

## Program-Level Assessment: Annual Report

Program: Clinical Nurse Leader

Department: Nursing

Degree or Certificate Level: MSN

College/School: Trudy Busch Valentine School of Nursing

Date (Month/Year): March 2021

Primary Assessment Contact: Joanne Thanavaro

In what year was the data upon which this report is based collected? 2020

In what year was the program's assessment plan most recently reviewed/updated? 2021

### 1. Student Learning Outcomes

Which of the program's student learning outcomes were assessed in this annual assessment cycle?

**Outcome #1:** Implement collaborative strategies to provide ethical, high quality, safe, effective, patient-centered care.

**Outcome #7:** Utilize appropriate information and health care technologies to improve health care outcomes.

### 2. Assessment Methods: Artifacts of Student Learning

Which artifacts of student learning were used to determine if students achieved the outcome(s)? Please identify the course(s) in which these artifacts were collected. Clarify if any such courses were offered a) online, b) at the Madrid campus, or c) at any other off-campus location.

**Outcome #1:** N5110 (Advanced Health Assessment): Clinical; History and Physical Exam (appendix N)

N5140 (Health Promotion): Online; Health Promotion Paper rubric (appendix G)

N5604 (Advanced Clinical Studies): Online; Clinical Progress Log rubric (appendix F) and Clinical; Clinical Evaluation level 4 (appendix D)

N5605 (Practicum in Clinical Leadership): Clinical; Clinical Evaluation level 4 (appendix D)

Skyfactor11 (Interprofessional teamwork): >5.5 on a 7-point scale

**Outcome #7:** N5025 (Informatics and Quality Assessment): Online; Final Quality Assessment Report Presentation (appendix K)

N5605 (Practicum in Clinical Leadership): Clinical; Evaluation of Final Capstone Thesis Paper (appendix L)

N5604 (Advanced Clinical Studies) and 5605 (Practicum in Clinical Leadership): Clinical; Preceptor Feedback Form (appendix D)

Skyfactor9 (Healthcare Technologies): >5.5 on a 7-point scale

No Madrid students in MSN CNL Program

### 3. Assessment Methods: Evaluation Process

What process was used to evaluate the artifacts of student learning, and by whom? Please identify the tools(s) (e.g., a rubric) used in the process and include them in/with this report.

**Outcome #1:** Students were observed in their clinical areas by their preceptors. Each preceptor possessed either an MSN, DNP or a PhD and provided feedback and scored the students abilities to implement collaborative strategies for patient centered care (appendix D). Personal face to face feedback was given to each student by the preceptor after the evaluation was completed. Faculty reviewed and discussed results with each student via student meetings (via Zoom) and assignment rubrics. Faculty were in contact with preceptors via phone and email. Clinical progress logs (appendix F) showed that students were taking applying critical thinking strategies to their clinical experiences. Feedback was given by rubric and faculty meetings via Zoom. Health promotion papers indicated that students understood health behavior theory, cultural implications, and ethical care. Health promotion faculty provided feedback for students with their health promotion papers via a rubric with detailed comments (N5140). Reviewed Skyfactor MSN Exit survey report results Indicator 11 (Interprofessional teamwork)

**Outcome #7:** Students were observed in their clinical areas by their preceptors. Each preceptor possessed either an MSN, DNP or a PhD and provided feedback and scored the students abilities to implement collaborative strategies for utilizing appropriate healthcare technologies to improve health care outcomes. Personal face to face feedback was given to each student by the preceptor after the evaluation was completed. Faculty reviewed and discussed results with each student via student meetings (via Zoom) and assignment rubrics (appendix D). Faculty were in contact with preceptors via phone and email Due to the pandemic, N5025 (Informatics and Quality Assessment) was conducted synchronously via Zoom. In the past, seminars were online forums and taped lectures. The Zoom course allowed for the MSN CNL students to interact with direct entry CNL students creating a rich environment for student interaction. Feedback was given to students for their quality assessment presentation via rubric with detailed comments (appendix K). Feedback for N 5605 final capstone paper and quality improvement project was given by faculty via student meetings and assignment rubric (appendix L). Reviewed Skyfactor MSN Exit survey report results Indicator 9 (Healthcare technologies).

#### 4. Data/Results

What were the results of the assessment of the learning outcome(s)? Please be specific. Does achievement differ by teaching modality (e.g., online vs. face-to-face) or on-ground location (e.g., STL campus, Madrid campus, other off-campus site)?

