

STANDARD IV

PROGRAM EFFECTIVENESS: AGGREGATE STUDENT AND FACULTY OUTCOMES

The program is effective in fulfilling its mission, goals, and expected aggregate student and faculty outcomes. Actual aggregate student outcomes are consistent with the mission, goals, and expected student outcomes. Actual alumni satisfaction data and the accomplishments of graduates of the program attest to the effectiveness of the program. Actual aggregate faculty outcomes are consistent with the mission, goals, and expected faculty outcomes. Data on program effectiveness are used to foster ongoing program improvement.

IV-A. Surveys and other data sources are used to collect information about student, alumni, and employer satisfaction and demonstrated achievements of graduates. Collected data include, but are not limited to, graduation rates, NCLEX-RN® pass rates, certification examination pass rates, and employment rates, as appropriate.

Program Response:

The School of Nursing uses multiple sources to assess our program and its graduates, including portfolios addressing program outcomes, exit interviews, graduation rates, NCLEX-RN pass rates, advanced practice certification pass rates, post graduation surveys and publications by graduates of the MSN program.

Program Outcomes

During the final semester of the BSN and the final semester of the pre-licensure portion of the ELMSN program each student turns in an electronic portfolio addressing the PLU SoN Program Outcomes. Students begin the portfolio in NURS 260 Professional Foundations I in their first year in the program and build the portfolio throughout the program. There is a standardized grading rubric for evaluating the portfolio in NURS 480 Professional Foundations II to ensure each graduate can articulate how they have achieved the SoN Program Outcomes (Exhibit IV-A-1).

Graduate students in both the MSN Care and Outcomes program and in the Family Nurse Practitioner program also develop electronic portfolios to address how they achieve the Graduate Program Outcomes. Students begin their portfolio in NURS 523 Role of the Advanced Nurse and build their portfolio throughout the masters program. The portfolio is evaluated in the final semester of the graduate program in NURS 532 Care & Outcomes Manager II for the MSN COM students and in NURS 585 Family Nurse Practitioner II for the MSN FNP students. (NURS 532 and NURS 585 Portfolio grading rubrics Exhibit IV-A-2).

Senior Exit Surveys

PLU SON conducts exit interviews with all seniors graduating from the BSN program. The interviews occur during a regularly scheduled class in NURS 460 and attendance is taken. Each student is given the opportunity to speak and is encouraged to describe the Best and Worst aspects of the program from their perspective. Suggestions for change are also elicited. Student comments are recorded and transcribed by a SON staff person. The exit interviews typically last 1.5 hours. Information gained from the exit interviews is used for curricular change or how a course is offered. Transcripts of exit interviews from May 2009 until December 2012 are located in the onsite resource room (Exhibit IV-A-3).

Themes identified as the “Best” aspects of a PLU BSN education over the past 5 years include amount of clinical hours and variety of sites, faculty expertise, advising and the reputation of PLU in the community. Themes identified as the “Worst” aspect of their education included online pediatric lectures, the Heart Failure program

(disorganized), desks in classroom and NURS 320 lab. Changes that have been made based on student exit interviews include: improving communication with nursing staff and administration at Good Samaritan, and depending less on the Clinical Consortium Co-Chair, Karen Foreman; reassessing the balance between group and individual projects, especially in the Senior I courses; and completely revamping Nursing 430: Community Health practicum, under the leadership of Sara Swett and Kathy Moio.

Graduation Rates

Entrance into the School of Nursing via the BSN or ELMSN route is highly selective, therefore it is anticipated students would be successful in the nursing program. The on-time graduation rate in the BSN program, as described in Table IV-1 ranges from 80% to 93% (average 86%) with overall retention rate of 86% to 100% (average 93.1%). The retention rate for the Entry-level MSN program is 90% to 100%, as depicted in Table IV-2. Reasons for delayed graduation include medical leave of absence, financial difficulties and academic progression issues such as course failure.

