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**SECTION 1**  
**GENERAL INFORMATION**

**Program Types Being Reviewed**

Associate of Applied Science in Nursing

Bachelor of Science in Nursing

Master of Science in Nursing

**Purposes of Visit**

Continued Accreditation of the Associate of Applied Science in Nursing

Continued Accreditation of the Bachelor of Science in Nursing

Continued Accreditation of the Master of Science in Nursing

**Dates of Visit**

February 14-16, 2012

**Parent Institution**

Arkansas State University

State University, AR 72467

**Name and Title of Chief Executive Officer**

G. Daniel Howard, Ph.D

Interim Chancellor, Arkansas State University - Jonesboro

**Regional Accreditation Status**

Higher Learning Commission of the North Central Association

Fully accredited, 2003-2013. Site Visit, 2003.

Focused visit, 2006-2007

Next comprehensive review: 2012-2013

**Name and Address of Nursing Unit**

School of Nursing

College of Nursing and Health Professions

Box 910

State University, AR 72467-0910

**Name and Title of Administrator of Nursing Unit**

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**State Board of Nursing**

Arkansas State Board of Nursing

Last Review 2006; Next Review, May 2012

Fully Approved with no stipulations

**NLNAC Accreditation Status**

AASN, 2003

BSN, 2003

MSN, 2003

**Criteria Used to Prepare Self-Study Report**

*NLNAC Accreditation Manual*, 2008 edition

## Introduction

Originally founded as a regional training school in 1901, Arkansas State University (ASU) was granted university status in 1967. ASU has continued to evolve as an institution of higher education throughout its 100 year history and has recently matured into a university system. The ASU system has four campuses (Jonesboro, Beebe, Newport, and Mountain Home) and two branch campuses (Searcy and Heber Springs) as well as partnerships with area community colleges and a degree center (Arkansas Northeastern College at Blytheville, East Arkansas Community College at Forrest City, Mid-South Community College at West Memphis, Black River Technical College at Pocahontas and the ASU degree center at Paragould). ASU is accredited by The Higher Learning Commission of the North Central Association and holds 22 specialized accreditations. ASU offers programs at the associate, bachelor, master, specialist and doctoral degree levels.

The main campus, ASU-Jonesboro (ASU-J), is located in northeast Arkansas in Jonesboro, a city of more than 67,000 people. Jonesboro is the trade, cultural and medical hub for a market area of over 400,000 people. Agriculture, industry and medical facilities are the principal employers in the area. The only public institution of higher learning in the region, ASU-J is also a primary attraction and employment opportunity in the city of Jonesboro. In addition, the campus provides and supports many cultural events in the area via its museum, library facilities, on-going heritage preservation activities and

sporting events. Current heritage sites include the Hemingway-Pfeiffer Museum, the Southern Tenant Farmer's Museum, Lakeport Plantation (the last remaining antebellum home in Arkansas) and the Dyess Colony. The Dyess Colony was an agricultural resettlement community during the New Deal and includes the boyhood home of singer Johnny Cash. The combined efforts of ASU, its many supporters, and many gracious country music entertainers, have resulted in great strides toward the restoration and preservation of this historical landmark. The people of Jonesboro and its surrounding area also enjoy and support ASU-J athletics. The ASU-J athletic teams are very competitive in Division 1 of the National Collegiate Athletic Association. The campus community and fans are especially proud of our Sunbelt Conference champions' Red Wolf football team!

One of "60 elite institutions of higher learning" recognized in the 2011 edition of "America's Best Colleges" by *U.S. News & World Report*, ASU-J is honored to be a Tier 1 southern regional institution. The ASU-J campus has approximately 14,000 students currently enrolled. The culture of our campus is changing with the rapid growth of the international and graduate student populations. Academically ASU-J is organized into ten colleges: Agriculture and Technology, Business, Communications, Education, Engineering, Fine Arts, Humanities and Social Sciences, Nursing and Health Professions, Sciences and Mathematics, and University College.

The School of Nursing (SON) is a part of the College of Nursing and Health Professions (CNHP). Other programs/departments (and their respective degrees) in the College are communication disorders (baccalaureate/master),

clinical laboratory science (associate/baccalaureate), medical imaging and radiation sciences (associate/baccalaureate), physical therapy (associate/doctorate), and social work (baccalaureate/master). The School of Nursing offers the associate, baccalaureate, and master's degrees. The associate degree options are offered as traditional and Licensed Practical Nurses (LPNs) to associate degree on all campuses except the Jonesboro campus. ASU-J offers the LPN to AASN option and serves as the distance education hub. The traditional BSN degree is offered on the Jonesboro campus as well as transition programs for both LPNs and RNs to earn a bachelor's degree in nursing. In addition, a Second Degree Accelerated BSN program is offered over a 12-month period. The RN to BSN option is offered on the web with individual arrangements for clinical practicum experiences. The MSN degree is offered on the Jonesboro campus. All options are offered in a combination of online and traditional classes.

Students. The total enrollment for the School of Nursing in Fall 2011 is 744.

Total AASN enrollment: 237

Total BSN enrollment; 296

Total MSN enrollment 211

Faculty. The number of full-time faculty in Fall 2011 is 38; the number of adjunct faculty is 46. Three non-nurse faculty teach a basic nutrition course. A person with an earned medical degree teaches anatomy, physiology, and pathophysiology for the nurse anesthesia option. Adjunct faculty are employed

on an as needed basis. While most adjunct faculty are teaching clinical sections on the Jonesboro and/or distant campuses, a few adjunct faculty are teaching didactic courses in the BSN and/or MSN programs.

During the academic year, several faculty teach across programs. Of the 38 full-time faculty, seven teach in the MSN Program only, eleven in the BSN program only, and ten in the AASN program only. Four faculty teach in the AASN and BSN programs, and three faculty teach in the BSN and MSN programs. One full-time master's prepared nursing faculty is in charge of the Clinical Learning Center (CLC) on the Jonesboro campus; this faculty works with other faculty in courses and facilitates and assists with simulations across programs.

*[Note: Part-time faculty at ASU are termed adjunct faculty when hired each term on an as needed basis rather than on contract in a budgeted line. The term, part-time faculty is used for persons hired on a contract in a budgeted line. Adjunct faculty is the term used throughout the Self Study for faculty teaching on a part time basis per term.]*

History. Nursing began as an academic discipline at ASU when the associate degree program (now the AASN program) was established in 1969. Initial accreditation for this program was received in 1970. Because of the interest in baccalaureate nursing education, the traditional BSN program was established in 1974 and received initial accreditation in 1981. Approval was received in 1988 from the Arkansas Department of Higher Education for a Master of Science in Nursing program. Initial funding was received from the Area Health Education

Center-Northeast (AHEC-NE) in 1990. The first classes were taught in a consortium agreement with the University of Arkansas for the Medical Sciences (UAMS) College of Nursing. This contract ended in 1993 with ASU assuming full funding and teaching responsibilities for the program. The MSN program received initial accreditation in 1992. In 1997 a family nurse practitioner option was added to the initial adult health nursing/clinical nurse specialist option. After a year of planning and initial accreditation by the Council on Accreditation for Nurse Anesthesia Education Programs in 2002, an option for graduate study in nurse anesthesia was established with the first students being admitted in May 2003. In addition, options for nurse educator and nurse administrator were added. All programs have maintained continuing accreditation.

The SON has been involved in distance education since 1992. Under a state mandate, the School began offering associate degree nursing education via interactive television at Beebe, Mountain Home and Ozarka Technical College at Melbourne. (The program at Ozarka was discontinued when a state-wide associate degree consortium was formed.) The associate degree program began in 2006 at Mid-South Community College. For a period of time, both the MSN and BSN (for RN to BSN students) programs offered classes via interactive television. The RN to BSN courses are now online with individualized clinical practicum arrangements. The Jonesboro campus (main campus) serves as the hub for distance education for the associate degree program using interactive television and web-enhanced traditional courses. The traditional associate degree and the Licensed Practical Nurse (LPN) to associate degree options are

available at three sites - Beebe, Mountain Home, and West Memphis. On the Jonesboro campus the LPN to associate degree option is available. Three of four options in the Bachelor of Science in Nursing Program are on the Jonesboro campus: the traditional BSN, the LPN to BSN, and the Second Degree Accelerated. The Second Degree Accelerated option uses online delivery for selected courses. The fourth option, the RN to BSN offers courses entirely online. The MSN Program options are offered online as well as in the traditional classroom on the Jonesboro campus.

### Summary of Standards and Criteria

Standard 1. Administrative Capacity. The mission and philosophy of the School of Nursing is congruent and supportive of the mission of the University. Faculty participate in the governance of the University, the College and the School and work within programs to ensure the achievement of learner outcomes. Selected students from all programs within the College form the student advisory group to the Dean of the College. Students provide input about various issues and needs of the College. Specific committees within the SON have student representation. Class representatives and individual students also bring issues to faculty. Faculty work closely with the ASU Student Nurses' Association to promote leadership and professionalism.

The Chair of the SON is a qualified nurse educator with experiences in all levels of nursing education. The Chair has the authority and responsibility for the programs within the SON. The Chair is supported by Program Directors for the

AASN, BSN, and MSN Programs and Coordinators for each distance campus sites.

Standard 2. Faculty and Staff. Faculty are academically and experientially qualified and maintain expertise in their areas of responsibility. The majority of full-time faculty in the AASN program are master's prepared. One temporary full-time faculty does not hold a master's degree. All full-time faculty in the BSN program hold a minimum of a master's degree in nursing, with 28% doctorally prepared. The majority of full-time faculty in the MSN program are doctorally prepared. A combination of full-time faculty and adjunct faculty are utilized to meet the goals and outcomes of the nursing education unit. Full-time faculty are engaged in scholarship as defined by Boyer (1997). The policies and benefits for SON faculty and staff are the same as for other University faculty. The College has established a two-track Promotion, Retention and Tenure (PRT) system to also allow the recognition of faculty whose primary responsibility is focused on clinical teaching. All faculty are afforded faculty development opportunities by the University, the College and the School.

The SON including distant sites are served by administrative specialists [Administrative Assistant is a classification in the State system for certain secretarial positions.]. ASU-J has four administrative specialists. Beebe has a full-time administrative specialist. Mountain Home and West Memphis each have a half-time administrative specialist.

Standard 3. Students. Policies for students are congruent with the parent institution. Policies are widely published in written materials and are also available online. Policies that differ for nursing students are in place to assure safety or facilitate the intellectual demands of the programs. Students have access to an array of support services. With the exception of health services, support services at all sites are comparable. At the distant sites, health services are available in their local community. The University and the SON follow national guidelines in the maintenance of educational and financial records.

Standard 4. Curriculum. The curricula for each of the nursing programs are a reflection of learner outcomes derived from the organizing framework. Professional standards and national guidelines are an integral part of the curricula. The faculty review the curricula on a regular basis. Data from student performance, course evaluations and faculty evaluations are also used in maintaining currency and rigor in the curricula.

Clinical learning sites are chosen to meet student learning outcomes. The SON maintains contracts with over 100 clinical agencies to provide a wide variety of learning opportunities. Agencies include hospitals, home health, local health departments, physician practices, rural clinics, schools, and rehabilitation facilities. Both faculty and students evaluate clinical sites on a regular basis.

Standard 5. Resources. Fiscal resources are available to the SON to fulfill its goals and outcomes and are comparable to other educational units in the University. Within a tight state economy, careful management is required to

assure that programs are supported in an adequate manner. Faculty base salaries at the University are below regional and national norms. Salaries within the College are supplemented by the differential tuition paid by students.

The physical facilities for the SON have been enhanced by recent renovations and building. The College on the Jonesboro campus now occupies three buildings: the College of Nursing and Health Professions (CNHP) building, the Eugene W. Smith (Smith) building and the Donald W. Reynolds Health Science Center (Reynolds). Nursing faculty offices are located in the CNHP Building with Nurse Anesthesia offices in the Reynolds Building. Classrooms with Smart Technology are in all three buildings. The Clinical Learning Center, a Health Assessment Lab and Nurse Anesthesia labs are located in the Reynolds Center. Physical facilities at distant sites are similar to that of the main campus. Smart classroom and/or similar technology is available at both Beebe and Mountain Home. Practice laboratories are also available for the teaching of skills and health assessment as well as the use of simulation. Faculty at all sites have computers, printers, and private offices as well as conference space. Faculty and students at all sites have access to the ASU-J library.

Standard 6. Outcomes. The SON has had a comprehensive systematic evaluation plan since 1986. The systematic evaluation plan (SEP) was revised in 2009 to reflect the current NLNAC Standards and Criteria. Findings are reviewed and analyzed by faculty. Various timelines are used to collect and assess data for the different evaluation elements. The SEP encompasses all campuses.

## Analysis and Summary of Strengths and Areas Needing Improvements

### Strengths

1. Committed, dedicated Faculty. The SON has a cadre of very committed and dedicated faculty. Faculty are readily accessible to students and work toward student success in all programs. A hallmark of this dedication is willingness of students to pay differential tuition for their education in order to retain and recruit qualified faculty.
2. Support from the Dean and Administration. The Dean of the College of Nursing and Health Professions is actively supportive of nursing. She advocates for nursing in the local community as well as in ASU's market area. During her tenure as Dean, a viable communication network between clinical agencies and the College has been fostered. This network affords academicians information from practice sites and benefits students in their learning experiences and future employment. The Dean and the Administration worked with the Donald W. Reynolds Foundation to provide and secure new facilities for the College. The Reynolds Center provides much needed space (classrooms, study areas, student lounge) as well as state-of-the art learning laboratories.
3. Service to the Community and the Profession. The faculty of the SON are very active in their communities. Faculty from the main campus and distant sites work with various professional and community groups. Faculty work with local professional groups, often serving as officers and leaders in dealing with nursing issues and working with nurse colleagues. Service to the profession includes

elected office as well as numerous presentations at the local, state, national and international levels.

4. Current and viable curricula. The SON curricula is current and viable at all three degree levels. Faculty have reviewed contemporary sources related to nursing practice and teaching theory in order to ensure that programs are current. In strengthening the curricula, content and learning experiences on quality and safety have been implemented at all levels. Faculty utilize case studies and simulations to enhance student learning and facilitate critical thinking and clinical reasoning.

5. Strong Student Applicant Pool. The pool of applicants to all programs reflects the reputation of the SON. The number of qualified applicants is approximately double the number that can be admitted in most programs.

#### Areas for Improvement

1. Securing qualified faculty is often challenging. Nurse faculty salaries remain below their comparably educated counterparts in nursing services areas. Qualified adjuncts [The term, adjunct faculty, is the designation for part-time faculty at ASU.] are often in administrative or clinical positions that preclude their being available on a consistent basis to provide clinical teaching.

2. Faculty Scholarship. Faculty workloads, as well as the need to work with a number of adjunct faculty who augment clinical teaching, influences the ability of faculty to be engaged in the scholarship of application and discovery. Exploration of additional strategies is needed to devise a plan to enhance faculty scholarship.

3. The full implementation of the continuous quality improvement process guided by the Systematic Evaluation (SEP) plan has been challenging. The problems include, but are not limited to, lack of quantitative data for selected elements, lack of comprehensive data (across sites and programs), low return rates from mailed surveys, and limited/omitted data.

### Future Plans

1. Development of Doctor of Nursing Practice (DNP) Program. The SON is participating in a planned consortium of Arkansas universities with nursing programs who offer graduate education to offer a DNP. The Chair and two graduate faculty members have been active in the development of the consortium.

2. Enhancement of continuous quality improvement process. As a result of this review, the need for improved monitoring of assessment and evaluation as delineated in the SEP has been identified. More quantitative data is needed in specific instances so that problems and trends may be readily recognized. The Nominating and Bylaws Committee recently developed a proposal for a new standing committee, the Assessment and Evaluation Committee. Plans are to continue implementation through the 2011-2012 academic year. Implementation includes plans for monitoring and oversight of the SEP and exploration of other strategies to facilitate data collection and analysis.

3. Development of international initiatives. The Chair of the SON is continuing the development of an initiative with Guangzhou University Medical

College School of Nursing to bring Chinese nursing students into the ASU baccalaureate program. Further development of this initiative includes having a cohort of Chinese nursing students studying at ASU. This initiative will provide students with a unique cultural experience including emphasis on healthcare delivery systems. ASU students also have the opportunity to be immersed into the culture of China through a summer travel experience sponsored by the College of Nursing and Health Professions.

4. Explore options and establish Advisory Board(s). Develop one or more advisory boards to enhance communication and gain valuable input from the community and various stakeholders for the SON. Historically, an advisory board made of community healthcare providers facilitated the development of the FNP option in the MSN program. The Nurse Anesthesia option has an advisory board that provides valuable input. Plans include establishing an advisory board for the SON and exploring the possibility of advisory boards for specific programs and/or sites.

## **SECTION 2**

### **STANDARD 1**

#### **MISSION AND ADMINISTRATIVE CAPACITY**

**The nursing education unit's mission reflects the governing organization's core values and is congruent with its strategic goals and objectives. The governing organization and the program have the administrative capacity resulting in effective delivery of the nursing program and achievement of identified outcomes.**

**1.1 (AASN, BSN, MSN/PMC) The mission / philosophy and outcomes of the nursing education unit are congruent with those of the governing organization.**

Mission of the School of Nursing

The mission of the School of Nursing (SON) at Arkansas State University (ASU) is congruent with the mission and philosophy of the University and the College of Nursing and Health Professions (CNHP). The mission of the School of Nursing is to “educate, enhance and enrich students for evolving professional nursing practice”. This mission merges with the broad mission of the University, which “educates leaders, enhances intellectual growth and enriches lives”.

Selected elements of the CNHP Mission statement are:

- provides quality education to students, graduates, and health care providers
- provides educational programs that are designed to promote lifelong learning
- assess the contributions of the graduates consistent with the mission

Mission statements are publicly accessible through the University website ([www2.astate.edu](http://www2.astate.edu)) and through the School of Nursing website

([www2.astate.edu/a/conhp/nursing/about-the-department.dot](http://www2.astate.edu/a/conhp/nursing/about-the-department.dot)).

The core values of the School of Nursing resonate with the University's commitment to core values. Arkansas State University values the following as central to our success:

- **Student-Centered:** We are committed to education, inquiry and service in order to meet students' changing needs. We foster lifelong learning, civic and social responsibility, leadership, and individual and career growth.
- **Learning-Centered:** We nurture intellectual flexibility, knowledge and skills by integrating teaching, research, assessment and learning to promote continuous improvement of our scholarly community.
- **Excellence:** We pursue excellence within the campus community through opportunities for achievement in teaching, research, scholarship, creative activity and service.
- **Diversity:** We embrace diversity in all of its dimensions realizing that mutual respect for individuality and the inclusion of all are vital for both personal and institutional success.
- **Service:** We support and recognize service at all levels of the university. We strive to contribute to the benefit of the university, the Delta, the state, the nation and the world.
- **Integrity:** We hold high standards of character and integrity as the foundations upon which the University is built.

The School of Nursing values the following as fundamental:

- **Integrity:** Purposeful decision to consistently demonstrate truth and honesty
- **Excellence:** Highest quality of nursing education, practice, service and research
- **Diversity:** Respect for varied dimensions of individuality among populations

- **Service:** Professional experiences in response to the needs of society
- **Learning:** Acquisition of knowledge and skills in critical thinking, practical reasoning, and decision making
- **Student-Centered:** Development of essential skills for lifelong learning, leadership, professionalism, and social responsibility.

See Table 1.1-1 for a comparison of the University, College of Nursing and Health Professions and SON mission statements.

**Table 1.1-1**  
**Comparison of Selected Elements of the University, College and Department of Nursing Missions**

<b>Arkansas State University Mission</b>	<b>College of Nursing and Health Professions Mission</b>	<b>School of Nursing Mission</b>
Educates Leaders...	Provide quality education to students, graduates, and health care providers in a variety of health disciplines	Educate students for evolving nursing practice; excellence: highest quality of nursing education; development of essential skills for .... leadership; .
Enhances intellectual growth...	The College provides educational programs that are designed to promote lifelong learning based on the expressed needs of its varied constituencies	Enhance students; learning: acquisition of knowledge and skills; essential skills for lifelong learning
Enriches lives...	...Assesses the attainment of this mission in terms of the contributions its graduates make to health care in the Delta region and beyond.	Enrich students; diversity: respect for varied...populations; professionalism and social responsibility; professional experiences in response to the needs of society.

## Philosophy of the School of Nursing

The faculty holds the following beliefs about personhood, environment, health, nursing and nursing education. We believe that each person has innate worth and individuality, which reflects integration of the bio-psycho-social-spiritual nature of one's being. Though each is unique, all persons possess characteristics that form the bases of identifiable shared basic human needs. We believe that individual experience, heredity, and culture influence each person, and that one's existence depends on perception of and reaction to change. Inherent in this process is the capacity to make decisions, weigh alternatives, predict and accept possible outcomes.

The faculty believes that environment profoundly influences all persons. The environment is the sum of all conditions and forces that affect a person's ability to pursue the highest possible quality of life. The concept of environment has two major components. The first comprises society and culture, which derive from the need for order, meaning, and human affiliation. The second component consists of the physical and biological forces with which all human beings come in contact. Both of these components of environment are sources of stimuli that require personal adaptation and/or interaction in order for individuals to survive, develop, grow, and mature.

The faculty believes that health is a state of wholeness and integrity. We recognize that health is not a static state for individuals, families, groups, or communities, but that it is a continuum in which the mind, body and spirit are balanced, providing a sense of well-being. Health is influenced by the ability to cope with life processes. The achievement of this potential is determined by motivation, knowledge, ability, and developmental status. The faculty also believes the primary responsibility for one's health rests with the individual or those upon whom one is dependent.

We believe that each individual has the right to quality health care. The goal of health care is to promote, maintain, or restore an optimal level of wellness. Nurses act as advocates in assisting persons to gain access to and secure maximum benefit from the health care system. The complexity of health care requires that nurses, as professionals, collaborate to provide the highest level of health care possible.

The faculty believes that nursing is both art and science. This unique altruistic discipline has evolved from the study and application of its own

interventions as well as applying knowledge from a variety of other disciplines. The focus of nursing is the provision of care across the health care continuum utilizing a systematic nursing process.

We believe that nursing refines its practice in response to societal need, and that nursing education must prepare a professional nurse for evolving as well as traditional roles. The faculty recognizes the obligation of the nursing curriculum to include leadership, change strategies, professionalism and community service. We believe that the education of nurses occurs at several levels in order to prepare various categories of practitioners. To acquire the knowledge and judgment inherent in practice, nursing education focuses on critical thinking, decision-making, analysis, inquiry, and research. The faculty also believes that learning is an independent, life-long process. Learning is an opportunity for teacher-student interaction in setting goals, selecting and evaluating learning experiences and appraising learners' progress. All levels of nursing education share certain rights, duties, and characteristics, such as the scientific basis of nursing care. Accordingly, we actively support the endeavors of the profession to assist nurses in pursuing professional education at beginning and advanced levels.

The purpose of the associate level is to prepare graduates who apply the nursing process in the provision of direct nursing care for clients with common, well-defined problems. Therefore, the associate curriculum is grounded in the liberal arts and includes professional values, core competencies, core knowledge and role development. The associate degree graduate is prepared to function as a member of the profession and a manager of care in acute and community based settings.

The nurse prepared at the baccalaureate level is a professional who has acquired a well-delineated and broad knowledge base for practice. We believe that the role of a baccalaureate graduate is multifaceted and developed through extensive study in the areas of liberal education, professional values, core competencies, core knowledge and role development. This knowledge base prepares the beginning baccalaureate graduate to function as, a provider of direct and indirect care to individuals, families, groups, communities and populations. The baccalaureate graduate is also a member of the profession and a designer, manager and coordinator of care.

The master's level prepares baccalaureate nurses for advanced nursing practice roles. Preparation for advanced practice emphasizes strategies to

intervene in multidimensional situations. The knowledge base is expanded in scope and depth through the scientific, theoretical and research components of nursing. Various theories inherent in advanced practice roles and strategies are analyzed and explored to synthesize the interdependence of theory, practice, and scientific inquiry in nursing. This synthesis of knowledge and experience provides the basis for creating, testing, predicting, and utilizing varied and complex interventions for problems of health care and health care delivery. The graduate of the master's program is a leader in the profession and prepared as an independent coordinator of care.

**1.2 (AASN, BSN, MSN/PMC) The governing organization and nursing education unit ensure representation of students, faculty, and administrators in ongoing governance activities.**

The organizational structure of the College of Nursing and Health Professions (CNHP) and the School of Nursing (SON) is based on the structural plan of the University. The CNHP is one of 10 colleges that make up the academic structure of Arkansas State University (ASU). Nursing comprises the largest discipline within the College and as such holds the title of School of Nursing. The title of SON was enacted in 2009 in recognition of the commensurate differences with regard to other programs within the College. The School of Nursing is one of the largest in the state and offers three programs with multiple sites and entry levels. Degrees offered are an Associate of Applied Science in Nursing (AASN), Bachelor of Science in Nursing (BSN), and Master of Science in Nursing/Post-Masters Certificate (MSN/PMC). Two options are offered for the AASN: the traditional option and a Licensed Practical Nurse (LPN) to AASN. Four options are offered in the BSN Program: the traditional option, LPN to BSN, Registered Nurse (RN) to BSN, and the Second Degree Accelerated BSN. The Family Nurse Practitioner (FNP), Adult Health Clinical

Nurse Specialist (CNS), Nurse Educator, Nurse Administrator, and Nurse Anesthetist (NA) are offered in the MSN Program.

Other disciplines within the College hold department status. The School of Nursing and departments within the College are administered by a chair. The organizational structure provides for effective functioning of the College and the School of Nursing, facilitates faculty and student decision making, and fosters the achievement of the institution's goals. Organizational charts for the University, the College and the School of Nursing are found in Appendix A.

The Dean, who serves as the chief administrator of the CNHP, is directly responsible to the Executive Vice Chancellor and Provost for Academic Affairs and Research. The Chair of the SON reports to the Dean. The CNHP engages all College department and program level administrators in an Executive Council. The Executive Council is comprised of department chairs and program directors and meets regularly with the Dean to discuss issues and policies impacting the College. Program directors are appointed by the Chair and are responsible for the ongoing coordination of program activities. The job description for program directors is found in the *Nursing Faculty Handbook*. The Handbook will be made available to Site Visitors in materials sent from the School.

Faculty of the School of Nursing routinely meets as a faculty organization. Organization bylaws are housed in the *SON Faculty Handbook* (page 10) and delineate committee function and membership. Committee memberships reflect appropriate representation with regard to committee function. All SON standing

committees have representation from all programs. Each program-specific faculty group meets regularly. All full time faculty serve on the Curriculum Committee and the Admissions, Progression and Credits Committee of the program or programs in which they teach. Other subcommittees or task groups are appointed as needed.

Students have the opportunity to participate in governance at all levels. At the University level students may serve in various capacities in the Student Government Association and Student Graduate Council. On the College level, students participate in the Dean's Advisory Council and the CNHP Ethics Committee. Students are also represented on the Undergraduate Student Handbook Committee. At the program level, students participate in the Admissions, Progression and Credits and Curriculum Committees. Additionally, several BSN students are elected officers of the Arkansas Nursing Student Association and have sought office in the National Student Nurses Association.

The SON is well represented in governance campus wide. In addition to college governance, SON faculty represents the SON and College on University committees, many holding key leadership positions. For example, SON faculty hold elected positions on University Promotion, Retention and Tenure, General Education (chair), Undergraduate Curriculum Council, Academic Hearing, and Faculty Senate. University appointments include Faculty Athletic Representative, Health and Medical Director for ASU Disaster Operations and the Higher Learning Commission Self-Study Co-chair. Within programs, groups of faculty serve on task groups or ad hoc committees as needed. Task groups or ad hoc

committees are charged with formulation of proposals, guidelines and policies relevant to program, student, or faculty issues. The strategy of small groups within a program is also used for revisions of existing policies or procedures. Examples of ad hoc committees include the Revision of Admission Criteria for FNP option (MSN), Professional Behaviors (BSN), Transcript Review Committee (BSN), Revision of Clinical Evaluation tool (BSN/AASN) and Revision of Readmission Policies (AASN and BSN). A table in Appendix B details committee representation and leadership provided by SON faculty.

### **1.3 (AASN, BSN, MSN/PMC) Communities of interest have input into program processes and decision making.**

The School of Nursing's communities of interest include clinical affiliates, national organizations relevant to nursing education, the Arkansas State Board of Nursing, employers of graduates, alumni, students, and community members. Communities of interest groups have spoken with one voice, "More nurses are needed". This need is not unique to Northeast Arkansas, our customary constituency; rather, this need mirrors a universal nursing shortage. To address this need the SON made several program adjustments: 1) In 2005 the AASN program added an additional site at West Memphis; 2) Beebe began admitting traditional students and the West Memphis began accepting students to the LPN to AASN option in 2007; 3) The number of students admitted per class in the Baccalaureate program was increased from 60 to 90 in Fall 2001; 4) A Second Degree Accelerated BSN program was added in August 2007; 5) In 2002, the nurse anesthesia program was implemented. This program and the Second Degree Accelerated BSN options are unique in the state; 6) The number of

students admitted into the Family Nurse Practitioner (FNP) option increased 35% in 2011. Details of the curricular changes related to program changes and student input will be discussed in other standards.

The College of Nursing and Health Professions solicits both formal and informal input from our communities of interest in a variety of ways. Each year the Dean of the College of Nursing and Health Professions visits area hospitals and brings back relevant information. She provides updates to hospital Chief Executive Officers (CEOs) biannually. The CNHP newsletter, *Stateside News*, is mailed to approximately 6,000 communities of interest including, clinical agencies, alumni and friends of the College. The newsletter is prepared with input from all programs within the College and includes faculty, student and alumni achievements, program updates and a report on the state of the College.

Meetings are held at least once a year with the *CNHP Advocacy Board*. The purpose of this board is not advisory; rather, it has served as a mechanism for the Dean to disseminate information to the community regarding activities within the College. Advocacy Board meetings provide the opportunity for presentation and discussion of information about current issues, new programs and changes in the SON. The Advocacy Board includes nurses from the community as well as representation from other CNHP disciplines and interested citizens. The Advocacy Board provides a voice in the community for CNHP programs.

Within the School of Nursing, the Chair, Dr. Sue McLarry and the faculty review and utilize national trends to continuously update program operations and curricula. For example, Quality and Safety Education for Nurses (QSEN), Essentials of Nursing Education in the various degree programs, National League of Nursing standards, and the Institute of Medicine (IOM) reports have been used. Dr. McLarry has regular communication with the Arkansas State Board of Nursing (ASBN). These communications include reports sent to the SON by the ASBN regarding NCLEX results, proposed changes to the State Nurse Practice Act, information from the National Council State Boards of Nursing (NCSBN) and questions related to background checks and drug testing. Reports are provided to the ASBN annually by the School of Nursing Chair about enrollment, graduation, clinical sites and faculty.

The SON participates in the Nurse Administrators of Nursing Education Programs (NANEP), an advisory group of the Arkansas State Board of Nursing. NANEP meets a minimum of twice a year and offers the opportunity for discussion of issues and trends related to nursing education. Examples of NANEP work include 1) development of substance abuse statements; 2) recommendations for changes to the Rules section of the Arkansas Nurse Practice Act; 3) initiating a survey of schools in the state regarding minimum passing grades for a nursing course, and 4) Faculty currently serving as officers related to specific degree councils include Dr. Sue McLarry, Chair of the BSN and Higher and Renee Miller, Treasurer for the ADN council. In addition, Dr. McLarry is serving on the ASBN Nurse Practice Act Rules Chapter Six Review

Committee, and on the educational program, a committee of the Arkansas State Board of Nursing. Both the Associate and Baccalaureate-level groups have developed an annual sharing meeting with current program topics and breakout sessions for nurse faculty from all nursing programs in the state to discuss and share information and ideas. Numerous faculty attend these annual statewide ADN and BSN sharing days to discuss curriculum and other issues present in nursing education with other nurse educators from across the state.

Formal and informal communication processes exist with nursing and other personnel in clinical sites utilized by the SON. Program directors and site coordinators meet with clinical agency liaison's to plan and share information related to clinical experiences at least every semester. At the beginning of each academic year, members of the faculty meet with administrators, patient care managers and clinical preceptors to share facility updates and program information as well as solicit feedback and needs regarding student experiences. Information gathered from clinical agencies is used to inform decision making about curriculum and policies.

Dr. McLarry periodically meets with the Chief Nursing Officer (CNO) of various clinical facilities. In Fall 2011, CNOs or their representatives were invited to the University campus for a lunch meeting to discuss the SON graduates, students, learner outcomes and needs of the clinical facilities for the Jonesboro campus with the Chair and Program Directors. Dr. McLarry as well as nursing faculty at distant sites have met with administrative nursing personnel. Although meetings have been held periodically, additional two-way communication is

needed. Plans are being made to formalize meetings with clinical agency personnel. To gain input and establish additional lines of communication with the community, the SON is exploring establishing additional advisory boards. These advisory boards may be school, program and/or site-based.

Other opportunities for communication with communities of interest include student clinical site evaluations, a Nurse Anesthesia Advisory Council, and a Regional Center for Disaster Preparedness. Student evaluations of the clinical agencies are obtained each semester and shared with the clinical sites by Program Directors/Faculty. An advisory committee for the nurse anesthesia program consisting of CRNAs, CRNA students, and community members meets every year to provide program updates and to discuss current issues. The Regional Center for Disaster Preparedness initiated faculty meetings in the Fall of 2010. Faculty for the Center includes community members as well as those with faculty appointments in the SON. As noted previously a CNHP Student Advisory Council meets with the Dean on a regular basis.

**1.4 (AASN, BSN, MSN/PMC) Partnerships exist that promote excellence in nursing education, enhance the profession, and benefit the community.**

All degree programs have developed formal agreements with various community partners that enhance nursing education, the profession of nursing and benefit the various communities the School of Nursing serves. Examples of these partnerships include: 1) In 2005, a formal agreement with Mid-South Community College in West Memphis to offer an AASN degree; 2) a formal agreement with the Center for Domestic Preparedness in Anniston, Alabama to

provide practical experience responding to all hazards associated with homeland security; 3) a formal partnership with the County Health Departments in Arkansas to offer clinics for influenza immunizations; 4) a formal agreement with the Craighead County Medical Reserve Corps to provide nursing service during times of disaster; 5) the Healthy Arkansas Initiative in which corporate and academic partnerships exist to improve the health of Arkansans by promoting handwashing; 6) research partnership with Blue Cross/Blue Shield of Arkansas related to health literacy and diabetes education; 7) partnership with Arkansas Rural Health Program and University of Arkansas for Medical Sciences to provide leadership training; and, 8) an agreement with the Center on Aging Northeast to provide assessment and activities for those who attend. This partnership also serves as a recruitment tool for the Healthy Ager Project.

Multiple (296) clinical and community partnerships exists across all degree programs. Each of these partnerships enhances excellence in nursing education and the profession in unique ways and all ultimately benefit our community. Clinical partnerships are central and span the spectrum of community, chronic and acute care. A contract between the clinical site and the College is obtained prior to student placement. All clinical contracts are maintained in the Office of the Dean of the College of Nursing and Health Professions. Examples of the diversity of sites include: a prenatal clinic in a medically underserved population; intensive care units in a large metropolitan medical center; public health units in several rural counties; rehabilitation hospitals; behavioral health centers; surgical suites in both rural and metropolitan areas; and, family practice clinics throughout

Arkansas, Missouri, Tennessee and Mississippi. To facilitate faculty access to current clinical contracts, the details and contact information are kept on the “R” Drive of CNHP. A copy of this information is also sent to the distant campuses. A list of all clinical sites can be found in the Document Room.

Nursing faculty have been awarded monies and grants that support and have an impact on the quality of health in the region and beyond. Examples include 1) Health Resources and Services Administration grants for graduate nurse education, including all options in the MSN program, in the form of Advanced Education Nurse Traineeships (current/continuation); 2) membership on the American Medical Association research team for a Centers for Disease Control grant related to health security cards or personally owned health information accessible to providers during disaster (current); and, 3) grant funding for placement of Automated External Defibrillators in various community settings (2005-2009).

**1.5 (AASN, BSN, MSN/PMC) The nursing education unit is administered by a doctorally prepared nurse.**

Dr. Carolyn Sue McLarry serves as Chair of the School of Nursing. Dr. McLarry began her nursing career by obtaining a diploma in Practical Nursing from Carlisle Hospital School of Practical nursing. Continuing her education, Dr. McLarry earned an associate, baccalaureate, and master’s in different institutions of higher learning in multiple states. In 2004, Dr. McLarry was awarded a Doctorate of Philosophy in Nursing Science from the University of Arkansas for Medical Sciences. While obtaining degrees, Dr. McLarry focused her clinical

practice on gerontology and critical care. She has taught at the associate, baccalaureate, and master's levels as well as being engaged in distance education.

Dr. McLarry's academic career began in Arkansas at North Arkansas Community College as an instructor in the Associate Degree nursing program. From there she moved to Arkansas State University at the Mountain Home campus as an assistant professor. While at Mountain Home site, she provided an additional service to ASUMH as the interim director of the Practical Nursing Program from May 2001 – November 2001. Her administrative career began at the Mountain Home campus where she served as the Nursing Site Coordinator from 1993 – July 2005. Beginning in July 2005 until March 2006 she served as the Interim Chair of the Department of Nursing. In April 2006 she was named as Chair of the Department of Nursing and has served that office through its transition to the School of Nursing. Dr. McLarry is published and has made numerous presentations. She has also been active in various levels of the Arkansas Nurses' Association, serving as president both at the district and state levels as well as serving as a delegate to American Nurses' Association Conventions. Dr. McLarry is a Certified Nurse Educator through the National League for Nursing (NLN). Dr. McLarry's Curriculum Vita will be available in the Document Room.

**1.6 (AASN, BSN, MSN/PMC) The nurse administrator has authority and responsibility for the development and administration of the program and has adequate time and resources to fulfill the role and responsibilities.**

As the nurse administrator, Dr. McLarry is involved in decision-making related to staff and faculty hiring, promotion, and tenure activities. She works closely with faculty, both as colleague and administrator, in the development of policy, procedures, and curriculum. Additional administrative responsibilities for the position include facilitating faculty development and recommending persons for employment, retention, promotion, tenure and dismissal.

The Chair of the School of Nursing has the authority and responsibility for development and administration of the program. Components of these responsibilities include the preparation and administration of budgets for the SON; the recommendation of course offerings to the Dean; the supervision of the academic advisement of students majoring in nursing; and the acquisition, use and care of SON equipment.

A large number of students apply to the School of Nursing at every level each year and this has created the need for additional faculty. As Chair of the School of Nursing, Dr. McLarry seeks faculty dedicated to the instruction of students and assists with the placement of students on the various campuses. In addition to these responsibilities, many of the state and national agencies require a nurse administrator present at meetings and other venues. In addition to the face to face meetings required, there are reports from all levels of the SON that must be written and presented to various agencies. Since the directors of the individual programs have limited release time, most of the writing and presenting of the reports falls to the Chair of the School of Nursing. Dr. McLarry's workload consists of three (3) hours (25%) per semester teaching time and a release of

nine (9) hours (75%) to perform the above administrative duties. An option to buy-out teaching time is available and has been used in the past when administrative duties are particularly heavy. Dr. McLarry's release time is three hours more than the other chairs in other departments within the College and University.

The School of Nursing Chair is assisted by three Program Directors. The Program Directors work with the associate, baccalaureate, and master's programs. The Program Directors support the Chair in the implementation and evaluation of SON goals. The AASN and BSN directors have a release time of 3 hours (25%); the MSN Director is 25% time as MSN Director, 25% teaching, and 50% Associate Dean of the CNHP. The role of the Directors is to assist the Chair with administrative duties such as chairing program faculty meetings, coordinating curriculum review, evaluating programs, determining course assignments/workload schedules, identifying adjunct faculty, and coordinating the use of clinical facilities with other departments within the School of Nursing as well as coordinating the data used for various reports. Directors also interact with site coordinators and faculty by assisting in the admissions process, orientating new faculty and teaching in their respective area. Program directors have nine month appointments with the exception of the MSN Director, who has a 12 month appointment. The growth of the programs offered at ASU requires AASN and BSN Program Directors to continue their responsibilities beyond their nine month appointment. For these additional responsibilities the Program Directors receive an administrative stipend.

Each distant campus, Beebe, Mountain Home and West Memphis, has a site coordinator. Site coordinators also have nine month appointments and assist with the program operations at the distance campuses. Responsibilities such as scheduling of classes, monitoring of nursing student advisement, and assisting with hiring of new faculty and/or adjuncts are a part of the role of the site coordinators. Site coordinators orient new faculty, coordinate the use of clinical facilities with other schools in the area, conduct meetings with faculty, advise students, and gather applications for admission. Site coordinators also interact with other campus colleagues, work out classroom and clinical schedules, recruit and recommend adjunct faculty for clinical supervision. The site coordinators complete any reports required on their respective campuses. Each site coordinator is allowed two (2) hours release time to assist the Program Directors and the Chair in the numerous duties required of the School of Nursing.

In the master's program, each of the options (adult health, nurse practitioner, and nurse anesthesia) has a designated coordinator. The coordinators work with students in their specialty and monitor the specialty curricula. Descriptions of job responsibilities for the Program Directors, site coordinators and option coordinators are found in the School of Nursing Faculty Handbook. The SON Faculty Handbook will be made available to site visitors before the visit and will also be available in the Document Room.

**1.7 (AASN, BSN) With faculty input, the nurse administrator has the authority to prepare and administer the program budget and advocates for equity among the units of the governing organization.**

Every year the School of Nursing is given an allocation for travel and supplies and services. This is formulated by the College of Nursing and Health Professions, Arkansas State University Board of Trustees and ultimately the legislature. Dr. McLarry has the authority to transfer money between line items to meet the needs of the School of Nursing. Funds are distributed to benefit the faculty and programs of the SON as a whole rather than a specific dollar amount being reserved for each program or faculty member. Priority is given in the budget to support travel expenses for pre-tenure faculty presentations. However, within the last six years, all faculty (regardless of tenure status) with poster or platform presentations have received travel money from the SON or Dean's budget. International travel funds are also available. Travel is also covered for faculty attending the state BSN/ADN sharing days as is travel for faculty sponsor's attending the state nursing student convention.

All faculty are given the opportunity to provide input into budget needs. The faculty is formally asked to submit a list of their infrastructure needs. A list is formulated and items from the list are purchased with allocated infrastructure funds. The CNHP Student Advisory Council also provides input to the decision making process regarding purchases. Examples include the purchase of various simulation devices over the past three to four years. Student technology fees assist the SON's efforts to replace faculty and staff computers every three years.

In addition to the new Reynolds Center for the Health Sciences, all other buildings utilized by the SON have undergone renovations. Nursing faculty input for the new facilities was requested and contributed to the 1) classroom and laboratory design; 2) furniture, including chairs for students; and, 3) décor, by choosing from samples. To facilitate faculty input, trips to other facilities allowed them to assess space design and the comfort and utility of student chairs. Monthly planning and update meetings were attended by faculty. Throughout the construction process, faculty participated in several walk-through opportunities to ensure that standards and expectations were met prior to completion of the new facility. The result of faculty input has been additional classrooms, state of the art laboratories, new office space, as well as other additions throughout the entire College. More details of the budget process and a description of facilities are provided in Standard 5 of the Self Study Report (SSR).

**1.8 (AASN, BSN) and 1.7 (MSN/PMC) Policies of the nursing education unit are comprehensive, provide for the welfare of faculty and staff, and are consistent with those of the governing organization; differences are justified by the goals and outcomes of the nursing education unit.**

There is congruency between the policies of the nursing education unit and the governing organization. These policies are comprehensive and provide for the welfare of faculty and staff. These policies are readily accessible to all faculty and staff via the respective university handbooks. The ASU Faculty Handbook is available on the web at <http://academicaffairs.astate.edu/facultyhandbook.htm> and the ASU System staff

handbook is available at <http://www2.astate.edu/a/finance-admin/hr/employees/handbooks-policies.dot> .

Policies governing employment, selection of faculty, selection of department chairs and college deans, compensated faculty leave, benefits, annual performance evaluation, workload, teaching and non-teaching responsibilities are consistent within the SON, college and university. For example, the normal teaching load at the undergraduate and graduate level is 12 credit hours/semester. The teaching load for graduate faculty varies across campus due to research responsibilities, discipline specific student supervision and thesis requirements.

Policies and procedures are addressed in the SON and College faculty handbooks only when clarification or individualization is required. As noted in the respective table of contents of the College and School Faculty Handbooks, the primary focus is on respective unit specific policies and guidelines dealing with day to day operations of the College and School. One notable exception is the College Promotion, Retention and Tenure policy.

The College and School Promotion Retention and Tenure (PRT) policy, though congruent with the University PRT process and policies, is somewhat distinctive on campus. In general, University requirements for promotion and tenure require an earned doctorate as the terminal degree. In specific and approved disciplines, the University accepts “another earned degree” as the terminal degree. The College of Nursing and Health Professions, in accordance

with these guidelines, accepts a post-entry level graduate degree as the appropriate degree requirement for an assistant professor. At the associate professor level, additional requirements related to achievement, practice, certifications or significant graduate studies are required. Faculty may not be promoted to full professor without the earned doctorate.

The College of Nursing and Health Professions is unique among the colleges on this campus in that all of the disciplines represented in this College are practice professions. As such, the faculties of the College are actively involved on a daily basis as both educators and practitioners. In an attempt to address this need, the clinical track was added to the academic track for the PRT process. This clinical track was developed for two purposes: 1) “to provide a tool or mechanism for directly evaluating the skills associated with the clinical role as it contributes to the mission of the College; and 2) to use those evaluations to make decisions about professional advancement through the appointment, promotion, and tenure processes.” The two-track PRT system addresses faculty members engaged in the traditional academic role as well as faculty members whose workload is heavily weighted with clinical education and supervision. All CNHP faculty are eligible for the clinical track.

Other policies unique to the CNHP and SON are healthcare related. All faculties in the CNHP complete an annual self study on Standard Precautions, HIPAA educational updates and annual tuberculosis screening. Tetanus shot records and hepatitis B vaccination documentation records are maintained on all

CNHP faculty. All faculty maintain current CPR certification, nursing licensure and specialty certification, if applicable.

**1.9 (AASN, BSN) and 1.8 (MSN/PMC) Records reflect that program complaints and grievances receive due process and include evidence of resolution**

The SON and CNHP have detailed processes for both complaints and grievances. Complaints are formal, written signed allegations lodged against the program or School by a person(s) directly impacted. Allegations can stem from anyone directly impacted by nursing education or practice. Complaints are investigated and resolved at the department level by the chair of the SON. The complaint procedure is outlined in the ASU-J Student Handbook (<http://www2.astate.edu/a/student-affairs/student-conduct/student-handbook-cover-page.dot>), the Nursing Undergraduate Handbook, and the Graduate Information Guide. All written complaints and the action reports are on file in the SON. Grievance procedures are well defined in the same Handbooks. In general, student grievances pertain to alleged violations of academic rights. The SON and the CNHP have standing committees to deal with grievances. The CNHP Hearing Committee is selected by the Dean from a pool of faculty and students when the need arises. Written outcomes of student hearings are maintained and will be available for review in the Dean's office.

