Title.

Middle Georgia State University Academic Program Assessment

Instructions. This form collects assessment information for all academic programs at Middle Georgia State University. Program directors, chairs, or deans, should submit one form each year (or semester) for each academic program and for each site the academic program is offered (https://www.mga.edu/institutional-research/docs/Programs_by_Location.pdf) (i.e. if a program is offered in Macon and Cochran, separate assessments unique to the students enrolled at each location should be submitted). It is essential that improvements based on the assessment are also clearly identified and that the department keeps evidence of those improvements (i.e. new exams, syllabi, instructional tools) when an improvement is identified and implemented. Major changes to curriculum must go through the Academic Affairs process. Student Learning Outcomes (SLO) should match the Assessment Plan and Curriculum Maps found here: https://www.mga.edu/provost/program-histories.php; if they don't please contact OIRDS to update them. NOTE: All fields are required, please place NA or O in response field ONLY if SLO is not being utilized, otherwise full responses are required. Provide ALL necessary information requested to the fullest extent possible, such that a peer reviewer is not required to assume any information not provided. Utilize the provided assessment scoring rubric drafting guideline to evaluate your report prior to submission. https://www.mga.edu/institutional-research/docs/IEB_Academic_Program,_Student_Support,_Advising_Scoring_Card.pdf

 Please SUBMIT the form within 30 minutes of opening this page. If you wait too long to submit you may lose your work In the event that you need to edit your submission, you may contact the Director of Institutional Effectiveness to secure a custom link to edit and resubmit.

Q1. Submitters Email

kendra.russell@mga.edu

Q2. For which program is this assessment being submitted? An academic program for this purpose is defined as a major within a degree program (i.e. Bachelor of Arts with a major in English, Bachelor of Science with a major in Chemistry, Associates in Occupational Therapy Assistant).

Associate Degree in Nursing

Q3. For which campus is this program assessment being submitted? Note: A separate assessment report is needed for each location a program is offered.

◉ Cochran

◯ Macon

○ Eastman

○ Dublin

○ Warner Robins

○ Online

Q4. In which College is this program located?

○ Arts and Letters

○ Aviation

● Health and Natural Sciences

○ Business

○ Computing

○ Education and Behavioral Sciences

Q5. Program Type

○ Graduate

● Undergraduate

○ Certificate

Q6. Which semester were the data collected and analyzed? If across multiple semesters, select the latest semester of data.

○ Summer 2022

○ Fall 2022

● Spring 2023

Q7. Approximately how many students are enrolled in this program at this location?

60

8. SLO 1: What is the first Student Learning Outcome for this support area? Student Learning Outcomes should be stated in measurable terms (i.e. students will be able to......)

Evaluate nursing care to clients and families across the lifespan from diverse backgrounds in a variety of settings that is compassionate, age and culturally appropriate and based on client's preferences, values and needs.

9. SLO 1: What instrument (assessment type) was used to measure student's ability to demonstrate mastery of this learning outcome? (i.e. test, survey, etc) and provide specific details of the instrument (e.g. name, content areas, link etc.)

> ATI Comprehensive Predictor score 4th semester

10. SLO 1: What target performance level would a student need to achieve on the assessment instrument to demonstrate mastery of this learning outcome? (i.e. 80% of all students will earn an average grade of 75% or better on....)

> A group score of 70% will be achieved in: *Patient-Centered Care (Category: QSEN) on ATI: Comp Predictor in N2500. *Questions in this category focus on the provision of caring and compassionate, culturally sensitive care that is based on a patient's physiological, psychological, sociological, spiritual and culture needs, preferences and values.

11. SLO 1: Provide details for your target performance level established (i.e. accreditation requirement, past performance data, peer program review, etc)

> Target performance is determined by the ASN Committee and is based on past performance data.

12. SLO 1: During this assessment cycle, what percent of the students who participated in this assessment demonstrated mastery of this learning outcome? (this should be a number between 0-100)

> A group score of 79.2% was achieved in: *Patient-Centered Care (Category: QSEN) on ATI: Comp Predictor. (N=28; Sp 23)

13. SLO 1: Improvement Plans and Evidence of Changes Based on Performance Analysis: How does the analysis of students' performance on this Student Learning Outcome inform the implementation of improvement plans, and what evidence is collected and documented to support these changes?

> Expected level of achievement was met. Continue to utilize the ATI Comprehensive Predictor as a part of the evidence of achieving EPSLO 1. In Spring 2023, the proctored version of the Comp Predictor (NGN version) was administered on the Cochran campus, 5/3/2023.

14. SLO 2: What is the second Student Learning Outcome for this support area? Student Learning Outcomes should be stated in measurable terms (i.e. students will be able to......)