Table IV-1. BSN Graduation Rates

Entering Term	Grad. Term	Total Students Entered	Graduated as Expected	Graduated out of Sequence	Currently Enrolled	Withdrawals: Failures, Dismissals	Withdrawal: Personal	Overall Retention
Spr 05	Fa07	45	39 (87%)	5 (11%)	0	1 (2%)	0	98%
Fall 05	Sp08	47	43 (92%)	3 (6%)	0	0	1 (2%)	98%
Spr 06	Fa08	41	33 (81%)	2 (5%)	0	1 (2%)	5 (12%)	86%
Fall 06	Sp09	48	39 (81%)	9 (19%)	0	0	0	100%
Spr 07	Fa09	43	35 (82%)	3 (7%)	0	4 (9%)	1 (2%)	89%
Fall 07	Sp10	42	39 (93%)	2 (5%)	0	0	1 (2%)	98%
Spr 08	Fa10	34	31 (88%)	1 (3%)	0	2 (6%)	1 (3%)	91%
Fall 08	Sp11	43	36 (84%)	1 (2%)	0	3 (7%)	3 (7%)	86%
Spr 09	Fa11	44	35 (80%)	3 (7%)	0	4 (9%)	2 (4%)	87%
Fall 09	Sp12	48	42 (88%)	2 (4%)	0	3 (6%)	1 (2%)	92%
Spr 10	Fa 12	38	35 (92%)	3 (8%)	2	0	0	100%
Totals			86%	7%		5.9%	4.3%	93.1%

Table IV-2. Entry Level MSN Graduation Rates

Entering Term	Grad. Term	Total Students Entered	Graduated as Expected	Graduated out of Sequence	Currently Enrolled	Withdrawals: Failures, Dismissals	Withdrawal: Personal	Overall Retention
Sum 05	Sp08	21	20 (95%)	0	0	0	1 (5%)	95%
Sum 06	Sp09	21	20 (95%)	1	0	0	0	100%
Sum 07	Sp10	18	18 (100%)	0	0	0	0	100%
Sum 08	Sp11	21	19 (90%)	0	0	0	2 (10%)	90%
Sum 09	Sp12	14	14 (100%)	0	0	0	0	100%
Sum 10	Sp12	17	12*	0	5*	0	0	100%
Totals		112	104 (96%)	0	5	0	3 (2.6%)	97%

*5 students in Sum 10 ELM cohort applied to and were accepted into FNP track and will graduate Spring 2013

The School of Nursing has accepted a small number of BSN-prepared nurses into the MSN program over the past few years, with a retention rate of 40% to 100%. With small numbers, when students withdraw for any

reason it impacts the overall retention rate significantly. The 2010 cohort was impacted by three students withdrawing for personal, mostly financial reasons.

Table IV-3. MSN graduation rates

Entering Term	Grad. Term	Total Students Entered	Graduated as Expected	Graduated out of Sequence	Currently Enrolled	Withdrawals: Failures, Dismissals	Withdrawal: Personal	Overall Retention
Fall 06	2008	3	3 (100%)	0	0	0	0	100%
Su/Fa07	2009	5	3 (60%)	1 (20%)	0	1 (20%)	0	90%
Fall 08	2010	2	0	2	0	0	0	100%
Sum 09	2011	0						
Sum 10	2012	5	2 (40%)	0	0	0	3 (60%)	40%
Totals		13	8 (61%)	3 (23%)	0	1	3	85%

NCLEX RN Pass Rates

PLU graduates have a high first-time pass rate on the NCLEX exam. The NCLEX-RN pass rates for all graduates (BSN and Entry Level MSN) has ranged from 92% to 94% for the past 4 years based on annual data from NCSBN. The NCLEX pass rate reports for the past 3 years are in the onsite evidence room (Exhibit IV-A-4).

Table IV-4. NCLEX-RN Pass Rates

	Apr-Mar 2009	Apr-Mar 2010	Apr-Mar 2011	Apr-Mar 2012
Total Number Tested	77	80	73	75
Number passing	72	74	67	70
Percent Passing	94%	93%	92%	92%

Source: NCSBN (Exhibit IV-A-5)

The Washington State Department of Health Nursing Commission publishes first time pass rates based on the calendar year that breaks down whether the examinee was a BSN or second degree (PLU ELMSN) student, as depicted in Table IV-5.

