



**2017 Self Study Report
Submitted to the
Commission on Collegiate Nursing Education
(CCNE)
September 2017**



1 College Circle, Bangor Maine

Husson University School of Nursing, 2017

INTRODUCTION.....	2
Standard I.....	4
Standard II.....	26
Standard III.....	45
Standard IV.....	64
Strategic Plans and Initiatives	Appendix A
2014 NP Core Competencies Content	Appendix B
HUSoN Examples of Boyer Model of Scholarship Teaching	Appendix C
HUSoN Organizational Chart	Appendix D
HUSoN Bylaws	Appendix E
Notification of RN to BSN Student Email	Appendix F
Sample Transcript and Diploma for MSN Program	Appendix G
Systematic Plan of Evaluation	Appendix H
HUSoN Policies	Appendix I
Equipment Inventory	Appendix J
Faculty and Staff Teaching, Practice, and Qualifications	Appendix K
Adjunct Faculty Teaching, Practice, and Qualifications	Appendix L
Faculty/Student Ratios by Course and Clinical Sites	Appendix M

Please note the pages that precede this page (i.e., letter to chief nurse administrator, and checklist), should be deleted prior to submission of the self-study document to CCNE via the CCNE Online Community (www.ccnecommunity.org) as they were provided for informational purposes only.

INTRODUCTION

Husson University (HU), formerly Husson College, is a New England Association of Schools and Colleges (NEASC) accredited, private institution of higher education located in Bangor, Maine. The change in name from College to University in 2008 reflects the scope of what HU has achieved in the last four decades. The University traces its roots to 1898 as the Shaw School of Business. The eventual owner of this proprietary institution, Chesley Husson, sought degree-granting authority and established Husson College as a non-profit corporation in 1960. Throughout the 1970s and 1980s, HU's primary degree programs were in the field of Business. Husson College expanded its identity by adding a School of Nursing in 1983 and later the disciplines of Occupational Therapy, Physical Therapy, Education, and Pharmacy. Science and Humanities remained a School whose primary focus related to General Education for the professional programs. However, in the early 1990s, it began offering its own degrees in Psychology and Education. This later expanded to English, Biology, and Chemistry. In 2010, HU conferred the first Doctor of Physical Therapy degrees followed by Doctor of Pharmacy degrees awarded in 2013. The most recent substantive change occurred with the development of online program offerings in Business, Nursing, and Criminal Justice, as well as Science and Humanities became a college in 2016-17

HU serves students for whom post-secondary education is the key to a better future. The principal work of the University is to prepare students for professional careers while emphasizing experiential learning and andragogy, global engagement, and life-long learning. The University offers fifty-four undergraduate and sixteen graduate degrees. Husson's 2016-17 total enrollments included 3669 students, with 1856 students enrolled in undergraduate studies. In 2016, 48% of all students enrolled were Pell grant eligible; 328 students entering in 2016 qualified for federal Pell grants, a national indicator of poverty. Seventy-three percent of entering freshmen (n = 458) or 79% of undergraduates (n = 2249) or 79% of all students (n = 2901) came to HU from Maine communities, with many of those being the first in their families to attend college.

2017 University requirements for admission is a minimal SAT score of 890. Minimal SAT scores for the COHE range between 980 and 1090, with HUSoN minimal SAT score of 1030. Full review of the University Admission requirements are available through the University website, at <http://www.husson.edu/admissions/undergraduate-professional-admissions/admission-requirements/>.

Development of the Nursing Programs

The Eastern Maine General Hospital (EMGH) School of Nursing, a diploma program, was founded in 1892. In 1983, HU and Eastern Maine Medical Center (formerly, EMGH) collaborated to offer a college-based baccalaureate nursing program. Key members of EMMC's nursing administrative team have continued to serve on the School of Nursing's Advisory Board and EMMC makes a monetary contribution to the University's general fund on a yearly basis.