**1.10 (AASN, BSN) and 1.9 (MSN/PMC) Distance education, as defined by the nursing education unit, is congruent with the mission of the governing organization and the mission/philosophy of the nursing education unit.**

Distance education is critical to the mission of the ASU School of Nursing programs; it allows us to reach students who otherwise would have limited or no

access to nursing education and allows students a fiscally responsible way to gain their education. The various programs in the SON utilize a variety of delivery methods, including distance education. This is consistent with the mission and philosophy of the University, College and School of Nursing. No program or option in the SON is provided as a distance learning only offering. Courses within programs in the SON may be web-based, web-assisted, or taught in the traditional classroom by faculty away from the main campus. Courses that utilize distance education methodologies may employ traditional face-to-face instruction, interactive television, video instruction, web-enhanced and web-based instruction as well as hybrids of these methods for course delivery. Although interactive television and other distance technologies place additional requirements on faculty workload, they do not meet the Higher Learning Commission of the North Central Accreditation Commission (HLC) requirements to qualify as distance education in that all students are on their campus of choice, there is a full complement of faculty present on their campus, and the learning is synchronous. The definition of distance education used by HLC requires a higher percentage of learning,  $\geq 75\%$ , to occur asynchronously than does the National League for Nursing Accrediting Commission. The NLNAC requires a simple majority of courses be offered with distance education technology in order to be classified as distance education. The HLC also limits the definition of distance education to asynchronous education. Therefore, to be in compliance with both the NLNAC and HLC, the SON faculty has adopted the following definition of distance education:

An educational process in which the majority ( $\geq 75\%$  within a course or  $\geq 50\%$  within a degree program) of the instruction occurs when a student and instructor are not in the same place. Instruction may be synchronous or asynchronous. Distance education may employ correspondence study, audio, video, and/or computer technologies.

## STANDARD 2

### FACULTY AND STAFF

**Qualified faculty and staff provide leadership and support necessary to attain the goals and outcomes of the nursing education unit.**

#### Introduction

The School of Nursing serves students with qualified full-time faculty in one of three contract categories: tenure, pre-tenure, and non-tenure (*ASU Faculty Handbook*, pages 70-73). Full-time faculty are assisted by adjunct faculty [The term, adjunct faculty is used by ASU for part-time faculty hired on an as needed basis. Part-time faculty are those hired in a budgeted line for a specific time period.] . Adjunct faculty are paid on the basis of their work in clinical supervision of students or in classroom teaching. The number of adjunct faculty each semester depends on the size of the class and the clinical expertise needed. Recruiting qualified adjunct faculty is a challenge due to time required by their full-time clinical positions.

In general, recruitment of qualified faculty is challenging in the Arkansas Mississippi River Delta Region due to a limited supply of nurse educators. According to the AACN Special Survey on Vacant Faculty Positions for the 2010-2011 Academic Year, faculty recruitment among most US schools of nursing is hampered by a limited pool of doctorally prepared faculty and nursing faculty salaries that do not compete with clinical positions or other academic programs (business, information technology). Arkansas faces these issues as most graduates from Arkansas master's programs choose to enter clinical practice positions.

The School of Nursing full-time Faculty begin their appointments at the rank of assistant professor. In the three programs, AASN, BSN, and MSN, 16 faculty are tenured, 7 faculty have pre-tenure contracts (3 of 7 applying for tenure fall 2011), and 15 faculty have non-tenure contracts. Faculty in non-tenure track positions are on distant campuses or are in positions funded by tuition revenue monies. All faculty may teach across programs as appropriate. At least 13 different universities are represented in faculty graduate degrees, thereby providing diversity and enrichment to the School of Nursing.

## **AASN**

**2.1 (AASN) Full-time faculty are credentialed with a minimum of a master's degree with a major in nursing and maintain expertise in their areas of responsibility.**

**2.1.1 (AASN) The majority of part-time faculty are credentialed with a minimum of a master's degree with a major in nursing; the remaining part-time faculty hold a minimum of a baccalaureate degree with a major in nursing**

**2.1.2 (AASN) Rationale is provided for utilization of faculty who do not meet the minimum credential.**

The AASN program is comprised of the main campus in Jonesboro and three distant campuses: Mountain Home, Beebe, and West Memphis. The full-time faculty at each site maintains expertise through continuing education, clinical practice, and/or specialty certification. Coordination of the AASN program including faculty teaching assignments is the responsibility of the Program Director.

The number of full-time faculty positions designated for the AASN program is 15. Currently, 14 of the positions are filled. The majority (13) of faculty have earned master's degrees with a major in nursing. Following an unsuccessful

search, necessitated by a unexpected resignation, a temporary full-time faculty was hired at the West Memphis campus in August of 2011. This faculty member is currently enrolled in a master of science in nursing program, will complete the MSN program in May 2012, has several years of teaching experience, and previously held a part-time faculty position in the AASN program. The Site Coordinator works closely with this temporary faculty member, overseeing her responsibilities. All full-time AASN faculty have teaching assignments in the AASN program. The four AASN faculty on the Jonesboro campus are also teaching courses and/or content in the BSN Program. A new search for a master's-prepared full-time faculty at the West Memphis campus will be initiated during the 2011-2012 school year.

The other vacant position is at Beebe. A search conducted earlier this year for a master's prepared faculty failed. Faculty responsibilities have been shifted. The Beebe Site Coordinator assumed responsibility for the didactic teaching and adjunct faculty were hired to teach her usual clinical responsibility. A new search will be initiated in the 2011-2012 school year for this position. The AASN Program is not in compliance with NLNAC Standards, but does meet the standards in the Arkansas Nurse Practice Act (ASBN, *Standards for Nursing Education Programs*, p. 6-10).

Full-time faculty attend a variety of conferences and educational activities to maintain current knowledge in their areas of teaching responsibility. The Arkansas State Board of Nursing requires all registered nurses to complete 15 focused continuing education hours every 24 months to maintain active

licensure. Faculty who possess specialty certification obtain additional continuing education hours to maintain their certification. One full-time faculty member holds certification in oncology, and two other full-time faculty are family nurse practitioners. Some AASN faculty are involved in full-time or part-time clinical practice, depending on their academic schedules and obligations.

In keeping with the ASBN Rules and Regulations (ASBN, *Standards for Nursing Education Programs*, pp. 6-4, 6-5), adjunct faculty have at least an associate's degree in nursing and team teach with faculty prepared at the master's in nursing level. In Fall 2011, 21 adjunct faculty were employed by the AASN program, with one holding a doctoral degree and one holding a master's in nursing, 18 holding a bachelor's degree in nursing, and two associate in nursing degrees. Three of the adjunct faculty with BSN degrees are in advanced degree programs. The persons holding associate degrees were hired based on clinical expertise as persons with higher degrees were not available.

## **2.2(AASN) Faculty (full-and part-time) credentials meet governing organization and state requirements.**

Faculty credentials meet the requirements of the Arkansas State Board of Nursing (ASBN), the legal authority for all Arkansas nursing programs (ASBN, *Standards for Nursing Education Programs*, p. 6-10), which states that all faculty must hold an equal or higher degree than the student being taught. As indicated, all full-time AASN faculty except one hold a master's degree in nursing in Fall 2011. Credentials of full-time and adjunct faculty meet Arkansas governing organization and state requirements. Curriculum vitae will be available in the Document Room.

**2.3(AASN) Credentials of practice-laboratory personnel are commensurate with their level of responsibility.**

Instruction and evaluation by AASN ASU-J and distant campus practice laboratories are provided by full-time, master's prepared faculty. The Clinical Learning Center (CLC) at the Jonesboro campus is directed by a full-time faculty member who holds a master's degree in nursing. Other full-time faculty work with simulations and/or skills in the CLC. The curriculum vita for the CLC director will be available in the Document Room.

At the distant campuses, the skills labs are under the direction of full-time, master's prepared faculty, and student learning is evaluated by full-time faculty. Experienced adjunct faculty may assist full-time faculty with practice labs. Faculty at all sites may have workload assignments in the CLC or skills labs. See the Faculty Profile for additional information (Appendix C).

**2.4(AASN)The number and utilization of faculty (full and part-time) ensure that program outcomes are achieved.**

The activities of the AASN program are to prepare nurses for licensure at the associate degree level. Each campus has a site coordinator in addition to full-time and adjunct faculty. A Program Director oversees all sites from the Jonesboro campus. The Jonesboro campus has four full-time and one adjunct faculty. All four of the full-time faculty have assignments in other programs as a part of their teaching load. The West Memphis campus has two full-time, one temporary full-time faculty (hired as a result of a failed search) and six adjunct faculty. The Beebe campus has three full-time and six adjunct faculty. The

Mountain Home campus employs four full-time and six adjunct teaching in the AASN Program.

Achievement of consistency in the AASN program is ensured through team teaching. All courses, both clinical and didactic, are team developed, implemented, and evaluated. In didactic courses, all students at all sites attend a class at the same time. In all traditional courses faculty create the lectures as a team and deliver the content on their respective campuses. For didactic courses taught via compressed video network (CVN), all campuses have the ability to connect at the same time. For example, the 93 students graduating in December 2011, Jonesboro (N = 18), Beebe (N = 29), Mountain Home(N = 21), and West Memphis (N = 25) attended class simultaneously. This provides effective utilization of faculty to ensure achievement of program goals and outcomes in compliance with ASBN standards. It also allows for a designated faculty on each campus to be responsible for the course. All evaluation methods for the AASN program are the same for all campuses. Course coordinators are responsible for syllabi, lecture schedules, exam review/editing, and exam grades. The exams given for both CVN (Compressed Video Network, also known as Interactive Television) and traditional didactic courses are the same on each campus. Exams are analyzed in the aggregate and for each distant site; analysis is completed on the Jonesboro campus testing center and results are provided electronically to all faculty assigned to the course on each campus. Full-time faculty mentor adjunct faculty on all campuses to ensure consistency for

evaluation of student clinical performance; orientation to the adjunct role includes familiarization grading tools and rubrics.

Faculty to student ratios in the classroom and clinical settings reflect the Arkansas State Board of Nursing standards (ASBN, *Standards for Nursing Education Programs*, p. 6-5). When students are providing direct patient care and working in the simulation lab or clinical practicum, the student-faculty ratios do not exceed 10:1 student-faculty ratio.

## **BSN**

**2.1 (BSN) Full-time faculty are credentialed with a minimum of a master's degree with a major in nursing and maintain expertise in their areas of responsibility.**

**2.1.1 (BSN) A minimum of 25% of the full-time faculty hold earned doctorates.**

**2.1.2 (BSN) Rationale is provided for utilization of faculty who do not meet the minimum credential.**

The traditional, LPN to BSN, RN to BSN and/or Second Degree Accelerated BSN programs have fourteen fulltime faculty members. Four or 28% percent of faculty have an earned doctorate. Three additional faculty teaching in BSN programs are engaged in doctoral study. All are expected to complete their work by December 2012. The SON has provided flexible scheduling to accommodate faculty in doctoral study. Faculty teaching in the BSN programs have a variety of backgrounds representing all specialty areas. Expertise is maintained through continuing education and/or through clinical practice during holidays and summer break. All full time faculty within the BSN program meet the minimum of a master's degree with a major in nursing. The full-time faculty teaching load is 12 semester credit hours per semester (ASU Faculty Handbook,

2011-2012). Most full-time faculty teach a combination of theory and clinical practicum courses, and teaching assignments are based on academic and experiential-based proficiency. Scholarly activities and service responsibilities are independent of, and in addition to, the required teaching load.

Full-time faculty attend a variety of conferences and educational activities to maintain current knowledge in their areas of teaching responsibility. The Arkansas State Board of Nursing requires all registered nurses to complete 15 focused continuing education hours every 24 months to maintain active licensure. Faculty who possess specialty certification obtain additional continuing educational hours to maintain their certification. Certifications in nursing education, oncology, obstetrics, geriatrics, pediatrics, critical care, human lactation, developmental disabilities, and diabetes education have been earned by faculty.

Adjunct faculty with preparation in nursing are hired to augment the work of full-time faculty. Adjunct faculty are employed as needed and teach less than 12 semester hours per term. As noted on the faculty profile, the educational preparation of adjunct faculty varies from bachelor's preparation to the doctoral level. Most adjunct faculty are hired to supplement instruction in the clinical areas. For Fall 2011, of the 23 adjunct faculty two are doctorally prepared, five have Master's in Nursing, and 16 have Bachelor's in Nursing. Seven of the sixteen adjunct faculty with a bachelor's degree are currently enrolled in a master's program. All adjunct faculty without master's degree work under the direction of a master's or doctorally prepared faculty in their clinical assignments

and have at least a bachelor's degree in nursing and two or more years of experience in nursing practice. Adjunct faculty are hired in their area of expertise. As previously stated, recruitment of adjunct faculty prepared at the master's level is difficult due to the lack of qualified faculty in the Arkansas Mississippi River Delta Region. Adjunct faculty with master's preparation or higher also teach in collaboration with full-time faculty.

## **2.2 (BSN) Faculty (full- and part-time) credentials meet governing organization and state requirements.**

All full time faculty meet the minimum requirements of the National League for Nursing of at least a master's degree with a major in nursing and an active registered nursing license for the state of Arkansas. Some of the adjunct clinical instructors do not hold an master's degree; however, the Arkansas State Board of Nursing *Standards for Nursing Education Programs* require "nurses serving as assistant clinical instructors in a baccalaureate program to have a degree or diploma at or above the type of education program being offered, be under the direction of faculty, hold a current Arkansas nursing license and have a minimum of one year experience in the clinical area." (ASBN, *Standards for Nursing Education Programs*, p. 6-4,5). Therefore, all faculty meet Arkansas State Board of Nursing requirements. All adjunct nurse faculty serving as clinical instructors work under the direction of a master's or doctorally prepared faculty in their clinical assignments. Faculty vitae will be available in the Document Room.

**2.3 (BSN) Credentials of practice laboratory personnel are commensurate with their level of responsibilities.**

Instruction and evaluation by Jonesboro practice laboratories are provided by full-time, master's prepared faculty. The Clinical Learning Center (CLC) at the Jonesboro campus is directed by a full-time faculty member who holds a master's degree in nursing. Other full-time faculty work with simulations and/or skills in the CLC. Experienced part-time faculty may assist full-time faculty with practice labs. Peer instructors, a group of selected BSN seniors, are available in the CLC to monitor students, keep equipment in order, and assist students with skills practice. Peer instructors do not provide any evaluation of students.

**2.4 (BSN) The number and utilization of faculty (full and part-time) ensure that the outcomes are achieved.**

Teaching assignments are based on respective areas of expertise. The number of full and part time faculty is sufficient to achieve all program outcomes. For example, hospital based clinic experiences have a student to faculty ratio of 10:1. In community based clinic experiences, the average student to faculty ratio is 10:1, in compliance with Arkansas State Board of Nursing standards (*Standards for Nursing Education Programs*, pp. 6-4, 6-5). In undergraduate didactic courses, student/faculty ratio may range from 20:1 to 90:1.

**2.1 (MSN/PMC) Faculty are academically and experientially qualified; the majority of the faculty hold earned doctorates.**

Arkansas State University Graduate nursing faculty meet NLNAC criteria for academic preparation and experiential qualifications set by the Arkansas State Board of Nursing. The majority of the graduate faculty, six out of nine, or

67%, hold earned doctoral degrees with two others scheduled to complete their doctorate in 2012.

## **2.2 (MSN/PMC) Faculty credentials reflect appropriate advanced practice certifications and expertise in their area(s) of teaching.**

In the separate options of the MSN Program, all graduate nursing faculty are certified and/or have expertise in their areas of teaching. In addition to teaching, 20 percent release time is incorporated into each semester workload of the nurse practitioner faculty to allow maintenance of their specialty certifications by meeting the practice criteria.

The MSN Program Director and three full-time faculty teach adult health didactic/clinical courses, nursing administration and nurse educator courses. These faculty members, one professor emeritus (adjunct) and one adjunct with a doctoral degree teach nursing theory, pathophysiology, role, policy, and research. One master's prepared adjunct faculty, currently employed in financial operations, teaches the budget and finance course each Fall. The professor emeritus also holds the Certification in Nursing Education (CNE) through the National League for Nursing.

The didactic/clinical courses in the Family Nurse Practitioner (FNP) option are taught by four full time faculty members. All FNP faculty are certified by national certification bodies, maintain their FNP certification through practice, continuing education, and scholarly activities. One full-time FNP faculty holds the Certified Nurse Educator (CNE) designation.

The Nurse Anesthesia option of the MSN program has a full-time faculty coordinator who is a Certified Registered Nurse Anesthetist (CRNA). She is responsible for teaching some of the specialty courses and for the coordination of the content presented by consistent adjunct faculty and/or guest lecturers. Additional faculty who are master's prepared nurse anesthetists also teach in the option. A physician teaches anatomy, physiology and pathology regularly. An experienced expert nurse anesthesia faculty has been contracted as an adjunct to teach pharmacology courses online.

Two of the graduate faculty members are certified as distance learning educators through the National League for Nursing and Indiana University in Distance On-Line education. An adjunct faculty has received a certificate in online teaching from the University of California at Los Angeles (extension program).

Graduate nursing faculty are expected to divide time and effort between teaching, scholarship and service. Those with administrative responsibilities have time for the additional responsibilities incorporated into their workload hours. Faculty who are full-time are involved in service activities at the school, college, university and community level. Scholarly activities by the faculty include publications in refereed journals, chapters in textbooks and podium and poster presentations at the local, regional, national and international arena. Faculty who have ongoing scholarship activities may be assigned a reduced teaching workload. (See curriculum vitae and workloads on site for additional information).

### **2.3 (MSN/PMC) The number and utilization of faculty (full and part-time) ensure that program outcomes are achieved.**

The School of Nursing ensures the MSN program outcomes with the utilization of full-time and adjunct faculty. Full-time faculty in the MSN program include five faculty who are tenured, three faculty have pre-tenure contracts and one is on a non-tenured contract.

The normal teaching load for graduate full-time faculty is 12 semester credit hours; however, if a faculty member is engaged in significant scholarship activities, their teaching load may be reduced to less than twelve hours. Scholarly activities and service responsibilities are otherwise considered to be in addition to faculty teaching load (ASU School of Nursing Faculty Handbook, 2010-2011, p. 61). The majority of full-time graduate faculty teach a combination of didactic and clinical practicum courses. Teaching assignments are based on academic preparation and expertise. Workload documents will be available on site.

Each FNP clinical section is maintained on a 6:1 ratio of students to faculty, which is consistent with the National Organization of Nurse Practitioner Faculty (NONPF) guidelines. The number of students with CNS faculty may range from 1:1 to 10:1 depending on clinical assignments. The CRNA clinical rotation is accomplished with supervised qualified preceptors at each clinical site and clinical adjunct faculty serving as supervisors.

**2.5 (AASN) Faculty (full- and part-time) performance reflects scholarship and evidence-based teaching and clinical practices.**

**2.5 (BSN) Faculty (full- and part-time) performance reflects scholarship and evidence-based practice.**

**2.4 (MSN/PMC) Faculty (full- and part-time) performance reflects scholarship and evidence-based practice.**

The SON faculty generally ascribe to Boyer's (1997) definition of expanded scholarship as reflected in teaching, integration, application, integration, and discovery. Faculty are engaged in learning activities to earn continuing education credits, maintain certifications, and maintain clinical practice expertise as previously discussed. Content and instructional activities are updated to maintain currency, reflect latest research evidence, and instructional strategies. For example, faculty in all programs have reviewed curricula and learning activities to incorporate safety and quality content. Students are engaged in learning teamwork in the first semester of the BSN program. Safety measures such as procedures for transfer or "handing-off" patients are incorporated into clinical learning experiences at the undergraduate level. Faculty in the beginning skills courses have incorporated the most current information on procedures and sites related to injections. Content such as the current diabetic care guidelines, hypertension education, and new research on pre-eclampsia and its etiology have been incorporated into content. MSN faculty have incorporated selected aspects of systematic reviews and implementation of evidence-based research into core and specialty courses. Students have learning opportunities including systematic reviews and judging evidence as well as learning translational research.

Faculty are involved in the scholarship of integration. Knowledge and skills from various other disciplines are utilized in the teaching and practice of nursing. Examples include written and oral communication, calculations, statistics, research process and knowledge from the sciences such as anatomy and physiology, pathophysiology, and microbiology. At both the undergraduate and graduate levels, the disciplines are integrated into content and clinical courses, research, and health assessment. Knowledge from the social sciences is an integral part of cultural competence, nursing issues, and advocacy.

The scholarship of application is exemplified by the service of faculty to the University, College and School as well as participation in professional and community activities. Several faculty are involved at the state and local levels of the American Nurses' Association. The SON Chair served as President of the state association, and a current faculty member serves as secretary. Faculty are active in both the local district nurses' association and the ASU chapter of Sigma Theta Tau, International. A current nurse faculty and an adjunct (retired) faculty serve as NLNAC site visitors. Faculty at Mountain Home work with a local faith-based clinic. Several faculty from all sites are involved with local health and welfare groups such as the American Heart Association, the Literacy League, United Way Board and the Jonesboro Church Health Center.

Faculty have also engaged in publishing of scholarly works and research. Two members of the MSN faculty are members of the Cochrane Nursing Care Field and have published several systematic reviews. [Cochrane Nursing Care Field is a world-wide effort and is part of the international movement in evidence-

based nursing.] Faculty research ranges from the effect of culturally competent breast cancer education among African American women in Northeast Arkansas to safe sleep education among community childcare providers to reduce SIDS in daycare settings to an investigation of best practices among baccalaureate nursing programs to assure NCLEX success. Faculty have also made podium and/or poster presentations at local, state, national, and international conferences. International sites include Australia, Ireland, England, Canada, Israel, and Scotland. Faculty have presented papers or posters at the NLN Annual Education Summit. Several faculty have presented posters or conducted sessions at the annual convention of the state nurses association. The local Sigma Theta Tau, International chapter, Eta Theta, works with two other chapters in the state to offer an annual research day. This has been another avenue for presentations and/or posters. Additional examples of expertise and scholarship include: investigations into the use of student response devices in the classroom setting; a pilot study of novice nurses functioning as first line managers of student patient care teams in a simulation setting; a study of student use of American Diabetes Association guidelines in patient teaching; a qualitative analysis of reflections by interdisciplinary student teams after a semester long wellness care experience with community-dwelling older adults; and an investigation of cortisol levels in children in the Mississippi Delta as a measure of stress response to disaster. Examples of faculty work will be available in the Document Room.

In summary, all faculty are involved in types of scholarship, as defined by Boyer (1997). Faculty at the main campus as well as faculty at distant campuses

is engaged in university, professional and community service activities relevant to the discipline of nursing. Nursing faculty at the Jonesboro campus have received both University and College awards for teaching, scholarship and service. Details of faculty scholarship, including publications and awards, will be available on vita and other materials in the Document Room.

The College and the SON provide faculty development activities throughout the year. Sessions organized by the SON faculty development committee include topics such as podcast development, e-learning/hybrid courses, i>clicker training, and the use of the WIMBA classroom. The College presents a series of informational offerings focusing on diversity and technology throughout the year conducted by faculty from the University, the College or persons from the community.

Other topics for College continuing education offerings include H1N1 Virus, professional partnerships, effective communication, QSEN, the Institute of Medicine call for interprofessional education, and topics addressed by faculty research. The College annually sponsors a grief seminar. Basic disaster life support and advanced disaster life support are offered several times a year, and an annual clinical instructor seminar provides continuing education for clinical agencies' employees assisting faculty with clinical learning. Every year the College cosponsors several geriatric-focused continuing education offerings with the Center on Aging-Northeast. This facility, one of seven in the state, is part of the Arkansas Aging Initiative and is a collaborative effort among St. Bernards Regional Medical Center, the University of Arkansas for Medical Sciences

(UAMS), Area Health Education Center (AHEC)-Northeast, and the Donald W. Reynolds Center on Aging in Little Rock.

Through an online training initiative, seven nursing faculty received stipends to attend a summer workshop intensive to develop online courses using the latest teaching technologies sponsored by the ASU Interactive Teaching and Technology Center (ITTC). The ITTC offers both group and individual instruction related to web-based teaching/learning. These offerings include instruction pertaining to course planning and lesson design, course delivery, assessment of student learning, research support, and growing professionally. Information and Technology Services offers Microsoft Office, web design, SPSS, and other training classes for staff, faculty and students on a regular basis. Compressed Video Network (CVN) staff assists in the orientation and training of faculty in use of equipment and learning via compressed video.

**2.6 (AASN, BSN) and 2.5 (MSN/PMC) The number, utilization, and credentials of non-nurse faculty and staff are sufficient to achieve program goals and outcomes.**

Competent administrative staff is available at each campus site. The administrative specialists (Administrative specialists is the term used by ASU for secretarial/clerical personnel) provide additional administrative, research and clerical support to faculty, including assistance with advising, ordering textbook copies for adoption, test and syllabus preparation, ordering supplies, completing paperwork, assuring compliance with budget and grants, ordering and maintaining equipment, and many other responsibilities. On the Jonesboro

campus, there are four administrative specialists. Beebe has a full-time administrative specialist while Mountain Home and West Memphis each have a half-time administrative specialist. On the Jonesboro campus, the computer/audio visual lab coordinator maintains the AV-Computer lab for students and faculty, updates and troubleshoots faculty and staff computers, and schedules classrooms each semester. Information Technology (IT) personnel are also involved in working with computers and classroom technology on each campus. The Office of the School of Nursing (Jonesboro) also has work-study students and graduate assistant positions available.

To augment classroom teaching, the Nurse Anesthesia (NA) option has several adjunct faculty including an individual with an earned MD degree. At the undergraduate level three non-nurse persons with credentials in nutrition/dietetics teach a course in basic human nutrition. This course is one of the selections in the health and wellness category in the required general education courses. This non-nurse support is sufficient in helping the School of Nursing programs achieve individual program goals and outcomes. The curriculum vitae for the non-nurse faculty will be available in the Document Room.

## **2.7 (AASN, BSN) Faculty are oriented and mentored in their areas of responsibilities.**

Program Directors ensure new faculty are integrated into the faculty role of teaching, service, and research for each program. New faculty are paired with an experienced faculty member in a similar role that serves as a mentor. An

orientation plan is addressed in the School of Nursing Faculty Handbook (page 59) and the SON Chair is ultimately responsible to ensure that the orientation was completed. Mentors use a checklist to assure that all aspects of the faculty role are addressed. In addition to assistance with grounded, distance, and online class organization and grading, the mentor orients the new faculty to student advising, committee assignments, College and University responsibilities, classroom management, and the culture of the academic setting. This mentoring relationship is ongoing until the new faculty is comfortable in their role.

Additional orientation for Blackboard, Smart Boards and other technology is included in the orientation. New full-time faculty are directed to the Interactive Teaching and Technology Center (ITTC) and the Computer lab coordinator in the College for more assistance. Faculty mentors and others supplement and support new faculty orientation by working on teaching/clinical assignments with new faculty.

New adjunct faculty are also oriented to their responsibilities. At the undergraduate level, Program Directors or their designee participate in the orientation. Orientation activities may be one-on-one or in group sessions. In addition to providing information about course content and clinical learning, issues such as teacher-student relationships, grading, giving student feedback, and evaluation are discussed. Faculty, who are responsible for clinical courses, continue to work with adjunct faculty throughout the term. For example, full-time faculty are in contact with adjuncts in the hospital during clinical sessions. Full-time faculty also review student work with adjunct faculty. Adjunct faculty have

contact information for full-time faculty for emergency situations. Orientation to technologies such as Blackboard is included on an as-needed basis.

**2.8 (AASN, BSN) and 2.6 (MSN/PMC) Systematic assessment of faculty performance demonstrates competencies that are consistent with program goals and outcomes.**

Performance reviews occur annually as required by Arkansas State University. Faculty complete a yearly productivity report and evaluation submitted to the Chair. The Chair of the School of Nursing meets with each faculty member at all sites to evaluate yearly goals and performance and establish benchmarks for the coming year. Faculty are expected to make significant contributions each year in teaching, service, scholarship, and practice. The expectations for faculty practice and ongoing certification in addition to teaching, service, and research, set the School of Nursing apart from other Colleges. Faculty provide a yearly review of the Program Director, Chair, and the Dean and these are compiled for their performance review. All faculty and administrator evaluations reflect the job descriptions of each position.

Students evaluate each faculty member and each course annually with an online combined course and faculty evaluation with the opportunity for written comments. All feedback in the form of comments is downloaded anonymously and reviewed by the Dean and the Chair of the School of Nursing prior to distribution to the faculty. Faculty peer evaluation is optional and strongly encouraged. Additionally, the Chair of the School of Nursing evaluates each faculty member annually after review of the School of Nursing *Merit Evaluation*

*Form* (see SON Faculty Handbook). Evaluation materials are retained in the employee files located in the Chair's office.

Student evaluations of adjunct and part-time faculty are reviewed by Dean, Chair, and Program Directors each semester. Student evaluations of full-time faculty are also reviewed by Dean and Chair. Instructor evaluations are distributed to that individual faculty. Course evaluations are reviewed by the Dean, Chair, Program Directors and faculty.

**2.9 (AASN, BSN) and 2.7 (MSN/PMC) Non-nurse faculty and staff performance is regularly reviewed in accordance with the policies of the governing organization.**

Evaluation of administrative specialists in the School of Nursing is completed by the Chair. Staff evaluations on distant campuses are completed by the Chair and site coordinators in compliance with the policies of Arkansas State University. In situations where secretary or clerical workers are shared, the Dean of Continuing Education and Community Outreach (Dean on Jonesboro campus who is responsible for CVN) evaluates these personnel. The Chair reviews student evaluations of full-time, part-time, adjunct, and non-nurse faculty each year to determine staffing needs for the next school year.

**2.10 (AASN, BSN) and 2.8 (MSN/PMC) Faculty engage in ongoing development and receive support in distance education modalities including instructional methods and evaluation.**

The faculty of the School of Nursing adopted the following definition of distance education:

*An educational process in which the majority ( $\geq 75\%$  within a course or  $\geq 50\%$  within a degree program) of the instruction occurs when a student and instructor are not in the same place. Instruction may be synchronous*

*or asynchronous. Distance education may employ correspondence study, audio, video, and/or computer technologies.*

Faculty are oriented, assisted and mentored in distance learning by course coordinators, faculty colleagues, and faculty mentors at all sites. Faculty are encouraged to participate in regularly scheduled classes, enroll in a summertime Technology Boot Camp, or request individualized help sessions with The Interactive Teaching and Technology Center (ITTC). Housed on the Jonesboro campus, the ITTC is a state of the art resource to help faculty integrate and use learning technologies to enhance how they teach. Face to face classes and online tutorials offer research support, assessment of student learning, and course design and delivery. Training and support is available for all sites for Tegrity, Smartboards, i>Clickers, Wikis, Spin Plus, Second Life, and other technologies.

Distant campuses have their own Blackboard support on site with group and individual training and support available onsite. Any distant campus faculty may come to the main campus for Blackboard training. Faculty from distant campuses have participated in the intensive summer workshops offered by ITTC. In addition to Blackboard and ITTC support on distant campuses, distant faculty may call or e-mail Information Technology Services (ITS) personnel or ITTC personnel on the Jonesboro campus.

Additional distance education support is offered by the ASU-J library and is available on-site, by telephone, or online. Assistance with library use and retrieval, research skills, use of catalogs and data bases, and using reference

books and print sources are provided by Instruction Librarians in grounded and online classes. Interlibrary loans, media services, and special requests are provided for faculty at all sites.

## STANDARD 3

### STUDENTS

**Student policies, development, and services support the goals and outcomes of the nursing education unit.**

**3.1 (AASN, BSN, MSN/PMC) Student policies of the nursing education unit are congruent with those of the governing organization, publicly accessible, non-discriminatory, and consistently applied; differences are justified by the nursing education unit purposes.**

Policies for nursing students at ASU are congruent with those of the governing organization. Information for students is available in various publications including print and electronic modes. University and School of Nursing information, general policies, and program information are published in the *Arkansas State University Undergraduate Bulletin* and the *Arkansas State University Graduate Bulletin*. Bulletins are available only online and are updated annually. The undergraduate bulletin is reviewed annually by the Registrar's Office and the Graduate School reviews the graduate bulletin. The *ASU Undergraduate Bulletin* is available at: <http://registrar.astate.edu/bulletin.htm>. The *ASU Graduate Bulletin* is available at <http://graduateschool.astate.edu/> or <http://registrar.astate.edu/bulletin.htm>. Bulletins are included in Site Visitor materials.

Student policies for both undergraduate and graduate students are published in the *Arkansas State University Student Handbook*. The *ASU Student Handbook* includes information on general academic policies, fee payment procedures, grievance processes, student housing, services and publications and student organizations, committees and governance. The handbook is

updated annually and is current for the year 2011-2012. Available only online, the *ASU Student Handbook* may be accessed at one of two websites:

<http://www2.astate.edu/a/student-affairs/student-conduct/student-handbook-cover-page.dot> and <http://studentconduct.astate.edu/studenthandbook.html>

The School of Nursing reviews and updates, on an annual basis, the following handbooks: *Undergraduate Nursing Student Handbook*, the *Graduate Information Guide (GIG)* and the *Nurse Anesthesia Student Handbook*. The *Graduate Information Guide* and the *Undergraduate Nursing Student Handbook* are available online while the *Nurse Anesthesia Student Handbook* is distributed to new students during their orientation. Several communication routes are used to notify students of new or updated policies: postings on individual course Blackboard sites and Bulletin Boards, announcements in class, use of electronic mail, ASU Daily Digest, and use of regular mail. Table 3.1-1 lists pertinent policies and their location.

**Table 3.1-1****Location of Student Policies in Published Documents**

<b>Policy</b>	<b>ASU Undergrad Bulletin 2011-2012</b>	<b>ASU Graduate Bulletin 2011-2012</b>	<b>ASU Student Handbook 2011-2012</b>	<b>Undergrad Nursing Student Handbook 2011-2012</b>	<b>Graduate Information Guide 2011-2012</b>
Non-discrimination	p. 2	p. 2	p. 11, 82	Preface	p. 15
Admission	pp. 20-27	pp. 22-29, 207-212	p. 67	pp. 27-28	pp. 22-25
Academic Progression	pp. 43-50	pp. 30-33		pp. 27-28	p. 27
Retention	p. 219			pp. 27-28	p. 27
Dismissal	pp. 49-50	pp. 31-32	p. 20	p. 30	p. 28
Graduation Requirements	pp. 40-42, 222-228	pp. 34-35, 207-212	pp. 14-16	pp. 45-57	pp. 30-40
Grievance & Appeals Process	p.50	p. 33	pp. 24-29	p. 22-23	pp. 54, 57

Additional information is included in student brochures and on the School of Nursing website accessible at <http://www.astate.edu/a/conhp/nursing/majors/>

In addition to the publications in Table 3.1-1 above, the website for the School of Nursing, <http://www.astate.edu/a/conhp/nursing/>, provides policies for both graduate and undergraduate students including admission criteria,

application procedures, plans of study, and curriculum. Admission to all programs in the School of Nursing is competitive and selective. Specific policies that differ from University policies are in place for nursing students. These policies are justified by state licensure requirements and public health considerations. One such policy is the required Test of English as a Foreign Language (TOEFL) for applicants whose primary language is not English. Additionally, students must have current immunizations including Hepatitis B, MMR, and Tetanus as well as current TB status and professional-level CPR certification. All students must complete a criminal background check and drug testing prior to clinical experiences if it is a requirement of the assigned clinical site. Licensed nurses in programs in the School must have a current unencumbered nursing license. Malpractice insurance is required for all undergraduate and graduate students. This information is published in the nursing section of the undergraduate and graduate bulletins as well as in the *School of Nursing Undergraduate Student Handbook* (p. 25) and the *Graduate Information Guide* (p. 53). Admission requirements are also published in brochures and on the School of Nursing website.

**3.2 (AASN, BSN, MSN/PMC) Student services are commensurate with the needs of students pursuing or completing the associate, baccalaureate, or master's programs or post-master's certificate, including those receiving instruction using alternative methods of delivery.**

ASU provides a variety of services to students. Personnel with appropriate qualifications conduct these services as listed in the Undergraduate and Graduate Bulletins. The services include health, counseling, career

services, financial aid and academic advising. Students are made aware of the services offered via brochures as well as the *ASU Undergraduate Bulletin* and the *ASU Graduate Bulletin* which are accessible through the Arkansas State University website. The Bulletins can be accessed through the Registrar's homepage or through the A-Z index. Information is also provided at student preview and orientation days. Table 3.2-1 displays the qualifications of personnel administering student services.

**Table 3.2-1**

**Qualifications of Student Services Administrative Personnel  
Jonesboro Campus**

<b>Service</b>	<b>Administrator</b>	<b>Academic Background</b>	<b>Experience</b>
Registrar	Ms. Tracy Finch	AS, BIS, Arkansas State University, 1992 BS, MIS, Arkansas State University, 1995	15 years in Admissions and Records 4 years as administrator
Student Health	Ms. Renata Vaughn, RN, APN, Director	BSN, Arkansas State University, 2002  MSN, Arkansas State University, 2007	9 years as RN 4 years as APN/NP 3 years as nurse manager, administrator
Counseling	Dr. Philip Hestand, Director	BA, Psychology, University of Central Oklahoma, 1981  MEd, Counseling Psychology, University of	28 years counseling experience  13 years administration

<b>Service</b>	<b>Administrator</b>	<b>Academic Background</b>	<b>Experience</b>
		<p>Central Oklahoma, 1983</p> <p>PhD, University of Oklahoma, 1988</p> <p>Child Guidance Intern, Oklahoma Department of Health, 1985-1986</p> <p>Clinical Internship, University of California-Irvine, 1986-1987</p>	
Academic Advising	Ms. Jill Simons, Director	<p>BFA, University of Arkansas, 1990</p> <p>MS (Human Development), University of Rhode Island, 1994</p> <p>Specialist Degree in Community College Teaching</p>	<p>11 years- Academic Advisor</p> <p>6 years- Administrator</p>
Career Management Center	Sharon Becker, Director	<p>MS, University of Wisconsin, 1989</p> <p>Education Specialist, University of Wisconsin,</p>	<p>15 years as a counselor</p> <p>15 years as an administrator</p>

<b>Service</b>	<b>Administrator</b>	<b>Academic Background</b>	<b>Experience</b>
		1997	
Financial Aid	Mr. Terry Finney	BS, University of Tennessee, 1978  MS (Education), Arkansas State University 1981	15 years university financial aid administrator 8 yrs MOHELA administrator of financial aid  3 yr ASU director of financial aid  3 yrs-Director of residence life

Student Health. Students on the Jonesboro campus have access to health services through the Student Health Center located next to the football stadium. Student Health is open Monday through Friday from 8:00 am to 5:00 pm. Students are seen by appointment and on a walk-in basis during specific hours. Students needing health care after hours are encouraged to go to local physicians' offices or emergency rooms. The University does not assume responsibility for payment of Emergency Room fees, prescriptions or other outside tests in these circumstances. An Advanced Practice Nurse (APN) is the Director for Student Health. Two APN's (Family Nurse Practitioners) and a full-time Licensed Practical Nurse comprise the staff. The APNs provide physical exams, basic laboratory tests, and can prescribe medications if needed.

Support staff for the health center includes a secretary and a collaborative physician. The center provides limited laboratory testing, immunizations and

multiple health screenings. Although fees are charged for some services, the office visit to the center is essentially free. This facility is duly accredited and approved by national and/or state bodies. The medical and nursing staffs meet the requirements of the institution and are under the jurisdiction of state regulatory agencies. The Student Health Center has a website, <http://www.astate.edu/a/student-affairs/health-care/index.dot> that provides direct links to sites that will assist with prescription medication, health and wellness promotion, smoking cessation, and nutrition.

Students located on the Mountain Home, Beebe, and West Memphis campuses have access to the services in Jonesboro; however, students are referred most frequently to their Primary Care Provider or local health clinics. In Mountain Home, students can also be seen by local physicians at the Christian Clinic free of charge.

Counseling. The University Counseling Center provides specialized services to help students perform better academically, cope with emotions, and be more effective in relationships with others. The Counseling Center also provides career assessments and test anxiety intervention. On the distant campuses, students have similar opportunities; however, if services required are of a more serious nature, the students may self-refer or be referred by faculty to local mental health service providers.

All services of the University Counseling Center (Jonesboro) are confidential and consistent with the State of Arkansas Counselor licensing law, and the State of Arkansas Psychologist licensing act. Hours of operation are

8:00 a.m. to 5:00 p.m., Monday - Friday. The staffing consists of a licensed psychologist, three licensed counselors (all have Ed.S. degrees in mental health counseling), four Ed.S. level interns, a psychology Ph.D. candidate practicum student, one postdoctoral psychologist Ph.D. and a secretary. Students may be seen by appointment or on a drop-in basis. Published drop-in hours are Monday through Thursday 12:00-3:00 and Friday 9:00 – 12:00. The center's staff strictly adheres to the ethical codes of their respective professions. Students are made aware of the services via brochures, the Undergraduate/Graduate Bulletins, the center web site and faculty/staff referral.

Advisement Services. Student Advisement Services provides a variety of services, primarily for undergraduate students, including coordination of undecided student advising, coordination of the Restart Program, coordination of summer advisement, advisor referrals, and answering questions related to advising for students and faculty. The staff includes two academic advisors and a coordinator. Three distinct programs should be highlighted: 1) Restart, 2) Early Alert, and 3) Perkins Grant. Restart is a pilot program designed to assist students who have been placed on academic suspension at the close of any given term. Students are allowed to continue their enrollment during the subsequent semester if they participate in the program. Early Alert is dedicated to improving student motivation, academic performance and satisfaction. It is dependent on faculty and staff referrals of students that appear to be having difficulty. Reasons a student might be referred to this program include poor attendance, low test or quiz scores, poor class participation, and a self-defeating

attitude. The Perkins Grant allows ASU to expand its recruitment initiatives to increase enrollment and retention in its two-year degree programs, including the AASN students. This grant provides for informational workshops on financial aid, a resource area in advisement services, walk-in tutorial services for study skills, supplemental and tutorial services for class workshops or one-on-one consultation regarding occupations, resume writing and job placement skills. An additional benefit of the grant fosters connections between students and mentors.

Students are made aware of advisement services during orientation, through brochures, and their web site: <http://www2.astate.edu/a/university-college/wilson-advising/>. Student advisement is provided in general advising sessions as well as by individually assigned advisors. Information for prospective nursing students is provided by School of Nursing faculty and/or the pre-Nursing Advisor. Both new and transfer students are invited to the general sessions. The College of Nursing and Health Professions has a mandatory advising policy. All declared majors (pre-professional and professional program students) are required to have met with an advisor prior to registration for courses each term. Undergraduate students interested in the AASN or BSN programs meet the pre-Nursing Advisor either privately or in New Student Orientation group advisement sessions. Advisement for students in special programs such as Restart or those needing developmental courses is coordinated through the Pre-Nursing Advisor as well. Students are advised by the pre-nursing advisor or by faculty. Information about nursing programs is

fielded by the Administrative Specialists. After admission to a nursing program, the student is assigned to a faculty advisor associated with the program of study. Undergraduate faculty carry an average advisee load of 20-25 students. Graduate faculty's advising load varies depending on the option. The Jonesboro campus offers a designated pre-nursing advisor while faculty provides advising to enrolled nursing students.

Potential graduate students receive advising information through The Graduate School, School of Nursing brochures, and the MSN Program website (<http://www.astate.edu/a/conhpnursing/majors/master-of-science-in-nursing/>) which provides information about the options for graduate study. Potential MSN students are seen by appointment with the MSN Director or individual graduate faculty for advisement. Currently enrolled MSN students are initially advised at the mandatory orientation and are required to meet with their assigned faculty advisor each semester prior to registration.

Students enrolled in nursing programs at the distant campuses, Mountain Home, Beebe, and West Memphis, have access to academic advising, counseling, career services, and financial aid either on site or in Jonesboro. Academic advising at distant campuses is provided by a combination of faculty and advisement personnel. Students currently enrolled are advised by nursing faculty. Individual advising appointments are made with the advisor at least once each term and more often if needed by the student. Prospective nursing students are usually referred to nursing faculty. Recruitment on all campuses is shared by advisement personnel and faculty. Faculty participate in recruitment

activities such as career days at local schools, preview/orientation days on campus, and information booths at selected career or nursing events. Faculty have also been involved in specific recruitment for transition programs (LPN to AASN, LPN to BSN, RN to BSN, and Second Degree Accelerated BSN) and the Master's program. The AASN faculty has collaborated with Perkins Grant advisors to recruit prospective students. The Graduate School provides information on the MSN program at recruitment events both in-state and out-of-state. CNHP graduate faculty may participate in these events and are conversant with general information about the MSN program. The College Executive Committee has met annually with career and advisement personnel to review activities and find avenues for collaboration.

Career Services. The Career Management Center provides services to all students and alumni. The purpose of the Career Management Center is to provide assistance in career decision-making and the job search process. Employment programs through the center include part-time jobs (on and off campus), federal work-study jobs, internships, full-time career jobs and summer jobs. Educational programs offered by this center include job search strategies, interviewing skills, resume writing assistance and etiquette workshops. The center also sponsors workshops and other resources for the students, including posting job opportunities on their web site, conducting job interviews in the Career Management Center, hosting three annual job fairs (including two for healthcare), referring senior and alumni resumes to employers, analyzing resume

and cover letters, conducting mock interviews, supplying current salary information and assisting in developing a career strategy.

The Career Management Center is located on the Jonesboro campus and is open Monday - Friday from 8:00 a.m. - 5:00 p.m. and is staffed with an Associate and an Assistant Dean, a Career Services Coordinator, a Career Placement Advisor and an administrative secretary and receptionist. Students are made aware of the services through brochures, Undergraduate and Graduate Bulletins and their web site, <http://www.astate.edu/careers/>. Many new services are available to all students, including students on distant campuses, via web access. Optimal Resume is a program that assists students with development of their resume, how to perform a job search, development of an e-portfolio, mock interviews, and web site development. Career Spots are videos that include topics for professionalism including interviews, appropriate dressing, asking about salaries, and “the art of thank you.” Career Connect is a database that is available to students for posting resumes and finding job opportunities. SIGI 3 is an Internet-based Career Assessment and Exploration Program designed to provide career information and methods of narrowing a career field based on a person’s particular values, interests, personality traits, and skills. A set of plans designed to help answer some of the more common career exploration questions such as “what is my major good for”, “how can I find a major”, and “what kind of career would be good for me” are provided.

West Memphis does not offer Career Services on campus; however, students are referred to career service counseling in the community. On the

Mountain Home campus, career counseling is available to all students. The Career Counseling office is staffed with a Masters prepared career advisor. In addition, the Mountain Home campus has a Career Pathways office that provides financial assistance for students who have a child under the age of twenty-one and have an income not to exceed 250% of the poverty level. For Mountain Home students, Inventory Assessment and Myers Briggs testing is mandatory.