Outcome #1: N5604 & N5605 (appendix D); N5110 (appendix N); 5140 (appendix G); 5604 (appendix F)  
100% of students achieved a satisfactory clinical evaluation in their clinical courses (N5604, N5605, N5110). 100% of students received a grade of B or better on their History and Physical exam videos in their Health Assessment course (N5110). Greater than 80% of students received a grade of B or better on their health promotion papers (N5140). 90% of students received a grade of B or better on their clinical progress logs. Skyfactor11 (Interprofessional teamwork): Rating 6 on a 7-point scale (benchmark >5.5).

Outcome #7: N5025 (appendix K); N 5604 (appendix D) & N5605 (appendix L)  
100% of students achieved a satisfactory clinical evaluation in their clinical courses (N5604). Greater than 90% of students received a grade of B or better on their final capstone projects (N5605) and greater than 90% of students received a grade of B or better on their quality assessment report presentation (N5025). Zoom classes in N5025 had positive student and faculty feedback regarding the teaching methodology and synchronous seminars. Skyfactor9 (Healthcare Technologies): 5.8 on a 7-point scale (benchmark >5.5).

#### 5. Findings: Interpretations & Conclusions

What have you learned from these results? What does the data tell you?

Outcome #1: Clinical history and physical exam rubric results and clinical evaluations demonstrated that MSN CNL students were meeting the student learning outcomes and implementing collaborative strategies for patient centered care. The evaluations were consistent from one clinical course to another. Clinical progress log rubrics demonstrated

students were applying critical thinking skills to the clinical setting and the health promotion paper rubric illustrated students were able to synthesize concepts acquired during the course. The data indicates that the objective of implementing collaborative strategies to provide ethical, high quality, safe, effective patient centered care was met. Skyfactor results indicate student satisfaction with interprofessional teamwork curricula.

Outcome #7: Clinical evaluations, quality assessment report presentations and the capstone paper rubric results demonstrated that MSN CNL students were able to utilize appropriate healthcare technologies to implement collaborative strategies for patient centered care. Skyfactor results indicate student satisfaction with healthcare technologies curricula.

## 6. Closing the Loop: Dissemination and Use of Current Assessment Findings

- A. When and how did your program faculty share and discuss these results and findings from this cycle of assessment?

### Outcome #1

Results were reviewed by the MSN CNL coordinator and course coordinators and were reviewed at the MSN CNL program meeting and at the ANPPC meeting in March 2021. Strength and weaknesses of assessment tools were discussed.

Outcome #7: Results were reviewed by the MSN CNL coordinator and course coordinators and were reviewed at the MSN CNL program meeting and at the ANPPC meeting in March 2021. Strength and weaknesses of assessment tools were discussed.

- B. How specifically have you decided to use these findings to improve teaching and learning in your program? For example, perhaps you've initiated one or more of the following:

### Changes to the Curriculum or Pedagogies

- Course content
- Teaching techniques
- Improvements in technology
- Prerequisites
- Course sequence
- New courses
- Deletion of courses
- Changes in frequency or scheduling of course offerings

### Changes to the Assessment Plan

- Student learning outcomes
- Artifacts of student learning
- Evaluation process
- Evaluation tools (e.g., rubrics)
- Data collection methods
- Frequency of data collection

Please describe the actions you are taking as a result of these findings.

Due to the pandemic, N5025 (informatics and Quality Improvement) switched to a synchronous Zoom format in order to combine both MSN CNL and Direct Entry MSN CNL students into one classroom. In the past, the Direct Entry MSN CNL students had been taught in a face-to-face format while the MSN CNL students utilized an online format with taped lectures and discussion boards.

If no changes are being made, please explain why.

## 7. Closing the Loop: Review of Previous Assessment Findings and Changes

- A. What is at least one change your program has implemented in recent years as a result of assessment data?

N5025 changed teaching methodologies from an online discussion-based format with taped lectures to a synchronous format via Zoom. The MSN CNL students were also integrated with the direct entry MSN CNL students in the same classroom for these synchronized sessions.

**B. How has this change/have these changes been assessed?**

The change in teaching methodology used in N5025 was evaluated looking at assignment rubrics, student discussions and course evaluations. The MSN CNL coordinator discussed the changes with the course coordinators and students during meetings via Zoom.