Table IV-5. NCLEX-RN First Times Pass Rates

Test Year	BSN pass rate	ELM pass rate
2007	87/94 = 92.6%	19/19 = 100%
2008	87/90 = 97%	14/14 = 100%
2009	66/73=90%	20/21=95%
2010	75/81 = 93%	14/14 = 100%
2011	63/70 = 90%	15/15 = 100%
2012	80/82 = 97.6%	19/19 = 100%

Source: Washington State Department of Health (Appendix Z)

Advanced Practice Certification Pass Rates

Every FNP graduate for the past 5 years has passed a Family Nurse Practitioner certification exam (Table IV-6). The pass rate for the American Nurse Credentialing Center FNP certification exam from years 2007 to 2010 was 100% (N=26). The first time pass rate for the American Association of Nurse Practitioner certification exam years 2007 to 2012 (N= 43) was 100%, with one student who graduated before 2007 not passing on the first time,

but did pass on a second attempt which is included in the 2008 pass rate data. Data on FNP certification pass rates are available in the onsite resource room (Exhibit IV-A-6).

Table IV-6. Family Nurse Practitioner Certification Pass Rates

Year	Certification Organization	# Students taking Exam	Certification Pass Rate
2007	AANC	11	100%
2008	ANCC	6	100%
2008	AANP	5	100%
2009	AANP	18	100%
2010	ANCC	10	100%
2011	AANP	11	100%
2012	AANP	9	100%

The Washington Administrative Code does not currently recognize Clinical Nurse Specialists (CNS) as an Advanced Practice title. There are ongoing rules making sessions at the Washinton Nursing Commission to develop Advanced Registered Nurse Practitioner status for the CNS. We have had eight graduates take a CNS certification examination in the past five years. All of which have successfully passed a CNS certification exam (Table IV-7).

Table IV-7. CNS Certification Pass Rates

Year	Certification Organization	Specialty	# Students taking Exam	Certification Pass Rate
2008	ANCC	CNS Role* (Perinatal)	1	100%
2009	ANCC	Adult Psychiatric Mental Health	1	100%
2009	ANCC	Adult Health	1	100%
2011	ANCC	Pediatric	1	100%
2011	ANCC	Adult Psychiatric Mental Health	2	100%
2011	ANCC	Adult Health	1	100%
2011	ANCC	Public/Community Health	1	100%

*CNS Role Certification Examination was offered for a very limited time for specialties that did not have a content examination available.

The School of Nursing will become a testing site for the Clinical Nurse Leader certification examination in 2013, as four graduates from Summer 2012 and up to 14 graduates from August 2013 are interested in taking the CNL certification exam.

Graduate Surveys

The PLU Career Connections department conducts an online survey approximately 1 year after graduation which assesses the graduates' experience as a student at PLU as well as their post graduation experience. The survey is not specific to type of MSN graduates, but does track whether the respondent is a BSN or MSN graduate. The survey has a 20.3% (2007/08) to 38.8% (2010/11) BSN graduate participation rate and 18% (May 2010) to 35.7% (May 2007) MSN participation rate. Graduate satisfaction and employment information is gathered during the survey, including whether graduates were employed within three months of graduation, whether they are employed

full-time, annual salary range, and whether they are in graduate school. Survey results indicate that our graduates feel there are well prepared for their post-graduation employment and that 30.0% (08/09) to 52.9% (07/08) of respondents are earning more than \$55,000 per year. Partial survey data is found in Table IV-8, full reports from all years collected are available in the onsite resource room (Exhibit IV-A-7).

Table IV-8. Graduate Survey Data

	Dec 07-Aug 08 grads	Dec 08- Aug 09 grads	Dec 09- Aug 10 grade	Dec 10- Aug 11 grads
Total respondents	20	23	33	38
BSN grad	65%	73.9%	81.8%	73.7%
MSN grad	35%	26.1%	18.2%	26.3%
Employed full time	83.3%	82.6%	75%	67.6%
Employed within 3 months of graduation	Not asked in this survey	Not asked in this survey	Not asked in this survey	62.2%
Salary range > \$55,000	52.9%	30%	31%	41.9%
How well prepared for current position?	Exceptionally well: 38.9% More than adequate: 38.9%	Exceptionally well: 34.8% More than adequate: 47.8%	Exceptionally well: 25% More than adequate: 34.4%	Exceptionally well: 37.8% More than adequate: 37.8%

Employer Surveys

The local health care systems do not track their nurses by where they attended their nursing program, therefore we are unable at this time to conduct employer surveys. The School of Nursing uses various direct and indirect feedback from employers of our graduates to gauge employer satisfaction with our graduates.

The Dean, Dr. Terry Miller serves on the Board of Directors of MultiCare Health System, a not-for-profit health care organization with more than 9,100 employees and a comprehensive network of services throughout Pierce, South King, Thurston and Kitsap counties. His relationship with the board members allows for formal and informal feedback on our PLU nursing graduates. Currently PLU graduates serve in a variety of nursing leadership roles within including: Nurse Manager and Assistant Nurse Manager Medical Surgical and Oncology Nursing Tacoma General, Director, Institutional Leadership and Development, Trauma Coordinator, EMS Coordinator to name a few.

Madigan Army Medical Center (MAMC) hires PLU graduates as civilian nurses and is a close clinical partner with direct communication between the Dean and the Deputy Commanding Officer for Nursing. Dr. Lori Loan a PLU graduate is currently the Chief, for the Center for Nursing Science & Clinical Inquiry at MAMC.

Other informal sources of employer satisfaction include meeting with clinical partners at the monthly clinical placement consortium meeting.

MSN Graduate Publications

All MSN students are required to take NURS 596 Scholarly Inquiry in which students prepare a manuscript for publication. Our graduates have been successful in getting their manuscripts published. Copies of MSN graduate publications are found in the onsite evidence room Exhibit IV-A-8.

IV-B. Aggregate student outcome data are analyzed and compared with expected student outcomes.

Program Response:

The PLU School of Nursing is considered a rigorous nursing program which is reflected in the graduation rates, NCLEX-RN first time pass rates and the advanced practice certification pass rates.

Graduation Rates

The graduation rates for BSN students ranges from 86% to 100%, averaging 93.1% over 5 years. The benchmark retention or graduation rate in the BSN program is 90% and most years our BSN program meets or exceeds the benchmark. The cohort entering Spring 2006 had a lower retention rate due to 12% (N=5) of the cohort withdrawing due to personal reasons, likewise the cohort entering Fall of 08 had 7% (N=3) of the cohort withdrawing due to personal issues. Academic issues affected the retention rate of the Spring 2007, Fall 2008 and Spring 2009 cohorts with 9% (N=4), 7% (N=3) and 9% (N=4) respectively withdrawing due to failure or dismissal from the program.

The graduation rate in the Entry-Level MSN program is 90% to 100%, averaging 97% over 5 years. The benchmark graduation rate in the ELMSN program is 90% and all cohorts have met the benchmark.

The graduation rate in the MSN program is 40% to 100%, averaging 85% over 5 years. The benchmark is 90%. The number of MSN students admitted is small (0 to 5 per year), so when a cohort such as the 2010 cohort has a number of students (3 out of 5 students) withdraw for personal reasons it impacts the overall statistics significantly.

Table IV-9. Graduation rates compared to benchmark.

Program	Average Graduation Rate	Benchmark
BSN	93.1%	90%
ELMSN	97%	90%
MSN	85%	90%

NCLEX-RN First-time Pass Rates

The School of Nursing sets a first-time NCLEX –RN pass rate benchmark of 95%. The first time pass rates range from 92% to 94% per NCSBN. The Washington State Department of Health breaks down the pass rates by program type, with the BSN first time pass rate reported as 90% to 97% and the ELMSN first time pass rate reported as 95% to 100%. Based on these pass rates PLU graduates are close to meeting the benchmark for NCLEX-RN pass rates.

Advanced Practice Certification pass rates

Advanced practice nurses are charged with the public safety and the goal of the PLU FNP program is to have 100% of FNP graduates pass their national certification examination on the first attempt. FNP graduations have pass the national FNP certification exam (AANC or AANP) 100% of the time for the past 5 years.