Disability Services. The Disability Services Office promotes the efforts of Section 504 of the Rehabilitation Act of 1973 and the Americans with Disabilities Act of 1990 for students, by providing many services for the disabled. [Section 504 of the Rehabilitation Act of 1973 (Section 504, 29 U.S.C. ~794, amended 1992 and its implementing regulation at 34 C.F.R. Part 104 (2006); Title II of the Americans with Disabilities Act of 1990 (Title II), 42 U.S.C. ~12132, and its implementing regulation at 28 C.F.R. Part 35 (2006); Title IX of the Education Amendments of 1972 (Title IX); and, Age Discrimination Act of 1975 (Age Act)].

The purpose of the ASU Disabilities Handbook is to provide information and serve as a resource relative to Arkansas State University services for students with disabilities. The ASU Disabilities Handbook is located at: <http://www.astate.edu/dotAsset/220852.pdf> . The University is active in shaping attitudes and the physical environment to encourage participation of students with disabilities in the various aspects of university life, which includes identified parking and classroom desks/chairs. Disability Services makes arrangements for academic and support services in order to provide access to educational programs for students with disabilities. After admission to the University, and

after one has an established disability which meets the prescribed disability criteria, the student schedules an appointment with the campus staff and/or faculty members who will approve and provide the academic adjustments required. If a student has functional limitations due to a disability that requires modification in a nontraditional way, options are extended and reasonable accommodations are provided which allows alternatives for students to meet course requirements. This may include alternate test taking or identified “note takers”. Disability Services promotes the evaluation of a student's academic achievement to reflect the student's achievement and abilities rather than the disability.

Financial Aid. The Financial Aid Office coordinates all financial assistance available to students at ASU with the exception of veterans. Student aid at ASU is available in the form of scholarships, federal/state grants, loans and work-study positions. The Financial Aid Office on the Jonesboro campus is staffed by 19 individuals who assist with the application process, counseling needs, and awarding the financial resources. Scholarships and federal aid may be applied for by using Internet applications. Students may also schedule appointments with financial aid counselors. The office maintains a web page: <http://www.astate.edu/finaid/>. A financial aid officer is also available on the Beebe campus. Additionally, a fulltime financial aid officer is charged with scheduling meetings at the West Memphis and Mountain Home campuses at least once a semester and is available during regular office hours via phone and e-mail. Additional on site meetings can be scheduled as needed. More

information can be found in multiple brochures about the office and individual sources of aid as well as the Undergraduate/Graduate Bulletins.

Additional Services. Additional resources/offices are also available on the ASU-Jonesboro campus. Information about these resources is found in the Undergraduate/ Graduate bulletins. Informational sheets and brochures as well as websites describe these resources. Resources include: Office of Student Affairs, Office of International Student Services, Office of Student Life, University Police, Residence Life, Student Activities Board, New Student Orientation, Testing Center, Vocational Rehabilitation, Volunteer Services Programs, Youth Opportunities Unlimited, Center for English as a Second Language, Veterans Administration Benefits, Beck Pride Center for America's Wounded Veterans, Audio-visual aids, on-campus Post Office, and Veterans Representative Resource Person.

**3.3 (AASN, BSN, MSN/PMC) Student educational and financial records are in compliance with the policies of the governing organization and state and federal guidelines.**

Student Educational Records. Educational records of undergraduate ASU students are maintained by the Registrar's Office and graduate ASU student records are maintained by the Graduate School. Records maintained by the Registrar's Office and Graduate School are retained permanently. The Office of the Registrar is responsible for official applications, transcripts, evaluation of transfer work, and grades earned by students. These records along with immunization records and any other correspondence regarding a student is scanned and kept in the electronic student file indefinitely. A policy regarding

student records is published in the ASU 2010-2011 Undergraduate Bulletin on page 34 and on the website at <http://www.astate.edu/a/registrar/faculty-staff/ferpa.dot>. This policy relates the Family Educational Rights and Privacy Act of 1974 (FERPA) dealing with the protection of the right of privacy of students governing access to and release of student records (page 34 of the Undergraduate Bulletin and page 111 of the Graduate Bulletin). Any faculty or staff that has access to student records is required to successfully complete FERPA training. A copy of this Act is located in the Office of the Registrar.

Financial records are maintained in the Office of Finance for all nursing students. Records at Arkansas State University are maintained in accordance with Federal Guidelines. The schedule of record retention procedures is accessible at <http://www.astate.edu/dotAsset/221690.pdf>.

The School of Nursing maintains student records relative to advisement and specific School requirements such as current immunizations, professional liability insurance, criminal background checks and CPR certification. The School keeps records of Arkansas nursing licensure for students. The School of Nursing Faculty Handbook (Page 79) includes a policy regarding the retention of student papers and tests stating tests and other evaluation materials must be kept at least one semester after a grade is given.

The School of Nursing Faculty Handbook (pages 63) and the 2011-2012 Student Handbook (pages 83-84) contains procedures related to the inspection and disclosure of student records and outlines the responsibility for maintenance of various student records.

**3.4 (AASN, BSN, MSN/PMC) Compliance with the Higher Education Reauthorization Act Title IV eligibility and certification requirements is maintained.**

**3.4.1 (AASN, BSN) A written, comprehensive student loan repayment program addressing student loan information, counseling, monitoring, and cooperation with lenders is available.**

**3.4.2 (AASN, BSN) Students are informed of their ethical responsibilities regarding financial assistance.**

Arkansas State University is in compliance with the Higher Education Reauthorization Act Title IV. Certification records are on file in the Financial Aid Office. Students are counseled regarding repayment of student loans at time of application and again with exit interviews prior to graduation with emphasis on importance of loan repayment. The 2009 (most recent published) default rate for Arkansas State University is 13.3%. This is above the national average (7.09%), however, it correlates with the higher amounts of PELL grant money dispersed (\$26 million compared to \$12 million at comparable schools). This figure reflects the lower income demographic of the student population of this university. The financial aid office does not track loan defaults by specific programs.

Each student who is awarded a loan (includes Federal Direct Loan, Stafford Loan, and Graduate Plus) must complete a student interview and repayment counseling session which is provided online. The interview must be completed prior to the distribution of funds. A link to [www.studentloans.gov](http://www.studentloans.gov) provides information loan repayment, loan calculations, what to do if the student is having difficulty making payments and loan forgiveness programs. Information

regarding loans and repayment programs are available at

<http://www2.astate.edu/finaid/>.

Each student who receives financial assistance receives an award letter. The award letter explains the financial and ethical responsibilities of accepting the award including repayment and the use of the funds. The student must complete an award acceptance agreeing to the terms of the award prior to distribution of funds. In addition, the student is informed of their requirement to maintain a specific GPA. Information regarding this policy is available online at the following address: [http://www2.astate.edu/a/student-affairs/finaid/financial-aid-information/additional-information/sap\\_policy.dot](http://www2.astate.edu/a/student-affairs/finaid/financial-aid-information/additional-information/sap_policy.dot).

**3.5 (AASN, BSN, MSN/PMC) Integrity and consistency exist for all information intended to inform the public, including the program's accreditation status and NLNAC contact information.**

The 2011-2012 School of Nursing Undergraduate Student Handbook (pg. 14) and Graduate Information Guide (pg. 14) inform the public of the School's accreditation status through the National League of Nursing Accrediting Commission. The accrediting organization and contact information is also provided on all informational brochures and pamphlets that promote the nursing programs at Arkansas State University. All disseminated materials are reviewed and updated on an annual basis and as needed.

**3.6 (AASN, BSN, MSN/PMC) Changes in policies, procedures, and program information are clearly and consistently communicated to students in a timely manner.**

Students receive updated course syllabi on the first day of each class. Throughout the semester communication of changes in policies, procedures, and

program information is provided directly to students through US Postal Service, e-mail, (all students are required to have a college system e-mail which is used for faculty communication), class announcements, the Blackboard learning system, and/or phone calls. Changes in policies such as readmission requirements and increasing passing grade to 75% for completion of undergraduate courses are made at least six months in advance. New policies are published annually in the School of Nursing Undergraduate Student Handbooks, Graduate Information Guide, Undergraduate Bulletin, Graduate Bulletin, and the Nurse Anesthesia Handbook.

**3.7 (AASN, BSN, MSN/PMC) Orientation to technology is provided and technological support is available to students, including those receiving instruction using alternative methods of delivery.**

Each course in the SON has a Blackboard site for course information and other content. All students entering into the AASN program are required to have Introduction to Computers before beginning their second semester. An introduction to the Blackboard system is provided for all incoming students including students on distant campuses. The First Year Experience classes (intended for students pursuing baccalaureate degrees) which are mandatory for every Freshman on the Jonesboro campus cover using technology on campus with an introduction to the Blackboard system. Graduate students participate in a required orientation to technology. Faculty orients students to the use of Blackboard for web, web-enhanced, and web-assisted classes.

All campuses have computer labs available to students. The hours vary according to the campus. Information and Technology Services (ITS) at each site

provides support to students for computer software, student email and Blackboard technology. From the Jonesboro campus this assistance is provided to all students Monday through Friday from 8:00 a.m. to 10:00 p.m. by phone. Assistance is also available through the ITS website via LivePerson which offers a “live chat” program to all students. The University (Jonesboro) also provides free Microsoft software for MAC or Windows to students which can be picked up from the University Library Lab or from the front desk at ITS. For students on distant campuses, the University will mail a download following completion of a form which is available on the ITS web site. The University also provides Symantec Antivirus for the students’ personal computers. Additional information on computers and technology is provided in Standard 5. Schedules of operating hours for computer labs will be available in the Document Room.

MSN students receive information about technology including the Blackboard platform in a required orientation prior to enrollment. Information includes obtaining needed software, passwords, and e-mail accounts. Library information is also presented including search tools, relevant databases and working from remote computers. Personnel from the Library and the ITTC usually participate in this orientation.

Each undergraduate student is required to purchase a student response device at the beginning of the program and instructed on the use of the clicker. Interactive student learning is implemented in the classroom setting on all campuses. Most classrooms in Jonesboro are equipped with student response

device base units while Mountain Home, West Memphis and Beebe campuses have a least one portable base unit available for use in their classrooms.

Many Faculty utilize the Tegrity feature on Blackboard to provide additional learning. This mode of instruction allows the students to hear lectures multiple times at their convenience. This mode also allows students to download the lecture to an iPod/MP3 player. Some courses are delivered over a compressed video network system (CVN) to multiple campuses at one time allowing students to engage in dialogue with faculty on distant campuses. The equipment is managed by Continuing Education and Community Outreach on the Jonesboro, Beebe, and Mountain Home campuses. Mid-South Community College in West Memphis manages the equipment for the West Memphis campus. Information regarding CVN is also provided in the Undergraduate Bulletin, pages 75-76, 225, and 280.

The Clinical Learning Labs (or simulation/skills labs) engage students on all campuses. The Jonesboro campus provides low, mid and high fidelity simulation experiences with a full-time simulation coordinator. The distant campuses have low and mid fidelity simulators. Selected faculty on each campus have been trained in the use of simulation as a teaching/learning strategy and is able to provide instructional support to students utilizing this mode of learning.

*Note: For nursing education units engaged in distance education, the additional criterion is applicable:*

**3.8 (AASN, BSN, MSN/PMC) Information related to technology requirements and policies specific to distance education is clear, accurate, consistent, and accessible.**

All programs have policies regarding technology. Information for students about CVN and use of the Discussion Board in Blackboard and e-mail is found in course syllabi and/or student handbooks. Etiquette related to e-mail and online discussions are included.

To make sure that every student is aware of policies regarding computer use, all are required to review and sign the Student Handbook. This document includes specific computer guidelines listed under “Computer and Network Use Policy”. All students have access to computers while on campus. These computers are equipped with internet access and Microsoft programs. In the AASN program, course syllabi list specific guidelines for CVN and Distance Education Etiquette. To ensure that students are familiar with the Compressed Video Network (CVN), each student is given course syllabi at the beginning of the semester.

Students in all programs are required to set up and communicate through their University system (“astate”) email address as stated in course syllabi and admission letter. Course syllabi (which are also placed on the Blackboard Learning System) require students to have Electronic and Blackboard access through Arkansas State University. Tutorials are provided through the

Information Technology Technical Support group. (See section 3.7 above).

Students enrolled in the MSN program are required to possess specific computer competencies prior to enrollment. These include the use of email, use of the World Wide Web, uploading and downloading of files, and access to server capability to support academic programs (see Graduate Information Guide, page 23). The Graduate Information Guide (GIG) will be available in materials sent to visitors and is also available under program information at

<http://www.astate.edu/a/conhp/nursing/majors/master-of-science-in-nursing/>

Information Technology technical support is available to all students to assist with technological needs. This department provides all students access to current Microsoft software to download on their personal computer.

## **STANDARD 4**

### **CURRICULUM**

**The curriculum prepares students to achieve the outcomes of the nursing education unit, including safe practice in contemporary health care environments.**

#### **Introduction**

The philosophy and organizing framework of the SON provide the underpinnings for the three levels of education: associate degree, baccalaureate degree and master's degree. (See Philosophy discussion in Standard 1). The SON faculty have built a curriculum that flows from one level to the next considering common issues as well as degree specific outcomes. At the AASN level, a traditional and a LPN to RN option is offered. Traditional, Second Degree Accelerated, LPN to BSN and RN to BSN options are offered at the BSN level. Options at the master's level include adult health clinical nurse specialist, nurse educator, nurse administrator, family nurse practitioner and nurse anesthesia.

The integrity of the curriculum design is maintained by the congruence that exists among the philosophy, organizing framework, student learning outcomes and program outcomes in all programs of the SON. Organization of content into courses, sequencing of courses and credit allocation are based on the mission, philosophy and organizing framework. The organizing framework is not based on any one theorist, but is a compilation of the values and philosophy of the faculty. Further, the organizing framework provides the basis for

development of the program outcomes and thus serves as the foundation for all student learning outcomes and course content.

The organizing framework of the school of nursing is derived from the philosophy and has four major components. The four components are values, role, knowledge and process. These components are integrated at each program and degree level and provide a construct for development of objectives and outcomes. The framework model clearly shows how each of the components increases in complexity at the three levels of education. The model is visualized as a circular process with each component dependent upon the others. This interdependence is best understood by discussing the components individually.

The first major component, values, is defined as the system of beliefs that guide behaviors, attitudes and moral judgment. Personal values reflect cultural and social influences, relationships and individual needs. Professional values guide nurses' behavior to act in a manner consistent with nursing responsibilities and standards of practice. We believe professional values can be formed through reasoning, observation and experience. Core values, transcending personal and professional values, have been identified by the faculty: integrity, excellence, diversity, service, learning and student-centered (See Standard 1, page 18). The associate graduate possesses an awareness of personal values and how these values may influence care delivery. Additionally, the associate graduate incorporates professional values in assisting individuals with the process of value clarification that may impact health care decisions. The baccalaureate graduate has a global perspective and is able to help individuals clarify or re-prioritize

personal values, minimize conflict and achieve consistency between values and behaviors related to health. The masters' prepared graduate applies professional values when designing health care systems in response to societal need. The master's graduate is able to engage in activities that influence policies and service delivery to diverse populations in a variety of settings.

The second major component is role. The faculty believe provider of care, manager of care and member of the profession (NLN) are key elements of this component. At the associate degree level, emphasis is placed on providing and managing direct care to individuals with common well-defined problems. The associate degree graduate functions as a team member using nursing diagnoses and established protocols for individuals in acute care and community-based settings. Additionally, the associate prepared graduate participates as a member of the profession in appropriate specialty and politically focused nursing organizations. The baccalaureate degree nurse provides direct and indirect nursing care to individuals, families, groups and populations. The baccalaureate graduate has the ability to individualize nursing diagnoses and protocols to enhance the design and coordination of preventative, complex and restorative care. As a member of professional organizations the graduate has the capacity to assume leadership and advocacy roles. The master's graduate is able to function independently in the provision of direct and indirect care. Practice settings for the master's prepared graduate are multi-dimensional. Inherent is the ability to design, facilitate and coordinate care for individuals in a variety of health care settings. Graduates have the skills necessary to lead, effect policy,

and mentor as members of specialty and politically focused nursing organizations.

The third major component is knowledge. The general education curriculum provides a foundation of liberal arts and sciences for the associate and baccalaureate students. These courses help provide the basic psychosocial, spiritual, humanistic, and legal components which assist students in developing an appreciation of each person's interaction with the environment. The knowledge gained enhances the nurse's ability to think critically, reason logically, and communicate effectively. The associate degree core focuses on liberal arts and sciences, which include courses in English, college mathematics, basic biological science, history and psychology. Content for the associate degree student provides basic nursing knowledge that is applied to common well-defined problems. The baccalaureate student's general education core is expanded to provide a more in depth science basis and global view of society. These courses include physical sciences, sociology, world civilization and humanities. The support courses of pathophysiology and statistics are incorporated into the nursing curriculum as the student progresses into complex nursing theory and application. The master's program builds on the baccalaureate curriculum. Core graduate courses include theory, research, role, and health policy. These courses prepare the master's graduate to integrate the other components of role, process and values. The key support courses include advanced pathophysiology, advanced pharmacology and advanced health assessment/physical diagnosis. Content in specialty courses reinforces

concepts in the core courses as well as preparing the graduate for advanced nursing.

Process, the fourth and final major component of the organizing framework, recognizes the systematic approach used in the profession of nursing and incorporates the other three components, role, knowledge and values, to evaluate the needs of individuals, groups and/or communities. The process involves assessment, planning, implementation, and evaluation on a continual basis. All nurses are prepared to use this process but as one acquires additional knowledge, the nurse begins to use the components of the process in unique and creative ways. As one moves through the educational program, elements such as communicating, educating, supporting, coaching and monitoring are incorporated into the process. Additionally problem solving, planning, inquiry, and appraisal are used to derive and evaluate the interventions developed.

The associate degree graduate uses a systematic process in nursing care to implement and modify known nursing interventions. The baccalaureate prepared graduate has the capability of anticipating, individualizing, implementing and evaluating various interventions according to unique situations and cultural responses. The master's graduate generates and designs nursing interventions. The master's graduate recognizes the interdependence of theory, practice and scientific inquiry when creating, predicting, and evaluating interventions that are complex and varied. At all levels relevant research literature is utilized in the application of the nursing process.

In summary, the philosophy and organizing framework work in concert. Current applicable research is integrated throughout the curriculum and utilized in the clinical practice areas. Course work provides theoretical and clinical practice experiences to enable students to integrate knowledge from nursing, science and the humanities. The four major concepts and multiple unifying themes provide direction for the curriculum design and program outcomes. Table 4.1-1 shows the relationship among the philosophy, organizing framework and AASN, BSN, and MSN Program outcomes.

**Table 4.1-1**

**Selected Elements of Philosophy, Organizing Framework and Program Outcomes**

<b>Philosophy</b>	<b>Organizing Framework</b>	<b>Program Outcomes</b>
The goal of health care is to promote, maintain, or restore an optimal level of wellness. Nurses act as advocates in assisting persons to gain access to and secure maximum benefit from the health care system. ...nurses as professionals collaborate to provide the highest level of health care possible.	Role	AASN I, II, IV, V, VI  BSN I, II, III, VI,VII,VIII,IX  MSN 2, 4, 8, 9
...nursing is both an art and a science. This unique altruistic discipline has evolved	Knowledge	AASN II, V

<b>Philosophy</b>	<b>Organizing Framework</b>	<b>Program Outcomes</b>
<p>from the study and application of its own interventions as well as applying knowledge from a variety of disciplines.</p> <p>To acquire the knowledge and judgment inherent in practice, nursing education focuses on critical thinking, decision-making, analysis, inquiry and research.</p>		<p>BSN I,II, V, VI</p> <p>MSN 1, 2, 3, 4, 5, 6</p>
<p>...each individual has a right to quality health care.</p> <p>...nursing refines its practice in response to societal need...obligation of the nursing curriculum to include leadership, change strategies, professionalism and community service.</p>	Values	<p>AASN I, VI</p> <p>BSN I, III, V, VII, IX</p> <p>MSN 6, 7, 8, 9</p>
<p>The focus of nursing is the provision of care across the health care continuum utilizing a systematic nursing process.</p>	Process	<p>AASN I, III, VI</p> <p>BSN II, III, IV, V, VI, VII, VIII</p> <p>MSN 1, 2, 3</p>

## AASN Program

### 4.1 (AASN) The curriculum incorporates established professional standards, guidelines, and competencies, and has clearly articulated student learning and program outcomes.

The faculty for the AASN program incorporate the associate degree competencies from the National League for Nursing *Outcomes and Competencies for Graduates of Practical/Vocational, Diploma, Associate Degree, Baccalaureate, Master's, Practice Doctorate, and Research Doctorate Programs in Nursing* (2010) in the AASN curriculum. Elements of the *Outcomes and Competencies* related to Associate Degree Programs are found in the program and student learning outcomes and student learning experiences. See Table 4.1-2 for examples.

**Table 4.1-2**

#### **Elements from NLN *Outcomes and Competencies* in AASN Curriculum**

<b>Selected elements from NLN Outcomes and Competencies for Graduates of Associate Degree Programs in Nursing (2010)</b>	<b>Selected Student Outcomes</b>	<b>Selected Learning Experiences</b>
<i>Human Flourishing.</i> “Advocate for patients and families in ways that promote their self-determination, integrity, and ongoing growth as human beings”.	NRSP 1243 Employ appropriate teaching/learning principles for patients and families.	Identify learning needs and initiate incidental teaching at the bedside, noting verbalization of understanding of information  Incorporate patient teaching into the plan of care

Selected elements from NLN Outcomes and Competencies for Graduates of Associate Degree Programs in Nursing (2010)	Selected Student Outcomes	Selected Learning Experiences
	NRS 2252 Examine the role of the associate degree nurse in promoting education of patients and families.	<p>Describe the application of teaching/learning principles in educating staff, patients and the community</p> <p>Critique a patient educational handout using established criteria</p> <p>Construct a formal teaching plan for a selected patient population</p>
<p><i>Nursing Judgment</i>  “Make judgments in practice, substantiated with evidence that integrate nursing science in the provision of safe, quality care and promote the health of patients within a family and community context.</p>	NRSP 1222 Demonstrate effective use of technology and standardized practices that support safety and quality in providing patient care.	<p>Use the Electronic Medical Record while ensuring HIPAA compliance in the clinical setting</p> <p>Use of simulation, both high tech and low tech, based on safe clinical practice</p>
	NRSP 2224 Relate bio-psycho-social-cultural concepts in making decisions to meet the needs of patients and families in acute care settings.	<p>Relates pathophysiological concepts to diagnostic tests and laboratory results and incorporates into the plan of care and concept maps</p> <p>Uses critical thinking skills to analyze available data and identify and prioritize actual, risk, and wellness nursing diagnoses and collaborative problems</p>

Selected elements from NLN Outcomes and Competencies for Graduates of Associate Degree Programs in Nursing (2010)	Selected Student Outcomes	Selected Learning Experiences
		with care planning tools
<i>Professional Identity</i> Implement one's role as a nurse in ways that reflect integrity, responsibility, ethical practices, and evolving identity as a nurse committed to evidence based practice, caring, advocacy, and safe, quality care for diverse patients within a family and community context.	NRS 1252 Discuss personal and professional values, ethics, and legal principles to create an optimal culture of safety.	In class discussion through role playing - good vs. poor practice  In-class case study assignments
	NRSP 2224 Relate personal values associated with recognized legal and ethical concepts as a provider of care and member of the profession.	Completion of Reflective Log or Simple 7 tool weekly  Communicates with patients, families, and interdisciplinary staff in a professional manner.  Documents patient care in the EMR
<i>Spirit of Inquiry</i> Examine the evidence that underlies clinical nursing practice to challenge the status quo, question underlying assumptions, and offer new insights to improve the quality of care for patients,	NRS 2244 Support the inter-professional team through effective collaboration and shared decision making to achieve safe, quality care for patients and families in the acute care setting.	Make referrals to the inter-professional hospital team when providing care to high acuity patients

<b>Selected elements from NLN Outcomes and Competencies for Graduates of Associate Degree Programs in Nursing (2010)</b>	<b>Selected Student Outcomes</b>	<b>Selected Learning Experiences</b>
families, and communities.	NRS 2262 Describe processes used to improve nursing practice substantiated with evidence to promote a culture of safety when caring for patients.	Develop orientation plans and apply the delegation model during leadership experience with underclassmen

The AASN curriculum also reflects responses to national reports on nursing and health care. The five core competencies identified in the Institute of Medicine (IOM) Report Crossing the Quality Chasm: A New Health System for the 21<sup>st</sup> Century (2001) and further developed by the Quality and Safety Education for Nurses (QSEN 2005; <http://www.qsen.org>) are integrated in the curriculum. The QSEN competencies—patient centered care, teamwork and collaboration, evidence-based practice, quality improvement, informatics and safety—serve as resources for the development of program and student learning outcomes. See Table 4.1-3 for selected QSEN competencies.

**Table 4.1-3**

**Selected QSEN Competencies, Program Outcomes, Course Outcomes and Student Learning Activity for AASN Program**

<b>QSEN Competency</b>	<b>Program Outcome</b>	<b>Student Learning Course Outcome</b>	<b>Student Learning Activity</b>
Evidence-Based Practice	Relate the use of the nursing process in providing evidence-based care to promote, maintain and restore an optimal level of wellness in individuals.	NRS 1214 Describe the nursing process for meeting basic needs of individuals.	Nursing process introduced to traditional students; implementation of nursing process seen in NRSP 1222 Fundamentals of Nursing Practicum
		NRSP 1243 Demonstrate skills necessary for implementation of the nursing process to provide safe quality care for patients and families.	Completes health assessment/care plan incorporating evidence based interventions.
		NRSP 2244 Relate the necessary skills for implementation of the nursing process to provide safe quality care for patients and families in acute care and community based settings.	Completes daily clinical work citing scientific rationale for client interventions and evidence based patient teaching; completes a concept map incorporating evidenced based interventions
Safety	Employ vigilance and standards of practice to	NRSP 1222 Demonstrate effective use of	Demonstrate nursing skills safely and

	mitigate errors and to promote a culture of safety through individual performance and system effectiveness.	technology and standardized practices that support safety and quality in providing patient care.	effectively.
		NRSP 2224 Apply principles of safety when providing care to patients/families in the acute and community-based care settings.	Develop plans of care (weekly) incorporating National Patient Safety goals and other resources, use SBAR communication technique, incorporates safety standards when caring for patients in psychiatric clinical settings

The AASN curriculum embodies the criteria and standards of practice outlined in the Arkansas State Board of Nursing Nurse Practice Act. The State of Arkansas Rules and Regulations state that the practice of professional nursing requires substantial specialized judgment, skill based on knowledge, and application of the principles of biological, physical, and social sciences.

Arkansas State Board of Nursing Nurse Practice Act:

<http://www.arsbn.arkansas.gov/lawsRules/Pages/nursePracticeAct.aspx>

and Rules and Regulations:

<http://www.arsbn.arkansas.gov/lawsRules/Pages/rules.aspx>.

The LPN to RN and traditional AASN options of study proceed from basic knowledge to more complex and/or specialized concepts with beginning courses providing a foundation for future learning. The curriculum plan is logical and sequential, proceeding from assisting patients in meeting basic human needs to caring for patients with well-defined, common acute and chronic illnesses. The student progresses from the performance of basic skills with guidance to more independent care of small groups of patients. Each nursing course is planned to include both the acquisition of new knowledge and the application of this knowledge in an appropriate health care setting. The process of applying theories from the classroom to patient care situations is repeated in each nursing course as the student gains knowledge of all body systems and human functioning for patients throughout the life cycle. The AASN program's utilization of the sciences and humanities for development of content is clearly delineated in the organizing framework (knowledge). For example, knowledge of anatomy and physiology is expanded in each of the theory courses. Plans of Study for the AASN Program are in Appendix D.

#### **4.2 (AASN) The curriculum is developed by the faculty and regularly reviewed for rigor and currency.**

The faculty utilize the Systematic Evaluation Plan (SEP) for curriculum review. The AASN program has biannual faculty retreats that are conducted specifically with the goal of ensuring curriculum integrity, currency and rigor. Biannual retreats include a review of student learning outcomes, content, instructional strategies, and evaluation tools for each course. End of semester course evaluations and overall curriculum evaluations are among the data

utilized for the reviews. After the review, action plans are used to implement changes and modifications into the curriculum. Faculty from all campuses participate in retreats. Annual reviews are conducted to maintain consistency throughout all campuses and to review evaluation data. Minutes will be available in the Document Room. Examples of curriculum changes are incorporated into discussions in Standard 6 and the SEP.

The AASN faculty collaborate on syllabi, course content, learning strategies and evaluation methodologies to ensure consistency among the sites. Materials illustrating this consistency will be available in the Document Room. Additionally, ongoing curricular issues are discussed at scheduled faculty meetings in relation to student learning outcomes. Faculty also consider trends and curricular guidelines in determining the curriculum currency and relevance. Revisions to the curriculum are made by the curriculum committee composed of the entire AASN faculty and are documented in the program minutes. Any revisions that impact another program are brought to the entire SON faculty and documented in the SON faculty minutes.

**4.3 (AASN) The student learning outcomes are used to organize the curriculum, guide the delivery of instruction, direct learning activities, and evaluate student progress.**

Student learning outcomes flow from program outcomes and clearly show a logical sequential curriculum plan and focus on AASN education. Faculty have developed a curriculum map to illustrate progression of student learning. A comparison of curriculum maps from each program level also differentiates

associate, baccalaureate and master's level education. The curriculum map for the AASN program will be available in the Document Room.

The organizing framework is integrated throughout the curriculum and reflected in the program outcomes. Learning outcomes are used to guide learning activities and evaluate student progress in each course. Table 4.1-2 illustrates the use of student learning outcomes and learning experiences in relation to the NLN Outcomes. Methods of evaluation will be discussed at length in Criterion 4.5 of Standard 4.

*Note: AASN, BSN, MSN/PMC Criterion 4.4 is discussed together on page 131.*

**4.5 (AASN) Evaluation methodologies are varied, reflect established professional and practice competencies, and measure the achievement of student learning and program outcomes.**

A wide variety of evaluation tools are used to assess learning in the AASN program. Evaluation is guided by student learning and course outcomes as well as NLNAC and QSEN competencies. Evaluation methods are listed on syllabi for each didactic and clinical course. Student evaluation equality is achieved by using a variety of methods such as assignment-specific rubrics for scoring student performance and norm-referenced examinations (HESI) for each semester. Computer analysis of multiple choice items assists in establishing validity and reliability of test items. Faculty teams assigned to courses evaluate test item results on curricular exams. For example, exam questions are evaluated to insure the questions are written in the cognitive level of application and above. Item distracters are also reviewed for improved item discrimination

ratios (IDRs). Results of such analyses and reviews may impact future use of test items. Faculty with item writing abilities serve as resources for development and review of test items.

Analysis of data from various evaluation methods has directly impacted the AASN program curricula. Examples include institution of readmission testing, implementation of modified structured learning activities (SLA) for CVN courses, and a required increase in course grade to 75% for successful course completion.

The following table (4.5-1) illustrates the relationship of select QSEN competencies to course outcomes, learner activities and methods of evaluation in the AASN Program.

**Table 4.5-1**  
**AASN Use of Selected QSEN Competencies, Course Outcomes and Evaluation Methodologies**

<b>QSEN Competency</b>	<b>Course Outcome</b>	<b>Learner Activity</b>	<b>Method of evaluation</b>
Teamwork and Collaboration	NRSP 1243 Determine basic needs of patients and families through consultation with the inter-professional team members.	Participate in hand offs to staff  Seeks assistance from nursing staff and interdisciplinary team members  Completes written plans of care  Identifies the need for community referrals	Clinical Evaluation Rubric  Self Evaluation  Health Assessment/Care Plan grading rubric

	NRS 2252 Examine methods for effective collaboration with the inter-professional team.	Classroom Discussions Small group work Role play Community assessment	Quizzes, written exams, participation in classroom discussion, Grading rubric Clinical Evaluation Rubric Self-Reflection Directed Self-Learning Tools
Informatics	NRSP 1222 Demonstrate effective use of technology and standardized practices that support safety and quality in providing patient care.	Participate in simulation activities using high fidelity manikin or low tech approaches to assess the learner's clinical skills in a simulated environment	Grading Rubric
	NRS 2262 Evaluate responsibility and accountability through evidence based management in assuming the role of provider of care, manager of care, and member of the profession .	Classroom discussion, small group activities, i>clicker, Participate in data collection for quality assurance  Research evidence for best practices	Class participation Quizzes Exams

*Note: AASN, BSN, MSN/PMC Criteria 4.6, 4.7, 4.8, and 4.9 discussed starting on page 135.*

## BSN Program

**4.1 (BSN) The curriculum incorporates established professional standards, guidelines, and competencies, and has clearly articulated student learning and program outcomes.**

The BSN program uses *The Essentials of Baccalaureate Education for Professional Nursing Practice* (AACN, 2008) as a guide for structuring the curriculum. Table 4.1-4 reflects selected elements of the utilization of *The Essentials* as it relates to the nursing curriculum.

The BSN program contains several options including the traditional BSN, LPN to BSN, Second Degree Accelerated and RN to BSN. The BSN curriculum plan flows logically from basic nursing concepts to more complex applications of nursing knowledge with each semester building upon the previous one until the senior year. The sophomore level focuses on beginning nursing concepts as well as health promotion, health assessment, pathophysiology, and an introduction to acute care nursing. The junior level further develops acute care nursing theory and incorporates courses in pharmacology and research. During the senior year students expand the nursing role to include management, critical care and emergency nursing, community health, rehabilitation and chronic illness and professional issues. All BSN options are congruent with the existing curricular plan.

**Table 4.1-4**

**Use of Standards in BSN Curriculum Illustrated by Elements from AACN  
Essentials, Selected Learning Outcomes and Learning Experiences**

<b>Selected Elements from BSN Essentials (AACN, 2008)</b>	<b>Selected Student Learning Outcomes</b>	<b>Selected Learning Experiences</b>
II. Basic Organizational and Systems Leadership for Quality Care and Patient Safety. "Knowledge and skill in leadership, quality improvement, and patient safety are necessary to provide high quality health care."	NRSP2432/ 2343. Describe factors that create a culture of safety including the National Patient Safety Goals.	Orientation by staff educator at each clinical site includes review of National Patient Safety Goals, goals implemented in clinical practice (ex., medication administration and SBAR communication)
	NRSP 3453/3325. Apply standards/protocols for safe delivery of care to patients/families in acute care settings.	With assistance students initiate, monitor and evaluate clinical protocols (ex., potassium, insulin) and implement core measures (ex., pneumonia, CHF) in the hospital setting
	NRS 4466/4366. Demonstrate safe practice as a manager in the delivery of care for acute and critically ill patients.	Participation in data collection for a hospital quality improvement project, apply principles of interpersonal/interdisciplinary communication by coordinating care with nursing staff and other members of the health care team, senior students assist juniors in utilizing chain of command and conflict resolution/change theories, utilize teamwork skills while supervising junior clinical students

<b>Selected Elements from BSN Essentials (AACN, 2008)</b>	<b>Selected Student Learning Outcomes</b>	<b>Selected Learning Experiences</b>
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.”	NRSP 2432/ 2343. Use communication skills and informatics in establishing relationships with patient/families and members of the health care team in acute care settings.	Begin Electronic Health Record documentation, utilize inter and intra professional communication with members of the health care team (ex. SBAR, assisting staff with referrals)
	NRS 3343. Recognize communication skills used in safe administration and monitoring of pharmacologic agents.	Educate patients on safety aspects of medications, evaluate patients’ understanding of medication regimen
	NRS 4543. Analyze the role of the nurse leader in communicating with members of the health care team.	Students discuss and role plan team building, utilize cooperative learning, discuss ethical codes of conduct
VII. Clinical Prevention and Population Health.  “Health promotion and disease	NRS 2392. Identify developmental and cultural theories related to nursing interview and physical assessment.	Pedigree diagram, Nutrition screening, Perform a screening physical exam

<b>Selected Elements from BSN Essentials (AACN, 2008)</b>	<b>Selected Student Learning Outcomes</b>	<b>Selected Learning Experiences</b>
prevention at the individual and population level are necessary to improve population health components of baccalaureate generalist nursing practice.”	NRS 3345/4425. Examine pathophysiological, physical and behavioral theories related to acute illness as experienced by patients/families.	Primary prevention strategies discussed (ex., diabetes, cardiovascular disease), health disparities in relation to chronic illness and preventable diseases (ex., cancer, diabetes), environmental health risks reviewed/nurses role in prevention and health promotion (ex., smoking, genetics)
	NRS 3423/4343. Analyze behavioral, cultural and role theories as they relate to care of patients/families/communities/populations.	Students examine public health practice, epidemiology, occupational health, immunizations and participate in a community needs assessment

The curriculum also reflects responses to national reports on nursing and health care. The five core competencies identified in the Institute of Medicine (IOM) Report Crossing the Quality Chasm: A New Health System for the 21<sup>st</sup> Century (2001) and further developed by the Quality and Safety Education for Nurses (QSEN 2005; <http://www.qsen.org>) are integrated throughout the BSN program. These QSEN competencies (patient centered care, teamwork and collaboration, evidence-based practice, quality improvement, informatics and

safety) serve as resources for the development of program and student learning outcomes. See Table 4.1-5 for selected QSEN competencies.

**Table 4.1-5**

**Selected QSEN Competencies, Program Outcomes, Course Outcomes and Student Learning Activity for BSN Program**

<b>QSEN Competency</b>	<b>Program Outcome</b>	<b>Student Learning Course Outcome</b>	<b>Student Learning Activity</b>
Evidence-Based Practice	Critique research for use in evidence-based practice.	NRS 2314/2423 Compare the problem-solving, research, and nursing processes.	Locate, select , and apply appropriate nursing literature to patient care using APA citations
		NRS 3312 Determine the use of research results, clinical judgment, and patient preferences/values in nursing research.	Complete a critical appraisal of one quantitative research study and discuss findings in various research articles for application to practice
		NRSP 4366/4466 Use evidence-based research in providing intensive nursing care and in nursing management.	Complete four critiques of research articles directly related to patient or management experiences
Safety	Employ vigilance and standards of practice to mitigate errors and to promote a culture of	NRSP 1422 Demonstrate effective use of technology and standardized practices that support safety and quality in simulated patient	Demonstrate proficiency in dosage calculations at 90%, review of fire safety and fall prevention modules,

	safety through individual performance and system effectiveness.	experiences.	demonstrate personal safety related to blood borne pathogens and body mechanics in simulated scenarios
		NRSP 3325 Apply standards/protocols for safe delivery of care to patients/families in the acute care setting.	Implement and evaluate standardized protocols (ex., potassium, heparin, insulin) and reflect upon activities performed that directly relate to patient safety (ex., medication administration, fall precautions, neutropenic precautions)
		NRSP 4336 Employ protocols and core measures in care of patients/families/com-munities/populations.	Assist patients and assist with patient transfer in rehabilitation hospital setting, review of Arkansas Department of Health flu in-service/flu clinic protocols, implement safe disposal of wound dressing/sharps in clinics and home settings

The BSN undergraduate curriculum reflects the criteria and standards of practice outlined in the Arkansas State Board of Nursing Nurse Practice Act. The State of Arkansas Rules and Regulations state that the practice of professional nursing requires substantial specialized judgment, skill based on knowledge, and application of the principles of biological, physical, and social sciences.

Arkansas State Board of Nursing Nurse Practice Act:

<http://www.arsbn.arkansas.gov/lawsRules/Pages/nursePracticeAct.aspx>

and Rules and Regulations:

<http://www.arsbn.arkansas.gov/lawsRules/Pages/rules.aspx>.

**4.2 (BSN) The curriculum is developed by the faculty and regularly reviewed for rigor and currency.**

The BSN faculty are involved in the development and review of the curriculum on an ongoing basis. The faculty meet approximately four times each semester. Curricular issues are discussed in the majority of these meetings. The systematic evaluation plan is implemented for review of the curriculum.

Additionally, the BSN faculty engages in a biannual faculty retreat focusing on ensuring curriculum integrity, currency and rigor. Biannual retreats include a review of student learning outcomes, content, instructional strategies, and evaluation tools for each course. All BSN faculty meet for these two day retreats to accomplish this detailed review. End of semester course evaluations and overall curriculum evaluations are among the data utilized for the reviews. After the review, action plans are used to implement changes and modifications into the curriculum.

Ongoing reviews are conducted by the BSN faculty. Course evaluations and overall curriculum evaluations from students are utilized to affirm or improve the current curriculum. Additionally, ongoing curricular issues are discussed in relation to student learning outcomes. Faculty also consider trends and curricular guidelines in determining the curriculum currency and relevance. Revisions to the curriculum are made by the curriculum committee composed of faculty primarily teaching in the BSN program. Any revisions that affect another program are brought to the entire SON faculty and documented in the SON minutes. BSN faculty minutes will be available for review in the Document Room.

**4.3 (BSN) The student learning outcomes are used to organize the curriculum, guide the delivery of instruction, direct learning activities, and evaluate student progress.**

Student learning outcomes flow from program outcomes and clearly show a logical sequential curriculum plan throughout the baccalaureate curriculum. The organizing framework is integrated throughout the curriculum and reflected in the program outcomes. Learning outcomes are used to guide learning activities and evaluate student progress in each course. The BSN faculty have developed program maps to illustrate student learning outcomes for the traditional, LPN to BSN, RN to BSN and accelerated options. The BSN curriculum maps will be available for review in the Document Room. A comparison of curriculum maps shows the differentiation of associate, baccalaureate and master level education. Table 4.1-4 (page 110) reflects the student learning outcomes in relation to learning experiences and the AACN Essentials and Table 4.1-5 (page 113) illustrates the use of QSEN competencies

in relation the learning outcomes. Methods of evaluation will be discussed at length in Criterion 4.5 of Standard 4.

*Note: Criterion 4.4 for AASN, BSN, MSN/PMC are discussed together on page 131.*

**4.5 (BSN) Evaluation methodologies are varied, reflect established professional and practice competencies, and measure the achievement of student learning and program outcomes.**

A wide variety of evaluation tools are used to assess learning in the BSN program. Evaluation is guided by course outcomes and QSEN competencies. Evaluation methods are listed on syllabi for each didactic and clinical course. Student evaluation equality is achieved by using a variety of methods such as assignment-specific rubrics for scoring student performance and norm-referenced examinations (HESI) each semester. Computer analysis of multiple choice items assist in establishing validity and reliability of test items. Faculty teams assigned to courses evaluate test item results on curricular exams and update items as needed. Item distracters are also reviewed for improved item discrimination ratios (IDRs). Results of such analysis and review impact future use of test items. Faculty with item writing experience serve as resources for development and review of test items.

Analysis of data from the various evaluation methods has directly impacted the program curriculum. Examples include: institution of readmission testing, remediation for scores <75% on unit exams, structured learning assistance (SLA), and an increased standard for successful course completion (75% average for all exams as well as an overall course grade of at least 75%).

The following table (4.5-2) illustrates the relationship of select competencies to course outcomes, learner activities and methods of evaluation in all programs.

**Table 4.5-2**

**BSN Use of Selected QSEN Competencies, Course Outcomes and Evaluation Methodologies**

<b>QSEN Competency</b>	<b>Course Outcome</b>	<b>Learner Activity</b>	<b>Method of evaluation</b>
Teamwork and Collaboration	NRSP 2343/2432 Examine the process of interaction between members of the health care team.	Participate in hand offs to hospital staff using SBAR;  Classroom discussions;  Small group work in seminar; Role play;  Observation/patient care experiences in pre-op, OR, PACU, L/D, post-partum and nursery;  Post conference discussion;  Debriefing;  Clinical seminars	Clinical Evaluation Grading Rubric;  Self Reflection;  Quizzes, Written exams
	NRSP 3355 With assistance, collaborate, consult and coordinate with members of the health care team in providing care.	Community Support Group Attendance  Direct patient care  Collaboration with senior management students, peers, faculty, staff, ancillary departments, physician rounds, primary nurse, case	Clinical Evaluation Grading Rubric;  Concept Map Grading Rubric;  Self-Reflection

		<p>manager</p> <p>Assists with referrals</p>	
	<p>NRSP 4336</p> <p>Collaborate, consult and coordinate with other disciplines in meeting the health care needs of patients/families/communities/populations</p>	<p>Simulation Lab: Home Health/Public Health and Dementia Simulations; Rehab Hospital: Collaboration with OT, speech therapy, PT, Health Department: Refer to other agencies (ex., WIC)</p> <p>Community Flu-clinics, Public Schools, Center on Aging – Northeast</p>	<p>Student Portfolio (self reflection documenting clinical learning outcomes);</p> <p>Simulation experience (pretest/posttest &amp; debriefing)</p>
Informatics	<p>NRSP 2343/2432</p> <p>Use communication skills and informatics in establishing relationships with patients/families and members of the health care team in acute care settings.</p>	<p>Access electronic sources of health care information to support evidence-based care,</p> <p>APA documentation</p> <p>Care planning; Team case studies</p>	<p>Clinical Evaluation Grading Rubric;</p> <p>Self-Reflection</p>
	<p>NRSP 3325/3453</p> <p>Document appropriate literature sources, which provide rationale for nursing interventions for patients/families</p>	<p>Support nursing care interventions with selected research articles; Document using the Electronic Medical Record</p>	<p>Clinical Evaluation Grading Rubric;</p> <p>Concept Map Grading Rubric</p>

	with acute illness.		
	NRSP 4366/4466 Use evidence-based research in providing intensive nursing care and nursing management	Employ beside monitoring (ECG, hemodynamic, ventilator); Document using the Electronic Medical Record; Participate in data collection for quality assurance; Support nursing care with selected research articles	Clinical Evaluation Grading Rubric;  Clinical Log;  Research critique

## MSN/PMC Program

**4.1 (Master's and Post-Master's Certificate) Program outcomes are congruent with established professional standards, curriculum guidelines, and advanced nursing practice competencies as applicable.**

The MSN Program uses *The Essentials of Master's Education for Advanced Practice Nursing* (AACN, 2011). This document provides a guideline for graduate education and is useful in structuring the graduate curriculum. Table 4.1-6 illustrates the use of selected elements of the *Essentials* in the MSN curriculum. Selected course outcomes and learning experiences were chosen to show the pervasive use of the guidelines throughout the curriculum. The MSN faculty utilizes the National Organization of Nurse Practitioner Faculties (NONPF) core competencies, the National Association of Clinical Nurse Specialists core

competencies, the National League for Nurses core competencies for Nurse Educators, the ANA Scope and Standards for Nurse Administrators and the Council on Accreditation of Nurse Anesthesia for the CRNA to guide the curriculum in specialty areas.

The MSN program builds on the baccalaureate curriculum both in core content and specialty components. The program prepares nurses with complex practice skills and theoretical knowledge necessary for advanced nursing practice in the contemporary health care system. Graduates are prepared to function in advanced practice roles including direct patient care, student and staff education, and leadership. All graduates are expected to contribute to their specialty areas.