Demonstrate use of best current evidence and clinical expertise when making clinical decisions in the provision of patient-centered care.

15. SLO 2: What instrument (assessment type) was used to measure student's ability to demonstrate mastery of this learning outcome? (i.e. test, survey, etc) and provide specific details of the instrument (e.g. name, content areas, link etc.)

N2500 Clinical evaluation tool

16. SLO 2: What target performance level would a student need to achieve on the assessment instrument to demonstrate mastery of this learning outcome? (i.e. 80% of all students will earn an average grade of 75% or better on....)

90% of students will satisfactorily provide an example in a journal entry of making clinical decisions based on best current evidence.

17. SLO 2: Provide details for your target performance level established (i.e. accreditation requirement, past performance data, peer program review, etc)

Target performance is determined by the ASN Committee and is based on past performance data.

18. SLO 2: During this assessment cycle, what percent of the students who participated in this assessment demonstrated mastery of this learning outcome? (this should be a number between 0-100)

100% of the students who completed N2500 (N=28; Sp' 23) precepted and satisfactorily provided an example in a journal entry of making clinical decisions based on best current evidence.

19. SLO 2: Improvement Plans and Evidence of Changes Based on Performance Analysis: How does the analysis of students' performance on this Student Learning Outcome inform the implementation of improvement plans, and what evidence is collected and documented to support these changes?

> Expected level of achievement was met. Continue to utilize the updated N2500 clinical evaluation tool during the 4th semester as part of the evidence of achieving EPSLO 3.

20. SLO 3: What is the third Student Learning Outcome for this support area? Student Learning Outcomes should be stated in measurable terms (i.e. students will be able to......)

> Promote the development and implementation of quality improvement strategies to advance health care services.

21. SLO 3: What instrument (assessment type) was used to measure student's ability to demonstrate mastery of this learning outcome? (i.e. test, survey, etc) and provide specific details of the instrument (e.g. name, content areas, link etc.)

> ATI Comprehensive Predictor score

22. SLO 3: What target performance level would a student need to achieve on the assessment instrument to demonstrate mastery of this learning outcome? (i.e. 80% of all students will earn an average grade of 75% or better on....)

> A group score of 60% will be achieved in: *Quality Improvement (Category: QSEN) on ATI: Comp Predictor in N2500. *Questions in this category focus on the care-related and organizational processes that involve the development and implementation of a plan to improve the health care services and better meet the needs of clients.

23. SLO 3: Provide details for your target performance level established (i.e. accreditation requirement, past performance data, peer program review, etc)

> Target performance is determined by the BSN Committee and is based on past performance data.

24. SLO 3: During this assessment cycle, what percent of the students who participated in this assessment demonstrated mastery of this learning outcome? (this should be a number between 0-100)

A group score of 75% was achieved in: Quality Improvement on ATI: Comp Predictor. (N=28; Sp'23)

25. SLO 3: Improvement Plans and Evidence of Changes Based on Performance Analysis: How does the analysis of students' performance on this Student Learning Outcome inform the implementation of improvement plans, and what evidence is collected and documented to support these changes?

Expected level of achievement met. In Spring 2023, the proctored version of the Comp Predictor (NGN version) was administered on the Cochran campus, 5/3/2023. The decision was made at the ASN meeting on December 8, 2022 to decrease the acceptance percentage from the Comp Predictor on this category to 60% since there are only 2 points on the exam related to this topic. We will also continue to require the quality improvement assignment in Nursing 1500 and it will become part of the measurement of this outcome in Spring '23. (See below)

26. SLO 4: What is the fourth Student Learning Outcome for this support area? Student Learning Outcomes should be stated in measurable terms (i.e. students will be able to......)

Practice nursing in a professional, ethical and legal manner.

27. SLO 4: What instrument (assessment type) was used to measure student's ability to demonstrate mastery of this learning outcome? (i.e. test, survey, etc) and provide specific details of the instrument (e.g. name, content areas, link etc.)

N2500 Clinical evaluation tool

28. SLO 4: What target performance level would a student need to achieve on the assessment instrument to demonstrate mastery of this learning outcome? (i.e. 80% of all students will earn an average grade of 75% or better on....)

90% of students will satisfactorily provide an example in a journal entry of practicing nursing in a professional, ethical and legal manner.

29. SLO 4: Provide details for your target performance level established (i.e. accreditation requirement, past performance data, peer program review, etc)

> Target performance is determined by the BSN Committee and is based on past performance data.

30. SLO 4: During this assessment cycle, what percent of the students who participated in this assessment demonstrated mastery of this learning outcome? (this should be a number between 0-100)

> 100% of the students who completed N2500 (N=28; Sp'23) precepted and satisfactorily provided an example in a journal entry of practicing nursing in a professional, ethical and legal manner.

31. SLO 4: Improvement Plans and Evidence of Changes Based on Performance Analysis: How does the analysis of students' performance on this Student Learning Outcome inform the implementation of improvement plans, and what evidence is collected and documented to support these changes?

> Expected level of achievement was met. Continue to utilize the updated N2500 clinical evaluation tool during the 4th semester as part of the evidence of achieving EPSLO 7.

Q41. List each program concentration or track within the larger academic program and clearly articulate the expected learning outcomes. (If distinct note them distinctly, if common restate).

> ASN has one program with two campus locations.

Q42. How do you collect and report data on the achievement of these learning outcomes for each program concentration or track?

> The DON maintains a systematic plan of evaluation (SPE) for all programs as required by Accreditation Commission for Education in Nursing (ACEN). The SPE contains the assessment of the end of program student learning outcomes for the program as well as program outcomes which include NCLEX pass rates, employment, and program completion. The assessment occurs annually, and information is shared in the Fall with nursing faculty and with the DON Advisory Board in the spring. The ASN program faculty make recommendations for changes to the plan and activities based on trended data.

Q43. Report and analyze the learning outcomes associated with each program concentration or track

There is only one program for ASN.

32. How many students participated in the assessment of these learning outcomes, in this program, for this assessment cycle at this location? (Provide Number)

28

33. Based on your goals and objectives listed above please indicate their connection with MGA's Strategic Plan (https://www.mga.edu/about/docs/Strategic_Plan_Overall_DB.pdf) by checking all associated and relevant Imperatives / Strategies from the list below. (Check all the apply)

- ☑ Grow Enrollment with Purpose 1. Expand and enrich the face to face student experience
- ☐ Grow Enrollment with Purpose 2. Expand and enrich online instruction into new markets
- ☐ Own Student Success 3. Develop academic pipelines and expand degrees
- ☐ Own Student Success 4. Expand student engagement and experiential learning
- ☐ Build Shared Culture 5. Attract talent and enhance employee development and recognition
- ☐ Build Shared Culture 6. Sustain financial health through resourceful fiscal management
- ☐ Build Shared Culture 7. Cultivate engagement with its local communities

34. Please indicate which of the following actions you have taken as a result of the 2021/2022 Assessment Cycle (Note: These actions are documented in reports, memos, emails, meeting minutes, or other directives within the reporting area)(Check all the apply)

- ☑ Disseminating/Discussing Assessment Results/Feedback to Appropriate Members of the Campus Community
- ☑ Disseminating/Discussing Assessment Results/Feedback to Appropriate External Stakeholders
- ☐ Faculty or Staff Support: Professional Development Activities, Trainings, Workshops, Technical Assistance
- ☐ Process Changes: Improve, Expand, Refine, Enhance, Discontinue, etc Operational Processes
- ☐ Request for Additional Financial or Human Resources
- ☐ Customer Service Changes: Communication, Services, etc
- ☐ Making Improvements to Teaching Approach, Course Design, Curriculum, Scheduling, other
- ☐ Evaluating and/or Revising the Reporting Lines Internal Assessment Processes
- ☐ Other [   ]

35. Please indicate (if appropriate) any local, state, or national initiatives (academic or otherwise) that are influential in the operations, or goals, and objectives of your unit. (Complete College Georgia, USG High Impact Practice Initiative, LEAP, USG Momentum Year, Low-Cost No-Cost Books, etc)

The two initiatives that influence operations are Complete College Georgia and USG High Impact Practice Initiative. The ASN program monitors program completion rates for each cohort and has initiated several measures to improve student retention. The Department of Nursing (DON) has hired a Nursing Success Coach to advise all re-entry nursing students to assist with consistent support. The DON has also implemented policy changes to assist students with degree completion.

36. Please provide a comprehensive narrative outlining how assessment results are utilized for continuous improvement in this field. Your narrative should address the past, present, and future aspects of assessment, with specific emphasis on how these results inform decision-making and drive improvement efforts.

The DON maintains a systematic plan of evaluation (SPE) for all programs as required by Accreditation Commission for Education in Nursing (ACEN). The SPE contains the assessment of the end of program student learning outcomes for the program as well as program outcomes which include NCLEX pass rates, employment, and program completion. The assessment occurs annually, and information is shared in the Fall with nursing faculty and with the DON Advisory Board in the spring. The ASN program faculty make recommendations for changes to the plan and activities based on trended data.

37. Optional: The following upload portal is available to supplement your report with supportive documentation should you wish to provide any (instruments, data, etc).

Nurs 2500 clinical evaluation updated Sp 23.xlsx
20.5KB
application/vnd.openxmlformats-officedocument.spreadsheetml.sheet