systems and technology at the point of care to improve health care outcomes.
- 7. Participate in systems review by evaluating client safety risks to improve quality of client care.
- 8. Assume accountability for health care outcomes, recognizing systems influences on a specific group of clients.
- 9. Utilize information to design, implement and evaluate client plans of care.
- 10. Synthesize evidence to evaluate and achieve optimal client and care environment outcomes.
- 11. Use appropriate teaching/learning principles, strategies, and technology to facilitate the learning of clients, groups, and the other health care professionals.
- 12. Take the AACN Clinical Nurse Leader (CNL[®]) certification examination to obtain the CNL[®] designation.

Means of Assessment

Assessment Formative Outcomes: 1) CNL Competencies:	Program Outcomes Addressed	Frequency of Measurement
a. Course-specific selected behaviors	1,10,11 6,7,8,11 1,6,8 8 1,4,5,6 1,2, 6,7,8,9,11 1,2,5,7,9	At completion of NUR 600 At completion of NUR 611 At completion of NUR 612 At completion of NUR 613 At completion of NUR 620 At completion of NUR 630 At completion of NUR 635
	1,2,4,5,6,7, 8,9,10	At completion of NUR 640
	1,4,8,9,11 3,8,10 1,2,3,4,5,8 1,2,4,5,7, 8,9,10,11	At completion of NUR 645 At completion of NUR 651 At completion of NUR 660 At completion of NUR 675

Assessment	Program Outcomes Addressed	Frequency of Measurement			
2) Practicum Evaluation:					
a. Course-specific selected behaviors	5,6,7 1,2,4,9,11 1-12	During NUR635 NUR 645 NUR 675			
b. Clinical Evaluation Tool	5,6,7 1,2,4,9,11 1-12	During NUR 635 NUR 645 NUR 675			
Summative Outcomes:	Summative Outcomes:				
 CNL Self- Assessment Examination CNL[®] Certification Examination Success Rate 	1-12 1-12	During NUR 675 Following graduation			
Student/Alumni Feedback: 1) Alumni Survey	1-11	First & fifth years after			
 Program Exit Survey by Graduating MSN Students 	1-12	graduation Graduating MSN Students			

Expected Student Outcomes will be evaluated through formative and summative evaluations as outlined above. The results of these evaluations will be used to make program improvements.

The CNL Self-Assessment Examination (SAE), provided by the Commission on Nurse Certification (CNC), is an online assessment designed to familiarize students with the CNL Certification Examination. It parallels the content, difficulty, and format of the CNL Certification Examination. It will be used as a diagnostic tool to assess strengths and weaknesses of the program.

The School of Nursing will use reported data from the CNL directory to assess successful completion of the CNL certification exam. The program's goal will be to have seventy five percent (75%) of MSN graduates seeking certification receive the CNL designation. Since the pilot exam was administered in 2006, the average pass rate on the CNL certification exam has been 71%; therefore, this goal reflects an increase of approximately 5% over the national average. Program success results will be used by faculty to analyze the effectiveness of programmatic decisions (e.g., admission and progression policies) in facilitating graduates' successful entry into the CNL role.

Aggregate Student Outcomes

School of Nursing Goal: Educate professional registered nurses for current and future clinical nurse leader practice to meet healthcare needs and to advance professionally.

- Outcome 1: Eighty percent (80%) of each cohort entering the MSN nursing major will graduate with an MSN within five academic years. The Academic Concerns Committee will compile this data for the MSN program for review in the nursing faculty organization (NFO).
- Outcome 2: Seventy five percent (75%) of MSN graduates seeking certification will successfully complete the CNL certification. The Assessment and Evaluation Committee will compile this data for review in NFO.

• Outcome 3: Eighty percent (80%) of Lander MSN graduates who seek employment in expanded nursing roles will be employed within one year of graduation. The Assessment and Evaluation Committee will compile this data for review in NFO.

Student/Alumni Feedback

Program Exit Survey by Graduating MSN Students: The School of Nursing MSN Exit Survey will be administered electronically each year to graduating MSN students. This survey obtains data regarding program outcomes, strengths, weaknesses, and recommendations for the program. Responses will be compiled by the Nursing Recruitment and Retention Committee and reported to the nursing faculty for use in making programmatic decisions.

MSN Alumni Survey: The School of Nursing MSN Graduate Survey will be administered electronically annually in the spring to classes that graduated one and five years previously. This survey obtains data regarding state of residence, current employment, preparation for professional CNL practice, and recommendations for the program. Responses will be compiled by the Nursing Assessment and Evaluation Committee and reported to the nursing faculty for use in making programmatic decisions.

Community of Interest Feedback

Nursing Advisory Board: The Nursing Board of Advisors consists of representative agency heads from healthcare agencies throughout Greenwood and surrounding counties. The Board meets once each semester to discuss issues of shared concern regarding the educational preparation of professional nurses. Nursing Assessment and Evaluation Committee will compile feedback from representatives on the Board through meeting minutes and a survey administered online. Information will be used to make programmatic decisions.

Employer Survey: The survey tool will be administered annually to employers throughout the region to obtain feedback on the previous graduating classes of MSN students. The survey will be administered electronically. Responses will be compiled by the Nursing Assessment and Evaluation Committee and reported to the nursing faculty for use in making programmatic decisions.

Data for program assessment will be reviewed annually by the Nursing Faculty Organization in order to make programmatic improvements.