**Table 4.1-6**

**Use of Standards in MSN Curriculum Illustrated by Elements from AACN Essentials, Selected Learning Outcomes and Learning Experiences**

<b>Selected Elements from MSN Essentials (AACN, 2011)</b>	<b>Selected Course Learning Outcomes</b>	<b>Selected Learning Experiences</b>
II. Organizational and Systems Leadership "Recognizes that organizational and systems leadership are critical to the promotion of high quality and safe patient care. Leadership skills are needed that emphasize	NURS 6443 Synthesize knowledge of leadership and teaching theory to plan, implement, and organize patient-centered care for groups of adult patients with acute care needs.	Submit a concept analysis paper for evaluation

ethical and critical decision making, effective working relationships, and systems-perspective.”	NURS 6818 Assume leadership and consultation roles in the planning and providing of services for the health care of patients.	Discuss leadership role weekly as a Family Nurse Practitioner in the health care systems
	NURS 646V Establish strategies for the management, coordination, and collaboration in both direct and indirect care of selected adult patient or adult patient populations balancing patient-centered care and safety.	Weekly journaling to reflect experiences with intraprofessional and interprofessional groups or other groups
IV. Translating and Integrating Scholarship into Practice “Recognizes that the master’s-prepared nurse applies research outcomes within the practice setting, resolves practice problems, works as a change agent, and disseminates results.”	NURS 6003 Critique research as a basis for evidence-based advanced nursing practice.	Referenced entries of physiologic research via Discussion Board
	NURS 6753 Critique research in nursing and related disciplines as a basis for application of current evidence to advanced nursing practice.	Develop and present clinical based findings in the form of a poster in a professional forum
	NURS 6762 Integrate theories and concepts from nursing and related disciplines in the implementation of evidence-based practice and an advanced clinician role related to research development and presentation.	With complete literature review, develop and implement a research project

VI. Health Policy and Advocacy “Recognizes that the master’s-prepared nurse is able to intervene at the system level through the policy development process and to employ advocacy strategies to influence health and health care.”	NURS 6303 Devise strategies to influence the development of health policy integrating current evidence for the delivery for optimal care.	Submission of policy briefing paper of current healthcare/nursing issue
	HP 6323 Identify and discuss legal principles that govern the delivery and financing of health care.	Quality analysis of clinical healthcare issue
	NURS 6514 Synthesize knowledge of public policy issues in managing and delivering health care to patients.	Discuss an ethical/legal situation regarding a health care policy

In the MSN Program, QSEN concepts and terminology are incorporated. The concept of evidence-based practice is applied in all options in the MSN Program by the course requirement of NURS 6103 Research Design & Methodology. This core course requires the submission of a research proposal that is inherent to nursing practice, relevant to the enrolled option, and contributes to evidence-based practice. This assignment promotes analysis, synthesis and integration of the evidence-based literature currently available. All options promote the QSEN concept of evidence-based practice, particularly in their specialty courses. For example, in the Adult Health Option, courses NURS 6443 Advanced Adult Health I (acute) and NURS 6454 Advanced Adult Health II (chronic) both require a research evidence paper of a nursing intervention appropriate to the course content. This provides another opportunity for each student to examine the literature for synthesis and integration of evidence based

practice. The QSEN concept of safety is applied throughout the curricula in all options of the MSN program, particularly in the specialty courses for each option. For example, NURS 6013 Advanced Clinical Pharmacology provides opportunities for discussion on the indications, rationale, efficacy, and safety risks for commonly prescribed medications. Additionally, knowledge of safety and legal implications of prescribing are discussed and evaluated by written examination.

The MSN faculty have modified the curriculum to reflect incorporation of issues addressed in national reports on nursing and health care. The five core competencies identified in the Institute of Medicine (IOM) Report Crossing the Quality Chasm: A New Health System for the 21<sup>st</sup> Century (2001) and further developed by the Quality and Safety Education for Nurses (QSEN 2005; <http://www.qsen.org>) are integrated in the curriculum of all options. These QSEN competencies—patient centered care, teamwork and collaboration, evidence-based practice, quality improvement, informatics and safety—serve as resources for the development of program and student learning outcomes. See Table 4.1-7 for selected QSEN competencies.

**Table 4.1-7**

**Selected QSEN Competencies, Program Outcomes, Course Outcomes and Student Learning Activity for MSN Program**

<b>QSEN Competency</b>	<b>Program Outcome</b>	<b>Student Learning Course Outcome</b>	<b>Student Learning Activity</b>
Evidence-Based Practice	Demonstrate evidence based clinical judgment in providing nursing care to patients/families in states of wellness or illness.	NURS 6763 Demonstrate clinical judgment in designing evidence-based care for patients/families and agencies such as continuous improvement of quality, safety, evidence-based practice and patient-centered care, adult health patients and partner agencies.	Evidence based clinical project and submission of an abstract for professional presentation
Safety	Propose solutions for complex health care situations presented by patients/families using processes and knowledge from nursing and related disciplines in a deliberative manner.	NURS 6013 Discuss indications, rationale, efficacy, and safety risks for commonly prescribed medications in primary care settings.	Discuss per Blackboard Discussion Board indications, rationale, efficacy, and safety risks for commonly prescribed medications.  Knowledge of safety and legal implications of prescribing are evaluated by written exams.

#### **4.2 (MSN/PMC) The curriculum is developed by the faculty and regularly reviewed for rigor and currency.**

The MSN curriculum was developed by faculty. On an ongoing basis the faculty monitors and reviews the curriculum. The content common to specialty areas is included in discussions of curricular issues. The MSN faculty uses the SON systematic evaluation plan for curriculum review. The MSN faculty conducts a biannual retreat. The goal of the biannual faculty retreat is to ensure curriculum integrity, currency and rigor. During the retreat faculty examines student learning outcomes, content, instructional strategies, and evaluation tools for each course. Faculty also consider trends and curricular guidelines in determining the curriculum currency and relevance. Data from end of semester course evaluations and overall curriculum evaluations are also considered in decision-making. Issues are identified and action plans are used to implement changes and modifications into the curriculum.

Ongoing program reviews are also conducted by the MSN faculty. Data from course evaluations and overall curriculum evaluations from students are utilized to affirm or improve the current curriculum. Additionally, ongoing curricular issues are discussed in relation to student learning outcomes. Revisions and actions relative to the curriculum are documented in the MSN faculty minutes. MSN faculty minutes will be available for review in the Document Room.

The MSN faculty has mapped the curriculum to show progression of student learning outcomes. The mapping is designed to delineate student

learning in core courses as well as specialty options. The curriculum map for the MSN program will be available in the Document Room for review. Plans of Study for the options in the MSN program are in Appendix D.

**4.3 (MSN/PMC) The curriculum is designed to prepare graduates to be information literate and to practice from an evidence-based approach in their advanced practice role.**

MSN students are afforded opportunities to enhance their skills in information literacy and to increase knowledge and skills in evidence-based practice from the beginning of the program. After an overview of selected aspects of accessing knowledge and linking technology with learning, assignments to enhance knowledge of nursing literature, nursing research, and evidence-based practice are woven throughout the program.

The basic elements of the domains of nursing are examined in light of ways of knowing, theory building, nursing roles, research methodology, and research utilization. Learning at the master's level involves gaining new knowledge of health and illness situations. An increased knowledge base facilitates understanding of patient situations and selecting and creating potential interventions. The graduate student in nursing explores and analyzes the ways in which nurses work with patients in a variety of situations on the wellness-illness continuum. Inquiry into the problems encountered in advanced nursing requires intellectual tools from the relevant sciences as well as research and theory. Students are involved in finding, evaluating and using information from a variety of sources. Learning opportunities include reviews and critical appraisals

of information from both disciplined-focused literature and the literature from other disciplines as well as other information sources.

Master's education in nursing prepares nurses for leadership roles in advancing nursing as a practice discipline. The course of study moves away from the specific structure and organization of the undergraduate curriculum. Nursing practice at an advanced level broadens the student's perspective of nursing and nursing care delivery and involves the ability to utilize complex intellectual processes, utilize clinical expertise, engage in collaborative relationships and pursue scholarly activities. Students at the master's level broaden and deepen their knowledge of the metaparadigm of nursing: man, nursing, environment (society) and health.

*Note: AASN, BSN, MSN/PMC Criterion 4.4 discussed together page 131.*

**4.5 (MSN/PMC) Evaluation methodologies are varied, reflect established professional and practice competencies, and measure the achievement of student learning and program outcomes.**

The evaluation process uses a variety of tools to assess learning and is guided by course outcomes and competencies in the graduate program. Evaluation methods are listed on syllabi for each didactic and clinical course. Selected course content in theory, role, and research are assessed with essay-type exams. Specific assignments are designed to evaluate student comprehension, application, and synthesis of concepts in clinical situations using grading rubrics. An average of 80% is required in order to be successful in each course and progress in the program. Grading guidelines are published in the *Arkansas State Graduate Bulletin* and the *Graduate Information Guide*.

Comprehensive exams are given during the last semester and graded by a team of faculty.

The following table (4.5-3) illustrates the relationship of select competencies to course outcomes, learner activities and methods of evaluation in all programs.

**Table 4.5-3**  
**Use of Selected QSEN Competencies, Course Outcomes and Evaluation Methodologies, MSN Program**

<b>QSEN Competency</b>	<b>Course Outcome</b>	<b>Learner Activity</b>	<b>Method of evaluation</b>
Teamwork and Collaboration	NURS 6023 As appropriate, refer clients to health team members and/or agency for further evaluation, supervision or therapy.	Home Health: Consult with primary physician and other agencies	SOAP notes from clinical experiences. Rubric included on Blackboard
	NURS 646V (Acute) Engage in intra and inter professional teamwork and collaboration to examine best practice in the care of adults with acute illnesses.	Accompanying each lecture series is a hands on assessment of population groups within the community	Grading rubric
	NURS 6762 Propose solutions for complex health	Journaling used as a reflective means	Journal entries Grading rubric on

	care solutions presented by patients/ families/, agencies using deliberate proxies and knowledge from nursing and related disciplines, while recognizing the importance of facilitating collaboration within nursing and inter-professional teams within the community and larger network.	Discussion Board	Blackboard
Informatics	NURS 6003 Apply results of lab data and diagnostic testing with medical informatics in the pathology problems solving process.	Case Report	Grading rubric 6% of total course grade
	NURS 6103 Formulate a nursing proposal using information technology to search identity and manage knowledge and to study problems of interest to nursing practice and professional nursing.	Utilize search terms to examine literature in preparation for submission of research proposal	Grading rubric 20% of course grade

	NURS 6453 Incorporate pertinent evidence based research findings into investigation of health/ illness problems and interventions for adult patients with chronic illnesses.	Utilize informatics/data to determine current incidence/ prevalence of chronic illness and identify current healthcare system needs resulting in Intervention paper for outcome project.	Grading rubric 30% of course grade
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**4.4 (AASN, BSN) The curriculum includes cultural, ethnic, and socially diverse concepts and may also include experiences from regional, national, or global perspectives.**

**4.4 (MSN/PMC) The curriculum is designed so that graduates of the program are able to practice in a culturally and ethnically diverse global society.**

The curriculum of each program integrates content that prepares its graduates to practice in a culturally diverse global society. Content related to culture is specifically discussed throughout the curriculum in didactic classes and clinical conferences. Concepts related to cultural, ethnic and social diversity are presented in case studies, simulations, patient care assignments and in classroom discussion. In all program levels, health assessment courses focus on communication techniques appropriate to various cultures as well as ethnic variations in physical assessment findings. In undergraduate programs, unique cultural responses of the family to childbearing and parenting practices are included in maternal-infant studies. Ethnopharmacology is a concept introduced to students and is deemed critical to understanding the effects of medications in

various patient populations. An elective interdisciplinary course, HP 3413 Cultural Competency in the Health Professions, was developed to enhance the emphasis of culture and healthcare implications. The course examines communication in various cultures and cultural influences on healthcare practices

Students at Arkansas State University (ASU) are practicing in a state with an increasingly diverse population. According to the results of the 2010 census, Arkansas has seen a 114.2% increase in the Hispanic and Latino populations over the past decade. In Arkansas alone, there were 43,000 births to Hispanic mothers during the last ten years ([www.2010.census.gov](http://www.2010.census.gov)). This population shift is reflected in the patient care experiences of students particularly in the Area Health Education Center (AHEC) prenatal clinic and community health settings. As a response to the changing demographics, the SON gives preference to students who are fluent in Spanish. Confirmation of Spanish fluency is determined by the Department of World Languages at ASU. The 2011 entering sophomore BSN class included three students who identified themselves as Hispanic in ethnicity and as being fluent in Spanish. This affords both these students and their classmates with the opportunity to improve their care of Hispanic patients.

The Arkansas State University System is situated in the Mississippi Delta and the foothills of the Ozarks Mountains. An awareness of rural health and community needs unique to the Mississippi Delta and the Ozarks is developed through a variety of learning experiences which fosters an understanding of health care issues in the region. The Lower Mississippi Delta ranks among the

lowest in the nation in measures concerning education, healthcare and economics (Mirvis, Steinberg, & Brown, 2009). The AASN program incorporates mandatory community service in all Role Development courses. In a final clinical course, Role Development Practicum, students are required to develop and implement a community teaching project. The BSN program also includes a community service project at the completion of the community health practicum. Similarly, the MSN program provides free physical assessments to patients at several sheltered workshops. Other examples of community service at the regional level implemented by all programs include mass flu immunization clinics and area health fairs. Through these experiences students explore the cultural, ethnic and socially diverse populations within the region.

In concert with a University goal to recruit internationally, the School of Nursing is experiencing an increased enrollment of international students. This has been especially evident in the Second Degree Accelerated BSN option. Students from Kenya, Nigeria, Cameroon and Korea have shared health care practices from their cultures. These lively discussions contribute to an expanded cultural awareness for students.

The University has expanded its outreach to students in Asia and a large population of Chinese students now study on the ASU-J Campus. Additionally, an initiative to work in collaboration with the Guangzhou Medical University School of Nursing in Guangzhou, China to sponsor a baccalaureate student exchange program is being explored by the School of Nursing. This initiative will provide students with a unique cultural experience including an emphasis on

healthcare delivery systems. ASU students also have the opportunity to be immersed into the culture of China through a summer travel experience sponsored by the College. This opportunity is led by a faculty member and has an option for college credit.

The School of Nursing values the strong global initiative supported by the University and encourages students to participate in cultural community programs sponsored by the Department of International Studies. Programs such as food festivals, religious celebrations or music and dance presentations are offered. Nursing students benefit by participating in the University's global community which offers a mosaic of traditions, viewpoints, artistic expressions, and unique individuals.

As one part of a developing global perspective, an interdisciplinary minor in Disaster Preparedness and Emergency Management was developed by a Nursing Faculty member through the Regional Center for Disaster Preparedness Education. This minor is unique to Arkansas State University and prepares individuals to respond to disasters from regional tornados to international earthquakes. Since 2008, all nursing students have graduated with certification in basic disaster life support. Students are given the opportunity to participate in response to local, regional, and global disasters.

Students in the School of Nursing are participants in a curriculum which places emphasis on respecting and understanding diversity from a regional, national and global perspective. Technologic advances and outreach initiatives

have brought the world to the doorstep of Arkansas State University. In response, the SON has adapted and changed its curriculum to meet the needs of the diverse patient care population that exists in our state, our nation and our world.

**4.6 (AASN, BSN, MSN/PMC) The curriculum and instructional processes reflect educational theory, interdisciplinary collaboration, research, and best practice standards while allowing for innovation, flexibility and technological advances.**

The SON has remained abreast of current educational theories and technologies. Faculty strive to maintain competency through various continuing education activities related to best practices in nursing education. On-campus programs are provided through the College of Nursing and Health Professions and the Institute of Teaching and Technology throughout the university system. Faculty credentials include certifications in Online Education as well as NLN certification as Nurse Educators (CNE). Courses have been delivered through distance education media since 1992. Currently, nursing faculty are the largest users on campus of the Blackboard Learning system, a dynamic e-learning software platform which facilitates teaching and learning of concepts in a technology driven virtual classroom environment.

The faculty demonstrates a commitment to active learning in the classroom. Examples of active learning integrated into various courses include the use of student response systems, such as student response technology (i>clicker), group testing/projects, gaming, and Virtual Second Life (a virtual world platform). Additionally, the Smart classroom environment supports the use of current technology by faculty and students. Each program uses various

classroom learning activities such as case study discussions, study guides and small group work.

Faculty utilize a variety of learning methods not only in the classroom but in the clinical settings. Preparation for real life clinical practice includes high fidelity simulation experiences in the learning laboratory. Additionally, all undergraduate students develop health assessment skills in a simulated learning environment prior to entry into practice. In the clinical setting other learning methods include pre-and post-conference, student presentations, peer management, documentation using the electronic medical record, guided observational experiences, focused debriefing, and interactions with clinical experts. MSN students in the clinical practice area work with preceptors and faculty. For example, faculty use questioning and reinforcement to facilitate the acquisition of diagnostic reasoning. Case studies, case presentations, projects, and seminar are also used to guide learning in all graduate options.

Recognizing that health care professionals share a common foundation in selected aspects of practice, the College of Nursing and Health Professions has developed several interdisciplinary courses. Health Care Administration, Interdisciplinary Clinical Pathophysiology, Forensic Nursing, Women's Health, Cultural Competency in the Health Professions and Aging and the Older Adult are taught by nursing faculty and offered to students enrolled in various disciplines. Additionally, the Healthy Ager project is a partnership with the community Center on Aging - Northeast pairing older adults with CNHP students. An interprofessional team of Second Degree Accelerated BSN, Physical

Therapy, Communication Disorders, Clinical Laboratory Sciences and Social Work students work with older adults in the community. Students develop an individualized healthy lifestyle plan with the older adult that includes exercise, health promotion teaching, and age appropriate screenings (auditory, diagnostic labs). Topics in health promotion teaching include fall prevention, immunizations, and cognitive stimulation.

The CNHP has embraced the multidisciplinary approach to training future healthcare providers in disaster preparedness by requiring all of its students to complete Basic Disaster Life Support (BDLS) certification prior to graduation. Online delivery or face to face options provide a flexible delivery plan for the certification course. Managing disasters and other emergencies requires multidisciplinary preparedness, planning, mitigation, response and recovery. Degrees, both undergraduate and graduate, in Disaster Preparedness and Emergency Management are also available to members of the community as well as students in the ASU system.

Teamwork and interdisciplinary collaboration is evident throughout the curriculum. In the second semester of the associate program, the student is exposed to the roles of other members of the health team and begins to identify the need for community service referrals. All students are expected by the final semester to communicate with members of the interdisciplinary health team and make necessary referrals. During their final clinical experience, NRSP 2272 Role Development Practicum III, students design and implement community service projects in a variety of settings in conjunction with other health care disciplines.

For example, students have conducted educational programs at senior centers, daycares, and public schools. In addition, students receive instruction from a variety of guest speakers from other health care disciplines.

The baccalaureate program Outcome VIII states that the graduate will *“collaborate, consult, and coordinate with lay public and health care professionals in advocating for services for patients, families, communities and populations.”*

At the sophomore level students are asked to assess professional interaction.

Junior year students are expected to collaborate with health care disciplines when intervening in the acute care setting. By the senior year, students identify appropriate referral sources in both acute care and community settings.

The master’s program is involved in interdisciplinary education, particularly in clinical practica. For students in the adult health (AHN), nurse educator, nurse administrator and family nurse practitioner (FNP) options, strategies used in interdisciplinary work are a part of the content in NURS 6402, Role Development in Advanced Nursing. In the clinical learning experiences, students work with other professionals such as physicians, respiratory therapists, radiologic science personnel, physical therapists, nutritionists, and social workers. Preceptors for students may be experienced clinical nurse specialists, nurse practitioners, nurse administrators, nurse educators or physicians. Students are encouraged to utilize knowledge from other disciplines as appropriate for nursing. For example, students may choose social learning theory or the theory of reasoned action in working with a patient. Students have also collaborated with physicians in joint research-focused projects in courses at the end of the program of study. Nurse

anesthesia students work closely with surgeons and anesthesiologists in providing care for patients. Students also collaborate with personnel from clinical laboratory, radiology, and nursing in the delivery of care to the perioperative patient.

Research and evidence based nursing practice are emphasized at every level in the undergraduate and graduate programs. For example, faculty in the associate degree program consistently utilize research findings in the classroom and clinical areas emphasizing evidence based nursing practice. Students in the fourth semester of the AASN program are required to locate, evaluate, and present a research article to their peers pertaining to the acute care environment. Baccalaureate students learn to interpret and analyze research reports and systematic reviews to determine how evidence is related to safety and best practice. In the clinical setting these students integrate research findings in the development of nursing interventions for concept maps and clinical logs. At the master's level, students participate in the development of systematic reviews and translational research. Learning experiences at the master's level are focused on development of a spirit of inquiry in relation to problem solving with patients and systems. Students are encouraged to incorporate research findings and best practices into clinical experiences. The students also contribute to the body of nursing knowledge through research projects or thesis development with dissemination of findings.

## **AASN**

### **4.7 (AASN) Program length is congruent with the attainment of identified outcomes and consistent with the policies of the governing organization, state and national standards, and best practices.**

*The program lengths within the School of Nursing vary based on the outcomes and policies of Arkansas State University, the Arkansas State Board of Nursing, the Arkansas Department of Higher Education, certification requirements, and best practices.*

The AASN student can complete the program of study in four semesters following completion of pre-requisites. The length of the AASN program is in compliance with the Arkansas Department of Higher Education's guidelines for a two-year associate degree. The AASN program exceeds the recommended guidelines by one credit hour due to the general education requirements mandated by the State of Arkansas.

#### **Traditional AASN – 73 hours**

- 19 general education hours
- 11 non-nursing support hours
- 43 major requirement hours

#### **LPN to RN (AASN) – 67 hours**

- 19 general education hours
- 11 non-nursing support hours
- 37 major requirement hours (6 hours by articulation)

Plans of Study for each option in the AASN program are included in Appendix D.

Beginning July 1, 2012, the Arkansas Department of Higher Education has

mandated through Act 747 that most associate degree programs shall be no more than 60 semester hours. The AASN program faculty is working on plans to reduce hours in both the traditional and LPN to AASN options.

## **BSN**

### **4.7 (BSN) Program length is congruent with the attainment of identified outcomes and consistent with the policies of the governing organization, state and national standards, and best practices.**

*The program lengths within the School of Nursing vary based on the outcomes and policies of Arkansas State University, the Arkansas State Board of Nursing, the Arkansas Department of Higher Education, certification requirements, and best practices.*

Baccalaureate students can complete the program of study in eight semesters. Thirty hours of coursework, which includes English I and II, College Algebra, and eight hours of designated laboratory sciences are required before entry into the traditional BSN program. After admission, six semesters of nursing and support courses complete the BSN degree. The majority of the major requirements for the BSN degree are upper level courses. The SON faculty is committed to the concept of educational mobility and has provided a variety of approaches for the LPN, RN and the Second Degree Accelerated student to earn a Bachelor of Science in Nursing.

Traditional BSN – 131-132 hours

- 43-44 general education hours (plus 3 for First Year Experience)
- 13 non-nursing support hours
- 72 major requirement hours (includes 56 junior/senior hours)

#### LPN to BSN – 129-130 hours

- 43-44 general education hours
- 13 non-nursing support hours
- 60 major requirement hours (includes 57 junior/senior hours; plus 13 hours granted by articulation)

#### RN to BSN – 120 hours

- 43-44 general education hours
- 13 non-nursing support hours
- 27 major requirement hours (includes 47 junior/senior hours; plus 36 hours granted by articulation)

#### Second Degree Accelerated BSN – 68 hours

- Previous bachelor's degree
- 43 prerequisite non-nursing support hours
- 68 major requirement hours after admission

Plans of Study for options in the BSN program are included in Appendix D.

The University's general education curriculum and required courses in the sciences and humanities contribute to the development of competencies which the University seeks to have all baccalaureate graduates achieve. These courses also provide the essential psychosocial, spiritual, and humanistic and legal/ethical concepts, which provide a foundation for nursing practice. The science and humanities courses provide the necessary foundation for the nursing curriculum. The requirement of Anatomy and Physiology I and II, prior to second

semester of the BSN program enhances the student's ability to provide care based upon scientific knowledge. Humanities and other support courses assist students in written and interpersonal communication and further understanding of patients throughout the life cycle.

The traditional baccalaureate program exceeds the recommended 122 hours suggested for the BSN degree by the Best Practice Guidelines proposed by the NLNAC. This can be justified by the number of general education hours mandated by the University and the 2:1 clinical hour ratio. In an attempt to meet the NLNAC recommendation, the BSN faculty reviewed curriculum requirements and worked with the Department of Chemistry to redesign chemistry courses to better support the nursing curriculum. This resulted in a decrease of two credit hours in the chemistry requirements and therefore, overall program length. To promote learner flexibility while still maintaining sufficient course content, the requirement for statistics was decreased from four to three credit hours.

Beginning July 1, 2012, the Arkansas Department of Higher Education has mandated through Act 747 that most baccalaureate degree programs shall have no more than 120 semester hours. The University's General Education committee has submitted a proposal to reduce the general education requirements by nine credit hours. Therefore, faculty are confident that discipline specific courses will remain intact. Plans are in progress to meet the state requirement.

## MSN

### **4.7 (MSN/PMC) Program length is congruent with the attainment of identified outcomes.**

*The program lengths within the School of Nursing vary based on the outcomes and policies of Arkansas State University, the Arkansas State Board of Nursing, the Arkansas Department of Higher Education, certification requirements, and best practices*

The options in the MSN program vary in length. Credit hours are within the guidelines published for master's nursing curricula (AACN Essentials of Nursing Practice, National Organization of Nurse Practitioner Faculty, American Nurse Credentialing Center, The National Association for Clinical Nurse Specialists, and Council on Accreditation of Nurse Anesthesia Educational Programs). The Adult Health Nursing is 40 credit hours (AHN-CNS), Nurse Educator (NE) 45 credit hours, and Nurse Administrator is 38 (NAdm) credit hours. The Family Nurse Practitioner option is 45 credit hours. Students may complete these areas of study on a full-time or part-time basis. The full-time student may earn the MSN degree in 15 to 18 months (4 or 5 semesters). The Nurse Anesthesia option is 85 credits and requires 28 months of full-time study. Students in the AHN-CNS, nurse educator, nurse administrator, FNP, and nurse anesthesia options are eligible for national certification examinations in their specialties. The lengths of the options in the MSN program were set to optimize success on national certification. Information about credit hours is published online.

The suggested curricular outlines for the AASN, BSN, and MSN programs can be found in the section on majors on the School of Nursing Website

(<http://www.astate.edu/a/conhp/nursing/index.dot>), Student Nursing Handbook,

Graduate Information Guide (GIG), and in program brochures. See Appendix D for Plans of Study.

**4.8 (AASN, BSN, MSN/PMC) Practice learning environments are appropriate for student learning and support the achievement of student learning and program outcomes; current written agreements specify expectations for all parties and ensure the protection of students.**

The nursing programs utilize a wide variety of learning environments including the formal classroom, laboratory and patient care (clinical) experiences. The nursing faculty selects the clinical facilities that will best meet the needs of the students. Student placement is scheduled to prevent overcrowding and increase viability of the experience. These facilities provide a variety of experiences that assist the students in meeting the educational outcomes of the programs. Experiences may be either interventional or observational in nature. All programs have the students evaluate individual nursing units and agencies each semester. These Clinical Agency evaluation forms are available in the School of Nursing Faculty Handbook (page 39) and the summaries of the evaluations are in the Chair's office. Faculty use this data to determine further use of a particular unit or clinical agency, and relevant data is documented in the minutes according to the systematic plan of evaluation.

Contracts for clinical sites are retained centrally in the Office of the Dean of the College of Nursing and Health Professions. A standard template is used in negotiating contracts; adjustments may be made as appropriate. Contracts are reviewed and renewed on various timelines. An administrative specialist in the Dean's office maintains the contracts and related correspondence. The SON

asserts specific agreements with each facility that clearly delineates the expectations of each party. Review of the agreements varies anywhere from one to three years and are revised as needed. The review process is dependent on the agency request. These agreements are available for review in the Dean's office.

Clinical practice sites for the AASN program include hospitals in areas near each campus. Feedback from the various clinical sites is discussed in AASN faculty minutes. Faculty at each site work with clinical agencies where students have learning opportunities, establishing communication between the clinical agency and the program. Recently a change in one of the clinical agencies used by West Memphis resulted in development of a new site for practice experiences with adult patients. The AASN Program Director worked with the Site Coordinator at West Memphis to negotiate placement for students.

Students in the BSN program are involved in clinical learning at a variety of hospital and community sites. Examples of sites include three hospitals with acutely and chronically ill patients, the Center on Aging, a rehabilitation facility, the public health department, hospice, and non-profit agencies. The BSN faculty typically review sites for changes at the end of the academic year. Any concerns are discussed by faculty on an ongoing basis. Faculty maintain an open relationship with clinical administrators and any issues are typically easily resolved

Sites for practice activities at the graduate level (MSN) are chosen on the basis of ability to meet identified learning goals for the specific practicum. Every

effort is made to establish and maintain effective working relationships with personnel in each situation through mutual sharing of objectives and on-going evaluation. In addition, the MSN program faculty choose a particular agency or site dependent upon criteria such as availability of preceptors, types of clients, commuting distance and mutual cooperation. Another consideration is the experiential background of the student. A specific agency or site is selected because that agency provides opportunities for student growth in an area of practice. Sites and preceptors are monitored by specialty faculty and evaluated by students. The criteria for agency/site selection and preceptor qualifications are available on site in the Document Room.

#### **4.8.1 (AASN, BSN) Student clinical experiences reflect current best practices and nationally established patient health and safety goals.**

In undergraduate programs (AASN and BSN programs) factors that create a culture of safety including the National Patient Safety Goals ([http://www.jointcommission.org/standards\\_information/npsgs.aspx](http://www.jointcommission.org/standards_information/npsgs.aspx)) are introduced in the beginning didactic courses. Each academic year, clinical facilities orient students to the current National Patient Safety Goals and Core Measures. These National Patient Safety Goals and Core Measures are also incorporated into didactic courses. Evidence-based protocols are utilized in the clinical settings to insure safety and best practice during the delivery of direct patient care. For example, students on a medical surgical unit may implement a potassium replacement protocol or participate in the implementation of protocols based on the pneumonia core measure. Students also utilize Situation-Background-Assessment-Recommendation (SBAR) during handoff

communication to facilitate teamwork and collaboration among staff and peers as well as insure patient safety. Additionally, written work (care plans, concept maps, and journals) is developed by students using current nursing literature and applying findings to clinical practice.

#### **4.8.1 (MSN/PMC) Student clinical experiences are evidence-based and reflect contemporary practice.**

Content in research, policy, role and theory provide a framework for evidence based practice. The expectation of graduate students is to help create the culture of safety in professional practice. The hierarchical level of learning is demonstrated as a safety feature of the program. All graduate clinical experiences incorporate patient safety related to the specific area of expertise. Students in the MSN program are required to search, read, and use current nursing literature. Emphasis is placed on the research literature. Students are involved in research synthesis and work with systematic reviews. Guidelines from national organizations are analyzed and utilized in practice. Examples include guidelines on the education and treatment of hypertension and best practices for type 2 diabetes mellitus. MSN students and professionals returning for the Post Master's Certificate programs are provided the opportunity to enrich their learning by adding an additional layer of expertise, increasing the provision of quality care, and increasing opportunities in the health care marketplace.

*Note: The discussion on distant education follows this section (Criterion 4.9 for AASN, BSN, and 4.10 for MSN/PMC)*

**4.9 (MSN/PMC) Post-Master's certificate programs follow national standards and guidelines and demonstrate that students have sufficient didactic and clinical experiences to meet role expectations and certification requirements.**

Student learning activities flow from the program outcomes (see Table 4.5-3) and guide the curriculum in the MSN program and Post-Master's Certificate. The curriculum of each option within the MSN program prepares graduates to take certification exams in their specialty areas. The students completing Post-Master's certificate programs must meet the same requirements as those completing the specialty option.

The FNP option outcomes of the MSN program are based on the National Organization of Nurse Practitioner Faculties (NONPF, 2011) core competencies. Graduates of the FNP option meet the qualification criteria and are eligible to take the FNP certification exam given by the American Nurse Credentialing Center (ANCC). The FNP graduate exceeds the required 500 clinical hours by completing 960 clinical hours.

The CNS option outcomes are based on the National Association of Clinical Nurse Specialists (NACNS) core competencies. Graduates of the CNS option meet the qualification criteria and are eligible to take the Adult Health CNS certification exam given by the American Nurse Credentialing Center. The CNS graduate exceeds the required 500 clinical hours by completing 540 clinical hours.

The Nurse Educator option outcomes are based on the National League for Nurses core competencies for Nurse Educators (2005). Graduates of the

Nurse Educator option meet the qualification criteria (pending meeting employment criteria) and are eligible to take the Certified Nurse Educator exam given by the National League for Nurses.

The Nursing Administrator program outcomes are based on the ANA Scope and Standards for Nurse Administrators. Graduates of the Nursing Administrator option meet the qualification criteria (pending meeting employment criteria) and are eligible to take the Advanced Nurse Executive exam given by the American Nurse Credentialing Center.

The CRNA program outcomes are based on the Council on Accreditation of Nurse Anesthesia. Graduates of the CRNA option meet the qualification criteria and are eligible to take the CRNA certification exam.

Post-Master's Certificates are available in the Adult Health and Family Nurse Practitioner options for graduates of MSN programs. The program outcomes are the same as those in the traditional options. Required courses and credit hours are determined individually. Graduates with a Post-Master's certificate meet the qualification criteria (pending meeting employment criteria) and are eligible to take the national certification exams upon completion of the specific option of the MSN program. Students with master's degrees wishing to pursue studies in Nurse Anesthesia are required to complete a second master's degree.

**4.9 (AASN, BSN) Learning activities, instructional materials, and evaluation methods are appropriate for the delivery format and consistent with student learning outcomes.**

**4.10 (MSN/PMC) Learning activities, instructional materials, and evaluation methods are appropriate for the delivery format and consistent with student learning outcomes.**

The faculty believes that distance education is well suited for the adult learner. Distance education has become part of the nursing curricula today through compressed video, web-enhanced (hybrid) and web-based courses. True to this emerging trend, Arkansas State University's SON has been involved in distance education since 1992. Under a state mandate, the School began offering associate degree nursing education through compressed video on the campuses at Beebe, Mountain Home as well as at Ozarka Technical College at Melbourne. Currently, the AASN program has expanded its distance education courses to the West Memphis campus, as well as continuing to serve students enrolled at Mountain Home, Beebe, and the Jonesboro campuses. The use of these modalities has proven beneficial in the delivery of nursing education to individuals in the lower Arkansas Mississippi River Delta Region. Research has shown that the quality of learning outcomes for distance learning is the same when compared to outcomes in the traditional classroom setting. Regardless of location, students enrolled in the Associate degree program use the same syllabi and are subject to the same course policies and methods of evaluation. Distant campuses have access to comparable resources for student learning experiences (library, clinical learning laboratory, etc).

Faculty teaching distance education courses in the School of Nursing maintain test security through the Blackboard platform and the Respondus lockdown browser. Test security is maintained by the AASN site faculty and materials are collected and sent to the Jonesboro campus for statistical analysis. In some locations, faculty arrange for proctors to be used to augment test security.

The graduate faculty utilizes web-based and web-enhanced course delivery via Blackboard platform and classroom sessions to meet the learning needs of their students. The majority of the core content is available online; however, traditional and online environments are utilized. Students are expected to bring computer literacy skills to the MSN program. Collaborative learning via web format is used as students work with partners or groups for specific assignments. Students are also involved in discussion board forums as well as online presentations. Discussion board forums involve analysis of referenced readings, discussion of content, and debates about issues. Online presentations are designed for peer teaching on selected topics.

## **STANDARD 5**

### **RESOURCES**

**Fiscal, physical, and learning resources promote the achievement of the goals and outcomes of the nursing education unit.**

**5.1 (AASN, BSN, MSN/PMC) Fiscal resources are sufficient to ensure the achievement of the nursing education unit outcomes and commensurate with the resources of the governing organization.**

Fiscal resources are sufficient to support the nursing education unit outcomes for all programs. Fiscal resources are legislatively determined at the state level and are then allocated at the University level to Colleges and individual departments and are commensurate with University resources. The Arkansas state legislature meets every two years. A new legislature will begin meeting in January 2012 to consider the state budget for the 2012-2013 and 2013-2014 academic years. The Chair of the SON is responsible for the fiscal management of the School and its programs.

The SON budget is allocated by the University. The University accounting system does not separate the budget by programs. The School receives monies for faculty and staff salaries and benefits as well as supplies and services. Requests for adjunct faculty are prepared each fall and spring semester. The Summer Session budget is separate from the regular department allocations. Proposals for Summer Session course offerings and salaries are prepared, in consultation with the Dean, by the School of Nursing Chair.

The SON operating budget is allocated in two accounts, supplies and services, and travel. The budget allocation has remained flat for the past several

years. The total budget for the 2011-2012 academic year is \$50,289. Of this, \$32,289 is budgeted for supplies and services and \$18,000 for travel. The SON Chair may move funds between accounts as needed. The supplies and services budget monies pay for items such as supplies for office operations and instruction, faculty/staff development, copying, postage, and telephone expenses. Several faculty received new upgraded printers in the past year. The SON travel monies pay faculty for clinical travel, travel to presentations, and attendance at meetings and conferences. The SON provides funds to faculty who present at state, regional, national, and international professional meetings. Additionally, travel funds are available for faculty advisors for the Arkansas Student Nurses Association annual conference and faculty attending the program specific Sharing Day. Faculty travel may also be supplemented by other sources.

School of Nursing faculty and staff salaries are budgeted from State appropriations and from tuition monies for specific offerings, such as Nurse Anesthesia option, Second Degree Accelerated BSN option, the traditional AASN option at the Beebe campus, and the AASN program at the West Memphis campus. In Fall 2011, the full-time nurse faculty numbered 38 of which 23 are state budget positions. Full-time faculty positions include 28 at the Jonesboro campus, 4 at the Mountain Home campus, 4 at the Beebe and 3.5 at the West Memphis campuses. Salaries increased from the 2009-2010 to the 2010-2011 academic year due to a 2% cost of living raise. An increase in benefits reflects the University underwriting the cost of a health insurance increase. See Table 5.1-1 for a budget comparison of the 2010-2011 and 2011-2012 academic years

as well as the projected budget for the 2012-2013 school year. The salaries and benefits reflect all full-time faculty and staff positions including differential tuition. An additional \$ 850,057 for salaries and \$ 244,388 for benefits are budgeted from tuition revenues for full-time faculty and staff for the programs noted above. The nurse anesthesia coordinator salary is reflected in this amount and is above the salary range for faculty. Salaries for adjunct faculty are not included in the table. The SON spent \$ 202,824 additional allocated monies for adjunct faculty in fall 2011 and anticipates spending \$ 225,943 in Spring 2012.

**Table 5.1-1**  
**Budget Comparisons for Three Years**

<b>Categories</b>	<b>2010-2011 (Year Prior to Visit)</b>	<b>2011-2012 (Year of Visit)</b>	<b>2012-2013 (Projected Budget)</b>
Salaries	\$ 1,463,213	\$ 1,831,274	\$ 1,887,488
Benefits	\$ 460,108	\$ 471,644	\$ 528,496
Operating Budget Total	\$ 50,289 .	\$ 50,289 .	\$ 50,289 .
Supplies & Services	\$ 32,289	\$ 32,289	\$ 32,289
Travel	\$ 18,000	\$ 18,000	\$ 18,000
Total	\$ 1,973,610	\$ 2,353,207	\$ 2,466,273

Four nursing programs operate on tuition paid by students entering the program. The nurse anesthesia program accepts 48 students each January with each student paying tuition of \$ 30,600. These monies pay for all needs of the program including faculty salaries, equipment, and travel for clinical supervision

and conferences. Additionally, the Clinical Learning Center (CLC) Coordinator and two secretaries are funded from this account.

The Second Degree Accelerated BSN program also operates based on the tuition paid by students. Twenty-four students are accepted in the Second Degree Accelerated BSN program each August with each student paying \$18,020 for tuition. Of that amount, \$14,500 is allocated to the School of Nursing with the remaining \$3,520 designated to pay selected student fees. These monies fund the needs of the program including three full-time faculty, adjunct faculty, equipment, and clinical travel.

The third program that operates based on tuition paid by students is the AASN program located at the West Memphis campus. This program accepts 32 traditional AASN students each January and six to eight additional LPN to AASN students each August. Tuition for students at the Beebe and West Memphis campuses is \$ 259.64 per credit hour. Tuition monies received varies based on nine to thirteen credit hours of nursing courses taken by each student. Full-time and adjunct nursing faculty salaries, supplies for office operations and instruction, faculty/staff development, copying, postage, telephone expenses, and travel is paid from these monies. The salary for the administrative specialist is shared between the SON and Continuing Education and Community Outreach program. Additionally, a part-time nursing faculty position is supported by a private foundation grant.

The traditional AASN program at the Beebe campus is funded in the same manner as the program at the West Memphis campus. Twenty-four traditional students are admitted each January. Tuition revenues vary depending on the number of nursing credit hours taken by students. Two full-time faculty positions, adjunct faculty, travel and supplies are funded with these monies. The other two full-time faculty positions, other adjunct faculty, and the administrative specialist are funded with state budgeted monies.

Other monies from state funds or tuition/fees accruing to the School of Nursing are infrastructure, academic capital, technology, and course fees. Each of these funds is placed in separate accounts and is designated for purchase of specific categories of items. Students who are members of the Dean's Advisory Council discuss possible infrastructure purchases on an annual basis.

Infrastructure monies pay for items such as instructional DVDs, equipment for the learning labs and the CLC, furnishings for a vending area, and updated student computers. Purchases for the SON in 2011 included a medication cart for the Mountain Home campus and four medium fidelity geriatric manikins with one for each campus.

Academic capital monies are provided to the College every three years. The SON may receive capital monies depending on the needs of the College. Capital monies pay for maintenance such as painting, carpeting, and selected renovations of classrooms and offices. Capital costs are not a budgeted item and are determined each year from a prioritized list at the University level as

monies are available. Recent renovations funded in this manner include new flooring and paint in faculty offices and new flooring in SON offices.

Technology fees underwrite replacement computers for faculty and staff that support student services. As a general rule, computers are replaced every three years. The technology fee is prorated to departments within the College according to the number of faculty. Computers for faculty on the distant campuses are also purchased with these monies. In 2011 new computers were provided to ten faculty.

Course fees are used for consumable supplies needed for instruction. Consumables for the CLC and skills labs at all campuses are purchased with these funds. Consumables include sterile and non-sterile dressings and disposable equipment, such as catheters, intravenous solutions, supplies for health assessment practicum courses, pigs' feet for suturing practice, laundry expenses, copy paper, and printer cartridges. For Fall 2011, \$ 25,768 was received and approximately \$ 10,392 is anticipated for Spring 2012.

Monies are available from Academic Affairs to assist with the expenses for faculty searches. Other College monies include an indirect cost account that is used to support small research projects and national/international presentations, and a carry forward account that is a repository for fee-for-service work. The CNHP Dean has a small faculty development account from Academic Affairs and Research to support faculty in areas such as presentations, specialty certifications, and enhancing academic credentials.

Students pay a tuition differential fee for the purpose of supplementing faculty salaries. This money is allocated by the Dean with input from the Chairs of all departments in the College of Nursing and Health Professions. The salary enhancement monies are added to the faculty base pay. The amount available is variable and based on the number of students enrolled in courses in the College of Nursing and Health Professions (student semester credit hours). Faculty development money may be used from this fund at the discretion of the College Dean.

Monies are also available from the SON account of the ASU Foundation and are spent according to the discretion of the Chair of the School of Nursing. As a result the Chair, with input from the faculty, allocated \$5,000 per year to support faculty for small research grants. To date, two faculty members have availed themselves of these seed grants. Additionally, funds have been used to support faculty curriculum retreats, travel to state conferences, and training opportunities for individual faculty. Faculty development speakers on issues of importance to all faculty have been brought to campus. In the spring of 2010, the SON funded a nationally recognized speaker who provided faculty development on the incorporation of critical thinking in the curriculum. In addition to SON foundation monies supporting faculty development, the CNHP on an annual basis provides funds for special seminars and a Clinical Instructor's Day at which both full-time and adjunct faculty have the opportunity to earn continuing education hours.

The Chair and faculty participate in the budget process. Program Directors assist in determining instructional and office needs. Faculty input is solicited for desired purchases of instructional materials as well as other equipment for use in the classroom, CLC, or skills labs. Requests are solicited from faculty for computer accessories such as scanners or software and for office equipment such as file cabinets and chairs. Faculty and/or Program Directors also discuss budget priorities. Because of the flat School budget, priority is given to funding all faculty with presentations or posters accepted for professional conferences. Other travel funds available through CNHP may be applied for by faculty.

As noted above, faculty salaries are a major part of the School budget. Table 5.1-2 illustrates the differences in ASU full-time nursing faculty salaries and data from the American Association of Colleges of Nursing (AACN) and the College and University Professional Association for Human Resources (CUPA).

**Table 5.1-2**

**Comparison of Faculty Salaries with AACN and CUPA Data  
[Based on 9-month appointment figures]**

<b>Average Nursing Faculty Salary at ASU 2010-2011</b>	<b>AACN Nursing Faculty Salaries, 2010-2011 *</b>	<b>CUPA All Faculty Salaries, 2010-2011 **</b>
<b>Assistant Professor</b> \$ 54,638	\$ 47,629 (Southern Region, p. 20) \$48,232 (All Universities, p. 22)	\$ 61,571
<b>Associate Professor</b> \$ 64,666	\$ 62,155 (Southern Region) \$ 63, 965 (All Universities)	\$ 72,479
<b>Professor</b> \$ 75,551	\$ 76,745 (Southern Region) \$ 80,121 (All Universities)	\$ 89,172

\* *Salaries of Instructional and Administrative Nursing Faculty, AACN, 2010-2011. (Public Institutions, doctoral and non-doctoral)*

\*\* Weighted average

Comparison of ASU SON faculty salaries with data from the American Association of Colleges of Nursing (AACN) and the College and University Professional Association for Human Resources (CUPA) indicates improvement. The SON has five associate professors and two full professors. Four full-time faculty lines are 12 month appointments. Although University salaries are

reported to be below regional and national means, according to AACN data, nursing assistant professor salaries are greater than the mean for the South region (\$ 7,009) and all universities (\$ 6,406). A major factor in this is the differential tuition paid by students as well as higher entry salaries over the past several years. The mean associate professor nursing salary at ASU is also greater than the Southern region (\$ 2,511) and all universities (\$ 701). The mean full professor for nursing salary at ASU is less than the Southern region (\$ 1,194) and all universities (\$ 4,570). There are only two full professors in the SON and this may contribute to some variation. Average salaries for all ranks in the SON are considerably lower than reported CUPA salaries. CUPA reflects national salaries of faculty from all disciplines and is used at ASU for salary inequity considerations.

