November 30, 2015

To: Commission on Collegiate Nursing Education

From: Nancy Smith Ph.D., Dean and Professor, Helen and Arthur E. Johnson Beth-El College of Nursing and Health Sciences

Thank you for the opportunity to provide a continuous improvement progress report for our Bachelor of Science in Nursing program.

Continuous Improvement Progress Report (CIPR) Template

Standards for Accreditation of
Baccalaureate and Graduate Nursing Programs

Official Name of Institution: University of Colorado Colorado Springs

Checklist for Writing the CIPR

☐ the font size must be a minimum of 10;

☐ the Program Response must be single spaced;

☐ the document must be no longer than 50 pages (the appendices are excluded from the page limit);

☐ the institution must provide a Program Response for each key element/elaboration statement;

☐ the Program Response to each key element/elaboration statement must adequately address all nursing degree programs and/or post-graduate APRN certificate programs that were directed to submit the CIPR; and

☐ the standard, key element, and elaboration statements provided in the CIPR template must not be altered or deleted by the institution.

Continued Compliance with CCNE Standards & Key Elements

Introduction

In one page or less, summarize under "Program Response" major events that have occurred at the institutional and/or program level since the most recent CCNE on-site evaluation. Include a description of changes at the parent institution if they have had a significant impact on the program.

Program Response:

This report covers the interim period for the Bachelor of Science in Nursing (BSN) program at the University of Colorado Colorado Springs (UCCS) since our last reaccreditation in 2010. In 2015, the College received a naming endowment leading to the change of the College name to the Helen and Arthur E. Johnson Beth-El College of Nursing and Health Sciences. This $8 million endowment will provide opportunities for endowed chair initiatives to support our nursing education programs.

In 2009, two new positions, the Associate Dean for Academic Affairs and Operations and Associate Dean for Research, were created to address the need for college-level initiatives. Currently, Dr. Deborah Kenny serves as the Associate Dean for Research and the Interim Associate Dean for Academic Affairs and Operations. In October 2015, Dr. Jeff Spicher was named Associate Dean for Faculty Practice and Clinical Affairs. In this role, he will develop a faculty practice plan and serve as a liaison between practice sites and the faculty.

In August 2014, following the retirement of Dr. Lea Gaydos in May 2014, Dr. Amy Silva-Smith who had formerly served as the Graduate Department Chair became the Nursing Department Chair. In May 2015, the nursing faculty completed the work to merge two formally separate departments, the undergraduate and the graduate departments, into one nursing department. Dedicated work at retreats culminated in new vision, mission, and values statements, a new department structure to include an Associate Chair position, a new committee structure and new bylaws. Dr. Deborah Pollard serves as Associate Department Chair for Nursing. Faculty are teaching across programs allowing for better integration of expertise and experience. Further, communication of policy changes, opportunities for faculty, achievements, and concerns are more readily addressed with the new committee structure and new communication strategies by the Department Chair (e.g. a biweekly newsletter to faculty and staff). A healthy work environment initiative was also launched in 2015 with two faculty members as activity leaders facilitating team-building activities, self-assessments, and faculty development.

Assessment by Standard

Following each key element statement, please provide evidence demonstrating continued **compliance.** Additionally, summarize any pertinent changes or program improvement initiatives that have occurred since the last comprehensive on-site evaluation by CCNE. **Before completing this template, refer to CCNE's FAQs and Guidelines for Preparing the Continuous Improvement Progress Report.**

Were you requested to address any specific areas of focus/concern (e.g., a compliance concern at the key element level) according to the most recent CCNE accreditation action letter? If so, please note the specific areas of focus/concern here by indicating which key element(s) this translates to in the 2013 CCNE *Standards*:

[Please contact CCNE if you need a copy of the most recent accreditation action letter. Refer to the reminder email to access the Crosswalk Table showing the relationship between the former (2009) CCNE *Standards* and the current (2013) CCNE *Standards*.]

A response must be provided for each standard and key element below. Give special attention to any specific areas of focus/concern that were identified previously in the CCNE accreditation action letter.

Standard I
Program Quality: Mission and Governance

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

I-A. The mission, goals, and expected program outcomes are:
   • **congruent with those of the parent institution; and**
   • **consistent with relevant professional nursing standards and guidelines for the preparation of nursing professionals.**

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

The program identifies the professional nursing standards and guidelines it uses. CCNE requires, as appropriate, the following professional nursing standards and guidelines:
• *The Essentials of Baccalaureate Education for Professional Nursing Practice [American Association of Colleges of Nursing (AACN), 2008];*
• *The Essentials of Master's Education in Nursing (AACN, 2011);*
• *The Essentials of Doctoral Education for Advanced Nursing Practice (AACN, 2006); and*
• *Criteria for Evaluation of Nurse Practitioner Programs [National Task Force on Quality Nurse Practitioner Education (NTF), 2012].*

A program may select additional standards and guidelines.

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

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

Program Response:

The mission, goals, and expected student outcomes of the Helen and Arthur E. Johnson Beth-El College of Nursing and Health Sciences are congruent with those of the parent institution, the University of Colorado Colorado Springs (UCCS). The UCCS Vision, Mission, and Core Values are available for review at http://catalog.uccs.edu/content.php?catoid=4&navoid=112 . In January 2012, the faculty revised the mission and vision statements of the College to more succinctly reflect goals and directions established for the future. The mission of the College is congruent with that of UCCS as depicted in Table I-A.1 and is available for review at http://www.uccs.edu/bethel/about/vision.html. In 2015, the Nursing Department developed a new mission which is congruent with that of the College and University.

Table I-A.1 Congruence of College Mission Statement with UCCS Mission Statement

UCCS Mission	College Mission	Department Mission
The Colorado Springs campus of the University of Colorado shall be a comprehensive baccalaureate and specialized graduate research university with selective admission standards. The Colorado Springs campus shall offer liberal arts and sciences, business, engineering, health sciences, and teacher preparation undergraduate degree programs, and a selected number of master's and doctoral degree programs.	The Helen and Arthur E. Johnson Beth-El College of Nursing and Health Sciences is a distinguished and innovative college providing excellence in education, scholarship, and practice in the health professions.	To develop exceptional nurses through innovative and experiential education, scholarship, and service

Table I-A.2 demonstrates the congruence between the teaching, research, and service vision of the Department, the College, and the University. The full vision and mission statements are available in Appendix I-A.1, and at http://www.uccs.edu/bethel/about/vision.html.

Table I-A.2 Congruence of College Vision Statement with UCCS Vision

UCCS Vision	Beth-El Vision	Department Vision
UCCS will provide unsurpassed, student-centered teaching and learning, and outstanding research and creative work that serve our community, state, and nation, and result in our recognition as the premier comprehensive, regional research university in the United States.	The Helen and Arthur E. Johnson Beth-El College of Nursing and Health Sciences will provide interdisciplinary leadership for new directions in health promotion and wellness, as well as illness care and disease prevention, in the community and beyond through innovation in education, practice, research, and scholarship for health science professionals.	To create healthier communities by inspiring excellence through nursing leadership and lifelong learning

Baccalaureate Program Expected Outcomes

Upon completion of the BSN Program, the graduate is able to:

- Function in the beginning role of a baccalaureate generalist nurse in settings that cross all populations and environments
- Be proficient in the core nursing competencies of clinical/critical reasoning, patient safety, and quality improvement principles
- Maintain interprofessional collaboration and communication to improve healthcare outcomes
- Master the required core knowledge for baccalaureate generalist nursing practice
- Demonstrate professionalism and its values (including altruism, autonomy, human dignity, social justice, and integrity) as a baccalaureate generalist nurse

There are 3 options within the BSN program: Traditional BSN, Accelerated BSN, and RN-BSN (including a Dual Enrollment option). National standards and guidelines are used to guide the BSN curricula including:

- The Essentials of Baccalaureate Education for Professional Nursing Practice (AACN, 2008)
- Nursing: Scope and Standards of Practice (ANA, 2010)
- Code of Ethics for Nurses and Interpretive Statements (ANA, 2010)
- Quality and Safety Education for Nurses Competencies (QSEN Institute, 2014)

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

1. professional nursing standards and guidelines; and

2. the needs and expectations of the community of interest.

Elaboration: There is a defined process for periodic review and revision of program mission, goals, and expected student outcomes. The review process has been implemented and resultant action reflects professional nursing standards and guidelines. The community of interest is defined by the nursing unit. The needs and expectations of the community of interest are reflected in the mission, goals, and expected student outcomes. Input from the community of interest is used to foster program improvement.

Program Response:

With the merge into one nursing department we developed new mission, vision, and values. These statements were the result of work done in a faculty retreat with a facilitator. The department voted to accept the new mission, vision, and values statements on January 16, 2015. These statements will be reviewed in 3 years.

The Helen and Arthur E. Johnson Beth-El College of Nursing and Health Sciences mission and goals were reviewed in 2013 by the College Strategic Planning Council as part of a revision of the College Strategic Plan to ensure congruence with the 2012 revisions of the UCCS 2012-2020 Strategic Plan. The UCCS Strategic Plan is available at http://www.uccs.edu/~Documents/chancellor/strategic%20plans/Approved%20Strategic%20Plan/uccs-strategic-plan-2012-2020.pdf.

The community of interest includes faculty, staff, current and prospective students, alumni, employers, administrators and staff at clinical sites, the university administration and community, members of professional nursing organizations, and health care system consumers. College goals reflect a clear alignment with the needs of the community both at the student level and the community at-large. The Dean and Chair meet with the Strategic Nursing Advisory Council to receive information from local health care organizations about the local health care environment and issues relevant to the education of nurses. The department clinical coordinator and department chair meet regularly with a consortium of nursing education programs in the region at hospital and other health facilities to finalize clinical placement schedules.

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

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

Program Response:

Expected faculty outcomes are clearly identified by the College, are written and communicated to the faculty, and are congruent with institutional expectations. The College reappointment, promotion and tenure (RPT) policies are congruent with those of the university and the Regents policies. The university RPT policy is located on the Provost website link to policies at http://www.uccs.edu/Documents/vcaf/reappointmentpromotiontenure.pdf. In August 2015, the faculty of the College approved the Criteria, Standards AND Evidence for Appointment, Reappointment and Promotion for The Non-tenure Track Faculty and Clinical Teaching Track Faculty. As part of ongoing program improvement, the Faculty Affairs Council of the College reviews guidelines for evaluation and promotion of tenure track faculty, non-tenure track faculty, clinical teaching track faculty, and research faculty. Both documents are available on the Local Area Network for the faculty.

Faculty negotiate their workload distribution with the Department Chairperson and the Dean using the Faculty Responsibility Statement document. Tenure-track faculty are allotted 40% time/effort for research activities as part of their workload and clinical teaching track faculty are allotted one day of clinical practice each week. A differentiated workload is provided for administrative roles within the College as required by the Colorado Board of Nursing. Positions with administrative offloads include the Dean, Associate Deans, Department Chairs, Option Coordinators, and Clinical Coordinators. Additionally, all faculty members can negotiate a differentiated workload annually through the Faculty Responsibility Statement Process. All faculty members are reviewed annually for both performance and merit. Each faculty member at the rank of Instructor or above with an appointment of 50% or greater completes an annual UCCS scholarly report. Following our spring 2015 CCNE review of our graduate programs, the evaluation committee began working with the merit review committee to re-evaluate our current faculty outcome expectations.

