

**Middle Tennessee State University (MTSU) School of Nursing (SON) Systematic Program Evaluation Plan for Calendar Year (CY) 2020**

**CCNE 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.

**Key Element I-A:** The mission, goals, and expected program outcomes are: congruent with those of the parent institution; and reviewed periodically and revised as appropriate.

<i>Criteria</i>	<i>Expected Outcome (benchmark)</i>	<i>Evidence (Assessment Method) and Location of Evidence</i>	<i>Who Analyzes/ Responsible</i>	<i>Frequency/ Time of Assessment</i>
I-A.1 The mission, goals, and expected program outcomes (students, faculty, and others) are congruent with those of the parent institution and are differentiated by level when multiple programs exist. Terminology for outcomes may be expressed in a way that is consistent with the institutional norms. <i>(Director)</i>	The mission, goals, and expected Baccalaureate and Master’s programs’ outcomes are 100% congruent with the institution.	Compare the mission, goals and expected program outcomes with those of the institution.  Location of Evidence: <ul style="list-style-type: none"> <li>- Curriculum Committee minutes</li> <li>- Faculty Organization minutes</li> <li>- SON student handbooks</li> <li>- SON website</li> <li>- MTSU website</li> </ul>	SON Director/ Associate Director (AD)	Annual (Fall semester)
I-A.2 The mission, goals, and expected program outcomes (student, faculty, and others) are reviewed periodically and revised as appropriate.	The Baccalaureate and Master’s program mission, goals, and expected student outcomes are reviewed annually and revised as appropriate.	Annual review of the mission, goals and expected student outcomes  Location of Evidence: <ul style="list-style-type: none"> <li>- University catalog</li> <li>- SON website</li> <li>- Curriculum Committee minutes</li> <li>- Faculty Organization minutes</li> <li>- SON student handbooks</li> <li>- Advisory Board Minutes</li> <li>- Power of Partnership Minutes</li> </ul>	SON Director/ Associate Director (AD)	Annual (Fall semester)
I-A.3 The program’s mission, goals, and expected program outcomes (student, faculty, and others) are written and accessible to current and prospective students, faculty and other constituents.	The Baccalaureate and Master’s programs’ mission statement, goals, and expected program outcomes are written and accessible via written documents and web-based format to current and prospective students, faculty and other constituents.	Review written documents and online sources for evidence of the mission statement, goals and expected program outcomes.  Location of Evidence: <ul style="list-style-type: none"> <li>- SON website</li> <li>- SON student handbooks</li> <li>- University catalog</li> <li>- CGS catalog (graduate)</li> </ul>	SON Director/ Associate Director (AD)	Annual (Fall semester)



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**Key Element I-B:** The mission, goals, and expected program outcomes are consistent with relevant professional nursing standards and guidelines for the preparation of nursing professionals.

<i>Criteria</i>	<i>Expected Outcome (benchmark)</i>	<i>Evidence (Assessment Method) and Location of Evidence</i>	<i>Who Analyzes/ Responsible</i>	<i>Frequency/ Time of Assessment</i>
<p>I-B.1 The mission, goals, and expected program outcomes are consistent with relevant professional nursing standards and guidelines for the preparation of nursing professionals. (<i>Curriculum</i>)</p>	<p>The SON mission, goals, and expected outcomes for their programs are 100% consistent with the identified professional nursing standards and guidelines (PNSGs) it uses.                      The following are the PNSGs used by the SON:</p> <ul style="list-style-type: none"> <li>● AACN Essentials for BSN</li> <li>● AACN Essentials of Master’s Education in Nursing</li> <li>● TN Code Annotated 63-7-123</li> <li>● TN State BON Rules and Regulations</li> <li>● ANA Standards of Clinical Nursing Practice, 2E</li> <li>● NONPF Core Competencies</li> <li>● FNP Population-Focused Competencies</li> <li>● Criteria for Evaluation of NP programs (NTF 2016)</li> </ul>	<p>MTSU website                      SON Website                      BSN and MSN Crosswalks – N-Drive                      PNSG official documents</p>	<p>Curriculum Committee; SON Director, Associate Director, and Coordinators</p>	<p>Every three years – (Last Reported Spring 2020 included revisions made in 2019) - Next due Spring 2023 – Data.</p>



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**Key Element I-C:** The mission, goals, and expected program outcomes reflect the needs and expectations of the community of interest.

<i>Criteria</i>	<i>Expected Outcome (benchmark)</i>	<i>Evidence (Assessment Method) and Location of Evidence</i>	<i>Who Analyzes/ Responsible</i>	<i>Frequency/ Time of Assessment</i>
<p>I-C. The mission, goals, and expected program outcomes reflect the needs and expectations of the community of interest. <i>(Director)</i></p> <p>The community of interest is defined by the nursing unit (Nursing Advisory Board)</p>	<p>The mission, goals and expected student outcomes meet the needs and expectations of the communities of interest.</p>	<p>Review of Nursing advisory Board meeting minutes and Power of Partnership meeting minutes to reflect feedback related to the mission, goals and expected student outcomes.</p> <p>Location of Evidence:</p> <ul style="list-style-type: none"> <li>- Nursing Advisory Board meeting minutes</li> <li>- Power of Partnership meeting minutes</li> </ul>	<p>SON Director</p>	<p>Annual (Spring semester)</p>



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**Key Element I-D:** The nursing unit's expectations for faculty are written and communicated to the faculty and are congruent with institutional expectations.

<i>Criteria</i>	<i>Expected Outcome (benchmark)</i>	<i>Evidence (Assessment Method) and Location of Evidence</i>	<i>Who Analyzes/ Responsible</i>	<i>Frequency/ Time of Assessment</i>
I-D.1 The nursing unit clearly identifies and communicates faculty expectations in the area of teaching, scholarship, service, and practice, or other areas for full-time, part-time, adjunct, tenured, non-tenured or others. <i>(Faculty Services)</i>	<p>The nursing unit clearly identifies faculty expectations, which are communicated to all faculty.</p> <p><b>Teaching:</b> SON Faculty will meet or exceed the average (across all categories) aggregate mean benchmark of 4.0 out of 5.0 for excellence in teaching</p> <p><b>Scholarship:</b> 20% of SON Tenured and/or Tenure-Track Faculty will have demonstrated achievement in research, scholarship, or creative activities.</p> <p><b>Service:</b> 20% of SON Tenured and/or Tenure-Track Faculty will have participated in service to the profession.</p>	<p><b>Teaching:</b> Student evaluation of teaching documents from Campus Labs.</p> <p><b>Scholarship:</b> Annual Report</p> <p><b>Service:</b> Annual Report</p>	PEC/Faculty Services	Information will be collected by PEC, reported on the SPEP and shared with faculty in a faculty organization meeting - Annually in the spring of each year.
I-D.2 The expected faculty outcomes are congruent with the parent institution. <i>(Faculty Services)</i>	<p>Faculty outcomes are congruent with the parent institution.</p> <p>The University mission, vision and values statement align teaching, scholarship and service in order of priority.</p>	University website: <a href="http://www.mtsu.edu">www.mtsu.edu</a>	Faculty Services	Review annually for updates in University policy





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**Key Element I-E:** Faculty and students participate in program governance.