Interim Chancellor Howard reported on November 11, 2011 that “ASU full-time faculty members at all ranks (i.e., instructor, assistant professor, associate professor and full professor) are compensated (on average) lower than they should be” (*First Friday*, <http://www.astate.edu/a/chancellor/first-friday/index2.dot> retrieved from the World Wide Web December 1, 2011). Merit raises in the one to two percent range were last given three years ago. A two percent cost of living raise across the board to all University faculty was approved for 2010 – 2011. Monies were held until state revenues were assured and the raises were paid in January 2011, retroactive to July 1, 2010. Interim Chancellor Howard has made increasing faculty salaries a priority. In the past year, the University has endeavored to correct salary inequities with available funds. Faculty with salary

inequities are encouraged to apply without waiting the usual three year period in order for the University to correct inequities as funds become available. Specific salary information will be available on site.

The Nursing Education Unit and College administrators have discussed the nursing faculty salary issue in various administrative venues. The Commission on Nursing at the state level presented information to the legislature related to nurse faculty salaries as well as the growing crisis of a shortage of qualified nurse faculty. Other issues, such as K-12 education and inequities in funding among state higher education institutions, have taken precedence over the nurse educator salary issue.

The fiscal support of the School of Nursing is compared to similar units in the University. The units used for comparison are the Department of Psychology and Counseling and the Department of Art. The Department of Psychology and Counseling offers a graduate curriculum with a clinical emphasis. The Master's in Rehabilitation Counseling within the Department of Psychology and Counseling is a program of 48 semester credit hours and a practicum and internship experience totaling 12 credit hours. (*Arkansas State University Graduate Bulletin, 2011-2012*, pp. 107-108; Department of Psychology and Counseling website,

<http://www.astate.edu/a/education/psychologycounseling/our-programs/mrc-program-curriculum.dot> retrieved from World Wide Web, December 1, 2011).

The Department of Art was chosen because of its similarity to the nursing program in faculty educational preparation. Faculty in the Department of Art are

primarily master's prepared. (*ASU Undergraduate Bulletin, 2011-2012*, page 276 - 315; Department of Art website, <http://www2.astate.edu/a/finearts/dept/art/faculty/> retrieved from World Wide Web, December 1, 2011).

The budgets for Nursing, Psychology and Counseling, and Art are shown in Table 5.1-3. Operations budgets include office supplies, telephone, clinical and professional travel and other expenses.

**Table 5.1-3**

**Budget and Productivity for Nursing and Comparable Units  
2010-2011**

<b>Element</b>	<b>Nursing</b>	<b>Art</b>	<b>Psychology &amp; Counseling</b>
Operations	\$ 50,289	\$ 18,427	\$ 20,258
Salaries	\$1,463,213	\$ 669,550	\$ 1,102,764
Benefits	\$ 460,108	\$ 189,996	\$ 311,175
SSCH*	9,841	3,115	4,999

\* based on Fall 2010, as reported by the Office of Institutional Research, Planning, and Assessment on 3/7/2011 (SSCH- Student Semester Credit Hours)

Table 5.1-4 further compares numbers of faculty and students in the cited departments. In Fall 2011, Nursing had 6.3% of the full-time faculty and 8.7% of the enrollment for the University, based on figures for the Jonesboro Campus (as reported by the Office of Institutional Research, Planning, and Assessment, 12/5/2011).

**Table 5.1-4**

**Students and Faculty for Nursing and Comparable Units – Fall 2011**

<b>Element</b>	<b>Nursing</b>	<b>Art</b>	<b>Psychology &amp; Counseling</b>
Total Students by Major	1216	215	471
Percent of University enrollment	8.7	1.5	3.4
Full-time faculty	30.25	14.5	16.5
Percent of University faculty	6.3	3	3.4

Note: The School of Nursing consists of AASN, BSN and MSN programs. (The SON Chair is counted as .25 FTE.) Art has a baccalaureate program. Psychology and Counseling has baccalaureate and masters programs.

As noted, nursing is the largest of the three units compared in Table 5.1-4.

The enrollment figures for all three departments are somewhat misleading as they reflect declared majors. Since nursing has competitive admissions many of the declared majors do not enter the professional nursing program. The SON counts students only after they are admitted to the professional component. In Fall 2011, the total number of students in programs in the School of Nursing is 744.

**5.2 (AASN, BSN, MSN/PMC) Physical resources (classrooms, laboratories, offices, etc.) are sufficient to ensure the achievement of the nursing education unit outcomes and meet the needs of faculty, staff, and students.**

### **Jonesboro Campus**

The ASU School of Nursing administrative offices are located on the ASU Jonesboro campus for all programs and all campuses including Beebe, Mountain Home and West Memphis. A suite of offices on the second floor of the CNHP building houses the SON administrative offices. The SON suite includes the Chair's office, three administrative specialists' offices, a conference room, a copy/mail room, and a reception desk. The building has multiple entrances on the front, back and sides. An elevator is centrally located in the CNHP building. The building is handicap accessible with handicapped parking in the parking garage across the street and behind the buildings.

### **Classrooms**

Classrooms are located in the CNHP building, Eugene W. Smith Hall, and the Donald W. Reynolds Health Sciences Center. The Smith Hall and Reynolds Center are connected on the second floor. Classrooms are appropriately climate controlled, ventilated and lighted with most classrooms having windows. The six classrooms in the CNHP Building are equipped as Smart classrooms with seating for approximately 45 students. A conference room is available on the second floor that may be reserved for faculty or student use. Smart classrooms are technology enhanced classrooms that foster opportunities for teaching and learning by integrating learning technology, such as computers, specialized software, audience response technology, networking, and audio/visual

capabilities. Two Smart classrooms are available in Smith Hall, adjacent to the CNHP, one with seating for 90 students and the other with seating for 45 students. The Smith Hall also has a vending/lounge area for student use. The Reynolds Center includes one Smart classroom/auditorium that accommodates 100 students and four additional Smart classrooms that accommodate 45 students each. The Reynolds Center also includes a student lounge, one special projects room, two research labs, seven seminar/consultation/study rooms, and a conference room that may be reserved. Classrooms are scheduled with the AV lab coordinator.

Classrooms with compressed video network (CVN) capability are used for AASN classes and faculty meetings. The CVN classrooms are located on the third floor, Continuing Education and Community Outreach, of the Dean B. Ellis Library. Each of the five CVN classrooms seat 48 students at tables with individual chairs. Interaction between sites is both audio and visual. Cameras view the instructor or the classroom.

### Laboratories

The Clinical Learning Center (CLC), two health assessment learning labs, a nurse anesthesia learning center, and a simulated efficiency apartment for an older adult are housed on the third floor of the Donald W. Reynolds Health Sciences Center. The CLC consists of one large room with seating for 45 students, a Smart board, and three flat screen televisions. The CLC also contains 16 hospital beds equipped as hospital rooms. Two self-contained rooms are equipped as an obstetrical unit and a critical care room. Eight of the

beds have working suction, medical air, and mounted otoscopes and ophthalmoscopes. All of the beds have mounted sphygmomanometers, bedside tables, and overbed tables. Additional advanced equipment includes low-fidelity, medium-fidelity, and high-fidelity manikins, training models, and three computerized intravenous simulators. Other equipment includes a birthing bed, infant warmer, crib, two IV pumps, a patient-controlled analgesia pump, two electronic vital sign monitoring devices, and a mechanical ventilator. This lab is used for the development of basic and advanced nursing skills. All program levels have access to the CLC for basic skill training, remediation, and simulation experiences. The Adult Health and Family Nurse Practitioner MSN/PMC options use the CLC and health assessment labs for course work and skill acquisition workshops. Additionally, the CLC is available to distant sites. A full-time twelve month faculty member has been designated as the CLC Coordinator and is available to all faculty for assistance in skill and simulation design and implementation.

The Health Assessment Learning Center consists of two smaller rooms that are identical in design and supplies. There are eight chairs, tables, a Smart board and four examination tables that are separated by floor to ceiling curtains in each room. These labs also have wall-mounted oto-ophthalmoscopes and sphygmomanometers, models, and other equipment necessary to acquire physical assessment skills.

A new home environment room has been outfitted in the Reynolds Center. This room models an efficiency apartment for an older adult with a simulated

kitchenette, dining table, recliner, bed, throw rugs, and a small toy cat. The home environment is an interprofessional learning space and will be used by nursing, physical therapy and communication disorders students. A high fidelity manikin is added to the room as needed. Senior community nursing students use this room for simulated home visits and assessments.

Also housed on the third floor of the Reynolds Center is the nurse anesthesia laboratory. The lab is equipped as three fully-furnished operating room (OR) suites with OR tables, anesthesia machines, fully equipped anesthesia carts, breathing circuits, oxygen delivery systems, a high-fidelity manikin, teaching models, spinal injection simulators, and central venous cannulation simulators.

### Offices

All faculty offices including the SON Chair's are fully furnished with up-to-date computers loaded with Microsoft Office and connected to the local area network. Wireless Internet access is also available. Faculty offices include a phone with voice mail and all computers have email capabilities. All offices have a printer and a few have stand-alone scanners or a printer combination with copy and scan options. Locking file cabinets and bookshelves are available in all offices. Part-time faculty may arrange for rooms for conferences and student evaluations. Scanners are also located in the office of the Chair and administrative specialists. The copier and fax machine are in accessible areas for faculty and staff. The AV lab coordinator and University computer specialist from Information Technology Services (ITS) provide on-site computer support for

faculty, staff, and administration during normal business hours. Additionally, there is ITS support 8 am to 10 pm, Monday – Friday, by phone and email.

Each full-time staff member has an office with a personal computer and printer, a desk, bookshelves, and at least two chairs. Locking file cabinets, storage space and bookshelves are available for staff. The office of one administrative specialist is located in the Reynolds Health Sciences Center. The pre-nursing advisor has a private fully furnished office adjacent to the SON office suite. The office is furnished with a desk and chair, computer, printer, phone, a locking file cabinet, bookshelves and visitor chairs.

### Computer Centers

Computer facilities are sufficient to meet all program needs. Several computer labs are available on the Jonesboro campus. A large computer lab is located in the Dean B. Ellis Library building. This computer lab maintains the same hours as the Library. Residence halls also have computers as well as Internet connections for students' personal computers. Two computer labs are located in the CNHP buildings. An Audio Visual (AV) lab with 29 computers is housed in the CNHP Building and a computer lab with 48 computers is housed in the Reynolds Center. All computers have been updated to Windows 7 and are Internet accessible. Printers are available in both labs for student use. Other audiovisual equipment such as television with DVD players is available for use in the lab or in classrooms. The AV lab also contains a small library of books available for reference. Both labs have generous hours and are open from 7:30 a.m. to 4:30 p.m. Monday through Friday with extended hours until 7:00 p.m. on

Thursday. A computer operator/AV lab coordinator is in charge of the AV labs. Work study students and one graduate assistant are employed to assist in the lab and their work is supervised by the AV lab coordinator. The AV lab coordinator is also available to faculty for assistance with computer-related needs.

### **Beebe, Mountain Home, and West Memphis campuses**

Facilities at the other campuses are adequate to meet all program needs. The Beebe site offices and classrooms are located in the University Center on the ASU Beebe campus. Faculty and students use the facilities in the Health Sciences building on the ASU Mountain Home campus. At Mid-South Community College classrooms are in the new Allied Health Center and the University Center and offices are located in a portable building.

### **Classrooms**

Classroom facilities at the distant site campuses of Beebe, Mountain Home and West Memphis are adequate to meet all program needs. The Beebe campus has one Smart classroom that seats 48 students and three additional classrooms seating 30 to 40 students equipped with computers and projectors. The Mountain Home campus has a large classroom adequate for 48 students and equipped with SmartBoard capabilities. This classroom may also be subdivided to two smaller classrooms as needed. The West Memphis campus has two large classrooms equipped with computers and projectors. Each classroom seats 50 students.

CVN classrooms are available at each campus. The Beebe campus has four available CVN classrooms with a variety of seating arrangements ranging from 30 to 38 seats. Mountain Home has two CVN classrooms with 32 and 36 seats. The two West Memphis CVN classrooms seat 24 and 25 students. The CVN classrooms have the capability of being connected to each other and used simultaneously. On-site staff is available at each campus for managing the compressed video network and scheduling use. CVN equipment at Beebe and Mountain Home is managed by ASU Jonesboro staff and the equipment at West Memphis is managed by Mid-South Community College staff.

### Laboratories

Skills laboratory facilities at other campuses are adequate to meet program needs. Beebe has two skills laboratories, one located in the University Center Building and the other at White County Medical Center, South. Between the two skills laboratories there are seven beds, gurneys or exam tables. Available equipment at Beebe includes two medium-fidelity manikins with one geriatric simulator, an IV pump, a medication cart and audio-visual equipment. Mountain Home has a skills laboratory that is shared with the ASU Mountain Home Practical Nursing program. The skills lab at Mountain Home accommodates 50 students and includes a whiteboard, a television with DVD, and tables. The lab equipment also includes six beds, two sinks, a medication space with a medication cart, and supply room along with several low-fidelity manikins and models, one medium-fidelity manikin, and a computerized intravenous simulator. Additional equipment includes wall-mounted otoscopes,

ophthalmoscopes, and sphygmomanometers, as well as several IV pumps and a tube-feeding pump. Mountain Home also has two private physical assessment exam rooms with sinks. The West Memphis campus has a new skills lab with six exam areas, low and medium-fidelity manikins and models, otoscopes, ophthalmoscopes, and electronic blood pressure machines.

### Offices

Faculty offices on the distant campuses are comparable to the Jonesboro campus. Each office is private and has a computer, printer, a telephone with voice mail, bookshelf, and at least one locking cabinet. All have up-to-date computers and printers that are replaced on a three year cycle. The computers are loaded with Microsoft Office and connected to the local area network. Wireless Internet access is also available on the Beebe, Mountain Home, and West Memphis campuses. The nursing offices at the West Memphis campus are located in a portable building designated as ASU Nursing. Conference space is available on all campuses. Administrative specialists have dedicated office space with computers, printers, telephones with voicemail, and locking file cabinets/rooms. Copiers and fax machines are available at all campuses. Computer specialists from Information Technology Services (ITS) on each campus provide on-site computer support services for faculty, staff, and students during normal business hours on all campuses.

### Computer Centers

Computer labs are readily available on distant campuses. Students on the Beebe campus have access to three computer labs with computer support staff

available during operating hours. Facilities on the Mountain Home campus include a room with 30 computers convenient to the nursing program as well as computers available in the library. On the West Memphis campus students have access to a designated computer lab that will accommodate 40 students.

**5.3 (AASN, BSN, MSN/PMC) Learning resources and technology are selected by the faculty and are comprehensive, current, and accessible to faculty and students, including those engaged in alternative methods of delivery.**

Learning resources and technology are selected by faculty. Requests for new equipment, DVDs, computer-assisted instruction, interactive computer programs and other audiovisual material are made by faculty and purchased using funds from infrastructure allocations, course fees, or supplies and services. The SON purchases learning resources four at a time as appropriate to maintain all campuses. On the Jonesboro campus, students may use the DVDs and interactive computer programs in the AV labs. Faculty may check out materials for preview or classroom use. Additional DVDs have been purchased with the nursing allocation from the Library and are housed in Media Services in the University Library. Both faculty and students may check out videos in Media Services. Materials in Media Services are accessible via the online library catalog. On the distant campuses DVDs are maintained in the nursing offices and computer interactive programs are installed in the computer centers.

As discussed in criterion 5.2 the CLC and skills laboratories on the distant campuses have up-to-date medium and high fidelity manikins with computer assisted scenarios for simulation learning. Currently electronic medical record

software is being tested on the Jonesboro campus. New equipment and supplies are purchased at the request of faculty. Additionally, faculty are responsible for selecting learning resources such as textbooks.

Another learning resource used on the Jonesboro campus is peer instructors. The peer instructors (senior BSN students) are selected and managed by the CLC coordinator and are utilized in the CLC. The peer instructors assist students with fundamental skills, preparing for check-offs and selected remediation work. The Dean's office funds six peer instructor positions. Peer instruction is available up to 35 hours each week in the fall semester and five hours per week in the spring semester. Depending on schedules and needs, students practicing fundamental skills, health assessment skills or remediation of clinical skills may use either the CLC or the Health Assessment labs under the supervision of the peer instructors.

### Clinical Facilities

The nursing faculty selects the clinical facilities that will best meet the learning needs of the students. These facilities provide a variety of experiences that assist the students in meeting the educational outcomes of the programs. The types of facilities include hospitals, long term care, clinics or physician offices, Department of Health offices and others such as public schools and occupational health sites. Faculty uses data from the Clinical Agency evaluations to determine further use of a particular unit or clinical agency. Most clinical facilities are within 25 miles of the campus.

## Library Resources

The Dean B. Ellis Library serves the needs of the University. The Library has a comprehensive range of resources and services to support the teaching, learning and research goals of students and faculty members in the SON. The Library is open seven days a week with the exception of holidays. The general hours are 7am – 1am Monday through Thursday, 7am – 6pm on Fridays, 10am – 6pm on Saturday, and 2pm – 1am on Sunday. The Library maintains limited hours during breaks and usually closes, along with the University, for two weeks in December. The Library also houses the Interactive Teaching and Technology Center (ITTC) and the Center for Excellence in Teaching. Library information is located on the website <http://www.library.astate.edu/>

The online catalog provides electronic access to the Library holdings. Online databases from education, humanities, medicine, nursing, psychology, social sciences and current events are available. Databases of particular interest to nursing students and faculty include CINAHL, ERIC, Electric Library, Health and Wellness Reference Center, Medline, Medline Plus, Ovid, Cochrane Library, and Lexis-Nexis Academic. Interlibrary loan requests are filled for students, faculty, and staff at no charge.

A staff of 13 professional librarians and 21 support staff acquire, organize and service the collection and provide all Library services. Reference librarians are available during the majority of Library operating hours to assist students and faculty with searches and to find materials. Reference librarians are also

available by telephone to answer brief questions. The Library also provides orientations, tours and specific instructions for classes upon request.

The collection consists of nearly 2,000,000 total volumes or volume equivalents including more than 600,000 print books, 40,000 e-Books, 500,000 federal and state documents and 600,000 units in microform. Media Services has over 25,000 multimedia items. The total count of print book volumes in the RT (nursing) call number range is 1,716. In addition, there are many more titles related to health and medicine, but not specifically to nursing, in the Library collection. Current lists of available periodicals for nursing and related fields may be viewed in real time online by using the Library's Print and Electronic Journals catalog (<http://ds7av9ek5z.search.serialssolutions.com/>). Searching under the broad subject heading of ***Health & Biological Sciences*** on October 4, 2011, a total of 305 journals specifically related to the field of nursing were listed in addition to hundreds of additional titles in biology, medicine, nutrition, public health, and other related fields. The list of nursing subscriptions is reviewed every two years, unless an unusual circumstance occurs. The School of Nursing Chair is responsible for the development of the Library's nursing collection. Individual faculty members and students may recommend books and periodicals for purchase. Although faculty members may directly request book purchases, a faculty member has served as the library liaison for several years, and book purchases are usually made in this manner. The School of Nursing at ASU-J has a library committee that reviews the collection, recommends new purchases, and deletes outdated materials. Over the past several years, a few periodicals have

been added for nursing. The additions were based on the number of interlibrary loan requests for specific journals.

The library allocation for the School of Nursing is \$104,557, which is 4.2% of the total Library acquisitions budget of \$2,500,000. The combined total for all departments in the CNHP is \$258,764, which is 10.35% of the total budget. Of the total library holdings budget, \$924,807 is not allocated to any department, and is used by the Library for purchases and subscriptions that either apply to the campus as a whole, such as EBSCO's Academic Search Complete and LexisNexis Academic Universe, or to fill in gaps in the collection that are not covered by faculty requests. Of the remaining \$1,575,193 that is allocated to all departments, the School of Nursing's allocation represents 6.6%% and the allocation for the departments in CHNP represents 16.4%. Both faculty and students have access to the Library at the Area Health Educational Center-Northeast (AHEC-NE), an extension of University of Arkansas for the Medical Sciences, which is housed at the Annex at St. Bernard Regional Medical Center in Jonesboro.

Library resources are sufficient for all students to meet program needs. Students at distant campuses have access through the ASU website, <http://www.library.astate.edu/>, to the ASU Jonesboro Dean B. Ellis Library. This link provides access to the Library catalog, online databases, the ability to download full-text articles, or request interlibrary loan. Libraries with nursing collections are also available at all distant sites. Librarians at the branch campuses work with nursing faculty to develop the nursing collection. These

collections are more limited in comparison to ASU-J, but the generous interlibrary loan, postal service, and courier service options make most materials available to students and faculty within a few days. The hospitals utilized by students in Beebe, Mountain Home, and West Memphis allow access to their libraries, including the AHEC-North Central extension of the University of Arkansas for Medical Sciences in Mountain Home.

**5.4 (AASN, BSN, MSN/PMC) Fiscal, physical, and learning resources promote the achievement of the goals and outcomes of the nursing education unit.**

Distant education campuses and the main campus have comparable resources that meet the needs for achievement of all program outcomes. Currently, when equipment is purchased for the Jonesboro campus the same equipment is also purchased for the distant site campuses. For example, four medium fidelity geriatric manikins were purchased and one was placed at each campus. Additionally, at distant campuses new equipment is being purchased to expand the available resources. For example, the Beebe and West Memphis campuses had smaller skills laboratory spaces in the past and could not accommodate some pieces of equipment due to limited space. With their new additional space and increased faculty interest in simulation those items are being added. On the Beebe and West Memphis campuses there are no separate rooms for health assessment practicum, but the skills lab is available and provides privacy. As noted previously, Mountain Home has two separate rooms for health assessment exams and a large skills laboratory. Resources on all campuses were discussed in detail in previous sections.

**SECTION 3**  
**STANDARD 6**  
**OUTCOMES**

**Evaluation of student learning demonstrates that graduates have achieved identified competencies consistent with the institutional mission and professional standards and that the outcomes of the nursing education unit have been achieved.**

**6.1 (AASN, BSN) The systematic plan for evaluation emphasizes the ongoing assessment and evaluation of the student learning and program outcomes of the nursing education unit and NLNAC standards.**

**6.1 (MSN/PMC) Program assessment is ongoing and findings demonstrate the achievement of student learning and program outcomes of the nursing education unit and NLNAC standards.**

The SON engages in a continuous quality improvement process. The Systematic Evaluation Plan (SEP) was revised in 2009 to reflect the current NLNAC Standards and Criteria. The SEP reflects the core values of the governing organization and the nursing education unit and is congruent with its strategic goals and objectives. The following categories are evaluated in the Plan: (1) Mission and Administrative Capacity; (2) Faculty and Staff; (3) Students; (4) Curriculum; (5) Resources and (6) Outcomes including graduation rates, performance on licensing/certification examinations, job placement rates and program satisfaction.

Faculty and administrators recognize the need for additional quantitative data for selected components within the SEP. Quantitative data, when available, as well as qualitative and anecdotal data have been addressed by the program

faculty during scheduled meetings. Changes for program improvement are found in other sections of this review, primarily in Standard 4, Curriculum.

Specific data listed within the evaluation plan have been collected and analyzed. Strategies have been planned and implemented to concentrate on areas which require improvements. Deficiencies related to data collection have been identified and led to the development of a standing committee, the Assessment and Evaluation Committee. This committee will be responsible for monitoring the SEP and oversight of data collection, analysis and trending. Faculty are reviewing data collection tools, methods of collection, and software for analysis to ensure that data is useful. In addition, other strategies for improvement can be found within individual Program and School of Nursing minutes. School of Nursing and Program minutes will be available in the Document Room.

*Note: The following discussion does not distinguish among campuses and is inclusive of all faculty and students.*

**6.2 (AASN, BSN, MSN/PMC) Aggregated evaluation findings inform program decision making and are used to maintain or improve student learning outcomes.**

Aggregated evaluation data are reviewed regularly and the review is documented within program minutes. Examples of aggregated data are end of program evaluations by graduating students and various course/clinical evaluations. Each didactic and clinical nursing course is evaluated every semester and data from the evaluations are made available to the Chair, Program Directors, and faculty.

## **AASN**

Faculty review program, course and clinical evaluations as well as health care and nursing education trends in decision making. Within the AASN program, decisions and/or changes were made based on aggregated evaluation data and designed to improve outcomes:

- May 2006, effective Fall 2007 students scoring less than 900 on the Health Education Systems, Inc (HESI) Exit Exam will be required to complete an NCLEX-RN review course.
- September 2007, effective October 2007 for Spring 2008 admissions, the AASN program changed the method of calculating admission GPA to include all prerequisite courses. All attempts are averaged for each prerequisite course and the mean is used to compute the GPA.
- January 2008 CVN course connections will be limited to two sites with faculty at each site in order to enhance student learning.
- August 2008 a Special Problems Independent Study course NRSP 220v required for all students seeking readmission. Failing the Special Problems course is considered a Nursing course failure and where applicable, the second nursing course failure making the student ineligible for readmission.
- August 2008, implemented a policy which excluded rounding of any grades or final course grades less than 70%.
- March 2009 required faculty approval of all NCLEX review courses for students scoring less than 900 on HESI exit exam.
- October 2009, effective June 2010 admissions, a “C” or better is required for all degree applicable courses.
- May 2010 revised program outcomes based on national trends to reflect Joint Commission National Patient Safety Goals and studies from the Institute of Medicine.
- August 2010 readmission testing required with Custom HESI Achievement Exams.
- August 2010, effective January 2011 a 75%, minimal grade of C required to successfully complete all nursing courses and includes didactic and clinical exam average and clinical rotation average. A grade of D will be assigned for 74.99%.
- August 2010, Nursing I NRS 1235 transitioned from compressed video network (CVN) delivery to onsite instruction, web-based lecture recordings

and use of case studies. This strategy improved retention of students by approximately 50%.

- June 2011 (see August 2011 minutes) effective immediately by unanimous faculty vote students seeking readmission will be allowed to test twice in the same academic year. Two failed attempts at readmission, since they've had an existing failure in a nursing course, will result in the student being ineligible for readmission to the program.

AASN Program minutes will be available in the Document Room for Site

Visitors to review additional examples.

## **BSN**

Faculty review program, course and clinical evaluations as well as health care and nursing education trends in decision making. Within the BSN program, decisions and/or changes were made based on aggregated evaluation data and designed to improve outcomes:

- October 2008 will require NRSP 220V Special Problems-NCLEX Preparation for all traditional students in the spring semester of their senior year. The one credit course will incorporate review test taking strategies, case studies and HESI Exit Exam.
- April 2009 pilot for Structured Learning Assistance (SLA) will be implemented in the fall for Junior students in NRS 3315. Data reported from Learning Support Services Coordinator and 2006 Nurse Educator article, *Improving NCLEX Scores with Structured Learning Assistance*.
- January 2010 Structured Learning Assistance evaluations—students would like one day a week instead of two; SLA moved to Monday 1:00 - 3:30 instead of Monday/Wednesday.
- April 2010 BSN faculty examined end of course Health Education Systems, Inc. (HESI) exam results and NCLEX Program Reports to look for trends in data.
- May 2010 revised Program Outcomes based on national trends to reflect Joint Commission National Patient Safety Goals and studies from the Institute of Medicine.
- May 2010 readmission testing required with Custom HESI Achievement Exams. Students returning after failure or an interruption in study are at

high risk for NCLEX failure. Testing will help faculty determine if students have retained information from previous course work.

- August 2010, phased in 75% as lowest C for overall course grade, exam average and clinical rotation average. Decision made after a statewide survey of nursing schools passing standards.
- February 2011 faculty agreed the HESI RN Case Studies will be implemented for both the traditional and Second Degree Accelerated BSN programs beginning Fall 2011. Reviewed study results that demonstrated the use of the case studies as highly significant in predicting success on the HESI Exit Exam.
- August 2011 faculty approved NCLEX review course for students scoring less than 900 on HESI exit exam. This is a change from the previous 850 as a cut off score as several students making above 850 were unsuccessful on the NCLEX-RN. AASN program implemented this earlier a have seen an increase in NCLEX pass rate.
- November 2011 faculty reviewed the correlations between NCLEX-RN pass rates and the following: mean HESI Exit Exam scores, mean Critical Thinking scores on the HESI Exit Exams, NRS 3345 HESI custom final exam mean scores, NRS 4355 HESI custom final exam mean scores, Med Surg Specialty HESI exam mean scores. All comparisons show a direct correlation: the higher the mean scores for the year reviewed, the higher the NCLEX-RN pass rate. Faculty will continue to monitor test results and agree the HESI products are helpful in predicting student success.
- November 2011 faculty reviewed current NCLEX pass rate of 81.43% for May 2011 class. If the 75% passing score had been enforced for this class, the pass rate would have been 90.5%. The August 2011 Second Degree Accelerated class had the 75% passing score in place and their NCLEX pass rate was s100%. Faculty will continue to monitor.

BSN Program minutes will be available in the Document Room for Site

Visitors to review additional examples.

## **MSN/PMC**

Faculty review program, course and clinical evaluations as well as health care and nursing education trends in decision making. Within the MSN program, decisions and/or changes were made based on aggregated evaluation data and

designed to improve outcomes:

- May Retreat 2008 Based on global trends and regional needs for disaster preparedness in addition to faculty recognition of important conceptual information (disaster preparedness, aging, genetics, diversity) topics were added to the policy (NURS 6303) course addressing nursing involvement at the advanced practice level.
- May 2009 Advanced Health Assessment (NURS 6023), addition of physical assessment in a clinical setting rather than campus laboratory.
- August 2009 NONPF competencies were integrated into the FNP clinical outcome evaluation tool (NURS 6514, 6614, and 6818) for faculty use in evaluating students and provided to students in course syllabi and orientation.
- August 2009 FNP faculty changed the procedure for student clinical placement based on location, student needs/ characteristics and preceptor expertise. This procedural change fostered a more collaborative relationship between faculty and preceptors.
- November 2009 Anesthesia program lack of adequate space was resolved with a suite of offices in a new state of the art building, the Reynolds Center. The anesthesia suite is fully equipped with offices, classrooms equipped with Smart technology, study rooms and simulation lab including anesthesia machines, operating room tables and a SimMan for advanced learning.
- May 2010 Theory Development Course (NURS 6203) assignment added to develop case scenarios (storytelling) to illustrate knowledge development in practice.
- Spring 2010 and Spring 2011 FNP comprehensive examination was evaluated and improved to assure all specialty courses and levels of knowledge were represented.
- 2010 FNP admission policies were changed to admit students once per year to a cohort group that matriculates through the FNP specialty coursework together. Admission process changed to a point system with full interview (August and September 2009; January, 2010). All FNP Consultant recommendations (Report- August, 2008) have been addressed.
- October 2011 NONPF competencies were updated by the professional organization in 2011, the tool was updated by MSN faculty.

MSN Program minutes will be available in the Document Room for Site

Visitors to review additional examples.

### **6.3 (AASN, BSN, MSN/PMC) Evaluation findings are shared with communities of interest.**

The AASN, BSN and MSN outcomes including NCLEX pass rates and certification exam pass rates are shared with communities of interest including clinical agencies, prospective and current students. The change in Fall 2010 from the minimum passing average from 70% to 75% for AASN and BSN graduates has been shared with the communities of interest. Evaluation findings are shared informally and formally. Informally, discussions between clinical faculty and management of clinical sites are ongoing. See discussion in Standard 1, Criterion 1.3 related to communication with communities of interest.

### **6.4 (AASN, BSN) Graduates demonstrate achievement of competencies appropriate to role preparation.**

Roles and competencies are derived through examination of state requirements for curriculum, published national competencies (NLN Competencies, AACN Essentials), scopes of practice, and *ANA Nursing Scope and Standards of Practice*. At biennial retreats, faculty evaluate the curricula to ensure the appropriate roles and competencies are reflected in program outcomes. Clinical experiences, unit and final examinations are used to assess students' achievement in meeting program competencies. Custom and/or Specialty HESI Final Achievement Exams are administered for the majority of didactic theory (AASN and BSN) and clinical (AASN) courses. In addition, both AASN and BSN programs require a HESI Exit Exam score of 900 or greater. Students failing to achieve 900 on the HESI Exit Exam are required to show proof of completing a faculty approved NCLEX review course before the SON

approves NCLEX-RN application. Aggregate student data on the Custom and/or Specialty HESI Final Achievement Exams and HESI Exit Exam are compared with national norm-referenced data. Subcomponents of the HESI Exit evaluation reflect National organizations specific to nursing such as NLNAC. NLNAC focus areas evaluated on the HESI Exit include therapeutic nursing interventions, critical thinking, and therapeutic communication. As of Fall 2010, the HESI Exit includes data that evaluates focus areas from NLN and QSEN (Available in Document Room). Clinical grading rubrics derived from program outcomes are implemented to evaluate student competencies. The effectiveness of these grading rubrics are evaluated and revised periodically. Examples will be on site in Document Room for review.

**6.5 (AASN, BSN) The program demonstrates evidence of achievement in meeting the following program outcomes:**

**MSN/PMC program outcomes are discussed in 6.4 following this section (page 195).**

**6.5.1 (AASN, BSN) The licensure NCLEX pass rates will be at or above the national mean.**

**AASN**

NCLEX pass rates for the AASN program have fluctuated during the past few years. Table 6.5.1-1 and Table 6.5.1-2 reflect fiscal years as reported by the Arkansas State Board of Nursing. Students who do not graduate with their cohort may adversely affect the next fiscal year results. Reasons for not graduating with their cohort include personal crises which have negatively impacted their academic performance.

A review of NCLEX-RN Detailed Test Plan was studied in comparison to the program curriculum. Faculty have analyzed and developed several strategies to improve overall pass rates. Strategies include revision of admission/readmission criteria and more stringent progression standards. AASN pass rates are not differentiated by campus but individual campus data will be made available in the Document Room.

**Table 6.5.1-1**

**AASN NCLEX RN Pass Rates**

<b>Fiscal Year July 1-June 30</b>	<b>National Pass Rate</b>	<b>NCLEX Pass Rate</b>	<b>Number of Candidates</b>
2010-2011	87.7%	90.2%	103
2009-2010	88.8%	77.4%	93
2008-2009	87.4%	89.7%	97
2007-2008	85.5%	80%	100

**BSN**

Beginning with 2008-2009 fiscal year, the BSN pass rates reflect both Traditional and Second Degree Accelerated graduates.

**Table 6.5.1-2**

**BSN NCLEX RN Pass Rates**

<b>Fiscal Year July 1-June 30</b>	<b>National Pass Rate</b>	<b>NCLEX Pass Rate</b>	<b>Number of Candidates</b>
2010-2011	87.7%	82.7%	81
2009-2010	88.8%	86.5%	119
2008-2009	87.4%	74.1%	81
2007-2008*	85.5%	76.3%	80

\*2007-2008 reflects traditional BSN graduates only

Several strategies have been implemented to improve NCLEX-RN pass rates in the BSN Program. These are summarized below:

- Fall 2008 BSN applicants ranked for admission based on degree applicable GPA only. The minimum GPA for application was increased from 2.5 to 2.8. Additionally, all science courses must have a “C” or better instead of an average of 2.0 in the science courses.
- Spring 2009 one hour required Special Problems class instituted for seniors in final semester of program. Review of NCLEX test taking, case studies, and the HESI exit exam.
- Fall 2009 began phasing in HESI custom and specialty exams for didactic courses at the end of each semester.
- Fall 2009 Structured Learning Assistance (SLA) (coordinated through the Learning Support Services at ASU) was implemented with junior class. After hearing a presentation from Learning Support Services and reviewing Arlene Morton’s article, “Improving NCLEX Scores with Structured Learning Assistance” (2006), the BSN faculty decided to implement and evaluate this structured remediation. The SLA facilitator (current graduate student in the educator track of the MSN program) was trained by Learning Support Services. The facilitator attends class with the juniors. During SLA periods she clarifies course concepts, reviews case studies and NCLEX style questions related to content. Although all students were encouraged to attend the SLA, attendance was required for students making less than 85% on exams.
- Fall 2009 audience participation devices incorporated into the classroom to increase student engagement.
- Fall 2010 began phasing simulations into each clinical course: junior year (2 medical-surgical, psychiatric and pediatric); senior year (critical

care and community); sophomore (OB to be implemented Spring 2012).

- Spring 2011 after reviewing two years of student evaluations, results showed that the vast majority did not like being forced to attend SLA. Class scores were not significantly changed. The ASU Learning Support Services Director suggested changing to Supplemental Instruction for Fall 2011 which makes this an optional activity for the junior students. Two senior BSN students who excelled during their junior year were hired to provide this tutoring service on Mondays from 3:00-4:30PM. The SLA has been moved to the sophomore class to assist those students with test taking skills and improve student retention.
- Plan for 2012 Admission requirements strengthened to include HESI A2 Admission Assessment as part of the determination for applicants. Faculty want students who have high reading comprehension and math skills. HESI A2 piloted with Fall 2011 class. We will follow student progress and note correlation. Plan to pilot the HESI A2 with incoming Second Degree Accelerated students in summer 2012.

To address concerns with NCLEX-RN pass rates, both AASN and BSN programs implemented readmission testing. Students must score 75% or higher (conversion score) on customized tests created by HESI/Elsevier based on student learning outcomes from the previous successful semester/level. Since 2004, students readmitted to the AASN program are required to complete a special problems course that includes clinical rotations and testing. BSN readmission includes an individualized learning contract.

Progression standards now include end-of-course standardized testing, which are custom and/or specialty exams created by HESI/Elsevier. Both programs require a 75% average on all course exams including the custom, standardized, or norm-referenced exam. The minimum “C” score for all courses increased from 70% to 75% without rounding.

**6.5.2 (AASN, BSN) Expected levels of achievement for program completion are determined by the faculty and reflect program demographics, academic progression, and program history**

**AASN, BSN**

The faculty has determined the program completion level of achievement goal for the AASN Program as “sixty percent will graduate within 1.5 times the length of the program”; for the BSN Program as “seventy-five percent will graduate within 1.5 times the length of the program”. Program completion is affected by several factors such as change of major, personal or family crisis and failure in nursing courses and is not differentiated in the data. The completion rates reflect all tracks within the AASN and BSN programs Table 6.5.2-1 shows program completion rates for the AASN and BSN Programs.

**Table 6.5.2-1**  
**AASN and BSN Program Completion Rates**

<b>Program</b>	<b>Cohort Year</b>	<b>Cohort N</b>	<b>N Completing Within 1.5 X Program Length</b>	<b>Percent Completion</b>
AASN - TR	S 2009	83	63	75.9%
	S 2008	83	55	66.2%
	S 2007	73	41	56.1%
AASN LPN-RN	F 2009	68	55	80.9%
	F 2008	42	32	76.2%
	F 2007	76	60	78.9%
BSN – TR	F 2008	90	65	75.5%
	F 2007	90	75	83.3%

	F 2006	90	71	78.8%
BSN LPN-BSN	F 2009	2	2	100%
	F 2008	7	7	100%
	F 2007	10	10	100%
BSN 2 <sup>nd</sup> Accel	Su 2010	24	22	91.7%
	Su 2009	16	14	87.5%
	Su 2008	16	16	100%
	Su 2007	15	15	100%

\* The completion rates reflect all tracks within the AASN and BSN programs.

Faculty are aware that the benchmark has not been met consistently for all cohorts. Changes in admission and progression requirements are now in place and the faculty will continue to track this data.

### **6.5.3 (AASN, BSN, MSN/PMC) Program satisfaction measures (qualitative and quantitative) address graduates and their employers.**

Return rates for mailed Alumni and Employer Surveys for all programs have been low throughout the last few years. Of the surveys returned, the outcome of “eighty percent of graduates will express satisfaction with the program” has been met (see Table 6.5.3-1). Alternative methods of obtaining this outcome information have been explored, but gained little success. Options such as telephone surveys have been time consuming and presented access issues. In 2011, the University purchased Evaluation Kit software as a vehicle to offer online surveys and this new procedure will now be tested for Graduate, Alumni and Employer Surveys.

**Table 6.5.3-1**

**AASN and BSN Alumni Surveys 1 Year Post Graduation**

<b>Program</b>	<b>Graduation Year</b>	<b>N Returned</b>	<b>Employed as RN</b>	<b>Equivalent or Better Compared to Other Graduates</b>	<b>Overall Satisfaction of Preparation</b>
AASN	2008	3	100%	100%	100%
	2009	16	93.8%	75%	87.5%
	2010	10	100%	100%	100%
BSN	2008	13	100%	92.3%	100%
	2009	19	100%	100%	100%
	2010	12	91.67%	83.3%*	83.3%*

\* Reflects high or very high rating; increases in numbers if “average” is included; average option not included in previous years.

**Table 6.5.3-2**

**MSN Alumni Surveys 1 Year Post Graduation**

<b>MSN Program</b>	<b>Graduation Year</b>	<b>N Returned</b>	<b>Employed as MSN-RN role related position</b>	<b>Overall satisfaction with ASU Graduate Program (High or Very High)</b>
NA FNP AHN/CNS CNS/Educator	2008 - 2009	10	100%	80%

NA	2010	11	100%	100%
Combined		14		
FNP		11	83%	92%
AHN/CNS		2		
CNS/Educator		3		

The return rate for mailed surveys and reports for alumni and employers has decreased over the last years. Various problems have occurred with data collection. Prior to 2009, the Employer Survey was sent to the graduate to give to their employer resulting in few returned surveys. In 2009, major employers of the SON graduates were sent a list of our graduates they had hired and asked to evaluate them as a group, rather than individually. A low rate of return continues. Faculty meet regularly with local employers and receive anecdotal information which remains positive.

In an effort to improve response rates, the School has moved to other methods of delivery for questionnaires such as Survey Monkey and Evaluation Kit online surveys. Improvement in rates of returned responses was expected. For examples, see MSN minutes; September 23, 2009 and May Retreat, 2010. However, use of Survey Monkey has resulted in marginal success as most. In 2011, surveys were sent through email accounts or conducted over the phone. The Beebe campus began piloting a FACEBOOK site for pre-program students and alumni. To assist in process improvement, an administrative specialist has been designated to assist with survey dissemination; the survey tools were

reviewed and edited for essential content and shortened. Survey returns remain poor, but the process for improvement in this area continues.

**6.5.4 (AASN, BSN) job placement rates are addressed through quantified measures that reflect program demographics and history.**

Benchmarks for job placement have been met. Greater than eighty percent (benchmark) of those seeking employment are involved in role-related professional practice at one year post graduation; see Table 6.5.3-1, page 193.

**MSN/PMC**

**6.4 (MSN/PMC) The program demonstrates evidence of achievement in meeting the following program outcomes:**

**6.4.1 not applicable**

**6.4.2 ((MSN/PMC) Eighty percent of first time candidates for certification exams will pass the exams.**

Certification rates have exceeded the standard in all years since 1999 for the FNP program and since program inception (2005) for the Nurse Anesthesia (NA) program. Although certification rates obtained have exceeded standards there are ongoing efforts to demonstrate consistent improvement in results. For the FNP program the certification rate in 2008 was 95%, in 2009 it was 88% and in 2010 it was 82%. For the Nurse Anesthesia (NA) program the rates were 100% (2008), and 95% (2009). Adult Health graduates are eligible to take the Clinical Nurse Specialist certification exam and anecdotal evidence indicates our graduates are passing. However, in recent years the numbers of Adult Health graduates has been too small for ANCC to provide a report of pass rates of first

time candidates. An FNP program expert was consulted in 2008 and all recommendations (Report- August, 2008) were addressed. For example, certification data have contributed to changes in class content such as including specialty review courses, changing from essay to objective evaluation items for comprehensive examinations, and several improvements in policies and procedures as listed in Criterion 6.2. Noting changes just described, pass rates do not reflect improvement because student data from ANCC is not yet available.

**Table 6.4.2-1**

**MSN Certification Rates**

<b>Year</b>	<b>FNP Graduates</b>	<b>Certification Pass Rate</b>	<b>NA Graduates</b>	<b>Certification Pass Rate</b>
2010	17	82%	46	83%
2009	24	88%	41	95%
2008	21	95%	42	100%

**6.4.3 (MSN/PMC) Eighty percent of students will graduate from their program within 1.5 times the length of the program.**

A majority of MSN students are admitted on part time tracks and complete the program within the time period allowed by University Graduate School guidelines. From 2008 through 2011 MSN students in the Adult Health, FNP and Nurse Anesthesia programs have surpassed the criterion for program completion (See table below). These outcome statistics reveal timely length of study patterns. In MSN minutes dated February 2010, faculty discussed ways of maintaining this outcome through regular advisement and providing students with

a written plan of progression. Faculty members are seeking to improve the outcome by asking students to provide specific reasons for length of program completion. These reasons have been identified and discussed in faculty meeting.

**Table 6.4.3-1**

**MSN Completion Rates – Adult Health/Family Nurse Practitioner**

<b>Year</b>	<b>Number in AH/ FNP Cohort</b>	<b>Number Completing Within 1.5 X Program Length</b>	<b>Completion Rate</b>
2011	25	25	100%
2010	33	33	100%
2009	32	29	90%
2008	25	23	92%

**Table 6.4.3-2**

**MSN Completion Rates – Nurse Anesthesia**

<b>Year</b>	<b>Number in Nurse Anesthesia Cohort</b>	<b>Number Completing Within 1.5 X Program Length</b>	<b>Completion Rate</b>
2011	47	47	100%
2010	46	45	98%
2009	43	40	93%
2008	43	43	100%

**6.4.4 (MSN/PMC) Eighty percent of graduates and their employers will express satisfaction with the program.**

Return rates for mailed Alumni & Employer surveys have been low throughout the last few years. Alternative methods of obtaining this outcome information have been explored. Options such as telephone surveys have been time consuming and presented additional problems with access issues. The response rate for 2008 and 2009 was 14%. In 2008, 7 surveys were obtained and in 2009, 3 respondents replied. Eighty per cent (80%) of graduates for 2008 and 2009 indicated satisfaction overall with the MSN program. For 2010, evaluations were obtained through telephone surveys conducted by faculty and electronically mailed surveys, see results in table above.

**6.4.5 (MSN/PMC) Eighty percent of those seeking employment will be involved in role-related professional practice at one year post-graduation.**

See narrative for 6.4.4 related to return rates. In 2008 and 2009 all respondents (100%) reported full time employment in role related professional practice within one year after graduation. For 2010, 83% of Adult Health and FNP graduates reported employment in role related positions within one year of graduation and for Nurse Anesthesia graduates the rate was 100%; see table 6.5.3-2, page 193.

**6.5 (MSN/PMC) The systematic evaluation encompasses students enrolled in distant education and includes evidence that student learning and program outcomes are comparable for all students.**

MSN/PMC students are considered as one cohort and are not differentiated into local or distance student groups. MSN students in the AH and FNP options take core and specialty courses that are offered in web based or web-enhanced approaches. Nurse anesthesia students enroll in classroom and web based-enhanced courses. Regardless of the approach to instruction, course syllabi and learning outcomes within each course are the same for all MSN students enrolled in that course. Since 2008 there have been three PMC students enrolled in specialty coursework and all three completed the Post Masters Certificate in 2011. Two PMC students completed Nurse Educator studies, and one student completed the FNP post-master's certificate.