In spring 2010, the College implemented a revised merit review process as part of a newly implemented faculty organization structure. Each department appoints a merit review committee and those committees review faculty outcome documents (e.g. self-evaluation, Faculty Course Questionnaires, CV, scholarly report, 5-year professional plan) to determine merit ratings. The Department Chair then reviews the same materials as the Department Merit Review Committee to assign a merit rating. The Department Chair meets with each faculty member to evaluate performance and discuss professional goals. The final ratings are forwarded to the Dean for review and completion of the final annual faculty performance rating. In anticipation for the Spring 2016 merit review process, the evaluation and merit review committees are reviewing the Department's procedures.

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

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

Program Response:

Roles of the faculty and students in the governance of the program are clearly defined and promote participation. Nursing faculty are involved in the development, review, and revision of

academic program policies. In 2013, the Faculty Organization voted to include staff as voting members of the organization and to change the name to College Assembly. A modification to the governance structure was also passed in Spring 2014; four councils remain including Administrative, Faculty Affairs, Staff Affairs, and Student Affairs. Other functions are now embedded in department committees or other ad hoc committees of College Assembly. Faculty members are actively involved in College and University Councils, committees, task forces, and work groups. Faculty representation on College and UCCS committees is reviewed annually for updates, assignments, and reassignments. In addition to the Bylaws of the College Assembly (approved August 31, 2015), the Faculty Handbook outlines the structure, function, and policies of the College. The Faculty Affairs Council is working on revising the Faculty Handbook to reflect the 2014 changes voted on in College Assembly.

The Helen and Arthur E. Johnson Beth-El Student Nurses Association (BSNA) participates in College decision-making by serving on committees. In addition, BSNA provides a new student orientation to the College, a career fair, educational and informational meetings, and sends representatives to the national organization's annual convention. Student representatives from BSNA attend the Nursing Department meeting each month, bring forward issues of concern to students and participate in proposing constructive changes in College operations. A faculty sponsor assures congruence between the goals of the college and the BSNA.

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

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

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

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

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

Program Response:

The primary resource for all information related to student policies and procedures is on the College and UCCS websites (http://www.uccs.edu/~bethel/ and http://www.uccs.edu/). This

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

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

includes information related to accreditation status, the academic calendar (http://www.uccs.edu/Documents/cic/7%20-Year%20Cal.pdf), recruitment and admission policies (http://www.uccs.edu/bethel/programs.html) grading policies (http://www.uccs.edu/bethel/current/studenthandbooks.html), degree completion requirements, and tuition and fees (http://www.uccs.edu/bursar/bursar-cashiering-office.html).

Changes in program policies and requirements approved by the Nursing Department are submitted to the Technology Coordinator for updating of the College online resources. The departmental curriculum committees approve any changes to College course sequencing or description and submit those changes to the Technology Coordinator for online resource updates. For example, the state authorization information is updated regularly on the RN-BSN website allowing prospective and current students to identify whether a particular state is one in which we are approved to provide distance education.

Students are notified of policy changes via several methods, including e-mail, the online Student Handbook, announcement by faculty in Blackboard™ online courses, and notification of student representatives to College Councils and Department meetings. Faculty are notified of policy and document changes via established College, Department and committee meetings, dissemination of meeting minutes, and e-mail announcements. Faculty documents, including meeting minutes, are available to faculty at all times on a faculty shared drive archive.

The following statement is on our program website at http://www.uccs.edu/bethel/programs/bsn.html *"The (baccalaureate degree in nursing at (institution) is accredited by the Commission on Collegiate Nursing Education (http://www.aacn.nche.edu/ccne-accreditation)."*

I-F. **Academic policies of the parent institution and the nursing program are congruent and support achievement of the mission, goals, and expected student outcomes. These policies are:**
   1. **fair and equitable;**
   2. **published and accessible; and**
   3. **reviewed and revised as necessary to foster program improvement.**

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

Program Response:

The academic policies of UCCS and the nursing program are congruent and support achievement of the mission, goals, and expected student outcomes. The Educational Policy and University Standards (EPUS) committee of the UCCS Faculty Assembly is an executive standing committee that provides ongoing development and review of policies affecting the entire university. All university policies are posted on the website at http://www.uccs.edu/vcaf/policies/uccs-policies.html. Policies are regularly reviewed and revised within the nursing department with the involvement of the Associate Dean of Academics and Operations and the Dean. University and college policies are reviewed regularly in monthly department meetings, and during the revision process attention is paid to maintaining

consistency between department, college, and university policies. The college website is the primary source for students to access current policies and procedures (http://www.uccs.edu/bethel/current/studenthandbooks.html). Emails are sent to all current graduate students by the department chairperson or the program assistant to alert them to changes in a Handbook and to remind students to locate the handbook on the website. Links to student handbooks are available in each Blackboard™ online course.

Standard II
Program Quality: Institutional Commitment and Resources

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

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

Elaboration: The budget enables achievement of the program's mission, goals, and expected outcomes. The budget also supports the development, implementation, and evaluation of the program. Compensation of nursing unit personnel supports recruitment and retention of qualified faculty and staff. Physical space is sufficient and configured in ways that enable the program to achieve its mission, goals, and expected outcomes. Equipment and supplies (e.g., computing, laboratory, and teaching-learning) are sufficient to achieve the program's mission, goals, and expected outcomes.

A defined process is used for regular review of the adequacy of the program's fiscal and physical resources. Review of fiscal and physical resources occurs and improvements are made as appropriate.

Program Response:

At UCCS, fiscal and physical resources are sufficient for the BSN Program to fulfill its mission, goals, and expected outcomes. Table II-A.1 shows College funding for the years 2010 to 2015.

Table II-A.1 College Funding

Funding Stream	FY 2010/2011	FY 2011/2012	FY 2012/2013	FY 2013/2014	FY 2014/2015
General Fund (Final Budget)	3,142,527	3,607,421	4,023,598	5,165,721	5,432,651
Auxiliary Fund	1,152,606	1,311,171	1,270,236	1,297,752	1,451,677
University Gift Fund	1,050	2,000	869,120	112,932	8,004,075
Grants and Contracts	322,604	1,194,287	1,024,492	769,495	1,019,851
CU Foundation Gifts	77,874	93,882	152,545	31,470	18,413
TOTAL	4,696,661	6,208,761	7,339,991	7,377,370	15,926,667

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

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

Program Response:

The University of Colorado Colorado Springs is categorized as a Master's Large Institution by the Carnegie classification. The campus is regionally accredited by the North Central

Association of the Higher Learning Commission and had a full evaluation in 2006. The next accreditation visit for the University is scheduled for 2016 (http://www.uccs.edu/ir/standard-reports/accreditation.html). As a fully accredited institution, UCCS has a complete range of academic support services to meet the needs of students and achieve the missions and outcomes of the University. These support services undergo regular review, evaluation, and revision. Academic support services are described in this document.

Library Staffing and Facilities

The Kraemer Family Library (KFL) http://www.uccs.edu/~library/ located in the El Pomar Center serves the faculty, staff, and students of the University of Colorado Colorado Springs. In FY 2014, the Library's staff grew to 29.2 FTE that includes 10.5 professional librarians with advanced degrees, 3 professional exempt University Staff, 8.5 classified staff positions, and 32 student employees who contributed 7.2 FTE to serve the UCCS campus community. Two new faculty librarian lines will be added in FY 2015 (starting July 1, 2014) to handle the Library's increased need for library systems and instructional support. During regular semesters, the Library is open 101.5 hours a week with reference assistance available 74.5 hours a week.

As of June 30, 2013, KFL's collections consisted of 421,657 book and serial volumes; 451,925 microforms; 12,744 audio/visual items; 11,651 maps; 81,405 ebooks (includes titles available for patron-driven selection); over 18,600 streaming videos (including the addition of the Nursing Video Collection from Films on Demand in FY 2014); over 300 current journals in print; and over 35,000 full-text online journals.

Library Services
KFL offers a wide range of services to all UCCS faculty and students such as reference assistance (reference desk, email, telephone, chat, SMS); online one-on-one library resources instruction sessions; interlibrary loan through the ILLiad system that accommodates electronic delivery of articles; print and electronic course reserves; on-campus and remote access to the library's catalog; and 24/7 VPN remote (off-campus) access to all of KFL's electronic resources including indexes, databases, online journals, ebooks, and streaming video and audio recordings.

One KFL librarian, Mary Beth Chambers, serves as the liaison to the Helen and Arthur E. Johnson Beth-El College of Nursing and Health Sciences and works with the faculty on matters related to resource and collection needs, library instruction, and research assistance. Nursing students are encouraged to seek help from their liaison librarian as needed to complete their research assignments. While the liaison is responsible for materials selection, Nursing Department faculty members are encouraged to work with their liaison to identify relevant items or resources for the Library to acquire.

The Library uses open link resolver software from Serials Solutions to provide an A-Z listing of journal titles available electronically at KFL. In addition to the journal search feature, the Library also uses Serials Solutions' article linking software that allows library users to *search for the full-text of articles cited in one database that may be available in another* of KFL's databases or journal packages.

Library Expenditures
Table II-B.1 Library Materials Expenditures (General Funds)

	FY 2013-2014	FY 2014-2015	FY 2015-2016*
Books & Media	$317,381	$ 302,269	$ 267,607

Reference Books	$ 23,500	$ 28,016	$ 19,000
Serials (print & microform)	$113,377	$ 111,293	$ 123,857
Electronic Resources	$796,282	$ 904,605	$ 974,238
Other (Interlibrary Loan, Binding, Tech Fees)	$40,000	$ 8,884	$ 11,000
Total[4]	$1,290,540	$ 1,355,067	$1,395,702

Table II-B.2 Other Funds (Gifts, ICR)

	FY 2013-2014	FY 2014-2015	FY 2015-2016*
Books & Media	$ 4,968	$ 37,682	$ 36,900
Serials (print & microform)	$ 0	$ 0	$ 0
Electronic Resources	$318,406	$473,387	$ 385,709
Total[4]	$323,374	$511,069	$ 422,610

Table II-B. 3 Library Expenditures for Helen and Arthur E. Johnson Beth-El College of Nursing & Health Sciences

	FY 2013-2014	FY 2014-2015	FY 2015-2016*
Books & Media	$23,433	$ 17,389	$ 18,630
Serials (print) [1]	$ 6,334	$ 7,059	$ 7,000
Electronic Resources[2]	$31,398	$ 18,224	$ 19,400
Other Funds[3] (ICR, Kraemer Gift, Extended Studies Fees)	$ 3,825	$ 2,792	$ 2, 413
Total[4]	$64,990	$45,464	$ 47,443

*Numbers for FY15-16 are estimated. Spending for this year ends June 30, 2016

[1.] Today KFL acquires Nursing and Health Sciences journals through online packages available from various publishers/vendors such as Elsevier (ScienceDirect), Sage, Wiley, and LWW (via Ovid, Wolters Kluwer). These packages contain titles in a wide range of subjects. Specific budget dollars are not devoted to any one subject.