IV-C. Aggregate student outcome data provide evidence of the program's effectiveness in achieving its mission, goals, and expected outcomes.

Program Response:

It is expected that all BSN and MSN graduates will achieve the program outcomes and be prepared to pass the NCLEX-RN or national FNP certification exam as a measure of the program effectiveness. As discussed in section IV-A, PLU BSN and FNP graduates have high pass rates on the NCLEX-RN and FNP certification exams, indicating the program is effective in meeting the goal of a well-educated graduate. Post-graduation surveys indicate PLU graduates feel well prepared to enter the job market as a new graduate.

IV-D. Aggregate student outcome data are used, as appropriate, to foster ongoing program improvement.
Program Response:

Collected aggregate data collected and used for program improvement include ATI results, Student Satisfaction Surveys, NCLEX-RN and certification examination pass rates, alumni surveys, grading distribution by course, publication rates of graduate students one year after graduation, the CLA (Collegiate Learning Assessment) given to at freshmen entry and senior exit, Senior Exit Interview summaries, and Portfolio grade distributions.

PLU, as a whole, has also been developing more sophisticated, reliable measures of student outcomes, under the leadership of Dr. Karen McConnell, who was appointed Director of Assessment in 2011. A turning point was the hiring of Deirdre McGoldrick as the Systems and Data Analyst, Office of Institutional Research in 2009. Deirdre works with the Academic Deans Council to provide university-wide information such as GPA and grade distribution by division, faculty workload, student retention and graduation reports, as well as data modeling for university planning. Deirdre works with Dean Miller and Associate Dean Woo to provide data specific to School of Nursing, such as calculating how long students take to graduate after taking NURS 220. Deirdre provides longitudinal data on a wide range of topics such as course enrollments, student demographics and involvement, and faculty staffing levels. This year PLU developed and successfully recruited for the new position, Director of University Assessment, Accreditation and Research. Dave Veazey coming on board represents a stronger commitment by PLU to address assessment and accreditation needs at a systems level and in collaboration with the academic unit heads, as well as assist in being more effective and less redundant.

Moving the SoN programs from anecdotal evidence to systematic collection of data using defined measures/tools has been an ongoing effort, beginning in 1998. PLU SoN was one of the very first programs to adopt ATI (Assessment Technologies Incorporated) assessments to get us beyond the self-congratulatory model of success and to have data to use as formative indicators within the curriculum, versus the NCLEX-RN passage rate for first-time test takers.

In spite of the high pass rates on NCLEX, CNS, and FNP certification exams, the PLU Dean and faculty continue to strive for a better prepared graduate. The belief is that these examinations minimally reflect the person's competency and only at professional practice entry. The challenge has been to move faculty from assessing potential to assessing professional and clinical behaviors. We have consistently collected data on student admissions, progression and retention, but we need faculty development to strengthen our assessment of student behaviors in clinical.

From concerns expressed in the Senior Exit Interviews and from student members of the CIE Committee, there are concerns regarding the clinical evaluation process and its utility in determining clinical competence. The CIE is committed to reworking the clinical evaluation tools as a result of feedback from student representatives on the committee, coupled with the Dean's observation that many comments on the clinical evaluation tools are more about a student's potential, versus a student's actual clinical performance. A retrospective evaluation of clinical evaluations is needed to gain more data on the full scope of the how the clinical evaluations are currently used and to gain insight that can be used to revise the clinical evaluation tool.

PLU SoN prides itself it producing graduates who are clinically competent and strive for clinical excellence. To reward students who consistently show excellences in the clinical area, the Ruth F. Carlson Award was endowed in 2000. This significant financial award encourages excellence in clinical nursing. It stems from the Carlson family's firm beliefs that excellence is a key objective of Lutheran higher education, and that excellence, when combined with piety and service, should be publicly recognized. There is one Carlson Award in each BSN graduating class, with the awardee determined by aggregate faculty input from across all the clinical areas. Yet more can be done with aggregate data collection and analyses, versus individual recognition of clinical excellence.

Another significant step was taken in 2001, with nursing faculty adopting the ATI (Assessment Technologies Incorporated) tests. The one test that has been most valuable has been the NCLEX-RN predictor exam results when BSN students are Senior IIs. Students who do not pass the ATI predictor exam meet with their advisor and develop a plan for success on the NCLEX-RN exam. The nursing faculty advisor for a student who achieves less than the benchmark is notified by the Dean to develop an action plan for improving their probability of success on taking the NCLEX-RN for the first time. There have been surprises for both faculty and students. One or two students who are considered strong in the cohort have been identified at risk, in addition to those few who we knew to be at risk. Fortunately, the reaction has been positive and constructive, resulting in the highest pass rate for BSN programs in the State over five years. The Entry-Level MSN students are also tested but have consistently outperformed their BSN colleagues, although this performance gap has lessened significantly over the past couple of years.

The Dean and faculty review ATI subject exam results and NCLEX-RN result content areas to determine if any changes need to be made in the curriculum. In the past when our graduates did not perform well on a subject area the content area was reviewed, brought before the CIE committee for discussion and if necessary changes were made in courses to strengthen that subject area.

The most ambitious step taken to improve outcomes of the program has been full implementation of the professional portfolio requirement for all nursing students. The portfolio is both formative and summative and has revealed the tendency of students to address their development as a one-time completion project, versus an ongoing assessment of one's professional development. The critical reflection required in the portfolio has required students become aware of their need to be more accountable for their own professional growth.

The MSN FNP program has historically been strong which consistently high pass rates on national certification examinations. Regardless, faculty review the national certification pass rate data, including the content area data to determine if areas of the curriculum need to be strengthened or altered.

IV-E. Aggregate faculty outcomes are consistent with and contribute to achievement of the program's mission, goals, and expected student outcomes.

Program Response:

Aggregate faculty outcomes in teaching, scholarship, service, and practice are consistent with and contribute to the missions, goals, and expected student outcomes of the School of Nursing. The PLU SoN scheduling allows for one day a week for full time faculty to practice or pursue scholarship.

Teaching. All faculty teaching courses in the undergraduate and graduate nursing programs possess the appropriate degree and/or certification/expertise to teach an assigned course. Each semester, all course assignments include verification of faculty credentials by SoN administration. All faculty members are evaluated annually on their teaching. Faculty members are expected to have 75% of their students agree or strongly agree with the statement that at instructor is effective. The faculty members are given an opportunity to explain less than acceptable student evaluations on their faculty self-evaluation and discuss the way that this will be addressed in the future. Faculty members are supported to enhance skills through faculty development workshops offered through the Office of the Provost as well as being funded for professional development.

Faculty Credentials. The PLU SoN has an expectation that all faculty are at least prepared at the masters degree level and that all tenure track faculty are doctorally prepared. Additionally, a goal is to have all faculty be clinically current and certified in their clinical area when appropriate. All (100%) of the nursing faculty members are credentialed at a minimum of a master's degree or its equivalent and teach in the area appropriate to their nursing specialty. During the 2012-2013 Academic Year 12 (6 full time and 6 part time) faculty members are doctorally-prepared. Another 8 (3 full time and 5 part time) faculty members are in doctoral programs and one more has been accepted into two doctoral programs and another is in application process. The faculty member overseeing the FNP track holds a doctorate and national certification as an FNP. All faculty members teaching in the graduate program, with the exception of one, who is a PhD Candidate, are doctorally prepared. The Nursing Faculty Profile is found in the Appendix J. The 31 faculty members hold a total of 21 certifications. Eight of these certifications are advanced practice (NP, CNM, & CNS). Six faculty members are ARNPs in the state of Washington.

Scholarship. Tenured and tenure-earning faculty members are expected to engage scholarly activities as a part of their faculty assignment. Clinical faculty members are encouraged to participate in scholarship, but it is not an expectation. Grants are considered scholarship in the PLU system. One partnership between administration and faculty resulted in several grants since 2008 that have totaled 1.8 million dollars to support the Comprehensive Gerontologic Education Partnership (CGEP). The clinical faculty member most active in CGEP, Kathleen Moisio also served on a team of seven individuals to write for a Centers for Medicare and Medicaid Services grant funded under Section 3026 of the Affordable Care Act. A tenure track faculty member secured an Advanced Education Nursing Traineeship (AENT) Program Grant of \$256,000.00 for the 2012-2013 academic year to fund FNP student tuition, with possible renewal for the 2013-2014 academic year of \$318,000 to fund FNP student tuition. Other faculty members have secured small university based technology grants to improve teaching, including a grant to initiate the use of the Typhon NPST student tracking system in the FNP program. One part time faculty member, Dr. Lori Loan, has been the most active in writing grants and doing research. Dr. Loan shares her research opportunities with graduate students, four of whom are currently working with her research team.

In addition to grants, publications and/or peer reviewed presentations are an expectation of tenured and tenure-track faculty. The faculty produced a total of five recent non-peer reviewed journal articles and fifteen peer reviewed journal articles. One faculty member is the lead author of a best-selling text, *Pharmacotherapeutics for Nurse Practitioner Prescribers 3rd Edition* (2011). Another faculty member is section editor for *The Core Curriculum for Professional Development (4th ed)*. In addition to editing and journal publication, our faculty members have authored 36 textbook chapters. PLU SoN faculty are active presenters both nationally and regionally. Since 2008 our faculty has given 51 presentations at national conventions or meeting, both referred and invited. The faculty members are active in the region and have given many times that number of regional and local presentations. This faculty's scholarship is truly exceptional given the high proportion of faculty in doctoral programs that are being mentored by the small number of tenured faculty.

Service. All full time faculty members are expected to serve on a SoN Committee and all do. Part time faculty members also serve if they choose and several do. Tenure/tenure track faculty members must serve on university committees and do. Dr. Patsy Maloney serves on the Educational Policy Committee. Dr. Lorena Guerrero serves on the Human Participants Review Board. Dr. Ruth Schaffler serves on the Global Education Committee. In addition to serving on standing committees, our faculty members are frequently called upon to serve on search committees for other departments with Dr. Patsy Maloney serving on the Movement Studies faculty search committee 2011-2012 and now serving on the Chemistry faculty search committee. Dr. Ruth Schaffler served on the Biology faculty search committee Fall of 2012. Our faculty members have served on Rank and Tenure committee, PLU 2020 Steering Committee, University Long Range Planning Committee, Faculty Excellence Awards Advisory Group, General Education Ad Hoc Steering Group, and one faculty member co-chaired the *PLU 2020 Graduate Study Group*. In addition to service to the School of Nursing and the University, our faculty is actively serving the profession. Two of our faculty are American Nurses Credentialing Center content experts—one for professional development and the other for pediatrics. Another serves on the National Board for Certification of Nurse Practitioners. A faculty member is the pharmacology column editor for *Journal of Pediatric Health Care*. One was a reviewer for *Pediatric Nursing: Scope and Standards of Practice*. Several of our faculty members serve as reviewers for such peer reviewed journals as *MED-SURG Nursing*, *Qualitative Health Research*, *Journal for Specialists in Pediatric Nursing*, *Expert Opinion on Drug Therapy*, *ClinicoEconomics and Outcomes Research* and *International Journal of Nursing Education Scholarship*.

Our faculty excels at community service. PLU SoN is an integral part of our surrounding community and partners with Franciscan Health System and Pierce County Area Agency on Aging, to address care transitions in relation to chronic illness in Pierce County. This partnership blossomed into the Together We Care collaborative that successfully applied for the CMS Community-based Care Transitions Program award and is now called the Pierce County Responsive Care Coordination Program (RCCP). The RCCP provides valuable clinical experiences for our students and also provides a national platform for implementing the program, collecting and examining outcomes/data, and making improvements toward being a potential best practice model. Our faculty has also been active in the Kinship Caregiver Program (KCP). Washington State's Behavioral Risk Factor Surveillance Survey for 2007 indicated that kinship caregivers are a high-risk population in terms of health status. In light of the data, Aging

and Disability Services Administration, HopeSparks, and PLU School of Nursing launched the KCP in 2009, which included 10-20 Community Health students providing home visits, health assessment and teaching, and care coordination to local kinship caregivers each semester. Our faculty serves on advisory boards for Pierce County Family Support Partnership, Nurse Family Partnership, the Puget Sound Asthma Coalition, and the Perinatal Collaborative. The Pierce County EMS Training and Development Committee is chaired by a PLU nursing faculty member.

Practice. Our faculty has over 800 years of practice experience. In addition to teaching, scholarship, and service, this faculty manages to exceed 17,000 hours of practice a year. The faculty members pursue this in their specialty area. For the faculty practice and consultation tables, see Exhibit IV-E-1.

Standard IV-F. Information from formal complaints is used, as appropriate, to foster ongoing program improvement.

Program Response:

Since 2003, one formal complaint has been filed with the University Dispute Resolution Committee regarding the School of Nursing's personnel, policies and/or practices. On February 8, 2010, three ELMSN students, who entered the program in the summer of 2008, demanded a guarantee that all of their cohort, who had been accepted into the ELMSN program could become NPs if desired. Regardless of signing pre-admission contracts that stipulated, acceptance to the Entry-Level MSN Generalist program does not imply progression into a specialization such as FNP, CNS, CNL. They implied that the School had promised this, but no evidence was produced to support their claims of being misled other than 'he said, she said'. The damage to morale and other students was devastating to those involved. Ultimately, the integrity of our faculty to select those qualified and ready to pursue the FNP track was retained. Regardless of the challenges, we are committed to being open to criticism and want our students to be comfortable with filing a grievance without fear of recourse or punishment-it was and continues to be a learning process for faculty and students alike. We recognize that we have the responsibility to be proactive and to minimize the potential for any future misunderstanding or complaints. Fortunately, one of the three students graduated as anticipated, albeit not in the FNP track, and two unfortunately, transferred to another university. Complete records of the grievance and supporting documents are kept secure in the dean's office, as well as the Student Life department. One ELMSN student who was in the same cohort is now one of our faculty members. We have moved forward, shortened the COM program, and developed a more transparent and rigorous process for selection into the FNP track.

Strengths of Program Relative to Standard IV

1. Excellent program outcomes
2. Innovation in all levels of programming
3. Faculty commitment and productivity
4. Movement to a more campus-wide strategic planning process

Areas for Improvement Relative to Standard IV

Tremendous progress has been made to help our faculty buy-in with assessment (i.e., standardized tests and technology software), engaging faculty actively in the assessment process beyond “their” course(s) is still in a transitional stage. We have significantly raised student success rates and are working to create a strong faculty culture in which administration, faculty, staff, students and clinical agency partners collaborate to improve student learning. Whereas we may choose not to tie tenure and retention directly to outcomes, we understand how they are interconnected. More specifically, a culture of success in terms of teaching, scholarship and service does not occur in silos or hierarchically from the top down. Fortunately, our tenure process focuses foremost on teaching ability. The challenge is how to best assess this ability, help faculty to fulfill their full potential as teachers, as well as scholars, clinicians, and/or members of the nursing profession.

1. The SoN may be ahead of the greater university in program assessment, but we are not where we want to be. For those faculty members who are adjunct and not involved daily in institutional activities, full engagement with assessment processes remains challenging.
2. We need more resources to sustain our success and allow for improvement and growth to include a DNP program.

Action Plan Relative to Standard IV:

1. Build a stronger school infrastructure that examines the research, explores the School’s strategic goals and more fully takes part in professional development activities.
2. Develop better strategies for helping non-tenure track faculty’s understanding of the pan-university, the tenure process and their role in supporting one another.
3. Recognize our successes, as much as we critique our need for improvement.

Conclusion:

We are entering a new era as a university, as well as a School of Nursing. The Academic Deans’ Council and the Provost have taken steps to make us more strategic in response to the new President’s assessment and vision. Provost Starkovich offered a summation that incorporated comments from the division and school deans on November 14, 2012. A document, PLU 2020, *Strategic Planning, Strategic Enrollment Management, Program Review and All That!*, was submitted by the Provost one day earlier. This led to the *School of Nursing’s Academic Vision and Strategic Initiatives through 2030* being developed by the Dean and supported by the School’s Executive Council. We must now develop and implement what we have defined as our goals while facing the challenges of a qualified faculty shortage and the related salary issues. We are excited about what lies ahead.