With Husson College's transformation to a University, the College of Health and Education (COHE) was established. Currently, the College of Health and Education is comprised of the following Schools: Nursing, Physical Therapy, Occupational Therapy, and Education. Accreditations within the College include the entry level Doctorate in Physical Therapy (DPT) by the Commission on Accreditation in Physical Therapy Education (CAPTE); the entry-level Master's Occupational Therapy Program by the Accreditation Council for Occupational Therapy Education (ACOTE); the Master's in Counseling by Council for Accreditation of Counseling and Related Educational Programs (CACREP); the School of Education is approved by the Maine State Board of Education; and the Baccalaureate and Master's in Nursing Programs are accredited by the Commission on Collegiate Nursing Education (CCNE) and approved by the Maine State Board of Nursing.

Husson University has approval from the Immigration and Naturalization Service to offer education for international students. The Veteran's Administration GI Education Benefits and Training program provides funding for undergraduate study at the University. Both undergraduate and graduate nursing students have

received military support to attend HUSoN. These include BSN students enrolled in Reserve Officer Training Candidate (ROTC) roles, active duty military personnel receiving full tuition support, and graduate students serving in the National Guard.

Current institutional NEASC accreditation is effective through 2024. HUSoN Undergraduate and Graduate Nursing Programs were granted initial five-year and a subsequent ten-year accreditation from the Commission on Collegiate Nursing Education (CCNE) in June 2003 and 2008, respectively. Prior to that, both nursing programs were accredited by the National League for Nursing.

In August 2005, the School of Nursing (SoN) moved into the newly constructed Robert O'Donnell Commons, a 40,000 square foot, three-story addition which houses Admissions, Student Accounts, the Dahl Anatomy Lab (cadaver lab, physical agents lab, physical therapy research lab, as well as therapeutic skills and nursing simulation lab), Libra Lecture Hall, and the Schools of Occupational and Physical Therapy and Nursing. The second floor of the Commons provides office, laboratory, and classroom facilities for the School of Nursing. The Simulation Suite, Skills, and Health Assessment Labs have been recently expanded and renovated to provide state-of-the-art educational capabilities.

The organizational structure of HUSoN has changed over time to reflect the administrative needs of the School. In 2012, the Chair of Nursing was promoted to the position of Dean, COHE. At that time the Chair position was restructured into two positions; Director of Nursing and Graduate Program Coordinator. With the hiring of a new COHE Dean in 2015, the COHE leadership structure was redesigned to have PT, OT, Nursing and Education Chairs and a Graduate Counseling Director. This leadership transition was deployed to strengthen and develop consistency in governance of the COHE. After an extensive nationwide search, a new full-time Chair was hired in an administrative and faculty role in February of 2017 for alignment with COHE leadership structure.

HUSoN offers Baccalaureate and Master Science in Nursing Degrees. The undergraduate program offers a traditional BSN and RN to BSN track. The graduate program offers two Advanced Practice Registered Nurse (APRN) tracks and one non-APRN track in Nursing Education. The two APRN tracks prepare graduates to obtain certification as a Family and Community Nurse Practitioner (FCNP) or a Psychiatric Mental Health Nurse Practitioner (across the lifespan) (PMHNP). Both APRN tracks and the non-APRN track offer a post-master's certificate option.

Graduate nursing faculty have been very successful in obtaining funding through the Health Resources and Services Administration's (HRSA) Advanced Education Nurse Traineeship (AENT) and Advanced Nurse Education (ANE) grants to provide financial support for students and to support new equipment and initiatives such as interprofessional education within the HUSoN and throughout the broader University.

Standard I

Program Quality: Mission and Governance

The mission, goals, and expected program outcomes are congruent with those of the parent institution, reflect professional nursing standards and guidelines, and consider the needs and expectations of the community of interest. Policies of the parent institution and nursing program clearly support the program's mission, goals, and expected outcomes. The faculty and students of the program are involved in the governance of the program and in the ongoing efforts to improve program quality.