[2.] Electronic resources include CINAHL, Cochrane Library, Medline, Informa Healthcare journals, Natural Standard, and Natural Medicine Comprehensive and HAPI as well as the Films on Demand Nursing Collection and Global Health added FY14.

[3.] ICR funding availability varies according to grant dollars awarded to Beth-El faculty in any given year.

[4.] Calculation for materials expenditures was changed from amount allocated to actual spent beginning FY2012-13.

The Library treats Nursing and Health Sciences expenditures collectively.

Distance Education

Distance education support is essential to the operation of our programs. In fall 2009, the campus made a decision to move to a single distance education platform, Blackboard™ (Bb) and has been using successfully to deliver content since. The College's IT support staff, the UCCS IT Department as well as the Faculty Resource Center (FRC) provide solutions to both faculty and students who are engaged in distance education. Learning management systems are under the Information Technology Services for the campus (http://www.uccs.edu/it/learning-management-systems.html).

The College uses many different kinds of distance technologies including: on-line education via Blackboard™(Bb), pod casting, video streaming, instant messaging, Skype™, Virtual Care Works®, AdobeConnect®, CISCO Systems, Inc. - TelePresence™ and television. Many of these technologies are used each semester to deliver content to students in both asynchronous and synchronous formats in an effort to enhance the learning environment.

Information Technology

The IT department at UCCS is the primary resource for all computing services from maintaining secure networks to telecommunication services, IT provides support for all kinds of technology for students, faculty and staff (http://www.uccs.edu/~it/). The IT department provides an IT Helpdesk to assist students, faculty and staff, Monday – Thursday 9am until 6pm and on Fridays from 9am to 5 pm with their technology related questions. Technicians at the help desk can be reached via e-mail or telephone. The IT help desk website has helpful guides, resources, FAQs and links to free software that are available to the UCCS community (http://www.uccs.edu/~helpdesk/). IT is a centralized service to the campus and funding for these services come from annual charges to each college. Students also have access to after-hours IT support directly from Blackboard™.

ITAC, the information technology advisory council, provides guidance for all IT strategic plans at UCCS. Its mission is to meet on a regular basis, analyze, and recommend solutions for IT problems that the University encounters. The committee also serves as a conduit for communication between the ITAC and the UCCS community regarding IT issues. There are representatives from each college, Dean's Council, the Director of IT, Faculty Resource Center, Student Success, Finance and Administration, Student Government, Faculty Assembly, and the community. ITAC reports directly to the Provost (http://www.uccs.edu/itac/index.html).

The College also has two IT support people. The Instructional Design and Information Technology Manager for the College position is currently vacant and a search is in progress. Adam Greenbrier, an IT technician, provides support to faculty and staff on both hardware and software issues.

Faculty Resource Center

Founded as the Teaching Technology Center in 1998, the Teaching and Learning Center has been in existence to support faculty pedagogy in all forms. In August of 2012, the Teaching Technology Center changed its name to the Faculty Resource Center (FRC) and increased the number of staff from 2 FTEs to 5 FTEs and 2 student assistants (http://www.uccs.edu/~frc/) in an effort to offer more support to faculty teaching in the classroom and online. The mission of the FRC is to "provide faculty with the instructional resources and support to explore and implement innovative teaching practices. The Center provides consultation, programs, training, and support." The FRC is a faculty-focused, collaborative endeavor to promote effective teaching, with special emphasis on technology-enhanced, hybrid, and online courses. The Center supports new ways of teaching and learning, including creative approaches to faculty-student engagement, course design and implementation, and the seamless integration of technology into the academic environment.

> *Goal One: Ensure faculty are supported and prepared to teach high-quality courses in traditional, hybrid and online courses.*
>
> *Goal Two: Provide support and resources that enable faculty to use the technology in the classroom and to teach hybrid or online courses.*
>
> *Goal Three: Foster interactions among the Center, faculty, departments, and colleges.*
>
> *Goal Four: Make the Center an effective organization by focusing on quality service and resources that meet faculty needs and expectations.*

The FRC has been at the forefront of increasing the visibility of teaching on campus with its open classroom series, luncheons in honor of Best Practices, a Teaching Online Certificate Program, and Teaching with Technology award winners. FRC's website provides a plethora of information regarding excellence in teaching and learning, including: Blackboard™ Bootcamp – training sessions for all faculty; technology support for lecture capture using Mediasite™, Camtasia™, and Screenflow™; media format changes, such as VCR to DVD; and teaching resources for all faculty, best practices links, information on use of copyrighted materials and numerous online teaching videos, handouts and webinars. In collaboration with other campus units, the FRC has sponsored and funded campus forums on instructional technology, campus culture, academic honesty, copyright issues and information literacy. For tenure-track faculty, the FRC has workshops on teaching portfolios, teaching with technology, and best pedagogical practices. The center has provided special programming for new and non-tenure-track faculty such as orientations, small workshops, group training, and extended hours for walk-in assistance.

The director at the FRC participates in system-wide committees to share ideas about innovation in teaching with peers on other campuses. These contacts include the Committee for the Advancement of Learning Innovations; the Learning, Educational Technology, Teaching, and Scholarship (LETTS) Committee; and the President's Teaching and Learning Collaborative.

The FRC is available to all faculty members of the College and provides excellent resources to improve teaching skills. Their mission and goals contribute directly to the mission of the College and the campus that relates to providing excellence in teaching, learning and scholarship.

Research and Innovation Support

The University of Colorado Colorado Springs aims to become the #1 comprehensive regional research university in the nation with 10,000-12,000 students. This goal is fueled by the University of Colorado Colorado Springs status as one of the fastest-growing universities in Colorado and in the nation. During the past decade, UCCS has experienced tremendous growth in enrollment, course offerings, and campus facilities. Since 2010 the average extramural funding for the University has been about 8.2 million, with a high of greater than 12 million in FY2012. Sources of this funding vary with 36% coming from federal sources, 28% from state and local contributors, 17% from universities, 12% from industry and only 7% from foundations/associations. In addition to the increase in funding, the number of funded investigators reached its peak in FY 2012 with nearly 100 faculty members who were at least partly funded through extramural funding. The expanded research efforts are not supplanting the commitment to educating undergraduate and graduate students, but are "invigorating teaching and creating links between theory and practice to allow the students, and those beyond the University's walls, to understand the world around them in a broader context" (Office of Research).

The University supports the research mission through the Office of Research (http://www.uccs.edu/~research/index.html). An example of this is through seed grants that provide up to $7,500 to eligible full-time tenured and tenure-track faculty. The objectives of this program include the promotion of research excellence; to assist more junior tenure-track faculty to establish their research program; and to provide seed money to enable faculty to secure external funds. The office of Research also sponsors workshops; most recently a four-

part series of workshops that focused on statistics was offered and a new program that provides free statistics consulting is now available once a week for UCCS researchers. Finally, within the Office of Research, the Faculty Research Council provides a venue for faculty to discuss common concerns related to research at the University level and provide recommendations to improve research support to the Provost.

The Office of Sponsored Programs and Research Integrity (http://www.uccs.edu/~osp) provides support to faculty who are engaged in research across the campus.   The OSP also has a well-designed website that provides all types of information, forms, handbooks and policies and procedures, the Office of Sponsored Programs (OSP) is able to meet the needs of the research faculty at UCCS. The OSP works directly with research faculty to assist them in finding funding, sponsors grant writing workshops and provides monetary incentives for faculty to submit grants to funding agencies, helps to ensure that compliance issues are being met, and provides excellent resources for the entire research community at the University.

At Helen and Arthur E. Johnson Beth-El College of Nursing and Health Sciences there is an Associate Dean for Research who works to facilitate the development of the research mission and outcomes within the College. Dr. Deborah Kenny assumed the role of the Associate Dean for Research in January 2010 and is a resource for the research faculty within the college.

Student Admissions

Students are admitted to our BSN program once per year beginning in 2015. A faculty committee reviews applications and interviews applicants (accelerated option) before making the final selection.

Student Advising

Academic advising is done by staff trained specifically for the role and who have detailed k knowledge of the nursing programs. The option coordinator and/or department chair discuss the impact of a LOA on the student's future degree plan. In addition, through faculty advising and career guidance, students may elect to change NP options in order to meet revised career goals. This decision requires Department Chair permission.

Other Resources
Graduate School

The Graduate School (http://www.uccs.edu/~gradschl/) promotes excellence in graduate education and experiences for all graduate students attending UCCS. The Dean of the Graduate School, Dr. Kelli Klebe, has worked to increase the number of services and scholarships that the Graduate School provides graduate students. While some of these services are specifically for students who are on campus, there are several resources that all students can use by accessing the graduate school website and/or clicking on direct links provided in the Blackboard™ courses. The Graduate School has been supportive in the transition from the old process for student admission to NursingCAS®.

The Nursing Department, as part of the UCCS Graduate School, provides input into UCCS Graduate School decisions. The Department has a representative on the Graduate Executive Committee, a campus wide committee that approves new programs, creates policies and procedures for the Graduate School and on occasion even serves to adjudicate student complaints brought to the Graduate School. As a member of the Graduate School there are specific policies and procedures that each college must follow. The policies and procedures

are outlined on the Graduate School website at: http://www.uccs.edu/graduateschool/current-students/policies-and-procedures.html.

Office of Veteran and Military Student Affairs

Active duty military personnel, reservists, and veterans are all welcomed to UCCS and the College. Colorado Springs enjoys heavy representation in its population from both the U.S. Army and the U.S. Air Force. Each course syllabus addresses questions often asked by these students. The College has three nursing faculty who are retired from the military.
The Office of Veteran and Military Student Affairs (OVMSA) is an important UCCS resource since members of the military and military families are such an important group in the communities of interest for UCCS. The OVMSA is responsible for providing students with information regarding education benefits programs, assisting in the processing of benefits and reporting of data to the federal government. In addition, the OVMSA assists veterans, active duty, military families and others eligible for Department of Veterans Affairs education benefits and tuition assistance (http://www.uccs.edu/~military/).

The Career Center

The Career Center at UCCS provides resources to full time, degree-seeking students and alumni to help them plan, prepare and promote their careers. The Center partners with local and national employers and advertises a variety of internships and jobs to qualified applicants. Virtual consults are available to students and alumni at no cost and the Career Center has numerous resources to help conduct an effective job search or career change (http://www.uccs.edu/career/about-us.html).

The Writing Center

The Writing Center is staffed by UCCS undergrad and graduate students who have been trained to provide effective peer feedback. The Center offers one-on-one consultations and online consulting and will help with the following: paper ideas, organizing and structuring a paper, sentence construction, making cogent arguments, review of evidence and analysis, and APA formatting. Both students and faculty have noted improvement in papers after a visit to the Writing Center. This is a resource that is widely recommended for those students who need help with writing (http://www.uccs.edu/~writingcenter/).