**6.6 (AASN/BSN) The systematic plan for evaluation encompasses students enrolled in distance education and includes evidence that student learning and program outcomes are comparable for all students.**

The Systematic Evaluation Plan covers all campuses and all undergraduate programs. In the AASN program, the same examinations, curriculum and program outcomes are used at all campuses. All options within the BSN program adhere to the same program outcomes. Both the AASN and BSN programs use custom or specialty HESI examinations throughout the curriculum.

Process						Implementation	
Element	Assessment Methods	Person Responsible	Frequency of Assessment	Where Documentation Information is found	Expected Level of Achievement	Results	Actions for program development, maintenance or revision

### Standard 1 Mission and Administrative Capacity

The nursing education unit's mission reflects the governing organization's core values and is congruent with its strategic goals and objectives. The governing organization and the program have administrative capacity resulting in effective delivery of the nursing program and achievement of identified outcomes.

Standard 1. Administrative Capacity and Mission 1.1 Congruence of SON Mission/Philosophy with University and College	Review by Faculty	Chair, Program Directors, /Faculty	Fall Odd Years	SON Faculty Minutes	85% Congruence By Faculty Consensus	Reviewed/revised Spring 2008: both mission and philosophy, added core values Reviewed Fall 2009: philosophy edited Reviewed Fall 2010: no changes, faculty consensus	Maintenance
1.2(AASN/BSN; MSN/PMC Representation of students, faculty and administrators in governance activities	Review of Student, Faculty, and Administrator participation in Program, School, College, & University governance.	Chair, Program Directors	Annually Spring	Documents: minutes, Committee lists, Faculty evaluation Reports	Chair is on designated College or University committees; serves on a minimum of one University committee	2009: Compliance 2010: Compliance 2011: Compliance	Maintenance
					50% full-time faculty serve on School, CNHP or University Committee	2009: Compliance 2010: Compliance 2011: Compliance	Maintenance
					Students participate in designate CNHP or SON committees	2009: Compliance 2010: Compliance 2011: Compliance	Maintenance
1.3 (AASN/BSN; MSN/PMC) Communities of interest input into SON process	Review of meetings and/or correspondence with clinical agencies, advisory groups (including minutes),	Chair	Annually and Ongoing	SON and Program Minutes	Faculty consensus on use of data from communities of	Undergraduate programs (Directors & Faculty) meet with facilities; same for distance sites. Fall 2011 meeting with clinical agencies (Chair & Directors), ASU J	Needs additional development: explore establishment of SON and Program

Process						Implementation	
Element	Assessment Methods	Person Responsible	Frequency of Assessment	Where Documentation Information is found	Expected Level of Achievement	Results	Actions for program development, maintenance or revision
and decisions	State Board of Nursing (Nurse Administrators of Nurse Education Programs – NANEP)				interest	NANEP: Discussions of curricular and student issues with other state programs; example – information about minimum pass rates and Exit exams.	Advisory Boards  Maintenance – continue to use data from NANEP for development of programs
1.4 (AASN/BSN; MSN/PMC Partnerships promote excellence in education, enhance the profession & benefit the community	Review of established partnerships. SON seeks additional partnerships as appropriate	Chair	Annually and Ongoing	CNHP Annual Report	SON maintains appropriate partnerships	1) Mid-South Community College to offer an AASN degree; 2) Center for Domestic Preparedness in Anniston, AL; 3) County Health Departments in Arkansas to offer clinics for influenza immunizations; 4) Craighead County Medical Reserve Corps to provide nursing service during times of disaster; 5) Healthy Arkansas Initiative in which corporate and academic partnerships exist to improve the health of Arkansans by promoting hand washing; 6) research partnership with Blue Cross/Blue Shield of Arkansas related to health literacy and diabetes education; 7) partnership with Arkansas Rural Health Program and University of Arkansas for Medical Sciences to provide leadership training; and, 8) Center on Aging Northeast to provide assessment and activities for those who attend	Maintenance  Explore additional partnerships
1.5 SON Chair qualifications. The nursing education unit is administered by a doctorally	Review of vitae, official transcripts  Program Directors and Faculty evaluate Chair performance,	Chair  Dean of CNHP	Annually	Personnel file with vitae, official transcripts	Nurse with earned Doctorate, holds a minimum of one degree in	Chair holds nursing degrees from associate, baccalaureate and master's levels in nursing and an earned PhD in Nursing from the College of Nursing, University of Arkansas for the Medical Sciences	Maintenance

Process						Implementation	
Element	Assessment Methods	Person Responsible	Frequency of Assessment	Where Documentation Information is found	Expected Level of Achievement	Results	Actions for program development, maintenance or revision
prepared nurse who has the authority and responsibility over the unit and advocates for development and administration of program and has adequate time and resources for the job.	Dean evaluation of Chair  Review of workloads				nursing and is licensed as a Registered Nurse	SON Chair release time is 9 semester hours	
1.6 (MSN/PMC) Nursing program coordinators and lead faculty for program tracks are academically qualified, meet national guidelines criteria and have authority and responsibility over the program/track	Review of vitae, transcripts, national guidelines	SON Chair	As needed	Personnel file with vitae, official transcripts	100% compliance	MSN Director holds earned doctorate.  FNP coordinator is doctorally prepared and nationally certified/  AHN coordinator is doctorally prepared and has experience in clinical area of practice.  Nurse Anesthesia coordinator is qualified for position per COA guidelines	Maintenance
1.7 Chair holds authority for budget; budget allocation for SON is equitable. Faculty has input into budget	Review of budget allocations and needs  Review of lists/requests for needed items. Faculty discuss areas of need.	SON Chair	Annually	Budget Materials  Purchase Lists (CNHP, SON)	Chair and Director Consensus	Chair prepares budget in collaboration with CNHP Dean; annual basis.  Faculty input solicited	Maintenance
1.8 (AASN/BSN) [1.7 MSN/PMC] Policies for faculty and staff are beneficial & comprehensive,	Review of policies. Review of policy changes. Assessed by Chair, Faculty and Staff with appropriate input	Chair, Faculty, Staff	As needed	SON files for faculty information	Faculty and Staff consensus that policies are beneficial & compre-	100% Compliance: Faculty and staff policies same as governing organization	Maintenance

Process						Implementation	
Element	Assessment Methods	Person Responsible	Frequency of Assessment	Where Documentation Information is found	Expected Level of Achievement	Results	Actions for program development, maintenance or revision
consistent with governing organization. Differences are justified.	(administrative chain of command: Faculty and/or Staff Senate)				hensive	SON requires verification of current licensure, personal liability insurance, CPR, TB, HBV, Tetanus, and MMR	
1.9 (AASN/BSN) [1.8 MSN/PMC] Records of program complaints & grievances are maintained. Records include due process and resolution	Review of policy and processes used for complaints and grievances	Chair, CNHP Dean	As needed	Files in Chair & Dean Offices	Adherence to due process, policies of SON, CHNP, and University	100% Compliance	Maintenance
1.10 AASN/BSN) [1.9 MSN/PMC] Distance education offered by SON is congruent with mission of University and SON	Comparison of ASU and SON Mission Statements.	Chair, Faculty	Every 5 years and as necessary	SON and Program minutes, ASU website	Chair, Faculty consensus on congruency	Faculty consensus (see Mission Statements)	Maintenance
<b>Standard 2: Faculty and Staff</b>							
Qualified faculty and staff provide leadership and support necessary to attain the goals and outcomes of the nursing education unit							
2.1 (AASN) Full-time Faculty are credentialed with a minimum of a master's degree in nursing and maintain expertise in their area of responsibility	Review of CVs and transcripts  Review of annual productivity reports	Chair, Program Directors	Annually and as needed	Faculty files in SON Office	All full-time faculty are credentialed with a MSN	2009: Compliance 2010: Compliance 2011: not in compliance; 1 faculty with BSN hired temporarily after late resignation; faculty has teaching experience and MSN degree to be awarded May 2012	Continue efforts to maintain full-time faculty with MSN degrees.

Process						Implementation	
Element	Assessment Methods	Person Responsible	Frequency of Assessment	Where Documentation Information is found	Expected Level of Achievement	Results	Actions for program development, maintenance or revision
2.1.1 (AASN) Majority of part-time faculty hold a minimum of a master's degree in nursing; the remaining part-time faculty hold a minimum of a bachelor's degree in nursing.  [ASU definition: (1) Part-time faculty hold contract; (2) Adjunct faculty hired on 'as needed' basis]	Review of part-time faculty CVs and transcripts	Chair, Program Director	Every term	Faculty Files in SON office	Over 50% of part-time and adjunct faculty hold MSN degrees.	Fall 2011 report current data: Total # adjunct: 21 ADN degrees: 2 (BSN prepared adjuncts not available; 1 OB specialty area, 2 enrolled in RN-BSN program)* BSN: 17 (4 in MSN programs) MSN: 1 EdD: 1 [* Consistent with ASBN requirements for adjunct faculty teaching in AASN program (Chapter 6 Arkansas Nurse Practice Act)]  NLNAC Standard not in compliance; in compliance with State requirements	Continue efforts to recruit MSN prepared adjunct faculty.
2.1.2 (AASN) Rationale is provided for utilization of faculty not meeting minimum credential	Review of CVs and transcripts	Chair, Program Director	Every term	Faculty files in SON Office	Rationale is documented	Pool of MSN prepared nurses limited and/or job obligations prevent availability for clinical.  [* Consistent with ASBN requirements for adjunct faculty teaching in AASN program (Chapter 6 Arkansas Nurse Practice Act)]	Continue efforts to recruit MSN prepared adjunct faculty.
2.1 (BSN) Faculty are credentialed with a minimum of a master's degree in nursing and maintain expertise in their area of	Review of CVs and transcripts  Review of annual productivity reports	Chair, Program Director	Annually and as needed	Faculty files in SON Office	All full time faculty hold a minimum of a master's degree in nursing  Adjunct faculty hold a	2009-2010: 100% compliance 2010-2011: 100% compliance 2011-2012: 100% compliance  Fall 2011 23 Total Adjunct faculty 1 PhD 1 EdD 5 MSN	Continue efforts to maintain full-time faculty with MSN degrees.  Continue efforts to

Process						Implementation	
Element	Assessment Methods	Person Responsible	Frequency of Assessment	Where Documentation Information is found	Expected Level of Achievement	Results	Actions for program development, maintenance or revision
responsibility					minimum of a master's degree in nursing	16 BSN (7 enrolled in MSN programs)	recruit MSN prepared adjunct faculty.
2.1.1 (BSN) A minimum of 25% full-time faculty hold earned doctorates	Review of faculty vitae, transcripts	Chair, Program Director	Annually and as needed	Faculty files in SON Office	At least 25% of full-time faculty hold doctoral degrees	2009-2010: Not in compliance. Several faculty in doctoral study. 2010-2011: Not in compliance. Several faculty in doctoral Study. 2011-2012: 100% Compliance (4/14 or 28% full-time faculty hold doctorates). Three additional faculty to complete doctorates by December 2012	Support for faculty continuing in doctoral study.
2.1.2 (BSN) Rationale is provided for utilization of faculty not meeting minimum credential	Review of CVs and transcripts	Chair, Program Director	Every term	Faculty files in SON Office	Rationale is documented	Pool of MSN prepared nurses limited and/or job obligations prevent availability for clinical.	Continue efforts to recruit MSN prepared adjunct faculty.
2.1 (MSN/PMC) Faculty are academically and experientially qualified; the majority of faculty hold earned doctorates.	Review of faculty vitae, Transcripts	Chair, Program Director	Annually and as needed	Faculty files in SON Office	>50% of full-time faculty hold doctoral degrees  100% graduate faculty are experientially qualified	2009-2010: 100% Compliance; 5/9 faculty hold doctoral degrees (55%) 2010-2011: 100% Compliance; 5/9 faculty hold doctoral degrees (55%) 2011-2012: 100% Compliance; 6/9 faculty hold doctoral degrees (67%). Two faculty in doctoral programs to be completed by December 2012.	Maintenance
2.2 (AASN, BSN, MSN/PMC) Full and part-time faculty meet governing organizations and state	Review of faculty vitae, transcripts, and licensure	Chair, Program Directors	Annually and as needed	Faculty files in SON Office	100% faculty meet requirements of ASU and state requirements	2009-2010: 100% Compliance 2010-2011: 100% Compliance 2011-2012: 100% Compliance	Maintenance

Process						Implementation	
Element	Assessment Methods	Person Responsible	Frequency of Assessment	Where Documentation Information is found	Expected Level of Achievement	Results	Actions for program development, maintenance or revision

requirements							
2.2 (MSN/PMC) Faculty credentials reflect appropriate advanced practice certifications and expertise in their area(s) of teaching	Review of faculty vitae. Review of current certification	Chair, Program Director	Annually and as needed	Faculty files in SON Office	Faculty hold appropriate certifications. Faculty are experientially qualified for teaching assignments	2009-2010: 100% Compliance 2010-2011: 100% Compliance 2011-2012 : 100% Compliance	Maintenance
2.3 (AASN, BSN, MSN/PMC) Credentials of practice laboratory personnel fit level of responsibility	Review of faculty vitae, Review of workload	Chair, Program Director	Annually and as needed	Files in SON Office (workload)	100% Faculty involved in evaluation of students are academically and experientially qualified for responsibilities assigned.	2009-2010: Compliance. Master's prepared faculty responsible for teaching and evaluation; supervise adjunct faculty in practice laboratory  2010-2011: Compliance. Director of CLC holds MSN (main campus). Full-time master's prepared faculty at distance sites responsible for teaching and evaluation; supervise adjunct faculty in practice laboratory  2011-2012: Compliance. Director of CLC holds MSN (main campus). Full-time master's prepared faculty at distance sites responsible for teaching and evaluation; supervise adjunct faculty in practice laboratory	Maintenance
2.4 (AASN/BSN) The number and utilization of full and part-time faculty ensure that program outcomes are achieved (2.3 MSN/PMC)	Review of needs and assignments for full time, part-time and/or adjunct faculty	Chair, Program Directors	Every Term	Files in SON Office; workload assignments every term	Consensus of Chair, Program Directors, and Faculty	Teaching assignments reviewed with faculty prior to each semester; faculty assigned based on expertise and curricular needs.	Maintenance

Process						Implementation	
Element	Assessment Methods	Person Responsible	Frequency of Assessment	Where Documentation Information is found	Expected Level of Achievement	Results	Actions for program development, maintenance or revision
2.5 (AASN, BSN) Full and part-time faculty performance reflects scholarship and evidence-based practice (2.4 MSN/PMC)	Review of annual productivity reports, faculty and course evaluations  Course evaluations	Chair,  Program Directors	Annually; Every term	Files in SON Office, CNHP Annual Report	90% faculty engaged in scholarship as defined by Boyer	2009: Compliance 2010: Compliance 2011: Compliance  2011-2012: CNHP series of programs on current faculty research and developing additional research	Develop additional strategies to support faculty scholarship
2.6 (AASN, BSN) The number, utilization and credentials of non-nurse faculty and staff are sufficient to achieve program goals and outcomes (2.4 MSN/PMC)	Review of need for non-nurse faculty Review of vitae from non-nurse faculty Review of qualifications of staff	Chair, Program Directors	Annually and as needed	Files in SON Office	Credentials of non-nurse faculty are appropriate for assignments	2011-2012: Three non-nurse faculty teaching Basic Human Nutrition; general education option (undergraduate). One non-nurse faculty teaching physiology in CRNA option (graduate).	Maintenance
2.7 (AASN/BSN) Full and part-time faculty are oriented and mentored in their areas of responsibility	Review of Faculty Orientation Guidelines (SON Faculty Handbook). Feedback from new faculty	Chair, Program Directors	Annually and as needed	Program Directors	Feedback on individual basis	Mentors assigned to new full-time faculty. Anecdotal evidence that orientation for full-time faculty satisfactory. Adjunct faculty oriented to course by the course coordinator or seasoned faculty. Mentoring is ongoing.	Monitor Maintenance
2.8 (AASN/BSN) Systematic assessment of full and part-time faculty performance demonstrate competencies that are consistent with program goals and outcomes	Completion of Productivity reports by full-time faculty  Review of Instructor evaluations  Review of Course evaluations	Faculty  Chair  Chair & Program Directors	Annually for full-time faculty; As needed for part-time faculty	Files in SON Office	All full-time faculty have annual reviews completed by Chair	2009-2010: Compliance 2010-2011: Compliance 2011-2012: Compliance	Maintenance

Process						Implementation	
Element	Assessment Methods	Person Responsible	Frequency of Assessment	Where Documentation Information is found	Expected Level of Achievement	Results	Actions for program development, maintenance or revision

(2.6 MSN/PMC)							
2.9 (AASN/BSN) Non-nurse faculty and staff performance is regularly reviewed in accordance with stated policies	Non-nurse faculty: review of course and instructor evaluations; discussions with chair/designee  Staff: Completion of performance evaluation per ASU policy	Chair  Chair	Annually and/or per policy	SON files	Non-nurse faculty and staff performance is satisfactory	2009-2010: Compliance 2010-2011: Compliance 2011-2012: Compliance	Maintenance
2.10(AASN/BSN) Full and part-time faculty engage in ongoing development and receive support in distant education modalities including methods and evaluation (2.8) MSN/PMC	Faculty report time for development of DE modalities. Areas of strength and areas of improvement reported	Chair, Program Directors	Annually	Ongoing dialogue and reports from DE faculty within programs; Productivity Reports	Faculty consensus about adequacy of support and ongoing development and education	Support: Blackboard (tutorial, in-servicing on updates); ITTC (faculty services); DE and ITS support personnel on each distant campus	Maintenance

### Standard 3 Students

**Student policies, development, and services support the goals and outcomes of the nursing education unit.**

3.1 (AASN/BSN, MSN/PMC) Student policies are congruent with those of the governing organization, publicly accessible, non-discriminatory, and consistently applied;	Review of documents including University Undergraduate and Graduate Bulletins, SON Undergraduate Student Handbook, Graduate Information Guide, SON Website and brochures	Chair, Program Directors, Faculty	Annually and as needed	Published materials indicated	100% compliance	2009-2010: Compliance 2010-2011: Compliance 2011-2012: Compliance  See ASU Website and CNHP 'R' drive; student materials – brochures, checklists, etc.	Monitor Maintenance
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Process						Implementation	
Element	Assessment Methods	Person Responsible	Frequency of Assessment	Where Documentation Information is found	Expected Level of Achievement	Results	Actions for program development, maintenance or revision
differences are justified by goals and outcomes of the nursing education unit.							
3.2 (AASN/BSN, MSN/PMC) Student services are commensurate with needs of students pursuing Associate, Bachelor, Master's/PMC, including those receiving alternate methods of delivery	Campus Support Services Survey of student services; survey to include students enrolled in DE  Surveys designed for different groups of students to generate appropriate data	Chair	Annually	Faculty and/or Program Minutes	Students (in each specific student group) reflect services are adequate	Services are adequate and trends in deficiencies are reported by the Chair; inconsistent in collecting data from DE sites.	Maintenance  Action: modified survey developed for specific DE sites; need to follow up on data collection and collation
3.3 (AASN/BSN, MSN/PMC) Student educational and financial records are in compliance with the policies of the governing organization and state/federal guidelines	Assessed through the Office of Financial Aid	Chair, University Administration	Ongoing	SON Office, Office of the Registrar, Office of Financial Aid	Compliance is within state/federal guidelines	100% Compliance SON Office Office of Financial Aid Office of the Registrar	Maintenance
3.4 (AASN/BSN, MSN/PMC) Compliance with the Higher Education Reauthorization Act Title IV	Assessed through the Office of Financial Aid	University Administration	Ongoing	Office of the Registrar, Office of Financial Aid	Compliance is within federal guidelines. Loan default rate is acceptable within federal	Office of Financial Aid Office of the Registrar	Maintenance

Process						Implementation	
Element	Assessment Methods	Person Responsible	Frequency of Assessment	Where Documentation Information is found	Expected Level of Achievement	Results	Actions for program development, maintenance or revision
<p>eligibility and certification requirements are maintained</p> <p>3.4.1 A written, comprehensive student loan repayment program is available.</p> <p>3.4. Students are informed of their ethical responsibilities regarding financial assistance</p>		<p>University Office of Financial Aid</p> <p>University Office of Financial Aid</p>			guidelines		
<p>3.5 (AASN/BSN, MSN/PMC) Integrity and consistency exist for all information intended to inform the public including the program's accreditation status and NLNAC contact information</p>	<p>Review of documents including University Undergraduate and Graduate Bulletins, SON Student Handbooks, SON website</p>	<p>Chair, Program Directors, Faculty Handbook Committee</p>	<p>Annually and as needed</p>	<p>In publication cited</p>	<p>Review of documents show consistency and congruency between all published documents</p>	<p>2009-2010: 100% Compliance 2010-2011: 100% Compliance 2011-2012: 100% Compliance</p>	<p>Maintenance</p>
<p>3.6 (AASN/BSN, MN/PMC) Changes in policies, procedures, and program information are clearly and</p>	<p>Students receive communication about changes in policies, procedures and program information by use of: e-mail, US Postal Service, Blackboard, and class announcements;</p>	<p>Chair, Program Directors, Faculty</p>	<p>As needed</p>	<p>Program minutes; Blackboard announcements</p>	<p>Students receive changes in a time appropriate to specific change</p>	<p>2009-2010: 100% Compliance 2010-2011: 100% Compliance 2011-2012: 100% Compliance</p>	<p>Maintenance</p>

Process						Implementation	
Element	Assessment Methods	Person Responsible	Frequency of Assessment	Where Documentation Information is found	Expected Level of Achievement	Results	Actions for program development, maintenance or revision
consistently communicated to students in a timely manner	New policies are published in updated editions of SON student handbooks and communicated to students at beginning of term						
3.7 (AASN/BSN, MSN/PMC) Orientation to technology is provided and technological support is available to students, including those receiving alternate methods of instruction	Reports in program meetings for sessions scheduled for technology orientation; review of course syllabi, Blackboard course sites	Chair, Program Directors, Faculty	Annually and pre-term as needed	ITS website for specific information about hardware, software for students (including DE students). Material is available within course information or orientation agendas, and the First Year Experience course	Appropriate information included in orientation and course documents	2009-2010: 100% Compliance 2010-2011: 100% Compliance 2011-2012: 100% Compliance  Anecdotal feedback from students indicates satisfaction with orientation to technology.  MSN students receive IT and Blackboard at required orientation	Monitor  Continue to monitor status of plans for 24 hour help desk
3.8 (AASN/BSN, MSN/PMC) Information related to technology requirements and policies specific to distance education is clear, accurate, consistent and accessible	Review of availability of information specific for DE	Chair, Program Directors, Faculty	Annually and as needed	Course materials, websites, Blackboard	Appropriate information included in orientation and course documents	Anecdotal feedback from students indicates satisfaction with orientation to technology.  All distant sites have access to ITS help desk both on their campuses and through ASU-J online/email and phone access when open	Monitor  Continue to monitor status of plans for 24 hour help desk.
<b>Standard 4 Curriculum</b>							

Process						Implementation	
Element	Assessment Methods	Person Responsible	Frequency of Assessment	Where Documentation Information is found	Expected Level of Achievement	Results	Actions for program development, maintenance or revision

The curriculum prepares students to achieve the outcomes of the nursing education unit, including safe practice in contemporary health care environments.							
4.1 (AASN/BSN) The curriculum incorporates established professional standards, guidelines, and competencies, and has clearly articulate student learning and program outcomes	Review of nationally published practice and education guidelines (examples: NLN, NLNAC, AACN, QSEN, IOM reports)	Chair, Program Directors, Faculty	In depth Curriculum Review every two years, Spring, even years  Spring, odd years general review of curriculum content and learner outcomes	Program Minutes	Consistent use of standards, guidelines, reports; inclusion of updated content and learner outcomes  Consensus of Program Faculty	<b>AASN</b> 2008 Revised (DeGray Retreat) 2009 Reviewed 2010 Revision (Safety Standard all program levels); review of new NLN competencies, update of curriculum and learning experiences; update of Program Outcomes, Course and Learner Outcomes; review of QSEN, IOM reports with inclusion of content and new learning strategies. 2011 Program Outcomes: Revised (editorial); Curriculum revision related to Arkansas legislative change Act 747; implantation date January 2013  <b>BSN</b> 2008 Revised (DeGray Retreat) 2009 Reviewed 2010 Revision (Safety Standard all program levels); review of new NLN competencies, update of curriculum and learning experiences; update of Program Outcomes, Course and Learner Outcomes; review of AACN BSN Essentials, QSEN, IOM reports with inclusion of content and new learning strategies. 2011 Program Outcomes: Revised (editorial); Curriculum revision related to Arkansas legislative change Act 747; implantation date August 2012	Monitor Maintenance
4.1 (MSN/PMC) Program outcomes are congruent with	Review of nationally published practice and education guidelines (examples: NLN,	Chair, Program Director, Faculty	In depth Curriculum Review every two	Program Minutes	Consistent use of standards, guidelines, reports;	2008 Reviewed (DeGray Retreat) 2009 Reviewed 2010 Revision (Safety Standard all levels of the program)	Monitor Maintenance

Process						Implementation	
Element	Assessment Methods	Person Responsible	Frequency of Assessment	Where Documentation Information is found	Expected Level of Achievement	Results	Actions for program development, maintenance or revision
established professional standards, curriculum guidelines, and advanced nursing practice competencies as applicable	NLNAC, AACN, IOM reports) plus specialty guidelines (NONPF, CNS, NLNAC, COA)		years, Spring, even years  Spring, odd years general review of curriculum content and learner outcomes		inclusion of updated content and learner outcomes  Consensus of Program Faculty	2011 Reviewed	
4.2 (AASN/BSN, MSN/PMC) The curriculum is developed by faculty and regularly reviewed for rigor and currency	Review of philosophy, organizing framework, course content, and competencies; clinical evaluation documents  Use of data to inform decisions about curriculum. Rigor in curriculum maintained. Curriculum current with national and state guidelines	Chair, Program Directors, Faculty	In depth Curriculum review every 2 years, Spring, even years  Spring, odd years general review of curriculum content and learner outcomes	Program Minutes	Characteristics of curriculum being offered include rigor, currency and cohesiveness as judged by faculty consensus	2008 Revised (DeGray Retreat) 2009 Reviewed 2010 Revision (Safety Standard all levels of the program) 2011 Reviewed	Monitor Maintenance
4.3 (AASN/BSN) The student learning outcomes are used to organize the curriculum, guide the delivery of instruction, direct learning activities, and evaluate student progress	Review of organization of overall curriculum related to student learning outcomes.  Analysis of program content and learning processes via review of course syllabi, learning strategies, and evaluation tools.	Chair, Program Directors, Faculty	Annually with in-depth review biennially (Spring, even years)	Program Minutes	Evidence of student learning outcomes in instructional delivery, learning opportunities and evaluation tools reflect student learning	Faculty consensus that student learning outcomes are being met.  2008 Revised (DeGray Retreat) 2009 Reviewed 2010 Revision (Safety Standard all levels of the program) 2011 Reviewed	Maintenance

Process						Implementation	
Element	Assessment Methods	Person Responsible	Frequency of Assessment	Where Documentation Information is found	Expected Level of Achievement	Results	Actions for program development, maintenance or revision

	Review of data from student course and curriculum evaluations.				outcomes		
4.3 (MSN/PMC) The curriculum is designed to prepare graduates to be information literate and to practice from an evidence-based approach in their advanced practice role	Review of course content and learning opportunities related to information literacy and evidence-based practice (examples: logs, journals, projects)  Review of data from student course and curriculum evaluations.  Review of publications from specialty groups.	Chairs, Program Director, Faculty	Biennial review and as needed	Program Minutes	Evidence of opportunities to become information literate and to incorporate evidence-based approaches to practice	Faculty consensus that opportunities to become information literate, including an evidence-based approach to practice is incorporated into curriculum	Maintenance
4.4 (AASN/BSN) The curriculum includes cultural, ethnic, and socially diverse concepts and may also include experiences from regional, national, or global perspectives	Review of course content, learning opportunities. Evaluation of student learning	Chair, Program Directors, Faculty	Annually, Include in-depth evaluation every two years	Program Minutes	Evidence of opportunities of exposure to culture, ethnic, and socially diverse concepts	Faculty consensus of evidence of learning opportunities related to future practice in a culturally and technically diverse global society	Maintenance
4.4 (MSN/PMC) The curriculum is designed so that graduates of the program are able to practice in a culturally and ethnically diverse	Review of course, content, learning opportunities. Evaluation of student learning	Chair, Program Director, Faculty	Annually, Include in-depth evaluation every two years	Program Minutes	Evidence of opportunities of exposure to culture, ethnic, and socially diverse concepts	Faculty consensus of learning opportunities related to future practice in a culturally and ethnically diverse global society	Maintenance

Process						Implementation	
Element	Assessment Methods	Person Responsible	Frequency of Assessment	Where Documentation Information is found	Expected Level of Achievement	Results	Actions for program development, maintenance or revision

global society							
4.5 (AASN/BSN, MSN/PMC) Evaluation methods are varied, reflect established professional and practice competencies, and measure the achievement of student learning and program outcomes	Review of evaluation methods used in both classroom and clinical courses.	Chair, Program Director, Faculty	Annually, Include in in-depth evaluation every two years	Program Minutes, course evaluation materials	Evidence of varied evaluation methods and outcomes reflect professional and practice competencies	Faculty consensus that varied and appropriate evaluation methods are used throughout the curriculum. Methods of evaluation are congruent with learning strategies; examples include tests, assignments, journals, self reflections and logs	Maintenance
4.6 (AASN/BSN, MSN/PMC) The curriculum and instructional processes reflect educational theory, interdisciplinary collaboration, research and best practice standards while allowing for innovation, flexibility, and technological advances	Review use of educational theory, opportunities for interdisciplinary collaboration, research and best practices.	Chair, Program Directors, Faculty	Review on biennial basis (Spring, odd year)	Program Minutes, Program Curricula	Faculty consensus related to use of educational theory, interdisciplinary collaboration, research and best practices	Anecdotal evidence of compliance.  Active learning such as I>Clickers and simulations, Standardized Exams (HESI)  Inclusion of learning strategies such as case studies, application of research findings, library and internet searches for credible professional and consumer education	Monitor Maintenance
4.7 (AASN/BSN) Program length is congruent with the attainment of identified outcomes and	Review of course credit and degree requirements	Chair, Program Directors, Faculty	Annually	Program degree plans	Current length of programs are sufficient to attain outcomes and meet	2011: Curriculum revision underway to reflect Arkansas Department of Higher Education (ADHE) law change for Baccalaureate programs to be 120 credit hours and Associate programs to be no more than 60 credit hours	Monitor Maintenance

Process						Implementation	
Element	Assessment Methods	Person Responsible	Frequency of Assessment	Where Documentation Information is found	Expected Level of Achievement	Results	Actions for program development, maintenance or revision
consistent with the policies of the governing organization, state and national standards, and best practices					University, state, and national guidelines		
4.7 (MSN/PMC) Program length is congruent with attainment of outcomes	Review of course credit and degree requirements	Chair, Program Director, Faculty	Annually	Program degree plans	Faculty consensus; program length within national guidelines.	Current length of programs are congruent with accepted guidelines and facilitate the attainment of outcomes	Monitor Re-evaluate
4.8 (AASN/BSN, MSN/PMC) Practice learning environments are appropriate for student learning and support the achievement of student learning and program outcomes; current written agreements specify expectations for all parties and ensure protection of students	Review of learning environments for adequacy and appropriateness by faculty  Review of Clinical Agency Evaluation and Course Evaluation data from students	Chair, Program Directors, Faculty	Annually	SON office, Program minutes	Faculty consensus of appropriate learning environments to achieve outcomes	Faculty consensus related to adequacy and appropriateness of practice environments  100% compliance	Monitor Maintenance
4.8.1 (AASN/BSN) Student clinical experiences reflect current best practices and nationally established	Review and evaluation of clinical experiences related to current best practice and patient health and safety goals	Program Directors, Faculty	Annually	Program Minutes	Faculty consensus of appropriate clinical experiences	Clinical sites are engaged in current best practices and foster practice that meets established patient health and safety goals.  Students engage in clinical learning activities that support patient health and safety goals.	Monitor Maintenance

Process						Implementation	
Element	Assessment Methods	Person Responsible	Frequency of Assessment	Where Documentation Information is found	Expected Level of Achievement	Results	Actions for program development, maintenance or revision
patient health and safety goals							
4.8.1(MSN/PMC) Student clinical experiences are evidence-based and reflect contemporary practice	Review and evaluation of clinical experiences related to currency of practice and use of evidence-based guidelines	Program Director, Faculty	Annually	Program and/or Option Minutes	Agreement of faculty and students that clinical sites engage in practice that is current and evidence-based	All current practice sites are reflective of evidence-based practice.	Monitor Maintenance
4.9 (AASN/BSN) Learning activities, instructional materials and evaluation methods are appropriate for the delivery format and consistent with student learning outcomes (DE) (4.10 MSN/PMC)	Review of DE methodologies in relation to achievement of student learning outcomes	Chair, Program Directors, Faculty	Annually and as needed	Program Minutes	Agreement of faculty that learning activities, instructional materials, and evaluation methods are appropriate to DE and facilitate student learning outcomes	All learning activities, materials, and evaluation methods are appropriate for the delivery format  AASN: Faculty modify learning formats for interactive TV; for example, provision of time for DE site students to talk to instructor, students from different DE sites doing presentations or group work  RN-BSN: Use of peer learning, group work, short student presentations in online classes.	Monitor Maintenance
4.9 (MSN/PMC) Post-Master's certificate programs follow national standards and guidelines and demonstrate that students have sufficient didactic and clinical experiences to	Review of student work on individual basis; consultation with national entities as necessary	Program Director, Option Coordinators, Faculty	As needed	Program Minutes, Student degree plans (in SON Office)	Evidence that didactic and clinical experiences are consistent with national standards and guidelines	All PMC programs meet certification eligibility requirements	Monitor Maintenance

Process						Implementation	
Element	Assessment Methods	Person Responsible	Frequency of Assessment	Where Documentation Information is found	Expected Level of Achievement	Results	Actions for program development, maintenance or revision
meet role expectations and certification requirements							
<b>Standard 5 Resources</b>							
<b>Fiscal, physical, and learning resources promote the achievement of the goals and outcomes of the nursing education unit.</b>							
5.1 (AASN/BSN, MSN/PMC) Fiscal resources are sufficient to ensure the achievement of the nursing education unit outcomes and commensurate with the resources of the governing organization.	Review of budget by Chair of SON and Dean of CNHP	Chair, Dean of CNHP	Annually	Budget Materials	Funds are available to meet program goals SON receives adequate funding for students and faculty and operational expenses. Faculty are supported to maintain expertise and other educational or scholarly activities	2008 – 2009: sufficient 2009 – 2010: sufficient 2010 – 2011: sufficient	Monitor
5.2 (AASN/BSN, MSN/PMC) Physical resources (classrooms, laboratories, offices, etc) are sufficient to ensure the achievement of the nursing education unit outcomes and meet the needs	Review of physical resources  Survey of faculty and students regarding physical resources	Chair	Annually	View of Physical Facilities	Majority of faculty and students agree that physical resources are adequate. ELA: 75% of those responding rate physical facilities as adequate	2008 – 2009: adequate (> 75%) 2009 – 2010: adequate (> 75%) 2010 – 2011: adequate (> 75%)	Monitor

Process						Implementation	
Element	Assessment Methods	Person Responsible	Frequency of Assessment	Where Documentation Information is found	Expected Level of Achievement	Results	Actions for program development, maintenance or revision
of faculty, staff and students							
5.3 (AASN/BSN, MSN/PMC) Learning resources and technology are selected by the faculty and are comprehensive, current and accessible to faculty and students, including those engaged in alternate methods of delivery	Review of learning resources by Chair, Program Directors and Faculty  Survey of faculty and students regarding technological resources	Chair, Program Directors, Faculty	Annually	Program Minutes	Faculty and Students agree that physical resources are sufficient. ELA: > 75% of those responding rate learning resources as adequate	Documents reflecting learning resources, technology, and equipment purchased at faculty request is available for review in the Document Room. <ul style="list-style-type: none"> <li>Annual: CLC and Skills Lab learning supplies (all campuses) purchased each semester</li> <li>Updated DVDs purchased annually at faculty request</li> <li>2011: Geri manikins purchased for all sites</li> <li>Large items are purchased through Infrastructure monies at faculty and student request</li> </ul>	Monitor
<b>Standard 6 Outcomes</b>							
<b>Evaluation of student learning demonstrates that graduates have achieved identified competencies consistent with the institutional mission and professional standards and that the outcomes of the nursing education unit have been achieved.</b>							
6.1 (AASN/BSN) The Systematic Plan for Evaluation emphasizes the ongoing assessment and evaluation of the student learning and program outcomes of the nursing education unit and NLNAC Standards	Review of Systematic Evaluation Plan including assessment of workability of entire plan and each element. Review of assessment methods and tools to determine if data collected is useful in fulfilling each element of the SEP	Chair, Program Directors, Faculty	Annually, Spring Semester	SON Faculty and Program Minutes	SEP contains all required elements including student learning assessment, assessment of program outcomes and NLNAC Standards	2009: Revised to meet the new NLNAC standards and criteria. Approval: majority vote of faculty that SEP meets requirements of this criterion. 2010: Reviewed 2011: Revised. Approval: majority vote of faculty that SEP meets requirements of this criterion.  In completing the Self Study, found that some assessment tools did not provide useful data or needed more than anecdotes; also determined that data collection needs to be more consistent and timely.	Maintenance   Develop a consistent process of continuous quality improvement: develop new

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							<p>assessment tools, timelines for data collection and process for data collation.</p> <p>Establish SON Assessment Committee (permanent standing committee) for monitoring and oversight of SEP</p>

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6.1 (MSN/PMC) Program assessment is ongoing and findings demonstrate the achievement of the student learning and program outcomes of the nursing education unit and NLNAC Standards	Systematic Evaluation Plan formulated by Chair and Program Directors with input from Faculty.	Chair, MSN Program Director and Faculty	Annually	SON & Program minutes	100% compliance	<p>Program outcomes are assessed on a regular and ongoing basis throughout the academic year and results are documented in the MSN minutes of regular meetings and Retreat meetings. See MSN minute book May 12-14, Retreat, 2008; August 18, 2009; September 23, 2009; November 11, 2009; January 20, 2010; February 17 2010; March 17, 2010; May, 2010; August 18, 2010.; September 22, 2010; October 27, 2010; November 17, 2010; January 19, 2011; February 6, 2011; March 30, 2011; etc.</p> <p>Performance on comprehensive exams, management/leadership components, capstone papers, and certification rates serve as tools to measure elements of the systematic evaluation. In addition, program completion in a timely manner, satisfaction with program, graduate employment, and employer perceptions are additional elements that provide evidence of achievement in meeting program outcomes.</p>	Continue with routine systematic evaluation plan. Overall statistics evaluated throughout year and addressed in faculty meetings. Changes have been documented in program policies, procedures and curriculum based on systematic evaluation plan as noted in minutes.
6.2 (AASN/BSN, MSN/PMC) Aggregated evaluation data inform decision-making and are used for	Review of aggregated data	Chair, Program Directors, Faculty	Annually and as designated	Meeting minutes/ data stored in SON office	Consensus of Chair, Program Directors and Faculty	<p><b>AASN</b></p> <ul style="list-style-type: none"> <li>May 2006, effective Fall 2007 students scoring less than 900 on the Health Education Systems, Inc (HESI) Exit Exam will be required to complete an NCLEX-RN review course.</li> </ul>	Monitor, ongoing

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maintenance or improvement of student learning						<ul style="list-style-type: none"> <li>September 2007, effective October 2007 for Spring 2008 admissions, the AASN program changed the method of calculating admission GPA to include all prerequisite courses. All attempts are averaged for each prerequisite course and the mean is used to compute the GPA.</li> <li>January 2008 CVN course connections will be limited to two sites with faculty at each site in order to enhance student learning.</li> <li>August 2008 a Special Problems Independent Study course NRSP 220v required for all students seeking readmission. Failing the Special Problems course is considered a Nursing course failure and where applicable, the second nursing course failure making the student ineligible for readmission.</li> <li>August 2008, implemented a policy which excluded rounding of any grades or final course grades less than 70%.</li> <li>March 2009 required faculty approval of all NCLEX review courses for students scoring less than 900 on HESI exit exam.</li> <li>October 2009, effective June 2010 admissions, a "C" or better is required for all degree applicable courses.</li> <li>May 2010 revised program outcomes based on national trends to reflect Joint Commission National Patient Safety Goals and studies from the Institute of Medicine.</li> <li>August 2010 readmission testing</li> </ul>	

Process						Implementation	
Element	Assessment Methods	Person Responsible	Frequency of Assessment	Where Documentation Information is found	Expected Level of Achievement	Results	Actions for program development, maintenance or revision
						<p>required with Custom HESI Achievement Exams.</p> <ul style="list-style-type: none"> <li>• August 2010, effective January 2011 a 75%, minimal grade of C required to successfully complete all nursing courses and includes didactic and clinical exam average and clinical rotation average. A grade of D will be assigned for 74.99%.</li> <li>• August 2010, Nursing I NRS 1235 transitioned from compressed video network (CVN) delivery to onsite instruction, web-based lecture recordings and use of case studies. This strategy improved retention of students by approximately 50%.</li> <li>• June 2011 (see August 2011 minutes) effective immediately by unanimous faculty vote students seeking readmission will be allowed to test twice in the same academic year. Two failed attempts at readmission, since they've had an existing failure in a nursing course, will result in the student being ineligible for readmission to the program.</li> </ul> <p><b>BSN</b></p> <ul style="list-style-type: none"> <li>• October 2008 will require NRSP 220V Special Problems-NCLEX Preparation for all traditional students in the spring semester of their senior year. The one credit course will incorporate review test taking strategies, case studies and HESI Exit Exam.</li> <li>• April 2009 pilot for Structured Learning Assistance (SLA) will be</li> </ul>	

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						<p>implemented in the fall for Junior students in NRS 3315. Data reported from Learning Support Services Coordinator and 2006 Nurse Educator article, <i>Improving NCLEX Scores with Structured Learning Assistance</i>.</p> <ul style="list-style-type: none"> <li>January 2010 Structured Learning Assistance evaluations—students would like one day a week instead of two; SLA moved to Monday 1:00 - 3:30 instead of Monday/Wednesday.</li> <li>April 2010 BSN faculty examined end of course Health Education Systems, Inc. (HESI) exam results and NCLEX Program Reports to look for trends in data.</li> <li>May 2010 revised Program Outcomes based on national trends to reflect Joint Commission National Patient Safety Goals and studies from the Institute of Medicine.</li> <li>May 2010 readmission testing required with Custom HESI Achievement Exams. Students returning after failure or an interruption in study are at high risk for NCLEX failure. Testing will help faculty determine if students have retained information from previous course work.</li> <li>August 2010, phased in 75% as lowest C for overall course grade, exam average and clinical rotation average. Decision made after a statewide survey of nursing schools passing standards.</li> <li>February 2011 faculty agreed the HESI RN Case Studies will be</li> </ul>	

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						<p>implemented for both the traditional and Second Degree Accelerated BSN programs beginning Fall 2011. Reviewed study results that demonstrated the use of the case studies as highly significant in predicting success on the HESI Exit Exam.</p> <ul style="list-style-type: none"> <li>• August 2011 faculty approved NCLEX review course for students scoring less than 900 on HESI exit exam. This is a change from the previous 850 as a cut off score as several students making above 850 were unsuccessful on the NCLEX-RN. AASN program implemented this earlier a have seen an increase in NCLEX pass rate.</li> <li>• November 2011 faculty reviewed the correlations between NCLEX-RN pass rates and the following: mean HESI Exit Exam scores, mean Critical Thinking scores on the HESI Exit Exams, NRS 3345 HESI custom final exam mean scores, NRS 4355 HESI custom final exam mean scores, Med Surg Specialty HESI exam mean scores. All comparisons show a direct correlation: the higher the mean scores for the year reviewed, the higher the NCLEX-RN pass rate. Faculty will continue to monitor test results and agree the HESI products are helpful in predicting student success.</li> <li>• November 2011 faculty reviewed current NCLEX pass rate of 81.43% for May 2011 class. If the 75%</li> </ul>	

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						<p>passing score had been enforced for this class, the pass rate would have been 90.5%. The August 2011 Second Degree Accelerated class had the 75% passing score in place and their NCLEX pass rate was 100%. Faculty will continue to monitor.</p> <p><b>MSN</b></p> <ul style="list-style-type: none"> <li>May Retreat 2008 Based on global trends and regional needs for disaster preparedness in addition to faculty recognition of important conceptual information (disaster preparedness, aging, genetics, diversity) topics were added to the policy (NURS 6303) course addressing nursing involvement at the advanced practice level.</li> <li>May 2009 Advanced Health Assessment (NURS 6023), addition of physical assessment in a clinical setting rather than campus laboratory.</li> <li>August 2009 NONPF competencies were integrated into the FNP clinical outcome evaluation tool (NURS 6514, 6614, and 6818) for faculty use in evaluating students and provided to students in course syllabi and orientation.</li> <li>August 2009 FNP faculty changed the procedure for student clinical placement based on location, student needs/ characteristics and preceptor expertise. This procedural change fostered a more</li> </ul>	

Process						Implementation	
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						<p>collaborative relationship between faculty and preceptors.</p> <ul style="list-style-type: none"> <li>November 2009 Anesthesia program lack of adequate space was resolved with a suite of offices in a new state of the art building, the Reynolds Center. The anesthesia suite is fully equipped with offices, classrooms equipped with Smart technology, study rooms and simulation lab including anesthesia machines, operating room tables and a SimMan for advanced learning.</li> <li>May 2010 Theory Development Course (NURS 6203) assignment added to develop case scenarios (storytelling) to illustrate knowledge development in practice.</li> <li>Spring 2010 and Spring 2011 FNP comprehensive examination was evaluated and improved to assure all specialty courses and levels of knowledge were represented.</li> <li>2010 FNP admission policies were changed to admit students once per year to a cohort group that matriculates through the FNP specialty coursework together. Admission process changed to a point system with full interview (August and September 2009; January, 2010). All FNP Consultant recommendations (Report- August, 2008) have been addressed.</li> <li>October 2011 NONPF competencies were updated by the professional organization in 2011, the tool was updated by MSN faculty.</li> </ul>	

