

Program Assessment: *Annual Report*

Program(s): AMSN CNL

Department: Graduate

College/School: School of Nursing

Date: May 1, 2020

Primary Assessment Contact: Bobbi Shatto PhD RN CNL

1. Which program student learning outcomes were assessed in this annual assessment cycle?

Outcome #9: Manage human and fiscal nursing team resources

Outcome #10: Use appropriate teaching/learning principles and strategies as well as current information, materials and technologies to facilitate learning of clients, groups and other health care professionals.

Outcome #11: Provide leadership in the application of the professional code of ethics and professional standards of practice to nursing clinical practice.

Outcome#12: Demonstrate personal and professional responsibility, accountability and self-direction in nursing practice and life-long learning.

2. What data/artifacts of student learning were collected for each assessed outcome? Were Madrid student artifacts included?

Outcome #9:

1. Greater than 90% of AMSN CNL students achieved a satisfactory from the clinical evaluation tools on all categories from 5035, 5010, 5015, 5601, 5602, 5603 5605 and 5604 across all categories.
2. 100% of AMSN CNL students achieved a grade of 85% or better on their final CNL Master's Capstone in 5605 and 5604.
3. Greater than 90% of AMSN CNL students received a "Satisfactory" rating on their preceptor evaluation forms in 5602, 5603, 5604 and 5605.
4. Greater than 90% of students received an 85% or greater on their final Capstone paper in 5605.
5. The mean student score on the HESI exit examination score did not meet the benchmark of 850 for the AACN Leadership and quality patient safety category.
6. EBI item number 57 score was higher than 5.0. Organization and systems leadership to what degree did the MSN program enhanced leadership skills that: Emphasize ethical and decision making. Mean score was 6.30.
7. EBI item number 83 was higher than 5.0. Master's level nursing practice: To what degree did the MSN program enhance your ability to use: Knowledge of illness and disease management to provide evidence-based care? Mean score 6.33.
8. AMSN NCLEX pass rate was 94%.

No Madrid students were reviewed.

Outcome #10:

1. Greater than 90% of AMSN CNL students achieved a satisfactory from the clinical evaluation tools in all categories from 5035, 5010, 5015, 5601, 5602, 5603 5605 and 5604 across all categories.
2. Greater than 90% of AMSN students received an 85% or greater on their 5601 teaching project.
3. The mean student score on the HESI exit examination score did not meet the benchmark of 850 for the AACN Leadership and quality patient safety category.
4. EBI item 58 was higher than 5.0. Master's level nursing practice: organizational Systems Leaderships: To what degree did the MSN program enhance leadership skills that: emphasize critical decision making Mean score 6.36.
5. EBI item 59 was higher than 5.0. Master's level nursing practice: To what degree did the MSN program enhance leadership skills that: Promote effective working relationships? Mean score 6.19.
6. EBI item 63 was higher than 5.0. Master's level nursing practice: To what degree did the MSN program enhance your ability to: Apply performance measures to quality improvement? Mean score 6.01.
7. EBI item number 84 was higher than 5.0. Master's level nursing practice: To what degree did the MSN program enhance your ability to use: Advanced knowledge of environmental and population characteristics to improved health care? Mean score 6.26.
8. EBI item number 85 was higher than 5.0. Master's level nursing practice: To what degree did the MSN program enhance your ability to use: Theories and evidence-based knowledge in lading the healthcare team to deliver appropriate health care? Mean score 6.26.
9. EBI item number 89 was higher than 5.0. Master's level nursing practice: To what degree did the MSN program enhance your ability to use: Assess Health information? Mean score 6.54.
10. No Madrid students were reviewed.