<i>Criteria</i>	<i>Expected Outcome (benchmark)</i>	<i>Evidence (Assessment Method) and Location of Evidence</i>	<i>Who Analyzes/ Responsible</i>	<i>Frequency/ Time of Assessment</i>
I-E.1 Roles of the faculty in the governance of the program, including those involved in distance education, are clearly defined and promote participation. <i>(Director)</i>	Roles of the faculty in governance are clearly defined in the University Faculty Handbook	Review of University Faculty Handbook and University Policy.  Location of Evidence - University Provost website	SON Director	Annual (Spring semester)
	Full-time faculty participate as members of the nursing program standing committees.	Review of minutes to reflect faculty participation on committees.  Location of Evidence - SON Bylaws - SPTRC Committee minutes - Faculty Services Committee minutes - Curriculum Committee minutes - Program Effectiveness Committee minutes - Alumni Committee minutes - Admissions Committee minutes - Search Committee activities - Faculty Organization minutes	SON Director	Annual (Fall semester)
I-E.2 Roles of the students in the governance of the program, including those involved in distance education, are clearly defined and promote participation. <i>(Director)</i>	Roles of the students in governance are clearly defined in the SON Bylaws	Review of the SON Bylaws and Student Handbooks reflect student participation on committees.  Location of Evidence - SON Bylaws - Undergraduate Student Handbook - Graduate Student Handbook	SON Director	Annual (Fall semester)
I-E.3 Nursing faculty are involved in the development, review, and revision of academic program policies. <i>(Director)</i>	100% of full-time faculty are involved in the development, review, and revision of academic program policies. 100% of adjuncts are invited to attend meetings as scheduled and provide input.	Review of SON Bylaws, Committee minutes and Faculty Organization meeting minutes  Location of Evidence: - SON Bylaws - Faculty Organization minutes	SON Director	Annual (Fall semester)



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**Key Element 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 fair and equitable; published and accessible; and reviewed and revised as necessary to foster program improvement.

<i>Criteria</i>	<i>Expected Outcome (benchmark)</i>	<i>Evidence (Assessment Method) and Location of Evidence</i>	<i>Who Analyzes/ Responsible</i>	<i>Frequency/ Time of Assessment</i>
I-F.1 Academic policies of the university and the nursing program are congruent, or differences are justified and support achievement of the program's mission, goals, and expected outcomes. <i>(Director)</i>	100% of academic policies of the university and nursing program are reviewed for congruency, or differences are justified.	Undergraduate Student Handbook Graduate Student Handbook SON website University Catalogs University website	SON Director	Review annually in the spring and edit as needed.
I-F.2 Policies are written and communicated to relevant constituencies. <i>(Director)</i>	Notification of changes in documents and publications are provided to constituents 100% of the time.	Undergraduate Student Handbook Graduate Student Handbook SON website University Catalogs University website	SON Director	Review annually in the spring and edit as needed.
I-F.3 Policies are fair and equitable and implemented consistently. <i>(Director)</i>	100% of policies are fair, equitable, and implemented consistently.	Undergraduate Student Handbook Graduate Student Handbook SON website University Catalogs University website	SON Director	Review annually in the spring and edit as needed
I-F.4 A defined process exists by which policies are regularly reviewed, and revisions are made. <i>(Director)</i>	100% of faculty and student policies are regularly reviewed, and revisions made following a defined process.	Undergraduate Student Handbook Graduate Student Handbook SON website University Catalogs	SON Director	Policies are reviewed annually by each responsible SON committee.



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**Key Element I-G:** The program defines and reviews formal complaints according to established policies

<i>Criteria</i>	<i>Expected Outcome (benchmark)</i>	<i>Evidence (Assessment Method) and Location of Evidence</i>	<i>Who Analyzes/ Responsible</i>	<i>Frequency/ Time of Assessment</i>
I-G.1 The program defines what constitutes a formal complaint and maintains a record of formal complaints received. A formal complaint is an academic grievance defined as any grade appeal or academic concern. The definition of formal complaints and the procedures for filing a complaint are communicated to relevant constituencies. <i>(Director)</i>	The University maintains a defined policy and procedure related to academic grievances for each program.	University website	SON Director	Review annually in the spring.
	100% of students are aware of the formal complaint process and are aware of the policy.	Upper Division Orientation documents New student signature documents	SON Director	Upper Division orientation held twice per year.
	100% of formal complaints result in appropriate faculty or administrative action taken.	Review of complaint file which follows the University Grievance Process	SON Director	Review at least every two years and more often if University policy is changed.



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**Key Element I-H:** Documents and publications are accurate. A process is used to notify constituents about changes in documents and publications.

<i>Criteria</i>	<i>Expected Outcome (benchmark)</i>	<i>Evidence (Assessment Method) and Location of Evidence</i>	<i>Who Analyzes/ Responsible</i>	<i>Frequency/ Time of Assessment</i>
I-H.1 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.	100% of publications, including websites, are accurate, current, and accessible.	Undergraduate Student Handbook Graduate Student Handbook SON website University Catalogs University website	SON Director/Associate Director	Annually in the summer of each year.
I-H.2 A process is used to notify constituents about changes in documents and publications.	A process is in place for notification of changes in documents and publications to constituents.	Review of policy that constituents are notified i.e. emails. Etc. Undergraduate Student Handbook Graduate Student Handbook SON website University Catalogs University website	SON Director/Associate Director	Every two years in the summer.
I-H.3 Information regarding licensure and/or certification examinations for which graduates will be eligible is accurate.	100% of publications indicate the licensure and/or certification exams for which the graduates are eligible.	Review of all publications and website for currency and accuracy	SON Director/Associate Director	Every two years in the summer.
I-H.4 For APRN education programs, transcripts or other official documentation specify the APRN role and population focus of the graduate.	Official documentation (e.g. transcripts, official letters with institutional seal) states the NP role and population-focused area of educational preparation to include Family Nurse Practitioner.  The official transcript is preferred as it is the permanent documentation of the student's coursework from an educational program.  Official Undergraduate Diploma reads "Bachelor of Science in Nursing"  Official Graduate Diploma for Master's program reads "Master of Science in Nursing, Family Nurse Practitioner"  Official Graduate Transcript for Post Master's Certificate reads: Post Master's Certificate, Family Nurse Practitioner	Diploma and Transcript examples from the Registrar's office.	SON Director/Associate Director	Every two years in the summer.