Process						Implementation				
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6.3 (AASN/BSN, MSN/PMC) Evaluation findings are shared with communities of interest	Meetings with clinical agency, personnel (Varies with type of clinical)	Chair, Program Directors, Faculty	Annual	Documentation of sharing of information in program minutes	Documentation indicates compliance	<p><b>AASN/BSN</b> Meet each semester with primary clinical agencies, including distant campuses, to share curriculum changes, pass rates, admission criteria; student comments received from Clinical Agency Evaluations is also shared</p> <p>Fall 2011 Shared the minimum passing average increase from 70% to 75%</p> <p>Fall 2011 Chair of SON invited CNOs from the primary clinical agencies or their representatives to a luncheon meeting to discuss outcomes and solicit information</p> <p><b>MSN</b> MSN outcomes are discussed among MSN faculty and reported at Program Director and Executive Council meetings. The information is also shared with general faculty, students and preceptors/clinicians. The Chair of the SON shares outcomes with contracted agencies through their administrative DON. See program and school minutes, MSN orientation slides, MSN web page.</p> <p>MSN Program outcomes – Comprehensive exam pass rate</p> <table><tr><td>Year</td><td>Number</td><td>%</td></tr></table>	Year	Number	%	<p>Monitor; Ongoing</p> <p>The Chair of the SON will continue focus group meetings with CNO's of primary clinical agencies on an annual basis.</p> <p>Data about program outcomes was added to orientation information and on the MSN web page for communities of interest.</p>
Year	Number	%								

Process						Implementation																														
Element	Assessment Methods	Person Responsible	Frequency of Assessment	Where Documentation Information is found	Expected Level of Achievement	Results			Actions for program development, maintenance or revision																											
						<table><tr><td>2011</td><td>72</td><td>100</td></tr><tr><td>2010</td><td>81</td><td>100</td></tr><tr><td>2009</td><td>69</td><td>99</td></tr><tr><td>2008</td><td>76</td><td>97</td></tr><tr><td>2007</td><td>54</td><td>100</td></tr><tr><td>2006</td><td>53</td><td>100</td></tr></table>	2011	72	100	2010	81	100	2009	69	99	2008	76	97	2007	54	100	2006	53	100												
2011	72	100																																		
2010	81	100																																		
2009	69	99																																		
2008	76	97																																		
2007	54	100																																		
2006	53	100																																		
						For example, comprehensive exam performance has been used to evaluate outcomes of program study, verify critical thinking and justify course content (March 17,2 010; May 5, Retreat, 2010)																														
6.4 (AASN/BSN) Graduates demonstrate achievement of competencies appropriate to role expectations	Monitoring final semester course grades	Chair, Program Directors, Faculty	Annually	Minutes of programs	Students will demonstrate achievement of competencies as reflected in final course grades  90% of students will achieve passing grade in final course(s) or semester	<b>AASN</b> 90% of students will receive passing grades in final semester <table><tr><td>Year</td><td>Number</td><td>%</td></tr><tr><td>2011</td><td>93</td><td>86.0</td></tr><tr><td>2010</td><td>119</td><td>89.1</td></tr><tr><td>2009</td><td>95</td><td>95.8</td></tr><tr><td>2008</td><td>99</td><td>98.9</td></tr></table> <b>BSN</b> Traditional BSN 90% of students will receive a “C” or better in senior level courses <table><tr><td>Year</td><td>Number</td><td>%</td></tr><tr><td>2010-11</td><td>75</td><td>93.35</td></tr><tr><td>2009-10</td><td>84</td><td>96.43</td></tr><tr><td>2008-09</td><td>76</td><td>98.7</td></tr></table>  Second Degree Accelerated BSN 90% of students will receive a “C” or	Year	Number	%	2011	93	86.0	2010	119	89.1	2009	95	95.8	2008	99	98.9	Year	Number	%	2010-11	75	93.35	2009-10	84	96.43	2008-09	76	98.7	Actions: 2010 AASN/BSN implementation of readmission testing to confirm retention of previously learned knowledge; all undergraduate programs changed the minimal passing score for nursing courses to 75% [EBP]  2011 AASN/BSN implement admission testing		
Year	Number	%																																		
2011	93	86.0																																		
2010	119	89.1																																		
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	Surveys of alumnae about competencies and role performance (one year follow-up)			SON office	Majority of Alumnae will report achievement of competencies for practice as Registered Nurse 75% of responding alumnae rate competencies in practice and role performance as satisfactory	<p>better in the final clinical courses NRSP 4456/4466</p> <table><tr><td>Year</td><td>Number</td><td>%</td></tr><tr><td>2010-11</td><td>22</td><td>100</td></tr><tr><td>2009-10</td><td>16</td><td>100</td></tr><tr><td>2008-09</td><td>15</td><td>100</td></tr></table> <p>RN to BSN 90% of students will receive a “C” or better in the capstone course NRSP 4793</p> <table><tr><td>Year</td><td>Number</td><td>%</td></tr><tr><td>2010-11</td><td>13</td><td>100</td></tr><tr><td>2009-10</td><td>16</td><td>87.5</td></tr></table> <p>Alumni Survey results:</p> <table><tr><td></td><td>Year</td><td>N</td><td>Equal to or Better than Other Graduates</td></tr><tr><td>AASN</td><td>2008</td><td>3</td><td>100%</td></tr><tr><td></td><td>2009</td><td>16</td><td>75%</td></tr><tr><td></td><td>2010</td><td>10</td><td>100%</td></tr><tr><td>BSN</td><td>2008</td><td>13</td><td>92.3%</td></tr><tr><td></td><td>2009</td><td>19</td><td>100%</td></tr></table>	Year	Number	%	2010-11	22	100	2009-10	16	100	2008-09	15	100	Year	Number	%	2010-11	13	100	2009-10	16	87.5		Year	N	Equal to or Better than Other Graduates	AASN	2008	3	100%		2009	16	75%		2010	10	100%	BSN	2008	13	92.3%		2009	19	100%	Monitor
Year	Number	%																																																		
2010-11	22	100																																																		
2009-10	16	100																																																		
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Element	Assessment Methods	Person Responsible	Frequency of Assessment	Where Documentation Information is found	Expected Level of Achievement	Results					Actions for program development, maintenance or revision	
							2010	12	83.3%*			
6.4 (MSN/PMC) The program demonstrates evidence of achievement in meeting specified program outcomes	MSN-acceptable pass rate for certifications (reported certifications = Nurse Practitioner and Nurse Anesthesia graduates  MSN students will complete program in a timely manner  Majority of students and employers will express satisfaction with program  Majority of students will be employed in job commensurate with program or degree	Chair, MSN Program Director and Faculty	Annually	Program Minutes								
6.4.1 (MSN/PMC) performance on certification exams	(6.4.1) Entry level MSN Programs, licensure rates at or above national mean					(6.4.1) Not applicable- not an entry level MSN program.						
6.4.2 (MSN/PMC) Performance on certification exams	(6.4.2) 80% of first time exam takers pass the exam				80% first time writers will pass certification exams	(6.4.2) MSN program outcomes- Certification Rates:						
						Yr		#	%		#	%
						10	FNP	17	82	NA	46	83
						09	FNP	24	88	NA	43	95

Process						Implementation																														
Element	Assessment Methods	Person Responsible	Frequency of Assessment	Where Documentation Information is found	Expected Level of Achievement	Results	Actions for program development, maintenance or revision																													
6.4.3 (MSN/PMC) Program completion	(6.4.3) 80% of students graduate within 1.5 times the length of the program				80% admitted students will complete program or degree within 1 ½ times (based on f-t calculation)	<table><tr><td>08</td><td>FNP</td><td>21</td><td>95</td><td>NA</td><td>43</td><td>100</td></tr><tr><td>07</td><td>FNP</td><td>16</td><td>94</td><td>NA</td><td>35</td><td>97</td></tr><tr><td>06</td><td>FNP</td><td>17</td><td>100</td><td>NA</td><td>32</td><td>91</td></tr><tr><td>05</td><td>FNP</td><td>17</td><td>82</td><td>NA</td><td>10</td><td>90</td></tr></table>	08	FNP	21	95	NA	43	100	07	FNP	16	94	NA	35	97	06	FNP	17	100	NA	32	91	05	FNP	17	82	NA	10	90	Certification rates have exceeded the standard in all years since 1999 for the Family Nurse Practitioner (FNP) program and since program inception (2005) for the Nurse Anesthesia (NA) program. Adult Health (AH) certification data are anecdotal only as graduate numbers in this specialty are too low for ANCC to provide reports. Anecdotal information from AH graduates indicates successful completion. Certification data are available in the academic year following graduation and have contributed to changes in policies, procedures and class content such as including specialty review courses (January 22, 2008; March 25, 2008) and changing from essay to objective evaluation items for comprehensive examinations (January 19, 2007).  (6.4.3)A majority of MSN students are admitted on part-time tracks and complete the program within the time period allowed by University graduate school standards. We calculated that greater than 80% of MSN students have completed the program within 1.5 times the length of the program.  MSN program outcome-program completion	(6.4.3) This new criterion was determined retrospectively for 2008, 2009, and 2010. Based on results of this outcome, faculty agreed to monitor advisees' length of matriculation and provide
						08	FNP	21	95	NA	43	100																								
						07	FNP	16	94	NA	35	97																								
06	FNP	17	100	NA	32	91																														
05	FNP	17	82	NA	10	90																														

Process						Implementation																
Element	Assessment Methods	Person Responsible	Frequency of Assessment	Where Documentation Information is found	Expected Level of Achievement	Results	Actions for program development, maintenance or revision															
6.4.4 (MSN/PMC) Student and Employer Satisfaction with Program	(6.4.4) 80% of graduates and their employers will express satisfaction with the program.				80% of students will rate program As a 3.5 on a 5 point scale.  80% of employers will rate program at a 3.5 or higher on a 5	<table><tr><td>Yr</td><td># FNP and AH grads &lt;1.5</td><td>%</td></tr><tr><td>2011</td><td>25</td><td>100</td></tr><tr><td>2010</td><td>33</td><td>100</td></tr><tr><td>2009</td><td>29</td><td>90</td></tr><tr><td>2008</td><td>23</td><td>88</td></tr></table>	Yr	# FNP and AH grads <1.5	%	2011	25	100	2010	33	100	2009	29	90	2008	23	88	guidance with program completion dates in mind (March, 2011)
						Yr	# FNP and AH grads <1.5	%														
						2011	25	100														
						2010	33	100														
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						<table><tr><td>Yr</td><td># NA grads &lt;1.5</td><td>%</td></tr><tr><td>2011</td><td>47</td><td>100</td></tr><tr><td>2010</td><td>33</td><td>100</td></tr><tr><td>2009</td><td>29</td><td>90</td></tr><tr><td>2008</td><td>43</td><td>100</td></tr></table>	Yr	# NA grads <1.5	%	2011	47	100	2010	33	100	2009	29	90	2008	43	100	
						Yr	# NA grads <1.5	%														
						2011	47	100														
						2010	33	100														
2009	29	90																				
2008	43	100																				
The outcome reveals timely program completion.																						
(6.4.4) Results of graduate surveys indicate satisfaction rates of 80% or better since 2008. Anecdotal information reported in MSN meetings indicated a potential lack of satisfaction from some primary care physicians with FNP graduates. Faculty considered approving more stringent admission criteria. Faculty decided to review individual student histories to determine if cause of dissatisfaction was a lack of clinical experience before instituting a new and lengthier experience criterion for admission. See program minutes August 18, 2009; September 23, 2009; November 11, 2009. Review of records did not correlate with complaints.																						
(6.4.4) Anecdotal information will be followed by more systematic and objective survey data on 2010 graduates obtained one year after graduation in 2011.																						

Process						Implementation	
Element	Assessment Methods	Person Responsible	Frequency of Assessment	Where Documentation Information is found	Expected Level of Achievement	Results	Actions for program development, maintenance or revision
6.4.5 (MSN/PMC) Professional/Job Placement exams	(6.4.5) 80% of those seeking employment are involved in role-related professional practice at one year post graduation.				<p>point scale.</p> <p>80% of graduates seeking employment will hold job in role related to program or degree at one-year post-graduation</p>	<p>Faculty decided to wait for objective satisfaction data as a basis for decision-making.</p> <p>Results of graduate surveys obtained since 2008 indicate 100% employment rates in role related professional positions.</p>	6.4.5) The return rate of <u>mailed</u> surveys and reports for MSN alumni and employers has decreased over the last years. In an effort to improve response rates, the School has moved to other methods of delivery of questionnaires such as Survey Monkey and Evaluation Kit online surveys. Improvement in rates of response is expected for data collected

Process						Implementation	
Element	Assessment Methods	Person Responsible	Frequency of Assessment	Where Documentation Information is found	Expected Level of Achievement	Results	Actions for program development, maintenance or revision
							since 2008. See minutes, September 23, 2009, Retreat, 2010.
6.5 (AASN/BSN) The program demonstrates specified outcomes Licensure exam	NCLEX-RN reports	Chair, Program Directors, Faculty	Annually	Program Minutes	<p>AASN &amp; BSN-acceptable pass rate for first time writers (NCLEX-RN)AAS &amp; BSN-majority of students complete nursing studies at or above the national average</p> <p>Outcome &gt;75% minimal program requirement by ASBN</p>	<p><b>AASN</b> Because the AASN program graduates in December, the class NCLEX pass rate is reflected in the following year's data.</p> <p>Graduating class of 2010 90.29% (n= 105); NPR 87.7% Graduating class of 2009 77.42% (n=91); NPR 88.8% Graduating class of 2008 89.69% (n=99); NPR 87.4% *NPR- National Pass Rate</p> <p>Since noting a problem with the review course taken by some Beebe students during the Fall 2008 semester, NCLEX review courses, required if a student does not achieve a 900 or higher on HESI, must be <b>'faculty approved'</b> review course. – problem Beebe students going through review course in 1 hour [www.rnquiz.com] Testing for Readmission to the Program: HESI Custom Exam: Fundamentals</p> <p>Faculty were asked if this exam would be acceptable for readmission students to Fall 2009</p> <p>Letters will be mailed to students eligible for readmission to the 2<sup>nd</sup> semester containing information regarding this</p>	<p>All NCLEX review courses taken because of an EXIT HESI score of less than 900 must be faculty approved. This will be added to course syllabi for 4<sup>th</sup> semester students.</p> <ol style="list-style-type: none"> <li>1. Syllabus will be changed to reflect '<i>an approved faculty review course</i>'.</li> <li>2. Students should be encouraged to use such sites as these as supplements only</li> </ol> <p>NRS220V discussed changes in the course planned and changes in</p>

Process						Implementation	
Element	Assessment Methods	Person Responsible	Frequency of Assessment	Where Documentation Information is found	Expected Level of Achievement	Results	Actions for program development, maintenance or revision
						<p>change in policy. In order to be readmitted, the student must successfully complete this exam prior to being considered for readmission. Brenda or Renee' to proctor. Faculty to communicate via e-mail concerning readmission students for Fall 2009</p> <p>English proficiency requirements (CNHP) requirement and affects AASN, BSN, MSN students Health Assessment/Lab is now a 2000 level course beginning Fall 2009</p> <p><b>BSN</b></p> <p>2010-11: 82.7% (n=81); NPR 87.7% 2009 -10: 86.5% (n=119); NPR 88.8% 2008-09: 74.1% (n=81); NPR 87.4% 2007-08: 76.3% (n=80); NPR 85.5% *NPR - National Pass Rate</p> <ul style="list-style-type: none"> <li>Fall 2008 BSN applicants ranked for admission based on degree applicable GPA only. The minimum GPA for application was increased from 2.5 to 2.8. Additionally, all science courses must have a "C" or better instead of an average of 2.0 in the science courses.</li> <li>Spring 2009 one hour required Special Problems class instituted for seniors in final semester of program. Review of NLCEX test taking, case studies, and the HESI exit exam.</li> <li>Fall 2009 began phasing in HESI custom and specialty exams for didactic courses at the end of each semester.</li> <li>Fall 2009 Structured Learning</li> </ul>	<p>fundamentals and increasing the inclusion of NIC/NOC Changes made in the NCLEX review course based on HESI</p> <p>Faculty did not identify any major curricular deficits. Additional content related to addiction is needed.</p> <p>Monitor; ongoing</p>

Process						Implementation	
Element	Assessment Methods	Person Responsible	Frequency of Assessment	Where Documentation Information is found	Expected Level of Achievement	Results	Actions for program development, maintenance or revision
						<p>Assistance (SLA) (coordinated through the Learning Support Services at ASU) was implemented with junior class. After hearing a presentation from Learning Support Services and reviewing Arlene Morton's article, "Improving NCLEX Scores with Structured Learning Assistance" (2006), the BSN faculty decided to implement and evaluate this structured remediation. The SLA facilitator (current graduate student in the educator track of the MSN program) was trained by Learning Support Services. The facilitator attends class with the juniors. During SLA periods she clarifies course concepts, reviews case studies and NCLEX style questions related to content. Although all students were encouraged to attend the SLA, attendance was required for students making less than 85% on exams.</p> <ul style="list-style-type: none"> <li>• Fall 2009 audience participation devices incorporated into the classroom to increase student engagement.</li> <li>• Fall 2010 began phasing simulations into each clinical course: junior year (2 medical-surgical, psychiatric and pediatric); senior year (critical care and community); sophomore (OB to be implemented Spring 2012).</li> <li>• Spring 2011 after reviewing two years of student evaluations, results showed that the vast majority did not like being forced to attend SLA. Class scores were not significantly</li> </ul>	

Process						Implementation																			
Element	Assessment Methods	Person Responsible	Frequency of Assessment	Where Documentation Information is found	Expected Level of Achievement	Results	Actions for program development, maintenance or revision																		
						<p>changed. The ASU Learning Support Services Director suggested changing to Supplemental Instruction for Fall 2011 which makes this an optional activity for the junior students. Two senior BSN students who excelled during their junior year were hired to provide this tutoring service on Mondays from 3:00-4:30PM. The SLA has been moved to the sophomore class to assist those students with test taking skills and improve student retention.</p> <ul style="list-style-type: none"><li>Plan for 2012 Admission requirements strengthened to include HESI A2 Admission Assessment as part of the determination for applicants. Faculty want students who have high reading comprehension and math skills. HESI A2 piloted with Fall 2011 class. We will follow student progress and note correlation. Plan to pilot the HESI A2 with incoming Second Degree Accelerated students in summer 2012.</li></ul>																			
(AASN, BSN) Program Completion	Graduation data by cohort Completion data by cohort	Chair, Program Directors, Faculty	Annually	Program Minutes	AASN-60% of admitted students complete program within 6 semesters  BSN-75% admitted students complete	Program Completion Rates (AASN/BSN) <table><tr><td></td><td>Cohort Year</td><td>Percent Complete</td></tr><tr><td>AASN - TR</td><td>S 2009</td><td>75.9%</td></tr><tr><td></td><td>S 2008</td><td>66.2%</td></tr><tr><td></td><td>S 2007</td><td>56.1%</td></tr><tr><td>AASN LPN-RN</td><td>F 2009</td><td>80.9%</td></tr><tr><td></td><td>F 2008</td><td>76.2%</td></tr></table>		Cohort Year	Percent Complete	AASN - TR	S 2009	75.9%		S 2008	66.2%		S 2007	56.1%	AASN LPN-RN	F 2009	80.9%		F 2008	76.2%	Monitor; ongoing
	Cohort Year	Percent Complete																							
AASN - TR	S 2009	75.9%																							
	S 2008	66.2%																							
	S 2007	56.1%																							
AASN LPN-RN	F 2009	80.9%																							
	F 2008	76.2%																							

Process						Implementation				
Element	Assessment Methods	Person Responsible	Frequency of Assessment	Where Documentation Information is found	Expected Level of Achievement	Results			Actions for program development, maintenance or revision	
					program within 8 semesters		F 2007	78.9%		
						BSN – TR	F 2008	75.5%		
							F 2007	83.3%		
							F 2006	78.8%		
						BSN LPN-BSN	F 2009	100%		
							F 2008	100%		
							F 2007	100%		
						BSN 2 <sup>nd</sup> Accel	Su 2010	91.7%		
							Su 2009	87.5%		
							Su 2008	100%		
							Su 2007	100%		
(AASN, BSN) Program Satisfaction (Students and Employers)	Program Satisfaction Surveys and Reports from Alumnae and Employers	Chair, Program Directors, Faculty		Program Minutes	Majority of student and employer responses will express satisfaction with program/degree:  75% of AASN and BSN students will rate program as satisfactory		YEAR	% SAT		Monitor; ongoing
						AASN	2008	100		
							2009	87.5		
							2010	100		
						BSN	2008	100		
							2009	100		
							2010	83.3		
						*SAT - Satisfaction				

Process						Implementation																						
Element	Assessment Methods	Person Responsible	Frequency of Assessment	Where Documentation Information is found	Expected Level of Achievement	Results	Actions for program development, maintenance or revision																					
(AASN, BSN) Job Placement	Survey of graduates	Chair, Program Directors, Faculty	Annually	SON Office	ELA = 85% Graduates will report full – time employment appropriate to major Majority of AASN and BSN graduate are working in nursing within 6 months of graduate	<table><tr><td></td><td>YEAR</td><td>% EMP</td></tr><tr><td>AASN</td><td>2008</td><td>100</td></tr><tr><td></td><td>2009</td><td>93.8</td></tr><tr><td></td><td>2010</td><td>100</td></tr><tr><td>BSN</td><td>2008</td><td>100</td></tr><tr><td></td><td>2009</td><td>100</td></tr><tr><td></td><td>2010</td><td>91.67</td></tr></table> *EMP – Employed as an RN		YEAR	% EMP	AASN	2008	100		2009	93.8		2010	100	BSN	2008	100		2009	100		2010	91.67	Monitor; ongoing
	YEAR	% EMP																										
AASN	2008	100																										
	2009	93.8																										
	2010	100																										
BSN	2008	100																										
	2009	100																										
	2010	91.67																										
6.6 (AASN/BSN) The systematic plan for evaluation encompasses students enrolled in distance education and includes evidence that student learning and program outcomes are comparable for all students (6.5 MSN/PMC)	Inclusion of DE within Systematic Evaluation Plan. Data from DE students reported separately and with total student group  Review of data for areas of strength and needed area of improvement	Chair, Program Directors, Faculty			As indicated, for student groups above.	<b>AASN</b> All courses are team taught with faculty collaboration on syllabi, assignments, all students take the same exams for didactic and clinical courses; all final exams are HESI custom/standardized  <b>AASN, BSN</b> The outcomes of students involved in distance education are reported in aggregate with ASU-J students  (6.5) MSN students are not differentiated into local or distance students groups. All MSN students obtain a majority of core courses and some specialty courses using web enhanced and web based approaches to	(6.5) On a regular and ongoing basis faculty review the critical thinking skills, communication																					

Process						Implementation	
Element	Assessment Methods	Person Responsible	Frequency of Assessment	Where Documentation Information is found	Expected Level of Achievement	Results	Actions for program development, maintenance or revision
						instruction. Some MSN courses are provided using the traditional classroom approach. Regardless of the approach to instruction, course syllabi and learning outcomes within each course are the same for all MSN students enrolled. See course syllabi; printed copies are maintained in nursing office. Evidence of achievement of program outcomes (systematic evaluation data) is requested for all MSN students and graduates.	abilities, therapeutic nursing interventions, advanced practice core competencies and other program outcomes through course assignments, course evaluations, overall curriculum evaluations, comprehensive exam results, capstone papers and other data to improve the quality and effectiveness of the program.

## **SECTION 4**

### **APPENDIX A**

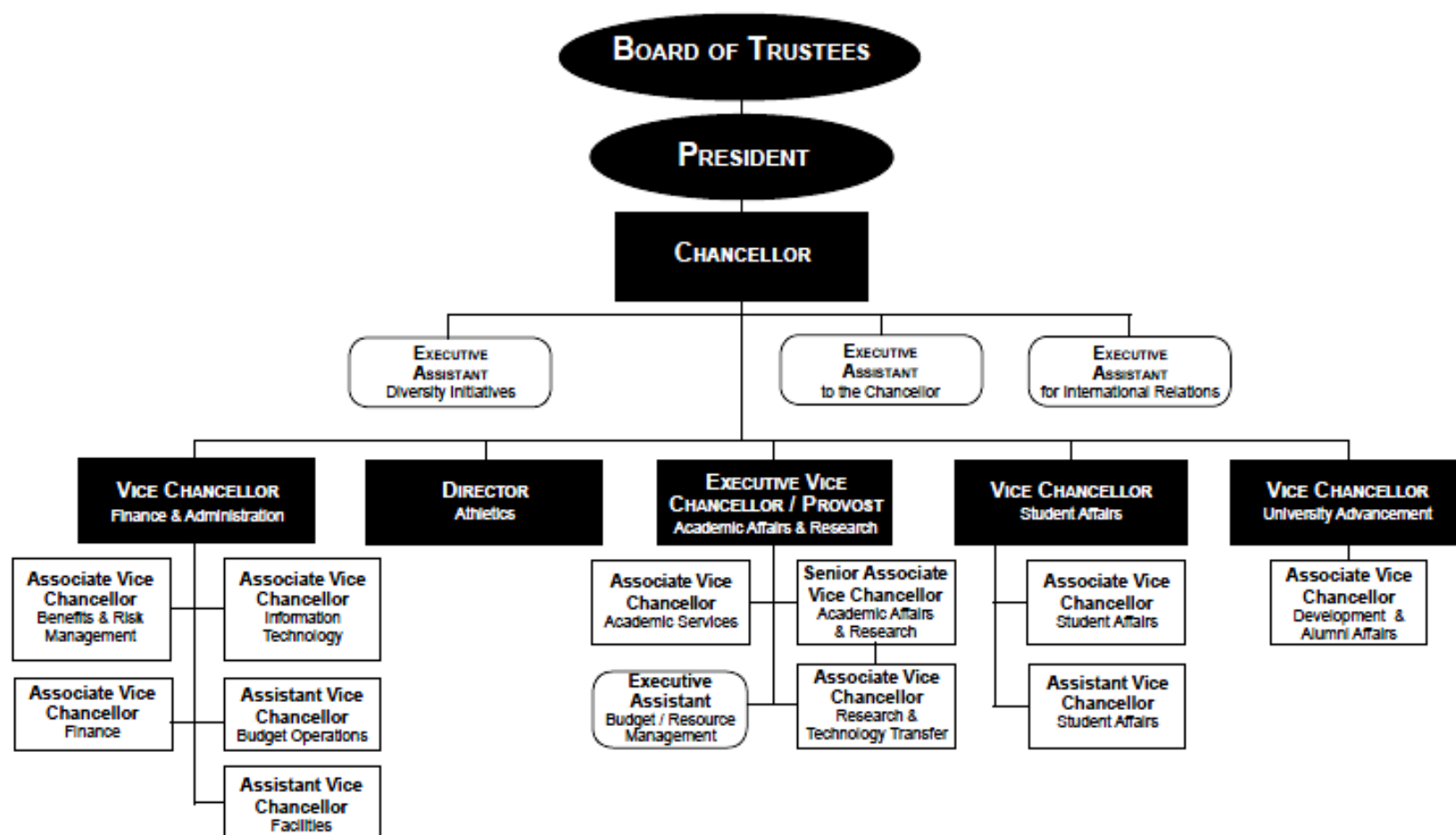
#### **Organizational Charts**



# Arkansas State University-Jonesboro

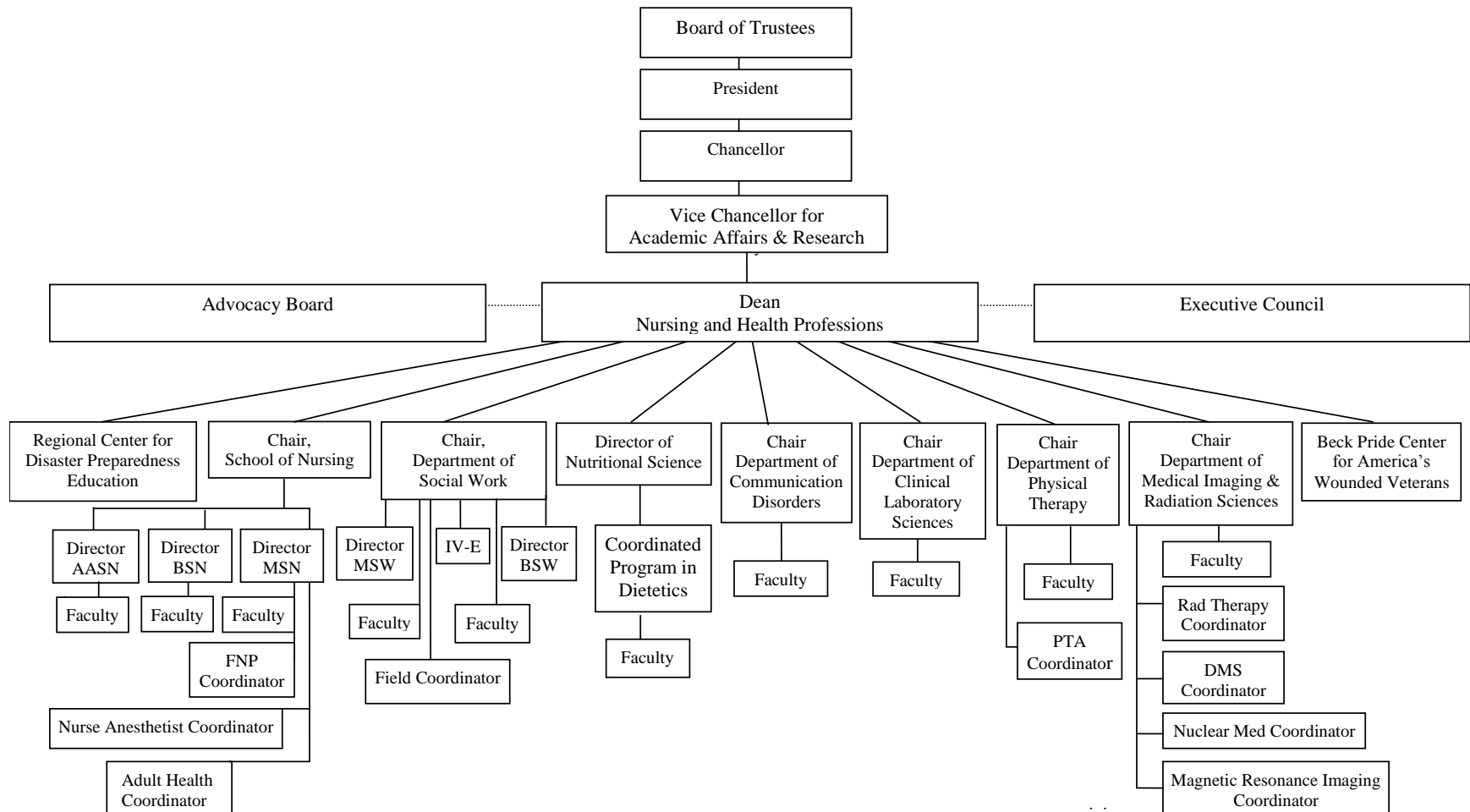


## 2010-2011 Organizational Structure

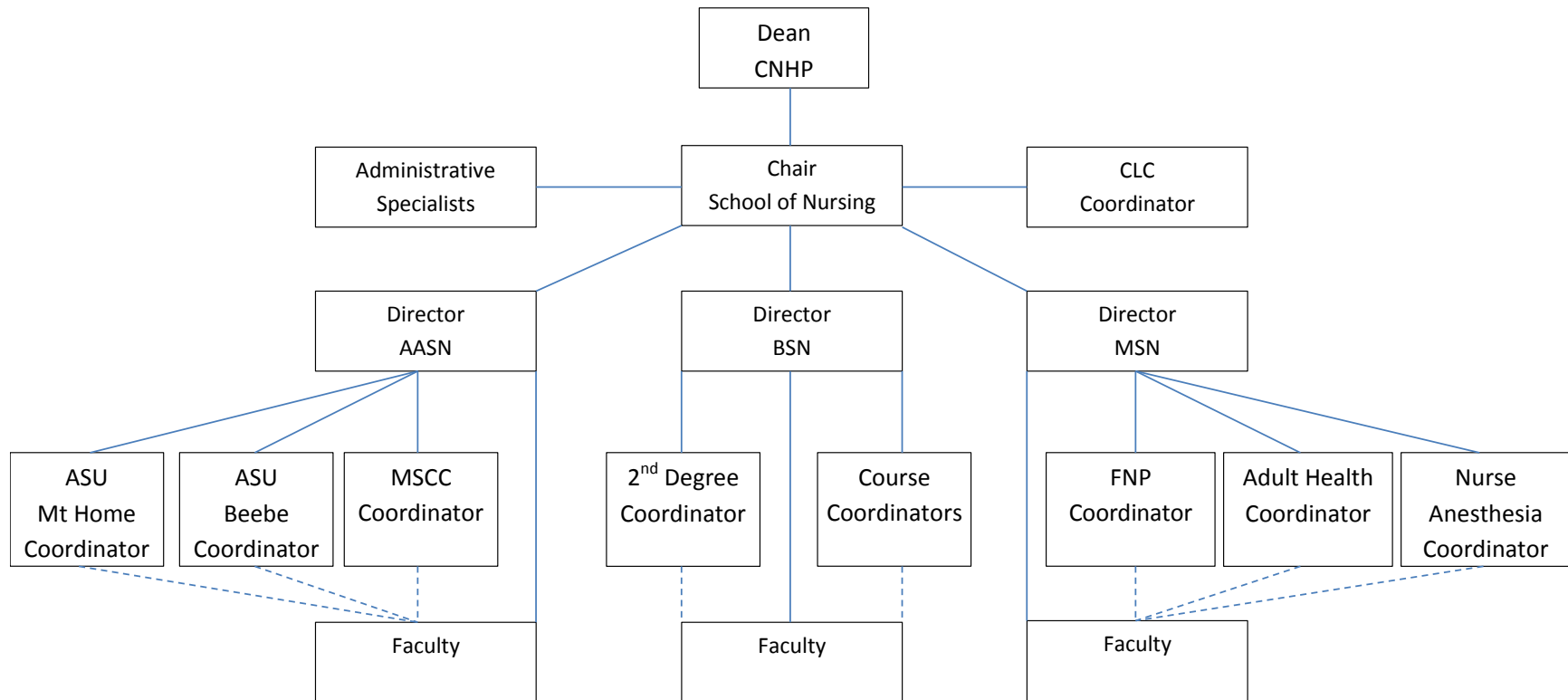




## College of Nursing and Health Professions Organizational Chart



College of Nursing and Health Professions  
School of Nursing



## **APPENDIX B**

### **SON Faculty Participation in Governance**

<b>Faculty</b>	<b>University</b>	<b>College</b>	<b>School</b>
Anderson, Brenda	<p>Calendar committee 2010-2012</p> <p>Smoke Free Campus Committee 2009-2010</p>	<p>Faculty Senator 2011-2013</p> <p>Grievance Committee 2010-2012</p> <p>Clinical Relations 2009-present</p>	<p>Faculty Development 2010-2012</p> <p>Faculty Search Committee MSN Anesthesia 2011</p> <p>Member, NLNAC Self Study Standard 4 Committee, 2010-2012</p> <p>Faculty Search Committee Second Degree Accelerated BSN 2009</p> <p>Continuing Nursing Education Chairperson 2008-present</p> <p>Bylaws/Nominating- Chairperson 2007-2009</p> <p>Nursing Faculty/Student Handbook 2007-2009</p>
Baker, Darlene	<p>University IRB Committee 2008-2010</p> <p>University PRT Committee 2007-2009</p>	<p>Scholarship and Awards Committee 2011-2013</p> <p>College Assessment 2008-2011</p> <p>Social Work Faculty search Committee 2007</p>	<p>Co-Chair, NLNAC Self Study Committee, Standard 4, 2010-2012</p> <p>PRT committee 2001-2009</p>

Blue, Karen	Parking Motor Vehicle Committee 2004 – 2008	College Grievance Committee 2010-2012	PRT 2010-2013  Co-Chair, NLNAC Self Study Standard 4 Committee, 2010-2012  Nursing Grievance 2009-2011  SNA Sponsor/Advisor, 2001-2007
Clay, Lori		Infection Control 2010-2012  Ad hoc Honors 2011-present	Member, NLNAC Self Study Standard 5 Committee, 2010-2012  Faculty Student Handbook 2008-2010
Cooper, Kim	ASU Searcy LPN Advisory Council 2010 to present		Member, NLNAC Self Study Standard 1 Committee, 2010-2012  Faculty, Student Handbook 2009-2010
Drake, Lisa			Nursing CE Provider 2009-2012  ANSA Student Advisor District III 2010-present  Member, NLNAC Self Study Standard 5 Committee, 2010-2012  Nursing Grievance 2007-2009
Fuller, Diana			Chair, NLNAC Self Study Standard 3 Committee, 2010-2012  Faculty Development 2009-2011  Ad Hoc Goal Development

			Committee 2009-2012
Hall, Cathy	<p>Academic Hearing Committee August 2011-present</p> <p>Herald Newspaper Student Publication Committee member 2003-present</p> <p>Institutional Technology Distance Education Subcommittee 2007-April 2010</p> <p>Faculty Achievement Awards Committee (secretary, 2007-2008)</p>	<p>ad hoc Technology Committee 2005-present</p> <p>Promotion, Retention and Tenure Committee Member 2006-2007; 2008-10; Secretary 2010-2011</p> <p>Advisory Committee for Faculty Exchange from Finland, April 2010</p> <p>Faculty Search Committee for CRNA Position Spring 2010</p>	<p>Chair, NLNAC Self Study Standard 6 Committee, 2010-2012</p> <p>PRT 2008-2011</p> <p>Nursing Faculty Search committee 2008-present</p>
Isaacson, Julie	<p>Higher Learning Commission Steering Committee, Co-Chair 2008-10</p> <p>Shared Governance Oversight Committee 2007-08</p> <p>Chancellor's Writing Group 2005-07</p> <p>Higher Learning Commission Focus Group 2005-07</p>	<p>Interdisciplinary Activities, Chair 2006-2011</p> <p>Credentialing of Clinical Educators 2006-current</p> <p>CNHP Faculty Commencement Marshall 2010-2012</p>	<p>Grievance Committee 2011-2013</p> <p>Member, NLNAC Self Study Standard 1 Committee, 2010-2012</p>

	Shared Governance Task Force, chair 2003-10		
Latting, Linda			Nursing Grievance Committee 2010-2012  Member, NLNAC Self Study Standard 2 Committee
Matthews, Rebecca	<p>Faculty Research Awards Committee 2009-2012 Chair 2010-2011</p> <p>Education and Technology Committee 2010-2012</p> <p>Ad hoc Higher Learning Commission Subcommittee V, Engagement and Service, 2010-2011</p> <p>Undergraduate Enrollment and Academic Policy Committee (member, 2011-2013)</p> <p>Ad hoc Finance and Administration Rate Negotiation Committee, 2011-2012</p> <p>Ad hoc Committee to Consider a Unifying Academic Theme Spring 2008</p>	<p>Constitution and Bylaws (member) 2011-2013</p> <p>Bylaws/ Nominating Chair 2009-2011</p> <p>Grievance Committee 2006-2010</p> <p>Cultural Diversity Committee 2007-2011</p> <p>ad hoc Committee to Develop Grant for Aging Research co-chair 2010-2011</p>	<p>Bylaws/Nominating Nursing CE Provider 2012-2013</p> <p>Co-Chair, NLNAC Self Study Standard 2 Committee, 2010-2012</p> <p>BSN Professional Behaviors Committee, ad hoc 2011</p> <p>School of Nursing Goals Committee 2011</p> <p>Nursing CE provider Committee 2010-2013</p> <p>ad hoc Committee to Revise the School of Nursing Philosophy 2008</p> <p>Chair, ad hoc Committee to Revise School of Nursing Goals, 2009-2011</p>
McLary, Sue	Distance Learning & Technology 2008-2011	Interdisciplinary Activities 2011-2012	Member, Steering Committee, NLNAC Self Study, 2010-2012

	<p>Financial Aid &amp; Scholarships 2008-2012</p> <p>General Education 2007-2010</p> <p>General Education, Chair 2010-2013</p> <p>Chairs Council 2006-2012</p>	<p>Executive Council 2005-2012</p> <p>Bachelor of Nutritional Science Task Force 2010-2012</p> <p>College Assessment 2009-2010</p> <p>Donald W. Reynolds Health Sciences Center 2006-2009</p>	<p>Nursing CE Provider Committee 2007-2011</p>
McPike, H Dawn			Member, NLNAC Self Study Standard 4 Committee, 2011-2012
Miller, Renee	<p>University Curriculum Committee 2007-2011</p> <p>IT/BB6/Online Advisory Committee 2008</p>	<p>Executive Council 2005-present</p> <p>Online Continuing Education Center Ad Hoc Committee, 2005-present</p> <p>Curriculum Committee, 2005-present</p> <p>Curriculum Committee Chair 2009-present</p> <p>Fundraising Ad Hoc Committee, 2007-present</p> <p>Student and Alumni Affairs, 2007-2010</p> <p>CNHP Alpha Eta</p>	<p>Member, Steering Committee, NLNAC Self Study [specific oversight, Standards 5 and 6], 2010-2012</p> <p>Library Committee, 2008-present</p> <p>Staff Search Committee, West Memphis Site, Chair 2009</p> <p>Faculty Search Committee, Mountain Home Campus, Chair 2009</p> <p>Faculty Search Committee, West Memphis Campus, Chair 2009</p> <p>Department Curriculum Committee, 2008-2009</p>

		Honor Society for Allied Health – Student Sponsor, Secretary-Treasurer 2005 – present	Student and Alumni Affairs, 2008-2009  Mission, Philosophy, and Organizing Framework Review Committee, 2008  SON Faculty Development, 2007-2009
Moody, Terri			Member, NLNAC Self Study Standard 5 Committee, 2010-2012
Nix, Elizabeth		Scholarship & Awards 2010-2012  Grievance committee 2009-2011  Ethics Committee 2009-2011	Member, NLNAC Self Study Standard 3 Committee , 2010-2012  PRT Committee, 2011-2013  SNA Sponsor/Advisor, 2007-Present  Nursing CE Provider 2007-2009
Norman, Belinda	Faculty Senate Student Disciplinary Committee 2011	ASU Dietetics Program Board of Directors 2011	Member, NLNAC Self Study Standard 6 Committee, 2011-2012  School of nursing Goals committee: ad hoc 2011
Persell, Deborah	National Level Exercise Incident Commander for Arkansas State University, 2011 Member of search committee	Developer of Associate of Applied Science, Bachelor of Professional	Chair, NLNAC Self Study Standard 1 Committee, 2010-2012  Ad hoc

	<p>for Arkansas State University ABI Executive Director, 2011 Member of search committee for Research Development Specialist, Office of Research and Technology Transfer, Arkansas State University, 2011. Research &amp; Education Ad Hoc 2010</p> <p>H1N1 Incident Commander for Arkansas State University, 2009-1010</p> <p>Health &amp; Medical Director, ASU Disaster Operations Plan 2008 – present</p>	<p>Studies and Master of Science in Disaster Preparedness &amp; Emergency Management as well as Graduate Certificate in Disaster Health, Arkansas State University, 2010 – present</p> <p>Ad-hoc Multidisciplinary minor for Homeland Security and Emergency Preparedness 2005-present</p> <p>Ad-hoc Autism Resource Center Committee 2007- present</p> <p>Infection Control Committee 2008- 2009</p>	<p>Philosophy/Organizing Framework 2008</p> <p>Scholarship Support Group Founded fall 2008; 2008-2009</p> <p>PRT 2009-2012</p>
Pfriemer, Judy	Faculty Senate, 2005-2007		<p>Member, NLNAC Self Study Standard 3 Committee, 2010-2012</p> <p>SNA Sponsor/Advisor, 2001-2007</p>
Schmidt, Angela	<p>University Honors Committee 2008-2011</p> <p>Library Committee 2009-current Faculty Scholarship Awards Committee 2009-2011 Graduate Council 2010-current</p>	<p>Executive Council, 2008- current</p> <p>College Honors Committee Chair, 2010-2011</p> <p>College Library Committee</p>	<p>Library 2010-2013</p> <p>Member, Steering Committee, NLNAC Self Study [specific oversight, Standards 1 and 2], 2010-2012</p>

	<p>HLC Committee-Standard IV-Acquisition, and Discovery, Application of Knowledge 2010-2011</p> <p>Distance Education Writing Team, Dept of Higher Learner 2009</p> <p>Dept of Higher Learning Distance Education Focus Group for visitors Request for Change 2009</p>	<p>2008-current</p> <p>College Scholarship and Awards Committee 2007-2011</p> <p>Ethics and Grievance 2007-2008</p> <p>Grievance Hearing Committee Chair, 2008</p> <p>Ad Hoc Anniversary Committee 2006-2008</p> <p>College Assessment Committee, Chair 2011-current</p>	<p>MSN Faculty, Director Fall 2008-current</p> <p>Distinguished Alumni Selection Committee Fall 2009</p> <p>FNP Faculty Search Committee, Chair 2010-2011</p> <p>NA Faculty Search Committee, Chair 2009-2010</p> <p>DNP Consortium Steering Committee (ad hoc Needs Assessment Committee) 2009-current</p>
Shelton, Debbie	<p>Board of Trustee Faculty Achievement Fall 2006</p> <p>Board of Trustee Faculty Achievement Fall 2010</p> <p>University Disaster Preparedness Committee 2009 – 2010</p>	<p>Scholarship &amp; Awards 2009-2011</p> <p>Infection Control 2008-2009</p>	<p>Member, NLNAC Self Study Standard 4 Committee, 2010-2012</p> <p>Faculty Development 2008-2009</p> <p>Bylaws/Nominating 2008-present</p> <p>Library Committee 2009-2012</p> <p>Goals Committee 209-2010</p>
Simmons, Joyce	<p>ASU Searcy LPN Advisory Council 2009 to present</p>		<p>Faculty Student Handbook 2010-2012</p>

			Member, NLNAC Self Study Standard 5 Committee, 2010-2012  Library Resources Beebe Campus 2007-present
Skorga, Phyllis	Arkansas DNP Consortium Committee 2010-2011  Curriculum Committee For DNP Consortium 2010-2011  Arkansas Rural Loan Scholarship Committee 2008	College Grievance hearing, Chair 2009  College Constitution and Bylaws Committee 2009	Promotion Retention and Tenure Committee 2012-2013  Bylaws/Nominating Committee 2010-2013  Member, NLNAC Self Study Standard 6 Committee, 2010-2012  Nurse Anesthesia Search committee 2011-2012  Nurse Anesthesia Search Committee 2009-2010  Philosophy and Organizational Framework Sub-committee 2008-2009
Smith, Susan			Member, NLNAC Self Study Standard 6 Committee, 2010-2012  Site Coordinator (AASN) Beebe campus 1995-2010
Snellgrove, K Susi	IRB – 2009-2013 Honors 2010-2013	Faculty Evaluation Reassessment 2010-current	Faculty Student Handbook 2010-2012  Chair, NLNAC Self

