

PLU School of Nursing
Program Evaluation Timeline
 (To accompany SoN Systematic Evaluation Plan)

BSN & MSN Accreditation: Spring 2013, 10 year period (Next due Spring 2023)

DNP & PG ARNP Accreditation: Spring 2016 (Maximum term of accreditation = 5 years, 2021)

CIPRs due Spring 2018, all programs

Consider Reaccreditation for all programs in Spring 2021

PEC = Program Evaluation Committee

PG APRN = Post Graduate Advanced Practice Registered Nurse Certificate Program

CIPR = CCNE Continuous Improvement Report

AFO = Aggregate Faculty Outcomes

FARSA = Faculty Activity Report and Self Assessment

SEP = Systematic Evaluation Plan

QCCCR = Quality Cycle for Course & Curriculum Review

PIP = SoN Performance Improvement Plan

Program Evaluation, Completed Activities, 2014-15 AY:

Academic Term	Focus/Activity
Fall 2014	<ul style="list-style-type: none"> • II-C. New Chief Nurse Administrator, August 2014
Spring 2015	<ul style="list-style-type: none"> • I-A. Developed SoN Values & Vision • I-A. Revised SoN Mission Statement • I-A. Developed SoN Philosophy • I-A. Developed Strategic Planning Framework & Initiatives • I-A. Defined Prof Stds & Guidelines used by the academic programs • I-B. Defined Community of Interest • I-B. Convened SoN Community Advisory Council • I-C. Defined Expected Aggregate Faculty Outcomes (RAD) • I-D, III-F. Developed UG and Grad Student Advisory Councils • I-D. Began UG and Grad Student Forums • I-D Updated SoN Organizational Charts (Dean) • I-E. Website & Facebook Updates

	<ul style="list-style-type: none"> • I-F. Updated UG and Grad Student Handbooks (RAP) • II-A. Revised Faculty Workload Guidelines (Dean) • II-A. Revised Contingent Faculty Salaries • II-A. Secured two additional TT faculty lines (Dean) • II-A. Participated in Campus Master Planning Process (Dean) • II-E. Updated Preceptor Database • III-A. Launched DNP Program • III-F. Implemented Student Advisory Councils and Student Forums • III-H. Developed Quality Cycle for Course and Curriculum Review (QCCCR) • III-H. Annual Course Summaries Implemented with Graduate courses (CIC) • IV-A. Revised and Updated the SoN Systematic Evaluation Plan (SEP) • IV-A. Convened Ad Hoc Program Evaluation Committee (PEC); Added PEC to Bylaws • IV-A. Defined SoN Evaluation Days • IV-B. Defined Program Completion/Graduation Rates • IV-D. Initiated collection of employment rate data • IV-E. Defined Program Outcomes in SEP • IV-E. Initiated Student End-of-Program Surveys • IV-F. Defined Expected Aggregate Faculty Outcomes (RAD)
<p>Summer 2015</p>	<ul style="list-style-type: none"> • I-C. Developed SoN Faculty Handbook (Dean, RAD) • I-F. Identified academic policies needed (Dean, PEC) • III-G. Implemented Notice of Deficiency with at-risk students • IV-A. Convened PEC • IV-A. Developed SoN Program Evaluation Timeline • IV-B. Initiated tracking of Graduation/ Completion Rates • IV-C. Updated tracking of NCLEX and certification Pass Rates • IV-D. Initiated tracking of Employment Rates • IV-E. Developed and Administered Employer Satisfaction Survey • IV-F. Initiated tracking of Aggregate Faculty Outcomes • IV-H. Completed SoN Annual Report • IV-H. Planned SoN Evaluation Days

Required Program Evaluation Activities --

Every Semester:

- Update Preceptor Database (II-E; SoN Staff)
- Complete and submit Preceptor Performance Evaluations (II-E; Clinical Faculty, RAD, CIC)
- Complete Student Course Evaluations (III-D, F; Course Faculty & CIC)
- Complete and submit Clinical Site Evaluations (III-E; Clinical Faculty, CIC)
- Hold SoN Community Advisory Council meetings (I-B; IV-H; Dean, PEC)
- Hold Student Advisory Council meetings and Student Forums (I-D, III-F; Dean, PEC)
- Complete and submit Student Clinical Performance Evaluations (III-G; Clinical Faculty, CIC)
- QCCCR: Review scheduled courses for Course & Curricular reviews (III-H; Course Faculty, CIC)