**C. What were the findings of the assessment?**

The changes made to the teaching methodology in N5025 course were positive for both students and faculty despite the synchronous format. Both the MSN CNL students and direct entry MSN CNL students reported that they like the interaction between the different levels of students and that it allowed for different viewpoints to be shared.

**D. How do you plan to (continue to) use this information moving forward?**

The decision has been made to keep N5025 taught in synchronous format next academic year and reassess the findings at that time.

**IMPORTANT: Please submit any assessment tools and/or revised/updated assessment plans along with this report.**

Appendix D



MSN CNL PRECEPTOR FEEDBACK
Please use this form to evaluate the student.

NURS 5604 Advanced Clinical Studies
NURS 5605 Practicum in Clinical Leadership Semester:

Student Name: Preceptor/Mentor Name:

Clinical Agency:

Please Rate MSN CNL Clinical Student Behaviors which relate to Student Learning Outcomes (SLO) on the Following Scale:

- E = Excellent
S = Satisfactory
I = Improvement Needed
U = Unsatisfactory
NA = Not Applicable

If an I (Improvement needed) or U (Unsatisfactory) are given, please give an explanation as to why on the comment line.

RESPONSIBILITY/PROFESSIONALISM

- a. Clinical Preparedness
b. Ownership & Completion of Duties and Assignments
c. Is self-directed
d. Demonstrates critical thinking and clinical judgment
e. Punctuality
f. Sociocultural awareness
g. Identifies and analyzes ethical issues
h. Takes ownership of duties as assigned
i. Considers human and fiscal resources when making decisions (SLO 8)

Comment:

CLINICAL COMPETENCE - THEORY

- a. Synthesizes knowledge from nursing theory and relevant research (SLO 2, 6)
b. Examines issues that impact patient safety and quality care (SLO 6)
c. Applies evidence-based nursing care to improve processes of care (SLO 2,4,5)
d. Utilizes Information technology (SLO 7)
e. Synthesizes relevant data to make decisions(SLO 2, 6)
f. Proposes a process improvement plan in microsystem (SLO 5, 6)
g. Strategically/successfully implements proposed plan (SLO 5)
h. Evaluates/disseminates results of improvement plan (SLO 5)
i. Asks Relevant Questions

Comment: \_\_\_\_\_

### **CLINICAL COMPETENCE – LEADERSHIP**

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- a. Understanding of Principle(s) Underlying Skills (SLO 3) \_\_\_\_\_
- b. Application of Principle(s) to Skills (SLO 3) \_\_\_\_\_
- c. Proficiency in Performing Existing Skills (SLO 3) \_\_\_\_\_
- d. Proficiency in Learning New Skills \_\_\_\_\_
- e. Applies leadership skills in collaborative manner (SLO 1, 3,5, 9) \_\_\_\_\_
- f. Participates in lateral integration or coordination of care (SLO 4, 9) \_\_\_\_\_
- g. Promotes safety and quality care outcomes (SLO 1,4,6,7, 9) \_\_\_\_\_
- h. Promotes patient centered care (SLO 1) \_\_\_\_\_
- i. Considers cultural and ethical implications in decision making (SLO 1,3,4) \_\_\_\_\_
- j. Demonstrates professional and effective communication skills \_\_\_\_\_

Comment: \_\_\_\_\_

### **TEAM WORK**

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- a. Functional Interaction with Colleagues (SLO 1,3,5) \_\_\_\_\_
- b. Functional Interaction with Interprofessional team (SLO 1,3,5) \_\_\_\_\_
- c. Advocates for improvements for healthcare improvements and the profession of nursing (SLO 9) \_\_\_\_\_