Outcome #11:

1. Greater than 90% of AMSN CNL students achieved a satisfactory from the clinical evaluation tools in all categories from 5035, 5010, 5015, 5601, 5602, 5603 5605 and 5604 across all categories.
2. The mean student score on the HESI exit examination score did not meet the benchmark of 850 for the AACN Leadership and quality patient safety category.
3. EBI item number 62 was higher than 5.0. Master's level nursing practice: To what degree did the MSN program enhance your ability to use: use appropriate tools to measure quality? Mean score 6.00.
4. EBI item number 66 was higher than 5.0. Master's level nursing practice: To what degree did the MSN program enhance your ability to: Apply research outcomes within the practice setting? Mean score 6.04.
5. EBI item number 67 was higher than 5.0. Master's level nursing practice: To what degree did the MSN program enhance your ability to: resolve practice problems? Mean score 6.20.
6. EBI item number 68 was higher than 5.0. Master's level nursing practice: To what degree did the MSN program enhance your ability to: work as a change agent? Mean score 5.94.
7. EBI item number 84 was higher than 5.0. Master's level nursing practice: To what degree did the MSN program enhance your ability to: support fairness in the delivery of care? Mean score 6.26.
8. EBI item number 92 was higher than 5.0. Master's level nursing practice: To what degree did the MSN program enhance your ability to: honor rights of patients to make decisions? Mean score 6.01.
9. EBI item number 93 was higher than 5.0. Master's level nursing practice: To what degree did the MSN program enhance your ability to: incorporate nursing students into practice? Mean score 6.30.

10. EBI item number 94 was higher than 5.0. Master's level nursing practice: To what degree did the MSN program enhance your ability to: enhance ethical decision making framework? Mean score 6.01.

11. No Madrid students were reviewed.

Outcomes#12

1. Greater than 90% of AMSN CNL students achieved a satisfactory from the clinical evaluation tools in all categories from 5035, 5010, 5015, 5601, 5602, 5603, 5604 and 5605 across all categories.
2. The mean student score on the HESI exit examination score did not meet the benchmark of 850 for the AACN Professionalism, Professional Values or Members of the Profession Category.
3. EBI item 65 was higher than 5.0. Master's level nursing practice: To what degree did the MSN program enhance your ability to: apply quality principles within an organization? Mean score 5.99.
4. EBI item 65 was higher than 5.0. Master's level nursing practice: To what degree did the MSN program enhance your ability to: apply quality principles within an organization? Mean score 5.99.
5. EBI item number 67 was higher than 5.0. Master's level nursing practice: To what degree did the MSN program enhance your ability to: resolve practice problems? Mean score 6.20.
6. EBI item number 68 was higher than 5.0. Master's level nursing practice: To what degree did the MSN program enhance your ability to: work as a change agent? Mean score 5.94.
7. EBI item number 73 was higher than 5.0. Master's level nursing practice: To what degree did the MSN program enhance your ability to: use communication technologies to coordinate care? Mean score 6.12.
8. EBI item number 91 was higher than 5.0. Master's level nursing practice: To what degree did the MSN program enhance your ability to: demonstrate accountability for your own actions? Mean score 5.99.
9. EBI item number 93 was higher than 5.0. Master's level nursing practice: To what degree did the MSN program enhance your ability to: incorporate nursing students into practice? Mean score 6.30.
10. EBI item number 94 was higher than 5.0. Master's level nursing practice: To what degree did the MSN program enhance your ability to: enhance ethical decision making framework? Mean score 6.01.
11. EBI item number 99 was higher than 5.0. Master's level nursing practice: To what degree did the MSN program enhance your ability to: use communication technologies to coordinate care? Mean score 6.12.
12. No Madrid students were reviewed.

3. How did you analyze the assessment data? What was the process? Who was involved?

NOTE: If you used rubrics as part of your analysis, please include them in an appendix.

Outcome #9

1. Clinical evaluations 5035, 5010, 5015, 5601, 5602, 5603, 5604 and 5605 are completed by course faculty, analyzed by course and option coordinator.
2. Faculty complete 3 onsite visits per AMSN student for 5602, 5603, 5604 and 5605. 5010, 5015, 5035 and 5601 are faculty lead clinicals and students are evaluated by clinical faculty.
3. To assure the students were making good progress on their capstone projects and assessments in 5604 and 5605, the instructor meets monthly or more frequently if needed, with students.
4. Didactic grades on assessments and assignments were reviewed for 5035, 5010, 5015, 5601, 5602, 5603, 5604 and 5605 by instructor and AMSN CNL program coordinator. Evaluations of all assignments are graded by course faculty; results are analyzed in conjunction with option coordinator and shared with AMSN CNL curriculum team as needed on individual basis and in

AMSN CNL program meetings.

5. HESI Exit Exams component scores are analyzed by course coordinator and program option coordinator. The predictor exam scores are compared with actual NCLEX outcomes.
6. EBI results are reviewed yearly by option coordinator and shared at AMSN program meetings.

Outcome #10:

1. Clinical evaluations 5035, 5010, 5015, 5601, 5602, 5603, 5604 and 5605 are completed by course faculty, analyzed by course and option coordinator.
2. Faculty complete 3 onsite visits per AMSN student for 5602, 5603, 5604 and 5605. 5010, 5015, 5035 and 5601 are faculty lead clinicals.
3. 5601 Teaching Project and Presentations describing a maternity or child health practice, procedure or nursing intervention is graded by faculty and course coordinator. Greater than 90% of students received an 85% on the that project.
4. Evaluations of all assignments are graded by course faculty; results are analyzed in conjunction with option coordinator and shared with AMSN CNL curriculum team as needed on individual basis and in AMSN CNL program meetings.
5. HESI Exit Exams component scores are analyzed by course coordinator and program option coordinator. The predictor exam scores are compared with actual NCLEX outcomes.
6. EBI results are reviewed yearly by option coordinator and shared at AMSN program meetings.

Outcome #11:

1. Clinical evaluations 5035, 5010, 5015, 5601, 5602, 5603, 5604 and 5605 are completed by course faculty, analyzed by course and option coordinator.
2. Faculty complete 3 onsite visits per AMSN student for 5602, 5603, 5604 and 5605. 5010, 5015, 5035 and 5601 are faculty lead clinicals.
3. Evaluations of all assignments are graded by course faculty; results are analyzed in conjunction with option coordinator and shared with AMSN CNL curriculum team as needed on individual basis and in AMSN CNL program meetings.
4. HESI Exit Exams component scores are analyzed by course coordinator and program option coordinator. The predictor exam scores are compared with actual NCLEX outcomes.
5. EBI results are reviewed yearly by option coordinator and shared at AMSN program meetings.

Outcome# 12:

1. Clinical evaluations 5035, 5010, 5015, 5601, 5602, 5603, 5604 and 5605 are completed by course faculty, analyzed by course and option coordinator.
2. Faculty complete 3 onsite visits per AMSN student for 5602, 5603, 5604 and 5605. 5010, 5015, 5035 and 5601 are faculty lead clinicals.
3. Evaluations of all assignments are graded by course faculty; results are analyzed in conjunction with option coordinator and shared with AMSN CNL curriculum team as needed on individual basis and in AMSN CNL program meetings.
4. HESI Exit Exams component scores are analyzed by course coordinator and program option coordinator. The predictor exam scores are compared with actual NCLEX outcomes.
5. EBI results are reviewed yearly by option coordinator and shared at AMSN program meetings.

4. What did you learn from the data? Summarize the major findings of your analysis for each assessed outcome.

NOTE: If necessary, include any tables, charts, or graphs in an appendix.

Outcome #9:

1. One AMSN CNL student was not successful meeting the benchmark of a Satisfactory clinical overall rating in 5602. All other students were above the benchmark resulting in greater than 90% of all students meeting the benchmark.
2. Discussion board rubrics, capstone rubrics and examination results showed students were able to understand concepts relating to managing human and fiscal nursing team resources.
3. The HESI Exit Predictor examination did not match with the actual NCLEX results. The mean HESI score was below the overall 850 benchmark, yet actual NCLEX scores were 94%.
4. EBI results are reviewed yearly by option coordinator and shared at AMSN program meetings.

Outcome #10:

1. The clinical evaluation tools for 5035, 5010, 5015, 5601, 5602, 5306, 5604, and 5605 showed students understood how to use appropriate teaching/learning principles and strategies as well as current information, materials and technologies to facilitate learning of clients, groups and other healthcare professionals.
2. The rubrics for the 5601 teaching project and presentation showed that students understood the how to use appropriate teaching/learning principles and strategies as well as current information, materials and technologies to facilitate learning of clients, groups and other healthcare professionals.
3. The HESI Exit Predictor examination did not match with the actual NCLEX results. The mean HESI score was below the overall 850 benchmark, yet actual NCLEX scores were 94%.
4. EBI results are reviewed yearly by option coordinator and shared at AMSN program meetings.

Outcome #11:

1. The clinical evaluation tools for 5035, 5010, 5015, 5601, 5602, 5306, 5604, and 5605 showed students understood the professional code of ethics and professional standards of practice to nursing clinical practice.
2. The HESI Exit Predictor examination did not match with the actual NCLEX results. The mean HESI score was below the overall 850 benchmark, yet actual NCLEX scores were 94%.
3. EBI results are reviewed yearly by option coordinator and shared at AMSN program meetings.

Outcome #12:

1. The clinical evaluation tools for 5035, 5010, 5015, 5601, 5602, 5306, 5604, and 5605 showed students understood the professional code of ethics and professional standards of practice to nursing clinical practice.
2. The HESI Exit Predictor examination did not match with the actual NCLEX results. The mean HESI score was below the overall 850 benchmark, yet actual NCLEX scores were 94%.
3. EBI results are reviewed yearly by option coordinator and shared at AMSN program meetings.

5. How did your analysis inform meaningful change? How did you *use the analyzed data to make or implement recommendations for change* in pedagogy, curriculum design, or your assessment plan?

Outcome #9

1. The student who fell below the benchmark in 5602 clinical met with instructors and program coordinator. Student curriculum plan was revised. Program evaluation showed that 5602 would be better served as a faculty lead clinical instead of a precepted clinical.
2. After reviewing assignment clinical rubrics and student results, no changes recommended for 5010, 5035, 5015, 5604 or 5605.

3. After reviewing assignment rubrics and student results, 5603 was revised to change clinical and didactic components to 2 clinical hours and 2 theory hours. The course was decreased one credit hour.
4. After reviewing assignment rubrics and student results, all maternity didactic material was moved from 5010 to 5601 and pediatric material in 50110 was expanded.
5. HESI products were reviewed and deemed to not be an effective predictor for NCLEX success.
6. EBI scores needed no intervention.

Outcome #10

1. After reviewing assignment rubrics and student clinical results, no changes recommended for 5010, 5035, 5015, 5604 or 5605.
2. After reviewing assignment rubrics and student results, 5603 was revised to change clinical and didactic components to 2 clinical hours and 2 theory hours. The course was decreased one credit hour.
3. HESI products were reviewed and deemed to not be an effective predictor for NCLEX success.
4. EBI scores needed no intervention.

Outcome #11:

1. After reviewing assignment rubrics and student clinical results, no changes recommended for 5010, 5035, 5015, 5604 or 5605.
2. After reviewing assignment rubrics and student results, 5603 was revised to change clinical and didactic components to 2 clinical hours and 2 theory hours. The course was decreased one credit hour.
3. HESI products were reviewed and deemed to not be an effective predictor for NCLEX success.
4. EBI scores needed no intervention.

Outcome #12:

1. After reviewing assignment rubrics and student clinical results, no changes recommended for 5010, 5035, 5015, 5604 or 5605.
2. After reviewing assignment rubrics and student results, 5603 was revised to change clinical and didactic components to 2 clinical hours and 2 theory hours. The course was decreased one credit hour.
3. HESI products were reviewed and deemed to not be an effective predictor for NCLEX success.
4. EBI scores needed no intervention.

6. Did you follow up (“close the loop”) on past assessment work? If so, what did you learn? *(For example, has that curriculum change you made two years ago manifested in improved student learning today, as evidenced in your recent assessment data and analysis?)*

1. New products were reviewed to replace HESI exit examination and ATI systems were selected to begin May, 2020.
2. An entire curriculum revision was undertaken for the AMSN program. Updated plans are attached.

IMPORTANT: Please submit any revised/updated assessment plans to the University Assessment Coordinator along with this report.