UCCS Disability Services

UCCS takes great pride in the academic and personal achievements of its many students and alumni with disabilities. The mission of Disability Services is to provide students with disabilities skills, reasonable accommodations and support services to participate fully in the academic environment and opportunities available at UCCS. In addition, Disability Services promotes accessibility to all UCCS buildings, programs, and activities. Students are expected to utilize the resource of Disability Services to the degree they determine necessary (http://www.uccs.edu/~dservice/).

Student Health Center

UCCS developed a Student Health Center (SHC) in 1996 in conjunction with the initiation of on-campus housing. To guide it in this endeavor, the University sought help from Beth-El College of Nursing (prior to Beth-El merging with UCCS) and Memorial Hospital Central, now part of University of Colorado Health. Memorial staff helped design a framework for the Health

Center and supported it until 1999 when the campus was sufficiently equipped to maintain the Center on its own.

The current SHC is designed to accommodate all students. The Center is staffed by a full-time nurse practitioner (who also serves as the director), a part-time family physician who acts as the medical director, and part-time nurse practitioners. Most patients can be seen by a health care professional the same day for an illness or injury.

The Center strives to create the best learning environment possible by accepting both undergraduate and graduate nursing and health science students into the SHC for clinical learning opportunities. All staff welcome the opportunity to help guide students through their educational experiences. The Center's goal is to have a strong relationship with the College and offer teaching opportunities to students in health disciplines. There are also nursing faculty currently practicing in the SHC (http://www.uccs.edu/~shc/).

University Counseling Center

The University Counseling Center (UCC) makes services available to UCCS students to help them reach their highest academic and social potentials. The UCC has a full-time staff of four licensed clinical psychologists. The UCC provides individual therapy, couples therapy, family therapy, crisis/emergency interventions, and consultation sessions for concerned friends/roommates/instructors. The services provided help UCCS students achieve their educational goals, define their career goals, learn more about problem-solving processes, enhance their capacity for satisfying interpersonal relationships, and maximize their capacity for continued emotional growth. (http://www.uccs.edu/~counsel/).

Ombuds Program

The UCCS Ombuds Program offers students and employees informal assistance in resolving disputes in a neutral environment where they can openly discuss issues without having those concerns shared without their consent (http://www.uccs.edu/~ombuds/).

Diversity and Inclusiveness

UCCS has an Office of Diversity and an Associate Vice Chancellor for Diversity, Dr. Kee Warner. The University is charged with providing opportunities for higher education to the general public and with offering the fruits of knowledge, research and cultural development for the betterment of the broader public good. To truly serve the public, the University must be inclusive of everyone, regardless of ethnicity, race, gender, age, social class, gender identity and expression, abilities, religious values, political viewpoints, national origin, military status, to name some of the social and cultural differences that can create barriers. The principle of diversity advocates a university that is inclusive of all while overcoming the legacies of exclusion (http://www.uccs.edu/~diversity/).

Review Process of Support Services

Academic support services are reviewed annually and more often when the need arises. When the projected annual budget is being created for the next year, the Dean of the College works with the Department Chairs to review and define academic support priorities for the College. The Department Chairs in turn meet with faculty both formally and informally to discuss any concerns related to academic support within the department.

Throughout the academic year, typically one to two times a month, the Administrative Council, made up of the Dean, the Associate Dean for Academics and Operations, the Associate Dean for Research, the Associate Dean for Clinical Affairs, the Department Chairs, the Director of Extended Studies, the College Assembly President, and 2 staff representatives, meet and address pressing issues related to the support of the academic mission of the College. This ensures that any serious problems can be managed in a timely manner and that there is a representative voice from different areas of the College.

Another way that academic support services are evaluated and reappropriated or enhanced is through proposals that come from the Department Chair directly to the Dean. This is typically done when the issue directly affects the Department and not the College as a whole and occurs when the need is identified. An example of this process within the Nursing Department is that a need was identified by the NP Practicum Coordinator, Dr. Carole Traylor and the Department Chair, related to the increasing numbers of students in the practicum setting and the expanding workload for the faculty and staff. A proposal was created to hire a Clinical Support Assistant to assist Dr. Traylor with her clinical-related workload. In March 2014, Ms. Denise Ostovich was hired to assist in coordinating practicum site visitors, student and site evaluations, and tracking of required health documents in the Medatrax, Inc. software system.

II-C. The chief nurse administrator:
   1. **is a registered nurse (RN);**
   2. **holds a graduate degree in nursing;**
   3. **holds a doctoral degree if the nursing unit offers a graduate program in nursing;**
   4. **is academically and experientially qualified to accomplish the mission, goals, and expected program outcomes;**
   5. **is vested with the administrative authority to accomplish the mission, goals, and expected program outcomes; and**
   6. **provides effective leadership to the nursing unit in achieving its mission, goals, and expected program outcomes.**

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

Program Response:

The Helen and Arthur E. Johnson Beth-El College of Nursing and Health Sciences is administered by Nancy Smith, PhD, APN, FAANP, Dean and Professor. Dean Smith was appointed in August 2008. The prior dean had tenure of seventeen years and transitioned the college from a freestanding, regionally accredited college of nursing to merging with the University of Colorado Colorado Springs in 1997.

Dean Nancy Smith meets CCNE's criteria for the chief nurse administrator of the nursing education programs. Licensed in Colorado as an advanced practice nurse Dr. Smith holds a graduate degree in nursing from California State University at Long Beach, a graduate degree in business (health administration) from the Graduate School of Business Administration at the University of Colorado at Denver, and a doctoral degree in public administration with emphasis in public and health policy from the Graduate School of Public Affairs also at the University of

Colorado at Denver. She also holds a lifetime standard designated subjects teaching credential in nursing education from University of California at Los Angeles.

As an officer of the University, Dean Smith is vested with the administrative authority to accomplish the mission, goals, and expected program outcomes. Article 4 Organization of Academic Units of the Regent's Laws in section 4.A.2. outlines the roles and responsibilities of Deans (http://www.cu.edu/regents/laws-and-policies/regent-laws/article-4-organization-academic-units).

Dean Smith is academically and experientially qualified to accomplish the mission, goals, and expected student and faculty outcomes. She has thirty-five years of experience in higher education at the baccalaureate, master's, and doctoral levels. Academic appointments have included the following institutions: California State University at Long Beach, University of Colorado Health Sciences Center (now University of Colorado Denver Anschutz Medical Campus), University of Hawai'i at Manoa, and the University of Colorado Colorado Springs. Positions have included faculty roles, program administration and management, and administration including associate dean and dean positions (See Exhibit II-C Dean's CV in CCNE resource room). The Dean's position is an officer of the University with authority relative to budgetary, decision-making, and evaluation authority similar to deans in other University colleges and is vested with the administrative authority to accomplish the mission, goals, student and faculty outcomes.

Dean Smith has also practiced in regulation of nursing practice working as the executive officer of the Colorado State Board of Nursing from 2003-2005 and was accepted into the Institute of Regulatory Excellence Fellowship Program at the National Council of State Boards of Nursing. She is perceived by a broad community of interest as a nursing leader. The National Organization of Nurse Practitioner Faculties named her as a National Outstanding Nurse Practitioner Educator in 2001. She has earned college-based teaching awards and was elected as a Fellow in the American Academy of Nurse Practitioners in 2001. Dean Smith was recognized by Lt. Governor Maize Hirono from the State of Hawai'i "for outstanding contributions to students and to the health of the people of Hawai'i." During this period, she served on two Colorado-based boards: Colorado Center for Nursing Excellence Advisory Board and the Community Health Partnership Governing Board. The Community Health Partnership is a coalition of health care providers who are working to improve the health of the community and also serves as the administrator for RCCO 7 (http://www.ppchp.org/). She has also participated in faculty practice program development and administration and practiced as an adult nurse practitioner for nearly twenty years. Dean Smith also has a significant record of scholarship, publication, and funded projects that provide examples of professional leadership.

The nursing programmatic advisory board, known as the Strategic Nursing Advisory Board, provides guidance and feedback to the Dean on the structure and functions of the nursing programs. Nursing leaders from the community and graduates from the program comprise membership on this board.

The Helen and Arthur E. Johnson Beth-El College of Nursing and Health Sciences practices a shared governance model that was implemented in the 2009-2010 academic year and revised in 2014. Dean Smith, the College Assembly President, Dr. Craig Elder and the faculty members collaborate on College Assembly agendas and decisions to accomplish the mission, goals, and implementation plans of the College.

Dean Smith has developed an organizational structure that is consistent with the mission and goals of the College. Broadly organized under two areas: 1) Academics and Operations, 2)

Research, 3) Clinical Practice; there are associate deans in each of these areas. Dr. Deborah Kenny is Associate Dean for Research. As Associate Dean for Research, Dr. Kenny provides support for the development, administration, and management of faculty grants and contracts. The Associate Dean for Academics and Operations is currently vacant. This position provides support to the Dean for day-to-day operations of academic programs. Dr. Jeff Spicher is the Associate Dean for Clinical Affairs and supports the College in development of faculty practice and clinical sites.

The department chair for nursing is Dr. Amy Silva-Smith. In a college that houses multiple disciplines, the nursing department chair is accountable for administration of the nursing education programs. Along with the dean and associate dean, this structure addresses the state regulations for nursing education including CRS §12-38-101-301 and Chapter II – Rules and Regulations for Approval of Nursing Education Programs.

II-D. Faculty are:
1. **sufficient in number to accomplish the mission, goals, and expected program outcomes;**
2. **academically prepared for the areas in which they teach; and**
3. **experientially prepared for the areas in which they teach.**

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

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

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

Program Response:

Appendix II.D.1 provides the list of current faculty teaching in our BSN program including their educational background, licensure, and the courses they teach. Faculty are experientially prepared to serve as instructors in a particular area.

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

Elaboration: The roles of preceptors with respect to teaching, supervision, and student evaluation are:
1. clearly defined;
2. congruent with the mission, goals, and expected student outcomes; and
3. congruent with relevant professional nursing standards and guidelines.

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

Program Response:

The Program adheres to the Colorado State Board of Nursing Chapter 2 Rules for Professional Nursing Education. Clinical Lecturer Faculty are hired with experience in a particular clinical area (for a specific course) by the Department and report to the Lead Clinical Faculty member for the course. Each clinical lecturer faculty member receives education and development on teaching strategies, evaluation, and working through challenging situations at the beginning of each semester in the academic year. Lead faculty evaluate the clinical lecturer faculty. Students evaluate both the clinical lecturer faculty and the lead faculty member for each clinical rotation in their program. These evaluations are reviewed by the Department Chair and considered in contract decisions.

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

> *Elaboration: Institutional support is available to promote faculty outcomes congruent with defined expectations of the faculty role and in support of the mission, goals, and expected faculty outcomes. For example:*
> *1.Faculty have opportunities for ongoing development in the scholarship of teaching.*
> *2.If scholarship is an expected faculty outcome, the institution provides resources to support faculty scholarship.*
> *3.If practice is an expected faculty outcome, opportunities are provided for faculty to maintain practice competence, and institutional support ensures that currency in clinical practice is maintained for faculty in roles that require it.*
> *4.If service is an expected faculty outcome, expected service is clearly defined and supported.*

Program Response:

Institutional support is provided to meet expected faculty outcomes through the services and offices described in Key Element II-B above. These services and offices are also supported through the fiscal resources described in Key Element II-A. At the university level, Intramural grant funding is available through the Committee for Research and Creative Work (CRCW). Grant-writing workshops are provided by the Office of Sponsored Programs and the Institutional Review Board provides online resources for faculty to develop research protocols. Blackboard training and other teaching development resources are available in the Faculty Resource Center (FRC) as described in II-B. The campus resources provide the faculty with the opportunity to develop in teaching, scholarship and service.