			Study Standard 5 Committee, 2010-2012  Nursing Grievance 2010-2012
Stacy, Annette	Academic Hearing Committee 2008-2009 Faculty Association Committee for Centennial Celebration Projects and Activities 2008-2009  Task Force on Research and Teaching Balance 2008-2009 Higher Learning Commission Subcommittee on Engagement and Service 2011  Disability Services Committee 2011-2012	Constitution & Bylaws 2008-2011  College Structure 2010–current  College Promotion, Retention and Tenure 2007- 2008  Executive Council 2007-present	Faculty Search Committee—chair 2010  Member, Steering Committee, NLNAC Self Study [specific oversight, Standards 3 and 4], 2010-2012  Promotion, Retention and Tenure 2008-2009  Faculty Search Committee—chair 2008
Tate, Linda		Faculty Development Committee 2009- 2011	Member, NLNAC Self Study Standard 2 Committee, 2010-2012
Troxel, Stacey	Undergraduate Enrollment and Academic Policy 2011-2013  Senate Committee on Committees; Development, Communications, and Alumni Committee 2011-2013  HLC Self Study Criterion II 2010-2011  Faculty Senate 2009-2011  Health & Wellness Subcommittee 2010-Present	Infection Control Committee, Secretary 2011-2013	Member, NLNAC Self Study Standard 1 Committee, 2010-2012 Search Committee For Nurse Anesthesia Faculty 2011-present  FNP Applicants Faculty Student Handbook Committee 2009-2011  Nursing Grievance Committee 2008-2010

	Faculty Diversity Subcommittee 2010-Present		
Walden, Debra	<p>Chancellor Search Advisory Committee (Appointed by ASU System President, 2011-2012</p> <p>University PRT Committee, 2010-2011</p> <p>Recorder – Academic Hearing Committee, ‘ 2003-2010</p> <p>ad hoc ASU Faculty Committee for Centennial Celebration, 2008-2009</p> <p>Projects and Activities, 2007-2009</p> <p>Academic Hearing Committee – Recorder 2007-present</p> <p>University Awards Committee - Proxy</p>	<p>PRT, Chair 2009-2012</p> <p>Credentials &amp; Scholarship, 2010 – present</p>	Co-Chair, NLNAC Self Study Standard 4 Committee, 2010-2012
Waggoner, Lisa			<p>Faculty Development 2010-2012</p> <p>Member, NLNAC Self Study Standard 3 Committee, 2010-2012</p>
Wike, Barbra			<p>Member, NLNAC Self Study Standard 4 Committee</p> <p>Faculty Search Committee, West Memphis, 2007-2009</p> <p>Nursing Grievance</p>

			Committee, 2007-2009
Wilcox, Lance		Student & Alumni Affairs 2010-2011	SNA Sponsor/Advisor, 2007-Present  Member, NLNAC Self Study Standard 2 Committee, 2010-2012
Wimberley, Paige	Undergraduate Curriculum Committee 2011-2012  Academic Hearing 2010-2011  Grievance and Hearing 2006-2010	Promotion, Retention, & Tenure 2011- 2013  Constitution & Bylaws 2009-2012	PRT 2009-2012  Bylaws/Nominating 2010-2012  Member, NLNAC Self Study Standard 6 Committee, 2010-2012  Nursing CE Provider 2009-2012
Wiggins, Wynona	Faculty Athletic Representative 2001 – present  Interim Athletic Certifying Officer 2008  Eligibility and Athletics Accountability Team 2008-present  Search Committee - Academic Eligibility Specialist 2008  Search Committee – Academic Coordinator – 2008, 2010, 2011  Academic Improvement Plan Committee for Men's Basketball - 2009  Search Committee – Associate Athletic Director for	CHNP Representative to ASU Alumni Board 2000- present	Faculty Student Handbook 2010-2012  Member, NLNAC Self Study Standard 6 Committee, 2010-2012  Ad Hoc Alumni Survey Committee - 2010

	<p>Student Services 2008, 2010</p> <p>Intercollegiate Athletics Committee – Chair 2001- present</p> <p>CHNP Representative to ASU Alumni Board 2000-present</p>		
Young, Cathy L.			Co-Chair, NLNAC Self- Study Standard 2 Committee, 2011-2012
Young, Charlotte	<p>University Curriculum Committee, 2004-2007</p> <p>IRB (Human Subjects Protection Review Board), 2001-2009</p>		Member, NLNAC Self Study Standard 5 Committee, 2010-2012

## **APPENDIX C**

### **SON Faculty Profile**



### Faculty Profile Fall 2011

<b>Faculty Name Last, First  Date of Initial Appointment</b>	<b>FT/ A*</b>	<b>Rank</b>	<b>Baccalaureate Degree and Name of Institution Granting Degree</b>	<b>Master's Degree and Name of Institution Granting Degree</b>	<b>Doctorate Degree and Name of Institution Granting Degree</b>	<b>Areas of Clinical Expertise</b>	<b>Academic Teaching (T) and Other (O) Areas of Responsibility</b>
Anderson Brenda  2007	FT	Asst Prof	BSN Arkansas State University	MSN Arkansas State University		Critical Care Adult Health	T-NRSP 4366, NRSP 2244, NRSP 2391 x2  O-Coordinator NRSP 2391 - 12 sections
Baker, Darlene  1991	FT	Asst Prof	BSN University of Central Arkansas	MNSc University of Arkansas for Medical Sciences	Ed.D. University of Memphis	Adult Health Critical Care	T-NRS 4355, NURS 6853, HP 6043, HP6323 (1 cr hr)
Blue, Karen  1998	FT	Asst Prof	BSN University of Central Arkansas	MSN Arkansas State University		Medical-surgical	T-NRS 1235, NRS 4362, NRSP 1243, NRSP 2272
Campbell, Sue  2003	FT	Asst Prof	BSN University of North Carolina - Chapel Hill	MSN Xavier University at New Orleans		Nurse Anesthesia	T-NURS, 6723, NURS 6333, NURS 6787  O-Coordinator - Nurse Anesthesia
Clay, Lori  2006	FT	Asst Prof	BSN Arkansas State University	MSN Arkansas State University		Pediatrics Medical-Surgical Simulation	T-NRS 3315 (1 cr hr), NRSP 1422 x 2  O-CLC Coordinator Jonesboro

\*Adjunct

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Cooper, Kimberly  2007	FT	Asst Prof	BSN McNeese State University	MSN University of Phoenix		Medical-Surgical	T-NRS 1235 (3 cr hr), NRSP 2272, NRSP 2233, NRSP 2244  O-Site Coordinator - Beebe
Davidson, Sarah  2005	FT	Asst Prof	BSN University of Arkansas for Medical Sciences	MSN Student Arkansas State University		Medical-Surgical Maternal-Child	T-NRS 2232, NRS 2262, NSRP 2201 x 4, NRSP 2244
Drake, Lisa  2001	FT	Asst Prof	BSN Indiana University - Gary	MSN Arkansas State University		Medical-Surgical Mental Health	T-NRS 1252 x 2, NRSP 1243 x 2, NRSP 2272
Fuller, Diana  2003	FT	Asst Prof	BSN Arkansas State University	MSN Arkansas State University		Adult Health Critical Care	T-NRS 2233, NRS 3353, NRSP 2244, NRS 1235 (2 cr hr)
Hall, Cathy  1991	FT	Assoc Prof	BSN Arkansas State University	MSN University of Cincinnati		Medical-Surgical Oncology	T-NRS 1252 x 2, NRS 2392, NRSP 2272, NRSP 1243
Isaacson, Julie  1987	FT	Assoc Prof	BSN University of Tennessee - Memphis	MSN Vanderbilt		Critical Care	T-NRS 4355, NRSP 4366

\*Adjunct

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Latting, Linda  2004	FT	Asst Prof	BSN Arkansas State University	MSN Arkansas State University		Medical-Surgical, Maternal-Child	T-NRS 2232, NRSP 2244 x 2, NRS 1411 x 2
Matthews, Rebecca  2006	FT	Asst Prof	BSN Biola University	MNSc University of Arkansas for Medical Sciences	DNP University of Tennessee - Memphis	Community Health, Women's Health, Leadership	T-NRS 4543, NRS 3333, NRS 3423, NRSP 3433
McPike, Dawn  2010	FT	Asst Prof	BSN Baptist College of Health Sciences - Memphis	MSN FNP Arkansas State University		Adult Health Maternal-Child	T-NRSP 2244, NRS 2232, NRSP 2432, NRSP 2391 x 2
Miller, Renee  1996	FT	Asst Prof	BSN Arkansas State University	MSN Arkansas State University		Medical-Surgical Cardiology	T-NRS 2233, NRS 2392, NRSP 2391 x 2, NRS 2262  O-AASN Program Director
Moody, Terri  2010	FT	Asst Prof	BSN Baptist College of Health Sciences - Memphis	MSN Arkansas State University		Medical-Surgical Simulation	T-NRSP 2244, NRSP 2272, NRSP 1243, NRS 2233  O-Simulation Coordinator - West Memphis

\*Adjunct

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Nix, Elizabeth  2004	FT	Asst Prof	BSN Arkansas State University	MSN Arkansas State University	Ph.D. student Walden University	Adult Health Diabetes Public Health	T-NRS 4343, HP 1913, NRSP 4336
Norman, Bilinda  2010	FT	Asst Prof	BSN Arkansas State University	MSN Arkansas State University		Adult Health Diabetes	T-NRS 2433 (1 cr hr), NRS 3315 (1 cr hr), NRSP 3325, NRSP 2391 x 2, NURS 646V (3)
Persell, Deborah  2001	FT	Assoc Prof	BSN University of Kansas State	MSN PNP University of Missouri	Ph.D. University of Tennessee - Knoxville	Disaster Nursing, Disaster Preparedness	T-NRS 4513, NRS 4503 x 2, NRS 4523, NRS 4355 (0.5 cr hr) O-
Pfriemer, Judy  1997	FT	Asst Prof	BSN Alfred University	MSN Arkansas State University		Adult Health Mental Health	T-DPEM 2233, NRS 1411 x 2, DPEM 2353, NRSP 3325
Schafer, Lisa  1995	FT	Asst Prof	BSN University of Memphis	MSN University of Tennessee - Nashville		Medical- Surgical Maternal- Child	T-NURS 1252 x 2, NRSP 1243, NRSP 2272, NRS 1235 (2 cr hr)  O-Site Coordinator - West Memphis

\*Adjunct

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Schmidt, Angela  2004	FT	Assoc Prof	BSN Arkansas State University	MNSc University of Arkansas for Medical Sciences	Ph.D. University of South Africa	Health Studies Policy Chronic Illness Rehabilitation	T-NURS 6453, NURS 6843, NURS 6463, NURS 6303, NURS 656V  O-MSN Program Director, CNHP Assoc. Dean
Shelton, Debbie  2005	FT	Asst Prof	BSN Arkansas State University	MSN Arkansas State University	DNP student University of Tennessee - Memphis	Family Nurse Practitioner	T-NURS 6613, NURS 6614, NURS 682V  O-Practice release 20%
Simmons, Joyce  2006	FT	Asst Prof	BSN Harding University	MSN Harding University		Maternal- Child	T-NRS 2262, NRS 2232, NRSP 2244 x 2
Skorga, Phyllis  2004	FT	Prof	BSN University of Tennessee	MSN University of Tennessee	Ph.D. University of Kansas	Adult Health Theory Health Policy	T-NURS 6203, NURS 6003 x 2, NURS 656V
Smith, Susan  1994	FT	Asst Prof	BSN University of Central Arkansas	MSN University of Central Arkansas		Medical- Surgical Mental Health	T-NRS 1252 x 2, NRS 1235 (2 cr hr), NRSP 2272 x 2, NRSP 2201

\*Adjunct

<b>Faculty Name Last, First  Date of Initial Appointment</b>	<b>FT/ A*</b>	<b>Rank</b>	<b>Baccalaureate Degree and Name of Institution Granting Degree</b>	<b>Master's Degree and Name of Institution Granting Degree</b>	<b>Doctorate Degree and Name of Institution Granting Degree</b>	<b>Areas of Clinical Expertise</b>	<b>Academic Teaching (T) and Other (O) Areas of Responsibility</b>
Snellgrove, K. Susan  2004	FT	Asst Prof	BSN Arkansas State University	MSN Arkansas State University	Ph.D. University of Arkansas for Medical Sciences	Adult Health Geropsychi- atry Mental Health	T-NRS 3315 (2 cr hr), NRS 3422, NRSP 3325, NRSP 3343
Stacy, Annette  1982	FT	Assoc Prof	BSN Vanderbilt	MSN University of Virginia		Medical- Surgical Oncology	T-NRS 3315 (2 cr hr), NRSP 3325, NRS 2433 (1 cr hr)  O-BSN Program Director
Tate, Linda  2007	FT	Asst Prof	BSN Arkansas State University	MSN Arkansas State University	Ph.D.(c) University of Arkansas for Medical Sciences	Adult Health Medical- Surgical	T-NRSP 1422 x 2, NRSP 2314 (3 cr hr), NRSP 2433 (1.5 cr hr)  O- Second Degree Accelerated BSN Coordinator
Troxel, Stacy  2002	FT	Asst Prof	BSN University of Texas Health and Science Center	MSN FNP Arkansas State University	Ed.S. Ed.D. student Arkansas State University	Family Nurse Practitioner	T-NRS 1123, NURS 6614 x 3  O-Practice release 20%
Waggoner, Tara Lisa  2008	FT	Asst Prof	BSN Arkansas State University	MSN FNP Arkansas State University	DNP University of Tennessee - Memphis	Family Nurse Practitioner	T-NRS 3343, NURS 6614, NURS 6023  O- Practice release 20%

\*Adjunct

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Walden, Debra  1988	FT	Asst Prof	BSN St. Louis University	MNSc University of Arkansas for Medical Sciences		Maternal-Child Fundamentals	T-NRS 2314 (2 cr hr), NRS 2443, NRSP 2432, NRSP 1422 x 2  O-Coordinate NRS 1422, NRS 2432
Wiggins, Wynona  1993	FT	Asst Prof	BSN Arkansas State University	MSN University of Tennessee - Memphis	Ed.D. Arkansas State University	Adult Health Critical Care	T-NRS 3463, NRSP 3325  O-Faculty Athletic Representative
Wike, Barbra  1998	FT	Asst Prof	BSN University of Arkansas at Monticello	MSN University of Central Arkansas		Medical-Surgical Oncology &	T-NRSP 2272, NRSP 3325  O-Site Coordinator - Mountain Home
Wilcox, Lance  2009	FT	Asst Prof	BSN Arkansas State University	MSN Arkansas State University		Adult Health Developmental Disabilities	T-NRS 1411 x 2, NRSP 2391, NRSP 4336, NRSP 3433
Wimberley, Paige  1996	FT	Asst Prof	BSN Arkansas State University	MSN Arkansas State University	Ph.D.(c) St. Louis University	Adult Health	T-NRS 4311, NRSP 3325, NRS 3023, NRSP 4793  O-RN-BSN Coordinator
Young, Cathy  2011	FT	Asst Prof	BSN Webster University	MSN University of Missouri	DNS University of Tennessee	Family Nurse Practitioner Women's Health	T- NURS 6613, NURS 6614, NURS 682V  O- FNP Coordinator Practice release 20%

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Young, Charlotte  1994	FT	Prof	BSN University of South Carolina – Columbia	MSN Catholic University of America, Washington D.C.	Ph.D. Syracuse University	Research Mental Health	T-NURS 6203, NURS 6103
Anderson, Laura  S2011	A	Instructor	BSN Arkansas Tech University			Medical- Surgical	T- NRSP 1243 x 2
Allen, Gale  F2011	A	Asst Prof	BSN Memphis State University	MSN Arkansas State University	Ed.D. Arkansas State University	Medical- Surgical Fundamentals	T-NRS 1235 (3 cr hr), NRSP 2201
Altom, Kacie  S2011	A	Instructor	BSN Arkansas State University	MSN Student Arkansas State University		Medical- Surgical	T-NRSP 1243
Bramblett, Marcella  F2011	A	Instructor	BSN Kaplan University			Medical- Surgical Women's Health	T-NRSP 2391 NRSP 4336
Brown, Dimsey  F2011	A	Instructor	BSN Arkansas State University	MSN Student Arkansas State University		Medical- Surgical Maternal- Child	T-NRSP 2391

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Brown, Letha  S2011	A	Instructor	BSN Arkansas State University			Community	T-NRSP 4336
Carlisle, Laura  S2011	A	Instructor	BSN Arkansas State University	MSN Student Arkansas State University		Pediatrics Medical-Surgical	O-Structured Learning Assistance
Carrell, Shawn  F2008	A	Instructor	BSN University of Arkansas for Medical Sciences			Critical Care Medical-Surgical	T-NRSP 2244
Clark, Beverly  F 2011	A	Instructor	AASN North Arkansas Community College			Medical-Surgical	T-NRSP 1243
Crane, Connie  F2009	A	Instructor	BSN Midwestern State University			Medical-Surgical Emergency	T-NRSP 1243
Dust, Melissa  S2010	A	Instructor	BSN Arkansas State University			Medical-Surgical	T-NRSP 1422

\*Adjunct

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Elliott, Stephanie  F2010	A	Instructor	BSN University of Arkansas, Fayetteville			Medical-Surgical	T-NRSP 1243
Flannigan, Kathryn  F2010	A	Instructor	BSN Baptist College of Health Sciences, Memphis	MSN Student University Southern Indiana		Maternal-Child	T-NRSP 2432
Foster, Mark  F2009	A	Asst Prof	BSN Arkansas State University	MSN FNP Arkansas State University		Family Nurse Practitioner Medical-Surgical	T-NRSP 3325
Kail (Gibson), Kristen  S2009	A	Asst Prof	BSN Arkansas State University	MSN Arkansas State University		Nurse Anesthesia	O-Clinical Coordinator Nurse Anesthesia
Gunter, Paula  F2008	A	Instructor	BSN Harding University	MSN Student Arkansas State University		Medical-Surgical	T-NRSP 1243 x 2
Hawkins, Tammy  F2009	A	Asst Prof	BSN Baptist College of Health Sciences, Memphis	MSN FNP Arkansas State University		Family Nurse Practitioner End-of-Life	T-NRSP 2391

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Holcomb, Rhonda  F2009	A	Asst Prof	BSN Arkansas State University	MSN Arkansas State University		Adult Health Nursing Administration	T-NURS 6353, HP5103
Ivy, Christopher  S2008	A	Asst Prof	BSN University of Arkansas for Medical Sciences	MSN Arkansas State University		Nurse Anesthesia	O-Clinical Coordinator Nurse Anesthesia
Johnson, Rhonda  F2011	A	Instructor	BSN Arkansas State University	Graduate Student Arkansas State University		Medical-Surgical	T-NRSP 2201 x 2, NRSP 1243
Landrum, Valari  S2010	A	Instructor	BSN Arkansas State University	MSN Student Arkansas State University		Rehabilitation Chronic Illness	T-NRSP 4336
Lucas, Lisa  F2010	A	Asst Prof	BSN University of Memphis, Lowenberg School of Nursing	MSN Arkansas State University		Nurse Anesthesia	T-NURS 6243

\*Adjunct

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Martin, Jeremy  F2011	A	Asst Prof	BSN Northwestern State University	MSN Arkansas State University		Nurse Anesthesia	T-NURS 6543 (1/2)
McCoy, Julie  F2011	A	Instructor	BSN Arkansas State University	MSN Student Arkansas State University		Medical-Surgical	T-NRSP 1243, NRSP 2201
Moseley, Kimberly  F2009	A	Instructor	BSN Northern Illinois University			Medical-Surgical	T-NRSP 3325
Moyers-Logue, Brittany  Su2011	A	Instructor	BSN University of Arkansas for Medical Sciences			Pediatrics	T-NRSP 3325
Nowlin, Gail  F2011	A	Instructor	BSN University of West Georgia			Medical-Surgical	T-NRSP 1243
Owens, Laura  F2007	A	Asst Prof	BSN University of Tennessee, Memphis	MSN University of Tennessee, Memphis	Ph.D. University of Memphis	Pediatrics Aging	T-NRS 3325, NURS 5013, NRS 3301

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Parker, Beverly 2011	A	Asst Prof	BSN Arkansas State University	MSN University of Southern Mississippi		Geriatrics	T-NRS 4312
Pugh, Erika S2011	A	Instructor	BSN Baptist College of Health Sciences, Memphis			Medical-Surgical	T-NRSP 1243
Prunty, Mable F2011	A	Instructor	BSN Arkansas State University	MSN Student Arkansas State University		Maternal-Child Advanced Assessment	T-NRSP 2391
Reddman, Devin F2011	A	Instructor	BSN Arkansas State University			Medical-Surgical Oncology	T-NRSP 1243
Rushing, Audrey F2007	A	Instructor	BSN Arkansas State University			Critical Care	T-NRSP 4366
Schwartz, Leandra Michelle F2011	A	Instructor	BSN Union University			Pediatrics	T-NRSP 2244

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Sharp, Brandi  F2011	A	Instructor	BSN Arkansas Tech University	MSN Student Arkansas State University		Medical- Surgical Advanced Assessment	T-NRSP 2391
Siegel, Hannah  F2011	A	Instructor	BSN Harding University			Community	T-NRSP 3433
Snyder, Amber  F2011	A	Instructor	BSN Arkansas State University			Pediatrics Medical- Surgical Urology	T-NRSP 3325
Stokes, Elizabeth  F2005	A	Prof Emeritus	BSN Tift College	MN Emory University	Ed.D. University of Memphis	Adult Health Chronic Illness Research	T-NURS 6402, NRS 3312
Stoner (Von Kanel), Karen  F2009	A	Asst Prof	BSN University of Arkansas for Medical Sciences	MNSc University of Arkansas for Medical Sciences		Medical- Surgical Trauma Nurse Admin.	T-NRSP 1243
Stultz, Heather  F2010	A	Instructor	BSN Arkansas State University			Maternal- Child	T-NRSP 2244

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Taylor, Lyndsey F2011	A	Instructor	BSN University of Tennessee, Memphis			Maternal-Child	T-NRSP 2432
Thomas, Kathy F2008	A	Asst Prof	BSN Southeast Missouri State University	MSN University of South Alabama		Nursing Administration Adult Health Mental Health	T-NRS 4373
Thomas, Moriah F2008	A	Instructor	BSN University of Tennessee, Memphis			Medical-Surgical Pediatrics	T-NRSP 1243
Tibbett, Jason F2011	A	Asst Prof	BSN Northwestern State University	MSN Arkansas State University		Nurse Anesthesia	T-NURS 6543 (1/2)
Vannater, Mistie F2010	A	Instructor	AASN Quachita Technical College			Medical-Surgical	T-NRSP 1243, NRSP 2244
Walker, Myra F2007	A	Instructor	BSN University of Mississippi			Fundamentals Surgical	T-NRSP 1422
Wallace, Sydney S2010	A	Instructor	BSN Arkansas State University	MSN Student Arkansas State University		Medical-Surgical Fundamentals	T-NRSP 3325, NRSP 1422

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Wolpert, Cynthia  F2011	A	Asst Prof	BSN Maryville University	MSN University of Tennessee - Knoxville	PhD student University of Tennessee - Knoxville	Disaster Preparedness Homeland Security	T-DPEM 3553, NRS 4503
Yancey, Christopher  F2011	A	Instructor	BSN University of Central Arkansas			Critical Care Cardiovascular	NRSP 2244

\*Adjunct

## **APPENDIX D**

### **Plans of Study**

**Arkansas State University  
School of Nursing  
Traditional AASN  
Plan of Study**

The following is one suggested sequence for program completion. Nursing courses (NRS and NRSP) must be taken in this order. Student should consult with their nursing advisor for the plan that best meets the individual's needs.

<b>Year One</b>	
<b>Spring Semester</b>	
BIO 2223 Human Anatomy and Physiology II	3
BIO 2221 Lab for A&P II	1
NRS 1214 Introduction to Nursing	4
NRSP 1222 Fundamentals of Nursing Practicum I	1
NRS 2392 Health Assessment	4
NRSP 2391 Health Assessment Practicum	2
<b>Summer Semester</b>	
CIT 1043 Intro to Computers or CIT 1503 Microcomputer Applications or any comparable computer course	3
<b>Fall Semester</b>	
NRS 1235 Nursing I	5
NRSP 1243 Clinical Practicum I	3
NRS 1252 Role Development I	2
BIO 2103 Microbiology	3
BIO 2101 Lab for Microbiology	1
<b>Year Two</b>	
<b>Spring Semester</b>	
ENG 1013 Composition II	3
NRS 2212 Nursing II Mental Health	2
NRS 2213 Nursing II Med-Surg	3
NRSP 2224 Clinical Practicum II	4
NRS 2252 Role Development II	2
<b>Fall Semester</b>	
NRS 2232 Nursing III Maternal Child	2
NRS 2233 Nursing III Med-Surg	3
NRSP 2244 Clinical Practicum III	4
NRS 2262 Role Development III	2
NRSP 2272 Role Development Practicum III	2
HIST 2763 or HIST 2773 US to/since 1876, or POSC 2103 Intro to U.S. Government	3

Pre-professional courses: ENG 1003, English I, MATH 1023 College Algebra, PSY 2013 Introduction to Psychology, ZOOL 2003 human Anatomy and Physiology I/ZOOL 2001 Laboratory for Human Anatomy and Physiology I

**Arkansas State University  
School of Nursing  
LPN to AASN  
Plan of Study**

The following is a suggested plan of study for those accepted to the LPN-RN option. Nursing courses (NRS and NRSP) must be taken in this order. Student should consult with their nursing advisor for the plan that best meets the individual's needs.

<b><u>Fall Semester</u></b>	<b><u>Course</u></b>	<b><u>Hours</u></b>
NRS 1235	Nursing	5
NRS 1252	Role Development I	2
NRSP 1243	Clinical Practicum I	3
BIO 2103	Microbiology	3
BIO 2101	Lab for Microbiology	1
<b><u>Spring Semester</u></b>		
NRS 2213	Nursing II: Medical - Surgical	3
NRS 2212	Nursing II: Mental Health	2
NRS 2252	Role Development II	2
NRSP 2224	Clinical Practicum II	4
ENG 1013	Composition II	3
<b><u>Fall Semester</u></b>		
NRS 2233	Nursing III: Medical - Surgical	3
NRS 2232	Nursing III: Maternal Child	2
NRS 2262	Role Development III	2
NRSP 2244	Clinical Practicum III	4
NRSP 2272	Role Dev Practicum III	2

Pre-professional courses: ENG 1003, English I, MATH 1023 College Algebra, PSY 2013 Introduction to Psychology, ZOOL 2003 Human Anatomy and Physiology I/ZOOL 2001 Laboratory for Human Anatomy and Physiology I, ZOOL 2013 Human Anatomy and Physiology II/ZOOL 2011 Laboratory for Human Anatomy and Physiology II, CS 1043 Introduction to Computers, NRS 2392 Health Assessment/NRSP 2391 Health Assessment Practicum

***\*Pre-Professional courses: Students must complete HIST 2763 or 2773 U.S. to/since 1876, or POSC 2103 Intro to U.S. Government (total of 3 hours) prior to graduation.***

**Arkansas State University**  
**College of Nursing and Health Professions**  
**Bachelor of Science in Nursing**  
**Plan of Study**

Students requiring developmental course work based on low entrance exam scores (ACT, SAT, ASSET, COMPASS) may not be able to complete this program of study in eight (8) semesters. Students having completed college level courses prior to enrollment will be assisted by their advisor in making appropriate substitutions. A minimum of 131 credit hours, of which 45 hours must be upper division credit (3000-4000 level), is required for this degree (developmental courses are excluded). Mandatory state and institutional assessment exams will be required during your degree program. **Failure to participate in required assessments may delay graduation.**

Year 1				Year 1			
Fall Semester				Spring Semester			
Course No.	Course Name	Hrs	Gen Ed	Course No.	Course Name	Hrs	Gen Ed
ENG 1003	Composition I	3	X	ENG 1013	Composition II	3	X
MATH 1023	College Algebra	3	X	BIO 2223	Human Anatomy and Physiology II	3	
BIO 2203	Human Anatomy and Physiology I	3	X	BIO 2221	Human Anatomy and Physiology II Lab	1	
BIO 2201	Human Anatomy and Physiology I Lab	1	X	HIST 2763 <u>or</u> HIST 2773 <u>or</u> POSC 2103	US History to 1876 <u>or</u> US History since 1876 <u>or</u> US Government	3	X
NHP 1913	Making Connections in Nursing and Health Professions (FYE)	3	X	BIO 2103	Microbiology for Nursing and Health Professions	3	X
PHIL 1103 <u>or</u> PHIL 1503 <u>or</u> SCOM 1203	<b>Critical Thinking</b> Intro to Philosophy <u>or</u> Logic & Practical Reasoning <u>or</u> Oral Communication	3	X	BIO 2101	Microbiology for Nursing and Health Professions Lab	1	X
				PSY 2013	Intro to Psychology	3	X
Total Hours		16		Total Hours		17	
Year 2				Year 2			
Fall Semester				Spring Semester			
Course No.	Course Name	Hrs	Gen Ed	Course No.	Course Name	Hrs	Gen Ed
CHEM 1043	Fundamental Concepts of Chemistry I	3	X	CHEM 1052	Fundamental Concepts of Chemistry II	2	
CHEM 1041	Fund. Concepts of Chemistry I Lab	1	X	NRS 2334	Health Promotion and Intro to Acute Care	4	
NRS 2314	Concepts of Nursing	4		NRSP 2343	Nursing Care II	3	
NRSP 1422	Foundations of Nursing Practice	2		ENG 2003 <u>or</u> ENG 2013 <u>or</u> PHIL 1103	<b>Humanities</b> Intro to Lit I <u>or</u> Intro to Lit II <u>or</u> Intro to Philosophy (if not taken for critical thinking requirement)	3	X
NRS 2392	Health Assessment	2		BIO 3203 <u>or</u> NRS 3023	Pathophysiology <u>or</u> Interdisciplinary Clinical Pathophysiology	3	X
NRSP 2391	Health Assessment Practicum	1		PE 1002 NRS 2203	<b>Health and Wellness</b> Concepts of Fitness <u>or</u> Basic Human Nutrition	2-3	X
SOC 2213	Principles of Sociology	3	X				
Total Hours		16		Total Hours		17-18	

Year 3				Year 3			
Fall Semester				Spring Semester			
Course No.	Course Name	Hrs	Gen Ed	Course No.	Course Name	Hrs	Gen Ed
	Statistics-any three hour course	3		NRS 3312	Intro to Nursing Research	2	
NRS 3315	Acute Care Nursing I	5		NRS 3345	Acute Care Nursing II	5	
NRSP 3325	Nursing Care III	5		NRSP 3355	Nursing Care IV	5	
NRS 3343	Clinical Pharmacology & Nursing Management	3		Art 2503 or Mus 2503 or Thea 2503	<b>Fine Arts</b> Fine Arts Visual <u>or</u> Fine Arts Musical <u>or</u> Fine Arts Theatre	3	X
				ANTH 2233 GEOG 2613 HIST 1013 HIST 1023 AGRI 2243	<b>Global Issues</b> Intro to Cultural Anthropology <u>or</u> Intro to Geography <u>or</u> World Civilization to 1660 <u>or</u> World Civilization since 1660 <u>or</u> Feeding the Planet	3	X
Total Hours		16		Total Hours		18	
Year 4				Year 4			
Fall Semester				Spring Semester			
Course No.	Course Name	Hrs	Gen Ed	Course No.	Course Name	Hrs	Gen Ed
NRS 4355	Critical Care and Emergency Nursing	5		NRS 4312	Chronic Illness & Rehabilitation Nursing	2	
NRSP 4366	Nursing Care VI	6		NRS 4362	Professional Role Development	2	
NRS 4543	Health Care Administration	3		NRSP 4336	Nursing Care V	6	
				NRS 4343	Professional Nursing: Community	3	
				ENG 2003 or ENG 2013 or PHIL 1103 or ART 2503 or MUS 2503 or THEA 2503	<b>Fine Arts or Humanities</b> Intro to Literature I <u>or</u> Intro to Literature II <u>or</u> Intro to Philosophy <u>or</u> Fine Arts Visual <u>or</u> Fine Arts Musical <u>or</u> Fine Arts Theatre (select course not previously taken)	3	X
				NRS 4481	Critical Decision Making	1	
Total Hours		14		Total Hours		17	

**Total Jr/Sr Hours**

**63**

**Total Degree Hours**

**131**

**Graduation Requirements: (Revised 12.18.11)**

Completion of HIST 2763 or HIST 2773 or POSC 2103 \*At least one course with **HIST** prefix must be selected

English Proficiency (Grade of C or better in ENG 1003 and ENG 1013)

2.00 GPA in Major

2.00 GPA at ASU

2.00 GPA Overall

Maximum of 31 credit hours via correspondence, extension, examination, PLA, Military or similar means; CLEP (30 hrs max)

45 JR/SR Hours **after completing 30 hours**

131-132 Total Credit Hours

18 of last 24 hours must be ASU-Jonesboro courses

Minimum of 57 hours from 4-year institutions

32 Resident Hours if completing second degree and first degree was not from ASU-J

**Arkansas State University**  
**College of Nursing and Health Professions**  
**Second Degree Accelerated BSN**  
**Plan of Study**

The following is the sequence for completion of requirements for the Second Degree Accelerated Bachelor of Science in Nursing degree. (Revised 12.18.11)

<b><u>August Interim</u></b>		
NRS 2423	Intro to Essentials of Nursing	
NRSP 1422	Foundations of Nursing Practice	
Total Credit Hours		5
<b><u>Fall Session I</u></b>		
NRS 2392	Health Assessment	
NRSP 2391	Health Assessment Practicum	
NRS 2433	Essentials of Medical-Surgical Nursing I	
NRS 2443	Essentials of Nursing Care of the Child Bearing Family	
NRSP 3462	Clinical Experience I	
Total Credit Hours		11
<b><u>Fall Session II</u></b>		
NRS 3422	Essentials of Mental Health Nursing	
NRS 3423	Essentials of Community Health	
NRSP 3433	Clinical Experience II	
NRS 3463	Patho-Based Pharmacology I	
Total Credit Hours		11
<b><u>Spring Session I</u></b>		
NRS 3445	Essentials of Medical-Surgical Nursing II	
NRSP 3453	Clinical Experience III	
NRS 3473	Patho-Based Pharmacology II	
Total Credit Hours		11
<b><u>Spring Session II</u></b>		
NRS 4425	Essentials of Medical-Surgical Nursing III	
NRS 4443	Essentials of High Acuity Nursing	
NRSP 4433	Clinical Experience IV	
Total Credit Hours		11
<b><u>May Interim</u></b>		
NRS 3312	Introduction to Nursing Research	
NRS 4543	Health Care Administration	
Total Credit Hours		5
<b><u>Summer</u></b>		
NRS 4362 (Summer I)	Professional Role Development	
NRSP 4456	Clinical Experience V	
NRSP 4466	Clinical Experience VI	
Total Credit Hours		14

**TOTAL PROGRAM CREDIT HOURS**

**68**

**Arkansas State University**  
**College of Nursing and Health Professions**  
**RN-BSN**  
**Plan of Study**

<b>Prerequisites to Senior Level</b>	
<b>Course</b>	<b>Hours</b>
ENG 1003 Composition I	3
ENG 1013 Composition II	3
MATH 1023 College Algebra	3
BIO 2203 Human Anatomy and Physiology I	3
BIO 2201 Lab for Human Anatomy and Physiology I	1
BIO 2223 Human Anatomy and Physiology II	3
BIO 2221 Lab for Human Anatomy and Physiology II	1
CHEM 1013/1011 General Chemistry I w/Lab <u>OR</u>	
CHEM 1043/1041 Fundamental Concepts of Chem w/Lab	4
CHEM 1033 Introduction to Organic and Biochemistry (no lab require) <u>OR</u>	
CHEM 1052 Fundamental Concepts of Chem II (no lab required)	2-3
BIO 2103 Microbiology for Nurses	3
BIO 2101 Lab for Microbiology for Nurses	1
PSY 2013 Intro to Psychology	3
SOC 2213 Principles of Sociology	3
Critical Thinking	3
Statistics (any (3) hour course)	3
BIO 3203 Pathophysiology <u>OR</u> NRS 3023 Interdisciplinary Clinical Pathophysiology	3
NRS 2392 Health Assessment	2
NRSP 2391 Health Assessment Practicum	1
NRS 3312 Intro to Nursing Research	2
<b>Submit application for admission to Nursing Program the semester enrolled in NRS 3312 Introduction to Nursing Research</b>	
<b>Recommended General Education Courses</b>	
Fine Arts	3
Global Issues	3
HIST 2763 US History to 1876, <u>OR</u> HIST 2773 US History sn 1876, <u>OR</u> POSC 2103 US Government	3
Health and Wellness (PE 1002 Concepts of Fitness <u>OR</u> NRS 2203 Basic Human Nutrition)	2-3
Humanities	3
Fine Arts or Humanities	3
<b>SENIOR LEVEL COURSES</b>	
<b>Theory Courses</b>	
NRS 4311 Clinical Pharmacology: Tertiary	1
NRS 4312 Chronic Illness and Rehabilitation Nursing	2
NRS 4362 Professional Role Development	2
NRS 4343 Professional Nursing: Community	3
NRS 4355 Critical Care & Emergency Nursing	5
NRS 4373 Professional Nursing: Management	3
<b>Clinical Course</b>	
NRSP 4793 RN to BSN Capstone	3
<b>Note:</b> Upper division nursing courses are offered on a fall/spring rotation basis	

Revised 12.18.11

**Arkansas State University**  
**School of Nursing**  
**MSN Adult Health Clinical Nurse Specialist Option (40 credit hrs)**  
 (Graduate Level Statistics course is required prior to NURS6103)

<b>Core Courses (20 credit hrs)</b>	
NURS 6003	Advanced Clinical Physiology
NURS 6103	Research Design and Methodology
NURS 6013	Advanced Clinical Pharmacology
NURS 6023	Advanced Assessment and Diagnostic Evaluation
NURS 6402	Role Development in Advanced Nursing
NURS 6203	Theory Development in Advanced Nursing
NURS 6303	Health Care Issues and Policy
<b>Adult Health (20 credit hrs)</b>	
NURS 6443	Advanced Adult Health Nursing I (Acute )
NURS 6463	Advanced Adult Health Nursing Practicum
NURS 6453	Advanced Adult Health Nursing II (Chronic)
NURS 6463	Advanced Adult Health Nursing Practicum
NURS 6763	Applied Clinical Research and Role Seminar (Last Semester)
NURS 6472	Advanced Adult Health Clinical Synthesis
3 cr hr	Elective
<b>Fall</b>	
NURS 6003	Advanced Clinical Physiology
NURS 6013	Advanced Clinical Pharmacology
NURS 6023	Advanced Assessment and Diagnostic Evaluation
NURS 6203	Theory Development in Advanced Nursing
<b>Spring</b>	
NURS 6443	Advanced Adult Health Nursing I (Acute )
NURS 6463	Advanced Adult Health Nursing Practicum
NURS 6103	Research Design and Methodology
NURS 6402	Role Development in Advanced Nursing
<b>Summer</b>	
NURS 6303	Health Care Issues and Policy (also offer Summer)
<b>Fall</b>	
NURS 6453	Advanced Adult Health Nursing II (Chronic)
NURS 6463	Advanced Adult Health Nursing Practicum
3 cr hr	Elective
<b>Spring</b>	
NURS 6763	Applied Clinical Research and Role Seminar (Last Semester)
NURS 6472	Advanced Adult Health Clinical Synthesis (Last Semester)

**Arkansas State University**  
**School of Nursing**  
**MSN Nurse Educator Option (45 credit hrs)**  
 (Graduate Level Statistics course is required prior to NURS6103)

<b>Core Courses (20 credit hrs)</b>	
NURS 6003	Advanced Clinical Physiology
NURS 6103	Research Design and Methodology
NURS 6013	Advanced Clinical Pharmacology
NURS 6023	Advanced Assessment and Diagnostic Evaluation
NURS 6402	Role Development in Advanced Nursing
NURS 6203	Theory Development in Advanced Nursing
NURS 6303	Health Care Issues and Policy
<b>Adult Health (13 credit hrs)</b>	
NURS 6443	Advanced Adult Health Nursing I (Acute )
NURS 6462	Advanced Adult Health Nursing Practicum
NURS 6453	Advanced Adult Health Nursing II (Chronic)
NURS 6462	Advanced Adult Health Nursing Practicum
NURS 6763	Applied Clinical Research and Role Seminar (Last Semester)
<b>Nurse Educator Option Courses (12 credit hrs)</b>	
HP6043	Measurement and Evaluation in Health Sciences
NURS6623	Curriculum Development in Health Professions
NURS6853	Teaching in Advanced Nursing Roles
NURS6713	Practicum in Nursing Education (Last Semester)
<b><u>Spring</u></b>	
NURS 6003	Advanced Clinical Physiology
NURS 6103	Research Design and Methodology
NURS 6303	Health Care Issues and Policy (also offer Summer)
<b><u>Summer</u></b>	
NURS 6402	Role Development in Advanced Nursing
NURS 6203	Theory Development in Advanced Nursing
<b><u>Fall</u></b>	
NURS 6013	Advanced Clinical Pharmacology
NURS 6023	Advanced Assessment and Diagnostic Evaluation
<b><u>Spring</u></b>	
NURS 6443	Advanced Adult Health Nursing I (Acute )
NURS 6462	Advanced Adult Health Nursing Practicum
<b><u>Summer</u></b>	
HP6043	Measurement and Evaluation in Health Sciences
NURS6623	Curriculum Development in Health Professions
<b><u>Fall</u></b>	
NURS 6453	Advanced Adult Health Nursing II (Chronic)
NURS 6462	Advanced Adult Health Nursing Practicum
NURS6853	Teaching in Advanced Nursing Roles
<b><u>Spring</u></b>	
NURS 6763	Applied Clinical Research and Role Seminar (Last Semester)
NURS6713	Practicum in Nursing Education (Last Semester)

**Arkansas State University**  
**School of Nursing**  
**MSN Nursing Administration Option- Full Time**

(Graduate Level statistics is required before enrollment in NURS 6103 Research & Design)

<b><u>Fall:</u></b>	
NURS 6203	Theory Development in Advanced Practice
NURS 6103	Research Design & Methodology
HP 6323	Healthcare Law and Quality Improvement
<b><u>Spring:</u></b>	
NURS 6303	Health Care Issues and Policy
MGMT 6013	Human Resource Management for Health Care Organizations
NURS 6443	Advanced Adult Health Nursing I
NURS 6462	Advanced Adult Health Nursing Practicum
<b><u>Summer:</u></b>	
NURS 6313	Power, Politics and Influence
NURS 6402	Role Development in Adv Practice
<b><u>Fall:</u></b>	
NURS 6353	Budgeting and Financial Management
NURS 6453	Advanced Adult Health Nursing II
NURS 6462	Advanced Adult Health Nursing Practicum
<b><u>Spring:</u></b>	<b>(Final Sem 5 hrs / additional options of Thesis and more Clinical )</b>
NURS 6762	Applied Clinical Research & Role Seminar
NURS 687V(3)	Healthcare Management Seminar (Capstone/ last sem )
<b>TOTAL:</b>	<b>38 hrs.</b>

Optional Thesis, Option Clinical Hours for CNL (Clinical Nurse Leader)

[NOTE: Clinical time of 300 total hours]

**Arkansas State University**  
**School of Nursing**  
**Family Nurse Practitioner Option**  
***Part-time Plan of Study***

Full Time Study is not available in 2012

(Graduate Level Statistics course is required prior to NURS6103 Research Design & Methodology)

<b>Summer</b>	
	Graduate Level Statistic Course
<b>Fall</b>	
NURS 6003	Advanced Clinical Physiology
NURS 6203	Theory Development in Nursing
<b>Spring</b>	
NURS 6103	Research Design and Methodology
NURS 6402	Role Development in Advanced Nursing
<b>Summer</b>	
NURS 6303	Health Care Issues and Policy
<b>Fall</b>	
NURS 6013	Advanced Clinical Pharmacology
NURS 6023	Advanced Assessment and Diagnostic Evaluation
<b>Spring</b>	
NURS 6513	FNP Clinical Management I
NURS 6514	FNP Clinical Management I Practicum
<b>Fall</b>	
NURS 6613	FNP Clinical Management II
NURS 6614	FNP Clinical Management II Practicum
<b>Spring</b>	
NURS 6753	FNP Synthesis Seminar
NURS 6818	FNP Clinical Syntheses

**Arkansas State University  
School of Nursing  
MSN Nurse Anesthesia Plan of Study**

**First Year**

<b><u>Spring Semester (January - April)</u></b>	<b>Semester Hours</b>
<b>NURS 6523</b> Basic Principles of Anesthesia I	3
<b>NURS 6113</b> Anesthesia Pharmacology I	3
<b>NURS 6223</b> Anesthesia Anatomy, Physiology and Pathophysiology I	3
<b>NURS 6042</b> Technology and Equipment for Nurse Anesthesia	2
<b>NURS 6413</b> Advanced Chemistry and Physics related to Anesthesia	3
<b>NURS 6311</b> Clinical Practicum I	1
<b>Total Credit Hours</b>	<b>15</b>

**Summer Semester (May - August)**

	-
<b>NURS 6533</b> Advanced Principles of Anesthesia I, (Geriatrics, Pediatrics, Obstetrics)	3
<b>NURS 6123</b> Anesthesia Pharmacology II	3
<b>NURS 6233</b> Anesthesia Anatomy, Physiology and Pathophysiology II	3
<b>NURS 6043</b> Regional Anesthesia and Analgesia	3
<b>NURS 6322</b> Clinical Practicum II	2
<b>Total Credit Hours</b>	<b>14</b>

**Fall Semester (August - December)**

	-
<b>NURS 6543</b> Advanced Principles of Anesthesia II (Cardio Vascular, Thoracic, Organ Transplants)	3
<b>NURS 6243</b> Anesthesia Pharmacology III	3
<b>NURS 6253</b> Anesthesia Anatomy, Physiology and Pathophysiology III	3
<b>NURS 6333</b> Clinical Practicum III	3
<b>Total Credit Hours</b>	<b>12</b>

**Second Year**

<b><u>Spring Semester (January - April)</u></b>	
	-
<b>NURS 6553</b> Advanced Principles of Anesthesia III (trauma, burns, Neuro Anesthesia)	3
<b>NURS 6103</b> Research Design and Methodology	3
<b>NURS 6346</b> Clinical Practicum IV	6
<b>Total Credit Hours</b>	<b>12</b>

**Summer Semester (May - August)**

	-
<b>NURS 6203</b> Theory Development in Nursing	3
<b>NURS 6423</b> Professional Aspects of Nurse Anesthesia	3
<b>NURS 6736</b> Clinical Internship I	6
<b>Total Credit Hours</b>	<b>12</b>

**Fall Semester (August - December)**

	-
<b>NURS 6723</b> Synthesis Seminar I	3
<b>NURS 6787</b> Clinical Internship II	7
<b>Total Credit Hours</b>	<b>10</b>

**Spring Semester (January - April)**

	-
<b>NURS 6773</b> Synthesis Seminar II	3
<b>NURS 6797</b> Clinical Internship III	7
<b>NURS 0002</b> Comp Exam	0
<b>Total Credit Hours</b>	<b>10</b>
<b>Total Credit Hours for the Program</b>	<b>85</b>