Every Fall:

- Appoint student members of committees (I-D; SNO committees)
- Update Faculty Database (II-D; SoN Staff)
- Submit Faculty CVs (II-D; SoN Faculty)
- Administer Faculty Satisfaction Survey (II-F; RAD)
- Administer Alumni Satisfaction Survey (IV-E; PEC)
- Conduct SoN Evaluation Day (IV-H; PEC, SNO Committees, SoN Faculty)
- Update SoN Program Improvement Plan based on results of program evaluation activities (IV-H; PEC, SNO Committees, SoN Faculty)

Every Spring:

- Bylaws Review (I-D; Exec Comm)
- Catalogue Updates (I-E; SoN Staff)
- Update UG and Grad Student Handbooks (I-F; Dean, RAP)
- Budget review & analysis (II-A; Dean)
- Update Workload Guidelines (II-A; Dean)
- Calculate annual Program Completion/Graduation Rates, NCLEX & Certifications Pass Rates, Employment Rates (IV-B,C,D; SoN Staff, PEC)
- Complete and submit FARSAs (SoN Faculty)

Every Summer:

- Update Faculty Handbook (I-C; Dean, RAD)
- Update SNO Committee Rosters (I-D; SoN Staff)
- Identify academic policies & updates needed (I-F; Dean, PEC)

- Conduct analysis of NCLEX test plan and ATI results (III-H, IV-C, IV-H; CIC)
- Conduct analysis of Program Outcomes: Key Assignments, Portfolios, Student Exit Surveys, Alumni Satisfaction, Employer Satisfaction (IV-E; PEC)
- Compile Aggregate Faculty Outcome data (IV-F; SoN Staff)
- Conduct Faculty Performance Reviews (IV-F; Dean)
- Complete SoN Annual Report (IV-H; Dean)
- Plan SoN Evaluation Day (IV-H; PEC)

Ongoing/As Needed:

- Ensure website & facebook information is up-to-date and accurate (I-E; SoN Staff)
- Documentation of formal complaints; Use to foster program improvements (IV-G, IV-H; RAP, Dean, PEC)

SoN Program Evaluation Timeline, Fall 2015 – Summer 2018:

<u>F</u> <u>2015</u>	<u>Sp</u> <u>2016</u>	<u>Su</u> <u>2016</u>	<u>F</u> <u>2016</u>	<u>Sp</u> <u>2017</u>	<u>Su</u> <u>2017</u>	<u>F</u> <u>2017</u>	<u>Sp</u> <u>2018</u>	<u>Su</u> <u>2018</u>
CCNE Self-Study Due – DNP & PG APRN Programs	CCNE & NCQAC Site Visit – DNP & PG APRN Programs						CCNE CIPR Due: BSN, MSN, DNP, PG APRN	
<u>Std I</u>								
I-A. Develop 2015-2017 SoN Goals (Dean’s Leadership Council, Exec Comm)	I-B. Conduct Needs Assessment for MSN-level Programming (Assoc Dean for Grad Programs)					I-A. Develop 2017-2019 SoN Goals (Dean’s Leadership Council, Exec Comm)	I-A. Review & Update SoN Values, Vision, Mission, Philosophy Statements (Dean’s Leadership)	

<u>F</u> <u>2015</u>	<u>Sp</u> <u>2016</u>	<u>Su</u> <u>2016</u>	<u>F</u> <u>2016</u>	<u>Sp</u> <u>2017</u>	<u>Su</u> <u>2017</u>	<u>F</u> <u>2017</u>	<u>Sp</u> <u>2018</u>	<u>Su</u> <u>2018</u>
							Council, Exec Comm)	
							I-C. Review & Update AFOs (RAD)	
<u>Std II</u>								
II-A. Develop plan for Ramstad Renovations (Dean)								
II-F. Implement regularly scheduled administration of Faculty Satisfaction Survey (RAD)								
<u>Std III</u>								
III-A. Submit PMH DNP track for University approvals (Assoc Deam for Grad Programs) III-A. Develop and submit PG APRN	III-A/H. Begin Review and Update of BSN & MSN Program Outcomes, including MSN Program deliverables/ Program array (CIC)	III-A. Implement PMH DNP and PG APRN Certificate Programs	III-A-H. Continue BSN & MSN Review and Update (CIC)	III-A-H. Complete BSN & MSN Review and Update (CIC)			III-A: Review & Update DNP Program Outcomes; Review & Update DNP Course Objectives (CIC)	

