FY2009 DEPARTMENTAL ANNUAL REPORT OF CONTINUOUS IMPROVEMENT

Department of Nursing
Fort Hays State University

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DEPARTMENTAL OVERVIEW

The Department of Nursing (DON) at FHSU has been in existence since 1952. At this time, program offerings include the Bachelor of Science in Nursing (BSN) and the Master of Science in Nursing (MSN). Traditional undergraduate students are admitted based on specific criteria, and enter the upper division major starting with the first semester of the junior year. Registered nurses who hold the Associate Degree or Diploma in Nursing can complete the BSN through online delivery. Students have clinical opportunities for learning in rural and urban areas and travel up to 3 hours for quality clinical experiences. The BSN program includes over 650 clock hours of clinical, the overwhelming majority that are directly supervised by FHSU nursing faculty.

The Master of Science in Nursing includes three specialty tracks. The <u>family nurse practitioner</u> track prepares nurses for advanced practice in primary rural health care delivery. This program is delivered through a combination of face-to-face and distance learning technology methods. One regional grant (Dane G. Hansen) and one federal grant (Department of Health and Human Services) provide scholarship support and stipends to students who commit to work in primary healthcare services in the medically underserved areas of Kansas upon graduation. The <u>nursing education</u> track prepares nurses for roles as nursing faculty in schools of nursing. The Board of Regents grant currently provides scholarship support to nurses who agree to serve as nurse educators in the state of Kansas upon graduation. The <u>nursing administration </u>track prepares advanced nurses for roles in nursing administration in hospitals, and various other health care facilities. Students in all three specialty tracks are eligible for federal traineeship scholarships through a commitment to work in rural underserved areas of Kansas upon graduation. Both of these tracks are entirely online.

The Department has experienced significant enrollment growth over the past 2-3 years as noted in the table below. During the 2006-2007 year, state funds were allocated to grow the programs to meet the demand for nurses in the state of Kansas. Starting with the fall of 2006, the department now admits up to 50% more qualified students in the on-campus BSN program each semester (30 students instead of 20 per semester). In addition, the department is prepared to increase the enrollment in the RN-BSN and the MSN program and has experienced some growth in these areas as well. Three additional faculty were hired in the summer of 2006 to support this rapid increase in enrollment through funds that were made available through action planning and strategic planning processes. During the summer of 2007, one part time faculty was hired to work exclusively in the Simulation Center. This was possible as a result of Board of Regent funding.

With budget cuts, the Department of Nursing has lost 1.5 FTE for the FY10 year, which comes at a difficult time for the nation's health. Current projections for nurses in the coming years continues to grow, yet faculty retirements are expected to increase nationwide, further illustrating the need for more nurses and nurse faculty.

During the 2008-09 year, simulation became fully integrated into the BSN curriculum. Faculty members are using simulation for clinical experiences as well as

preparation for clinical experiences. All nursing students in the BSN program practice basic nursing skills in the simulation center before they provide care to real patients. Students report that this approach helps them increase their confidence level when working with individuals and families with health care needs. Faculty members report that errors are observed and corrected in the simulation center; thereby decreasing errors in the "live" clinical environment.

Mission Statement Department of Nursing

The mission of the Department of Nursing is to provide high quality liberal arts based undergraduate and graduate education utilizing the standards of professional nursing. A major commitment of the department focuses on using unique opportunities that may include scholarship, service, and health care delivery. Advanced informational technology is integral to serving the educational needs of diverse populations in various work environments. Technology serves as a link between the rural cultures of western Kansas and the diverse global community. 6/06

Vision Statement

The Department of Nursing provides a nursing education program of excellence and distinction in this region of the US with graduates who are capable of caring for and changing the world. This is accomplished through the work of a magnet faculty unit that fosters teamwork, empowerment, and shared discovery. 6/06

Departmental Goals

The overall goals of the Department of Nursing reflect the commitment to the mission of the department and are congruent with the mission statements of the university and college. The ordering of the goals does not indicate a hierarchical priority; all goals are viewed as being important for actualizing the department mission.

1. To prepare professional nurse generalists at the undergraduate level who are capable of practicing in various settings, and who possess the foundation for graduate study.
2. To prepare expert graduate level nurses in advanced nursing.
3. To offer a nursing curriculum using advanced informational technology.
4. To improve health care delivery.
5. To prepare faculty and graduates for the future needs of a global society, while integrating a humanistic understanding of diverse populations.
6. To use the expertise of faculty and students in providing public service activities.
7. To engage faculty and students in scholarly activities and to disseminate research findings for the benefit of society and the nursing discipline.

Approved 2/27/06 Department Life Committee

Strategic planning and the development of action plans illustrate the implementation of these departmental goals. Each year the department meets for a strategic planning session retreat in January, which serves as the launch for specific action plans the following semester. The specific plans for implementation for this year are provided later in this document.

Department Productivity and Distinctive Accomplishments

The Department of Nursing was successful in earning re-accreditation and licensure approval from the Commission on Collegiate Nursing Education (CCNE) and the Kansas State Board of Nursing (KSBN) this academic year. Both the CCNE and KSBN made site visits March 9-11, 2009, which resulted in favorable written reports by both agencies that stated that all requirements for accreditation and re-licensure were met, and that no concerns or deficiencies were noted. In particular, both CCNE and KSBN were impressed with the quality of the students, faculty, and the technology in both the BSN and MSN programs. They were impressed with the degree of support for the Department and for the Chair from all levels of the organization, as well as the community and surrounding region.

Faculty productivity for scholarship and service were very good for this year. Frequently, nursing faculty work in a collaborative manner to jointly write abstracts, present papers, and write manuscripts (see table below). Service continues to be a strength of the Department, with all faculty being actively involved in departmental, university and community service.

DEPARTMENTAL PERFORMANCE METRICS

Department Performance Indicators

Key Performance Indicator	FY2005	FY2006	FY2007	FY2008	FY2009
Freshmen	57	66	61	61	57
Transfer Students	62	56	65	58	55
Undergraduate (first majors/second majors)	351/8	381/4	414/6	450/5	407/3
Graduate Majors	58	69	65	73	67
MLS Majors	4	5	8	3	5
Major Retention	60.61%	59.10%	62.60%	60.05%	59.48%
Undergraduate Student Credit Hours	3330	3532	4266	4591	4106
Graduate Student Credit Hours	740	756	762	800	939
Tenured or Tenure-track Faculty (Headcount)	13	15	16	16	17
Non Tenure-Track Faculty (Headcount)	4	5	4	5	4
Other Faculty (Headcount/Sections Taught)	0	4 =2 FTE	4 =2 FTE	4 = 2 FTE	4 =2 FTE
Undergraduate Degrees	42	43	59	60	80
Graduate Degrees	8	15	7	14	12
One goal we are working towards is the retention of students who contact our Department. This is being done in concert with the Admissions office and also internally through the work of the Recruitment Coordinator.					
Number of books, book chapters, and **refereed** articles published	19	5	3	2	2
Percent of faculty publishing **refereed** books, chapters, or articles	18%	13%	18%	20%	19%
Number of **non-refereed** articles and presentations	8	7	10	1	2
Percent of faculty publishing **non-refereed** articles or presentations	23%	20%	47%	5%	9.5%
Number of scholarly performances and other creative activities	33	17	18	19	25
Percent of faculty in scholarly performances or other creative activities	33%	17%	18%	85%	71%
Total number of external grant applications submitted/percent of faculty submitting	88%	75%	11/21 52%	5 10%	2 4%
Total number of funded external grants/percent of faculty funded	6/100%	4/12%	4/42%	5/100%	2 100%
During the fall 2008 semester and spring 2009, we have continued to utilize the "first Monday" afternoon of each month to help support scholarly activity.					

Key Performance Indicator	FY2005	FY2006	FY2007	FY2008	FY2009
Direct Outcome 1 *NCLEX-RN first time pass rate*	84%	21/28 75%	27/34 79.4%	30/35 85.7%	Dec grads only- 95% pass rate
Direct Outcome 2 *New fy 07 measure-percent of students passing ACE exit exam*	------	------	100%	100%	100%
Indirect Indicator 1 *Alumni and employer Survey responses-CHLS and DON* *(see actual data in appendix)*	-----	-----	New measure fy08	Positive, but low response rate	Positive, but low response rate
Indirect Indicator 2 *Feedback from student focus groups*	New measure fy08	-----	-----	BSN, MSN positive request for orientation	BSN, MSN positive
Senior students' Level of Academic Challenge	----	----	61.33	55.91	61.32
Senior students' Active and Collaborative Learning	----	----	41.16	41.05	53.68
Senior students' Student-Faculty Interaction	----	----	44.67	46.06	53.68
Senior students' Enriching Educational Experiences	----	----	34.07	30.35	37.92
Senior students' Supportive Campus Environment	----	----	58.85	50.44	57.25
The department faculty has discussed the items above in meetings so that a general awareness of NSSE data is known by all. We discuss/plan based on NCLEX-RN and feedback data on a regular basis, and in particular during annual retreats in January.					
Outcome/Indicator 1 *University and College Service – as measured by committee representation*	74	30	54	37	75 (campus committees- no duplication)
Outcome/Indicator 2 *Total number of papers/posters/presentations given each year*	33	29	28	14	31
We continue to support faculty in service and scholarship activities. This past year we increased the travel funds by 500.00 to help with travel expenses (via endowment funds).					

Department Quality Initiatives and Results

FY2009 Quality Initiatives	Results
Helping students learn complete a testing audit/quality improvement project during the fy09 year (also fits DON goal #1,2,5)	1. PLC will complete an audit on the testing process and will update during the fy09 year. ***This was completed, and is ongoing. A testing committee has begun to work on revising the testing process and testing booklet. This testing booklet received praise from the Kansas State Board of Nursing during the site visit.***
Implement and evaluate the use of a success strategies in nursing course.	1. Rebecca Sander is developing a course for use with students who are at risk. This course will be required for a student who has one or two nursing course failures. ***This course was offered for the first time fall of 2008, repeated spring of 2009. The outcomes have been good; we are considering including this course in the curriculum as required for all nursing BSN students (on campus). Student feedback on this course has been positive.***
Implement and evaluate the simulation family for use in the BSN and MSN programs.	1. Simulation Task Force has developed the families. Dee Johnson and Brenda Weese provided a workshop for integration of the families on August 18, 2008. 2. Faculty will begin to use the simulation family as per curriculum plan. ***During the fall of 2008, we provided a workshop on simulation development, with a year-long follow up and focus on simulation. At this time all of the undergraduate clinical courses have some simulated learning activities and some theory classes are also including simulation.***
Strategically manage and sustain growth	1. This is an ongoing goal. ***The Coordinator of Recruitment and the Departmental Coordinators have refined a marketing plan with plans for advising that is more streamlined. This new process began in the spring of 2009.***
Prepare for CCNE re-accreditation	1. Chair develop master plan for self-study creation. 2. Chair attend CCNE training class March 08 and CCNE evaluator training June 08. 3. Create timeline that includes initial call for comments from faculty and community, writing draft document, and call for comment/editing from faculty and editors. 4. Submit self-study to Dean/Assistant Provost/Provost by the end of November 2008. ***The re-accreditation visit was very successful. The DON received praise from both KSBN and CCNE for the outstanding program, faculty, students and the leadership in the Department.***

FY2010 Quality Initiatives	Responsible Party, Resources, and Plan
1. Helping students learn-revise BSN curriculum in light of new AACN Essentials for BSN education	• *Becky Sander and Christine Hober have been assigned the responsibility of serving as co-chairs of this curriculum revision.* • *All faculty who teach in the BSN program will be involved in the process of curriculum revision.* • *Timeline goal is to submit the new curriculum revisions through the FHSU and KSBN processes by May of 2010.*
2. Helping students learn-continue to explore the use of a successful strategies course in nursing and the use of simulation to aid in the understanding of nursing content.	• *Program Life Committee will evaluate the outcomes of these two projects and will make a recommendation on continuation of these two projects by May of 2010.*
3. Strategically manage and maintain recruitment and retention of nursing students in the BSN and MSN programs	• *Explore alternative activities and events to help freshmen and sophomores nursing majors become/stay connected to nursing.* • *Explore congruent, yet alternative curriculum for RN-BSN.*

Institutional Quality Results

FY2009 University Initiatives	Department Activities/Results
Increase access and retention for Hispanic students	*We have seen an increase in the number of Hispanic students in nursing. We need to work with Coordinator of Recruitment to track retention of Hispanic Nursing students.*
Increase the quantity and quality of K-12 teachers educated	*We did not participate in this initiative*
Improve undergraduate students' foundational skills	*We did not participate in this initiative*
Enhance physical wellness of students, faculty, and staff	*The Nursing Department provided educational sessions for the wellness initiative through the NURS 332 population focused care course, with leadership provided by Assistant Professor Linda Sanko.*
Internationalize the campus and curriculum	*We have had students attend international group trips and some faculty have traveled overseas for conferences/presentations.*

FY2009 STRATEGY AND OPPORTUNITIES FOR IMPROVEMENT

Departmental Reflection of Strengths, Needs, Opportunities, and Threats

Current Strengths	Current Needs
We have had a very successful CCNE and KSBN accreditation site visit and we have implemented simulation in the curriculum	We need to continue to learn about today's learners.
Future Opportunities	**Future Threats**
We need to communicate the quality of the programs in the Department and recruit today's learners.	We must successfully plan changes considering the changing face of the nursing department, so that quality in education continues to be on the forefront of what we do.

Opportunities for Improvement

Short-Term OFI	Resources Required	Expected Result and Completion Date
Revise the BSN Curriculum	We have the resources internally to revise the curriculum at this time	New curriculum report to be submitted by May 2010 to KSBN and FHSU

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Appendix A-BSN and MSN Affinity Diagrams

AFFINITY DIAGRAM
Liberal Education
FHSU General Education Program

I.   Foundational Studies
 Analysis and Communication (15 hours required)
Personal Well-Being (3 hours required)
Science, Social and Behavioral]
Upper Division Integrative Course (3 hours required)

II. Liberal Arts (37 hours required)
    A. International Studies (6 hours required)
    B. Distribution (28 hours required) [Humanities, Math and Natural

Pre-nursing Courses Taken Along with General Education Courses

Chemistry, English Comp I and II, College Algebra, Psychology, Microbiology with lab, Foundations of Nursing, Statistics, Math Calculation, Human Growth and Development, Abnormal Psychology*, Nutrition, Oral Communication, Human Anatomy & Physiology, Physiology of Humans Lab, Sociology, Pathophysiology I not required for RN-BSN
Assessment: CLA; NSSE; NET; GPA

Nursing Curriculum Plan

Fall Semester		Cr.	Junior Year	Spring Semester		Cr.
Nursing Skills Lab	310L	2		Nursing Inquiry	322	2
Nursing Practicum	311L	2		Older Adult & the Family in Retirement	330	4
*Pathophysiology II	307	2		Older Adult & Family Practicum	330L	3
Nursing Concepts	312	3		Population Focused Care	332	2
*Health Care Legal	321	1		Population Focused Care Practicum	332L	1
*Health Care Ethics	320	1		*Health Care System Policy & Cost	491	2
Health Assessment	303	2			Total	14
Health Assessment Practicum	303L	1				
Pharmacology	340	3				
	Total	13-17				
			Senior Year			
Young Adult & Childbearing Family	420	3		Middle Adult & the Launching Family	430	4
Young Adult & Childbearing Pract.	420L	3		Middle Adult & the Launching Family Pract.	430L	3
Child/Adol./& Parenting Family	422	3		Integration of Professional Nursing	431	3
Child/Adol./& Parenting Family	422L	3		Internship	431L	3
	Total	12			Total	13

*May be taken before admission

Foundational Curriculum Information

2.   Pre-nursing courses fold into the FHSU General Education courses. All strands in the undergraduate nursing curriculum acknowledge the role and value of a liberal education. Strands were identified and all courses were developed from these. Although the BSN AACN Essentials are listed in the left hand, first column, these are so intertwined within the strands and courses that only the primary and key components are listed here. Those essentials that are starred and in italics are the primary components for that named strand; the key components are bolded.

BSN Essentials 1998	Strands	Program Outcomes Junior Level	Program Outcomes Senior Level	Direct Key Assessment	Benchmark Results in appendix D
Professional Values -Caring -Altruism -Autonomy -Human Dignity -Integrity -Social Justice **Core Competencies** ***Communication* -Critical thinking ***Technical skills* **Core Knowledge** **Role Development** ***Designer/Manager/ Coordinator of Care* ***Member of a Profession*	**Leadership** Leadership, as an evolving dynamic pattern, is the ability to motivate and inspire others to form different ways of thinking, feeling, or acting. The nurse must develop leader behaviors before providing leadership to others. Leaders emerge within groups based on the situation and context.	Describe leadership behaviors. Demonstrate leader, leadership, and followership behaviors in diverse situations. Explain the social, political and economic factors of human, aggregates and organizations. Value the role of a leader.	Demonstrate leader, leadership, and followership behaviors based on an analysis of the situation and an understanding of the social, political, and economic factors of humans, aggregates, and organizations. Display the characteristics of a leader. Value the role of the leader.	N310:L: Teacher checkoffs N 420L and 422L: Day at the legislature N330L: clinical tool N491: vulnerable population assignment N430L: Clinical assignment	100% mastery 100% attendance 70% or greater 70% or greater 70% or greater
Core Competencies -Critical thinking **Core Knowledge** **Role Development** ***Designer/Manager/ Coordinator of Care* *** Provider of Care*	**Theory** Theory is a systematic abstraction of reality that is organized by words or other symbols (Chinn & Kramer, 1995). The purpose of theory may vary, however, it is organized, has a pattern and provides a basis for practice. A variety of theories are used in this curriculum to provide a basis for practice.	Select an appropriate theory in selected situations in the practice of professional nursing.	Use appropriate theories in the practice of professional nursing.	N330 Critique: Case Study N330L Clinical Care Plan N431&631L Change Project N431L Poster	70% or greater 70% or greater 70% or greater 70% or greater
Professional Values -Human Dignity -Integrity **Core Knowledge** **Info/Healthcare*	**Research** Research is a process of systematic inquiry. Multiple ways of knowing are valued. Research guides and is influenced by practice.	Select appropriate research in the practice of professional nursing. Research guides and is influenced by	Use appropriate research in the practice of professional nursing. Critique appropriate	N322 Research Critique Grading Rubric NURS 431 and 631 Change Project	70% 70%

BSN Essentials 1998	Strands	Program Outcomes Junior Level	Program Outcomes Senior Level	Direct Key Assessment	Benchmark Results in appendix D
Technologies *Ethics* **Role Development** *Designer/Manager/ Coordinator of Care*		practice.	research in the practice of professional nursing. Use the professional nursing knowledge base. Access the professional nursing knowledge base.		
Professional Values -Caring **Core Competencies** -Critical thinking -Assessment -Technical skills Information Technologies *Provider and Designer of Care* **Role Development** *Member of a profession*	**Caring** is the art, practice and science of professional caring. Caring is not only central to nursing but is also complementary to the science of caring (Watson, 1985). Caring includes but is not limited to compassion, competence, confidence, conscience, commitment, and comportment (Roach, 1984). The compassion of caring is a way of life that is developed from one's relationship with human beings. Competence includes "having the knowledge, judgment, skills, energy, experience and motivation required to respond adequately to the demands on one's professional responsibilities" (Roach, 1984, p. 22). Confidence fosters trust, communicates truth, and creates relationships of respect without dependency, violence, paternalism, fear or	Display professional caring through compassion, competence, confidence, conscience, commitment and comportment (Roach, 1984).	Display professional caring through compassion, competence, confidence, conscience, commitment and comportment (Roach, 1984) which generates movement toward self growth and self-actualization (Bevis, 1998).	NURS 330L Clinical Evaluation Tool NURS 430 L Clinical Evaluation Tool	70% 70%

BSN Essentials 1998	Strands	Program Outcomes Junior Level	Program Outcomes Senior Level	Direct Key Assessment	Benchmark Results in appendix D
	powerlessness. Conscience is a state of moral awareness that is a deliberate, intentional, meaningful response, and is a state that effects the actions of human beings on one another. Commitment is "a complex affective response characterized by a convergence between one's desires and one's obligations, and by a deliberate choice to act in accordance with them" (Roach, 1984, p. 25). Comportment is reflected in demeanor and can be symbolized in dress, language etc.				
Core Values -All of them **Core Competencies** -Critical thinking -Communication -Technical skills **Core Knowledge** **Ethics **Role Development** **Designer/Manager/ Coordinator of Care **Member of a Profession	**Professionalism** Professionalism is the essence of values, attitudes, beliefs, behavior, and actions. Within a practice discipline, the professional nurse uses education, experience, legal and ethical standards, and the context to guide practice in a variety of situations.	Demonstrate professionalism through values, attitudes, beliefs, behaviors and actions in diverse settings. Recognize the role of the professional organization and political policy making.	Display professionalism by asserting the right and responsibility to practice nursing through values, attitudes, beliefs, behaviors and actions. Value the role of the professional organization and political policy making.	KS Day at the Legislature/KANS NURS 431L NURS 430 L Clinical Eval Tool NURS 431 Change Paper	100% GPA Minimum 2.5 70% 70%
Professional Values -All of them **Core Competencies** *Communication *Critical thinking *Technical Skills	**Communication** Communication is the interchange of information between, or among two or more individuals through a system of sending and receiving messages. There are three forms of communication. The first	Demonstrate effective and therapeutic communication to interface with humans, family, aggregates or community to effect professional	Collaborate with others for effective and therapeutic communication to interface with humans, family, aggregates or community to effect professional	NURS 330L Clinical Eval Tool NURS 330L Interaction Paper NURS 430L Clinical Eval Tool	70% 70% 70%

BSN Essentials 1998	Strands	Program Outcomes Junior Level	Program Outcomes Senior Level	Direct Key Assessment	Benchmark Results in appendix D
Core Knowledge *Information/healthcare Technologies *Healthcare Systems and Policy* **Role Development** *Provider of Care *Designer/Manager/Coordinator of Care *Member of a Profession	two forms are verbal, which involves the spoken and written word, and nonverbal, which can include but is not limited to body movements, voice tone, appearance, and silence. The third form is metacommunication, which includes anything that is taken into account when interpreting what is happening. Communication can take place through various media including one-on-one, in groups, through written messages, and through technology such as telephone, computer, and faxes (Craven & Hirnle, 1996).	caring and positively influence health. Use available technology in nursing practice.	caring and positively influence health. Use available technology to influence the discipline of nursing.	NURS 431 Change Project	70%
Professional Values -All of them **Core Competencies** -Critical Thinking -Communication -Assessment -Technical Skills **Core Knowledge** -All of them **Role Development** -All of them	**Lifespan** Lifespan is the individualized state of developmental potential from birth to death encompassing the whole human being. The life span of a human being is influenced by life experiences within an individual, family, aggregate, culture, and community.	Describe the role of other health team members and the individual, family, aggregate or community. Use a knowledge of lifespan in nursing practice.	Collaborate with other health team members and the individual, family, aggregate or community to attain a state of health that is meaningful and manageable throughout the lifespan. Incorporate a knowledge of lifespan in nursing practice.	NURS 330L NURS 420L Clinical NURS 422L Eval NURS 430L Tool	70% Mean for 4
Professional Values -All of them **Core Competencies** *Critical Thinking *Communication *Assessment *Technical Skills*	**Care Process** Care Process is gathering information about health, analyzing and synthesizing data, and making judgments about nursing interventions based on the findings. Assessment includes understanding the	Demonstrate assessment of individuals, families, aggregates or communities through observation, interviews, inquiry, intuition	Generate assessment of individuals, aggregates, and community through observation, interviews, inquiry, intuition and physical	NURS 330L Last Care Plan NURS 430L Care Process Paper	70% 70%

BSN Essentials 1998	Strands	Program Outcomes Junior Level	Program Outcomes Senior Level	Direct Key Assessment	Benchmark Results in appendix D
Core Knowledge --All of them Role Development -All of them	individual, family, aggregates, or community and utilizing data from organizations and systems in planning and developing care (AACN Educational Standards and Special Projects, 1999). The nurse uses many skills to collect information, which may include observation, interview, physical examination, inquiry and intuition to assess health across the lifespan in a variety of settings. (Craven & Hirnle, 1996).	and physical examination in a variety of settings based on the analysis and synthesis of information gathered. Make judgments about planning & delivering of care. Implement and evaluate outcomes and propose change in care as necessary.	examination in a variety of settings based on the analysis and synthesis of information gathered. Coordinate planning & delivery of care. Make judgments about delivering care. Implement, evaluate and initiate change in care as necessary.		
Core Competencies *Critical thinking* Role Development *Member of a Profession*	**Learning** Learning is the gaining of knowledge by various methods, including practice, study, and instruction (Craven & Hirnle, 1996). Learning may be independent, interdependent, or experiential. Individuals have their own learning styles. Critical thinking is a major component of learning within professional education.	Participate actively as a self-directed learner. Participate in creative problem solving. Explain self-directed lifelong learning and multiple ways of knowing.	an active self-directed lifelong learning growth process using multiple ways of knowing. Appreciate a self-directed lifelong learning growth process. Exhibit critical thinking in professional practice.	# Critical thinking scores Kaplan Readiness Nsg GPA Junior Level Senior Level ACE ARNETT NCLEX-RN	Pass/Fail
Core Competencies -Critical thinking *Assessment* Core Knowledge *Health promotion* *Risk reduction* *Disease Prevention* *Illness and Disease Mgt* *Information/healthcare*	**Global Society** Global Society is the ever-changing philosophical and/or actual milieu in which nursing education and nursing practice take place. Working within the global society requires the ability to practice with diverse groups/aggregates in	Participate in providing comprehensive nursing care in an ever-changing global society by utilizing and adapting skills to meet the health care needs of diverse aggregates/groups	Collaborate to provide comprehensive nursing care in an ever-changing global society by utilizing and adapting skills to meet the health care needs of diverse aggregate/groups	NURS 332 & 332L Community Notebook Project NURS 430 and 430L Community Project	70% 70%

BSN Essentials 1998	Strands	Program Outcomes Junior Level	Program Outcomes Senior Level	Direct Key Assessment	Benchmark Results in appendix D
Technologies *Ethics* *Human Diversity* *Global Healthcare* *Healthcare Systems and Policy* **Role Development** *Provider of Care* *Designer/Manager/Coordinator of Care*	diverse locations. This also requires utilizing and adapting skills to meet the acute care, long term care, health promotion, and disease prevention needs of others.	in diverse settings.	in a variety of situations.		

Appendix A (cont). MSN Affinity Diagram

MSN ESSENTIALS	FHSU Dept Of Nursing MSN Strands, and Graduate Outcomes	Aggregate Data and Benchmarks	Core and Track Courses	Student Data
Research access current and relevant data needed to answer questions identified in one's nursing practice; utilize new knowledge to analyze the outcomes of nursing interventions, to initiate change, and to improve practice use computer hardware and appropriate software, and to understand statistics and research methods utilize information systems for the storage and retrieval of data, consistent with the particular population focus initiate a line of inquiry into comprehensive databases in order to utilize available research in the practice of nursing: and write and communicate effectively- identify a clinical problem, demonstrate an understanding of the research related to this problem, critically analyze the problem and current knowledge, and develop a strategy for the incorporation of the research into the treatment regimen	Research Employ systematic inquiry and research strategies to synthesize, evaluate and contribute to nursing knowledge that enhances evidence based nursing practice and health care. NE Track: Employ broad based holistic thinking and flexibility encompassing theory and research (repeated in research and holistic thinking)	Core NURS 895 Poster NURS 899 Thesis * NURS 897 Project 80 Track NA *NURS 899 80%* NE *NURS 870 final grade 80% NURS 899 80%* FNP *NURS 897 80%*	NURS 808: Statistics for Health Professionals (3) NURS 810: Developing Nursing Theories (3) NURS 811: Foundations for Advanced Nursing (3) NURS 812: Primary Health Promotion (2) NURS 814: Healthcare: Policy, Politics, Org. and Cost (2) NURS 817: Holistic Perspective and Health Potential (2) NURS 823: Advanced Nursing Practicum (1) *adm and education students only NURS 895: Research in nursing (3) **Track Courses: Nursing Administration Track:** NURS 861: Nursing Admin. in Complex Org. (3) NURS 862: Admin. Mgt. Nurses in Health Org.(3) NURS 876: Apprenticeship: Nursing Admin. (3) NURS 899: Thesis (3) **Nursing Education Track:** NURS 866: Teaching Strategies in Nursing (3) NURS 867: Apprenticeship: Teaching Strategies in Nursing (2) NURS 868: Curriculum Planning: Nursing Ed. (3) NURS 869: Apprenticeship: Nursing Ed. Curr. (1) NURS 870: Curriculum Evaluation: Nursing Ed. (3) NURS 899: Thesis (3)	As recommended by AACN (American Association of Colleges of Nursing) Students are to be surveyed upon graduation to measure their perceptions related to the meeting of the strands professionalism, theory, research, leadership, advanced practice roles, health care systems and holistic view. This survey includes questions related to reading scholarly articles related to their discipline as well **Post Graduate Survey (one and five years)** As recommended by AACN, students are surveyed at one and five years post graduation to solicit their perceptions related to the meeting of the strands of professionalism, theory, research, leadership, advanced practice roles, healthcare systems and holistic view and how they use these in practice. This survey includes questions related to reading scholarly articles and activities related to their discipline as well as community involvement, professional organization membership, use of databases, technology, and leadership, if certified, the legal status of their licensure, and their continuing education activity. **Employer Survey**

MSN ESSENTIALS	FHSU Dept Of Nursing MSN Strands, and Graduate Outcomes	Aggregate Data and Benchmarks	Core and Track Courses	Student Data
				The employers of our graduates are surveyed at the one and five year post graduation related to the following strands in our curriculum: **Legal and ethical behavior Research and scholarly activity (may include quality improvement) Trending and application of research findings Use of databases Ability of graduate to communicate orally and in writing Ability of the graduate to function independently in their role**

MSN ESSENTIALS	FHSU Dept Of Nursing MSN Strands, and Graduate Outcomes	Aggregate Data and Benchmarks	Core and Track Courses	Student Data
Policy, Organization, and Financing of Health Cost **Health Care Policy** analyze the results of policy research relevant to health care delivery; differentiate and delineate legislative and regulatory processes; articulate the interaction between regulatory controls and quality control with the health care delivery system; evaluate local, state and national socioeconomic and health policy issues and trends; articulate health care issues/concerns to elected and appointed officials, both public and private, and to health care consumers; serve on boards or task forces that influence health policy; interpret health care research for consumers and officials; serve as a consumer advocate on health issues; articulate and interpret the significance of the advanced practice nursing roles to policymakers, health care providers, and consumers **Organization of Health Care Delivery System** understand how various health care delivery systems are organized, inclining community and population-based systems; deliver health care services in a variety of delivery systems, including acute and	Health Care System Evaluate health care policy and finance to provide leadership in the health care system NE Display knowledge of global trends and forces impacting nursing education and led change in academia or health care Develop a purposeful knowledge and clinical performance consistent with nursing curriculum that is internally and externally congruent.	Core NURS 814 Final Grade 80% Track NE *NURS 868 & 869 80% final grade*		

MSN ESSENTIALS	FHSU Dept Of Nursing MSN Strands, and Graduate Outcomes	Aggregate Data and Benchmarks	Core and Track Courses	Student Data
ambulatory care delivery systems, and managed and integrated care systems; and provide leadership in the health care delivery system **Health Care Financing** comprehend the economic implications of health planning, the organization of personnel and resources, the design of payment systems and the outcome analysis of health care delivery or cost-effectiveness of services use basic principles of fiscal management and budgeting and health economics; analyze and monitor the cost-effectiveness of clinical decisions and make recommendations for increasing the cost-effectiveness of care; make high quality, cost-effective choices in the use of health care resources; demonstrate fiscal accountability for one's own practice while providing quality care; and develop a budget and manage resources, including knowing when to seek the services of external resources such as a lawyer or practice consultant				

MSN ESSENTIALS	FHSU Dept Of Nursing MSN strands, and Graduate outcomes	Aggregate Data and Benchmarks	Core and Track Courses	Student Data
Ethics identify and analyze common ethical dilemmas and the ways in which these dilemmas impact on patient care; evaluate ethical methods of decision making and engage in an ethical decision making process; evaluate ethical decision making from both a personal and organizational perspective and develop an understanding of how these two perspectives may create conflicts of interest; identify areas in which a personal conflict of interest may arise; propose resolutions or actions to resolve the conflict; understand the purpose of an ethics committee's role in health care delivery systems; serve on an ethics committee; and assume accountability for the quality of one's own practice.	<u>Professionalism</u> Demonstrate integrity in the profession. (this includes ethical, legal integrity, legally accountable and knowledge of standards) Initiate self responsibility for continuous **professional** learning for role flexibility and transformation in harmony with changing needs of the healthcare system and global society NE Practice as a nurse educator based on legal and ethical principles	NURS 897 or 899 Thesis or Project 80%		

MSN ESSENTIALS	FHSU Dept Of Nursing MSN strands, and Graduate outcomes	Aggregate Data and Benchmarks	Core and Track Courses	Student Data
Professional Role Development communicate with other heath care professionals; develop and work in collaborative and interdependent relationship; assume the role of advocate for consumers and change agent within the heath care system; actualize/implement the advanced practice roles of teacher, researcher, advocate, clinician, consultant, collaborator, and manager of systems; negotiate one's roles within the practice system; effect change within the health care system, not merely react to changes brought on by others- monitor changes that are occurring within the health care system, through both internal and external forces, and make appropriate changes in order to improve the system, the delivery of health care, and health care outcomes articulate the differentiated advanced practice nurses roles, such as the current roles of the nurse practitioner, clinical nurse specialist, nurse anesthetist, or certified nurse-midwife, to other health professionals, policy makers, and consumers; and advocate for the nursing profession and actively recruit potential students into the profession.	Leadership Ability to orchestrate self and others in professional nursing practice while exhibiting leadership excellence. Synthesis of masterly meta-communication in scholarly endeavors NE Track: Develop a purposeful knowledge and clinical performance consistent with nursing curriculum that is internally and externally congruent (repeated in Adv. Role) Display knowledge of global trends and forces impacting nursing education and led changes in academia or health care Advanced Practice Roles Integrate theory and research from nursing and other disciplines with developing expertise in advanced practice nursing roles. NE Exhibit a repertoire of effective teaching strategies Select a relevant teaching strategy based on multidimensional factors. Apply flexibility in adapting educational design and delivery for different technology roles Apply a range of evaluation	Core NURS 814 Legislative Paper 80% NURS 895 Proposal 80%, NURS 817 Self Change Paper 80% Track NA *NURS 876 final grade 80%* NE *NURS 866, 867, 868, 869, & 870 final grade 80%* FNP *NURS 816 Presentation 80%*		

MSN ESSENTIALS	FHSU Dept Of Nursing MSN strands, and Graduate outcomes	Aggregate Data and Benchmarks	Core and Track Courses	Student Data
	methods appropriate for programs and for students Develop a purposeful knowledge and clinical performance consistent with nursing curriculum that is internally congruent and externally.			

MSN ESSENTIALS	FHSU Dept Of Nursing MSN strands, and Graduate outcomes	Aggregate Data and Benchmarks	Core and Track Courses	Student Data
Theoretical Foundations of Nursing Practice Critique and evaluate a variety of theories from nursing and related fields; Apply and utilize appropriate theories from nursing and related fields to provide high quality health care to clients; and Understand the health care delivery system in which they practice through the application of appropriate theories.	<u>Theory</u> Design theoretical models using abstract thinking in analyzing, evaluating, and synthesizing theories and patterns of nursing practice for improving health care outcomes. <u>NE</u> Employ broad based holistic thinking and flexibility encompassing theory and research (repeated in theory and holistic thinking) Apply a variety of teaching/learning theories and educational principles in the discipline of nursing.	<u>CORE</u> NURS 899, 897, 80% TRACK NA NURS 861, 862 final grade 80% NE NURS 866, 868, 870 80% FNP NURS 897 final grade 80%		

MSN ESSENTIALS	FHSU Dept Of Nursing MSN strands, and Graduate outcomes	Aggregate Data and Benchmarks	Core and Track Courses	Student Data
Human Diversity and Social Issues Perform a community assessment, utilizing appropriate epidemiological principles; Differentiate and compare the wide range of cultural norms and health care practices of groups of varied racial and ethnic backgrounds; Define, design, and implement culturally competent health care; Ensure that systems meet the needs of the population(s) served and are culturally relevant; Recognize the variants in health, including physiological variations, in a wide range of cultural, racial, ethnic, age and gender groups that may influence the assessment and plan of care; Practice in collaboration with a multicultural work force	<u>Holistic View</u> Design and appraise evidence-based advanced nursing strategies in diverse systems Manifest global perspectives through nursing roles with sensitivity to human diversity and social issues NE Track: Employ broad based holistic thinking and flexibility encompassing theory and research (repeated in research and holistic thinking) Display knowledge of global trends and forces impacting nursing education and led changes in academia or health care	<u>Core</u> NURS 812 Community Issue Paper 80% NURS 817 PNI Paper 80% NURS 823 Grade for course 80% **Track** NA *NURS 876 final grade 80%* NE *NURS 866, 867, 868, 869, & 870 final grade 80%* FNP *NURS 816 Presentation 80%*		
Health Promotion and Disease Prevention use epidemiological, social, and environmental data to draw inferences regarding the health status of client populations, i.e., individuals, families, groups, and communities develop and monitor comprehensive, holistic plans of care of address the health promotion and disease prevention needs of client	<u>Holistic View</u> Design and appraise evidence-based advanced nursing strategies in diverse systems Manifest global perspectives through nursing roles with sensitive to human diversity and social issues <u>NE:</u> Employ broad based	<u>Core</u> NURS 812 Community Issue Paper 80% NURS 817 PNI Paper 80% NURS 823 Grade for course 80% NURS 819 Grade for course 80%		

MSN ESSENTIALS	FHSU Dept Of Nursing MSN strands, and Graduate outcomes	Aggregate Data and Benchmarks	Core and Track Courses	Student Data
populations incorporate theories and research in generating teaching and counseling strategies to promote and preserve health and healthy lifestyles in client populations foster and multidisciplinary approach to discuss strategies and garner multifaceted resources to empower client populations in attaining and maintaining maximal functional wellness influence regulatory, legislative, and public policy in private and public arenas to promote and preserve healthy communities.	holistic thinking and flexibility encompassing theory and research (repeated in research and holistic thinking) Display knowledge of global trends and forces impacting nursing education and led changes in academia or health care	<u>Track</u> NA *NURS 876 Final Grade 80%* NE *NURS 866, 876, 868, 869, Final Grade 80%* FNP *NURS 816 Presentation 80%*		

Appendix B Nursing Department Staffing Plan

(1) Position Number	(2) Projected Dept Needs	(3) Faculty Member	(4) Current Faculty Expertise	(5) Assigned FTE	(6) Current Rank (Date)	(7) Degree	(8) Track	(9) Year Entered FHSU Service
118011001	Department Chair	Connelly, Liane	Nursing Administration	1.0	Professor	PhD	Tenured	1993
118011-004	Basic nursing skills	Groth, Billie	Basic Nursing skills, leadership	1.0	Associate Professor	MSN	Tenured	1997
118011-002	Community health, pediatrics, adult health	Hober, Christine	Basic nursing skills, pediatric, community certified and medical surgical nursing	1.0	Assistant Professor	MSN	Tenure track	2003
118011-016	Gerontology, health assessment	Insley, Carolyn	Physical assessment, Medical surgical nursing, gerontology	1.0	Associate Professor	MSN	Tenured	1997
118011-012	Theory development, nursing education	Kells, Karolyn	Nursing education, theory development	1.0	Associate Professor	PhD	Tenured	1996
118011-009	Basic nursing, theory	Koerner, Dianna	Nursing and counseling, distance learning	1.0	Professor	MN, MS	Tenured	1985
118011-010	Advanced practice CNS/FNP, theory,	Moore, Carol	CNS, adm experience	1.0	Assistant Professor	PhD	Tenure Track	2006
118011-007	Pathophysiology nursing-	Morgan, Mary	Biology	0.4	Professor	PhD	Tenured	1981
118011-018	Coordinator family nurse practitioner track	Ochs, Dorothy	Family nurse practitioner	1.0	Assistant Professor	MSN	Tenure track f06	2000
118011-003	Maternal child nursing	Riffel, Kim	Nursing education, maternal child nursing	1.0	Associate Professor	MSN	Tenured	1998
118011-017	Nurse practitioner/CNS	Sanko, Linda	Clinical nurse specialist	1.0	Assistant Prof	MS, MN	Tenure track f06	2005
118011-013	High risk nursing	Sander, Rebecca	Certified case mgr, certified onc nurse, adult med/surgical nursing	1.0	Assistant Professor	MSN	Tenured	2002
118011-006	Psychiatric nursing, nursing theories	Schmidt, Sally	Nursing education	1.0	Assistant Professor	MSN	Tenured	1998
118011-007	Medical Surgical Nursing	Sonntag, Anissa	Family Nurse Practitioner	1.0	Assistant	MSN-FNP, BC	Temporary	2006
118011-011	Medical surgical and pediatric nursing	Trible, Karen	Nursing education, certified pediatric nurse	1.0	Assistant Professor	MSN	Tenure track f06	1996
118011-015	High risk, nurs administration		High risk nursing	1.0-9 months				
118071-22	Medical Surgical Nursing/ARNP	Jenny Manry	ARNP-Medical surgical	1.0- 9 mo.	Assistant	MSN	Tenure track	2007
118071-20	Program Specialist		Simulation, general practice	1.0- 9 mo				
118071-21	Nursing Education/theory	Ward, Kathleen		1.0- 12 mo	Assistant	MSN	Tenure Track	2006
118032	Nursing Faculty	Wyatt, Chavonne	general practice	.5	Instructor	BSN	Temporary	2008

Appendix C Department of Nursing Faculty Scholarly Productivity-Fiscal Year 2009

Connelly, Liane

Manry, J., Hober, C. & Connelly, L. (2009). Development of a Simulation Family. Accepted for Publication.

Manry, J., Hober, C. & Connelly, L. (2009). Simulation Development: Integration of Family Case Studies, Poster Presentation at the Mosby's Faculty Development Institute, Orlando, Florida, January 4-6, 2009.

Manry, J., Connelly, L. & Hober, C. (2008). Creation of a Simulation Family. Podium Presentation at the 5th Annual Evidence Based Practice Conference, Hays, KS.

Connelly, L., Manry, J. (2008) Using Complexity Theory in Simulation. Podium Presentation at the 35th Professional Nurse Educator Group National Conference, Kansas City.

Dane Hansen Nurse Practitioner Training Grant-52,000.00 funded

HRSA Grant-32,536.00 funded

Groth, Billie

Groth, B., Hober, C., & Sonntag, A, (2008, June). *Towards validated skills competency exhibition.* Poster session presented at the 12th International Nursing Learning Resource Centers Conference, San Jose, CA.

Hober, Christine

Hober, C., Ochs, D., & Sonntag, A. (2008). Fostering self-directed learners in adult education. Podium presentation at the Fifth Annual Multidisciplinary Practice Conference, Evidence-Based Practice: Strategies to Improve Healthcare: Hays, Kansas.

Manry, J., Hober, C., & Connelly, L. (2008). Simulation development: Integration of family case studies. Presented at the Fifth Annual Multidisciplinary Practice Conference, Evidence-based Practice: Strategies to Improve Healthcare: Hays, Kansas.

Manry, J., Hober, C. & Connelly, L. (2009). Simulation Development: Integration of Family Case Studies, Poster Presentation at the Mosby's Faculty Development Institute, Orlando, Florida, January 4-6, 2009.

Connelly, L., Manry, J., Hober, C. (2008) Using Complexity Theory in Simulation. Podium Presentation at the 35th Professional Nurse Educator Group National Conference, Kansas City.

Ochs, D., Sander, R. & Hober, C. (June 17 – 21, 2009) *Smartphones Enhance Nursing Education.* Symposium Poster Presentation at 24th Annual AANP National Conference at Gaylord Opryland, Nashville, TN

Insley, Carolyn

Insley, C. (2008, October 17). *Learning health assessment with SimMan.* Creating Jazz: Transforming Exchanges in Education & Practice, 35th Annual National Conference on Professional Nursing Education and Development. Kansas City, Missouri.

Insley, C. (February 27, 2009). *Service learning in an older adult nursing course.* Poster Session at the Association for Gerontology in Higher Education (AGHE)35th Annual Meeting and Educational Leadership Conference, San Antonio, TX.

Kells, Karolyn

Kells, K. (2008). *Patients with an orphan disorder: Pseudoxanthoma Elasticum.* Podium Presentation at the 5th Multidisciplinary Research Conference, Hays, KS.

Koerner, Dianna

Koerner, D.K. & Riffel, K. (2008) *Meshing the Works of Learning and Reality.* 35th Annual National Conference on Professional Nursing Education and Development, October 16-19, 2008 in Kansas City, MO.

Manry, Jenny

Manry, J., Hober, C. & Connelly, L., (2009). Development of a Simulation Family. Accepted for Publication.

Manry, J., Hober, C. & Connelly, L. (2009). Simulation Development: Integration of Family Case Studies, Poster Presentation at the Mosby's Faculty Development Institute, Orlando, Florida, January 4-6, 2009.

Manry, J., Connelly, L. & Hober, C. (2008). Creation of a Simulation Family. Podium Presentation at the 5th Annual Evidence Based Practice Conference, Hays, KS.

Connelly, L., Manry, J. (2008) Using Complexity Theory in Simulation. Podium Presentation at the 35th Professional Nurse Educator Group National Conference, Kansas City.

Ochs, D. & Manry J. (April 18, 2009). "*Distance Learning: A Family Nurse Practitioner Virtual Game of "Clue".* Symposium podium presentation presented at the NONPF 35th Annual Meeting in Portland, Oregon.

Moore, Carol

Non-peer reviewed: Presenter at the 3rd annual Clinical Teaching Institute, did three concurrent sessions Gathering data for oral health research.

Morgan, Mary-none

Ochs, Dorothy

Ochs, D. & Manry J. (April 18, 2009). "*Distance Learning: A Family Nurse Practitioner Virtual Game of "Clue".* Symposium podium presentation presentedat the NONPF 35th Annual Meeting in Portland, Oregon.

Hober, C., Ochs, D., & Sonntag, A. (Nov. 17, 2008). *Fostering Self-Directed Learners in Adult Education*. Symposium podium presentation presented at Nu Zeta Chapter of Sigma Theta Tau International 5th Annual Multidisciplinary Practice Conference at Fort Hays State University.

Sonntag, A., Hober, C., & Ochs, D. (July 16, 2009) *Fostering Self-Directed Learning in Adult Education*. Symposium poster presentation at Twentieth Annual Nurse Educators Conference in the Rockies.

Ochs, D., Sander, R. & Hober, C. (June 17 – 21, 2009) *Smartphones Enhance Nursing Education*. Symposium Poster Presentation at 24th Annual AANP National Conference at Gaylord Opryland, Nashville, TN

Hober, C., Ochs, D. & Sander. R. (July 17 - 18, 2008). *Portable Nursing Brain: Is a Smartphone the Answer?* Symposium poster presentation at 19th International Nurse Educators Conference in The Rockies.

Ochs, D., Sander, R. & Hober, C. (June 29, 2008). *Is a Smartphone the Answer?* Symposium poster presentation at American Academy of Nurse Practitioners 23rd National Conference, National Harbor, MD.

Riffel, Kim

Koerner, D.K. & Riffel, K. (2008) *Meshing the Works of Learning and Reality*. 35th Annual National Conference on Professional Nursing Education and Development, October 16-19, 2008 in Kansas City, MO.

Sander, Rebecca

Ochs, D., Sander, R. & Hober, C. (June 17 – 21, 2009) *Smartphones Enhance Nursing Education*. Symposium Poster Presentation at 24th Annual AANP National Conference at Gaylord Opryland, Nashville, TN

Hober, C., Ochs, D. & Sander. R. (July 17 - 18, 2008). *Portable Nursing Brain: Is a Smartphone the Answer?* Symposium poster presentation at 19th International Nurse Educators Conference in The Rockies.

Ochs, D., Sander, R. & Hober, C. (June 29, 2008). *Is a Smartphone the Answer?* Symposium poster presentation at American Academy of Nurse Practitioners 23rd National Conference, National Harbor, MD.

Sanko, Linda

Sanko, L. (2009, May). Global Health Care Begins At Home. Poster session presented at the Midwest Nursing Academy, Grand Rapids, North Dakota.

Schmidt, Sally-none

Sonntag, Anissa

Groth, B., Hober, C., & Sonntag, A, (2008, June). *Towards validated skills competency exhibition*. Poster session presented at the 12th International Nursing Learning Resource Centers Conference, San Jose, CA.

Trible, Karen

Trible, K., & Hober, C. (2008, April 5**)**. Manuscript: *Teaching clinical nursing care. Using a concept map and reflection process*. Reviewed by chief editor of *Journal of Pediatric Nursing*. Still in rewrite & submission is planned for May or June, 2009.

Trible, KA, Morgan, Dr M, Doan, JA, & Pfannenstiel, D. (Spring 09 to Fall 07). Primary investigator for Type 2 Diabetes mellitus foot screening research. *Optimization of intervals for health care provider contact with diabetics.*

Ward, Kathleen

Ward, K. (2008) *The Pathway to Understanding Evidence-Based Nursing Practice.* Podium Presentation at 5th Annual Multidisciplinary Practice Conference in Hays, KS.

Ward, K. (2009) *Inspirational Motivation* Poster Presentation, The 19th Nurse Educators Conference in the Rockies: *Inspirational Motivation* Breckenridge, CO.

Koerner, D., & Ward, K. (2008, November). *The Nightingale experience: An incredible pursuit to nursing.* Poster session presented at the Kansas Organization of Nurse Leaders meeting of the Kansas Hospital Association Annual Conference , Overland Park, KS.

Ward, K. *(2009, April). Inspirational motivation* presented at the Fort Hays State University Research and Creative Activities Day. Hays, KS.

Ward, K., Morrison, B., & Hillery, B. (2008) *The nursing 'man' demic.* Podium presentation at the 33rd Annual American Assembly for Men in Nursing Conference in New Orleans, LA.

Willhaus, Janet

Orth, D, Willhaus, J (2008) Teaching Vital Signs Using Simulation. Podium presentation at Multidisciplinary Research Day

Willhaus, J (2009) Comparison of Virtual and Live Intravenous Cannulation Success Among Novice Nursing Students. Poster presentation at Inland Northwest Research conference Spring 2009

Wyatt, Chavonne

Wyatt, C (2009) Spirituality and nursing care poster presentation. Research week, FHSU.

Appendix D Department Program Assessment and Benchmark Results

Assessment	Description	Time in Curriculum	Benchmark	Mean Scores = Passed NCLEX, ** = Failed NCLEX N=total population, n=sample
Nurse Entrance Test (NET)	Standardized test from Education Resources Incorporated, subscales Math and Reading	Prior to Admission	69% composite score	(N = 319) 72.71 (n = 156) 74.81* (n = 50) 69.22**
Grade Point Average (GPA)	0-4 scale	Prior to Admission & Graduation	2.50 on 4.00 scale	Admission GPA (N = 339) 3.21 (n = 166) 3.27* (n = 52) 3.07** Graduation GPA (N = 312) 3.34 (n = 162) 3.40* (n = 50) 3.18**
NURS 207 Pathophysiology I	Introduces the student to major concepts and commonly used terminology related to pathology in each organ system	Prior to Admission	Grade of C (2.00)	(N = 340) 3.20 (n = 166) 3.16* (n = 52) 2.77**
NURS 307 Pathophysiology II	Applies information from basic science courses, Health Assessment and Pathophysiology I to achieve understanding of selected common health impairments	First-semester of junior year	Grade of C (2.00)	(N = 333) 2.79 (n = 164) 2.87* (n = 52) 2.56**
Arnett Critical Thinking Entrance Exam (CTEE)	Arnett Development Corporation free response test using the Partial Credit Model. All test questions have an ability level assigned from the Item Response Theory model by RASCH. Designed for students entering the nursing program.	First-semester of junior year	162.31 score	(N = 242) 170.73 (n = 104) 176.77* (n = 30) 158.20**
Arnett Critical Thinking Level Exam (CTLE)	Arnett Development Corporation test that takes into account all the nursing knowledge gained by a nursing student after one academic year in the nursing program.	First-semester senior year	151.34 score	(N = 204) 138.50 (n = 109) 142.64* (n = 29) 128.21**
Arnett Critical Thinking Outcome Exam (CTOE)	Arnett Development Corporation tests how well graduate nursing students will be able to critically think when they are in their nursing settings making everyday decisions for their client's care. This does not reflect all nursing content needed to pass boards. This test will show how well students have developed as critical thinkers in the 5 core competencies	Second-semester senior year	154.53 score	(N = 146) 138.01 (n = 101) 139.66* (n = 28) 121.93**
Arnett Computer Adaptive Test (CAT)	Arnett Development Corporation diagnostic test used for determining the graduates' readiness for NCLEX; predict the graduates' success on the NCLEX-CAT	First-semester senior year required Second-semester senior year optional	0.80 score Arnett 2	**Arnett 1** (N = 225) .26 (n = 162) .35* (n = 51) .02** **Arnett 2** (N = 129) .95 (n = 101) 1.13* (n = 28) .31**
Arnett Comprehensive Exam (ACE)	Arnett Development Corporation test designed to assess the student's knowledge across the nursing program. Test is designed using the NCLEX test blue print.	Second-semester senior year after review course	110 score	(N = 78) 128.21 (n = 65) 130.05* (n = 13) 119.00**

Arnett Leadership and Management Test	Arnett Development Corporation test covers management principles used by the practicing staff nurse. Delegation and assignment are included.	RN-BSN completion students enrolled in NURS 631, Integration in Professional Nursing for the RN	34.6 norming data average	(N = 13) 31.33
Arnett Community Test	Arnett Development Corporation test covers content related to home health and community health nursing. It includes epidemiology, models, social issues, special populations, etc.	RN-BSN completion students enrolled in NURS 632, Population Focused Care for the RN.	32.3 norming data average	(N =19) 36.53
NCLEX Pass Rates	First-time and repeat test takers	After graduation	80% pass rate	See Table 5 in Standard IV
Logistic Regression Study	Dr. Arano Dr. Arano's report used LIMDEP to estimate the mode in marginal effects of specific characteristics/factors in the probability of success/failure that a student will pass/fail the NCLEX.	Report will be completed periodically		Report in Resource Room
BSN Program Evaluation Surveys	Addresses frequency and skill from a list of activities in which nurses engage and sufficiency of preparation provided by FHSU DON. Demographic data includes work, community, and ongoing educational involvement.	One-year and five-year BSN graduates and their employers	90% perform skills good to excellent with 90% reporting sufficient preparation	Results in DON Annual reports in Resource Room
MSN Program Evaluation Surveys	Addresses activities that graduates of the MSN program are expected to perform at the advanced practice level and sufficiency of preparation provided by FHSU DON. Demographic data includes work, advanced practice role, and ongoing education.	One-year and five-year MSN graduates and their employers	90% perform skills good to excellent with 90% reporting sufficient preparation	Results in DON Annual reports in Resource Room
Baccalaureate degree Grade Point Average (GPA)	0-4 scale	Prior to Admission	3.00 on 4.00 scale	(N = 281) 3.44
Miller Analogies Test (MAT)	The MAT is a high-level mental ability test requiring the solution of problems stated as analogies.	Prior to Admission	376 score	(N = 18) 402
Comprehensive Exams	Demonstrate synthesis of knowledge gained during the graduate program.	After completing core courses	Under revision by GLC	

Appendix D (cont.) RESULTS OF CRITICAL THINKING EXAMS
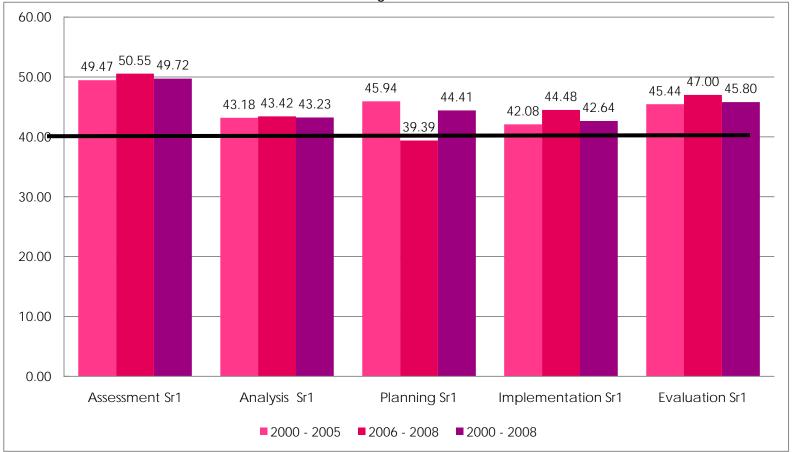
CTEE Mean	CTEE Benchmark	CTLE Mean	CTLE Benchmark	CTOE Mean	CTOE Benchmark
Mean Scores of Critical Thinking Exams All Students					
170.73	162.31	138.50*	151.34*	138.01**	154.53**
Mean Scores of Critical Thinking Exams Students that Passed NCLEX					
176.77	162.31	142.64*	151.34*	139.66**	154.53**
Mean Scores of Critical Thinking Exams Students that Failed NCLEX					
158.20	162.31	128.21	151.34	121.93	154.53

* CTLE actual student outcome is lower than CTLE expected student outcome

** CTOE actual student outcome is lower than CTOE expected student outcome
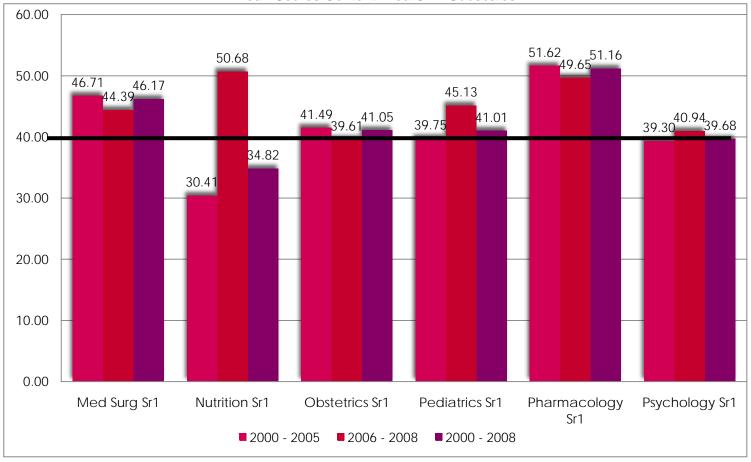
Appendix D (cont).
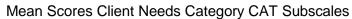
Mean Scores Nursing Process CAT Subscales

	Assessment Sr1	Analysis Sr1	Planning Sr1	Implementation Sr1	Evaluation Sr1
2000 - 2005	49.47	43.18	45.94	42.08	45.44
2006 - 2008	50.55	43.42	39.39	44.48	47.00
2000 - 2008	49.72	43.23	44.41	42.64	45.80
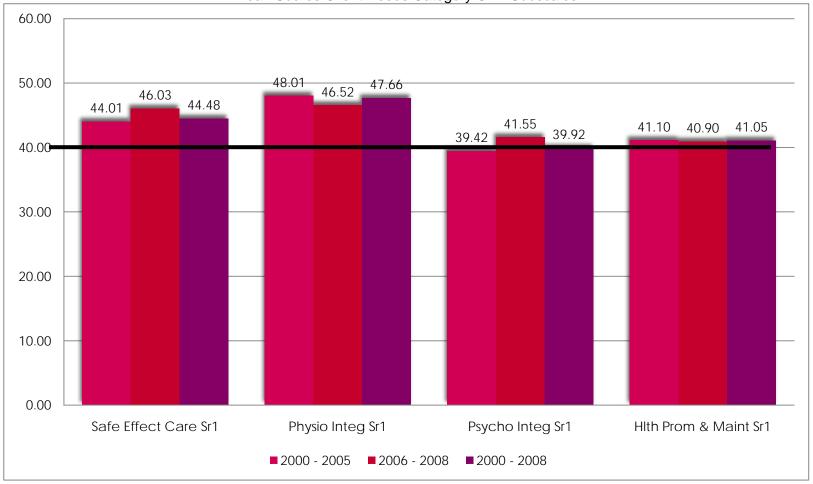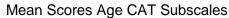
40.00 is the benchmark for all subscales

Mean Scores Content Area CAT Subscales

	Med Surg Sr1	Nutrition Sr1	Obstetrics Sr1	Pediatrics Sr1	Pharmacology Sr1	Psychology Sr1
2000 - 2005	46.71	30.41	41.49	39.75	51.62	39.30
2006 - 2008	44.39	50.68	39.61	45.13	49.65	40.94
2000 - 2008	46.17	34.82	41.05	41.01	51.16	39.68

■ 2000 - 2005   ■ 2006 - 2008   ■ 2000 - 2008

Mean Scores Client Needs Category CAT Subscales

	Safe Effect Care Sr1	Physio Integ Sr1	Psycho Integ Sr1	Hlth Prom & Maint Sr1
2000 - 2005	44.01	48.01	39.42	41.10
2006 - 2008	46.03	46.52	41.55	40.90
2000 - 2008	44.48	47.66	39.92	41.05

Mean Scores Age CAT Subscales

	Newborn Sr1	Infant Sr1	Toddler Sr1	Preschooler Sr1	School Age Sr1	Adolescent Sr1	Adult Sr1	Older Adult Sr1	Life Span Sr1
2000 - 2005	33.74	23.45	61.24	44.15	38.00	36.84	46.66	47.95	45.09
2006 - 2008	37.67	37.33	58.35	46.21	46.76	37.92	47.26	41.71	46.19
2000 - 2008	34.49	27.13	60.39	44.63	40.29	37.05	46.80	46.50	45.35

Legend: ■ 2000 - 2005 ■ 2006 - 2008 ■ 2000 - 2008

Mean Scores Systems CAT Subscales

Bar chart showing mean scores for systems CAT subscales across categories: CV Sr1, Endo Sr1, GI Sr1, Repro Sr1, Integu Sr1, Msk Sr1, Immu Sr1, Neuro Sr1, Psych Sr1, Renal Sr1, Respir Sr1, Gen Sr1. Three series: 2000 - 2005, 2006 - 2008, 2000 - 2008.

Category	2000 - 2005	2006 - 2008	2000 - 2008
CV Sr1	49.76	51.39	45.71
Endo Sr1	47.67	44.77	45.06
GI Sr1	47.54	54.39	44.41
Repro Sr1	39.54	39.52	34.89
Integu Sr1	49.95	50.57	50.53
Msk Sr1	49.82	39.48	43.13
Immu Sr1	49.69	52.04	38.91
Neuro Sr1	48.06	47.84	49.46
Psych Sr1	45.91	43.58	37.30
Renal Sr1	47.60	45.84	51.35
Respir Sr1	38.02	45.77	42.96
Gen Sr1	42.88	42.32	38.47

Appendix D (cont). BSN Benchmark Data

Strands	Direct Key Assessment	Benchmark	Results spring 2007	Results summer 2007	Results fall 2007	Results spring 2008	Results summer 2008	Results Fall 2008
Leadership	**Core**							
	N310:L: Teacher Checkoffs	100%	100%		100%	100%		100%
	N420L & 422L: Day at the Legislature	100%	88 %-12% MU			100%	100%	100%
	N330L: Clinical Tool	70%	96%		100%	92%		92%
	N491: Vulnerable Population Assignment	70%	95%-88% VC	80% VC	94%-85% VC	89% VC		85% VC
	N430L: Clinical Assignment	70%	84%		84%	87%		87%
Theory	**Core**							
	N330L Clinical Care Plan	70%	96%		100%	92%		91%
	N431&631L Change Project	70%	72.20%		83%	81%		84.80%
	N431L Poster	70%	86%		83%	84.80%		92%
Research	**Core & Track**							
	N322 Research Critique Grading Rubric	70%	94%		93%	86%		80%-90%VC
	NURS 431 7 631 Change Project	70%	72.20%		83%	81%		84.80%
Caring	**Core**							
	NURS 330L Clinical Evaluation Tool	70%	96%		100%	92%		91%
	NURS 430L Clinical Evaluation Tool	70%	94%		84%	87%		87%
Professionalism								
	KS Day at the Legislature/KA NS	100%	88 %-12% MU		100%	100%		100%
	NURS 431L	2.5 GPA	100%		100%	75%		95%
	NURS 430L Clinical Eval Tool	70%	84%		84%	87%		87%
	NURS 431 Change Project	70%	72.20%		83%	81%		84.80%
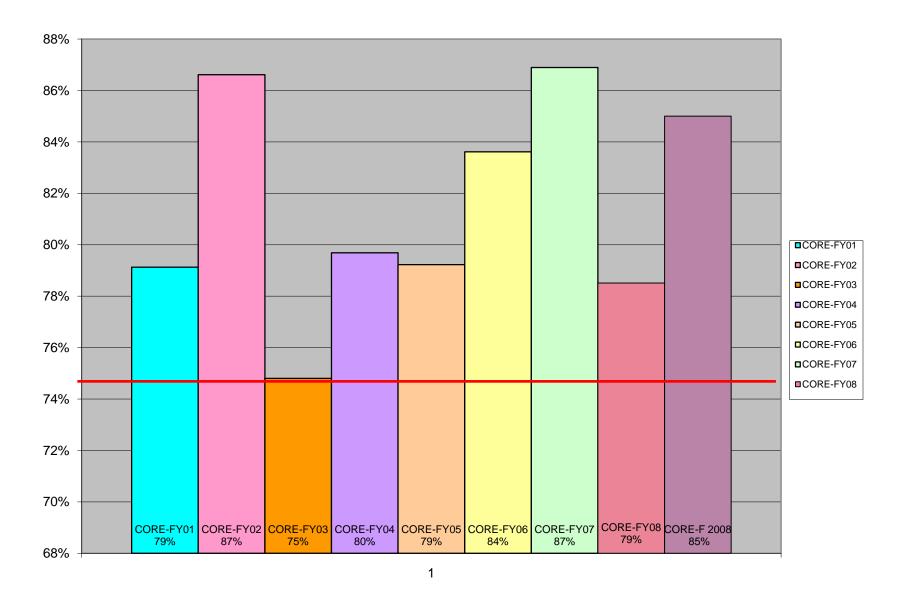
Communication								
	NURS 330L Clinical Eval Tool	70%	96%		100%	92%		91%
	NURS 330L Interaction Paper	70%	96%		100%	88%		90%
	NURS 430L Clinical Eval Tool	70%	84%		84%	87%		87%
	NURS 431 Change Project		72.20%		83%	81%		84.80%
			Sp07	Su 07	F 07	Sp 08	Su 08	F 08
Lifespan								
	NURS 330L tool		96%		100%	92%		91%
	NURS 420L Clinical	70%	82.40%		83%	82.70%		86.70%
	NURS 422L Eval	Mean for 4	81.75%		91.50%	82%		89%
	Nurs 430L Tool		84%		84%	87%		87%
Care Process								
	NURS 330L Last Care Plan	70%	96%		100%	92%		91%
	NURS 430L Care Process Paper	70%	91%		86%	93%		94%
Learning								
See Benchmark	# Critical Thinking Scores							
Date in	Kaplan Readiness NSG Gpa							
CCNE Appendix	Junior Level Senior Level	Pass/Fail						
	ACE							
	ARNETT							
	NCLEX-RN							
Global Society								
	NURS 332&332L Community Notebook Project	70%	98%		95%	95%		94%
	NURS 430&430L Community Project	70%	76%		95%	100%		100%

Appendix D (cont).
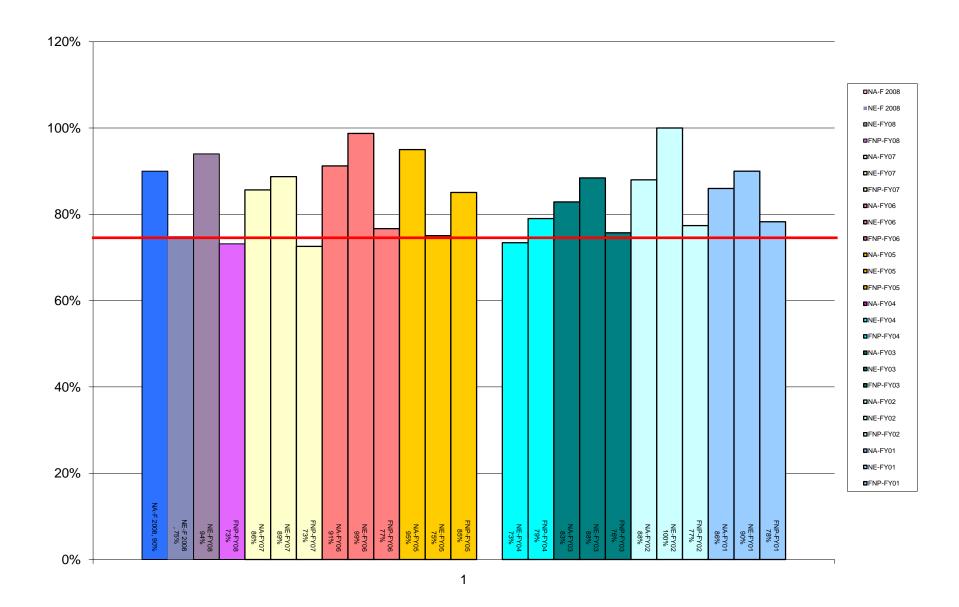
Advisor Tool Based on Logit Analysis

Prenursing students

A one percentage point increase in a student's NET score will increase the likelihood of passing the NCLEX by 0.015. (Ex. Student #1 receives a 69% comprehensive NET score and Student #2 receives a 75% comprehensive NET score. Student #2 NET score demonstrates a 6 percentage increase in the NET score so the likelihood of Student #2 passing the NCLEX will be increased to 0.09. Also, a student who scores one percentage higher in Math Skills from NET will increase the probability of passing NCLEX by 0.01 and may be a better predictor of success on NCLEX.

The GPA is also an important predictor of success on NCLEX – Students with higher NET Scores and higher GPA at admission to the nursing major are more likely to pass the NCLEX. Therefore telling advisees to be well prepared to take the NET and to complete College Algebra prior to taking the NET will benefit the student. In addition students should be advised to maintain or utilize strategies to improve the GPA before admission to the nursing program. A one scale increase in the admission GPA increases a student's probability of success on the NCLEX by 0.14.

Patho I and Patho II grades are also predictive and can be discussed with the students to indicate the importance of success in these courses. Students that receive an A in Patho I are 20% more likely to pass the NCLEX then a student that gets a Patho I grade of C and the students that receive a B in Patho I are 12% more likely to pass the NCLEX than a student that gets a C. Therefore students that have received a C in Patho I may want to reconsider retaking Patho I to improve the understanding of the material and to assist in being well prepared to take Patho II.

Patho II is according to Dr. Arano's report a significant predictor of success or failure on NCLEX. Students that earn an A are 14% more likely to pass NCLEX than students that earn a C and students that earn a B are 20% more likely to pass NCLEX than students that earn a C. Therefore being successful in both Patho I and Patho II by earning an A or B are important for student's predictive success on NCLEX.

Other variables that were tested and showed to be strong predictor of success/failure on NCLEX include: ARNETT II and Graduation GPA.

MSN Comprehensive Exams

Legend:
- NA-F 2008
- NE-F 2008
- NE-FY08
- FNP-FY08
- NA-FY07
- NE-FY07
- FNP-FY07
- NA-FY06
- NE-FY06
- FNP-FY06
- NA-FY05
- NE-FY05
- FNP-FY05
- NA-FY04
- NE-FY04
- FNP-FY04
- NA-FY03
- NE-FY03
- FNP-FY03
- NA-FY02
- NE-FY02
- FNP-FY02
- NA-FY01
- NE-FY01
- FNP-FY01

Bar values: NA-F 2008, 90% · NE-F 2008, 75% · NE-FY08 94% · FNP-FY08 73% · NA-FY07 86% · NE-FY07 89% · FNP-FY07 73% · NA-FY06 91% · NE-FY06 99% · FNP-FY06 77% · NA-FY05 95% · NE-FY05 75% · FNP-FY05 85% · NE-FY04 73% · FNP-FY04 79% · NA-FY03 83% · NE-FY03 88% · FNP-FY03 76% · NA-FY02 88% · NE-FY02 100% · FNP-FY02 77% · NA-FY01 86% · NE-FY01 90% · FNP-FY01 78%

MSN Comprehensive Exams

Appendix E RN-BSN 2008-2009 Annual Report

This report will speak to four areas: 1. Request for information from potential students regarding the RN-BSN degree completion; 2. Advanced standing procedures for graduating RN-BSN students; 3. Website for RN-BSN information; and 4. Data/status of current students.

1. Information request.
   The systems put into place last year are working well with minimal problems.
     Collaboration with Hobson's, the FHSU Admissions Office, and the Nursing Department front office manage the majority of the initial "generic" requests for   information. If there are specific questions, it is forwarded to me and I respond to the individual student. Records kept since July 08 show that a total of 141 contacts have been made via email inquiries, 72 of these received the "auto reply" and 69 were forwarded to me with specific questions.

     I receive a number of emails or phone calls directly from individuals who were referred by other RN-BSN students and via the website. These names are then sent to Joyce Dechant for entry into the system, a procedure that has worked well. To date there are 593 individuals in the RN-BSN system, 231 of this number are inquires that are now added into this data bank.

     Another significant improvement has been the ability for me to access student transcripts in my office, rather than requesting copies from the Registrar's office.

2. The procedure to giving advanced standing credits has been much improved since the initiation of the new procedure—it is now done on LotusNotes work flow.

3. RN-BSN website creation was completed in the summer of 2008 and minimal revisions have been needed. This is proving to be a tremendous asset for marketing and advising.
.
4. The number of RNs completing the BSN requirements fall 2008 was 19, the   spring 2009 was 14, making a total of 33. The number of RNs admitted to the BSN degree completion for summer 2008 was 7, fall 2008 was 10, and spring 2009 was 12, a total of 29 for this past year. In fall 2008, there were 139 enrolled.

   Goals for 2009-2010
        Make communication with those not enrolled each semester a priority.
        E-mail Newsletter at the beginning of each semester to enhance communication.

Respectfully submitted,

Carol Moore PhD, ARNP
Assistant Professor of Nursing
Coordinator, RN-BSN Outreach

Appendix F

Coordinator of Clinical Partnerships and Formative Nursing
Billie Groth, MSN, RN
End of Year Report
May, 2009

- Assumed this position in the fall of 2006.

- Initiated the process of developing a contract with Bob Wilson Memorial Hospital in Ulysses, KS to be used for preceptors.

- Initiated the process of developing a contract with Meade District Hospital in Meade, KS to be used for preceptors.

- Initiated the process of developing a contract with St. Catherine's Hospital in Garden City, KS

- Initiated the process of developing a contract with Clay County Medical Center in Clay Center, KS to be used for preceptors.

- Initiated the process of developing a contract with Mercy Regional Medical Center in Manhattan, KS to be used for preceptors. The contract is still in the process of being approved by the University lawyer.

- A student roster was distributed to all faculty and students of that level in the fall semester.

- Junior nursing representatives were elected to serve on Departmental Committees

- Worked with Sally Schmidt to get Arnett tests for this level set up for students to take.

- December 2008 progression of junior students: All but one of the first semester junior students progress to the second semester.

- May 2009 progression of junior students: Three students withdrew from the nursing program for the spring semester. Two sought re-entry and have been granted approval to begin the program again next fall.

- An orientation for the first semester juniors was developed and presented by several faculty at the beginning of each semester, to help to familiarize the students with requirements and expectations of them during the semester. It also identified expectations that they could have of the faculty.

- Continued the duties of managing the immunizations, insurance, etc. information for all levels of the program.

- Continued with the duties of Chair of the Consortium Committee.

- Continued to provide support for Formative Level faculty.

Appendix G

<div align="center">

Simulation Coordinator Report
2008-2009

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      The simulation initiative within the FHSU DON now includes simulation activities in each semester of the nursing program. New simulations were developed for Jr 1, Jr 2 and Sr 2 this year as well as for the ARNP program. All semesters of the undergraduate BSN program now have simulations incorporated into student learning. The ARNP program piloted a simulation with positive feedback which prompted requests from students for more simulations in that educational curriculum as well. The Simmons Family project started in the 2007-2008 school year was continued and simulations purchased from the Laerdal in 2007 have been adapted to portray Simmons family members.

      The department also began utilizing Blackboard as a method to provide preparation materials for students participating in simulations. The medical records for simulations in the Sr1 and Sr2 semesters were placed on Blackboard and students were given access prior to the simulations.

      During the accrediting visit from CCNE and KSBN the integration of simulation in the FHSU curriculum was listed as a significant strength for students. The accreditation team from CCNE indicated that FHSU was a leader in the area of simulation in nursing education.

      The Simulation Lab is also being increasingly utilized by students and faculty in other departments on campus. The Health and Human Performance sports medicine students utilized the lab for two weeks this semester and there is a recommendation by Dr. David Fitzhugh, program coordinator, to increase the simulation lab time to three weeks next year. Additionally Allied Health has been utilizing the simulation lab as a resource. The other departments traditionally utilize the lab when nursing students are not scheduled and this maximizes equipment use for all departments.

      Additionally there have been visits to the simulation lab by faculty and graduate students in nursing education to learn how to better use simulation in nursing curriculum. The lab was also visited this year by the Kansas Leadership Class.

Janet Willhaus MSN, RN

Appendix H Integrative Nursing
Rebecca Sander MSN RN AOCN, Acting Coordinator
End of Year Report
June 2009

- Senior nursing student representatives were elected to serve on all Departmental committees for this year.
- Arnett Testing was conducted for junior and senior level nursing students and included content tests for Pediatric, Maternal Child, Leadership & Management, Pharmacology, Skills, Comprehensive Exit Exam (ACE), CAT and Critical Thinking Exams .
- The Kaplan NCLEX review course was held in November 2008 and March 2009 at Sternberg Museum for all second semester senior students. Students completed the Arnett ACE exam following the Kaplan course.
- Employee recruitment of senior nursing students included personnel from Hays Medical Center and Salina Regional Medical Center.
- NCLEX and KSBN information was dispersed to second semester senior students. A short information session was held to assist students in completion of forms for NCLEX and board applications.
- Pictures for Stroup Hall composite pictures and nursing pin order forms were made available to senior students.
- Two meetings with clinical faculty were held during the semester. The second meeting was a consortium meeting with all faculty who use the sim/skills lab to make a schedule for the 2009-2010 academic year.
- December 2008 progression of senior students: Two first semester senior students did not progress to second semester senior courses and repeated first semester senior curriculum during Spring 2009. One second semester senior student did not pass senior two curriculum and will be repeating senior two in Spring 2009. 21 senior students completed coursework and were eligible to take boards. December 2009 first time state board pass rate was 95%.
- Spring 2009 progression of senior students: One student was added to the senior one roster repeating maternal course work and one student was added to senior two semester repeating senior two curriculum. Six first semester senior nursing students did not successfully complete senior one curriculum and therefore will not be allow to progress. All 27 senior two nursing students successfully complete senior two semester and will be eligible to take boards upon graduation.

Appendix I

Report from Coordinator on Recruitment 2008-2009

In July work continued on a brochure for the undergraduate nursing program which was completed and printed by early spring. Work was then started on a brochure for the graduate program but has come to a standstill until the new branding has been finalized. Work also continued on implementing a strategic marketing plan for the DON. COR and DON Chair reviewed committee documents and discussed implementation of marketing timeline. Faculty orientation to the new communication plan for the DON was planned for this spring. As of mid spring marketing activities were fairly well on the mark. Additional time to assess the timeline and the implementation of the plan will need to be a conscious effort in the DON. The COR worked with faculty to update the undergraduate and graduate web pages. Final editorial changes will be in early summer with the last of the changes happening after the switch to the new branding for FHSU web pages in the fall.

In September COR participated in Career Fair at FHSU with a manned booth. New freshmen nursing students and N280 students were required to attend and there were very positive responses from most of them about attending hospital booths. They found out about salaries and benefits they didn't know about and other information which encouraged them want to stay with nursing. In October, COR attended the KANS convention which also continues to be a good event for us to attend and the Ellsworth Opportunity Fair for the first time where COR was able to converse with high school students and some community people about careers in health care and nursing. In November the COR attended the KAHSA Convention again providing information mostly on the graduate program. The Career Fair at Bethel provided many associate degree nursing students with information on our RN-BSN offering. Heaviest contact with prospective students was at the KANS convention and Day at the Legislature.

9/17/2008	FHSU Career Fair	51
9/25/2008	Butler Co. Career Fair	21
10/1/2008	Ellsworth Opportunity Fair	128
10/16/2008	Ks Assoc. of Nursing Students	154
11/5/2008	Ks. Assoc. for Homes & Services	30
11/9/2008	Bethel College	42
2/11/2009	Day at the Legislature	161
2/25/2009	FHSU Career Fair	60
2008-2009	Total Off-Campus Contacts	647

In late November, the COR received a list from Admissions listing those students who applied to FHSU interested in nursing who had an ACT of 21 or higher. Faculty took those forms and then called these students in the evenings to see if they were coming to FHSU majoring in nursing. Faculty discussed AOA and other university scholarships/awards as applicable and answered students' questions. About 90 students were reached by direct calling. The COR worked diligently all year to make students aware of the AOA awards. This year 59 applicants were processed with 27 accepting, 27 rejecting AOA or not responding back and 5 that were denied AOA.

This semester we again held the Nightingale Experience and it was again a big success. Plans for next year are already underway but lack of financial support from sponsoring agencies may put this event in jeopardy. Lesley and COR worked to send letters to 370 high school counselors, 87 potential sponsoring agencies and 50 interested high school students by December 1. We had 41 junior/senior students attend. The "Survivor" activity was again a success with only minor changes suggested for next year. In the evening we also continued to conduct an "in the dorm" activity of stuffing a FHSU tiger

instead of going to a planned community event. This also received positive comments from students' evaluations. A video of this entire experience is on our nursing webpage and a CD of the pictures was sent to each Nightingale participant. Many thanks to our "in-house" CD producer Kathleen Ward who spent many hours producing the CD. We had a good turnout for Tiger/Family Day!! We had at least 37 high schools students come through and brought their families for a tour.

COR did not attend the Graduate Nurses Admission Professionals meeting this year due to budget constraints which is held just prior to the NSNA convention.   COR was again re-elected as secretary for this coming year. This group maintains a vigorous listserv throughout the year on mostly graduate recruitment/retention issues.

Another strategy for marketing was the tie in with the Hobson system for contacting students.   Dr. Connelly and COR developed four greetings that are addressed to potential nursing students and will be sent out at arranged intervals in the recruitment process. No word yet on when this will be initiated.

Through the nursing email account "Contact Us" on our website, we responded to 105 inquiries of which 72 were forwarded to respective coordinator and 26 students were sent packets. In April a specific letter developed and sent to those inquiries that were highly interested in our nursing program. Since then we have had 7 replies of continued interest. Additionally, Lesley sent an email containing a contact letter and curriculum to 546 "orphan" students who have made contact with us at one time or another but had not contacted the university. We received back 42 responses of which 24 were enrolled while 2 have yet to be enrolled. Three students changed their major and one plans on being a transfer student later on. There were twelve who stated they planned to enroll but have not enrolled as of this date. A second email has been sent to them to inquire about their plans for the fall. For those who do not respond to this email, a personal call will be made.

With the increase in advising this last semester, the COR would like to provide this information. The COR worked with her advisees and those of Sally Schmidt with the help of Rebecca Sander as needed. This totaled 116 advisees. Efforts were made by the COR to address 31 students' poor academic grades at midterm (earning grade of D or U or more). Currently, 18 of the 31 students have enrolled for F09 while 13 have not. This leaves 85 students with grades of C or higher for the semester. Advising took a great deal of time and the support of the DON and Dean was greatly appreciated.

Summary Data on Recruitment:

During the school year, faculty was highly involved in seeing prospective undergraduate students, especially in attending SRP events, and graduate students. Sometimes this was strictly through email. Accurate accounting of this type of activity is limited. Joyce has been keeping a log of the students who come to campus and want a visit with a DON faculty member. This year faculty had personal interviews with over 168 prospective students. In addition, BSN and MSN packets were distributed limitedly as in the past per request of Department Chair as information is on the Internet.

Undergraduate data related to significant increase in enrollment: (as best that can be determined by computing center and our records)

	2004—Data as of June 2005	2005—Data as of June 2006	2006— Data as of June 2007	2007—Data as of June 2008	2008—Data as of June 2009
Total number of pre-enrolled fall students majoring in undergraduate nursing (freshmen and sophomores)	104	104	143	153	143

Undergraduate data: (data from Admission's email)

	Fall 2005	Fall 2006	Fall 2007	Fall 2008	Fall 2009 * estimate
Number of freshmen admitted	104	92	83	90	113
Number of freshman Enrolled	53	53	74	51	51
Number of transfers admitted	12	33	18	20	15
Number of transfers enrolled	4	12	5	10	3

*Not all students may be pre-enrolled at this time—as of 6-09

MSN Graduate data related to significant increase in enrollment:

	2007	2008	2009
Admitted	131	109	145
# Graduated so far from that year	7	14	12
Inactive	55	55	77
Progressing	76	54	68
Dismissed	1	1	1
Withdrew	?	12*	9*

 *Students don't always tell us if they withdraw.

Goals for 2008-2009:

To establish and implement an effective marketing plan. ***Plan developed and initiation begun.***

To have the DON website entirely updated and strategies developed to make sure it stays that way. ***Mostly completed at this time.***

To continue the graduate orientation day every other year or maybe consider to do it yearly. ***No further action on this goal.***

To maintain consistency in what is told to, sent to or viewed by the students. ***Improvements made in this area.***

To develop a uniform email attachment letter for undergraduate, RN-BSN and graduate inquires. ***Completed for undergraduate and RN-BSN but still working on graduate letter.***

To assess why attrition rate has increased in the nursing program as the loss of each student should be evaluated as it does cost the DON a certain amount of money. ***Reasons for loss of students not clearly assessed but proactive approach has been the course taught by Rebecca Sander. Outcomes from that approach will need time (several years) to evaluate.***

Goals for 2009-2010:

To continue to implement an effective marketing plan and evaluate outcomes of each marketing strategy.

To have the DON website entirely updated after change to new branding format and strategies developed to make sure it stays that way.

To develop a uniform email attachment letter for graduate inquires.

To continue to attend significant career fair/convention activities that markets our nursing program.

To utilize DON and Hobson methods of contacting potential nursing students.

To initiate a calling night to contact potential Nursing Education students from inquiry list.

Respectfully submitted,

Dianna K. Koerner, Coordinator of Recruitment
Ad hoc Chair of Marketing Committee

Appendix J

<div align="center">

Coordinator of Nursing Education Track
2008-2009 Report
Karolyn Kells, RN, PhD

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<u>Three-year Goals Developed and Approved:</u>

A. Search, select and use one new major management/organization skill per year
B. Attend conferences to update and augment coordinator responsibilities
C. Develop, grow and maintain Nursing Education Track
D. Develop a Nursing Education Track web page
E. Compare and contrast Nursing Education Track Outcomes to the Outcomes for NLN Nsg Ed certification program as requested by CCNE (added 5/09)

Report for 2008-2009
Goal #A

1. In October 2008 a log was developed for all new inquiries. There were 55 students who either called or e-mailed to ask questions about the NE track. As of June 4, 2009, 7 of these are actively pursuing admission.

2. I have served on the team that called inquiry students for the undergraduate program. Following this strategy, I have asked Dianna Koerner to include at least one calling night for students for the Nursing Education track.

3. I plan to attend the Nsg Ed Certification review in CO in Aug. to update my knowledge for the track.

Goal #B

4. During the summer and fall of 2008, I attended two Fred Prior Conferences on leadership/coordinator responsibilities.

5. During the summer of 2008 I attended a national Plexus Conference for Nursing Education on complexity theory. Complexity theory is becoming very important in nursing education and is therefore rapidly becoming critical knowledge for nursing education accreditation. I have read two textbooks on complexity theory

Goal #C

6. There are 146 Graduate students in the program. Of these students, 59 are Nursing Education track students with 38 of these actively taking courses. There are a about 5 students that are out-of-sequence that should show up again next academic year, 2009-2010 and the one following 2010-2011.

7. I attended two large conferences to recruit graduate students: Kansas Nurses' Day at the Legislature and Kansas State Nurses Association.

8. I changed how students enter the track. When their enrollment for the track comes to me in Tiger Tracks, I sent that student an e-mail asking that they set up a telephone conference with me. I gave each one a one-on-one orientation to the track.
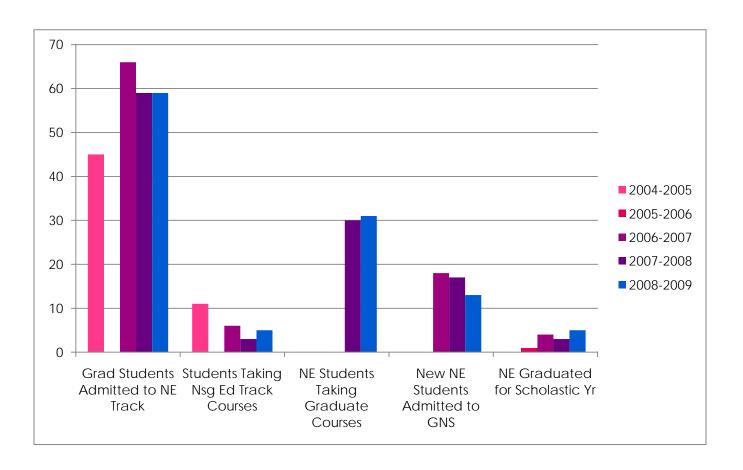
Goal #D

9. The Nursing Education web page is completed. Since the web page was completed I have received double the amount of direct phone calls asking for more information about the track.

10. After piloting #8 during this scholastic year, I am using what I learned to develop an on-line orientation to the track. For this coming, 2009-2010 year, I will be piloting the new orientation plan.

Goal #E

11. While the CCNE accreditation visitors were here in 3/09, I conferences with them regarding the lack of standardized Nsg Education guidelines. They agreed that I could use the National League for Nursing (NLN), Nursing Education Certification standards even though we are not accredited through NLN. I will develop these comparisons and submit these to the Graduate Life Committee during the 2009-2010 year.

Submitted by:
Karolyn Kells, PhD, RN
Coordinator of Nursing Education Track

Appendix K

<p align="center">Graduate Life Committee Report</p>

This is the first year that the Graduate Life Committee is officially in existence. The By-Laws for the Nursing Department were revised for the creation of this committee.

Minutes of the committee's activities revealed that a major portion of the discussion revolved around graduate student issues and the learning needs of the graduate student. The committee reviewed courses that were requested to be examined for equivalency to the FHSU courses. We were reminded that only six credits can be transferred in to the nursing graduate program.

The committee reviewed the sequencing of courses and agreed when possible, NURS 895 Nursing Research should be taken in the second year, in the spring semester. This is also the first year that NURS 810 is being taught each semester and in the summer session, and NURS 808 Statistics is only taught in the fall and spring semesters.

The GLC served as the project committee for a project proposal and project defense for five students who completed the FNP track this spring. The GLC also heard project proposals for two students and a project defense for one student this spring.

The dates for the administration of the comprehensive exams were set for this year, however, no work has been done on revision of the comprehensive examination questions.

A recurring issue seems to be that graduate students are having difficulty navigating the admission process to the University and to the nursing program—this is being explored.

Goals for the year 2009-2010:

1. Review the FNP Project
2. Revise the comprehensive examination questions

Respectfully submitted,
Carol Moore PhD, ARNP
Chairperson, Graduate Life Committee

Appendix L

Fort Hays State University
Department of Nursing
Student Life Annual Report
Billie Groth, Chair

September 2008

Student Recognition Ceremony planning and organizing to be taken over by SLC effective December, 2008. (Was carried out for both semesters and was quite successful.)

Clarified that Junior 1 students, who aren't able to progress because of failures or dropping courses may apply for entry into the program. Their name goes into the application pool with no ranking.

Clarified that students taking the NET may take the test at FHSU two times and must pass at a rate of 69%.

October 2008

A new Re-Entry and Readmission Request Form was developed, with the top portion to be completed by the student requesting re-entry or readmission following dismissal from the program. The form will then go to the SLC for discussion and a vote taken. The completed form is then sent to the Chair who will write a letter to the student. Revisions made to Student Handbook relating to the form and that student will request it from the Chair of the Department or SLC Chairman.

RN and MSN students who live in states that state licensure isn't accessible by OMT, must have their State Board send us validation that they are licensed.

November 2008

Two $500 one time scholarships were awarded.

December 8, 2008

One of the scholarships awarded in November was declined as student not attending   FHSU in the spring.   Additional Scholarship money had been given by a donor and was awarded.

Reviewed and accepted Graduate School Appeals Policy and Form (taken to DLC and approved)

December 22, 2008

Discussed the failure of seven students in the fall semester. Three had failed two or more courses since admission and were recommended for dismissal from the Nursing Program. Recommendations were made to the remaining four regarding repeating courses the next semester. Two students have withdrawn from the program.

January 8, 2009 Telephone Conference

Clarified some confusion concerning student ready for spring admission, admission approved.

February 2009

Wording revised on proposed DON Grievance procedure for situations that are not grade related. Taken to DLC for approval (Approved with wording addition of "This procedure is designed to address issues not already covered by other university policy").

Goodwin's will now embroider FHSU Nsg Dept. emblem on lab jackets, instead of students buying patches to sew on.

March 9, 2009

Students had petitioned to SLC proposing a change in color of nursing uniform tops to black. Approved by SLC and taken to DLC where it was also approved.

Approved new form for advising a pre-nursing student with an AA degree from a community college that is not a transfer student. Explained to all faculty during advising session held March 31.

Reviewed several requests for re-entry, approved for fall re-entry by SLC.

One request for re-entry denied, did not fulfill requirements listed in a letter sent to student prior to spring semester.

Approved the waiving of notary requirement on Application for admission since forms are on-line. Taken to DLC and approved.

March 30

Application reviews for fall 2009 completed

One student requesting re-entry, was discussed and re-entry request denied for fall 2009

April 2009

Letters sent out to nominees for Stroup Award.

Discussed initiating a pre-admission or pre-clinical drug screen on pre-admitted/admitted students. There is currently an Alcohol and Drug policy in the Student Handbook. Consensus of the SLC to reword the policy by deleting "if they appear impaired" and adding the word "random". Will be taking to DLC.

May 2009

Discussion held concerning the potential of having Certified Background .com collect immunization data, etc. from students removing the burden from faculty each semester.

There have been several conditional admit students who have decided to delay admission to the program.

Applications for admission reviewed

September 2008

Seventeen MSN and Post Masters Applications were reviewed.

9 were fully admitted, 4 conditionally admitted, 1 not approved and 2 Post Masters admitted

October 2008

Thirty-two Undergraduate BSN Applications for Spring were reviewed

2 were fully admitted, 23 conditionally admitted, 2 conditional re-entry, 2 denied re-entry, 3 denied admission (one had been a conditional admit but didn't pass the second NET)

November 2008

Twenty-six RN-BSN applications for admission were reviewed

6 full admits, 5 conditional admits, 15 not recommended, 5 files removed from consideration d/t expiration of application

December 2008

Seven MSN applications reviewed

3 full admits, and 4 conditional admits

Two RN-BSN applications reviewed

1 full admit and 1 conditional admit

1 Undergraduate file reviewed for re-entry to Jr. 1 level (approved)

February 2009

Nine MSN applications for admission reviewed

2 full admits, 7 conditional admits, 40 applications removed for consideration due to lack of contact

March 2009

Thirty-one Undergraduate BSN applications for fall 2009 were reviewed

1 full admit, 20 conditional admits, 12 applications did not meet admission requirement

April 2009

Forty RN-BSN applications were reviewed

2 full admits, 27 conditional admits, 7 not recommended at this time, 4 files under special condition requiring further review,

Three Undergraduate files reviewed due to changes of eligibility status or special conditions. One more applicant granted conditional admission for fall 2009.

May 2009

Reviewed four RN-BSN application forms. Three were approved for special consideration for conditional admission. Reviewed additional MSN applications. No report of numbers at this time.

Appendix M

FACULTY LIFE COMMITTEE
ANNUAL REPORT 2008-2009

Committee Members: Linda Sanko, chairperson, Karen Trible, Karen Riffel
        Chris Hober, Jenny Manry

Successfully completed assigned criteria for FLC on Gantt Master Schedule of Quality Improvement and yearly goals assign by the Chair.

Review of Research Proposals:
        Reviewed three for faculty research
        Reviewed fifteen packets for graduate students.

EFAM approved by the dean.

Updated Faculty Handbook. Compared with AACN guidelines in preparation for site visit.

Participated in AACN visit and preparation of handouts for the document room.

Diana Koerner (volunteer) continues to keep library resources current.

IRB & NREC forms. Leslie Paige presented the Universities electronic IRB system. Committee will compare DON NREC form with the new IRB. Discussion will be held in fall 2009 regarding the current Nursing NREC form. A decision will be made regarding the adoption the new university process or keep out current form.

Clinical Faculty Job Position Description developed and approved by FLC and Dr Connelly.

Hosted two parties for faculty, staff, and students in fall, spring, and Christmas party for faculty. Host going away parties for retired and faculty that resigned. Sent gift certificate to retired maintenance personnel.

Sent flowers/plants to faculty members who were ill or had deaths in their families. Discussion held regarding the need to have a specific procedure to send flowers. Decision made to send flowers once and cards and/or small gifts for other occasions.

Goals for next year:
        Continue to streamline and clarify NREC/IRB information and forms.

Report prepared by: Linda Sanko, Chair

Appendix N

Program Life Committee
Yearly Report for Academic Year 2008-2009

Program Chair's 3 primary goals: testing, preceptor process, program evaluation	
Date	**Topic**
9/08	1. ARNETT given in NURS 631 for Community and Leadership first time fall 08 2. Sec. will be coming to our meetings 3. DLC voted to combine NURS 320 and 321 for on-campus students
10/08	1. Sr tool already had this: Jr tool: "Displays professional conduct and demonstrates a positive professional attitude with faculty, health care team members, staff, peers, clients and client families (Any complaints from agencies, faculty, preceptors, health care team members, staff, pears, clients will be investigated and could result in disciplinary action by Student Life Committee/Admission & Progression committee including dismissal from the nursing program.)" 2. Preceptor information was reviewed and submitted to DLC
11/08	1. KS State requested and was granted: KIN 398: Anatomy & Physiology approved for nursing majors – it will not count as a Gen Ed on the regular Gen Ed Undergraduate plan 2. Submitted Benchmarking materials for AACN & KSBN visits
12/08	1. Updated and submitted Formative and Summative level testing blueprints 2. Worked with Chair to develop testing evaluation process 3. Per faculty request traced Concept mapping versus Care Planning 4. Per faculty request APA grading was reported to be inconsistent – taken to DLC – suggested a luncheon to review – sent to DLC
1/09	1. Developed Systematic review form for Virtual College colleges
2/09	1. DDST has become cost prohibitive – suggested moving to another standardized test 2. Reviewed and traced domestic violence through the curriculum
3/09	1. At request of the Chair: No PLC meeting occurred because of AACN and KSBN visitation.
4/09	1. DDST – cost versus value; 2. NET; ATI has sent us information; plan to have them visit in Sept. Dept is meeting with Elsevier last full week of April 3. Injection sites: 4. Journaling/Reflective Thinking: CI will develop more emphasis on journaling in NURS 330/330L 5. APA – grading still inconsistent 6. VC course review: Fac would like an example to show how to use it: EFAM; tenure; promotion
5/09	1. Identified problems when minutes do not contain adequate information 2. Started comparison rubric for Curriculum Evaluation companies Will need to replace NET and possible ARNETT 3. Still need information feedback from KT and CI on possible replacement of DDST

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4. Multiple questions regarding College Algebra: Dr Ron Sandstrom does not want student in the course who have been exempted from College Algebra. Need to revisit this issue
5. Concern over SS not being able to enter data. Leslie will learn SPSS so she can add exam scores into the dataset for curriculum tracking/trending/benchmarking. KK is willing to teach Leslie. LC requested that we check to see if SS computer was here in her office. It was not.
6. No report from the Testing group. Not sure where we are on this. No plans that we are aware of for fall. Will we continue the Testing meetings?
   a. Student representatives from Program Life have requested higher level questions during the junior level.
   b. Students also suggested that all courses have the requirement of 70% average or better on tests to stay in the program.
7. Still need to set up meeting with faculty on APA. Since new APA is coming out this summer, fall would be a perfect time for this.
8. Course Equivalency list will be given to faculty. KK has maintained this in the past. It is officially the business of Program Life for undergraduate.

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Items still pending at the end of 08-09 scholastic year

A. 5 semester curriculum
B. Increasing Jr 2 semester clinical hours taking into consideration the ratio for junior/senior and not decrease overall curriculum clinical hours.
C. Preceptor eval/policy/process for graduate program – send to GLC for NA & NE
D. Updating NURS 631 & 631L – waiting on feedback from primary teacher and Coor of RN to BSN
E. Discussed latest IM sites particularly the dorsal gluteal – HMC is still including the site in their current policy but stated that the policy is up for review.
F. Must replace NET test for spring 10, will be continued for Fall 09
G. Meeting for ATI is set for Monday, September ?
H. Complete rubric, R:Program Life/fy 08-09/Evaluation Companies after ATI has been here and make recommendation for Department Life
I. DDST: Do we stay with it or move to a different test
J. Revisit College Algebra: If Dr Sanstrom exempts them from College Algebra???
K. No plans developed for future Testing meetings. Not sure what the Ad Hoc Testing group has completed this semester.
   1. Will need to gather information from chair so committee will know where to begin next fall.
   2. See student suggestions 5/09 minutes
L. Plan a meeting, lunch?, to increase faculty congruency on APA grading. GTAs and TA have asked to be invited to this meeting.
M. Need to continue the Course Equivalency tables from at R:Program Life/Courses QV/UNP Course Equivalencies

Changes for the Committee for Fall 2009

1. We ran into great difficulty with minutes that did not contain enough information especially when course transfer/equivalency was discussed. When we tried to trace any problems or questions to obtain a history or decisions we were stumped because of minutes. The committee voted to keep detailed minutes and especially when transfer/equivalency is discussed, a course will NOT be on the agenda consideration until all of the information is available: Student ID (FHSU student #), Courses from which university by proper identification, which FHSU DON course does it affect. All of this information will go into the minutes as well as who will review(ed) the course, decision made by the committee, action included who will be responsible to notifying the student as well as Registrar and make notes in the student's file.

Appendix O

Coordinator FNP Track Annual Report 2008/2009

Topic						
Curriculum	**Agency**	**Strand#**	**What-How**	**Met yes/no**	**Comments**	**Goals 2009/2010**
Curriculum	KSBN	60-2-102	descript of ed facilities	Yes	There was 100% pass rate of the FNP graduating students whom completed the ANCC National Certification exam	100% National Certification. Possible incorporate Research study analysis/reviews in FNP track courses.
Curriculum	KSBN	60-2-104c	instruction/clinical exp topics	Yes	N803L Advanced Health Assessment Lab continued to coordinate with Undergraduate Health Assessment. The coordination was better accepted by FNP students this year. The Graduate Students presented/demonstrated the assessment of a body system to the entire class. The courses N825/826 Diagnostic & Procedure were further developed. Community practitioners were brought in to provide lectures. In N835/836 Primary Care Across the Lifespan, more content was added to the course.	Continue to refine FNP track courses to avoid duplication and cover are content. Include aspects of a safe, effective environment in a preceptorship course. With the formation of new Graduate Committee look further into combining the courses N812 Primary Health Promotion and N817 Holistic Perspective and Health Potential.
Ins commit	NTF	III.D	clinical 500 hr minimum	Yes	Students met minimum total hour requirements of 675 clock hours. This was difficult to monitor utilizing current log in the past. We continue to utilize the electronic log was submitted through Blackboard weekly, but found it very, very time consuming with 9 students. N819 Family and Community Preceptorship 75 clock hours were refined to include Community Preceptorship. We became involved the Student/Resident Experiences and Rotations in Community Health (SEARCH). This program provides funding for health professional students to complete clinical or community service projects in health professional shortage areas (HPSAs).	The Excel electronic clinical log is very time consuming. We need to consider utilizing a company sponsored web based clinical log. With the future of FNPs functioning as Primary Care Givers we need to review the Preceptorship clock hours and areas. Look into providing more online courses.

Ins commit	NTF	IV. B 2	Varied clinic experience	Yes	Student verbalized that there are too many clinical hours in the last two semesters. The majority of students are also working part-time or full-time.	Consideration has been given to the fact of eliminating the 2 year program or encouraging the employeed student to consider the 3 or more year program. It has been discussed to offer preceptorship courses each semester. The students can individualize the preceptership courses to their schedule.
Ins commit	NTF	IV. B 3	Diverse ed preceptors/APN	Yes	N826 Diagnostic & Procedure Preceptorship has expanded to include preceptorships in Emergency Room. Radiology, and a Laboratory site.	Continue to encourage diversity in preceptors.
Ins commit	NTF	IV. B 3 b	Preceptor qualifications	Yes	A Clinical Site Worksheet was developed to track the preceptor paperwork. The majority of students submitted the paperwork before beginning clinicals.	Continue to improve the current process, to assure that preceptors and clinics are approved before clinicals begin
Ins commit	NTF	IV. B 3a	credential of preceptor	Yes	Most of the students did submit a card containing credentials, proper name and address to the FNP Coordinator before clinicals.	Continue this process
Ins commit	NTF	IV.A 1	student fac ratio	Yes		
Ins commit	NTF	IV.A 2	facilities	No	Rooms 116 and 166 were remodeled and are very user friendly.	
Ins commit	NTF	IV.B	clinical resources	Yes	Each student submitted an electronic calendar of their choice on Blackboard. The Preceptee Actual Time Schedule was updated	
Ins commit	NTF	IV.B 1	site visit/ratio of visits	Yes	Faculty supervision was mostly indirect. Students were required to spend at least 4hrs per semester in the local Clinic with instructors. Student assessments of clinical experience were conducted at graduation.	Discussion suggested that students spend more time with instructors. Also individualize according to students needs/performance
Perf outcome	NTF	IV.B 3 c	preceptor orientation	Yes	The online preceptor web site has been updated.	Continue
Curriculum	NTF	VI.A	Prog eval plan for FNP track	Yes		
	NTF	VI.A 1	Eval courses annually	Yes		
Curriculum	NTF	VI.A 3	Eval st each semester	Yes	Clinical Evaluation form completed on all FNP students each semester by each faculty member.	Still need to update evaluation forms to include new core copetencies March 2006.

Curriculum	NTF	VI.A 4	Cumm eval of st in clinical	Yes	Faculty/Preceptor Clinical Evaluation Form. Each student must participate in at least 4hrs clinical with Instructor in local FHC clinic for direct evaluation. Completed evaluation is maintained in students file.	
Curriculum	NTF	VI.A 5	eval clinical sites annually	No	Not all sites were evaluated in past year	Evaluate most sites each semester, maybe schedule visits monthly
	NTF	VI.A 5	eval preceptors annually	No	Preceptors were evaluated by students, but not all were evaluated by faculty	as above

This is an exciting time for FNPs with the upcoming DNP Model, Nurse Practitioner issues in the Stimulus Bill,

for APRN Regulation" the "Consensus Model NP as Primary Caregiver in Healthcare and new emerging State of Kansas

legislation regarding NPs

Dorothy Ochs ARNP, FNP-BC

Appendix P

Summary: College of Health and Life Sciences Alumni Survey
Department of Nursing

Please indicate the FHSU academic department from which you earned your most recent degree:

Response	Response Count	Percentage
Nursing	37	100 %
Totals	37	

Gender

Response	Response Count	Percentage
Male	1	2.70 %
Female	34	91.89 %
Totals	37	

Most recent degree received from FHSU:

Response	Response Count	Percentage
Bachelors Degree	26	70.27 %
Masters Degree	11	29.73 %
Totals	37	

Year most recent degree was received.

Response	Response Count	Percentage
2004	6	16.22 %
2005	5	13.51 %
2006	5	13.51 %
2007	8	21.62 %
2008	13	35.14 %
Totals	37	

Age at time of graduation:

Response	Response Count	Percentage
20-23	8	21.62 %
24-29	7	18.92 %
30-35	4	10.81 %
36-50	13	35.14 %
50+	4	10.81 %
Totals	37	

Status at time of initial enrollment at FHSU:

Response	Response Count	Percentage
Freshman	10	27.03 %
Graduate Student	5	13.51 %
* Transfer	22	59.46 %
Totals	37	

*If a transfer student, transferred from:

Response	Response Count	Percentage
School of Nursing	1	2.70 %
bridge	1	2.70 %
Community College	14	37.84 %
4-Year College/University	6	16.22 %
Totals	37	

Please indicate below if you have earned an advanced degree since leaving FHSU. (Mark all that apply)

Response	Response Count	Percentage
Just accepted and will start in the Fall of 2009	1	2.70 %

No additional degrees	27	72.97 %
Masters	1	2.70 %
In progress	6	16.22 %
Totals	37	

Please identify your current employment status.

Response	Response Count	Percentage
Employed in major area of study and a current student	1	2.70 %
Employed part-time in field	1	2.70 %
Employed in major field of study	35	94.59 %
Totals	37	

If employed, please check the range that indicates your current annual salary:

Response	Response Count	Percentage
$25-39K	8	21.62 %
$40-49K	10	27.03 %
$50-74K	12	32.43 %
$75-100K	5	13.51 %
$>100K	2	5.41 %
Totals	37	

I have been satisfied with the employment opportunities in my chosen profession.

Response	Response Count	Percentage
Strongly Agree	16	43.24 %
Agree	19	51.35 %
Disagree	1	2.70 %
Totals	37	

I currently work/reside:

Response	Response Count	Percentage
In Kansas	28	75.68 %
In the U.S., outside of Kansas	9	24.32 %
Totals	37	

My education adequately prepared me for employment in my profession.

Response	Response Count	Percentage
Strongly Agree	8	21.62 %
Agree	25	67.57 %
Disagree	2	5.41 %
Strongly Disagree	2	5.41 %
Totals	37	

I feel comfortable contacting program faculty for consultation regarding professional and/or employment related issues.

Response	Response Count	Percentage
Strongly Agree	5	13.51 %
Agree	18	48.65 %
Disagree	9	24.32 %
Strongly Disagree	4	10.81 %
Not Applicable	1	2.70 %
Totals	37	

My academic major program was challenging and rigorous.

Response	Response Count	Percentage
Strongly Agree	15	40.54 %

Agree	21	56.76 %
Strongly Disagree	1	2.70 %
Totals	37	

My education helped me to develop my critical thinking skills.

Response	Response Count	Percentage
Strongly Agree	9	24.32 %
Agree	21	56.76 %
Disagree	4	10.81 %
Strongly Disagree	3	8.11 %
Totals	37	

My academic major program was flexible enough to meet individual needs.

Response	Response Count	Percentage
Strongly Agree	7	18.92 %
Agree	25	67.57 %
Disagree	3	8.11 %
Strongly Disagree	2	5.41 %
Totals	37	

My academic program had adequate practicum/internship/clinical/apprenticeship experiences.

Response	Response Count	Percentage
Strongly Agree	6	16.22 %
Agree	24	64.86 %
Disagree	4	10.81 %
Strongly Disagree	3	8.11 %
Totals	37	

The laboratory/clinical resources available in my academic program were adequate.

Response	Response Count	Percentage
Strongly Agree	5	13.51 %
Agree	21	56.76 %
Disagree	5	13.51 %
Strongly Disagree	4	10.81 %
Not Applicable	2	5.41 %
Totals	37	

The instruction provided in my academic program was of high quality.

Response	Response Count	Percentage
Strongly Agree	8	21.62 %
Agree	21	56.76 %
Disagree	5	13.51 %
Strongly Disagree	3	8.11 %
Totals	37	

I received appropriate academic advising from my academic department.

Response	Response Count	Percentage
Strongly Agree	4	10.81 %
Agree	22	59.46 %
Disagree	7	18.92 %
Strongly Disagree	4	10.81 %
Totals	37	

I received appropriate career counseling from my academic department.

Response	Response Count	Percentage
Strongly Agree	2	5.41 %
Agree	19	51.35 %

Disagree	8	21.62 %
Strongly Disagree	6	16.22 %
Not Applicable	2	5.41 %
Totals	37	

My academic department provided me with appropriate opportunities for involvement in research and scholarly inquiry.

Response	Response Count	Percentage
Strongly Agree	5	13.51 %
Agree	21	56.76 %
Disagree	7	18.92 %
Strongly Disagree	3	8.11 %
Not Applicable	1	2.70 %
Totals	37	

My academic department provided me with appropriate opportunities for involvement in community or professional service.

Response	Response Count	Percentage
Strongly Agree	6	16.22 %
Agree	22	59.46 %
Disagree	4	10.81 %
Strongly Disagree	4	10.81 %
Not Applicable	1	2.70 %
Totals	37	

My academic department has maintained appropriate contact with alumni.

Response	Response Count	Percentage
Strongly Agree	1	2.70 %
Agree	17	45.95 %
Disagree	14	37.84 %
Strongly Disagree	4	10.81 %

Not Applicable	1	2.70 %
Totals	37	

Based on my experience, I would encourage prospective students to enroll in my major area of study at FHSU.

Response	Response Count	Percentage
Strongly Agree	10	27.03 %
Agree	19	51.35 %
Disagree	4	10.81 %
Strongly Disagree	3	8.11 %
Not Applicable	1	2.70 %
Totals	37	

I am interested in pursuing additional coursework through FHSU.

Response	Response Count	Percentage
Yes	13	35.14 %
No	24	64.86 %
Totals	37	

If yes, which of the following would best meet your needs?

Response	Response Count	Percentage
ARNP - POST MASTERS	1	2.70 %
Graduate coursework leading to a degree	11	29.73 %
Select courses for professional development, not degree seeking	2	5.41 %
Totals	37	

Preferred delivery method:

Response	Response Count	Percentage

On-campus/face to face coursework		4	10.81 %
Virtual/distance education coursework		15	40.54 %
	Totals	37	

Once again, please indicate the FHSU academic department from which you earned your most recent degree:

Response	Response Count	Percentage
Nursing	37	100 %
Totals	37	