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**CCNE 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 and staff, as resources of the program, enable the achievement of the mission, goals, and expected program outcomes.

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

<i>Criteria</i>	<i>Expected Outcome (benchmark)</i>	<i>Evidence (Assessment Method) and Location of Evidence</i>	<i>Who Analyzes/ Responsible</i>	<i>Frequency/ Time of Assessment</i>
II-A.1 The budget enables achievement of the program's mission, goals, and expected outcomes and supports the development, implementation, and evaluation of the program. <i>(Director)</i>	The fiscal resources are 100% sufficient to enable the program to fulfill the mission, goals, and expected outcomes.	Budget prepared by office of Finance	SON Director	Annually in March
II-A.2 Compensation of nursing unit personnel supports the recruitment and retention of qualified faculty and staff.	The fiscal resources are 100% sufficient to recruit and retain qualified faculty and staff.	Review of resources for recruitment and retention  Human Resources AACN salary data.	SON Director	Every two years in May
II-A.3 A defined process is used for the regular review of the adequacy of the program's fiscal resources, and modifications are made as appropriate.	A process is used for the regular review of the adequacy of department and fiscal resources.	Review of end of year program evaluation reports	SON Director	Every two years in the summer. Report as needed through faculty committees.



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**Key Element II-B:** Physical resources and clinical sites enable the program to fulfill its mission, goals, and expected outcomes. Adequacy of physical resources and clinical sites are reviewed periodically and resources are modified as needed.

<i>Criteria</i>	<i>Expected Outcome (benchmark)</i>	<i>Evidence (Assessment Method) and Location of Evidence</i>	<i>Who Analyzes/ Responsible</i>	<i>Frequency/ Time of Assessment</i>
II-B.1 Physical space and facilities (faculty and staff workspace, classrooms, meeting areas) are sufficient and configured in ways that enable the program to achieve its mission, goals, and expected outcomes. <i>(Director)</i>	The physical resources and facilities are 100% sufficient and configured in ways that enable the program to achieve its mission, goals, and expected outcomes.	Review of the physical space and provide recommendations/revisions to meet the programs' goals.	SON Director	Every two years in the summer.
II-B.2 Equipment and supplies (computing, lab, and teaching/learning materials) are sufficient to achieve the program's mission, goals, and expected outcomes.	Equipment and supplies are 100% sufficient to achieve the program's mission, goals, and expected outcomes.	Review resources related to equipment and supplies to determine sufficiency to meet the program outcomes.	Completed by the Lab coordinator, report to Director and faculty as needed.	Each semester (August and May).
II-B.3 Clinical sites are sufficient, appropriate, and available to achieve the program mission, goals and expected outcomes.	Clinical sites are 100% sufficient to achieve the program's mission, goals, and expected outcomes	Review of clinical sites and student placement in relation to course objectives.  Review Medatrax logs.	Completed by the Clinical Coordinator, report to Director and faculty as needed.	Each semester (August and May).
II-B.4 A defined process is used to determine currency, availability, accessibility, and adequacy of resources (clinical simulation, laboratory, computing, supplies, and clinical sites), and modifications are made as appropriate.	A process is used for the regular review to determine currency, availability, accessibility, and adequacy of resources and to determine modifications if needed.	Review of end of year program evaluation reports	Report to faculty as needed.	Annually in May



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**Key Element II-C:** Academic support services are sufficient to meet the program and student needs and are evaluated on a regular basis.

<i>Criteria</i>	<i>Expected Outcome (benchmark)</i>	<i>Evidence (Assessment Method) and Location of Evidence</i>	<i>Who Analyzes/ Responsible</i>	<i>Frequency/ Time of Assessment</i>
II-C.1 Academic support services (library, technology, distance education support, research support, admission, and advising services) foster achievement of program outcomes. <i>(Director)</i>	Academic support services are 100% adequate for students to meet program requirements and to achieve the program's mission, goals, and expected outcomes.	University website  Library website  SON website  IT website	SON Director	Annually in May
II-C.2 There is a defined process for regular review of academic support services, and improvements are made as appropriate.	There is a defined process for regular review of the adequacy of the program's support services.	Review the process for the evaluation of academic support services to ensure evaluation occurs on a regular basis.	SON Director	Every two years per University schedule



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**Key Element II-D:** The chief nurse administrator of the nursing unit: is a registered nurse (RN); holds a graduate degree in nursing; holds a doctoral degree if the nursing unit offers a graduate program in nursing; is vested with the administrative authority to accomplish the mission, goals, and expected program outcomes; and provides effective leadership to the nursing unit in achieving its mission, goals, and expected program outcomes.

<i>Criteria</i>	<i>Expected Outcome (benchmark)</i>	<i>Evidence (Assessment Method) and Location of Evidence</i>	<i>Who Analyzes/ Responsible</i>	<i>Frequency/ Time of Assessment</i>
II-D.1 The chief nurse administrator is a Registered Nurse who holds a graduate degree in nursing, holds a doctoral degree and is academically and experientially qualified to accomplish the mission, goals and program outcomes. <i>(Director)</i>	The School of Nursing Director meets the criteria 100% of the time.	Director CV is current providing evidence of qualifications  Director CV RN License Official Transcripts	SON Director	Annually in May
II-D.2 The chief nurse administrator is vested with the administrative authority to accomplish the mission, goals, and expected outcomes and is comparable to that of chief administrators of similar units in the institution. <i>(Director)</i>	There is 100% congruence with other Director's authority across the University.	Review job descriptions and administrative authority of Department Director across the University	SON Director	Every two years in the summer.
II-D.3 The chief nurse administrator consults with faculty and other communities of interest to make decisions to accomplish the mission, goals, and outcomes and is an effective leader of the nursing unit. <i>(Director)</i>	The School of Nursing Director with COI and is an effective leader 100% of the time.	Review the process for the Department Director evaluation.	SON Director	Every two years in the summer





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

<i>Criteria</i>	<i>Expected Outcome (benchmark)</i>	<i>Evidence (Assessment Method) and Location of Evidence</i>	<i>Who Analyzes/ Responsible</i>	<i>Frequency/ Time of Assessment</i>
<p>II-E.1 Faculty (full time, part-time, adjunct, other) for each degree program and post-graduate APRN certificate program are sufficient in number and qualifications to accomplish the mission, goals, and expected program outcomes. <i>(Director)</i></p> <p>Faculty workloads are defined, and faculty-to-student ratios provide adequate supervision and evaluation and meet or exceed the requirements of regulatory agencies and professional nursing standards and guidelines. <i>(Director)</i></p>	<p>There are sufficient number of faculty to accomplish the mission, goals and expected program outcomes 100% of the time.</p> <p>The Workload Policy defines faculty workloads.</p> <p>There is one faculty to six student ratios in the FNP clinical courses.</p>	<p>Provide description/formula for calculating FTE's</p> <p>Provide workload formula and policy</p> <p>University Provost website</p> <p>Faculty Qualifications table.</p>	SON Director	
<p>II-E.2 Faculty are academically and experientially prepared for the areas in which they teach. Academic preparation of faculty includes degree specialization, specialty coursework or other preparation address the major concepts included in courses they teach, Faculty teaching in the nursing program have a graduate degree and justification is provided for the use of any faculty who do not have a graduate degree. Faculty teaching in clinical/ practicum courses are experienced in the clinical area of the course and maintain clinical expertise. <i>(Director)</i></p>	<p>100% of faculty are academically and experientially prepared for the areas in which they teach.</p>	<p>Review Faculty Qualifications table</p>	SON Director	Each semester (August and May)



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**Key Element II-F:** Preceptors (e.g., mentors, guides, coaches), if used by the program as an extension of faculty, are academically and experientially qualified for their role.