<u>F</u> <u>2015</u>	<u>Sp</u> <u>2016</u>	<u>Su</u> <u>2016</u>	<u>F</u> <u>2016</u>	<u>Sp</u> <u>2017</u>	<u>Su</u> <u>2017</u>	<u>F</u> <u>2017</u>	<u>Sp</u> <u>2018</u>	<u>Su</u> <u>2018</u>
Certificate Programs (Assoc Deam for Grad Programs, CIC)								
III-B. Develop policies for Curriculum Implementation: Testing policy; Use of ATI; Key Assignments – Link to Program Outcomes; Guidelines for Portfolio development; Use of Simulation; Clinical Competency Evaluations; Use of APA; Clinical Practicum for Grad programs; Expectations for faculty teaching clinical; Preceptor roles (CIC)	III-A/H. Begin Review & update of RN-MSN and Nurse Educator programs (CIC) III-A/H. Begin Review & Update course objectives for BSN & MSN programs (CIC)							

<u>F</u> <u>2015</u>	<u>Sp</u> <u>2016</u>	<u>Su</u> <u>2016</u>	<u>F</u> <u>2016</u>	<u>Sp</u> <u>2017</u>	<u>Su</u> <u>2017</u>	<u>F</u> <u>2017</u>	<u>Sp</u> <u>2018</u>	<u>Su</u> <u>2018</u>
<p>III-H. QCCCR: Review Spring 2015 Annual Course Summaries, Grad Program (CIC)</p> <p>III-H. Develop schedule for Course & Curricular reviews (CIC)</p>	<p>III-B. Review & Update Prof Stds & Guidelines used and curricular alignment tables, BSN & MSN programs (CIC)</p>							
<p>III-H. QCCCR: Plan BSN & MSN Curriculum Reviews & Updates/ Revisions (CIC)</p>	<p>III-B. Ensure ELMSN and RN-MSN demonstrate achievement of the <i>BSN</i> and <i>MSN Essentials</i> (CIC)</p>						<p>III-B. Review & Update Prof Stds & Guidelines used and curricular alignment tables, BSN, MSN, DNP programs (CIC)</p>	
<u>Std IV</u>								
<p>IV-A. Implement regularly scheduled SoN Evaluation Day (PEC)</p> <p>IV-A. Write DNP & PG</p>	<p>IV-E. Implement use of Key Assignments and Portfolios for evaluating Program Outcomes (CIC)</p>						<p>IV-A. Review and revise SEP (PEC, Dean)</p>	

<u>F</u> <u>2015</u>	<u>Sp</u> <u>2016</u>	<u>Su</u> <u>2016</u>	<u>F</u> <u>2016</u>	<u>Sp</u> <u>2017</u>	<u>Su</u> <u>2017</u>	<u>F</u> <u>2017</u>	<u>Sp</u> <u>2018</u>	<u>Su</u> <u>2018</u>
APRN Accreditation Self Study (Assoc Dean for Grad Programs, SNO Committees, SoN Staff)								
IV-E. Develop process for using Key Assignments and Portfolios in evaluation of Program Outcomes (PEC)								
IV-E. Develop and begin regularly scheduled administration of Alumni Satisfaction Survey (PEC)								
IV-G. Clarify policy on Formal Complaints (RAP, Dean); IV-G. Develop Database of								

<u>F</u> <u>2015</u>	<u>Sp</u> <u>2016</u>	<u>Su</u> <u>2016</u>	<u>F</u> <u>2016</u>	<u>Sp</u> <u>2017</u>	<u>Su</u> <u>2017</u>	<u>F</u> <u>2017</u>	<u>Sp</u> <u>2018</u>	<u>Su</u> <u>2018</u>
Student Petitions (Dean)								
IV-H. Develop SoN Program Improvement Plan based on results of program evaluation activities (PEC)								

PEC, 7/24/2015
SoN Evaluation Timeline