College Support and Resources for Faculty Pedagogy, Research, Practice, and Service

Resources and support within the College assist each faculty member to achieve career goals. These resources, and college leadership, provide and support an environment that encourages ongoing development in the scholarship of teaching, faculty scholarship, clinical practice, and service.

There is a framework surrounding faculty that provides structure to his/her position and professional development. The framework and structure is guided by both the track and rank

in which the faculty member is appointed. When a faculty member is hired into UCCS, the individual position (within professorial ranks) is in one of four tracks: tenure, clinical teaching, clinical, or research. Both the tenure and non-tenure (clinical teaching, clinical, research, and all instructor ranks) tracks have a set of criteria for achievement and success which have been developed within the College and approved through the Office of the Provost. The document and criteria for the achievement of tenure within the College was revised in 2013 and the Non-Tenure Track document was revised in 2014 and is currently under review by the Faculty Affairs Council. These documents provide guidance as to necessary faculty outcomes to achieve retention, promotion, and tenure.

Each new pre-tenured faculty member is assigned a faculty mentor to facilitate and guide the individual faculty member's development. The University Mentoring Program (http://www.uccs.edu/Documents/vcaf/200-017%20Mentoring%20of%20Pre-tenure%20Faculty.pdf), begun in 2008, is an essential component of professional faculty development. Mentors may be either in the College or in another discipline. During 2013-14 when the college had 4 new tenure-track faculty starting their careers at UCCS, the Dean funded a 4-part mentoring series designed to assure success in the tenure process. Programs were presented by current, tenured faculty and attended by new faculty and their mentors.

Each faculty track has general guidance for workload. For example, pre-tenured faculty typically are assigned 40% teaching (15 credits/9-month contract), 40% research/scholarship, and 20% service. Individual faculty workload is determined within the Department and is under the authority of the Department Chair. Department Chairs have considerable flexibility to assist in the achievement of faculty outcomes through individual workload assignments as negotiated through the Faculty Responsibility Statements and the Differentiated Workload Policy. The University of Colorado Administrative Policy Statement on Differentiated Annual Workloads for Faculty (Last reviewed July 1, 2007) found at https://www.cu.edu/policies/aps/academic/1006.html) also provides support and flexibility for the work and evaluation of faculty outcomes. This policy allows for facilitation of achieving the missions of the University and the College, while providing guidance for mentoring of individual faculty. These Faculty Responsibility Statements and an approved differentiated workload become part of the review process.

Faculty Review:
There are two forms of faculty review: 1) annual merit review and 2) reappointment, promotion, and tenure (both tenured and non-tenured faculty). Annual merit review is done on a calendar year and provides the basis for salary adjustment. Reappointment and promotion review has a separate schedule.

Merit Review: University of Colorado (CU) Rules of the Regents, 1.B.2.c, require annual merit performance evaluations for all faculty members (https://www.cu.edu/regents/Policies/Policy11B.htm). The CU System Administrative Policy Statement on Annual Merit Adjustments for Faculty specifies that, except for faculty who have differentiated workloads, equal consideration must be given to teaching along with research. Faculty members who are non-tenure track, such as instructor level faculty, have workloads that are typically divided between teaching and service. These faculty members may also have a clinical practice component. Faculty on a clinical teaching track or clinical track are

often on a differentiated workload and are evaluated in service, teaching, scholarly works and practice.

Reappointment, Promotion, and Tenure Review: There are also University and University of Colorado System policies related to the reappointment, promotion, and tenure process (http://www.cu.edu/ope/policy/aps-1022-standards-processes-and-procedures-comprehensive-review-tenure-and-promotion). Instructor and senior instructor ranks are non-tenure track faculty. Clinical teaching track faculty members, also non-tenure track, include: instructors, senior instructors, assistant professors, associate professors and professors. Non-tenure track faculty members have their own document with a unique set of review criteria.

The Faculty Affairs Council is responsible for oversight of faculty review and evaluation and delegates this charge to appropriate faculty. Faculty members undergoing comprehensive or tenure review are assessed at two levels of review within the College- Primary Unit Committee review and the Dean's Review Committee. Subsequently, the Dean provides a review and recommendation and the faculty member is reviewed by the Vice Chancellor's Review Committee, a campus-level committee.

College Resources to Provide Support:
Resources and support within the College assist each faculty member to achieve career goals. These are provided in addition to resources available at the campus level. Resources are targeted at areas for performance and review including: teaching, research/scholarship, practice, and service. Faculty professional development is provided at both the Department and College level and supported by the Dean.

There are, and have been, significant resources dedicated to faculty professional development. These resources are allocated within the departments and are dedicated to supporting the mission of the college and university. For example:

- Travel support for presentations at national meetings
- Leaves of absence and salary support for research fellowships
- Travel and financial support for leadership development
- Travel and financial support for targeted professional development in specific areas such as: clinical simulation; scholarship of teaching and learning;
- clinical practice; and use of technology
- Travel support for attendance at national meetings such as: AACN's Baccalaureate Education Conference, Doctoral Education Conference, Faculty Development Conference, Faculty Practice Conference, Fall/Spring Annual Meetings, Leadership for Academic Nursing Program, and Master's Education Conference. Other examples of national meetings supported include NONPF, AAN, AANP, NLN Education Summit, and International Nursing Association for Clinical Simulation and Learning.

There are also resources dedicated to the provision of faculty development internally. Examples of recent faculty development includes speakers on reflective practice and reflective learning, competency-based education, gerontological and informatics competencies for nursing. Research development is provided at both the college and department level. The Associate Dean for Research coordinates brown bag discussions and panels to address the faculty's needs for development in grant-writing, publication, and protocol development.

Practice is one area in which faculty may be required or choose to participate. The College has faculty practices and also contracts for professional services in order that faculty may develop, maintain, and demonstrate clinical practice skills and engage in clinical research. At the present time the College operates two nurse-managed faculty practice sites (City Medical Clinic and the UCCS HealthCircle Primary Care Clinic). Faculty who do not practice in one of these settings typically work in the community and have the opportunity to adjust their workload to meet their practice requirements. MSN and DNP students have the opportunity to interact with faculty at these sites as part of their program requirements.

The Lane Center for Academic Health Sciences which houses UCCS HealthCircle Clinics (Center for Active Living, Peak Nutrition, Primary Care Clinic, Aging Center and Veteran's Health and Trauma Clinic) that are integrated to meet the needs of clients at UCCS and within the community also provides faculty with both a practice and a research opportunity in a unique integrated manner. There are research offices for both faculty and students on the 2nd floor of the Lane Center that puts the researcher and the clinician in the same space (http://www.uccs.edu/~healthcircle/).

Service is an area of expectation that is defined within retention and promotion documents. College, university, community, and professional service is supported by the College through workload assignment, evaluation, and merit review.

Standard III
Program Quality: Curriculum and Teaching-Learning Practices

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

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

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

Program Response:

The Undergraduate Curriculum Committee is currently conducting a major review of curriculum to assure that there is alignment between program outcomes, expected student outcomes, and the mission of the program.

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

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

APRN education programs (degree and certificate) (i.e., Clinical Nurse Specialist, Nurse Anesthesia, Nurse Midwife, and Nurse Practitioner) incorporate separate comprehensive graduate level courses to address the APRN core, defined as follows:
2.Advanced physiology/pathophysiology, including general principles that apply across the lifespan;

3. *Advanced health assessment, which includes assessment of all human systems, advanced assessment techniques, concepts and approaches; and*
4. *Advanced pharmacology, which includes pharmacodynamics, pharmacokinetics, and pharmacotherapeutics of all broad categories of agents.*

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

Separate courses in advanced physiology/pathophysiology, advanced health assessment, and advanced pharmacology are not required for students enrolled in post-master's DNP programs who hold current national certification as advanced practice nurses, unless the program has deemed this necessary.

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

Program Response:

The Nursing Department Undergraduate Curriculum Committee is responsible for ongoing evaluation of program and expected student learning outcomes. End of course reports are required at the end of each semester and reviewed in relation to the Essentials of Baccalaureate Education for Professional Practice (2008). Following Committee review of the reports, recommendations for revision are presented to the department faculty for consideration.

III-C. The curriculum is logically structured to achieve expected student outcomes.
1. Baccalaureate curricula build upon a foundation of the arts, sciences, and humanities.
2. Master's curricula build on a foundation comparable to baccalaureate level nursing knowledge.
3. DNP curricula build on a baccalaureate and/or master's foundation, depending on the level of entry of the student.
4. Post-graduate APRN certificate programs build on graduate level nursing competencies and knowledge base.

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

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

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

Program Response:

The BSN curriculum is designed to build on a foundation of the arts, sciences, and humanities. Basic concepts from the courses in science and general education are foundational to the nursing courses in all options of the BSN program. The Pre-admission HESI Examination evaluates foundational curriculum knowledge of content from English, reading comprehension, writing, math, and science. Prospective nursing students must pass the examination at 74% to be considered for admission to the program. The Accelerated option is designed for students with a baccalaureate degree in another field. The HESI is also required for admission into the Accelerated option of the BSN program. The RN-BSN option requires 20 hours of sciences and 36 hours of general education. The State of Colorado has an articulation agreement with nursing community college programs to facilitate transfer of courses between programs.

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

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

Program Response:

Teaching and learning in the BSN program occur in the classroom, laboratory, Simulation Learning Center, health care facilities, and in online course platforms (Blackboard™). The Simulation Learning Center occupies approximately 2200 square feet of University Hall. This unique center was designed to mimic a hospital setting with 3 patient rooms, a medication/utility room and 3 teaching/debriefing rooms. The hospital rooms are equipped with beds, fixtures and all the devices found in an acute care medical setting including 2 code carts with defibrillators. There are 5 high-fidelity manikins including a baby, child, 2 adults and a birthing mother. There are also 7 medium fidelity manikins, an adult and 6 babies. The entire center is equipped with an extensive AV system that includes 26 cameras and microphones. All rooms have video recording capability. The debriefing rooms are equipped for video playback with 46 inch TV monitors as well as a white board and comfortable seating for 8-10. The simulation center is uniquely able to collaborate with community colleges and other nursing colleges using a Cisco TelePresence® system. One simulation room and one debriefing room have 55 inch TV monitors and High Definition cameras to allow instantaneous 2-way communication with remote sites. This system is also connected to a local classroom for large group participation in simulation.

Classrooms are used based upon specific teaching-learning needs and equipped with technology to support instructors and students. Laboratories are equipped with equipment designed to allow students to practice and acquire skills prior to entering health care facility environments for clinical. The Blackboard™ platform for online education includes IT support to both faculty through the Faculty Resource Center and students via the Blackboard™ support system. In addition, the college building has sufficient space for group and individual study, a café with a sitting area for casual gatherings.

III-E. The curriculum includes planned clinical practice experiences that:
   1.   enable students to integrate new knowledge and demonstrate attainment of program outcomes; and
   2.   are evaluated by faculty.

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

Program Response:

Clinical contracts are established with facilities to provide high quality educational experiences for our students. Clinical practice experiences are planned in accordance with the objectives of the course and the overall program outcomes. Table III-E.1 shows the BSN clinical courses and the locations of clinical experiences.

Table III-E.1 BSN Clinical Practice Experiences

Clinical Course	Course Title	Locations for Clinical Experiences
NURS 2100	Basic Nursing Assessment	Clinical Laboratory; SLC*
NURS 2200	Fundamentals of Nursing Practice	SLC; medical-surgical hospital units
NURS 3100	Mental Health Nursing	SLC; Behavioral/Psychiatric inpatient facilities
NURS 3200	Nursing Care of Adults I	SLC; Inpatient medical-surgical units
NURS 3210	Nursing Care of Adults II	SLC; Inpatient medical-surgical units
NURS 4100	Nursing Care of Children	SLC; Inpatient pediatric units, outpatient specialty clinics
NURS 4200	Care of the Childbearing Family	SLC; Inpatient labor and delivery units, nursery
NURS 4290	Medical Surgical Nurse Capstone	SLC; Inpatient medical-surgical, critical care units
NURS 4400	Community Health Nursing	SLC; Community Centers, Food Banks, Senior Centers, Public Health Department

*SLC=Simulation Learning Center

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

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

Program Response:

Over the past 2 years, there have been transitions in leadership within the two local hospital systems. These changes are providing opportunities to build new relationships and consider

new strategies for communicating the needs and expectations of our community partners. Our faculty member who serves as Clinical Facilities Coordinator interacts frequently with nurse educators in both hospital systems to maintain communication. Lead faculty for courses in community and mental health serve as similar coordination role with other facilities in the region. The Department Chair attends yearly meetings at facility sites to build relationships and attends the Dean's Advisory Council meetings.

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

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

Program Response:

Student performance is evaluated using a variety of strategies. Courses that include both a theory and clinical component, the theory portion is graded on a standard letter grade scale and the clinical portion is graded as pass/fail based upon the objectives for the clinical experience. Didactic courses may include examinations, quizzes, return demonstration, scholarly papers, and presentations. Clinical learning experiences include case presentations and written care plans. Debriefing strategies are used to provide additional opportunities for students to reflect on performance. The Student Handbook provides the policies and procedures related to evaluation including the appeals process. Handbooks are located at http://www.uccs.edu/bethel/current/studenthandbooks.html .

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

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

Program Response:

In 2015, a curriculum review was conducted to ascertain whether gerontological nursing competencies were sufficiently addressed across the curriculum. Specific content was added to courses to address gaps. The traditional, accelerated, and RN-BSN are reviewed every 3 years. The traditional and accelerated reviews were completed in the spring of 2015 and the committee is currently working conducting a comprehensive review of the RN-BSN curriculum. The next review for traditional and accelerated options curriculum will be in 2018.

The Simulation Learning Center has its own committee-based procedures for evaluating the student learning outcomes for both low and high fidelity simulations. Faculty receive training on debriefing strategies and are evaluated by faculty with expertise in this area.

Standard IV
Program Effectiveness: Assessment and Achievement of Program Outcomes

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

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

> *Elaboration: The program uses a systematic process to obtain relevant data to determine program effectiveness. The process:*
> *1. is written, ongoing, and exists to determine achievement of program outcomes;*
> *2. is comprehensive (i.e., includes completion, licensure, certification, and employment rates, as required by the U.S. Department of Education; and other program outcomes);*
> *3. identifies which quantitative and/or qualitative data are collected to assess achievement of the program outcomes;*
> **4.**   *includes timelines for collection, review of expected and actual outcomes, and analysis; and*
> **5.**   *is periodically reviewed and revised as appropriate.*

Program Response:

The evaluation committee meets monthly to implement the evaluation plan (Appendix IV-A.1). Summaries are reported at the monthly faculty meeting. With the merging of undergraduate and graduate departments in 2014, the evaluation committee revised the existing undergraduate evaluation plan in Fall of 2014 to reflect a combined plan. The plan was approved by nursing faculty in December of 2014. The evaluation committee is currently in the process of revising and updating the plan following 1 year of implementation.

IV-B. Program completion rates demonstrate program effectiveness.

> *Elaboration: The program demonstrates achievement of required program outcomes regarding completion. For each degree program (baccalaureate, master's, and DNP) and post-graduate APRN certificate program:*
> *1. The completion rate for each of the three most recent calendar years is provided.*
> *2. The program specifies the entry point and defines the time period to completion.*
> *3. The program describes the formula it uses to calculate the completion rate.*
> *4. The completion rate for the most recent calendar year is 70% or higher. However, if the completion rate for the most recent calendar year is less than 70%, (1) the completion rate is 70% or higher when the annual completion rates for the three most recent calendar years are averaged or (2) the completion rate is 70% or higher when excluding students who have identified factors such as family obligations, relocation, financial barriers, and decisions to change major or to transfer to another institution of higher education.*
>
> *A program with a completion rate less than 70% for the most recent calendar year provides a written explanation/analysis with documentation for the variance.*
>
> *This key element is not applicable to a new degree or certificate program that does not yet have individuals who have completed the program.*

Program Response:

The Traditional and Accelerated BSN options meet the benchmark for completion rate as noted in Tables IV.B.1 and 2. The RN-BSN completion rates are shown in Table IV.B.3. These rates do not meet our benchmark. In our evaluation of this option, we have determined that the students who attend this 100% online option are a student body that tends to relocate

frequently and may not continue in our program. Further, state authorization requirements in some states have led us to develop a strategic plan that includes having student in certain states. If students move to one of the states where we do not do business, they cannot continue in our program. We are also reviewing our RN-BSN curriculum.

Table IV.B.1 Traditional BSN Program Completion Rates

Year Started	Year Graduated	Number of Students Started	Number of students Graduating	Percent of Students Completing Program
2012	2015	78	72	92%
2011	2014	90	86	96%
2010	2013	84	77	92%
2009	2012	88	79	90%

Table IV.B.2 Accelerated BSN Program Completion Rates

Year Started	Year Graduated	Number of Students Started	Number of f students Graduating	Percent of Students Completing Program
2014	2015	24	22	92%
2013	2014	24	22	92%
2012	2013	24	22	92%
2011	2012	24	24	100%

Table IV.B.2 RN-BSN Program Completion Rates

Year Graduated	Number of Students Started	Number of students Graduating	Percent of Students Completing Program
2014	137	6	4.4%
2013	127	48	37.8%
2012	56	24	42.9%

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

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

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

A campus/site or track with an NCLEX-RN® pass rate of less than 80% for first-time takers for the most recent calendar year provides a written explanation/analysis with documentation for the variance and a

plan to meet the 80% NCLEX-RN® pass rate for first-time takers. The explanation may include trend data, information about numbers of test takers, data relative to specific campuses/sites or tracks, and data on repeat takers.

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

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

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

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

Program Response:
The Program has met the benchmark for NCLEX pass rates for all but one year for Accelerated graduates as noted in Tables IV.C.1 and 2.

Table IV.C.1 Traditional BSN NCLEX Pass Rates (first time test takers)

Year Graduated	Number Who Took the NCLEX	Number Who Passed the NCLEX	NCLEX Pass Rate
2014	93	88	95%
2013	78	69	88%
2012	77	71	92%

Table IV.C.2 Accelerated BSN NCLEX Pass Rates (first time test takers)

Year Graduated	Took the NCLEX	Passed the NCLEX	NCLEX Pass Rate
2014	15	14	93%
2013	18	14	78%
2012	24	23	96%

IV-D. Employment rates demonstrate program effectiveness.

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

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

Any program with an employment rate less than 70% provides a written explanation/analysis with documentation for the variance.
This key element is not applicable to a new degree or certificate program that does not yet have individuals who have completed the program.

Program Response:

Response rates to employment surveys are less than optimal to provide high quality outcome data. Table IV.D.1 shows the BSN aggregate employment rates.

Table IV.D.1 Employment Rates

Year Graduated	Number of Respondents	Percent of Respondents Employed within 12 months
2014	36	94%
2013	15	88%
2011	23	94%
2009	41	88%

IV-E. Program outcomes demonstrate program effectiveness.

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

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

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

Program Response:

BSN PROGRAM OUTCOMES

After completing the BSN program, the graduate will be able to:

- Function in the beginning role of a baccalaureate generalist nurse in settings that cross all populations and environments
- Be proficient in the core nursing competencies of clinical/critical reasoning, patient safety, and quality improvement principles

- Maintain interprofessional collaboration and communication to improve healthcare outcomes
- Master the required core knowledge for baccalaureate generalist nursing practice
- Demonstrate professionalism and its values (including altruism, autonomy, human dignity, social justice, and integrity) as a baccalaureate generalist nurse

Faculty validate that students have achieved learning outcomes as they progress through the BSN program. With the re-organization of the evaluation committee as part of our merged nursing department, we have the opportunity to consider new strategies for evaluating program effectiveness. In the past, alumni surveys have had a poor response, leading the committee to begin reviewing other options.

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

Elaboration: The program demonstrates achievement of expected faculty outcomes. Expected faculty outcomes:
1.are identified for the faculty as a group;
2.incorporate expected levels of achievement;
1.reflect expectations of faculty in their roles and evaluation of faculty performance;
2.are consistent with and contribute to achievement of the program's mission and goals; and
3.are congruent with institution and program expectations.

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

Program Response:

Faculty Course Questionnaires (FCQs)

Aggregate mean scores for teaching quality exceed the benchmark we set for our program. Faculty course questionnaires (FCQs) are sent to all students in the University of Colorado System at the end of each semester. The FCQs provide an opportunity for students to give timely feedback on both course and instructor quality for each course that is taken each semester. The FCQs are comprised of a set of questions initiated by the CU system and included as part of the FCQ survey for all University of Colorado courses. Each course instructor has the opportunity to add specific questions related to the specific course to the FCQ for that course. The FCQ results for the individual courses are aggregated to allow for comparison of individual courses to the University and College mean scores. The program aggregate benchmark for Course Overall and Instructor Overall ratings is 4.0 on a 1.0 to 6.0 scale. The FCQ reports are returned to the Department and are initially reviewed by the program chair prior to being forwarded to the course instructor. The feedback that is received is used to evaluate student satisfaction with the quality of the course and the instructor. Changes to individual courses as well as curricular changes are made based upon the feedback received from the FCQs. Aggregate FCQ data over three years is shown in Table IV-F.

Table IV-F.1   Aggregate Faculty Course Questionnaire (FCQ) Data over Three Years

	Total Number of Courses Scored	Instructor Overall Mean Score
2012	12	4.9

2013	14	4.8
2014	15	4.9

Range of scores is 1.0-6.0. The aggregate instructor overall **benchmark is 4.0**.

Scholarship is highly valued in the College and Department. MSN-prepared faculty are participating in scholarship in the department at a rate much higher than in the past. A greater emphasis on collaboration and team science within the department, brought on in part by the new department structure, has facilitated greater participation by MSN-prepared faculty. Currently, 5 MSN-prepared faculty are in doctoral programs with 2 additional faculty with applications to programs in progress.

Table IV-F.2   BSN Program Faculty Publications and Presentations

	Number of Peer-Reviewed Publications*	Presentations
2012	1	13
2013	2	13
2014	8	26
Total	11	52

*Includes invited, book chapters, and in press

Table IV-F.3   Faculty Grants Received by Faculty Teaching Primarily in the BSN Program

Grantor Name	Date Received	Funding Amount
University of Colorado	January 2012	$3000
University of Colorado	March 2012	$500
University of Colorado System Diversity & Excellence Grant	2012	$3000
Emory University	October 2011- March 2012	$11000
Colorado Compact	August 2011- August 2012	$49650
Colorado Compact	August 2012- August 2013	$35250
Emory	October 2012- March 2013	$10,000
2012 TOTAL		**$112,400**
Deborah Spunt Mini Grant	November 2013	$1000
Daniels Fund	August 2013- May 2014	$5000
Emory	October 2013- March 2014	$6750
2013 TOTAL		**$12,750**
Daniels Fund	August 2014- May 2015	$5000
Kaiser Permanente	January 2014	$20000
Emory	November2014- May 2015	$7000
2014 TOTAL		**$32,000**
3-Year TOTAL		**$157,150**

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

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

Program Response:

The nursing program reviews formal complaints according to the policies published in the Nursing Student Handbook and the UCCS Policies and Procedures. The Nursing Student Handbook [http://www.uccs.edu/bethel/current/studenthandbooks.html] contains the policies associated with making a formal appeal related to grade or dismissal. Student complaints are typically resolved at the instructor, option coordinator and/or department chair level. The option coordinator, program assistant and the faculty refer students to the written policies located in the student handbook. The department keeps records of complaints and the course of action required to reach resolution.

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

Elaboration: The program uses outcome data for improvement. Data regarding completion, licensure, certification, and employment rates; other program outcomes; and formal complaints are used as indicated to foster program improvement.

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

Program Response:

Data collected throughout the evaluation process are used to foster ongoing program improvement. The formation of a formal evaluation committee within the nursing program structure in 2014 is the result of the review and evaluation of the program evaluation process. The committee is comprised of faculty members who teach graduate and undergraduate level courses as well as representatives from administration. The committee meets on a regular basis and follows a preset plan to evaluate all aspects of the nursing programs within the department of nursing. The evaluation committee works closely with the curriculum committees. The evaluation committee reports to the full nursing faculty on a monthly basis.

☐ XX The Chief Nurse Administrator has approved the program information form and completed report, and confirms its contents as of   12/01/2015. (DATE)

Submission Instructions:

All reports must be submitted on or before the due date (but no sooner than 30 days before the due date) to ensure that the information provided is current. Email the program information form, completed report, and

appendices (as one document), if any, in PDF format, to Renee Ricci at rricci@aacn.nche.edu. Please do not send hard copies to CCNE.

Appendix II-D.1

Nursing <u>Full Time Faculty</u> Information
2014-2015 Annual Report

Name/ License # & State – Note whether in good standing **Check** **Theory/Clinical/ ANIP**	All Earned Degrees and Education Institution (e.g. BSN from Regis; MSN from UCCS)	Specify Faculty nursing specialty	**Name of Courses taught each academic term** (semester; quarter; term; module)
☒Theory ☐Clinical ☐ANIP **Rebecca (Lynn) Bryant** **CO 0107423 GS**	**PhD:** University of Colorado **MSN:** University of Mississippi **BSN:** Mississippi University for Women	Adult Medical-Surgical Nursing/Community Health Nursing	NURS 1230 Foundations of Nursing Practice NURS 4010 Nursing Research
☒Theory ☒Clinical ☐ANIP **Susan Davis** **CO 128891 GS**	**MSN:** Grand Canyon University **BSN:** American University	Coronary/Intensive Care/Cardiology/Adult Medical-Surgical Nursing	NURS 2200 Fundamentals of Nursing Practice NURS 2990/3990 Clinical Practicum NURS 4300 Leadership and Management NURS 4350 Nursing Management NURS 4580 Basic EKG Interpretation
☒Theory ☒Clinical ☐ANIP **Susan Finke** **CO 164353 GS**	**MSN**: Grand Canyon University **BSN:** Newman University **ADN:** Newman University	Medical-Surgical Nursing	NURS 1230 Foundations of Nursing Practice NURS 2100 Basic Health Assessment NURS 3050 Health Assessment Online
☒Theory ☒Clinical ☐ANIP **Cheryl Hawkinson** **CO 0069268 GS**	**MSN:** University of Phoenix **BSN:** University of Colorado	Medical-Surgical Nursing	RN Refresher Simulation Center
☒Theory ☒Clinical ☐ANIP **Susan Garrett**	**MSN:** University of Pittsburgh	Community Health/Medical-Surgical	NURS 2080 Health Promotion

CO 0197699 GS	**BSN:** Pennsylvania State University **ADN:** Montgomery College		NURS 4010 Nursing Research NURS 4400 Community Health Nursing
☒Theory ☒Clinical ☐ANIP **Ben Galatzan** **CO 1617878 GS**	**MSN:** Clarkson College **BSN:** College of Nursing UNMC – Lincoln Division **ADN:** Midplains Community College	Medical-Surgical/Pediatrics/Obstetrics	NURS 1010 Pharmacological Math NURS 2050 Pharmacology NURS 3200 Care of Adults I - Clinical NURS 3210 Care of Adults II NURS 4290 Advanced Nursing - Clinical
☐Theory ☒Clinical ☐ANIP **Eileen Gerrard-Gough** **CO 0070681 GS**	**MSN/BSN:** University of Florida	Mental Health Nursing	NURS 3100 Mental Health Nursing – Clinical
☒Theory ☐Clinical ☐ANIP **Helen Graham** **CO 0085685 GS**	**MSN/PhD:** University of Colorado Denver **BSN:** Arizona State University	Cardiovascular / Adult Health	NURS 4010 OL Nursing Research NURS 4250 OL Professional Nurse Practice
☒Theory ☐Clinical ☐ANIP **Sherry Lee** **CO 164936 GS**	**MSN/BSN:** University of Colorado Colorado Springs – Beth El College of Nursing and Health Sciences	Community Health Nursing	NURS 4150 Death & Dying NURS 4480 Capstone Project (RN to BSN)
☒Theory ☒Clinical ☐ANIP **Denise Millot** **CO 150265 GS**	**MSN:** Graceland University **BSN:** West Virginia Wesleyan College	Pediatric Nursing	NURS 1230 Foundations of Nursing Practice NURS 4100 Care of Children
☒Theory ☒Clinical ☐ANIP **Lynn Phillips** **CO 128991 GS**	**PhD:** University of Northern Colorado **MSN:** University of California, San Francisco	Pulmonary/Medical-Surgical Nursing	NURS 3200 Care of Adults I NURS 3600 Clinical Decisions Simulation Center

	BSN: Idaho State University		
☒Theory ☐Clinical ☐ANIP **Deborah Pina-Thomas** **CO 1619397 GS**	**MSN:** University of Phoenix **BSN:** Northeastern University	Psychiatric Mental Health Nursing	NURS 3100 Mental Health Nursing NURS 4010 Nursing Research NURS 4015 Online Nursing Research NURS 4400 Community Health - Clinical
☒Theory ☐Clinical ☐ANIP **Deborah Pollard** **CO 1632471 GS**	**PhD:** University of Pittsburgh **MSN:** West Virginia University **BSN:** West Liberty State College	Maternal Child	NURS 4250 Professional Nursing Practice
☒Theory ☒Clinical ☐ANIP **Mysha Tompkins** **CO 0171654 GS**	**MSN:** Grand Canyon University **BSN:** University of Virginia	Medical-Surgical Nursing	NURS 3050 Health Assessment Online NURS 3200 Care of Adults I NURS 3210 Care of Adults II - Clinical
☒Theory ☒Clinical ☐ANIP **Deborah Tuffield** **CO 0103805 GS**	**MSN-FNP:** University of Colorado Colorado Springs **BSN:** University of Missouri – Columbia MO	Medical-Surgical Nursing	NURS 4290 Advanced Nursing NURS 3200 Care of Adults I – Clinical NURS 3210 Care of Adults II - Clinical NURS 4600 Critical Care Nursing
☒Theory ☐Clinical ☐ANIP **Valerie Sievers** **CO 0072343 GS**	**MSN:** University of Colorado Colorado Springs **BSN:** Regis University	Forensic Nursing Sexual Assault Nursing	NURS 3040 OL Patterns of Knowing
☒Theory ☒Clinical ☐ANIP	**MSN:** Georgetown University School	Maternal & Newborn Nursing	NURS 4200 Care of the

Mary Claire Wahl **CO 195099 GS**	of Nursing **BSN:** Chicago State University		Childbearing Family

Nursing Part Time Faculty Information
2014- 2015 Annual Report (Add Rows if you have more faculty OR Duplicate)

Name/ License # & State – Note whether in good standing **Check** **Theory/Clinical/ ANIP**	All Earned Degrees and Education Institution (e.g. BSN from Regis; MSN from UCCS)	Specify Faculty nursing specialty	**Name of Courses taught each academic term** (semester; quarter; term; module)
☐Theory ☒Clinical ☐ANIP **Tina Armijo** **CO 0113827 GS**	**MS:** University of Northern Colorado **BSN:** Metropolitan State College Denver	Medical Surgical	NURS 2200 Fundamentals of Nursing Practice
☐Theory ☒Clinical ☐ANIP **Cindy Atwell** **CO 0099254 GS**	**MS:** Independence University Salt Lake City, UT **BSN:** Regis University	Medical Surgical	NURS 2100 Basic Health Assessment
☐Theory ☒Clinical ☐ANIP **Brenda Bove** **CO 0107598 GS**	**BSN:** University of Northern Colorado	Psychiatric/ Medical-Surgical Nursing	NURS 2200 Fundamentals of Nursing Practice
☐Theory ☒Clinical ☐ANIP **Pamela Cadogan-Zoeller** **CO 0066227 GS**	**MSN:** University of Alabama **BSN:** Seattle University	Mental Health Nursing	NURS 3100 Mental Health
☐Theory ☒Clinical ☐ANIP **Deborah Clarke** **CO 0197498 GS**	**BSN:** University of Colorado Colorado Springs	Medical-Surgical Nursing	NURS 3200 Care of Adults I NURS 3210 Care of Adults II
☐Theory ☒Clinical ☐ANIP **Evelyn Dilworth** **CO 0116005 GS**	**BSN**: University of Colorado Colorado Springs	Psychiatric/ Medical-Surgical Nursing	NURS 2200 Fundamentals of Nursing Practice NURS 3200 Care of Adults I NURS 3210 Care of Adults II
☐Theory ☒Clinical ☐ANIP **Mary DeBroux** **CO 0128334 GS**	**BSN:** Grand Canyon University	Medical-Surgical Nursing	NURS 2200 Fundamentals of Nursing Practice
☐Theory ☒Clinical ☐ANIP **Lee Ann Gilbert** **CO 0068077 GS**	**MSN:** University of Northern Colorado **BSN:** University of Southern Colorado	Mental Health Nursing	NURS 3100 Mental Health Nursing

