



## Continuous Improvement Progress Report (CIPR) Template

### *Standards for Accreditation of Baccalaureate and Graduate Nursing Programs*

Official Name of Institution: University of Kentucky, College of Nursing



## Checklist for Writing the CIPR

- the font size must be a minimum of 10;
- the Program Response must be single spaced;
- the document must be no longer than 50 pages (the appendices are excluded from the page limit);
- the institution must provide a Program Response for each key element/elaboration statement;
- the Program Response to each key element/elaboration statement must adequately address all nursing degree programs and/or post-graduate APRN certificate programs that were directed to submit the CIPR; and
- the standard, key element, and elaboration statements provided in the CIPR template must not be altered or deleted by the institution.

## Continued Compliance with CCNE Standards & Key Elements

### Introduction

In one page or less, summarize under “Program Response” major events that have occurred at the institutional and/or program level since the most recent CCNE on-site evaluation. Include a description of changes at the parent institution if they have had a significant impact on the program.

### Program Response:

#### University of Kentucky

On July 1, 2011, Dr. Eli Capilouto became the 12th president of University of Kentucky (UK). Dr. Capilouto has led the process to enrich UK’s academic experience by investing in priorities that maintain affordability and access; support the institution’s talented faculty and staff; and revitalize the living, learning and research facilities across campus. UK is undergoing a significant physical transformation of its academic, research, residential, health care and community spaces. Through partnership, increased philanthropy and effective financial management, UK is self-financing the vast majority of its more than \$2 billion infrastructure development. Under Dr. Capilouto’s leadership, the \$3.7 billion flagship and land grant research university has gained significant momentum in fulfilling its multi-faceted mission of teaching, research, service and health care. UK developed a new strategic plan with input from the entire campus for the years 2015-2020.

In the fall semester of 2017 30,473 students were enrolled at UK. The student body is diverse, representing 110 countries, every state in the nation, and every county in Kentucky. The average ACT score for first-year students is four points above the national average. In 2017, there were 4,636 baccalaureate and 2,042 graduate degrees conferred.

#### Academic Medical Center and UK HealthCare

UK HealthCare (UKHC) which is made up of A.B. Chandler Hospital, Kentucky Children’s Hospital, UK Good Samaritan Hospital, Eastern State Hospital and multiple ambulatory clinics is the umbrella organization for the UK Medical Center (UKMC). UKMC also includes the Colleges of Nursing, Medicine, Dentistry, Health Sciences, Pharmacy and Public Health.

#### College of Nursing

In 2014, Janie Heath PhD, APRN-BC, FAAN, FNAP, FAANP was appointed dean and began her tenure in August of that year. She is actively engaged with UKHC, the UK Center for Interprofessional Health Education (CIHE) and numerous partners in the Commonwealth and beyond to assure that the CON meets the needs of those it serves. In Dean Heath’s first three years the CON has developed a new strategic plan in conjunction with the new UK strategic plan as well as reviewing and revising the mission, vision and values statements. She has also reorganized the CON administrative academic structure by adding developmental leadership roles, secured funding to expand and renovate research space, increased undergraduate and graduate enrollment, academic clinical partnerships, faculty practice agreements and program outreach initiatives.

Prior to Dean Heath’s arrival, Dr. Patricia Howard served as the CON interim dean and established the UKCON and Norton Health Care (NHC) academic clinical partnership in spring of 2014 to advance education for NHC BSN prepared nurses to earn their DNP degree and be eligible for primary care or acute care nurse practitioner board certification. The first cohort of 20 nurses graduated December 2016.

The phase out of MSN education was completed when the last student graduated in 2013. Currently, faculty are actively seeking approval to reopen MSN programs of study as 100% online tracks with the first focus area for nursing leadership/management roles.

In fall of 2015, the RN to BSN track was converted to 100% online education and another academic clinical partnership was established with Select Medical to educate their registered nurses.

In fall of 2015, the CON advanced faculty practice further with increased providers at UKHC and in the community including the opening of the first NP managed clinic in Wilmore, Kentucky.

In fall of 2016, the CON research enterprise ranked among the top 10 in NIH nursing research among the public universities.

The CON continues to have a well-established and self-sustaining continuing education program which was granted accreditation with distinction the highest recognition awarded by the ANCC, in 2015.

#### **Accreditation**

The last Commission for Collegiate Nursing Education (CCNE) accreditation of the BSN, MSN and NP Programs was in 2012. This self-study is the five year Continuous Improvement Progress Report (CIPR) required by CCNE for the BSN and DNP Programs. At the time of the last accreditation, CCNE did not offer accreditation of certificate programs (scheduled for accreditation review at the next CCNE Site visit in 2022); however our programs utilize the same classes as in the DNP program which were reviewed by CCNE at the time.

UK is accredited by the Southern Association of Schools and Colleges Commission on Colleges (SACSCOC). Its accreditation has been re-affirmed at 10 year intervals since 1915, most recently in 2013. The next UK SACSCOC accreditation visit occurs in 2023.

#### **Self-Study**

As determined by the CON Deans Council, this CIPR Report was developed by members of the 2016-2017 faculty of the CON. It includes the undergraduate BSN and DNP programs.

## Assessment by Standard

Following each key element statement, please provide evidence demonstrating continued **compliance**. Additionally, summarize any pertinent changes or program improvement initiatives that have occurred since the last comprehensive on-site evaluation by CCNE. **Before completing this template, refer to CCNE's FAQs and Guidelines for Preparing the Continuous Improvement Progress Report.**

Were you requested to address any specific areas of focus/concern (e.g., a compliance concern at the key element level) according to the most recent CCNE accreditation action letter? If so, please note the specific areas of focus/concern here by indicating which key element(s) this translates to in the 2013 CCNE *Standards*:

[Please contact CCNE if you need a copy of the most recent accreditation action letter. Refer to the reminder email to access the Crosswalk Table showing the relationship between the former (2009) CCNE *Standards* and the current (2013) CCNE *Standards*.]

A response must be provided for each standard and key element below. Give special attention to any specific areas of focus/concern that were identified previously in the CCNE accreditation action letter.

## 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.

#### I-A. The mission, goals, and expected program outcomes are:

- congruent with those of the parent institution; and
- consistent with relevant professional nursing standards and guidelines for the preparation of nursing professionals.

*Elaboration: The program's mission statement, goals, and expected program outcomes are written and accessible to current and prospective students, faculty, and other constituents. Program outcomes include student outcomes, faculty outcomes, and other outcomes identified by the program. A mission statement may relate to all nursing programs offered by the nursing unit or specific programs may have separate mission statements. Program goals are clearly differentiated by level when multiple degree/certificate programs exist. Student outcomes may be expressed as competencies, objectives, benchmarks, or other terminology congruent with institutional and program norms.*

*The program identifies the professional nursing standards and guidelines it uses. CCNE requires, as appropriate, the following professional nursing standards and guidelines:*

- *The Essentials of Baccalaureate Education for Professional Nursing Practice [American Association of Colleges of Nursing (AACN), 2008];*
- *The Essentials of Master's Education in Nursing (AACN, 2011);*
- *The Essentials of Doctoral Education for Advanced Nursing Practice (AACN, 2006); and*
- *Criteria for Evaluation of Nurse Practitioner Programs [National Task Force on Quality Nurse Practitioner Education (NTF), 2012].*

*A program may select additional standards and guidelines.*

*A program preparing students for certification incorporates professional standards and guidelines appropriate to the role/area of education.*

*An APRN education program (degree or certificate) prepares students for one of the four APRN roles and in at least one population focus, in accordance with the Consensus Model for APRN Regulation: Licensure, Accreditation, Certification and Education (July 2008).*

#### Program Response:

##### **The BSN and DNP programs remain in compliance with this Key Element**

UK celebrated the 150<sup>th</sup> anniversary in 2015 and continues its mission as a public land-grant university dedicated to improving people's lives through excellence in education, research and creative work, service and health care. As Kentucky's flagship institution, the university plays a critical leadership role by promoting diversity, inclusion, economic development and human well-being. The CON mission is to promote health and well-being through excellence in nursing education, research, practice and service while fostering diversity and inclusion and applies to all endeavors including all academic programs. Revisions to the CON mission in 2015 reflect the UK strategic plan as well as the overall mission of UK and assure that the CON mission is congruent with the UK mission ( <http://www.uky.edu/sotu/2015-2020-strategic-plan> ). The CON mission is amplified by a vision and values statements. The vision of the CON is to be one of the nation's top nursing programs in education, research, practice and service. With unanimous approval, all faculty, staff and students will join the CON efforts to "walk the talk" of our values to promote healthy working and learning environments ( <http://www.uky.edu/nursing/about-us/welcome-college-nursing/mission-and-vision> )

The mission and expected student learning outcomes of the programs are related to the mission and goals of UK and the CON. Development of student outcomes has been guided by the mission and goals of UK and the CON, as well as nationally recognized competencies. The goals and expected student outcomes are published annually in the CON's Student Handbooks and are available on the CON website (<http://www.uky.edu/nursing/academic-programs-ce/academic-resources/student-handbooks> ).

The professional standards, guidelines, and competencies that guide the educational programs of the CON were chosen because they reflect the best and most contemporary thinking and represent the views of an increasingly diverse practice discipline and public; these are listed in Appendix IA-3 Standards, Guidelines, and Competencies.

**I-B. The mission, goals, and expected student outcomes are reviewed periodically and revised, as appropriate, to reflect:**

- professional nursing standards and guidelines; and
- the needs and expectations of the community of interest.

*Elaboration: There is a defined process for periodic review and revision of program mission, goals, and expected student outcomes. The review process has been implemented and resultant action reflects professional nursing standards and guidelines. The community of interest is defined by the nursing unit. The needs and expectations of the community of interest are reflected in the mission, goals, and expected student outcomes. Input from the community of interest is used to foster program improvement.*

#### **Program Response:**

**The BSN and DNP programs remain in compliance with this Key Element.**

The mission, goals and expected student outcomes of the CON are periodically reviewed according to the timeline outlined in the CON Systematic Evaluation Plan (SEP)

(<http://www.uky.edu/nursing/sites/www.uky.edu.nursing/files/CON%20Systematic%20process%20for%20program%20effectiveness%20%28approved%2C%20final%207-7-17.pdf> ) The SEP was developed as an assessment guide for administrators, program directors, course coordinators and faculty as they periodically conduct formative and summative systematic program evaluations. The plan was designed in a format that would assure compliance with CCNE standards, Kentucky Board of Nursing Requirements, and the Strategic Plan goals. It also identifies who is responsible, where the data can be found and the timeline for evaluation. The CON mission, goals, and expected student outcomes are reviewed as each new UK strategic plan is proposed and at other times as needed to improve educational preparation for graduates. For example, reviews were implemented when professional nursing standards changed so that the AACN revised Essentials were incorporated into the curricula. Also, the mission, goals, and expected student outcomes are reviewed when there is a major change in UK requirements, such as the recent UK Core (General Education) changes. In August of 2015 the mission, vision, and values were reviewed at CON faculty and staff retreat. Suggested revisions were then taken to students, Dean's Council Advisory Board, other members of the community of interest and were approved.

#### **Community of Interest**

The CON has defined its community of interest as –both internal and external entities which directly or indirectly affect or relate to the CON. Internal entities include students, faculty, and staff of the CON as well as UK and UKHC. External entities include prospective students, alumni, benefactors, supporters, preceptors, consumers, partners (including health professions organizations, institutions of higher education, employers of graduates, health providers, and policy bodies that foster health and well-being), and governing bodies. In the summer of 2015 employer focus groups were held to get input regarding strengths and areas where improvement is needed from employers of the BSN and DNP programs. The Dean's Advisory Board also meets twice a year to provide input regarding the CON programs and graduates (APPENDIX IB-2 Minutes). An undergraduate student is a member of the CON Alumni Association Board (CONAA) to share needs of students that could be addressed by the CONAA board.

The program committees for the BSN, and DNP programs respectively are responsible for the periodic review of specific program goals and expected outcomes. In 2015 the DNP Option Coordinators led the efforts to review all courses and to make revisions to assure that the curriculum was meeting the requirements of the DNP Essentials, core competencies and specialty competencies.

Faculty, professional staff, and student representatives review and revise expected student outcomes as part of BSN program committee meetings. As part of the overall UK assessment program, all student learning outcomes are assessed over a three year period and submitted to the UK Assessment Office. (Appendix IB-2 and 3 Sample Annual Assessment Report and Plans). Assessment plans for the BSN and DNP programs were revised extensively in the summer of 2015 and implemented in academic year 2015-2016.

The current CON strategic plan was developed in response to UK's 2015-2020 strategic plan. Five groups were formed with administrative, faculty, staff and student representation to develop the tactics for meeting the UK goals on a CON level. ([https://issuu.com/derrick70/docs/strategic\\_plan\\_booklet\\_with\\_wl\\_goal](https://issuu.com/derrick70/docs/strategic_plan_booklet_with_wl_goal) ).

In the summer of 2014 an external review of the CON was conducted to provide a "state of the CON" document for the arrival of a new dean. The UK Office of Institutional Effectiveness had oversight of this project. Representation on the committee was made up of persons across campus from both healthcare and non-healthcare colleges as well as a nursing program director at another school in KY and the site team leader for the CCNE site visit at the CON in 2012. (Appendix IB-4 External Review Report)

**I-C. Expected faculty outcomes are clearly identified by the nursing unit, are written and communicated to the faculty, and are congruent with institutional expectations.**

*Elaboration: The nursing unit identifies expectations for faculty, whether in teaching, scholarship, service, practice, or other areas. Expected faculty outcomes are congruent with those of the parent institution.*

#### **Program Response:**

**The BSN and DNP programs remain in compliance with this Key Element.**

Faculty members are defined in the UK Administrative Regulations according to title series of appointment. Expected faculty outcomes within these definitions are consistent with the expectations of UK. Faculty members' expectations regarding teaching, scholarship, service, or practice vary according to their title series. The CON follows the administrative rules and uses the following title series: Lecturer/Senior Lecturer (non-tenure; faculty outcomes primarily focused on meeting UK goals and student outcomes related to teaching), Clinical Title Series (non-tenure; faculty outcomes primarily focused on meeting UK goals related to practice and student outcomes related to teaching), Research Title Series (non-tenure; faculty outcomes primarily focused on meeting UK goals related to scholarship), Special Title Series (tenure; faculty outcomes primarily focused on meeting UK goals related to practice, scholarship, and service, and student outcomes related to teaching), and Regular Title Series (tenure; faculty outcomes primarily focused on meeting UK goals related to teaching, scholarship, and service, and student outcomes related to teaching) (CON Faculty Workload <http://www.uky.edu/nursing/sites/www.uky.edu.nursing/files/UK%20CON%20FacultyWorkloadGuideline%20DOE%20FINAL%20Feb%203%202016.pdf> and CON Faculty Evaluation and Workload <http://www.uky.edu/nursing/sites/www.uky.edu.nursing/files/Fac-Eval-Workload.pdf> ).

The University Faculty Senate is currently charged to review all title series, in particular, the charge is to condense the title series to "tenure-track" eligible and "non-tenure track" eligible using criteria/defining the process based on Boyer's Model for Scholarship. Two CON faculty members serve on the task force and one is the Chair.

Currently the CON criteria for appointment, promotion, and tenure remains in alignment for respective title series that are congruent with UK's and are provided in the UK Faculty Handbook ( <http://www.uky.edu/Provost/APFA/Handbook/PartI.php> ). New faculty members participate in both UK and CON new faculty orientation throughout their first year to ensure that faculty member outcomes are congruent with the mission, goals, and expected outcomes. Non-tenured faculty members are reviewed annually and tenured faculty and senior lecturers bi-annually with "mini-reviews for progress on goals" on alternating years, by their reporting supervisor. The review includes a requirement by faculty members to provide evidence that they are meeting the expectations of their respective roles in the CON. Tenure track faculty undergo a two and four year review that includes feedback from tenured faculty.

Annually, faculty members negotiate their Distribution of Effort (DOE) in the areas of teaching, scholarship, service, and practice, as appropriate to their title series. The DOE process is university-driven, and the CON DOE process was revised in fall 2016 to ensure its major purpose accurately reflects the time faculty members spend meeting the mission and goals of the UK and the CON (CON Faculty Workload <http://www.uky.edu/nursing/sites/www.uky.edu.nursing/files/UK%20CON%20FacultyWorkloadGuideline%20DOE%20FINAL%20Feb%203%202016.pdf> and CON Faculty Evaluation and Workload <http://www.uky.edu/nursing/sites/www.uky.edu.nursing/files/Fac-Eval-Workload.pdf> ). The CON workload assignment for courses and student advising recognizes the time involved in supporting students to achieve the expected student learning and program outcomes. Periodic review and revision of academic programs, research, and practice goals with expected student outcomes is the responsibility of each program-specific committee, and is guided by the CON Strategic Plan ([https://issuu.com/derrick70/docs/strategic\\_plan\\_booklet\\_with\\_wl\\_goal](https://issuu.com/derrick70/docs/strategic_plan_booklet_with_wl_goal) ).

#### I-D. Faculty and students participate in program governance.

*Elaboration: Roles of the faculty and students in the governance of the program, including those involved in distance education, are clearly defined and promote participation. Nursing faculty are involved in the development, review, and revision of academic program policies.*

##### Program Response:

##### **The BSN and DNP programs remain in compliance with this Key Element.**

The CON faculty and students participate in the mission and governance of the CON and UK in a manner that serves to maintain and improve the program quality of the CON. The CON has structured activities which provide dialogue that leads to continuous evaluation and revision of the nursing programs. Open forums have been successful in providing faculty, staff, and student input into structural, programmatic, and informatics needs within the college. For example, opportunities for input was given to faculty, staff, and students during the development of the 2015-2020 CON strategic plan ([https://issuu.com/derrick70/docs/strategic\\_plan\\_booklet\\_with\\_wl\\_goal](https://issuu.com/derrick70/docs/strategic_plan_booklet_with_wl_goal) ).

