

Annual Departmental Report 2021-2022

Program Information

Program/Department: Nursing

Department Chair: Debbie Benes

Department Assessment Committee Contact:

This document is to be kept in the department and an electronic file is due to the AVP of Institutional Research & Planning by June 1, 2022.

A. Departmental Special Section for AY21-22

Department Lessons Learned and Accomplishments

The department continues to experience barriers to clinical opportunities due to COVID restrictions. Faculty continue to create clinical experiences through the use of simulation including virtual and face to face scenarios. Although virtual was beneficial during the pandemic, we are finding inconsistencies in the learning process. It was determined that we will stop using virtual simulation as a clinical experience for AY 22/23 and work on reestablishing community partnerships lost during the pandemic.

The greatest accomplishment was receiving the CCNE response to our 5 yr. CIPR report noting the department demonstrated compliance with all standards and elements.

B. Program Learning Outcomes (PLOs) (Educational Objectives)

I. List of PLOs and the timeline for assessment.

PLO #	PLO – Stated in assessable terms	Where are the learning outcomes for this level/program published? (please specify) Include URLs where appropriate	Timing of assessment (annual, semester, bi-annual, etc.)	When was the last assessment of the PLO completed?
1.	Synthesize knowledge from the liberal arts, sciences, and nursing as a foundation for safe, client-centered care	Student handbook, Nursing department website	annual	Spring2022
2.	Incorporate basic organizational and systems leadership to provide quality care and patient safety	Same as above	annual	Spring2022
3.	Incorporate evidence based practice in the management of client care	Same as above	annual	Spring2022
4.	Analyze information using information technology to improve patient outcomes	Same as above	annual	Spring2022
5.	Examine the impact of health care policy, finance, and regulatory environments on nursing practice	Same as above	annual	Spring2022
6.	Integrate principles of communication in professional practice	Same as above	annual	Spring2022
7.	Synthesize knowledge of health promotion and disease/injury prevention in designing population focused care	Same as above	annual	Spring2022
8.	Integrate professional standards of moral, ethical and legal conduct into nursing practice	Same as above	annual	Spring2022

II. **PLO Assessment** (Please report on the PLOs assessed and/or reviewed this year. Programs should be assessing at least one each year.)

Using the table below, list and briefly describe the **direct method(s)** used to collect information assessing whether students are learning the core sets of knowledge (K), skills (S) and attitudes (A) identified as essential.

PLO # (from above)	Assessment description (exam, observation, national standardized exam, oral presentation with rubric, etc.)	When assessment was administered in student program (internship, 4 th year, 1 st year, etc.)	To which students were assessments administered (all, only a sample, etc.)	What is the target set for the PLO? (criteria for success)	Reflection on the results: How was the “loop closed”?
1-8	Exams/quizzes Nursing care plans Scholarly papers with rubrics Oral presentations with rubric HESI case studies HESI exams clinical evaluations Med/calc exams with increasing complexity per semester starting spring sophomore level, lab/simulation experiences, NCLEX	All levels have exams, papers and presentations throughout the semester with a final exam/paper or presentation at the end of the semester. End of program evaluation – Following successful completion of NURS4800, students take the Exit HESI exam	students in each level are required to meet the same level outcomes.	Student progression in nursing program requires: GPA – 2.5 for each NURS course Exit HESI score ≥ 850 Success on the NCLEX examination	Sophomore Level 56% of students progressed to Junior level 10 students will repeat a sophomore course AY 22/23 Remediation program started AY 20/21: 11/14 progression to junior level Students response to peer mentoring and academic success requirements very helpful Junior Level 92% of students progressing to senior level. 4 students will repeat junior level courses in the fall 22 semester. Changes to course scheduling will prevent progression to senior yr until fall 23.

					<p>Med/Calc: all students successful in passing med calc. exam 98% on first attempt.</p> <p>Senior Level 97% of seniors graduated. 2 will repeat 1 course after failing med/calc exam x2.</p> <p>Exit HESI: 78% pass on 1st attempt. Program goal is 80% after second attempt.</p> <p>NCLEX pass rate for 2021: 88% - this is low for the program but consistent with other nursing programs We are reviewing exam questions for level of difficulty, changed review courses, and will review student evaluations of course and program outcomes looking for areas of deficiency</p>
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You may use this comment box to provide any additional information, if applicable:

Summary of Findings: Briefly summarize the results of the PLO assessments reported in Section II above combined with other relevant evidence gathered and show how these are being reviewed/discussed. How are you “closing the loop”?

Reflection Prompt	Narrative Response
<p>Other than GPA, what data/evidence is used to determine that graduates have achieved the stated outcomes for the degree? (e.g., capstone course, portfolio review, licensure examination)</p>	<p>The nursing program uses numerous surveys to evaluate program outcomes including student surveys of course/clinical outcomes, SIRII and C4 results, Licensure exam, exit HESI score results, Student evaluation of Simulation surveys, Senior exit survey, Faculty evaluation of clinical sites, and student evaluation of clinical preceptors,</p>
<p>Who interprets the evidence? What is the process? (e.g. annually by the curriculum committee)</p>	<p>The DON Chair ,Program Evaluation Committee (PEC) Curriculum Committee; results brought to faculty</p>
<p>What changes have been made as a result of using the data/evidence? (close the loop)</p>	<p>Overall, we are meeting designated program effectiveness outcomes. One area we continue to struggle with is poor response rates on student evaluation of course surveys. Next year, we will switch from TK20 to google forms. Are students are used to using forms for many of our other surveys. We can provide a barcode in class that takes them directly to the right survey. Our licensure pass rate is well above the required 80% however we continue to strive to improve the pass rate (see below). Face to face simulation has had positive results on all three levels. Students identify they do not like virtual simulation as all they have to do is click a</p>

	button. Faculty have had thorough discussions related to the use of vsims and have determined they will no longer be used as a clinical substitute, but will be used as a class learning exercise.
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C. Assessment Plan for Program/Department

- I. Insert the program or department Assessment Plan
- II. Explain any changes in the assessment plan including new or revised PLOs, new assessments that the program/department plans to implement and new targets or goals set for student success.
- III. If you do not have a plan, would you like help in developing one?