Comment: \_\_\_\_\_

**Please write any additional comments here:**

Preceptor's Signature \_\_\_\_\_ Date: \_\_\_\_\_

Student's Signature \_\_\_\_\_ Date: \_\_\_\_\_

**Return to Clinical Faculty: Dr. Bobbi Shatto, [bobbi.shatto@slu.edu](mailto:bobbi.shatto@slu.edu)**

## Appendix F

### NURS 5605 Practicum in Clinical Leadership

**Student Name:** \_\_\_\_\_

**Date:** \_\_\_\_\_

Criterion: See syllabus for detailed progress report assignment description	Points Possible	Points Earned
1. Clinical Performance and Goals <ul style="list-style-type: none"> <li>• Summarize clinical experience thus far (hours spent in direct care)</li> <li>• Evaluate your performance for the past 4-5 weeks.</li> <li>• What went well and what would you do differently?</li> <li>• Reflect on the progress you have made toward meeting your goals.</li> <li>• Describe how you will revise your goals for future clinical hours.</li> </ul>	15	
2. Clinical experiences from nursing perspective: <ul style="list-style-type: none"> <li>• Nursing process: Summarize assessment data and list 3 priority nursing diagnoses</li> </ul>	10	
3. State priority nursing diagnosis <ul style="list-style-type: none"> <li>• Correctly stated in NANDA format</li> <li>• Validated and prioritized from written assessment data</li> </ul>	10	
4. List the goal and projected outcome criteria <ul style="list-style-type: none"> <li>• Measureable and specific to patient</li> <li>• Appropriate to diagnosis</li> </ul>	10	
5. Interventions <ul style="list-style-type: none"> <li>• Appropriate to diagnosis</li> <li>• Thorough</li> <li>• Interdisciplinary as appropriate</li> <li>• Incorporates patient teaching</li> <li>• Rationale for each intervention from literature (minimum 2 professional nursing journal sources)</li> <li>• Source for rationale is cited in APA format (include a reference list)</li> <li>• Delegation (CNA, NA, PCT, etc)</li> </ul>	15	
6. Evaluation of Outcomes and Achievement of Goal <ul style="list-style-type: none"> <li>• Documents actual outcomes</li> <li>• Specific to patient</li> <li>• All outcome criteria addressed</li> </ul>	10	
7. Observations from a CNL perspective <ul style="list-style-type: none"> <li>• CNL role exemplar</li> <li>• Discuss the CNL role in practice</li> <li>• Discuss difference between RN and CNL perspective</li> <li>• Process or issue that needed a masters prepared CNL</li> </ul>	15	
8. Observations from an interprofessional (IP) perspective <ul style="list-style-type: none"> <li>• Discuss examples of interprofessional collaboration &amp; your role on the team</li> <li>• Discuss interprofessional collaboration from CNL perspective</li> </ul>	10	
9. Discuss progress on Capstone project	5	
Total points earned: Note: APA format is expected. <b>A 5 point deduction will be enforced if APA format is not utilized.</b>		

## Appendix G

### NURS 5140 – Health Promotion Research Paper Rubric

Paper Component	Possible Points	Student Points
<b>Introduction:</b> Detailed Intro (3 points) Level of Prevention Stated (1 point) Purpose Statement Provided (1 point)	5	
<b>Background Data:</b> Detailed Significance (2.5 points each = 15 points) Epidemiology Incidence Prevalence Risk Factors Cultural Implications Outcomes	15	
<b>Case Finding/Screening:</b> Problem Identification (3 points each = 15 points) Screenings Diagnostics History Physical Other Measures	15	
<b>Interventions:</b> (This section of paper must include ethical implications to care) 3-4 Specific Interventions (10 points) Barriers to Interventions (5 points)	15	
<b>Health Behavior Theory:</b> 1 Health Behavior Theory/Model Discussed (7 points) Evidence-based Research to Support Theory/Model use in practice (3 points)	10	
<b>Conclusion:</b> Concise Closure (10 points)	10	
<b>APA Format:</b> Strictly Followed (10 points)	10	
<b>Writing Style:</b> 10-12 Pages Typed Text (5 points) No Grammar, Spelling, Punctuation Mistakes (2 points) Easy to Read with No Quotes used (3 points)	10	
<b>References:</b> 10-12 Evidence-based Research Articles (8 points) References <5 years old (2 points)	10	
<b>TOTAL POINTS</b>	100	