The UK Senate, as the UK-wide faculty organization, is authorized to issue rules implementing the responsibilities delegated to it and authorized by the Governing Regulations. The faculty, administrators, and students of the CON participate in the governance of UK, UKMC/UKHC, and CON in accordance with Kentucky state law and the UK Governing Regulations. UK Senate Rules provide for the election of three faculty members from the CON to the UK Senate. In addition, each of the CON's faculty senators serve on a standing Senate Committee.

In addition to informing faculty about Senate activities, faculty senators receive from other CON faculty by faculty organizational meetings, open forum or via emails as a more timely way to both disseminate information to faculty and receive input from faculty on matters for the Senate. Faculty also may participate in UK governance through appointment or election to UK Administrative Committees, other Senate Committees, and Senate Advisory Committees. Currently, faculty serve on many UK, UKHC and CON committees ([http://www.uky.edu/nursing/sites/www.uky.edu.nursing/files/2017-2018%20CON%20Faculty%20Committees-FINAL-\\_2.pdf](http://www.uky.edu/nursing/sites/www.uky.edu.nursing/files/2017-2018%20CON%20Faculty%20Committees-FINAL-_2.pdf) ).

The dean meets with the UK president and provost, along with the other deans, at least quarterly. The provost meeting with all deans is twice a month. The purpose of these meetings is general communication regarding the academic aspects at UK. Since 1984, the dean has participated in UK governance as an ex-officio member of the UK Senate. (Dean's CV <http://www.uky.edu/nursing/sites/www.uky.edu.nursing/files/CV-JHeath-09-01-17.pdf> ) The associate deans also serve various roles in University Governance. For example, the associate dean of research is a member of the UK Research Management Group with the VP of Research which meets monthly; the associate dean for undergraduate faculty affairs is a member of the UK Center for Interprofessional Health Education Committee; senior associate dean is a member of the university faculty senate task force for title series policy changes; and the executive associate dean provides oversight for the UKCON NHC site.

Students of the CON have the same opportunities to participate in the governance of UK as do students in other units of the university. The primary vehicle for student participation is through each College's Student

Government Associations such as the Undergraduate Nursing Academic Advisory Council and Graduate Nursing Academic Advisory Council. Each year one student is elected from and by the CON's student body to the Student Government Association and by virtue of this position is also the student representative from the CON to the UK Senate.

Faculty members participate in the governance of the CON as provided for by the Faculty Bylaws (<http://www.uky.edu/nursing/sites/www.uky.edu.nursing/files/College%20of%20NSG-BYLAWS-Signed-final-3.29.17.pdf>) and the Administrative Organization of the CON (<http://www.uky.edu/nursing/sites/www.uky.edu.nursing/files/CON%20Org%20Chart%20-%2010%3A11%3A2017.pdf>). Of the 64 full-time faculty, 47% participated on CON committees in 2016-2017 (<http://www.uky.edu/nursing/sites/www.uky.edu.nursing/files/2017-2018%20%20CON%20Faculty%20Committees-FINAL- 2.pdf>).

The committees constituted by the Faculty Bylaws ensure faculty responsibility for curricular matters as well as admission, progression and graduation of students. The committees constituted by the Administrative Organization provide for faculty input into administrative decision-making in the areas of faculty appointment, promotion and tenure, college development, continuing education, and student activities. The faculty as a whole meets at least three times each semester to act on matters affecting the education, service, practice, and research programs. Faculty Organization meetings are chaired by the chair of the CON Faculty Council. Key members of Dean Heath's administrative leadership team are the associate deans and the chair of faculty council. In addition, the Dean conducts monthly open sessions to discuss various CON initiatives or challenges (in the spring it is Two Tuesdays with the Dean and in the fall it is Two Thursdays with the Dean). This academic year has focused on several areas related to the CON Cost Value Savings Plan evaluating funding allocation for travel, mix of tenure track and non-tenure track future hires, and 10 month or 12 month appointments for future faculty hires.

Students have an opportunity to participate in the governance of the CON as outlined in the CON Administrative Organization and Faculty Bylaws (<http://www.uky.edu/nursing/sites/www.uky.edu.nursing/files/College%20of%20NSG-BYLAWS-Signed-final-3.29.17.pdf>). Undergraduate and Graduate Student Activities and Advisory Committees are elected by their respective student bodies and provide formal feedback to administrators as well as faculty. The Graduate Student Advisory Committee also solicits students to serve on the DNP and PhD Program Committees. The undergraduate student representatives to faculty committees are selected in a similar manner. Students also participate in scheduled course meetings throughout the academic year. Student representatives are elected by their classmates to be their representatives at course meetings. The representatives serve as a mechanism to communicate student concerns to faculty, and faculty responses to the students. In addition, the Dean invites randomized students to quarterly "Teas with the Dean". This academic year has been focused on the student experience at UK, diversity and inclusivity and wellness and belonging.

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

*Elaboration: 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. Information regarding licensure and/or certification examinations for which graduates will be eligible is accurate. For APRN education programs, transcripts or other official documentation specify the APRN role and population focus of the graduate.<sup>1, 2</sup>*

*If a program chooses to publicly disclose its CCNE accreditation status, the program uses either of the following statements:*

*“The (baccalaureate degree in nursing/master’s degree in nursing/Doctor of Nursing Practice and/or post-graduate APRN certificate) at (institution) is accredited by the Commission on Collegiate Nursing Education, One Dupont Circle, NW, Suite 530, Washington, DC 20036, 202-887-6791.”*

*“The (baccalaureate degree in nursing/master’s degree in nursing/Doctor of Nursing Practice and/or post-graduate APRN certificate) at (institution) is accredited by the Commission on Collegiate Nursing Education (<http://www.aacn.nche.edu/ccne-accreditation>).”*

**Program Response:**

**The BSN and DNP programs remain in compliance with this Key Element.**

The CON’s website, student handbooks, recruitment materials, and general descriptive documents are updated annually and as needed during the school year. Each year, assistant deans/program directors and the Student Services staff for the undergraduate and graduate programs review and update the Undergraduate and Graduate Student Handbooks (<http://www.uky.edu/nursing/academic-programs-ce/academic-resources/student-handbooks> ). The Communication Coordinator makes corresponding changes to the CON’s website (<http://www.uky.edu/nursing/about-us/welcome-college-nursing> ). Announcements regarding new/changed information and policies are communicated to students via their required university email and informational forums designed to receive and give information from/to students regarding updates and programmatic and policy changes. The web page is regularly updated to reflect CON programmatic and policy changes.

The BSN and DNP program curriculum plans, outcome objectives, admission requirements, and degree requirements are found on the CON’s website (<http://www.uky.edu/nursing/about-us/welcome-college-nursing>). The graduate student handbook as well as the website has information about the BSN-DNP track, MSN-DNP track, Post-APRN Graduate Certificate program and the certifications for which our graduate students are eligible following completion of specific programs.

The academic calendar and tuition fees are found on UK’s website under the Registrar’s Office link ([www.uky.edu/Registrar/](http://www.uky.edu/Registrar/)). Transfer of both undergraduate and graduate credits is clearly outlined by the UK and the CON. This information is available on both the CON (<http://www.uky.edu/nursing/>) and the UK Registrar’s websites. Evaluation criteria and grading policies are published in the syllabus for each course and determined by the faculty teaching the course. Currently, CANVAS is the program utilized by UK for support of academics.

**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.

*Elaboration: Academic policies include, but are not limited to, those related to student recruitment, admission, retention, and progression. Policies are written and communicated to relevant constituencies. Policies are implemented consistently. Differences between the nursing program policies and those of the parent institution are identified and support achievement of the program’s mission, goals, and expected student outcomes. A defined process exists by which policies are regularly reviewed. Policy review occurs and revisions are made as needed.*

**Program Response:**

**The BSN and DNP programs remain in compliance with this Key Element.**

Continuously reviewed and updated, the CON Bylaws (<http://www.uky.edu/nursing/sites/www.uky.edu.nursing/files/College%20of%20NSG-BYLAWS-Signed-final-3.29.17.pdf>) and CON policies are available on the CON website (<http://www.uky.edu/nursing/about-us/our-faculty/facultystaff-governance-resources>) and are congruent with UK policies. CON faculty are involved in the development, review, revision, and approval of academic program policies. Differences between the nursing

program policies and those of the parent institution are in support of achievement of the program's mission, goals, and expected outcomes. The CON uses the UK policies as a framework for developing specific CON policies; however, standards can be greater than the policies of the parent institution. Policies for the undergraduate students can be found in the Undergraduate Student Handbook, and policies for the graduate students can be found in the Graduate Student Handbook (see Program Handbooks <http://www.uky.edu/nursing/academic-programs-ce/academic-resources/student-handbooks>.) Policies are written and communicated to relevant constituencies via the website, email and in class announcements. Policies are implemented consistently by faculty and administrators in the CON. Policy review occurs and revisions are made as needed and on an annual basis. Student rights and responsibilities are published in the UK Student Rights and Responsibilities Handbook <http://www.uky.edu/studentconduct/code-student-conduct> on the UK website.

#### **SUMMARY OF STANDARD I STRENGTHS:**

- The CON has explicit strength with its congruence with the UK mission, vision and strategic initiatives
- The CON has a strong academic environment where interdisciplinary initiatives, growth of programs and scholarship/research are supported
- The CON has strong student and faculty governance with standing committees that provide an ongoing, structured format for monitoring program outcomes and making recommendations regarding the program revisions

#### **QUALITY ENHANCEMENT EFFORTS:**

- Evaluating the impact of the Open Forums with the Dean with faculty, staff and students
- Evaluating the impact of changes with admission of BSN students, curricular changes with DNP and MSN online
- Evaluating the impact of the University's restructure of the Provost Office related to academic student success, enrollment management, and student services
- Monitoring the impact of the University's charge to redefine appropriate title series and scholarship criteria

## 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, as a resource of the program, enable the achievement of the mission, goals, and expected program outcomes.

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

*Elaboration: The budget enables achievement of the program's mission, goals, and expected outcomes. The budget also supports the development, implementation, and evaluation of the program. Compensation of nursing unit personnel supports recruitment and retention of qualified faculty and staff. Physical space is sufficient and configured in ways that enable the program to achieve its mission, goals, and expected outcomes. Equipment and supplies (e.g., computing, laboratory, and teaching-learning) are sufficient to achieve the program's mission, goals, and expected outcomes.*

*A defined process is used for regular review of the adequacy of the program's fiscal and physical resources. Review of fiscal and physical resources occurs and improvements are made as appropriate.*

#### Program Response:

**The BSN and DNP programs remain in compliance with this Key Element.**

The CON's fiscal resources come from several sources with the majority (67.39%) in 2016-2017 from the general fund of UK, as shown in Table IIA-1. Although fiscal and physical resources at the University of Kentucky are sufficient to support the CON, the continued decline in state support is not a sustainable model and has required the University to implement different funding strategies. In FY08, the University's operating budget totaled \$2,072,187,800 about 58 percent of the recommended FY17 budget. The change in the University's operating budget over the last nine years reflect significant efforts to support increased patient care delivery services, increase extramurally funded research grants and contracts, and shift in funding from the state to UK students.

A balanced -consolidated budget is established prior to the beginning of each fiscal year and amended during the year as plans change and unanticipated events occur. The University's consolidated budget is primarily comprised of four types of current funds: General, Auxiliary, Restricted and Fund Balance. The first three types are recurring funds that are generally received or earned every year such as state appropriations and tuition and fees revenue.

Support from the UK general fund is appropriated annually by the provost based on the dean's budget request. The second largest component is from grants and contracts awarded to faculty of the CON for research, training, and capital improvement efforts. The use of these resources is restricted to fulfilling the purpose for which they were awarded. Support from UKHC represent the third largest source of funding. These funds are used to cover the cost of CON faculty and staff who provide the services. This source represent support as the result of commitments to the CON from UKHC, which supports a variety of initiatives such as the Post-Baccalaureate Residency Program (jointly operated with UKHC), and several individuals who hold faculty appointments for programmatic needs, participate in the college's educational activities, and engage in practice roles in UKHC.

Beginning 2014-15 the College entered into a partnership/collaboration with Norton Healthcare to provide DNP education to their BSN prepared nurses in Louisville. Through this initiative, our general fund budget has grown due to the generation of addition tuition through the increase of students. For the 2017-2018 the budget for the Norton Partnership is \$709,724.

In January 2016, the CON began an academic partnership with Select Medical Corporation to provide RN-BSN on line classes for up to 50 Select employed associate degree staff nurses per semester. To date, the Select students are non- residents. The College has not had a budget allocation for this initiative.

The UK College of Nursing Phyllis D. Corbitt Community Health Center in Wilmore began seeing patients on September 14, 2015. The clinic was named for Dr. Corbitt, a family physician, who had practiced in Wilmore for over 40 years. A College of Nursing senior faculty member serves as the clinic director. The clinic is licensed as a limited services clinic and treats patients with common illnesses such as upper respiratory infections, allergy symptoms, sore throats and skin infections. In addition, immunizations, patient education and counseling, school and sports physicals, Department of Transportation physicals as well as pre-employment health screenings are provided. To date over 2007 patient encounters have occurred with 3951 billed encounters. The goal is to reach 3360 patient encounters to cover clinic costs and to be self-supporting. The clinic offers an opportunity for primary care NP faculty to practice and also provides a clinical site for primary care nurse practitioner students. Six faculty are currently credentialed as clinic providers through the UKHC Medical Staff Affairs Office. In 2016-2017, the clinic served as a clinical site for BSN and DNP NP students to earn over 900 clinical hours.

Gifts and interest generated by endowments (market value of \$5,552,568) are used primarily to support student scholarships. In addition, two endowed chairs and five endowed professorships are supported by donors. Another source of revenue is the continuing education program operated by the CON. The program, which is fiscally self-sustaining and nationally accredited, provides an important service to the Commonwealth and beyond.

Each spring the UK general fund and UKHC budget requests are developed by the dean and the CON administrative staff officer and presented to the provost and the executive vice president for UKHC. The budget process includes justification for current funding as well as requests for new initiatives, including one-time expenses such as building renovations and major equipment purchases. If the CON has general funds remaining at the end of the fiscal year, a request is submitted to the provost to carry forward a portion of the funds into the next fiscal year, a process which supports the CON's need to fund one-time initiatives.

**Table IIA-1: CON Fiscal Resources**

College of Nursing Revenues	2008-2009	2016-2017	2017-2018
<b>State Support:</b>			
General Fund	\$8,368,400.00	\$11,720,117.00	\$12,312,752.00
Summer School Tuition Allocation		\$466,000.00	\$466,000.00
Grants & Contracts	\$2,493,259.00	\$2,977,159.00	\$4,211,812.00
VP Research	\$152,000.00	\$639,110.00	\$488,796.00
<b>Clinical Resources:</b>			
Faculty Practice	\$697,421.00	\$325,200.00	\$263,500.00
Enterprise Transfers	\$800,000.00	\$1,303,600.00	\$1,354,600.00
<b>Continuing Education &amp; Gifts</b>			
	\$422,184.00	\$652,406.00	\$615,200.00
	<b>\$12,933,264.00</b>	<b>\$18,083,589.00</b>	<b>\$19,722,660.00</b>
<b>Endowment Market Value</b>		\$5,552,568.00	\$5,848,310.00

When the budget process is complete, the provost submits a consolidated (colleges and other UK units) budget proposal to the president of UK, who submits the entire budget to the Board of Trustees. Once approved by the Board of Trustees, the budget is sent to the Kentucky Council for Post-secondary Education (KCPE). The Council is responsible for submitting the proposal for all postsecondary programs to the Governor. The Kentucky Legislature determines state appropriations during their annual session. Faculty provide input to the budget process through a variety of mechanisms, including the Faculty Council, the associate dean to whom they

report for needs specific to their programmatic responsibilities and activities, and faculty forums which are organized by the dean's office to address specific budget issues.

The CON benchmarks faculty salaries using data from the AACN for Schools of Nursing in Academic Health Science Centers. Table IIA-2 shows mean salaries for full-time CON Faculty by rank and whether they hold an academic year appointment (10 months) or a calendar year appointment (12 months). Also displayed in Table IIA-2 are national data on the mean salaries for academic year appointment or a calendar year appointment. A review of the data in the table shows that for most categories salaries in the CON are higher than the mean salaries reported by AACN. The exceptions are for the academic year salary and calendar year salary at the instructor level for those with a doctorate and for the academic year salary at the assistant professor level for those without a doctorate. This may be reflective of salary compression as several have been at UK for a long time. All base salaries of CON faculty are reviewed annually and adjusted as state funding supports with the exception of high merit and promotions. After adjustments in 2016-2017, 18% of the CON faculty salary adjustments have been made to bring salaries to meet the 60% percentile of AACN benchmark.

**Table IIA-2 CON Mean Salaries for Faculty 2016-2017**

	Instructor/Lecturer		Assistant Professor		Associate Professor		Professor	
	Academic	Calendar	Academic	Calendar	Academic	Calendar	Academic	Calendar
UK	(Doc)- \$69,895 (Non-Doc)- \$77,849	(Doc)- \$71,079 (Non-Doc)- \$81,494	(Doc)- \$87,952 (Non-Doc)- \$67,422	(Doc)- \$100,860 (Non-Doc)- \$107,711	N/A	\$116,451	N/A	\$147,872
AACN	(Doc)- \$71,088 (Non-Doc)- \$63,619	(Doc)- \$86,885 (Non-Doc)- \$76,800	(Doc)- \$80,000 (Non-Doc)- \$69,521	(Doc)- \$96,570 (Non-Doc)- \$84,119	\$95,882	\$112,884	\$125,595	\$140,733

### Physical Resources

The CON is one of nineteen colleges located in Lexington, Kentucky and is located at the south end of the UK campus. Clustered among six health profession colleges (medicine, pharmacy, public health, dentistry and health sciences) and connected by walk-ways and ped-ways for full UK HealthCare clinical services. With over 10,000 employees, UK HealthCare includes the UK Albert B. Chandler Hospital, Good Samaritan Hospital, Eastern State Hospital, a Level 1 Trauma Center, a Level IV Neonatal Intensive Care Unit, and Markey Cancer Center.

Built in the early seventies, the CON building has six floors and has 124,712 gross square feet of space - net square feet of 71,805. Of this space the college occupies approximately 35,216 square feet. This is office space - administrative and faculty/staff, undergraduate and graduate study space, research team space, and Simulation/Lab teaching space. The other space in the building consists of centrally managed classrooms, one of which is a 144 seat computer testing facility, and three classrooms that are Distance Learning capable and/or tele conference capable.

Physical resources include space assigned to the CON within the CON building as well as access to centrally managed classrooms and lecture halls, technology and other equipment. Each classroom is equipped with audiovisual equipment and computers for internet access. Additionally, there are centrally supported eight classrooms at the University that are Distance Learning capable and located on campus. Several of the Colleges have their own rooms that are DL capable that can be scheduled and the CON, in addition to the three centrally managed, two conference rooms that can be utilized for small group DL courses and/or meetings. UK Facilities manages improvements to the classrooms and most major renovations are done on rotating basis. The College of Nursing has one more mid-size lecture hall that will be renovated the summer 2018.

Considerable strategic investments have been made by the CON and the University for refurbishing and renovations over the past 15 years. Faculty offices have been renovated, which includes painting and new ergonomically designed furniture. The public areas of the CON have all been painted and floor tile has been replaced as needed. Other investments include: replacing all stair treads and signage in the stairwells, relocating two research teams off campus, updating the Hall of Fame area; replacing tile floors and lights on the first floor and completing a major renovation for the Office of Nursing Research (4165 square feet on the

5<sup>th</sup> floor). This area now has more efficient space for research assistants, research staff, research pre and post support and the Associate Dean for Research. The relocation of two large research teams occurred in 2015 to accommodate the rapid growth in funded programs and the limited space in the CON. Both teams are located within six miles of the CON in spaces that are leased through the University and meet the university guidelines. The offices were furnished and a few faculty and mostly research staff were moved to the off-site locations. The business plan for the research teams to remain in the off-site locations is the expectation to cover leasing costs by generating funding with F & A return.

During the 2016-2017 academic year, the CON renovated two small areas to address healthy work environment and work-life engagement goals. A lactation room was designated for nursing and other health profession students (200 square feet on 6<sup>th</sup> floor) and the CPR room - Cultivating Practices for Resiliency (500 square feet on 6<sup>th</sup> floor) was also designated for nursing and other health profession students, faculty and staff to do yoga, meditation, and various other mindfulness/quiet wellness activities.

In spring of 2017, the CON Clinical Simulation and Learning Center (CSLC) was renovated to include a Neonatal Intensive Care Unit. Through a partnership with UK HealthCare, and as part of the design process for a new Neonatal Intensive care unit, the Kentucky Children's Hospital completed a replica of a neonatal intensive care hospital room in the CSLC. Conveniently located (4<sup>th</sup> floor of the CON) healthcare providers as well as nursing students are now able to more fully experience care of the neonate.

During 2014 and 2015, the UKCON- Norton Health Care (NHC) academic-practice partnership was offered in the NHC Institute for Nursing dedicated space located in an office tower adjacent to the NHC Audubon Hospital in Louisville, Kentucky. Space was more than adequate for the first two CON-NHC DNP student cohort groups, each with an enrollment of 20 students. The space was equipped with 3 large classrooms, a computer room with approximately 15 computers, and 6 examination rooms (some set up as office examination rooms and others with hospital equipment). Classrooms were configured with audio and video capabilities, laptop connections and Internet access. Faculty and staff offices with computer set-up were available as well as an open area with a printer and supplies.

During 2016, NHC began renovation of a four story office building to include a Learning Center and NHC office space. In January 2017, the NHC Learning Center opened for student, faculty and staff occupancy. Among the three NHC levels, the new office space added 15,300 square feet of classroom and employee learning space, approximately doubling the previous amount of space NHC had devoted to education 21. The second floor NHC Learning Center located at 9500 Ormsby Station Road, Louisville, is equipped with eight classrooms with seating capacity of 20 to 126 people. All of the classrooms have wireless internet access and availability for personal laptop connections. Some have flat screen monitors and some have large screen projection for video conferencing. One classroom serves as a computer lab with 24 personal computers, along with speaker lectern and flat screen monitor. The UKCON-NHC nursing hub includes a reception area and office space for faculty and staff.

### **Computer Resources**

All full-time faculty and staff have computers. Faculty members are given a choice of a desktop computer or a laptop. Wireless access is available throughout the building and across campus. The CON has five servers housed at the Medical Center's server farm and one server in house. UK provides site licenses for Microsoft Office, Microsoft Operating System, Adobe products, and Forefront antivirus, among many others. In 2016, the University invested in additional computer space on the 6<sup>th</sup> floor of the CON. This renovation created a 42 - seat computer classroom and upgraded the data technology infrastructure to optimize the use of the computer classroom for undergraduate and graduate students.

For online classroom management, Canvas by Instructure is used. UK holds a site license for SAS and SPSS that is available for faculty, staff and students. Individual or group licenses are purchased for other software as needed by faculty, staff and students. Students have access to computers in the UK computer lab located on the 6<sup>th</sup> floor of the CON building. In addition, five computers and a printer are available to graduate students in the 5<sup>th</sup> floor graduate study area.

**II-B. Academic support services are sufficient to ensure quality and are evaluated on a regular basis to meet program and student needs.**

*Elaboration: Academic support services (e.g., library, technology, distance education support, research support, admission, and advising services) are adequate for students and faculty to meet program requirements and to achieve the mission, goals, and expected program outcomes. There is a defined process for regular review of the adequacy of the program's academic support services. Review of academic support services occurs and improvements are made as appropriate.*

**Program Response:**

**The BSN and DNP remain in compliance with this Key Element.**

Noted for top academic rankings (consistent 97% NCLEX average, largest BSN graduates in Kentucky, DNP ranked #26 in U.S. News and World Report, top 10 NIH Nursing Research among publics, and top 10 PhD programs by U.S. National Research Council) the CON has sufficient academic support services for students and faculty to achieve the mission, goals and expected program outcomes. There are more than one dozen facilities that comprise the UK Libraries. With the largest book endowment of all public universities in the United States, UK libraries are among the world's leading research libraries. The libraries' broad scope of advanced technology offers students, faculty and staff access to current information online in addition to printed resources. UK's main library, the William T. Young University Library, houses 1.2 million volumes for the social sciences, humanities, and life sciences. The library includes 57 group study and conference rooms as well as study areas that seat 350. There are 350 personal computers available for patrons and staff and 3,000 network ports throughout the library to support faculty and student computing needs. The library system contains 3,784,382 volumes; of those, 432,679 are e-books. The total UK library system subscribes to 78,194 journals/serial subscriptions including 49,859 e-journals. Faculty and students have access to 415 licensed databases. Free interlibrary loan services and online literature searches are available to faculty and students regardless of location.

The Medical Center Library is conveniently located across the street from the CON. Endnote X5 for Windows is available via the Medical Center website for downloading by all students, faculty, and staff. Some of the many other resources available to students and faculty include: CINAHL, Medline, PubMed, Web of Science, Cochrane Library, and Psych INFO. The Medical Center Library designated a Research and Education librarian as the liaison for the CON faculty and students who retired in December of 2016. An interim liaison has served since her retirement while a search for a permanent replacement is ongoing.

UK Libraries evaluates service quality by administering the national Association of Research Libraries (ARL) LibQUAL+® survey every three years and benchmarks with the ARL mean scores. In 2016 or 17, UK Libraries' scores were equal to or above the ARL service quality mean for both undergraduate and graduate students, for library collections, electronic resources, and facilities. A locally developed *Library User Satisfaction Survey*, conducted every three years, measures user satisfaction in individual campus libraries. Improvements made as a result of these evaluations included the following: library resources were made more accessible by purchasing more resources in electronic form; hours of service were extended to 24/5 in the Young Library; an information commons was created in the Young Library which facilitates work on group projects; and more quiet study space was designated within the Young Library.

The CON has used classroom management software since its introduction at UK and advocated for its purchase and adoption. In the Undergraduate Program, utilization of Canvas is on an individual course basis. Undergraduate faculty use technologies such as TurningPoint clickers and Echo 360 lecture capture to aid students in learning course material. In 2015 UK made the change from Blackboard to CANVAS.

The Information Technology group is broken into two groups. The CONIT group consist of 1 Director, 1 Server Administrator, and 1 Desktop support technician. The CON CURRICULM group consist of 1 Director, and 1 curriculum development technician. The CONIT director works closely with the dean and Associate Dean for Executive Administrative Operations & Finance in the CON. The CONIT director helps with the development of IT policy and makes sure Service Level agreements within the CON are met as well as directing the priorities of the group. The CONIT director also works as the CON liaison with the Campus IT group, and the Medical Center IT group.

The south campus office of Audio Visual (AV) Services, a part of UK Instructional Technology, is located in the CON. Its mission is to provide support for the use of multimedia technology to meet the education, research, and service missions of UK. AV supports audio taping from single digital audio recording to multiple microphone set up for round table discussions. Voice recording for video or presentation narration is also provided. AV equipment is available for check out free of charge to all colleges

The following is a brief summary of computer resources within the College of Nursing.

- All full-time faculty and staff within the CON utilize computer resources.
- Faculty members are given a choice of a desktop computer or a laptop.
- The CON has two Servers housed at the Medical Center's data center.
- Wireless and Ethernet access is available throughout the building and across campus.
- UK provides licenses for Microsoft Office, Microsoft Operating System, Adobe products, and Forefront antivirus, among many others.

All computer resources being utilized by the CON are to be compliant with the University of Kentucky Enterprise and Medical Center Administrative Regulation 10:1 through 10:5. The policy applies to users of University information technology resources irrespective of whether those resources are accessed from on-campus or off-campus location. The policy applies to all University information technology resources including:

- Data and other files, including electronic mail and voice mail, stored in individual computer accounts on University-owned centrally-maintained systems;
- Data and other files, including electronic mail or voice mail stored on departmentally-maintained systems;
- Data and other files, including electronic mail and voice mail, stored in individual computer accounts on systems managed by the university on behalf of affiliated organizations;
- Data and other files, including electronic mail or voice mail, stored on personally-owned devices on University property (e.g., residence hall rooms);
- Data and other files, including electronic mail or voice mail stored on University-owned systems assigned to a specific individual for use in support of job functions; and
- Telecommunications (voice or data) traffic from, to, or between any devices described above.

A full version of Administrative Regulation 10:1 through 10:5 are available upon request.

### **Distance Learning**

In spring 2015, the CON completed an external review on the operations of the Office of Instructional Technology. It was recommended to restructure staffing so that the instructional technologist/designer works more closely with faculty on the use of technology in instruction as well as online course design. The instructional design team now report to the Assistant Dean of Academic Operations to predominantly support all distance learning modalities. The technologist also aids with all aspects of Canvas® management and other online technologies such as: Echo 360® personal and lecture capture software, Camtasia®, instructional videos and PowerPoint voiceovers, the use of Skype®, Zoom® for classroom conferencing, the use of Turning Point's® audience response system, Examsoft® testing software, and websites or SharePoint® sites developed for academic use, as well as Digication for ePortfolio® creation in the DNP program. The Instructional technologist/designer works closely with eLearning, CELT, College of Nursing IT, ITS, AV Services, etc., so that faculty receive the support they need for optimizing student learning.

In fall 2016, the CON converted its RN-BSN program to 100% online program. Undergraduate faculty are identifying BSN (traditional and second-degree/career options) courses that may be converted for online learning as well. The delivery model for the DNP Program is a mix of face-to-face and online classes. Currently DNP courses are designed to meet 4-5 times per semester face-to-face, with the remaining content accessed online through Canvas®. Based on feedback from students, faculty are in the process of changing this hybrid model to an immersion model of meeting 3 blocked days at beginning of semester and 2 blocked days at end of the semester.

Detailed online support for students in the use of Canvas® is available at <http://www.uky.edu/canvas/>. This includes information on such topics as: how to get started, how to get online training, logging in, system requirements, completing graded work, grades, tools, and troubleshooting, among others. Online information/support for instructors is available at the same link, <http://www.uky.edu/canvas/>. Faculty members also obtain support for the use of Canvas® from the staff of the Center for Enhancement of Learning and Teaching (CELT), which is discussed in a section below. Integrated faculty and student support services for distance learning include [Distance Learning Library Services](http://www.uky.edu/ukonline/), information about online programs and resources, <http://www.uky.edu/ukonline/>

The University eLearning team is available to help design, develop and support learning for online teaching. They've developed an Online Teaching Toolkit available here <https://www.uky.edu/elearning/>. There is an Information Technology Services Grant Program for faculty to apply for funding to develop Distance Learning courses or programs.

### **Clinical Simulation and Learning Center (CSLC)**

The Clinical Simulation and Learning Center is located on the 4<sup>th</sup> floor of the CON with approximately 10,000 square feet building, and is used by both undergraduate and graduate students. It contains a number of electronically based teaching aids and high fidelity simulators such as Laerdal's SimMan Adult®, SimBaby®, VitalSim Mega Code Child®, and Noelle Maternal Neonatal Birthing Simulator®. The technology for the CSLC includes 13 motion-recorded cameras, 29 computers with access to EMR training, Pyxis® and Hill-Rom Nurse Call®. The CSLC rooms include functional flow meters, suction units, IV equipment, state of the art hospital beds, patient lifts, vital monitors, flat screen TVs with multimedia capabilities. The skills laboratory space of the CSLC includes 7 stretchers, 14 beds and 20 exam tables equipped with wall mountings/portable physical examination equipment and supplies.

The CSLC is staffed by a Simulation/Skills Team composed of 3 full time faculty and 0.6 FTE IT staff. An additional faculty member serves as a resource for graduate faculty. The Director of the CSLC is prepared at the DNP level, and one faculty is prepared at the PhD level. Currently, the simulation laboratory is in progress to become accredited by the Society for Simulation in Healthcare. The team works with faculty who want to use simulation in their courses as reflected in Appendix IIB-1.

Simulations have been developed and currently are used for the following fundamentals topics: oxygenation, cardiovascular, neurosensory, pain management, urinary elimination, care of the postoperative patient, and death and dying. Also, toward the end of the semester, students have a simulation wrap up day where they go to the lab and participate in 3 scenarios to apply concepts learned throughout the semester. These wrap up scenarios include a patient with fluid volume excess in respiratory distress, a postoperative patient with urinary retention, and a child with a casted limb requiring neurovascular assessment. Faculty work very hard to incorporate QSEN competencies such as safety into scenarios where applicable. In most simulations, students must also access electronic medical records to obtain the necessary data about the patient, and in many cases they must work on their communication skills when it becomes necessary to call the physician during the simulation.

The simulations are evaluated in a number of ways and are under constant revision based on student and faculty feedback. Students complete an evaluation following each simulated clinical experience (SCE). The design of the SCE, facilitator, and perceived challenges are included in the evaluation using modified versions of the National League for Nursing Educational Practices Questionnaire, Student Satisfaction and Self-Confidence in Learning, and Simulation Design Scale. Table IIB-1 reflects the results of the 2017 Student Satisfaction survey.

**Table IIB-1**

CSLC Student Satisfaction: Spring 2017 Mean Scores ( 1 = strongly disagree; 5 = strongly agree)	
1. The teaching methods used in this simulation were helpful and effective.	4.72
2. The simulation provided me with a variety of learning materials and activities to promote my learning the course curriculum.	4.73
3. I enjoyed how my instructor taught the simulation.	4.75
4. The teaching materials used in this simulation were motivating and helped me to learn.	4.74
5. The way my instructor(s) taught the simulation was suitable to the way I learn.	4.75

In addition to student feedback following each SCE, undergraduate students are evaluated using the Simulation Rubric that is based on the program student learning outcomes. The students will receive meets expectation, needs improvement, or unsatisfactory based on their performance during the SCE. The students also receive written formative feedback, in addition to debriefing, based on any areas where they need improvement or are unsatisfactory. This information is found on the cohort simulation Canvas site. Corresponding course coordinators and clinical faculty have access to the student performance to remediate areas as needed. Thirty-eight students in the spring 2017 second semester senior cohort received needs improvement following the first SCE. Three students received needs improvement following the final SCE.

### Research Support

The Office of Nursing Research (ONR) offers support services for research and scholarly activities for faculty and students. A recent reorganization of CON leadership expanded the responsibilities of the Associate Dean of Research to include PhD Faculty Affairs and added an Assistant Dean of PhD Program and Scholarly Affairs as well as added a Council for Advancement of Student Scholarly Affairs.

Available ONR resources and services include assistance in locating funding sources; preparing research proposals; statistical, research design, and sampling design; survey development; psychometric consultation; and manuscript and poster preparation and editing. The Associate Dean for research oversees the ONR's staff, which includes these full-time staff members: an administrative coordinator, a grants facilitator, a CON grants officer, an epidemiologist/survey research specialist/data manager and analyst, a master's prepared statistician, and an information specialist. A PhD-prepared statistician who is a tenured faculty member also provides statistical consultation and expertise in research and sampling designs. An email newsletter, Inquiring Minds, is sent to all students, faculty, and staff 3-4 times per year to publicize the research and scholarly productivity of students and faculty across programs. Space is also allocated in this area for undergraduate research interns to work with their mentors. The ONR has a computer in each of the 25 workstations, and all are linked to two printers in that area. Computers are equipped with Microsoft Office® and statistical packages. Atlas.ti® is available for faculty and students conducting qualitative research.

The CON uses incentive funds received from indirect costs on extramural grants to support the research productivity of faculty and students at both the undergraduate and graduate levels. Support for travel to present at state, regional, national, and international conferences is available from the Office of Nursing Research. Poster printing is also paid for from incentive funds. Two other recent examples include in 2017, incentive funds were used to bring in two internationally renowned nurse scientists to consult with faculty on their individual research areas and with faculty research teams and 18 faculty members attended an all-day workshop offered on campus by a company called Grantwriters' Seminars and Workshops, LLC to support faculty and student research.

UK's Office of the Vice President for Research recently changed its funding model to allocate funds directly to Colleges. Although special RFPs may be called, Colleges are expected to manage variety of faculty research support mechanisms, such as start-up funds for new Regular Title Series faculty, bridge funding, and faculty research support grants. The vice president encourages interdisciplinary collaboration by allocating a larger proportion of the indirect costs (16% vs. 10%) for incentive funds when interdisciplinary extramural proposals are funded. To incentivize faculty, the CON has offered Wethington Awards for a number of years to faculty who bring in part of their salary on grants. For the past five years, individual faculty with grant salary support received 10% of the amount of salary they personally covered by grants as an incentive award in May of each year.

### **Admission and Advising Services**

In spring of 2016, the University underwent a major restructure to support academic student success. The realignment of central support services resulted in fewer administrative roles and more front-line positions directly devoted to supporting students. The restructure focuses on four pillars: academic student success, financial stability, belonging and engagement, and wellness. The goal is to be a seamless and integrated organizational structure among all units at the University to better support students and their success. As a result, the student-centric model changed the scope and responsibilities for many positions as well as eliminated some positions, shifted some positions and added some positions.

The CON academic support services (Student Services) was expanded by an additional 1 FTE with the University's restructure to help facilitate the recruitment, application, and matriculation of nursing students. A total of 7 FTE in Student Services provide support to the students and programs, including: 1 FTE student affairs coordinator (recruiter), 2.5 FTE undergraduate advisors, 1.5 FTE graduate advisors, and 1 FTE student affairs coordinator who manages the student database and serves both undergraduate and graduate programs. In collaboration with faculty and the associate deans, Student Services develops a recruitment plan for all academic programs; provides information to prospective applicants; represents the CON at recruitment/career opportunity events; provides pre-admission counseling; supports the admissions process for all academic programs; facilitates student registration and credentials verification; coordinates health and safety compliance; supports student organizations, career plan development, and pinning and hooding ceremonies; provides support for enrolled students; plans commencement activities; administers the school's scholarship distribution; and is responsible for maintaining all student-related data.

Pre-nursing students are admitted to the CON and are advised by professional advisors for their first two years and augmented by faculty participating in the PRN program (professional relationships in nursing), an academic student success initiative, funded by the Provost Office. Students also have peer mentors who are sophomores or juniors in nursing. Undergraduate students have a faculty advisor for their third and fourth years within the nursing major. Faculty members advise up to 20 students, depending on their other workload assignments. Support procedures are in place for early intervention for students who are below a passing grade in any nursing course. A collaborative process involving the student, the student's advisor, and course faculty is in place. At the graduate level, students are assigned a faculty advisor as they enter the program; the number of advisees per faculty member (across all graduate programs) is seven students. The University has an academic alert system whereby personnel (faculty and staff) can report behavior that puts students at risk academically or socially. Advisors are notified and students are contacted.

### **Other Support Services and Enrichment Opportunities for Students**

The CON has a writing specialist, MFA prepared, who conducts a diagnostic writing assessment on all DNP students during the first or second semester of enrollment. The writing specialist provides students with information on such topics as critical thinking, paragraph development, writing a literature review, and writing for publication. Working closely with the UK Medical Center Library liaison to schedule classes in EndNote, a software program designed to help writers manage their reference citations, is also provided. Other services provided include: on-site consultation with undergraduate and graduate students as well as via virtual meetings, faculty assistance with improving writing and presentation skills and offering online video tutorials for writing guidance for students, UKHC nurses and faculty.

### **Support for Undergraduate Students**

The University's Living Learning Community/Living Learning Program (LLP) established the Interprofessional Residential Healthcare College (IHRC) for Nursing Students dormitory in 2014, developed in collaboration with Residence Life staff, opened to serve undergraduate students. IHRC is a high-impact living-learning program designed for students who have a passion for healthcare and interdisciplinary learning. It is an active collaboration among nine colleges on campus and open to any major. IHRC members can expect to be immersed in a living-learning experience that combines a host of curricular and co-curricular initiatives with a network of faculty and staff dedicated to interprofessional healthcare and student success. Nine IHRC UK partner colleges include: College of Dentistry, College of Health Sciences, College of Medicine, College of Nursing, College of Pharmacy, College of Public Health, College of Social Work, College of Communication & Information, and the College of Agriculture, Food, & Environment (Department of Dietetics and Nutrition).

Peer tutoring is offered four times each semester for Anatomy and Physiology and Chemistry through this program. NUR 101(Academic Orientation and Introduction to Nursing) provides a university orientation for nursing students. It also teaches study skills and provides students with an introduction to the profession.

### 2016-17 IHRC LLP Academic Year in Review

- **Academic Success.** IHRC average 2016-17 cumulative GPA: 3.41.
- **Retention.** IHRC-UK Fall 2016 to fall 2017 preliminary retention rate: 96.45% (as of today 5/12/2017).
- **Nursing Students.** 47 of 188 students registered as Pre-nursing students or Nursing
- **Co-Curricular Programming.** The IHRC executed over 44 of our signature “iRock” co-curricular programs that proved to be extremely well-attended and popular with our students. Based on our Fall 2016 analysis:
  - **Community.** 90.72% (avg.) agreed or strongly agreed that the iRock programs enhanced their sense of community.
  - **Belonging.** 88.06% (avg.) agreed or strongly agreed that the iRock programs enhanced their sense of belonging.
  - **Career Exploration.** 90.84% (avg.) agreed or strongly agreed that the iRock programs created a relevant and important experience for future healthcare professionals.
  - **Self-Efficacy.** 85.75% (avg.) agreed or strongly agreed that the iRock programs improved a dimension of self-efficacy (motivation, knowledge, or skill-set) as it relates to their career in healthcare.
- **Grants, Awards, & Accolades.**
  - The UK Women and Philanthropy Network awarded the IHRC a \$27K grant to recognize and support our continued success surrounding diversity and inclusion.
  - Woodland Glen V/IHRC Resident Director Sarah Sheldon was awarded “Resident Director of the Year” honors by her colleagues in Residence Life.
  - The IHRC LLP was also selected as the “LLP of the Year.”

First-Aid Friday Peer Study Groups (FAF) is a study hall resource for undergraduate nursing students, offered Fridays from 10 a.m. to 3 p.m. to provide tutoring and skills practice opportunities outside of the lab/classroom times. Upper class student tutors are available to assist study groups with nursing content questions. Graduate nursing students provide skill support. Nursing students who fail any NUR course are considered to be at risk and are referred to FAF as part of their plan for success. Attendance is tracked and in some cases the correlation can be made between participation at FAF and a successful outcome the second time through a course. Data indicate that students in the first two semesters of the sophomore year continue to be the most frequent users of FAF. Qualitative reports highlight these students find this experience to be a relaxed and inviting atmosphere where they can work in focused study groups, practice NCLEX-type questions on the computer software, and practice nursing skills. They further describe becoming competent in performing many nursing skills specific to the nursing lab (e.g. sterile dressing changes, medication injections, vital signs).

The recent CON leadership reorganization includes shifting responsibilities to expand the services provided by the Academic Support Team to include an academic program support specialist. Working closely with the Director for the UK Disability Resource Center One, the academic program support specialist provides assistance to undergraduate and graduate students with online testing or other learning accommodation needs.

*The Dose* is a biweekly emailed newsletter, managed by the academic program specialist, that focuses on information specifically for undergraduate nursing students continues to be a consistent way to communicate with undergraduate students including scholarship and job opportunities, community service, CON student and faculty updates, while also highlighting student’s successes. Qualitative assessments of both students and faculty alike describe the *Dose* as a welcoming and informative student centered CON publication.

## II-C. The chief nurse administrator:

1. is a registered nurse (RN);
2. holds a graduate degree in nursing;
3. holds a doctoral degree if the nursing unit offers a graduate program in nursing;
4. is academically and experientially qualified to accomplish the mission, goals, and expected program outcomes;
5. is vested with the administrative authority to accomplish the mission, goals, and expected program outcomes; and
6. provides effective leadership to the nursing unit in achieving its mission, goals, and expected program outcomes.

*Elaboration: The administrative authority of the chief nurse administrator is comparable to that of chief administrators of similar units in the institution. He or she consults, as appropriate, with faculty and other communities of interest to make decisions to accomplish the mission, goals, and expected programs outcomes. The chief nurse administrator is perceived by the communities of interest to be an effective leader of the nursing unit. The program provides a rationale and a plan to come into compliance if the chief nurse administrator does not hold a graduate degree in nursing and a doctoral degree (if applicable).*

## Program Response:

### **The BSN and DNP programs remain in compliance with this Key Element.**

Janie Heath, PhD, APRN-BC, FAAN, FNAP, FAANP was appointed Dean and Warwick Professor of Nursing for the UK College of Nursing in August of 2014 (Dr. Patricia Howard served as Interim Dean from December 2012 until August of 2014) and has demonstrated to be well qualified to lead the College in its pursuit of its mission and strategic goals. Dr. Heath was previously the Chief Academic Officer for the University Of Virginia School Of Nursing. She also held academic leadership positions and taught at the Medical College of Georgia in Augusta, Georgia, Georgetown University in Washington DC and the University of South Carolina.

Dr. Heath earned her bachelor's degree in nursing from Cameron University, a MS in nursing from the University of Oklahoma, a post-masters Adult Nurse Practitioner certificate from the University of South Carolina, a PhD from George Mason University in Fairfax, Virginia and a Management and Leadership in Education Program certificate from Harvard Graduate Institute of Higher Education. Dr. Heath has served in a faculty role since 1994 and has a sustained program of research in tobacco control. She was inducted as a Fellow of the American Academy of Nursing in 2007, a Fellow of the National Academies of Practice in 2014 and a Fellow of the American Association of Nurse Practitioners in 2017. The University of Oklahoma recently honored her as the inaugural Distinguished College of Nursing Alumni. Dr. Heath has been awarded over \$12 million for academic and/or research initiatives, generated over 160 publications and presentations, served on numerous regional and national task forces for tobacco control and advance practice nursing initiatives including Board of Directors for the American Association of Critical Care Nurses.

Dr. Heath's teaching and scholarship have centered on issues related to tobacco control, nursing professionalism among acute and critical care populations and academic clinical partnerships. Most recently she has implemented strategies to promote work-life engagement, diversity, rural health outreach and healthy working and learning environments. As Chair of the Board of Directors for the UK Center for Interprofessional Health Education (CIHE) she has also influenced learning experiences for 1600 students across 10 colleges at the University through 12 CIHE program offerings facilitated by 275 faculty participants.

The colleges at the University of Kentucky function with a high degree of autonomy and Dr. Heath has the same budgetary, decision-making and evaluation authority as other deans ([https://issuu.com/derrick70/docs/strategic\\_plan\\_booklet\\_with\\_wl\\_goal](https://issuu.com/derrick70/docs/strategic_plan_booklet_with_wl_goal) ). She reports directly to the provost of the University and has a dotted line to the EVP of Health Affairs at UK HealthCare. Dean Heath recognizes the many challenges facing higher education leaders today and has enthusiastically provided leadership on many fronts including active engagement with the soft phase of the UK Capital Campaign and obtaining increased financial support from UK HealthCare. She meets twice a year with the Dean's Advisory Board and the Dean's Diversity Board, a group of donors, business and healthcare executives, community partners, alumni

and faculty, to seek guidance for advancing CON initiatives. (Dean's CV <http://www.uky.edu/nursing/sites/www.uky.edu.nursing/files/CV-JHeath-09-01-17.pdf> )

#### II-D. Faculty are:

1. sufficient in number to accomplish the mission, goals, and expected program outcomes;
2. academically prepared for the areas in which they teach; and
3. experientially prepared for the areas in which they teach.

*Elaboration: The full-time equivalency (FTE) of faculty involved in each program is clearly delineated, and the program provides to CCNE its formula for calculating FTEs. The overall faculty (whether full-time or part-time) is sufficient in number and qualifications to achieve the mission, goals, and expected program outcomes. Faculty-to-student ratios ensure adequate supervision and evaluation and meet or exceed the requirements of regulatory agencies and professional nursing standards and guidelines.*

*Faculty are academically prepared for the areas in which they teach. Academic preparation of faculty includes degree specialization, specialty coursework, or other preparation sufficient to address the major concepts included in courses they teach. Faculty teaching in the nursing program have a graduate degree. The program provides a rationale for the use of any faculty who do not have a graduate degree.*

*Faculty who are nurses hold current RN licensure. Faculty teaching in clinical/practicum courses are experienced in the clinical area of the course and maintain clinical expertise. Clinical expertise may be maintained through clinical practice or other avenues. Faculty teaching in advanced practice clinical courses meet certification and practice requirements as specified by the relevant regulatory and specialty bodies. Advanced practice nursing tracks are directly overseen by faculty who are nationally certified in that same population-focused area of practice in roles for which national certification is available.*

#### Program Response:

##### **The BSN and DNP programs remain in compliance with this Key Element.**

Although stretched with recent rapid growth in undergraduate and graduate nursing programs, faculty are accomplishing the mission, goals, and expected student and faculty outcomes and are academically and experientially prepared for the areas in which they teach (List available upon request). The CON continues to recruit and retain qualified faculty members and as of August 1, 2017, there is one vacant tenure track full-time position posted and two non-tenured track full-time positions posted. A testament to the overall quality of faculty is 21 faculty/faculty emeriti are Fellows in National Societies and 3 have been designated as Living Legends from the American Academy of Nursing.

##### **Faculty Academic Preparation**

Of the 64 full-time faculty, 46 (74%) are doctorally prepared and the remainder hold the MSN degree, with the exception of the Writing Specialist who holds an MFA. The associate and assistant deans for the respective programs assign faculty members to teach specified courses based on their academic preparation as well as their clinical and/or research expertise. The numbers and percentage of full-time faculty by rank are: 10 (16%) tenured professors, 21 (33%) tenured associate professors, 17 (26%) tenure track assistant professors, 2 (3.2%) instructors, 5 (7.9%) senior lecturers, and 8 (1.3) lecturers. In addition the CON also draws on the expertise of 42 part-time faculty members.

##### **Faculty FTE**

The FTE required by each program is determined by the associate deans based on the number and type of courses and clinical sections needed and the number of students enrolled or anticipated to enroll in the various courses/programs. Some faculty members teach and/or advise across programs. The Faculty Workload Policy Statement for UK is available in the Administrative Regulations (<https://www.uky.edu/nursing/sites/www.uky.edu.nursing/files/UK%20CON%20FacultyWorkloadGuideline%20OE%20FINAL%20Feb%203%202016.pdf> ).

Distribution of Effort (DOE) /workload continues to be assigned by the Associate Deans for faculty affairs and academic programs with careful consideration of each faculty member's interests, engagement and

responsibilities in the areas of teaching, service/practice, research and scholarship. In general, the process used for assigning DOE

(<https://www.uky.edu/nursing/sites/www.uky.edu.nursing/files/UK%20CON%20FacultyWorkloadGuideline%20OE%20FINAL%20Feb%203%202016.pdf>) includes expecting tenure track/tenured faculty to teach two courses each semester in addition to meeting service/practice and scholarship commitments. Tenure track faculty, in their first two years, are allocated lighter teaching loads to support their research trajectory. Full-time non-tenured track faculty are commonly expected to teach a combination of didactic, clinical and/or laboratory classes each week. Clinical title series faculty are expected to integrate faculty practice (direct care services or indirect care services) one day a week or a negotiated with their Associate Dean. Administrative responsibilities for Assistant Deans and Track Coordinators are also allocated in the DOE document.

As previously mentioned, two faculty members (one is Chair) serve on the University task force to review all title series, in particular the charge is to condense the title series to “tenure-track” eligible and “non-tenure track” eligible using criteria/defining the process based on Boyer’s Model for Scholarship. The recommendations from the task force are currently under review by the University Faculty Senate.

### **Faculty Experiential Preparation**

All nurse faculty hold an unencumbered Registered Nurse (RN) licensure in Kentucky. This is verified online at the KBN website each fall semester by staff in the offices of the dean and associate deans for their group of direct reports. Faculty who teach advanced practice clinical courses meet relevant certification and practice requirements of regulatory and specialty bodies. Thirty-four (54%) of the full-time graduate faculty hold certifications in their specialty areas. Of the 64 full-time faculty members, 26 teach in the DNP/Certificate Programs and 32 faculty members teach in the Undergraduate Program (excludes faculty teaching in PhD program). In the DNP/Certificate Programs, 26 (100%) of the full-time faculty hold a doctoral degree. In the Undergraduate Program, 19(60%) of the full-time faculty hold a doctoral degree. The track coordinators are nationally certified in the specific role and population of the track. Of the full- and part-time faculty teaching in the Undergraduate Program, 11 are certified in their area of specialty. Three of the master’s prepared faculty members are pursuing doctoral degrees. Clinical instructor faculty are selected based on their expertise and currently, 50 (91%) hold a MSN or higher and 5 (0.9%) hold a BSN degree.

Graduate faculty members teaching in clinical courses are encouraged to maintain an active clinical practice as part of their DOE. This is considered important not only to maintain individual expertise but also to ensure effective role models, update and enrich teaching, and develop quality clinical teaching sites. Clinical practice also provides opportunities to demonstrate innovative nursing practice, and serves as a basis for scholarship. Faculty have been encouraged and provided with administrative support to develop innovative relationships with practice settings. Currently, 31 faculty members (48% of full-time faculty) participate in various faculty practice venues (direct billing services and/or indirect care services) as part of their assigned workload including community clinics, mobile/telemedicine clinics, and acute care settings. In 2016, UK HealthCare established a new process for non-tenured track faculty that are doctoral prepared to be selected for a Clinical Scholar Appointment to help facilitate nursing scholarship and research.

### **Faculty/Student Ratios**

Faculty-to-student ratios ensure adequate supervision and evaluation; they also meet regulatory requirements and professional nursing standards and guidelines. The ratio of undergraduate students to faculty in the clinical setting is no more than 10 students to one faculty member, which is consistent with the guidelines set forth by the KBN. A 1:8 ratio is maintained in the high acuity clinical areas to promote patient safety and enhance quality learning opportunities for students. During NUR 413 each student is placed with a preceptor (1:1 ratio).

The criteria for the ratio of faculty to graduate student clinical supervision was derived from the NONPF NTF criteria and delineated in the College’s Workload policy for faculty DOE. Faculty workload is typically 1:6 ratio with additional time given if more than 6 graduate students are assigned. Preceptors are based on a 1:1 ratio.

**II-E. Preceptors, when used by the program as an extension of faculty, are academically and experientially qualified for their role in assisting in the achievement of the mission, goals, and expected student outcomes.**

*Elaboration: The roles of preceptors with respect to teaching, supervision, and student evaluation are:*

- 1. clearly defined;*
- 2. congruent with the mission, goals, and expected student outcomes; and*
- 3. congruent with relevant professional nursing standards and guidelines.*

*Preceptors have the expertise to support student achievement of expected outcomes. Preceptor performance expectations are clearly communicated to preceptors and are reviewed periodically. The program ensures preceptor performance meets expectations.*

#### **Program Response:**

##### **The BSN and DNP programs remain in compliance with this Key Element.**

Students in the BSN, and BSN-DNP Programs all participate in clinical experiences with preceptors in practice settings. The goal of the CON is to provide clinical experience that prepares the student for practice in a variety of settings based on both the requirements of the program and student needs. The CON track and course coordinators facilitate this process, ensuring students are assigned knowledgeable and experienced clinicians as preceptors and that meet the criteria of the CON for precepting students. Once the faculty member identifies an agency and preceptor, the faculty member completes a clinical education request form which is submitted to the CON's practice & clinical engagement contract administrator, who negotiates the specifics of the contractual agreement in collaboration with the UKHC legal department. This includes defining the goals and responsibilities of both the preceptor and the CON in addition to providing proof of licensure, malpractice, and HIPAA compliance. This agreement is in place prior to the student's experience. Databases of preceptors and collaborating clinical facilities are maintained electronically by the CON and the legal department and are updated every 5 years as needed.

BSN students are precepted by BSN preceptors during the synthesis course. Students are placed with a preceptor at a 1:1 ratio. The Synthesis course was designed to provide opportunities to develop independence and competence in applying principles of care management and leadership to nursing practice in a variety of clinical settings. Synthesis students are paired with nurse preceptors for a 225 hour clinical practicum during the last semester of their senior year (KBN requires 120 hours). Clinical faculty from the CON oversee the student clinical experience and are responsible for evaluating student success. Nurse preceptors provide personal guidance and direct supervision as students deliver bedside clinical care or engage in public health nursing. Preceptors submit formal, written evaluation comments about student performance to clinical faculty at mid-point and at the end of the rotation.

All preceptors are oriented to the CONs expectations of them. The undergraduate program utilizes preceptors in the senior synthesis course. They provide input into the grading of the student's attainment of the required course outcomes with the determination of the student's final grade resides with the faculty. The Undergraduate preceptor handbook contains information regarding the role and responsibility of the student, preceptor and faculty which is reviewed with the preceptor prior to beginning the semester.

Clinical assignments for the specialty courses of the BSN-DNP option are also assigned at a 1:1 student to preceptor ratio, and on average a faculty to student ratio of 1:6. Preceptors are recruited by the course directors; sometimes the requests of individual students may be taken into consideration. The minimum educational requirements for preceptors are advanced practice preparation, experience in the specialty area in which the student will practice (e.g., CNS, NP), licensure, and certification, if applicable. The minimum practice experience for preceptors is one year practicing in their current role, but most of the advanced practice preceptors have been in practice for several years. Both students and faculty evaluate the preceptor and clinical site after each experience.

Clinical preceptors are oriented to their role by the specialty track coordinators and faculty assigned for clinical supervision of students. They received a Preceptor Handbook with details regarding their role and a signed form is returned indicating their understanding. They are provided with a course syllabus and with ongoing opportunities for dialogue with course faculty via site visits. Ongoing evaluation consists of phone or email contact with the preceptor in addition to weekly logs provided by each student during their clinical experience, which is reviewed by the course faculty.

Post-master's DNP students do not work with preceptors. They do, however, work with a clinical mentor, as approved by the student's advisor, who has expertise in the student's capstone area of interest. The clinical mentor may consult with the student throughout the program, and participates in the student's committee. It is preferred that clinical mentors are doctorally prepared.

**IIF-F. 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.**

*Elaboration: Institutional support is available to promote faculty outcomes congruent with defined expectations of the faculty role and in support of the mission, goals, and expected faculty outcomes. For example:*

1. *Faculty have opportunities for ongoing development in the scholarship of teaching.*
2. *If scholarship is an expected faculty outcome, the institution provides resources to support faculty scholarship.*
3. *If practice is an expected faculty outcome, opportunities are provided for faculty to maintain practice competence, and institutional support ensures that currency in clinical practice is maintained for faculty in roles that require it.*
4. *If service is an expected faculty outcome, expected service is clearly defined and supported.*

**Program Response:**

**The BSN and DNP programs remain in compliance with this Key Element.**

The UKHC provides a wealth of opportunities for nursing faculty to engage in the multi-dimensional mission of teaching, scholarship, service, and practice. While each of these types of activities is valued and encouraged, CON structures and processes allow for role assignments and progressions that accentuate individual strengths and interests. For example, the CON offers five different types of faculty appointments: Regular Title Series, a traditional tenure track with emphasis on research and teaching; Clinical Title Series, with an emphasis on practice and teaching; Special Title Series, a tenure track hybrid combination with the teaching, scholarship and practice expectations, as appropriate and individualized to the role; Research Title Series, which is purely research-focused; and Lecturer/Senior Lecturer, which is purely teaching focused as illustrated in Table IIF-1. Additionally, the CON engages several experts from nursing and other health-related disciplines as part-time and adjunct faculty members.

	Teaching	Research/ Scholarship	Practice	Service
Regular Title	20-40%	30-55%	0-20%	5-10%
Clinical Title	50-70%	0-10%	20-40%	5-10%
Special Title	40-70%	20-30%	10-35%	5-10%
Research Title	0%	90-95%	0%	5-10%
Lecturer	90-95%	0%	0%	5-10%

**Teaching Support**

Faculty members have opportunities for ongoing development in teaching and pedagogy, research and scholarship, specialty practice, and service. Newly hired faculty members are paired with a senior faculty mentor to assist them with tasks such as syllabus preparation, content development, and classroom management.

The Center for the Enhancement of Learning and Teaching (CELT) also offers ongoing faculty development opportunities. This department employs several instructional designers and experts in web-based delivery and technological modalities to support teaching. The mission of the CELT is to promote and support excellence in teaching and learning at UK by working collaboratively with all instructors to create engaging, innovative and inclusive learning environments in which diverse students can excel (<http://www.uky.edu/celt/>).

The Graphic and Multimedia Production team helps create and develop graphics, illustrations, animations, and digital images for credit courses and research projects. These elements may be used in web-based courses,

played back on CD, used in PowerPoint for instruction or presentations, published in a book, a journal, or placed in a poster or display project. The production team has the following capabilities and skills: technical/scientific illustration, medical illustration, graphic design, animation, web design and layout, poster and display presentation, and digital imaging (slide scanning, image enhancement, and photo quality prints).

The CON supports faculty to attend conferences at local and international venues through travel funds. In addition, the funds can also be used for nursing faculty to attend and present at regional, national and international conferences.

### **Research and Scholarship Support**

Ranked #8 among public universities for NIH Nursing Research, the CON and UK offer extensive support services to assist faculty with their research and scholarship endeavors. New Regular Title Series faculty have 12 month appointments and are given 50% release time and start-up funding (\$50,000 - \$100,000/year X 3 years) to develop their programs of research. The associate dean for research meets individually with new tenure track faculty to develop a detailed plan for their research or scholarship trajectory, and provides mentorship and individual consultations over time.

The CON Office for Nursing Research employs an editor, a health librarian, two statisticians, an expert in survey development and administration, and a grants manager who provide research support to faculty members. This office also manages the indirect funds the college receives from several extramural grants. The CON houses the Kentucky Center for Tobacco Free Policy and the RICH Heart Center, which offer junior faculty the opportunity to engage with large interprofessional research teams and senior researchers. These centers have also provided small scale seed grants to support faculty research. Additionally, UK provides a variety of small scale start up grants which have helped to support several of our nurse investigators.

### **Support for Practice and Service**

In the CON, faculty practice is one of the most prominent means of community engagement. Faculty practice serves as a basis for scholarship, and provides opportunities to maintain clinical competence and credentials, supervise and mentor students in practice settings, and demonstrate innovative practice models. During the past year, 31 nursing faculty members have participated in practice activities. As part of the DOE these practice activities make important contributions to increasing access and quality of care for Kentucky residents.

As discussed earlier the Wilmore Clinic serves vital role for primary care in this small rural community. Had the CON not been able to take on the operation of this clinic it would more than likely would have closed with the retirement of the primary care physician.

The Faculty Practice Council continues to foster communication among faculty practitioners, administrators, and community partners. Participants benefit from the opportunity to share information related to the College Practice Plan, as well as new developments in the work of individual faculty practitioners, and changes in advanced practice nursing across the local region and the nation. A current project of this council is to review survey results related to the landscape for faculty practice (trends and benchmarks) and make recommendations for Faculty Bylaws changes to ensure relevance of the council's purpose and core function.

The CON continues to work closely with UKHC to strengthen integration of academic nursing operations. The Dean's revised organizational leadership structure (<http://www.uky.edu/nursing/sites/www.uky.edu.nursing/files/CON%20Org%20Chart%20-%202010%3A11%3A2017.pdf>) assures alignment for nursing leaders to actively engage in joint strategic planning and operational management for education, practice and research. These relationships help facilitate opportunities for shared resources and practice contracts. The shared faculty positions, post BSN Nurse Residency Program, and the annual Nursing Research Papers Day, are some of the most prominent examples of these collaborative partnerships. CON faculty are also encouraged and supported to engage in a wide range of other service and engagement activities. Service time is incorporated into all faculty workload plans. All faculty members are encouraged to serve on at least two committees, including committees within the CON and those representing the larger university. Nursing faculty are active participants in UK governance, participating on the Faculty Senate, the Health Care Colleges Advisory Council, the Institutional Review Boards, CIHERP, and many others.

Several of the CON faculty leadership positions on health-related committees, boards, or offices external to the CON. When faculty are involved in key leadership positions at the state, national, and international levels, additional workload release and financial support for participation is provided.

UK and the CON have also encouraged and supported faculty to develop and expand international collaborative partnerships. For example, our university has a long-standing partnership with a clinic in Ecuador, referred to as the Shoulder-to-Shoulder Ecuador Program. Over the past five years, several CON faculty and students have traveled to Ecuador with interprofessional teams for short-term visits to provide primary care, public health, and educational services to this Ecuadorian community. From 2012-2016, active international partnerships involving CON faculty have increased from 12 to 19, including activities in Australia, Ecuador, Ireland, Korea, South Africa, Taiwan, and Thailand. Recently the CON partnered with the College of Dentistry and the UK Center for Interprofessional Health Education for the first oral health outreach program in four Eastern Kentucky counties. With 64 nursing and health professional students matched with 64 dental students, over 400 elementary school children received oral health care, health screening and health education.

In addition to providing support and resources for teaching, research, practice and service, the CON and UK provide several awards each year to recognize exemplary performance in each of these categories. The CON hosts a year-end celebration each May where those faculty and staff members who demonstrated exemplary accomplishments in teaching, research, and practice are recognized. CON award recipients are displayed in the 3rd floor corridor.

## **SUMMARY OF STANDARD II**

### **STRENGTHS:**

- The CON has strong academic infrastructure and University support to advance academic success for students
- The CON has highly qualified and nationally recognized faculty to support the mission, goals and expected student and faculty outcomes
- The CON has positive academic clinical partnerships with UKHC, Norton Health Care and Select Medical
- The CON has a strong presence of influencing interprofessional health education
- The CON has top ranked academic programs and nursing research programs

### **QUALITY ENHANCEMENT EFFORTS:**

- The CON must maintain competitive salaries for recruitment and retention
- The CON must increase new revenue streams to advance academic programming, scholarship, service and practice initiatives
- The CON must continue to grow extramural funding
- The CON must continue to monitor trends in higher education and meet needs of community of interest



## 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.

**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, and with the roles for which the program is preparing its graduates.**

*Elaboration: Curricular objectives (e.g., course, unit, and/or level objectives or competencies as identified by the program) provide clear statements of expected learning that relate to student outcomes. Expected outcomes relate to the roles for which students are being prepared.*

#### Program Response:

##### **The BSN and DNP remain in compliance with this Key Element**

The BSN and DNP Program curricula are based on and are congruent with the mission, goals and expected student learning outcomes of the University of Kentucky, College of Nursing. All programs undergo formative and summative evaluations each semester and no less that every three years as outlined in the CON Systematic Process of Program Evaluation (CON SPE)

(<http://www.uky.edu/nursing/sites/www.uky.edu.nursing/files/CON%20Systematic%20process%20for%20program%20effectiveness%20%28approved%2C%20final%207-7-17.pdf> ). The course syllabi for the BSN program include clear expected student learning outcomes (SLOs) as well as student activities to assure the course SLOs are met. The faculty developed a curriculum crosswalk for all of the tracks within the BSN program. The BSN program committee evaluate all courses using a designated format, timeline and outcomes are reviewed with the course faculty. Curricula are revised based on the course review, student evaluations, faculty expertise, information from employers and the nursing standards to assure success as a BSN prepared RN and the NCLEX exam.

In summer of 2017, the Provost charged the CON to conduct a thorough analysis of all BSN programs of study for efficiencies and effectiveness of teaching. Although for the past 5 years, curricular changes have been made it has been well over 10 years since a major revision/substantive change has been implemented. Currently undergraduate faculty are actively engaged with making curricular improvements to improve overall efficiencies and effectiveness of teaching as well as improve retention and time to degree rates.

The DNP program committee reviews the curriculum to assure compliance with professional nursing standards. The course syllabi include clear expected SLOs as well as student activities to assure the course SLOs are met. The faculty reviewed the curriculum and developed a crosswalk for each track in the DNP program. The DNP curriculum was revised in fall of 2015. The DNP course have been reviewed and approved by the DNP faculty committee, Graduate Faculty Committee and the Health Colleges Curriculum Committee, and was implemented in the fall semester of 2016. The revisions were made based on student feedback, employer feedback, reflect realignment of the course SLO and the resequencing of courses to facilitate better alignment with the DNP Essentials, individual track competencies, the achievement of the DNP Portfolio and the educational preparation for certification exam success. Some of the revisions include the development of two courses to assist the students in writing their project proposal and completing the Institutional Review Board (IRB) process. The Proposal Development (NUR 909) course focuses on writing and critical thinking skills for development of a proposal for funding. Students will apply their knowledge related to evaluation of evidence and data collection to develop a proposal based on critical review of the literature that identifies gaps in knowledge and appropriate methods to address specific aims and/or objectives. In the Protection of Human Subjects (NUR 918) course provides an overview of the institutional review board process. Included are scientific integrity and ethics in clinical scholarship.

In summer of 2017, the Provost also charged the CON to conduct a thorough analysis of all DNP programs of study for efficiencies and effectiveness of teaching. Although for the past 5 years, curricular changes have been made it has been well over 10 years since a major revision/substantive change has been implemented.

Currently DNP faculty are actively engaged with making curricular improvements to improve overall efficiencies and effectiveness of teaching as well as improve time to degree rates.

**III-B. 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).**

1. Baccalaureate program curricula incorporate *The Essentials of Baccalaureate Education for Professional Nursing Practice* (AACN, 2008).
2. Master's program curricula incorporate professional standards and guidelines as appropriate.
  1. 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.
  2. All master's degree programs that prepare nurse practitioners incorporate *Criteria for Evaluation of Nurse Practitioner Programs* (NTF, 2012).
1. Graduate-entry program curricula incorporate *The Essentials of Baccalaureate Education for Professional Nursing Practice* (AACN, 2008) and appropriate graduate program standards and guidelines.
2. DNP program curricula incorporate professional standards and guidelines as appropriate.
  1. 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, 2012).
1. Post-graduate APRN certificate programs that prepare nurse practitioners incorporate *Criteria for Evaluation of Nurse Practitioner Programs* (NTF, 2012).

*Elaboration: Each degree/certificate program incorporates professional nursing standards and guidelines relevant to that program, area, role, population focus, or specialty. The program clearly demonstrates where and how content, knowledge, and skills required by identified sets of standards are incorporated into the curriculum.*

*APRN education programs (degree and certificate) (i.e., Clinical Nurse Specialist, Nurse Anesthesia, Nurse Midwife, and Nurse Practitioner) incorporate separate comprehensive graduate level courses to address the APRN core, defined as follows:*

2. *Advanced physiology/pathophysiology, including general principles that apply across the lifespan;*
3. *Advanced health assessment, which includes assessment of all human systems, advanced assessment techniques, concepts and approaches; and*
4. *Advanced pharmacology, which includes pharmacodynamics, pharmacokinetics, and pharmacotherapeutics of all broad categories of agents.*

*Additional APRN core content specific to the role and population is integrated throughout the other role and population-focused didactic and clinical courses.*

*Separate courses in advanced physiology/pathophysiology, advanced health assessment, and advanced pharmacology are not required for students enrolled in post-master's DNP programs who hold current national certification as advanced practice nurses, unless the program has deemed this necessary.*

*Master's programs that have a direct care focus but are not APRN education programs (e.g., nursing education and Clinical Nurse Leader), incorporate graduate level content addressing the APRN core. They are not required to offer this content as three separate courses.*

#### **Program Response:**

##### **The BSN and DNP remain in compliance with this Key Element**

The curricula for the BSN and DNP programs are reviewed and revised based on student evaluations, faculty expertise, information from employers and the professional nursing standards no less than every three years.

The undergraduate program is based on *The Essentials of Baccalaureate Education for Professional Nursing Practice (BSN Essentials)* (AACN 2008) and reflected in the BSN Curriculum Crosswalk. (*The BSN Essentials* (AACN, 2008) form the foundation for the undergraduate curriculum at the UKCON. The expected student learning outcomes are consistent with the roles for which the program is preparing its graduates. The BSN Program has four entry points: Traditional BSN, Second Degree BSN, MedVet BSN and RN-BSN. Teaching learning practices facilitate the achievement of the *BSN Essentials* (AACN, 2008) for example, a focus on critical thinking can be found in all courses within the curricula. All examinations and clinical experiences require students to apply knowledge gained in order to enhance their ability to make sound clinical decisions.

The DNP Program is based on: *The Essentials of Doctoral Education for Advanced Nursing Practice* (AACN,2006); *Criteria For Evaluation of Nurse Practitioner Programs* (NONPF, 2016); *Nurse Practitioner Core Competencies* (NONPF, 2017); *Population Focused NP Competencies* (NONPF, 2013); *Nurse Executive Competencies* (AONE, 2015), and *Core Practice Doctorate Clinical Nurse Specialist Competencies* (NACNS, 2009) for the respective foci. The DNP Program offers two entry points, BSN-DNP and MSN-DNP. The BSN-DNP is comprised of two advanced practice registered nurse (APRN) roles, Clinical Nurse Specialist and Nurse Practitioner. The six population foci areas available include: Adult-Gerontology Acute Care Nurse Practitioner; Adult-Gerontology Clinical Nurse Specialist; Pediatric Nurse Practitioner (acute care and primary care); Primary Care Nurse Practitioner; Psychiatric-Mental Health Nurse Practitioner; and Executive Nurse Leader Population and Organizational Systems. Separate courses in applications in advanced health assessment, pathophysiology, and advanced pharmacology for advanced practice nurses are included for the APRN Roles. The MSN-DNP option is comprised of two options, Clinical Leadership and Executive Nursing Leadership.

The University of Kentucky College of Nursing established a new off-campus instructional site, the University of Kentucky College of Nursing - Norton Healthcare Partnership (UKCON-NHC) located at 9500 Ormsby Station Road, Louisville, Kentucky 40223 and began enrolling students into the three year-full time Doctor of Nursing Practice (DNP) program in the Spring of 2014. The UKCON-NHC is not independent, it provides the same learning objectives, curricular content and experiences, and assessments as the UK CON Lexington campus, and is under the authority of UK CON. The students in the partnership are enrolled in the same as the non-partnership students. The partnership students attend classes at the Norton Health Care site while the others attend on the UK campus.

The tracks offered in the DNP program at the CON-NHC site include Adult-Gerontology Acute Care Nurse Practitioner, Primary Care Nurse Practitioner (Adult-Gerontology and Family), Executive Nurse Leadership, Population and Organizational Systems Leadership, and Family Psychiatric Mental-Health Nurse Practitioner. The tracks initially offered at the CON-NHC site included Adult -Gerontology Acute Care Nurse Practitioner and the Primary Care Nurse Practitioner (Family). Track offerings have increased to include Executive Nurse Leadership, Population and Organizational Systems Leadership, and Family Psychiatric Mental-Health tracks. Curriculum plans for each track can be found on the CON Website ( <http://www.uky.edu/nursing/academic-programs-ce/graduate/doctor-nursing-practice/bsn-dnp-option> ). The didactic portion of the curriculum is delivered through a variety of hybrid modalities including face-to-face and online classes. At both sites (Lexington and Louisville), the courses meet 4-5 times per semester face-to-face, with the remaining content accessed online through Canvas, the University of Kentucky's learning management system.

Curriculum changes that are made in the respective population foci courses are reflected in the DNP Program courses. In the fall of 2015 the didactic and clinical components of the specialty courses were separated into two separate courses to better reflect and align with the NONPF population focused competencies. The course SLOs and credit hours were revised to the following for example NUR 966 Diagnosis and Management of Psychiatric Illnesses in Adults and Elderly (didactic) and NUR 968 Clinical Management of Psychiatric Disorders in Adults and Elderly (clinical).

### **III-C. The curriculum is logically structured to achieve expected student outcomes.**

- 1. Baccalaureate curricula build upon a foundation of the arts, sciences, and humanities.**
- 2. Master's curricula build on a foundation comparable to baccalaureate level nursing knowledge.**
- 3. DNP curricula build on a baccalaureate and/or master's foundation, depending on the level of entry of the student.**

**4. Post-graduate APRN certificate programs build on graduate level nursing competencies and knowledge base.**

*Elaboration: Baccalaureate program faculty and students articulate how knowledge from courses in the arts, sciences, and humanities is incorporated into nursing practice. Post-baccalaureate entry programs in nursing incorporate the generalist knowledge common to baccalaureate nursing education as delineated in *The Essentials of Baccalaureate Education for Professional Nursing Practice* (AACN, 2008) as well as advanced course work.*

*Graduate curricula are clearly based on a foundation comparable to a baccalaureate degree in nursing. Graduate programs delineate how students who do not have a baccalaureate degree in nursing acquire the knowledge and competencies comparable to baccalaureate education in nursing as a foundation for advanced nursing education. Accelerated programs that move students from basic nursing preparation (e.g., associate degree or diploma education) to a graduate degree demonstrate how these students acquire baccalaureate level knowledge and competencies delineated in *The Essentials of Baccalaureate Education for Professional Nursing Practice* (AACN, 2008), even if they do not award a baccalaureate degree in nursing in addition to the graduate degree.*

*DNP programs, whether post-baccalaureate or post-master's, demonstrate how students acquire doctoral-level competencies delineated in *The Essentials of Doctoral Education for Advanced Nursing Practice* (AACN, 2006). The program provides a rationale for the sequence of the curriculum for each program.*

**Program Response:**

**The BSN and DNP Programs remain in compliance with this Key Element**

The BSN Program is built upon a foundation of arts, sciences, and humanities through the required 30 credit hour UK Core curriculum plan and support coursework to achieve the expected outcomes. Learning is viewed as being cumulative, with each level in the curriculum building on the previous course levels as reflected in the progression plans (<http://www.uky.edu/nursing/academic-programs-ce/graduate/doctor-nursing-practice/bsn-dnp-option> ). The CON provides three entry options to attain a Baccalaureate of Science in Nursing: a Traditional BSN, a Second-Degree /MED VET BSN, and a RN-BSN Option. The Traditional BSN curriculum is a full-time four-year degree option comprised 120 credit hours. The Second-Degree/MED VET BSN curriculum has been reviewed and beginning in January of 2019 it will be a full-time consecutive 24 month option comprised of 66 credit hours in nursing for a total of 120 credit hours. The RN-BSN curriculum is a full-time two year option comprised 66 credit hours in nursing for a total of 120 credit hours and is delivered in an online format.

The BSN-DNP option is logically structured and builds on knowledge gained in the baccalaureate nursing program to achieve expected outcomes. For example, BSN-DNP students are expected to have coursework in research/evidence based practice, theory, health assessment, pathophysiology and pharmacology in their baccalaureate program. That coursework provides the foundation for NUR 915 (Evaluating Evidence for Research and Evidence-Based Practice), NUR 924 (Concepts, Theories, and Models for Advanced Practice Nursing), NUR 923 (Applications of Advanced Health Assessment), NUR 921 (Pathophysiology) and NUR 922 (Advanced Pharmacology for Advanced Practice Nurses) courses in the BSN-DNP option. The concepts learned in those courses are reinforced in the specialty courses for example in the PMHNP courses students evaluate the evidence to identify best practices for the treatment of selected mental disorders. The BSN-DNP offers a part time (14 semesters) and full time (8 semesters) plans of study comprised of 75 credit hours (<http://www.uky.edu/nursing/academic-programs-ce/graduate/doctor-nursing-practice/bsn-dnp-option> ). The MSN-DNP is logically structured and builds on knowledge gained in the Master of Science nursing program to achieve the expected outcomes. The option offers a part time (8 semesters) and full time (5 semesters) plans of study comprised of 37-43 credit hours. The coursework for both entry options culminates into the DNP Project.

### III-D. Teaching-learning practices and environments support the achievement of expected student outcomes.

*Elaboration: Teaching-learning practices and environments (classroom, clinical, laboratory, simulation, distance education) support achievement of expected individual student outcomes identified in course, unit, and/or level objectives.*

#### Program Response:

##### **The BSN and DNP Programs remain in compliance with this Key Element**

The teaching-learning practices and environments in the CON support the achievement of the expected student learning outcomes. Although the majority of classes are held in the CON building, students in the Traditional and Second Degree/MedVet options attend classes in multiple buildings on the south end of the UK campus clustered among the six health profession colleges. To enrich the students' learning experience, all classrooms have multimedia capabilities: access to PowerPoint, the Internet, video, and audience response systems (ARS) for active learning activities. In addition, the student "LinkBlue" account allows access to Canvas, the learning management system, for the University of Kentucky, where all course materials are housed (syllabi, PowerPoints, reading assignments, BSN and DNP Resources, etc.). In addition, the larger classrooms have ECHO 360 available to record live lectures which are then made available to students via the internet and smartphones.

Using a variety of teaching and active learning methods in the classroom meets the diverse learning styles typically found in large-group higher-education classrooms. Face-to-face classroom experiences allow the student to directly interact with the instructor in real time, which facilitates clarification of concepts and prompt answering of student questions. Face-to-face instruction also provides the instructor with the ability to directly interact with students to evaluate student learning needs and adjust the content or content delivery accordingly. Classroom assignments are intended to provide opportunities for the student to gain a deeper understanding of what is being taught, apply concepts to clinical situations, and/or problem-solve using a systemic scientific process. In addition, it provides the classroom instructor with a means to evaluate student learning. High fidelity simulation provides real patient care experiences to develop high quality nursing skills while maintaining patient safety.

Consistent with state guidelines, undergraduate nursing students are guided through their clinical experiences by clinical instructors. Undergraduate clinical group sizes vary from 8 students per instructor to no more than 10. Clinical group size is based on the total number of students in the course, the level and complexity of the course in the curriculum, and clinical site factors. For example, the first inpatient-based clinical course (NUR 301 Family Centered Care of Adults with Common Health Problems) cap the clinical groups at 8 to facilitate optimal clinical laboratory supervision and best assure quality of care and patient safety. Depending on the type of clinical experience, a clinical instructor may directly supervise one inpatient clinical group (e.g., NUR 301, NUR 311 and NUR 313- Nursing Care of Childrearing Families); may have a more indirect supervisory role, travelling between community-based sites (NUR 403- Public Health Nursing ); or rotate between inpatient units in one facility (e.g., NUR 411- High Acuity Nursing). In the senior capstone course (NUR 413- Synthesis) students are assigned directly to a nurse preceptor. A faculty facilitator acts as a clinical supervisor who makes periodic site visits, conducts seminars, and evaluates student progress and performance. In all clinical courses the CON clinical instructors (or faculty facilitators) are responsible for the formal student performance evaluations based on course-level clinical objectives that support the course objectives. Clinical experiences facilitate the education-to-practice learning transfer link, allowing students to apply what they have learned in the classroom and skills laboratory, analyze real-world problems, practice clinical reasoning, and practice mental as well as psychomotor skills.

The Undergraduate Program is fortunate to have access to a wide variety of inpatient and community-based clinical sites within the immediate area. The CON has extensive clinical site agreements with high quality clinical facilities for student clinical placements throughout the area. Clinical sites are evaluated annually and are reviewed by the associate and assistant deans for undergraduate studies, undergraduate program committee and option coordinators.

Computer laboratories are available throughout the UK campus. A large onsite computer laboratory is available for all students on weekdays. In addition, the CON Building is a wireless environment, allowing students to connect to the Internet using personal electronic devices from anywhere in the building. The computer laboratory on the 6<sup>th</sup> floor of the CON building was expanded to provide increased seating and computers for classroom and testing purposes. The web-based Canvas Learning Platform is widely used throughout the UK and at the CON at all program levels. This platform facilitates synchronous and asynchronous information sharing between faculty and students, and peer-to-peer.

While the Traditional BSN and Second-Degree/MedVet BSN options do not have a distance education component for any required nursing courses, they do utilize the flipped classroom in selected courses (NUR 400- Leadership and Management and NUR 310- Research for Evidence-Based Nursing). For example NUR 310 the students watch the videos/powerpoint presentations before class. During class they participate in discussions regarding the concepts of the video using worksheets and research/EBP articles. They also complete an assignment by uploading a digital 1-2 minutes video that is related to their written policy paper and then comment on each other's videos. Another example is in NUR 400 the students listen to narrated powerpoints on Communication prior to class. During the class meeting the students engage in role playing clinical scenarios to practice effective and efficient communication skills. In another class the students watch a video about a traumatic event and how a variety of communication principles contributed to the event. The students then were assigned into groups to complete the assignment of identifying various types of communication and barriers to communication and related it to patient scenarios and how they might try to avoid those barriers in practice.

The RN-BSN option is delivered in an online format of distance education to meet the needs of the working adult learner. The flexibility inherent in distance education makes it an attractive educational option for the adult learner who has family and work responsibilities. Distance education is consistent with adult learning theory, which is based on the view that adults are mature, motivated, self-directed, independent and responsible learners who are learner-centered rather than teacher-centered (Knowles, Andragogical Model). The students in the BSN and DNP Programs including those attending the UKCON-NHC off-campus site have access to the same resources, onsite and through their University of Kentucky assigned "LinkBlue" account as well. For example, students have electronic access to UK Library system, which include the full array of electronic textbooks and journals, Cochrane Databases, Ebsco Host, PubMed search engine for peer-reviewed literature, the Cumulative Index to Nursing and Allied Health Literature (CINAHL), UptoDate, etc. Students have access to the CON librarian who is available to assist and coach the students either in groups or individually on literature searches. The librarian is also available for onsite and online tutorial or appointments can be scheduled for more in-depth sessions and assistance with curriculum/course specific literature/resource searches. Specific activities that the librarian has assisted students with include: formulating literature search strategies; providing fast interlibrary loans; helping set up Search Alerts, an automated process of checking for new results that drop into the students' email boxes; and encouraging nurses to subscribe to eTOCs whereby the tables of contents of new issues of targeted journals drop into the students' email boxes.

The UK Office of Academic Technologies & Faculty Engagement provides formal group and individual training for faculty on all new classroom technology options, such as the ARS Turning Point (clickers) system, ECHO 360 system, and Canvas learning management system. These and other training sessions are scheduled throughout the year on campus. They also provide faculty support for audiovisuals, distance learning, teaching methods, and instructional technology.

Resources for the DNP Program include those previously described for the BSN Program as well as "Zoom" web conferencing software, which is used for example, conferences with faculty and virtual office hours. Since the DNP Program is delivered as hybrid distance learning model, additional support systems are in place. For example, students and faculty have access to technical support relative to the delivery model of the program. Students have 24 hour access to the UK help desk for technology problems. Also, the CON's Information Technology staff are available for problem solving with faculty and students when problems cannot be solved at the University level. Another unique resource to graduate students in the CON is the writing specialist, who works with individual and groups of students as indicated. This resource is in addition to the support offered through UK's Writing Center. Students and faculty are trained in how to access these resources in their respective orientations. In addition, faculty and staff provide reviews and updates on the use and access of the resources for all students.

Teaching-learning practices have been developed to meet the specific needs of the adult learner. Flexibility of scheduling, access to faculty and online resources are important components of the program. In order to combine the best teaching methods, traditional face-to-face classroom experiences are blended with online interactions and assignments. A variety of teaching-learning methods are used in each option and course to accommodate different learning styles. These activities include lecture, small group work, invited speakers, student presentations, case studies, threaded discussion, and faculty designed online modules. Courses meet up to five times per semester at either the Lexington or Louisville site.

Students have the opportunity to hear from experts from UKHC, NHC, and other health profession colleges both internal and external to UK. In addition, more than one teaching-learning method is often used to help students grasp complex concepts. For example, in NUR 941 and NUR 942 (Acute-Gerontology Acute Care Nurse Practitioner Seminar I and II) the content on suturing, lumbar puncture, central line placement, and respiratory failure are presented as a lecture and then students complete a lab and simulation experience for each. In addition, significant attention is paid to scholarly writing throughout the program, as reflected by its emphasis in multiple courses throughout the program and the DNP project. The ePortfolio and assessment management system - Digication - is another resource used by all DNP students for storing their scholarly products, examples of clinical accomplishments and updated curriculum vitae throughout the course of their studies. Digication remains accessible to students post-graduation and serves as an example of their scholarly work during the job interviewing process. Students have the opportunity to formally evaluate their courses and instructors every semester to provide feedback on the usefulness of teaching-learning strategies.

Given that students do not meet on a weekly basis, an in-depth orientation has been developed for incoming students. This is designed to keep students informed about the program and the CON, obtain feedback from them, and nurture faculty-student relationships, thereby enhancing learning. Students receive information about a number of CON student resources during orientation, including library resources, IT CON consultants, the writing specialist, the UK Writing Center, Graduate Student Services and the variety of software and platforms that will be used in the program.

**III-E. The curriculum includes planned clinical practice experiences that:**

1. enable students to integrate new knowledge and demonstrate attainment of program outcomes; and
2. are evaluated by faculty.

*Elaboration: 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 in practice settings aligned to the educational preparation. Clinical practice experiences are provided for students in all programs, including those with distance education offerings. Clinical practice experiences involve activities that are designed to ensure students are competent to enter nursing practice at the level indicated by the degree/certificate program. The design, implementation, and evaluation of clinical practice experiences are aligned to student and program outcomes.*

**Program Response:**

**The BSN and DNP Programs remain in compliance with this Key Element**

The curricula for the BSN and DNP Programs have planned clinical practice experiences that enable students to integrate knowledge and demonstrate attainment of program outcomes. Students in the traditional and second-degree/MedVet BSN options have clinical experiences in adult health, obstetrics, pediatrics, psychiatric-mental, and public health which culminates in the last semester with the synthesis clinical. The students are evaluated by the faculty in each clinical experience. For example in NUR 413 (Synthesis of Clinical Knowledge for Nursing Practice) students are evaluated using a 9-item clinical evaluation form. It is completed twice during their clinical experience- mid-rotation and the final day. In order to successfully complete the clinical component all nine areas must be "passed." If at mid-rotation there is an area that falls less than what would be acceptable for passing, the student meets with the clinical faculty and the course coordinator to develop a written remediation plan. In addition, students receive feedback regarding their performance from the faculty at the end of each clinical day.

The students in the RN-BSN option have clinical experiences in their state of residence. These experiences provide opportunities to apply theoretical concepts in clinical practice. For example in NUR 451 (Population Health for Registered Nurses) students conduct a community assessment, plan, and implement evidence-based interventions to address the needs in their population of interest. In the NUR 453 (Nursing Practice Capstone Course), students choose the clinical area in which they complete 40 hours in a clinical experience. Students write their own learning outcomes, which are approved by the course faculty. At the end of the clinical experience the students disseminate the insights gained and evaluate the sites policies and practices compared to those documented in the evidence based literature. This culminates in an oral presentation to their peers.

Students in the BSN-DNP option have required clinical experiences in their respective population foci. In conjunction with their faculty they identify the clinical site and the preceptor for their clinical experience. Typhon Nurse Practitioner Student Tracking System is used to document their experiential learning activities and hours spent in the clinical setting. These are evaluated by faculty in the specialty tracts on a regular basis. The students receive written feedback from the faculty related to the alignment and meeting of the student, clinical and program outcomes with the DNP Essentials. The students have an opportunity to respond to the feedback and submit any missing information to complete the documentation. During their last semester they take NUR 930 (Problems in Advanced Practice Nursing) where in conjunction with their faculty design a clinical experience to enhance their clinical knowledge and application of advance practice nursing interventions. The documentation of their experiential learning activities and hours spent in the clinical setting are the same as mentioned previously.

**III-F. The curriculum and teaching-learning practices consider the needs and expectations of the identified community of interest.**

*Elaboration: The curriculum and teaching-learning practices (e.g., use of distance technology, didactic activities, and simulation) are appropriate to the student population (e.g., adult learners, second language students, students in a post-graduate APRN certificate program) and consider the needs of the program-identified community of interest.*

**Program Response:**

**The BSN and DNP Programs remain in compliance with this Key Element**

The BSN and DNP curricula and teaching learning practices are appropriate to the student population and the needs of the identified community of interest. The CON has defined the community of interest as students, faculty, consumers, supporters, partners (agency personnel), and alumni. The curriculum and teaching-learning practices within the BSN program are designed and revised to meet the expectations of local, regional, and national nursing administrators regarding their need for competent graduates. For example, in 2015 the CON surveyed Associate Degree Nurses in Kentucky to determine the most desirable course delivery format for obtaining their BSN. Overwhelmingly, nurses responded that they needed an online delivery format in order to advance their education while working. The CON RN-BSN faculty obtained eLearning grants from the University and with the assistance of instructional designers to transition all of the courses to be delivered in an online format. The online delivery of the RN-BSN option was first offered in August of 2015 and continues to enroll those students who otherwise would not have access to advance their education.

A couple of examples that illustrate the teaching learning practices take into consideration the needs of the COI include: the CON received a request for proposal from Select Medical in 2015 for a partnership to support their nursing workforce in 110 long-term acute care hospitals to advance their education from associate degree preparation to BSN in an online program. The CON proposal was accepted to be Select's academic partner. The first group of 11 nurses was admitted in January 2015 to the RN-BSN Track. Three of those nurses have graduated and a total of 50 nurses have been admitted to the track. The CON-Select partnership has been successful especially in the educational opportunity for the nurses; another example is the CON partnered with UKHC to provide associate degree nurses at Eastern State Hospital the opportunity to complete the RN-BSN track. Eastern State Hospital is a psychiatric hospital that is managed by UKHC. They are striving to increase their BSN-prepared nursing workforce and partner with the CON to create the Work Learning Program (WLP) support their nurses in returning to school. The WLP includes the CON providing an onsite orientation to the

RN-BSN track, onsite faculty mentoring and peer tutoring sessions, and Eastern State Hospital provides a dedicated study room in the hospital for those students and 2 hours paid weekly toward their homework. Four students were admitted into the program in August 2017 and more nurses have expressed interest in beginning within the next year.

An example in the DNP program includes the request for proposals from Norton Healthcare to offer the DNP Program for their nurses at their site. The UKCON-NHC partnership was formed in fall of 2013 after the CON went through a national competitive process. The partnership was designed to meet the needs and expectations of the community of interest and also provide a seamless transition from basic to advanced nursing practice. The first cohort was admitted in spring of 2014 for a full time program of study at the Louisville site and graduated in December 2016. Feedback received from nursing leaders locally, regionally, and nationally confirms the CON's ability to meet the needs of the community of interest. In addition, this serves as a role model for others interested in developing an Academic Practice Partnership.

**III-G. 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.**

*Elaboration: Evaluation of student performance is consistent with expected student outcomes. 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. In instances where preceptors facilitate students' clinical learning experiences, 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 clinical performance by qualified faculty applies to all students in all programs. Faculty evaluation of student clinical performance may be accomplished through a variety of mechanisms.*

**Program Response:**

**The BSN and DNP Programs remain in compliance with this Key Element**

The academic performance of students in all BSN programs of study are consistently evaluated in every course in the CON based on the course's objectives that reflect individual student learning outcomes for that course. The faculty use a variety of evaluation methods throughout the curriculum, for example, written examinations, written papers, group and individual presentations. Using a variety of evaluation methods allows faculty to assess various aspects of student learning, such as comprehension of relevant content, ability to apply knowledge, and analytic and problem solving abilities. The course syllabus is the contract between the course faculty and students for establishing expected outcomes. All syllabi include: course student learning outcomes, a summary description of the components that contribute to the course grade, the numerical scale to be used in grading and its relationship to letter grades, and an explicit statement of the weight for each component of the grade. Students are oriented to the syllabus on the first day of class, and the syllabus is made available to them at that time, either by hard copy and/or on the course Canvas platform. By UK policy, all undergraduate students receive a formal midterm grade and a final grade, both of which are uploaded into the campus grade database, allowing students to view their grades. The midterm grade serves to alert students to marginal or failing grades. Students who are failing at midterm are informed by the course instructor. The student's academic advisor and the CON's student success advisor are also alerted.

All BSN clinical courses have student clinical performance evaluation forms that vary in design and focus based on the type of clinical course; however, all are consistent with the course objectives. The student clinical performance evaluation forms are made available to students at the beginning of the semester to ensure that students have a clear understanding of performance expectations. Clinical course syllabi contain clinical policies and procedures related to student performance, such as clinical attendance and professional role expectations, dress code, clinical evaluation and grading process, consequences for cheating and plagiarism, and CPR and immunization requirements. Clinical instructors teach, observe, and evaluate the clinical performance of each student and provide a clinical evaluation at the end of each clinical rotation in each course. Clinical course coordinators may seek input from the clinical faculty or preceptors for student evaluation, and serve as resources for clinical faculty to assure consistent application of the grading criteria. The course coordinators are responsible for collation of all grading criteria and determination of the final

grades based on the course criteria. Students are formally evaluated by CON clinical instructors at two points during the semester -- midterm (formative evaluation) and the end of the semester (summative evaluation).

Students in the DNP program are consistently evaluated in each individual course by the faculty member who teaches the course. Grading policies adhered to in the CON are those of UK as outlined in the *Graduate Student Handbook 2017-2018* (pp.23

<http://www.uky.edu/nursing/sites/www.uky.edu.nursing/files/DNP%20Graduate%20Handbook%202017%202018.pdf> ) Grading expectations for courses are clearly stated in the syllabus and are based on assignments that facilitate achievement of course SLOs. Students are evaluated using a variety of methods including written papers, class participation, presentations, group projects, computer based assignments, course examinations, and case study analyses. Students in specialty courses with clinical components are also evaluated and includes NONPF-NTF criteria for faculty: student assignment ratio and preceptor qualifications. Although preceptors have input into the students' performance, faculty retain responsibility for assigning a grade for students' clinical performance. For example a minimum of once a semester faculty in the Nurse Practitioner tracks evaluate students in the clinical setting. Evidence of formative evaluation about individual student performance and progression in the program includes individual student electronic transcript information that shows course grade assignments and in the plans of study found in individual student records located in the Graduate Student Affairs office. Examples of summative evaluation of individual student learning include published papers by students enrolled in the program, IRB applications, and final DNP Project reports (<http://www.uky.edu/nursing/academic-programs-ce/graduate/doctor-nursing-practice/dnp-projects> ).

**III-H. Curriculum and teaching-learning practices are evaluated at regularly scheduled intervals to foster ongoing improvement.**

*Elaboration: 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. Curriculum is regularly evaluated by faculty and other communities of interest as appropriate. Data from the evaluation of curriculum and teaching-learning practices are used to foster program improvement.*

#### **Program Response:**

##### **The BSN and DNP Programs remain in compliance with this Key Element**

Curriculum and teaching learning practices in the BSN and DNP Programs are evaluated at regularly scheduled intervals to foster ongoing improvement as per the CON *Systematic Process for Program Evaluation* (<http://www.uky.edu/nursing/sites/www.uky.edu.nursing/files/CON%20Systematic%20process%20for%20program%20effectiveness%20%28approved%2C%20final%207-7-17.pdf> ). Faculty, preceptors, clinical sites, courses and the curriculum are regularly evaluated by faculty, with feedback solicited from other communities of interest as appropriate. Students evaluate the faculty at the end of each semester. The online surveys are anonymous and data are collected electronically. Student evaluations are also submitted as part of faculty performance evaluations. Clinical sites and clinical preceptors are evaluated by the student at the completion of the rotation via a computer based survey or paper survey. The data are reviewed by the track coordinators, associate and assistant deans' for undergraduate and DNP Programs to make informed decisions on whether to use in the future. In addition, key stakeholders (executive leadership) for academic clinical partnerships (UKHC, NHC and Select) are engaged annually with curricular and teaching-learning practices.

Curriculum changes often occur after an annual nursing workforce meeting between UKHC and the CON to address current trends and needs. Undergraduate curriculum changes occurred when UKHC leadership requested RN to BSN online offerings for their nurses as well as expanding clinical experiences during synthesis practicum or SNAP (student nursing academic practicum) for specialty areas such as interventional radiology and the O.R.

Curriculum changes in the DNP program include the addition of NUR 918 (Protection of Human Subjects) and NUR 909 (Proposal Development) course and separation of the clinical experiences from the didactic courses. All track specialty courses have a course devoted to the clinical experience which is a co-requisite to the didactic course. Another example is UKHC and NHC leadership requesting to reduce the length of time for on-

site didactic and faculty are in the process of implementing an immersion model of meeting 3 blocked days at beginning of semester and 2 blocked days at end of the semester starting summer 2018.

### **SUMMARY OF STANDARD III**

#### **STRENGTHS:**

- The BSN and DNP curricula are consistent with the program's mission, goals, and expected student outcomes
- The BSN and DNP curricula are developed, implemented and revised based on clear student learning outcomes, national standards and recommendations for improvement
- The BSN and DNP curricula are evaluated according to the CON Annual Systematic Process for Program Evaluation Plan
- The DNP curriculum builds upon the foundation of baccalaureate and/or master's education and moves logically forward to prepare graduates at the highest level of nursing practice
- The BSN and DNP student performances are evaluated continuously throughout the program of study utilizing various modalities and students are closely monitored and mentored by the faculty
- The BSN and DNP program faculty members are responsive to meeting the needs of community of interest by implementing RN to BSN online and limiting DNP on-site didactic through immersion days
- The BSN and DNP faculty members are responsive to addressing the need for efficiencies and effectiveness with teaching by conducting thorough curricular reviews and beginning change processes

#### **QUALITY ENHANCEMENT EFFORTS:**

- Strategically consider plans to expedite online options for MSN education
- Strategically consider plans to integrate select courses for collaborative learning among DNP and PhD students
- Continue to foster academic and clinical partnerships to improve curriculum and teaching-learning practices based on national trends
- Continue to explore additional academic and clinical partnerships to meet the needs of the Commonwealth and beyond
- Continue to explore opportunities for University collaboration with dual degrees (DNP, MBA; DNP, MPH) or post-baccalaureate certificates (Public Health; Behavioral Health)

## 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.

#### IV-A. A systematic process is used to determine program effectiveness.

*Elaboration: The program uses a systematic process to obtain relevant data to determine program effectiveness. The process:*

- 1. is written, ongoing, and exists to determine achievement of program outcomes;*
- 2. is comprehensive (i.e., includes completion, licensure, certification, and employment rates, as required by the U.S. Department of Education; and other program outcomes);*
- 3. identifies which quantitative and/or qualitative data are collected to assess achievement of the program outcomes;*
- 4. includes timelines for collection, review of expected and actual outcomes, and analysis; and*
- 5. is periodically reviewed and revised as appropriate.*

#### Program Response:

##### **The BSN and DNP Programs remain in compliance with this Key Element**

The CON utilizes a systematic plan for determining program effectiveness. The *CON Systematic Process for Program Evaluation (SPE)*

(<http://www.uky.edu/nursing/sites/www.uky.edu.nursing/files/CON%20Systematic%20process%20for%20program%20effectiveness%20%28approved%2C%20final%207-7-17.pdf>) is the overarching document that outlines the process of evaluation used to facilitate attainment of the BSN and DNP program outcomes. Our program evaluation efforts are designed to meet the following objectives: to develop an integrated approach to evaluation as an integral component of planning, development, and implementation; to provide data essential to monitor on-going program operations; to provide formative and summative information regarding student progress and outcomes related to student and program educational goals; and to provide data needed by administration, Kentucky Council on Post-Secondary Education, Kentucky Board of Nursing, CCNE, and funding agencies related to the achievement of mission and goals of the University and the CON. The CON PE was reviewed and updated by the Director of Accreditation and Strategic Outcomes on June, 2017. It was reviewed and approved by the Dean's Council and disseminated to the faculty and staff on July 7, 2017.

#### IV-B. Program completion rates demonstrate program effectiveness.

*Elaboration: The program demonstrates achievement of required program outcomes regarding completion. For each degree program (baccalaureate, master's, and DNP) and post-graduate APRN certificate program:*

- 1. The completion rate for each of the three most recent calendar years is provided.*
- 2. The program specifies the entry point and defines the time period to completion.*
- 3. The program describes the formula it uses to calculate the completion rate.*
- 4. The completion rate for the most recent calendar year is 70% or higher. However, if the completion rate for the most recent calendar year is less than 70%, (1) the completion rate is 70% or higher when the annual completion rates for the three most recent calendar years are averaged or (2) the completion rate is 70% or higher when excluding students who have identified factors such as family obligations, relocation, financial barriers, and decisions to change major or to transfer to another institution of higher education.*

*A program with a completion rate less than 70% for the most recent calendar year provides a written explanation/analysis with documentation for the variance.*

*This key element is not applicable to a new degree or certificate program that does not yet have individuals who have completed the program.*

**Program Response:**

**The BSN and DNP Programs remain in compliance with this Key Element**

Graduation rates are used by the BSN and DNP programs as means of evaluating program effectiveness. Graduation rates are defined by the CON as the percentage of students who graduated from a program within the designated time frame. Full-time BSN students are expected to complete the program within three calendar years of beginning their first clinical. Full-time MSN-DNP students are expected to complete the program within two calendar years from time of admission. Full-time BSN-DNP students are expected to complete the program within three calendar years from time of admission. The graduation rates for the most recent and last three calendar years are represented in Table IV B1.

**Table IV B1- Graduation Rates**

Program/Option	2014	2015	2016
Traditional BSN	90%	92%	86%
Second Degree/MedVet BSN	89%	92%	80%
RN-BSN	97%	100%	100%
DNP	89%	90%	95%

**IV-C. Licensure and certification pass rates demonstrate program effectiveness.**

*Elaboration: The pre-licensure program demonstrates achievement of required program outcomes regarding licensure.*

- 1. The NCLEX-RN® pass rate for each campus/site and track is provided for each of the three most recent calendar years.*
- 2. The NCLEX-RN® pass rate for each campus/site and track is 80% or higher for first-time takers for the most recent calendar year. However, if the NCLEX-RN® pass rate for any campus/site and track is less than 80% for first-time takers for the most recent calendar year, (1) the pass rate for that campus/site or track is 80% or higher for all takers (first-time and repeat) for the most recent calendar year, (2) the pass rate for that campus/site or track is 80% or higher for first-time takers when the annual pass rates for the three most recent calendar years are averaged, or (3) the pass rate for that campus/site or track is 80% or higher for all takers (first-time and repeat) when the annual pass rates for the three most recent calendar years are averaged.*

*A campus/site or track with an NCLEX-RN® pass rate of less than 80% for first-time takers for the most recent calendar year provides a written explanation/analysis with documentation for the variance and a plan to meet the 80% NCLEX-RN® pass rate for first-time takers. The explanation may include trend data, information about numbers of test takers, data relative to specific campuses/sites or tracks, and data on repeat takers.*

*The graduate program demonstrates achievement of required program outcomes regarding certification. Certification results are obtained and reported in the aggregate for those graduates taking each examination, even when national certification is not required to practice in a particular state.*

- 1. Data are provided regarding the number of graduates and the number of graduates taking each certification examination.*
- 2. The certification pass rate for each examination for which the program prepares graduates is provided for each of the three most recent calendar years.*
- 3. The certification pass rate for each examination is 80% or higher for first-time takers for the most recent calendar year. However, if the pass rate for any certification examination is less than 80% for first-time takers for the most recent calendar year, (1) the pass rate for that certification examination is 80% or higher for all takers (first-time and repeat) for the most recent calendar year, (2) the pass rate for that certification examination is 80% or higher for first-time takers when the annual pass rates for the three most recent calendar years are averaged, or (3) the pass rate for that*

*certification examination is 80% or higher for all takers (first-time and repeat) when the annual pass rates for the three most recent calendar years are averaged.*

*A program with a pass rate of less than 80% for any certification examination for the most recent calendar year provides a written explanation/analysis for the variance and a plan to meet the 80% certification pass rate for first-time takers. The explanation may include trend data, information about numbers of test takers, and data on repeat takers.*

*This key element is not applicable to a new degree or certificate program that does not yet have individuals who have taken licensure or certification examinations*

**Program Response:**

**The BSN and DNP Programs remain in compliance with this Key Element**

The CON takes pride in consistently exceeding state and national our *NCLEX-RN*<sup>®</sup> pass rates. The first time pass rates for all BSN graduates for years 2013-2016 exceeded the 80% benchmark (range 96-99%) as reflected in Table IV-C1.

**Table IV-C1- NCLEX-RN<sup>®</sup> Pass Rates**

Calendar Year	Number Graduating	Number Passed First Time	Percentage Passed First Time	Number to take exam	Percentage Passed
2013	186	180	97%	n/a	100%
2014	167	163	98%	n/a	100%
2015	171	169	99%	1	100%
2016	166	159	96%	7	100%
2017 (May grads only)	98	97	99%	n/a	100%

The APRN certification pass rates are reflected in Table IV-C2. The first time pass rates of 80% for the most recent calendar year was met by the FNP, AGACNP, and AGCNS. The first time pass rate for the PMHNP track in the most recent calendar year was 33%, the track met the benchmark with the inclusion of the repeat takers. The decline in first time pass rate of 80% has trended down over the past two calendar years which could be related to low number of graduates and two graduates reported becoming extremely anxious during the exam. The following plan has been instituted for the current students in the PMHNP track: timed multiple choice exams in each of the specialty courses; completion of the Barkley Diagnostic Readiness Test (DRT) at the beginning of their last specialty course; faculty will review will review the DRT results individually with the students to develop a study/review plan; and students are encouraged to participate in a certification exam review course. The first time pass rate for the PNPPC track in the most recent calendar year was 67%, the track met the benchmark with the inclusion of the repeat takers. The PNPPC first time pass rate has been trending down over the last two calendar years. This could be related to low number of graduates. The following plan has been instituted for the current students in the PNPPC track: the addition of more case studies and group work in class to address common acute illness and anticipatory guidance/growth and development to apply readings; and content is now presented in 3 ways—PPT, voiceover (full ‘presentation’), and voiceover content divided into 10 minute segments. The coordinators for both the PMHNP and PNPPC tracks will closely monitor student progress and provide additional materials if indicated. In addition, we have become aware of some faculty giving untimed open book exams. The faculty have been informed to cease this practice immediately and allowing only timed closed book exams for all courses in the DNP Program. The Associate and Assistant Deans for the DNP Program are in the process of developing a plan to more closely monitor assessment activities in the courses.

**Table IV-C2 NP Certification Pass Rates**

Exam Year	Exam	Number Taking Exam	Number Passed first time	Number passed	% passing first time	% passing	No information
2013	FNP/AANP	8	7	8	88%	100	
2014	FNP/AANP	6	5	5	83%	83%	
2015	FNP/AANP	12	8	10	67%	83%	
2016	FNP/AANP	27	27	27	100%	100%	
2017 (May grads only)	FNP/AANP	8	8	8	100%	100%	3
2013	AGACNP-ANCC/AACN	0	N/A	N/A	N/A	N/A	
2014	AGACNP-ANCC/AACN	1	1	1	100%	100%	
2015	AGACNP-ANCC/AACN	16	14	16	88%	100%	
2016	AGACNP-ANCC/AACN	36	30	30	100%	100%	6
2017 (May grads only)	AGACNP-ANCC/AACN	16	11	11	100%	100%	5
2013	AGCNS-AACN	1	1	1	100%	100%	
2014	AGCNS-AACN	0	N/A	N/A	N/A	N/A	
2015	AGCNS-AACN	4	3	4	75%	100%	
2016	AGCNS-AACN	1	1	1	100%	100%	
2017 (May grads only)	AGCNS-AACN	3	3	3	100%	100%	
2013	PMHNP-ANCC	0	N/A	N/A	N/A	N/A	
2014	PMHNP-ANCC	0	N/A	N/A	N/A	N/A	
2015	PMHNP-ANCC	3	3	3	100%	100%	
2016	PMHNP-ANCC	4	3	4	75%	100%	
2017 (May grads only)	PMHNP-ANCC	3	1	3	33%	100%	
2013	PNP-PC/PNCC	0	N/A	N/A	N/A	N/A	
2014	PNP-PC/PNCC	3	2	3	67%	100%	
2015	PNP-PC/PNCC	3	3	3	100%	100%	
2016	PNP-PC/PNCC	5	4	5	80%	100%	
2017 (May grads only)	PNP-PC/PNCC	3	2	3	67%	100%	

**IV-D. Employment rates demonstrate program effectiveness.**

*Elaboration: The program demonstrates achievement of required outcomes regarding employment rates.*

1. The employment rate is collected separately for each degree program (baccalaureate, master's, and DNP) and post-graduate APRN certificate program.
2. Data are collected within 12 months of program completion. For example, employment data may be collected at the time of program completion or at any time within 12 months of program completion.

3. The employment rate is 70% or higher. However, if the employment rate is less than 70%, the employment rate is 70% or higher when excluding graduates who have elected not to be employed.

Any program with an employment rate less than 70% provides a written explanation/analysis with documentation for the variance.

This key element is not applicable to a new degree or certificate program that does not yet have individuals who have completed the program.

#### **Program Response:**

##### **The BSN and DNP Programs remain in compliance with this Key Element**

The programs demonstrate achievement of required outcomes regarding employment rates. The students receive the university Graduating Senior Survey prior to graduation. The employment rate for students in the BSN program for each of the past three years are 100% of those who responded. This is an improvement from the last self-study which in part could be related to the increased demand for nurses and also UKHC expecting to employ 75-85% of CON graduates. During the annual UKHC and CON nursing workforce meeting, areas of opportunities are discussed for recruitment to UKHC. Recent survey results from the BSN December 2017 graduating class included the importance of knowing about scholarship opportunities earlier than later and implementing a loan payback program on day of hire.

Students in the DNP program provide employment information on the Skyfactor<sup>®</sup> end of program assessment as well as the CON post-graduation survey. The employment rates for each of the past three years are 100% of those who responded to the surveys. The response rates continues to be low however has increased slightly from 52.4% in 2015-2016 to 60% in 2016-2017. In an attempt to increase the response rate, students will receive three email reminders to complete the end of program assessment and two reminders for the post-graduation survey. During the annual UKHC and CON nursing workforce meeting, areas of opportunities are discussed for recruitment to UKHC. Sharing strategies from other academic clinical partners such as NHC to invest in own nurses for higher education and ensure placement in same organization are under review.

#### **IV-E. Program outcomes demonstrate program effectiveness.**

*Elaboration: The program demonstrates achievement of outcomes other than those related to completion rates (Key Element IV-B), licensure and certification pass rates (Key Element IV-C), and employment rates (Key Element IV-D); and those related to faculty (Key Element IV-F).*

*Program outcomes are defined by the program and incorporate expected levels of achievement. Program outcomes are appropriate and relevant to the degree and certificate programs offered and may include (but are not limited to) student learning outcomes; student and alumni achievement; and student, alumni, and employer satisfaction data.*

*Analysis of the data demonstrates that, in the aggregate, the program is achieving its outcomes. Any program with outcomes lower than expected provides a written explanation/analysis for the variance.*

#### **Program Response:**

##### **The BSN and DNP Programs remain in compliance with this Key Element**

The BSN and DNP programs demonstrate effectiveness through a variety of ways. In addition to the student program completion, licensure/certification pass rates, and employment rates, the CON assesses program student learning outcomes, student satisfaction, and employer satisfaction. The assessment of the each program's student learning outcomes is a component of the yearly reports required by the university. The BSN program assessment plan 2015-2016 report, scoring/feedback from the University Assessment Council (UAC), and 2016-2017 report is shown in Appendix IB-2. The feedback from the UAC provided information for improvement as well as indicating the assessment plan was effective and adequately evaluating the program student learning outcomes. The DNP program assessment plan, 2015-2016 report, feedback from the University Assessment Council, and 2016-2017 report is shown in Appendix IB-3. The feedback from the UAC acknowledged that while there was limited data, the assessment plan would be "excellent moving forward."

Students in the BSN and DNP programs evaluate each course at the end of the semester. For the past 10 years the CON has used CoursEval for student course and faculty evaluations. Beginning in the Summer of 2017 the university system eXplorance Blue™ will be used for student course and faculty evaluations. Faculty receive aggregate data for the both the students' rating of the course and the faculty. The students have the opportunity to answer scaled questions based on a Likert scale with 1= disagree to strongly agree=5 as well as open ended questions on what was most helpful and needed improvement for both the course and the faculty. The aggregate information is shared with the individual faculty and the associate dean of the respective programs. The information is reviewed to determine if any programmatic revisions are needed. The information is also reviewed with the faculty in the annual performance appraisal and is considered when monies for merit or salary increases are available and is a part of the faculty record.

The CON obtains feedback from employers in several ways including the Dean's Advisory Board, surveys, CON-UKHC Workforce Committee. The Dean's Advisory Board meets twice a year and members include representatives of Nursing from area hospitals. They provide feedback, both formally and informally regarding their satisfaction with the graduates of the CON and suggestions for programmatic revisions.

Employer surveys are sent out every ten years and the most recent was in 2011. The results of the surveys for both the BSN and DNP programs were overall high. For the DNP Program they rated the ability of graduates to engage in leadership to create proactive environments that improve health care outcomes highest (3.9), and graduates' ability to promote evidence-based innovations, technologies and scholarship lowest (3.1). The DNP Program committee evaluated the curriculum to determine content deficits in areas of concern and resulted in the 2015 curriculum revision. The next employer survey will be conducted in 2021 and will be reported in the self-study in 2022.

The CON-UKHC Workforce Committee meets annual. An agenda item is their satisfaction with the CON graduates. The members of the committee includes the senior leadership of both the CON and UKHC.

#### **IV-F. Faculty outcomes, individually and in the aggregate, demonstrate program effectiveness.**

*Elaboration: The program demonstrates achievement of expected faculty outcomes. Expected faculty outcomes:*

- 1. are identified for the faculty as a group;*
- 2. incorporate expected levels of achievement;*
- 1. reflect expectations of faculty in their roles and evaluation of faculty performance;*
- 2. are consistent with and contribute to achievement of the program's mission and goals; and*
- 3. are congruent with institution and program expectations.*

*Actual faculty outcomes are presented in the aggregate for the faculty as a group, analyzed, and compared to expected outcomes.*

#### **Program Response:**

##### **The BSN and DNP Programs remain in compliance with this Key Element**

Faculty outcomes in education, research, practice, and service reflect the mission of the CON. Expected faculty outcomes are congruent with the overall mission of UK. The CON faculty evaluation process occurs annually. The individual faculty member reviews their student evaluations, personal goals, accomplishments, and contributions to the CON over the past academic year. The faculty member then writes a summative statement reflecting those criteria and the goals for the following academic year. The associate dean of the respective program reviews the faculty member's documents and writes comments. Then, an appointment is arranged to discuss the evaluation. The documents are then formalized between the faculty member and the associate dean. Finally, the document is reviewed by the dean of the CON.

Copies of faculty performance evaluations are available for the Promotion, Appointment, Tenure Advisory (PATA) advisory committee in the event that the faculty member applies for high merit. Faculty members are expected to utilize the feedback from the performance evaluation to meet and exceed the goals for professional development. The reporting associate dean makes recommendations of faculty members for merit commendation based on the outcomes of the performance review process.

A faculty member who wishes to be considered for high merit must notify the dean. This review process is conducted by PATA for faculty who exceed expectations designated by their title series and rank. Excellence in instruction, service, and clinical practice are also a vital part of the process. PATA reviews the documents and makes recommendations to the dean. The dean makes the final decision as to whether or not the applicant receives high merit and informs the faculty member.

As a research intensive University, CON faculty are highly productive with scholarship and research. Faculty members in the CON are recognized locally, nationally, and internationally for their leadership and level of expertise. Over the past 5 years tenured/tenure track faculty average 2.73 extramural grant submission per year. The aggregate information for the past three years are reflected in Table IVF-1 CON Faculty Scholarship and Table IVF-2 CON Faculty Research.

**Table IVF-1 CON Faculty Scholarship**

	Published Manuscripts	Presentations	Books/Chapters
2016-2017	185	192	1/25
2015-2016	233	364	No data
2014-2015	270	329	No data

**Table IVF-2 CON Faculty Research**

	Submitted Intramural	Submitted Extramural	Awarded
2016-2017	6	44	3 IM; 13 EM
2015-2016	8	46	3 IM; 10 EM
2014-2015	13	54	5 IM; 34 EM

The mission of UK includes service. The CON faculty serve on committees at the college and university level including faculty council, PATA, program committees, faculty senate, UAC, distance learning and others. Faculty members are actively involved in a variety of professional organizations. There are eight faculty members serving on regional, national, or international boards, committees or commissions.

Seventeen faculty members have achieved the distinction of Fellows of the American Academy of Nursing. There are also seven faculty members recognized as Fellows of the American Academy of Nurse Practitioners. In addition, one faculty achieved the highest honor of the American Academy of Nursing as a Living Legend in 2017. In recognition of excellence in education, the Provost Award for Outstanding Teaching was presented to CON faculty member in 2016-2017. Sigma Theta Tau International recognized a CON faculty with an induction into the Nurse Researcher Hall of Fame.

**IV-G. The program defines and reviews formal complaints according to established policies.**

*Elaboration: The program defines what constitutes a formal complaint and maintains a record of formal complaints received. The program's definition of formal complaints includes, at a minimum, student complaints. The program's definition of formal complaints and the procedures for filing a complaint are communicated to relevant constituencies.*

**Program Response:**

**The BSN and DNP Programs remain in compliance with this Key Element**

UK and the CON have established policies for the definition and review of formal complaints. The CON considers a formal complaint to be one which cannot be resolved within the academic unit. In the past three years there has been one formal complaint which was resolved at the University Appeals Board.

**IV-H. Data analysis is used to foster ongoing program improvement.**

*Elaboration: The program uses outcome data for improvement. Data regarding completion, licensure, certification, and employment rates; other program outcomes; and formal complaints are used as indicated to foster program improvement.*

- 1.Data regarding actual outcomes are compared to expected outcomes.*
- 2.Discrepancies between actual and expected outcomes inform areas for improvement.*
- 3.Changes to the program to foster improvement and achievement of program outcomes are deliberate, ongoing, and analyzed for effectiveness.*
- 4.Faculty are engaged in the program improvement process.*

#### **Program Response:**

##### **The BSN and DNP Programs remain in compliance with this Key Element**

The CON has an extensive approach for the evaluation of assessment data. The CON SEP provides the organizing framework for systematic evaluation and includes timeframes, responsible individuals, and objectives of the evaluation plan. The CON Director of Accreditation and Strategic Outcomes initiates and reviews all of the outcome data within the CON and disseminates aggregate data to the dean, associate and assistant deans. The BSN and DNP program committees review the outcome data for the respective programs. Discrepancies between actual outcomes and expected outcomes are discussed and strategies for program improvement are identified. The information is also shared with the faculty in the respective programs to foster ongoing assessment and overall effectiveness of the identified improvement strategies. Quarterly forums are planned as “lunch and learn” activities starting spring of 2018 for all faculty, staff and student governance representatives.

The CON uses data sources such as the graduating senior survey, completion rates, NCLEX® pass rates, certification pass rates, employment rates among others to foster ongoing program improvement. Faculty and students are involved in the program improvement process for their respective program. For example, data from student course evaluations resulted in revisions of the DNP courses in 2015 and implemented in fall of 2016. The evaluation of the changes is ongoing with data from student evaluations which currently indicate the changes have been effective. Faculty continue to evaluate best practices/platforms for learning outcomes and program effectiveness such as AACN EBI MAP-Works/ Skyfactor.

## SUMMARY OF STANDARD IV

### STRENGTHS:

- CON leadership has a strong commitment for systematic evaluation of BSN and DNP student learning outcomes and program effectiveness.
- BSN student performance outcomes are strong and positive
- DNP student performance outcomes are recognized at the state and national level
- CON tenured/tenure track faculty members are highly productive with scholarship and research
- The CON has a dedicated Director for Assessment and Strategic Outcomes that is a tenured faculty member

### QUALITY ENHANCEMENT EFFORTS:

- The CON must continue to evaluate optimal platforms for systematic evaluation of BSN and DNP learning outcomes and program effectiveness such as the AACN EBI MAP-Works/Skyfactor platform (exiting students, alumni and employers)
- Evaluate the impact of the new course evaluation system eXplorance Blue™
- BSN student retention and on-time graduation rates must continue to be evaluated for critical changes such as holistic admissions and successful progression strategies
- APRN board exam rates must continue to be reviewed and improved
- CON faculty engagement with learning outcomes and program effectiveness must be stronger
- Integration of consistent clinical preceptor evaluation program (platform for orientation materials, preceptor credentials, evaluations, clinical hours) such as Typhon for BSN students
- Integration of consistent evaluation of DNP project defenses must continue to be implemented
- Integration of consistent evaluation of DNP clinical preceptors must continue to be implemented
- Increase DNP faculty outcomes in scholarship and service to optimize student learning outcomes

x The Chief Nurse Administrator has approved the program information form and completed report, and confirms its contents as of 11/30/2017. (DATE)

### Submission Instructions:

All reports must be submitted on or before the due date (but no sooner than 30 days before the due date) to ensure that the information provided is current. Email the program information form, completed report, and appendices (as one document), if any, in PDF format, to Renee Ricci at [rricci@aacn.nche.edu](mailto:rricci@aacn.nche.edu). Please do not send hard copies to CCNE.