Yes

D. Program Review Action Plan or External Accreditation Action Letter/Report

Annual Reflection/Follow-up on Action Plan from last Program Review or external accreditation (only complete the table that is appropriate for your program)

I. Programs that fall under Program Review:

- i. Date of most recent Review:
- ii. Insert the Action Plan table from your last Program Review and give any progress towards completing the tasks or achieving targets set forth in the plan.

Specific area where improvement is needed	Evidence to support the recommended change	Person(s) responsible for implementing the change	Timeline for implementation	Resources needed	Assessment Plan	Progress Made this Year

- iii. If you do not have an action plan, would you like help in developing one based on your last program review and needs of the program?

Yes

II. Programs with external Accreditation:

The Don received the CCNE response to the CIPR report submitted 5/21.

On behalf of the Commission on Collegiate Nursing Education (CCNE), I am pleased to advise you that the CCNE Board of Commissioners reviewed the continuous improvement progress report (CIPR) submitted on May 26, 2021 by the baccalaureate and master's degree programs in nursing at Fitchburg State University and determined that the programs have demonstrated compliance with all standards and key elements.

Professional, specialized, State, or programmatic accreditations currently held by the program/department.

- i. Date of most recent accreditation action by each listed agency.
- ii. Date and nature of next review and type of review.

List key issues for continuing accreditation identified in accreditation action letter or report.	Key performance indicators as required by agency or selected by program (licensure, board or bar pass rates; employment rates, etc.)(If required.)	Update on fulfilling the action letter/report or on meeting the key performance indicators.

E. Departmental Strategic Initiatives

<p>Accomplished Initiatives AY 21-22 <small>Add more rows as needed</small></p>	<p>Corresponding Strategic Plan Goal & Strategy <small>Goal # followed by Strategy # ex: 1.3</small></p>	<p>Indicate if a Diversity, Equity and Inclusiveness (DEI) Goal</p>
<p>Holistic Admissions- ongoing The committee reviewed a total of 15 applicants and agreed to admit 12 into the NURS program</p>	<p>Goal 5 – Establish FSU commitment to education justice and being a student ready campus.</p>	<p style="text-align: center;"><input type="checkbox"/></p>
<p>Development of an Academic Practice Partner relationship with Health Alliance Hospital- Ongoing The nursing program and Health Alliance Hospital were unable to continue work on development of a Dedicated Educational unit. Due to the pandemic, and significant staffing shortages, HAL was unable to dedicate the time or staffing to the proposal. We hope to continue the dialogue next academic year. The DON has reached out to Whittier Rehabilitation Center to develop a long term relationship and development of alternative clinical experiences. Faculty met with member of their nursing administration in May for a tour of</p>	<p>Goal 3 – Build innovative sustainable public-private partnerships that advance the University’s mission</p>	<p style="text-align: center;"><input type="checkbox"/></p>

the facility. Talks will continue this summer.		
Creation of a Simulation Center The center has been successfully running for the past 2 AYs. This year the center conducted over 500 hrs. of student learning experiences.	Goal 1 – Establish a learning environment in which academic and co-curricular program s work in synergy	<input type="checkbox"/>
		<input type="checkbox"/>

Planned Initiatives for AY 22-23 <small>Add more rows as needed</small>	Associated Strategic Plan Goal & Strategy <small>Goal # followed by Strategy # ex: 1.3</small>	Indicate if a Diversity, Equity and Inclusiveness (DEI) Goal
NextGen NCLEX Preparation The RN licensing exam is transitioning to a new question platform in 2023. To prepare for this transition, the department has begun exposing students to the alternate types of questions in the classroom setting. The DON is preparing for the transition through providing faculty with funding to attend test question writing workshops, the purchase of KeithRN, and the purchase of a new testing platform ExamSoft. We expect to begin using the new platform ay22/23.	GOAL FOUR: Establish inclusive excellence, innovation, and environmental stewardship as signature strengths Provide faculty and staff professional development opportunities and appropriate tools, including technology, to ensure they can be effective in their roles.	<input type="checkbox"/>
Curriculum redesign to a Competency Based Educational Model.	GOAL ONE: Forge innovative paths to knowledge acquisition, career readiness, social mobility, and lifelong learning	<input type="checkbox"/>

<p>In April 2021, with the endorsement of the AACN membership, academic nursing will move toward a new model and framework for nursing education using a competency-based educational model by the year 2025. To effectively revise the curriculum, the Department of Nursing has requested a total of six course releases for the (3) fall and (3) spring semester of AY 2022/23. Three faculty members per semester will research and develop recommendations for curriculum revisions including: new course development, competency based assessment and evaluation processes, simulation based learning and revisions to face to face clinical experiences.</p>	<p>2. Establish a learning environment in which academic and co-curricular programs work in synergy to offer applied learning experiences that prepare students for purposeful personal and professional lives. 3. Promote greater interdisciplinary teaching and develop innovative combinations across academic departments. 4. Leverage existing curricular strengths to develop new programs that meet demand and forge deeper connections between our curriculum and community needs</p>	
		<input type="checkbox"/>
		<input type="checkbox"/>

F. Departmental Reflection:

Take this section to reflect on--

- 1) *Initiatives that you may be considering for 22-23 academic year that you did not already capture above.*

2) *Any other thoughts or information that you would like to share.*