## Appendix K

<b>Final QI Report Presentation</b> <b>Project Components</b> <b>Note:</b> <i>For the Presentation, highlight differences and lessons learned</i>	<b>Points Possible</b>
<b>Revised KDD</b> Illustrates meaningful updates based on learning and analysis from previous cycle, which are individualized from team experience.	10
<b>Revised FMEA</b> Illustrates meaningful updates based on learning (Failures and successes) and analysis from previous cycle.	5
<b>Pareto Diagram –</b> Have initial failures reported in high level categories and displayed in a pareto chart.	10
<b>Root Cause Analysis –</b> Completes a thorough 5-why or cause and effect diagram to support possible root cause to challenges to overcome improvement (should get to a cause that you can influence)	10
<b>Revised Change Concepts</b> Enhanced interventions or updated categories based on learning (changes should be highlighted)	5
<b>Data Collection revised (run chart or control chart) Process &amp; Outcome measures</b> All data represented in a run chart with annotations. Analysis of run chart rules should be included	15
<b>Applying Deming's System of Profound Knowledge</b> Discuss the four areas of profound knowledge and how they impact your project and generalize it to future QI work	10
<b>Lessons Learned from PDSA cycles</b> Chose most significant tests and reflect on take away learning. Describe the impact on making a prediction to your intervention.	10
<b>Application to bedside</b> Discuss how you might you interact with co-workers in regards to the QI process (model of improvement) in order to gain support on improvement work you will do when you are working at the bedside?	15
<b>Presentation Quality</b> Presentation was clear, concise, well organized and easy to follow. Demonstrated time management and preparation for presentation, appropriate attire was worn for presenting.	10
<b>Total</b>	<b>100</b>

## Appendix L

<b>NURS 5605: Evaluation of Final Capstone Thesis Paper</b>		
<b>Project Title:</b>		
<b>Student Name:</b>		
Criterion	Points Possible	Points Earned
<b>Abstract</b> <ul style="list-style-type: none"> <li>• Pertinent information presented in appropriate depth</li> <li>• Guidelines followed</li> </ul>	<b>10</b>	
<b>Revisions from 5604 first draft and 5605 second draft</b> <ul style="list-style-type: none"> <li>• Revisions of chapter ONE (unit overview, human and fiscal team resources, clinical problem, unit assessment)</li> <li>• Revisions of chapter TWO (Literature review/use of research and EBP)</li> <li>• Revisions of chapter THREE (Project prospectus, timeline)</li> <li>• Revisions of chapter FOUR (Evaluation Plan)</li> </ul>	<b>5</b> <b>5</b> <b>5</b> <b>5</b>	
<b>Chapter FIVE</b>		
<b>Summary of Implementation</b> <ul style="list-style-type: none"> <li>• Summary of actual project implementation</li> <li>• Use of appropriate information and health care technology</li> <li>• Identification of those involved in implementation</li> <li>• Discussion of required human or fiscal resources</li> <li>• Identification of challenges or challenges needed from original plan</li> </ul>	<b>10</b>	
<b>Outcomes</b> <ul style="list-style-type: none"> <li>• Presentation of outcome data and description of findings</li> <li>• Description of feedback on project</li> </ul>	<b>15</b>	
<b>Evaluation</b> <ul style="list-style-type: none"> <li>• Summary evaluation of how goals or objectives were met</li> <li>• Factors that did or could have increased success</li> <li>• Conclusions and recommendations for future projects</li> </ul>	<b>10</b>	
<b>Sustainability</b> <ul style="list-style-type: none"> <li>• Discuss sustainability issues</li> <li>• Recommendations</li> </ul>	<b>10</b>	
<b>CNL role</b> <ul style="list-style-type: none"> <li>• Preparation for project</li> <li>• CNL role components identified</li> <li>• Impact on CNL role development</li> <li>• Recommendations</li> </ul>	<b>10</b>	
<b>Conclusions</b>		
	<b>5</b>	
<b>Format</b> <ul style="list-style-type: none"> <li>• Typed and formatted according to APA (6<sup>th</sup> ed.) format</li> <li>• Readability and organization</li> <li>• Spelling and grammar</li> <li>• Concise (&lt;25 pages of text)</li> </ul>	<b>10</b>	
<b>Comments:</b> <b>Total</b>	<b>100</b>	

Appendix N

**NURS 5110**  
**Complete History & Physical Exam**  
**Grading Rubric**

<b>Complete History Component</b>	<b>Possible Points</b>	<b>Earned points</b>
Chief Complaint	2.5	
Hx Present Illness	5	
Past Medical Hx	10	
Family Hx Genogram	5 2.5	
Personal/ Social Hx	5	
Review of Systems	10	
Cultural Hx	5	
Functional Hx	5	
VS and Constitutional	2.5	
Skin, Hair, Nails	5	
Head, Face, Neck	5	
Eye, Ear, Nose, Throat Mouth	5	
Lymph, Breast, Axilla	5	
Chest, Lungs	5	
Cardiovascular	5	
Gastrointestinal, Genitourinary	5	
Musculoskeletal	5	
Neurological	5	
Psychological, Mental	2.5	

Comments: