

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/institutionalresearch/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/institutionalresearch/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).

Bachelor of Science 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.

Macon

○ 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?
52
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)
Collaborate with members of the interprofessional health care team to promote continuity of patient care and achievement of optimal outcomes.

EastmanDublin

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.)	
Community Needs Assessment.	
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)	
90% of students will score an 80% or better on the Community Needs Assessment.	
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 BSN 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)	
100% (8/8) of students scored an 80% or better on the Community Needs Assessment.	
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?	
No changes at this time for the program. The BSN Committee will continue to monitor.	

Interpret best current evidence, expert opinion, and clinical expertise as a basis for nursing practice and clinical judgement.		
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.)		
NURS 4300 Literature Review		
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 score an 80% or better on the NURS 4300 Literature Review		
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 BSN 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)		
92.85% (13/14) scored an 80% or better on the NURS 4300 Literature Review Assignment		

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......)

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?	
No changes at this time for the program. The BSN Committee will continue to monitor.	
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)	
Evaluate 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.)	
EBP Research into Practice Formal Paper assignment.	
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)	
90% of students will score an 80% or better on the EBP Research into Practice Formal Paper assignment.	
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)	
92.85% (13/14) scored an 80% or better on the EBP Research into Practice Formal Paper	
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?	
No changes at this time for the program. The BSN Committee will continue to monitor.	
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)	
Integrate information technology resources into the provision of patient care.	
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.)	
NURS 4300 Literature Review Assignment.	
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 score an 80% or better on the NURS 4300 Literature Review Assignment.	

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)	
92.85% (13/14) scored an 80% or better on the NURS 4300 Literature Review Assignment	
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?	
The BSN Committee will be reviewing the tools selected for measuring ELAs as courses have been revised within the consortia model within the USG.	
<i>Q41.</i> 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).	
Pre-licensure BSN RN to BSN completion	
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 NCLE 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 BSN program faculty make recommendations for changes to the plan and activities based on trended data.	

outcomes across programs. For example, with the learning outcome -Evaluate the development and implementation of quality improvement strategies advance health care services. There was a total of 43 students assessed (29 PLBSN) and 14 (RN-BSN). A total of 98% of students 42/43 met the targ performance for this learning outcome.	
32. How many students participated in the assessment of these learning outcomes, in this program, for this assessment cycle at this location? (Provide Number)	
22	
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	

The DON analyzes learning outcomes annually with odd number learning outcomes assessed in odd years and even numbered learning outcomes assessed in even years. There are 8 learning outcomes for the program. The DON presents one learning outcome to the Advisory Board that looks at

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)

	Not applicable to this program.		
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.		
VVI	with specific emphasis on now these results inform decision-making and drive improvement enorts.		
	The DON maintains a systematic plan of evaluation (CDE) for all any away and by A conditation Commission for Education in Number (ACEN)		
	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.		
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37. Optional: The following upload portal is available to supplement your report with supportive documentation should you wish to provide any (instruments, data, etc).