<i>Criteria</i>	<i>Expected Outcome (benchmark)</i>	<i>Evidence (Assessment Method) and Location of Evidence</i>	<i>Who Analyzes/ Responsible</i>	<i>Frequency/ Time of Assessment</i>
II-F.1 Preceptors have the expertise to support student achievement of expected outcomes, and the program ensures that preceptor performance meets expectations. <i>(Director)</i>	Preceptors are academically and experientially qualified for their role in assisting in the achievement of the mission, goals, and expected student outcomes 100% of the time.	Review of Medatrax or preceptor files for evidence of qualifications: Degree, License, Experience, Orientation and Criteria for Selection	Data collected by BSN Clinical Coordinator and FNP Program Coordinator. Report to faculty as needed.	Every two years
II-F.2 The roles and performance expectations for preceptors with respect to teaching, supervision, and student evaluation are clearly defined and communicated to preceptors, congruent with the mission, goals, and expected student outcomes, congruent with relevant professional nursing standards and guidelines, and reviewed periodically and revised as appropriate. <i>(Director)</i>	100% of BSN and MSN preceptors receive orientation to the preceptor role.	100% of preceptors receive the BSN and or MSN handbooks	Data collected by BSN Clinical Coordinator and FNP Program Coordinator. Report to faculty as needed.	Every two years



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**Key Element II-G:** 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.

<i>Criteria</i>	<i>Expected Outcome (benchmark)</i>	<i>Evidence (Assessment Method) and Location of Evidence</i>	<i>Who Analyzes/ Responsible</i>	<i>Frequency/ Time of Assessment</i>
<p>II-G.1 Institutional support is available to promote faculty outcomes congruent with defined expectations of the faculty role (whether full-time, part-time, adjunct, or other) and in support of the mission, goals, and expected faculty outcomes. Faculty have opportunities for ongoing development in teaching. If scholarship is an expected faculty outcome, the institution provides resources to support faculty scholarship. If service is an expected faculty outcome, expected service is clearly defined and supported. If practice is an expected faculty outcome, opportunities are provided for faculty to maintain practice competence. Institutional support ensures that currency in clinical practice is maintained for faculty roles that require it. <i>(Director)</i></p>	<p>Institutional support is available to faculty in pursuit of professional development activities, faculty support services, and release time if applicable, 100% of the time.</p>	<p>Review the records supporting institutional support of faculty development activities.</p>	<p>Data collected by Director and Faculty Services Committee. Report as needed to Faculty</p>	<p>Every two years in the summer</p>



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**CCNE 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.

**Key Element 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; are congruent with the roles for which the program is preparing its graduates; and consider the needs of the program-identified community of interest.

<i>Criteria</i>	<i>Expected Outcome (benchmark)</i>	<i>Evidence (Assessment Method) and Location of Evidence</i>	<i>Who Analyzes/ Responsible</i>	<i>Frequency/ Time of Assessment</i>
III-A.1 Curricular objectives (course, unit, and/or level objectives or competencies as identified by the program) provide clear statements of expected learning that relate to student outcomes.	There is congruence between the School of Nursing’s (SON) mission, goals, and program outcomes 100% of the time.	Review the mission, goals, program/student learning outcomes to determine congruence. <b>DATA SOURCES:</b> Course syllabi/documents-D2L or N-Drive BSN and MSN Crosswalks-N-Drive Student Handbooks and SON website Curriculum Committee Minutes-N-Drive Faculty Organization Minutes-N-Drive	Curriculum Committee; SON Director, Associate Director, and Coordinators	Annual review of SON mission, vision, and goals (fall faculty organization meetings)
	Course syllabi reflect congruence between the program’s mission, goals, and program outcomes 100% of the time.	Review course syllabi to determine congruence with program outcomes (MSN) and student learning outcomes (BSN). Course syllabi/documents (N-Drive) BSN and MSN Crosswalks (N-Drive) SON website Student Handbooks (online) BSN – Topical Outlines (N-Drive)	Curriculum Committee; SON Director, Associate Director, and Coordinators	Every three years (or sooner if indicated) last assessment fall 2020 – next assessment – fall 2023
III-A.2 Expected outcomes are congruent with the roles for which students are being prepared.	Program outcomes reflect the roles for which students are being prepared 100% of the time.	Provide a description of the roles for which students are being prepared and their relationship to program outcomes. Document signed by students (at orientation [MSN]) – forms on N-Drive in advising files. MTSU/SON website	Curriculum Committee; SON Director, Associate Director, and Coordinators	Every three years – evaluated fall 2020 – next assessment – fall 2023
III-A.3 Expected outcomes consider the needs of the program identified community of interest.	Program outcomes reflect the needs of the community of interest 100% of the time.	Provide a description of the needs identified by the SON community of interest. <ul style="list-style-type: none"> <li>Agenda/Minutes: Advisory Board, Power of Partnership, Exit Surveys, Alumni Surveys, Employer Surveys</li> </ul>	Program Effectiveness Committee Curriculum Committee; SON Director and Associate Director	Every two years – – last assessment spring 2020 next assessment – spring 2022

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**Key Element III-B:** Baccalaureate 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). Baccalaureate program curricula incorporate The Essentials of Baccalaureate Education for Professional Nursing Practice (AACN, 2008).

<i>Criteria</i>	<i>Expected Outcome (benchmark)</i>	<i>Evidence (Assessment Method) and Location of Evidence</i>	<i>Who Analyzes/ Responsible</i>	<i>Frequency/ Time of Assessment</i>
III-B.1 The baccalaureate degree program incorporates professional nursing standards and guidelines (PNSGs) relevant to the program and each track offered.	The BSN degree program curriculum is 100% consistent with <i>The Essentials of Baccalaureate Education for Professional Nursing Practice</i> (AACN, 2008).	BSN Course Crosswalks and <i>The Essentials of Baccalaureate Education for Professional Nursing Practice</i> (AACN, 2008) – located on N-Drive Curriculum Committee Minutes – N-Drive	Curriculum Committee, SON Director and Associate Director	Every three years – last reviewed fall 2017 (see 2017-2018 SPEP) – Next Review, fall 2020
III-B.2 The baccalaureate degree program clearly demonstrates where and how content, knowledge, and skills required by identified sets of standards are incorporated into the curriculum.	The BSN degree program clearly demonstrates where and how content, knowledge, and skills required by identified sets of standards are incorporated into the curriculum 100% of the time.	BSN Topical Outlines – located on N-Drive Course syllabi – D2L and N-Drive Curriculum Committee Minutes – N-Drive	Curriculum Committee, SON Director and Associate Director	Every three years – last reviewed fall 2017 (see 2017-2018 SPEP) – Next Review, fall 2020



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**Key Element III-C:** Master’s 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). Master’s program curricula incorporate professional standards and guidelines as appropriate. a. 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. b. All master’s degree programs that prepare nurse practitioners incorporate Criteria for Evaluation of Nurse Practitioner Programs (NTF, 2016). Graduate-entry master’s program curricula incorporate The Essentials of Baccalaureate Education for Professional Nursing Practice (AACN, 2008) and appropriate graduate program standards and guidelines.

<i>Criteria</i>	<i>Expected Outcome (benchmark)</i>	<i>Evidence (Assessment Method) and Location of Evidence</i>	<i>Who Analyzes/ Responsible</i>	<i>Frequency/ Time of Assessment</i>
III-C.1 The master’s degree program incorporates professional nursing standards and guidelines relevant to the program and each track offered.	The Master’s program is 100% consistent with <i>The Essentials of Master’s Education in Nursing</i> . The master’s degree programs that prepare nurse practitioners incorporate <i>Criteria for Evaluation of Nurse Practitioner Programs</i> (NTF, 2016).	Review MSN Course Crosswalk – located on N Drive.	Curriculum Committee, SON Director and Associate Director	Review every 3 years (sooner if needed). Reviewed Fall 2020 (early). Next review fall 2023 or spring 2024. May complete sooner based on new Essentials.
III-C.2 The master’s degree program clearly demonstrates where and how content, knowledge, and skills required by identified sets of standards are incorporated into the curriculum.	The MSN program(s) clearly demonstrate where and how content, knowledge, and skills required by identified sets of standards are incorporated into the curriculum 100% of the time.	Review the MSN Course Crosswalks – located on N-Drive	Curriculum Committee, SON Director and Associate Director	Review every 3 years (sooner if needed). Last reviewed fall 2020 (early). Next review fall 2023 or spring 2024.
III-C.3 Master’s degree APRN education programs incorporate separate comprehensive graduate-level courses to address the APRN core: Advanced physiology/ pathophysiology, including principles across the lifespan; Advanced health assessment, which includes assessment of all human systems, advanced assessment techniques, concepts and approaches; and Advanced pharmacology, which includes pharmacodynamics, pharmacokinetics and pharmacotherapeutics of all broad categories of agents.	100% of the time, the curriculum plan (both didactic and clinical) is consistent with NONPF NP Core Competencies and Population-Focused Competencies (Currently FNP – Future – PMHNP) as well as AACN Essentials for Master’s Education in Nursing. 100% of the time curriculum plan is consistent with TN BON requirements.	Review the MSN Course Crosswalks – located on N-Drive. Course Syllabi: NURS6101 & 6102; NURS6103; NURS 6104	Curriculum Committee, SON Director and Associate Director	Review every 3 years (sooner if needed) Last reviewed fall 2020 (early) – review every 3 years – next review fall 2023 or spring 2024.
III-C.4 Additional APRN core content specific to the role and population is integrated throughout the other role and population-focused didactic and clinical courses.	100% of time NP curriculum reflects the essential elements of a graduate nursing and advanced practice registered nursing (APRN) core curriculum and is consistent with MSN Program Outcomes, <i>AACN Essentials for Master’s Education in Nursing</i> and the <i>Criteria for Evaluation of Nurse Practitioner Programs</i> .	Review the MSN Course Crosswalks – located on N-Drive Course syllabi	Curriculum Committee, SON Director and Associate Director	Review every 3 years (sooner if needed). Last reviewed Fall 2020 (early) – next review fall 2023 or spring 2024.



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**Key Element III-D:** DNP 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). DNP program curricula incorporate professional standards and guidelines as appropriate. a. 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, 2016). Graduate-entry DNP program curricula incorporate The Essentials of Baccalaureate Education for Professional Nursing Practice (AACN, 2008) and appropriate graduate program standards and guidelines.

<i>Criteria</i>	<i>Expected Outcome (benchmark)</i>	<i>Evidence (Assessment Method) and Location of Evidence</i>	<i>Who Analyzes/ Responsible</i>	<i>Frequency/ Time of Assessment</i>
Not Applicable				



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**Key Element III-E:** Post-graduate APRN certificate program 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). Post-graduate APRN certificate programs that prepare nurse practitioners incorporate Criteria for Evaluation of Nurse Practitioner Programs (NTF, 2016).

<i>Criteria</i>	<i>Expected Outcome (benchmark)</i>	<i>Evidence (Assessment Method) and Location of Evidence</i>	<i>Who Analyzes/ Responsible</i>	<i>Frequency/ Time of Assessment</i>
III-E.1 The post-graduate APRN certificate program incorporates professional nursing standards and guidelines relevant to the program and each track offered.	The post-graduate APRN certificate program is 100% consistent with The Essentials of Master's Education in Nursing.	Review MSN Course Crosswalks – located on N Drive.	Curriculum Committee, SON Director and Associate Director	Review every 3 years (sooner if needed). Reviewed Fall 2020 (early – due to new focus of PMC). Next review due fall 2023 or spring 2024. May complete sooner based on new Essentials.
III-E.2 The post-graduate APRN certificate program clearly demonstrates where and how content, knowledge, and skills required by identified sets of standards are incorporated into the curriculum.	The post-graduate APRN certificate program(s) clearly demonstrate where and how content, knowledge, and skills required by identified sets of standards are incorporated into the curriculum 100% of the time.	Review the MSN Course Crosswalks – located on N-Drive	Curriculum Committee, SON Director and Associate Director	Review every 3 years (sooner if needed). Last reviewed fall 2020 (early– due to new focus of PMC). Next review fall 2023 or spring 2024.
III-E.3 Post-graduate APRN certificate programs incorporate separate comprehensive graduate-level courses to address the APRN core: Advanced physiology/ pathophysiology, including principles across the lifespan; Advanced health assessment, which includes assessment of all human systems, advanced assessment techniques, concepts and approaches; and Advanced pharmacology, which includes pharmacodynamics, pharmacokinetics and pharmacotherapeutics of all broad categories of agents.	100% of the time, the curriculum plan (both didactic and clinical) is consistent with NONPF NP Core Competencies and Population-Focused Competencies (Currently FNP – Future – PMHNP) as well as AACN Essentials for Master's Education in Nursing. 100% of the time curriculum plan is consistent with TN BON requirements.	Review the MSN Course Crosswalks – located on N-Drive. Course Syllabi: NURS6101 & 6102; NURS6103; NURS 6104	Curriculum Committee, SON Director and Associate Director	Review every 3 years (sooner if needed) Last reviewed fall 2020 (early – due to new focus of PMC). – next review fall 2023 or spring 2024.
III-E.4 Additional APRN core content specific to the role and population is integrated throughout the other role and population-focused didactic and clinical courses.	100% of time NP curriculum reflects the essential elements of a graduate nursing and advanced practice registered nursing (APRN) core curriculum and is consistent with MSN Program Outcomes, AACN Essentials for Master's Education in Nursing and the Criteria for Evaluation of Nurse Practitioner Programs.	Review the MSN Course Crosswalks – located on N-Drive Course syllabi	Curriculum Committee, SON Director and Associate Director	Review every 3 years (sooner if needed). Last reviewed Fall 2020 (early – due to new focus of PMC). – next review fall 2023 or spring 2024.



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**Key Element III-F:** The curriculum is logically structured to achieve expected student outcomes. Baccalaureate curricula build on a foundation of the arts, sciences, and humanities. Master’s curricula build on a foundation comparable to baccalaureate-level nursing knowledge. DNP curricula build on a baccalaureate and/or master’s foundation, depending on the level of entry of the student. Post-graduate APRN certificate programs build on graduate-level nursing competencies and knowledge base.

<i>Criteria</i>	<i>Expected Outcome (benchmark)</i>	<i>Evidence (Assessment Method) and Location of Evidence</i>	<i>Who Analyzes/ Responsible</i>	<i>Frequency/ Time of Assessment</i>
III-F.1 The baccalaureate degree program demonstrates that knowledge from courses in the arts, sciences, and humanities is incorporated into nursing practice.	The baccalaureate curriculum builds on a foundation from the arts, sciences, and humanities 100% of the time.	Handbook (required prerequisites and minimum GPA) – online. University Catalog (course descriptions) – online	Curriculum Committee, SON Director and Associate Director	Review every 3 years – Last Reviewed 2017/2018 - (see 2017-2018 SPEP) Next Review Spring 2021
III-F.2 Graduate programs are clearly based on a foundation comparable to a baccalaureate degree in nursing.	The Master’s curricula build on the Baccalaureate generalist knowledge as delineated in The Essentials of Master’s Education for Professional Nursing 100% of the time.	All students admitted to the program must have a BSN degree and current, unencumbered license as a registered nurse – admission guidelines. University Catalog (course descriptions) – online	Curriculum Committee, SON Director and Associate Director	Review every 3 years – Last Reviewed 2017/2018 - (see 2017-2018 SPEP) Next Review Spring 2021
III-F.3 Post-graduate APRN certificate programs build on graduate-level nursing competencies and knowledge base.	The post-graduate APRN certificate programs build on graduate-level nursing competencies and knowledge base 100% of the time.	All students accepted into the post-graduate APRN certificate program must have completed a BSN program before admission and hold an unencumbered RN license. University Catalog (course descriptions) – online	Curriculum Committee, SON Director and Associate Director	Review every 3 years – Last Reviewed 2017/2018 - (see 2017-2018 SPEP) Next Review Spring 2021





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**Key Element III-G:** Teaching-learning practices: support the achievement of expected student outcomes; consider the needs and expectations of the identified community of interest; and expose students to individuals with diverse life experiences, perspectives, and backgrounds.

<i>Criteria</i>	<i>Expected Outcome (benchmark)</i>	<i>Evidence (Assessment Method) and Location of Evidence</i>	<i>Who Analyzes/ Responsible</i>	<i>Frequency/ Time of Assessment</i>
III-G.1 Teaching-learning practices (simulation, lecture, flipped classroom, case studies) and in all environments (virtual, classroom, clinical experiences, distance education, laboratory) support achievement of expected student outcomes identified in course, unit, and/or level objectives.	An average score of 4.0 for SON on question “ <b>Teaching and learning practices and environments support the achievement of expected student outcomes</b> ” From course evaluations – on a scale of 1 – 5 (1 = strongly disagree and 5 = strongly agree).	Student/Faculty Course Evaluations via Campus Labs  Curriculum Committee Minutes	Curriculum Committee, SON Director and Associate Director	Annual Review – Spring Semester – reviewed 2019 data in summer 2020 due to COVID-19 pandemic. Next due spring 2021.
III-G.2 Teaching-learning practices are appropriate to the student population.	Teaching-learning practices are appropriate to the student population 100% of the time.	Student Handbooks Course syllabi (learning activities and course objectives)	Curriculum Committee, SON Director and Associate Director	Review every 2 years Last Reviewed Fall 2020 – Next Review fall 2021
III-G.3 Teaching-learning practices expose students to individuals with diverse life experiences, perspectives, and backgrounds, consider the needs of the program identified communities of interest, and broaden student perspectives.	Teaching-learning practices expose students to individuals with diverse life experiences, perspectives, and backgrounds, consider the needs of the program identified communities of interest and broaden student perspectives 100% of the time.	BSN Topical outlines – N-Drive Clinical site demographics – Medatrax (MSN) Course evaluation data (BSN & MSN) – Campus Labs Clinical Course Assignments – location varies	Curriculum Committee, SON Director and Associate Director	Review every 2 years Last Reviewed Fall 2020 – Next Review fall 2021



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**Key Element III-H:** The curriculum includes planned clinical practice experiences that: enable students to integrate new knowledge and demonstrate attainment of program outcomes; foster interprofessional collaborative practice; and are evaluated by faculty.

<i>Criteria</i>	<i>Expected Outcome (benchmark)</i>	<i>Evidence (Assessment Method) and Location of Evidence</i>	<i>Who Analyzes/ Responsible</i>	<i>Frequency/ Time of Assessment</i>
III-H.1 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, including interprofessional collaboration, in practice settings aligned to the educational preparation.	Clinical practice experiences and activities for each degree program allow students to develop professional competencies, including interprofessional collaboration, that are aligned with the program outcomes 100% of the time.	Clinical Course Syllabi (D2L or N-Drive) or Course Description (University Catalog – online) Student Evaluations of Preceptors/Clinical sites (MSN) – Medatrax Faculty Evaluations of Preceptors/Clinical sites (MSN) – Medatrax Final FNP Clinical Evaluation Tool (FCET) (MSN) – Medatrax/ D2L MSN Crosswalk – N-Drive BSN Clinical Evaluations of – location varies	Curriculum Committee, SON Director and Associate Director	Review every 2 years – Last Reviewed fall 2020 – next review fall 2022.
III.-H.2 Clinical practice experiences are provided to students in all programs including those with distance education offerings and are aligned with student and program outcomes. All clinical experiences are planned, implemented and evaluated to ensure students are competent to function as members of interprofessional teams at the level for which they are being prepared.	Provide examples of direct care clinical practice experiences that advance the knowledge and clinical expertise of students for each degree and/or certificate program.  MSN students rate their preceptor and clinical site on items 1 – 5 at the level of agree or strongly agree 75% of the time upon completion of their evaluation. Item 6 will be reported at the level of “About Right” 75% of the time upon completion of the evaluation. Items 7A and 8A will be reported as yes 75% of the time upon completion of the evaluation. MSN faculty rate preceptors and clinical site on items 1. A – 1.D and 1.F, at the level of agree or strongly agree 75% of the time upon completion of the evaluation. Items 2.A and 3.A will be reported as yes 75% of the time upon completion of the evaluation.	Clinical Course Syllabi – D2L & N-Drive  BSN Clinical Evaluations – location varies  BSN Faculty Site Evaluation - Medatrax  BSN Student Evaluations of Clinical Sites – Medatrax  Student Evaluations of Preceptors/Clinical sites (MSN) – Medatrax  Faculty Evaluations of Preceptors/Clinical sites –(MSN) – Medatrax	Curriculum Committee, SON Director and Associate Director	Review every 2 years – Last Reviewed fall 2020 – next review fall 2022.



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**Key Element III-I:** 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.

<i>Criteria</i>	<i>Expected Outcome (benchmark)</i>	<i>Evidence (Assessment Method) and Location of Evidence</i>	<i>Who Analyzes/ Responsible</i>	<i>Frequency/ Time of Assessment</i>
III-I.1 Evaluation of student performance is consistent with the expected student outcomes.	The grading criteria and measurements of didactic and clinical student performance are clearly defined in each course 100% of the time.	Course syllabi evaluation criteria Curriculum Committee Minutes	Curriculum Committee, SON Director and Associate Director	Review every 2 years. Last Reviewed fall 2020 – next review fall 2022.
III-I.2 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.	A process exists in which grading criteria are communicated to the students 100% of the time.	Course Syllabi – D2L and N-Drive Grading Rubrics – D2L MSN Clinical evaluations – Medatrax/ D2L BSN Clinical evaluations – location varies.	Curriculum Committee, SON Director and Associate Director	Review every 2 years. Last Reviewed fall 2020 – next review fall 2022.
III-I.3 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 performance by qualified faculty applies to all students in all programs and may be accomplished through a variety of mechanisms.	Qualified faculty evaluate student performance in all programs 100% of the time.	MSN Clinical evaluations – Medatrax/ D2L BSN Clinical evaluations – location varies. Course assignments and grades – D2L	Curriculum Committee, SON Director and Associate Director	Review every 2 years. Last Reviewed fall 2020 – next review fall 2022.



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**Key Element III-J:** The curriculum and teaching-learning practices are evaluated at regularly scheduled intervals, and evaluation data are used to foster ongoing improvement.

<i>Criteria</i>	<i>Expected Outcome (benchmark)</i>	<i>Evidence (Assessment Method) and Location of Evidence</i>	<i>Who Analyzes/ Responsible</i>	<i>Frequency/ Time of Assessment</i>
III-J.1 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.	Evaluation of teaching-learning practice assessment data is utilized to inform decisions and facilitate the achievement of student learning outcomes on an annual basis.	Student course evaluations – N-Drive and Campus Labs Exit surveys – N-Drive. Peer evaluations Course Analysis for Ongoing Improvement Forms – N-Drive (can provide examples of changes made to teaching-learning practices as a result of the data analysis) Curriculum Committee Minutes	Curriculum Committee, SON Director and Associate Director	Annual Review – Last Reviewed spring 2020 – next due spring 2021 (to review 2020 data)
III-J.2 The curriculum is regularly evaluated by faculty and revised as appropriate.	Curricular assessment is regularly evaluated by faculty through review of program outcomes and program effectiveness data to foster program improvement and to support revisions as needed.	FNP Exit Exam (2019 – HESI) NCLEX pass rates NP Certification pass rates Exit surveys – Campus Labs Alumni surveys – Campus Labs Employer surveys – Campus Labs Course Analysis for Ongoing Improvement Forms Curricular Review/Survey (every 5 years/sooner if needed) Faculty Organization	Curriculum Committee, SON Director and Associate Director	Annual Review – Last Reviewed spring 2020 – next due spring 2021 (to review 2020 data)





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**CCNE 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.

<i>Criteria</i>	<i>Expected Outcome (benchmark)</i>	<i>Evidence (Assessment Method) and Location of Evidence</i>	<i>Who Analyzes/ Responsible</i>	<i>Frequency/ Time of Assessment</i>
IV-A. A systematic process is used to determine program effectiveness. <i>(Program Effectiveness)</i>	The MTSU school of nursing (SON) will maintain a written and ongoing systematic program evaluation plan (SPEP) that identifies data to be collected, evidence of data collected, location of data that is collected, the frequency of assessment, outcome of data analysis, and plan for improvement.	SPEP document  SON N-Drive	Program Effectiveness Committee (PEC)	Reviewed annually in the Spring semester for the preceding year and revise as needed.
IV-B. Program completion rates demonstrate program effectiveness. <i>(Program Effectiveness)</i>	1. BSN program completion rates for students entering into the upper division of the program at MTSU and graduating within 6 years of the entry point are at a minimum of 70% or higher for the three most recent calendar years.	Calculate program completion rates to determine the set benchmark of 70% completion.  Banner Database IOP Forms	PEC/PEC Chair/SON Director	Data collected annually in the Spring semester for the preceding calendar year.  Reporting of data will be presented to Faculty Org annually in the Spring semester by SON Director/Program Effectiveness Committee Chair
	2. MSN program completion for students entering into their first MSN course, and graduating within 4 years the entry point at MTSU are at a minimum of 70% of higher for the three most recent calendar years.	Calculate program completion rates to determine the set benchmark of 70% completion.  Banner Database IOP Forms	PEC/PEC Chair/SON Director	Data collected annually in the Spring semester for the preceding calendar year.  Reporting of data will be presented to Faculty Org annually in the Spring semester by SON Director/Program Effectiveness Committee Chair
IV-C. Licensure pass rates demonstrate program effectiveness. <i>(Program Effectiveness)</i>	BSN graduates first time attempt NCLEX-RN pass rate is 80% or higher for first-time takers, in the most recent calendar year.	BSN pass rates: TN Board of Nursing quarterly reports.  SON N-Drive	PEC/PEC Chair/SON Director	Data collected annually in the Spring semester for the preceding calendar year by the SON director and disseminated to the faculty.
IV-D. Certification pass rates demonstrate program effectiveness. <i>(Program Effectiveness)</i>	MSN FNP first time attempt Certification pass rates 80% or above.  Post-Master's first-time attempt Certificate certification rates 80% or above	MSN pass rates - provided by AANP and ANCC  SON N Drive/SON	PEC/PEC Chair/SON Director	Data collected annually in the Spring semester for the preceding calendar year by the SON director and disseminated to the faculty

<i>Criteria</i>	<i>Expected Outcome (benchmark)</i>	<i>Evidence (Assessment Method) and Location of Evidence</i>	<i>Who Analyzes/ Responsible</i>	<i>Frequency/ Time of Assessment</i>
IV-E. Employment rates demonstrate program effectiveness. <i>(Program Effectiveness)</i>	Goal (1): Employment rate for the BSN program is 70%.  Goal (2): Employment rate for MSN program is 70%  Goal (3): Explanations for employment rates below 70% are described.	BSN/MSN: Exit Surveys Alumni Surveys	PEC	BSN twice yearly (August and May)  MSN annually (July)
IV-F. Data regarding completion, licensure, certification, and employment rates are used, as appropriate, to foster ongoing program improvement. <i>(Faculty Services)</i>	Program improvement includes certification, licensure, and employment rates. These data are taken into consideration making changes in the program.	SPEP document  Narrative questions on employment survey	PEC/Faculty Services	Annually in May
IV-G. Aggregate faculty outcomes demonstrate program effectiveness. <i>(Faculty Services)</i>	Goal (1): Teaching Benchmark: Aggregate mean of 4.0  Goal (2): 20% of SON Tenured and/or Tenure-Track Faculty will have demonstrated achievement in research, scholarship, or creative activities.  Goal (3): Service Benchmark: 20% of SON Tenured and/or Tenure-Track Faculty will have participated in service to the profession	SON Annual Report  Course/Faculty Evaluations	PEC/Faculty Services	Annually at the conclusion of the spring semester (May)
IV-H. Aggregate faculty outcome data are analyzed and used, as appropriate, to foster ongoing program improvement.	Faculty outcomes including teaching, scholarship and service will be used to foster faculty development and excellence in faculty.	SPEP document  SON Annual Report  Individual Faculty teaching reports	PEC/SON Director	Annually at the close of each academic year
IV-I. Program outcomes demonstrate program effectiveness. <i>(Program Effectiveness)</i>	1. Data collected for MSN Exit survey program Question 23 meets the benchmark of an average response of 4 or >	MSN exit survey question # 23  Campus Labs	PEC	Review survey annually in the Spring semester for the preceding calendar year
	Data collected for BSN exit survey program question 11 meets the benchmark of an average response of 4 or >	BSN exit survey question #11  Campus Labs	PEC	Review survey annually in the Spring semester for the preceding calendar year
	2. BSN graduates first time attempt NCLEX-RN pass rate is 80% or higher for first-time takers, in the most recent calendar year	BSN pass rates: TN Board of Nursing quarterly reports.  SON N-Drive	PEC/SON Director	Data collected annually in the Spring semester for the preceding calendar year and disseminated to faculty by SON Director.

<i>Criteria</i>	<i>Expected Outcome (benchmark)</i>	<i>Evidence (Assessment Method) and Location of Evidence</i>	<i>Who Analyzes/ Responsible</i>	<i>Frequency/ Time of Assessment</i>
	3. MSN FNP first time attempt Certification pass rates 80% or above. Post-Master's first-time attempt Certificate certification rates 80% or above	MSN pass rates - provided by AANP and ANCC. SON N Drive/SON	PEC/SON Director	Data collected annually in the Spring semester for the preceding calendar year and disseminated to faculty by SON Director.
	4. BSN program completion rates for students entering into the upper division of the program at MTSU and graduating within 6 years of the entry point are at a minimum of 70% or higher for the three most recent calendar years.	Calculate program completion rates to determine the set benchmark of 70% completion.  Banner Database IOP Forms	PEC/ SON Director/Program Effectiveness Committee Chair.	Data collected annually in the Spring semester for the preceding calendar year.  Reporting of data will be presented to Faculty Org annually in the Spring semester by SON Director/Program Effectiveness Committee Chair.
	5. MSN program completion for students entering into their first MSN course, and graduating within 4 years the entry point at MTSU are at a minimum of 70% of higher for the three most recent calendar years.	Calculate program completion rates to determine the set benchmark of 70% completion.  Banner Database IOP Forms	PEC/ SON Director/Program Effectiveness Committee Chair.	Data collected annually in the Spring semester for the preceding calendar year.  Reporting of data will be presented to Faculty Org annually in the Spring semester by SON Director/Program Effectiveness Committee Chair
IV-J. Program outcome data are used, as appropriate, to foster ongoing program improvement. <i>(Program Effectiveness)</i>	1. Faculty will submit the Course Analysis Form to the SON director in the Spring every year	Course Analysis Form on SON N Drive	SON Director	Data collected annually in the Spring semester
	2. BSN graduates first time attempt NCLEX-RN pass rate is 80% or higher for first-time takers, in the most recent calendar year	BSN pass rates: TN Board of Nursing quarterly reports.  SON N-Drive	SON Director	Data collected annually in the Spring semester for the preceding calendar year by the SON director and disseminated to the faculty.
	3. MSN FNP first time attempt Certification pass rates 80% or above. Post-Master's first-time attempt Certificate certification rates 80% or above	MSN pass rates - provided by AANP and ANCC. SON N Drive/SON	SON Director	Data collected annually in the Spring semester for the preceding calendar year by the SON director and disseminated to the faculty.
	4. BSN program completion rates for students entering into the upper division of the program at MTSU, and graduating within 6 years of the entry point are at a minimum of 70% or higher for the three most recent calendar years.	Calculate program completion rates to determine the set benchmark of 70% completion. Banner Database IOP Forms	PEC/ SON Director/Program Effectiveness Committee Chair.	Data collected annually in the Spring semester for the preceding calendar year. Reporting of data will be presented to Faculty Org annually in the Spring semester.

<i>Criteria</i>	<i>Expected Outcome (benchmark)</i>	<i>Evidence (Assessment Method) and Location of Evidence</i>	<i>Who Analyzes/ Responsible</i>	<i>Frequency/ Time of Assessment</i>
	5. MSN program completion for students entering into their first MSN course, and graduating within 4 years the entry point at MTSU are at a minimum of 70% of higher for the three most recent calendar years.	Calculate program completion rates to determine the set benchmark of 70% completion.  Banner Database IOP Forms	PEC/ SON Director/Program Effectiveness Committee Chair.	Data collected annually in the Spring semester.  Reporting of data will be presented to Faculty Org annually in the Spring semester