☐Theory ☒Clinical ☐ANIP **Colleen Eisman** **CO 0121829 GS**	**BSN:** University of Colorado Colorado Springs	Medical-Surgical Nursing	NURS 3200 Care of Adults I NURS 3210 Care of Adults II
☐Theory ☒Clinical ☐ANIP **Vanessa Howell** **CO 0068260 GS**	**MSN:** University of South Alabama **BSN:** University of Colorado Colorado Springs – Beth El College of Nursing and Health Sciences	Maternal & Child Nursing	NURS 4100 Care of Children NURS 4200 Care of the Childbearing Family
☐Theory ☒Clinical ☐ANIP **Peggy Kattenberg** **CO 0201187 GS**	**BSN:** University of Colorado Colorado Springs	Medical – Surgical Nursing	NURS 4290 Advanced Nursing
☐Theory ☒Clinical ☐ANIP **Susan Koenig** **CO 0130481 GS**	**MSN/BSN:** University of Colorado Colorado Springs	Community Health	NURS 4400 Community Health
☐Theory ☒Clinical ☐ANIP **Kathleen Langr** **CO 0106029 GS**	**BSN:** University of Colorado Colorado Springs	Medical-Surgical Nursing	NURS 3200 Care of Adults I NURS 3210 Care of Adults II
☐Theory ☒Clinical ☐ANIP **Joshua Lingg** **CO 1624949 GS**	**BSN:** University of Wisconsin Parkside	Medical-Surgical Nursing	NURS 2100 Basic Health Assessment
☐Theory ☒Clinical ☐ANIP **Janice Latendress** **CO 0127046 GS**	**BSN:** University of Colorado Colorado Springs	Community Health	NURS 4400 Community Health
☒Theory ☐Clinical ☐ANIP **Michelle Lugo** **CO 0203662 GS** **FL 1618800 GS**	**BSN/ADN**: Keslar University	Medical-Surgical Nursing	NURS 3040 Patterns of Knowing
☐Theory ☒Clinical ☐ANIP **Cortney Lupo** **CO 0196190 GS**	**MSN:** Walden University **ADN/LPN:** Mott Community College	Nursing Education, Critical Care Nursing	NURS 4290 Advanced Nursing
☐Theory ☒Clinical ☐ANIP **Maria Amy Manson** **CO 0049421 GS**	**MSN**: University of Alabama, Birmingham Alabama **BSN:** University of Southern Colorado, Pueblo, CO	Mental Health	NURS 3100 Mental Health
☐Theory ☒Clinical ☐ANIP **Michelle Massie** **CO 0105195 GS**	**MSN:** in progress **BSN:** University of Phoenix	Medical-Surgical Nursing	NURS 3200 Care of Adults I NURS 3210 Care of Adults II
☐Theory ☒Clinical ☐ANIP **Sally McGarry** **CO 1620792 GS**	**MSN:** University of Hawaii Manoa	Intensive Care	NURS 4290 Advanced Nursing

	BSN: University of Massachusetts		
☐Theory ☒Clinical ☐ANIP **Teresa McKay** **CO 0108902 GS**	**BSN:** University of Southern Colorado	Medical-Surgical Nursing	NURS 2200 Fundamentals of Nursing Practice NURS 3200 Care of Adults I NURS 3210 Care of Adults II NURS 4290 Advanced Nursing
☐Theory ☒Clinical ☐ANIP **Sylvia Metzger** **CO 1629386 GS**	**MSN:** University of Virginia **BSN:** University of Texas	Maternal & Child Nursing	NURS 4200 Nursing Care of Childbearing Family
☐Theory ☒Clinical ☐ANIP **Linda Minyard** **CO 0049842 GS**	**MSN/BSN:** University of Phoenix	Community Health	NURS 4400 Community Health
☐Theory ☒Clinical ☐ANIP **Angela (Michelle) Mongillo** **Texas Current – 5/31/2017** **Compact License Yes** **GS**	**MSN:** University of Phoenix **BSN:** Baylor University	Maternal Child	NURS 4200 Care of the Childbearing Family
☐Theory ☒Clinical ☐ANIP **Linda Parsons** **CO 0161713 GS**	**BSN:** Biola University	Pediatric Nursing	NURS 4100 Care of Children
☐Theory ☒Clinical ☐ANIP **Amber Rossman** **CO 0187298 GS**	**MSN:** Frontier School of Midwifery & Family Nursing **BSN:** University of Colorado Colorado Springs	Maternal & Child Nursing	NURS 4200 Care of the Childbearing Family
☐Theory ☒Clinical ☐ANIP **Laura Rosenhahn** **CO 161496 GS**	**BSN:** Azusa Pacific University	Maternal Nursing	NURS 4200 Care of the Childbearing Family
☐Theory ☒Clinical ☐ANIP **Eleanor Sanchez** **CO**	**MSN:** University of Phoenix **BSN:** University of Phoenix	Mental Health	NURS 3100 Mental Health Nursing
☐Theory ☒Clinical ☐ANIP **Mary Satre** **CO 0183668 GS**	**MBA:** Thunderbird School of Global Management **BSN:** St. Olaf School	Medical-Surgical Nursing	NURS 3200 Care of Adults I NURS 3210 Care of Adults II
☐Theory ☒Clinical ☐ANIP **Amber Tamara Sellers** **CO 0107486 GS**	**BSN:** Central State University – Edmund OK	Medical-Surgical Nursing	NURS 2200 Fundamentals of Nursing Practice
☐Theory ☒Clinical ☐ANIP **Valerie Shereck** **CO 0039264 GS**	**Post Masters Certificate – Adult Gero –** University of Colorado Colorado	Adult Gero – Community Health	NURS 4400 Community Health

	Springs **MSN:** University of Colorado Colorado Spring **BSN:** Beth-El College of Nursing		
☐Theory ☒Clinical ☐ANIP **Tamara Sellers** **CO 0107486 GS**	**BSN:** Central State University of Edmond OK	Medical-Surgical Nursing	NURS 2200 Fundamentals of Nursing Practice
☐Theory ☒Clinical ☐ANIP **Cassandra Tumanis** **CO 0118258 GS**	**MSN:** Western Governors University **BSN:** Goshen College **ADN**: Kellog Community College	Medical-Surgical Nursing	NURS 3200 Care of Adults I NURS 3210 Care of Adults II
☐Theory ☒Clinical ☐ANIP **Stefanie Ungstad** **CO 0160387 GS**	**BSN:** University of Texas at Arlington **ADN:** Pikes Peak Community College	Clinical Nursing, Nursing Education	NURS 4100 Care of Children
☐Theory ☒Clinical ☐ANIP **Robert Weiner** **CO 0196499 GS**	**BSN:** University of Colorado Colorado Springs **RN:** Pikes Peak Community College	Medical-Surgical Nursing	NURS 3200 Care of Adults I NURS 3210 Care of Adults II
☐Theory ☒Clinical ☐ANIP **Lori Wilson** **CO 0118973 GS**	**BSN:** University of Colorado Colorado Springs	Pediatric Nursing	NURS 4100 Care of Children
☐Theory ☒Clinical ☐ANIP **Ivana (Evonne) Young** **CO 0062742 GS**	**MSN:** Walden University **BSN**: Regis University **ADN:** University of Indianapolis	Critical Care Nursing, Pediatric Nursing	NURS 4100 Care of Children

Beth-El College Nursing Program Evaluation Committee
Program Evaluation Timeline

Month	Activity	Data Collected	Outcome Benchmark
February	a. Annual Report due to CBON b. Alumni Surveys • BSN • MSN • DNP	a. Colorado Board of Nursing Criteria. Report submitted by College Dean b. Alumni surveys • Satisfaction • Expected Student Outcomes • Employment rates	a. Review report only. b. Surveys • 80% moderate to strong satisfaction • 80% moderate to strong agreement that expected student outcomes were met • 70% completion within 4 years of starting program (BSN); 70% completion within 6 years of starting program (MSN); 70% completion within 7 years of starting program (DNP). • 90% employment within 12 months of program completion for all degrees.
March	a. Evaluate NP certification exam results b. Clinical Site Focus Groups	a. A/GNP and FNP certification pass rates from AANP and ANCC b. Satisfaction with quality of students and graduates; recommendations for improvement.	a. 80% pass rate b. Recommendations to be reported to Curriculum Meeting and Nursing Faculty
April	a. Undergraduate and Graduate Curricula Reviewed (Curriculum Plan/Revision Reports from Curriculum Committees) b. Remind faculty that Annual Course	a. Curriculum Plan/Revision Reports from undergraduate and graduate curriculum committees b. Completion of course review forms	a. Committee recommendations (if applicable) taken to full nursing faculty for vote b. No action required. Reminder only

	Reviews are due (Fall and Spring Courses) c. Expected Faculty Outcomes Report due from Nursing Program Chair d. Aggregate Course Evaluations	c. Aggregate results for • Teaching • Scholarly Activities • Service • Practice d. FCQ aggregate for undergraduate and graduate nursing	c. Review report only d. Mean score of 4 or greater
May	a. Administer EBI Exit Survey b. Clinical Site Evaluations Due a. Student and Faculty evaluation of clinical agencies b. Clinical Agency evaluation of clinical faculty c. Aggregate Graduate Student Clinical	a. AACN/EBI Exit and Alumni Surveys 1. Student satisfaction 2. Expected student outcomes 3. Graduation rates 4. Employment rates b. Review student and faculty evaluation of clinical agencies. Identify areas of concern. Review clinical agency evaluation of clinical faculty. Identify areas of concern. c. Review student and faculty	a. AACN/EBI Exit and Alumni Surveys 1. 80% moderate to strong satisfaction 2. 80% moderate to strong agreement that student outcomes were met 3. 70% within 4 years of starting program (BSN); 70% within 6 years of starting program (MSN); 70% within 7 years of starting program (DNP). 4. 90% employment within 12 months of program completion c. Review data, identify areas of concern, and recommend action as identified by committee d. Review data, identify areas of

	Practicum Report due a. Preceptor evaluations of students b. Site visitor evaluations of students and preceptor/practicum site c. Student evaluations of practicum site	evaluation of clinical agencies. Identify areas of concern. Review clinical agency evaluation of clinical faculty. Identify areas of concern.	concern and recommend action as identified by committee
September	• Review reports from Barclay Exam o Pre-post nurse practitioner exam o Review to compare pre test to post test results	• Compare pre-post exam scores	• Significant difference found between pre and post exam scores • Benchmarks to be determined
October			
November	• Evaluate NCLEX-RN results	• NCLEX-RN results	• 90% pass rate

Black: Both Undergraduate and Graduate Programs

Blue: Graduate Program

Green: Undergraduate Program