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

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

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

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

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

A program may select additional standards and guidelines.

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

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

Program Response:

Congruency of Husson University School of Nursing's Mission, Vision, and Goals with the College Of Health and Education and Husson University

The COHE, comprised of the Schools of Nursing, Physical Therapy, Occupational Therapy, Education, and the Department of Graduate Counseling and Human Relations is a vital academic entity which has a significant role in the University's commitment to meeting the needs of the region. HUSoN is the largest academic unit of the COHE. HUSoN furthers the vision and mission of the University and the COHE to maintain congruency through the educational processes (demonstrated in Tables 1A.1 and 1A.2 below). HUSoN defines its mission in a manner that is consistent with HU's Strategic Plan 2011 and Initiatives (HU Strategic Plan and Initiatives), and COHE's Strategic Plan and initiatives. Detailed strategic plans and initiatives for HU and the COHE are found in Appendix A – Strategic Plan and Initiatives.

Table 1A.1 Relationship between the University’s Vision, COHE Vision, and HUSoN Vision

Husson University	College of Health & Education	Husson University School of Nursing
Husson is a University of choice for premier professional programs where students succeed, experiential learning is championed and global engagement is emphasized.	The College of Health and Education aspires to shape our students into compassionate and effective practitioners, leaders, and scholars who value inter-professional collaboration, lifelong learning, and global engagement.	The School of Nursing will be an innovative leader in educating nurses who are caring, competent and committed to individual and global health.

Table 1A.2 Relationship between the University’s Mission and HUSoN Mission

Husson University	College of Health & Education	Husson University School of Nursing
Husson University inspires and prepares students for professional careers in current and emerging fields within the context of an education informed by the sciences and humanities.	The Husson University College of Health and Education inspires and prepares students for contemporary, evidence-based, and ethical practice in health, counseling, and education professions.	The School of Nursing produces leaders in nursing and healthcare that provide thoughtful innovation in healing, teaching and discovery. The mission is accomplished through curricula grounded in experiential learning, evidence-based standards, and collaborative strategies to build effective interprofessional teams to ensure quality healthcare delivery for diverse populations.
Husson University achieves career preparation by supporting and emphasizing:	College of Health & Education foster student success by promoting:	Husson University School of Nursing achieves professional preparation by supporting and emphasizing:
<ul style="list-style-type: none"> • Outstanding teaching. • Scholarly contributions to one’s discipline or field of expertise. • An undergraduate and graduate curriculum that is challenging, relevant, and promotes critical thinking skills, self-confidence and strong communication skills. • Commitment to ethical behavior and social responsibility through involvement in the world by faculty and students, administrators and staff, board members, and involved citizenship as a university. • Lifelong learning to prepare students professionally and personally for the challenges of a constantly changing world. • A diverse cultural and global perspective achieved through student development and experiential learning opportunities that reinforces our commitment to a strong academic community. • Careful management and stewardship of University resources. 	<ul style="list-style-type: none"> • Professional identity • Self-directed learning • Critical reflection and scholarship • Practice focused on the individuals, families, groups and populations we serve • Integration of state-of-the-art technology • Cultural competence, social justice, and advocacy for our clients and our professions. 	<ul style="list-style-type: none"> • Clinical excellence • Critical thinking • Student-centered learning • Experiential learning • Holistic and compassionate care • Self-reflection • Leadership • Interprofessional collaboration • Transformative curricula

HUSoN further defines how its mission is congruent with the University's mission, vision, and strategic plans (<http://www.husson.edu/about/assets/husson-about-transforming-12-14-12-3302-118-1.pdf>) and COHE's mission, vision, and strategic plan (Appendix A) through deliberate and passionate teaching and learning practices.

For example, HUSoN identifies healing as an important dimension of the nursing role while recognizing that healing is not limited to nursing's domain. HUSoN faculty encourage students to engage in healing techniques that support the nurse-patient therapeutic relationship in all aspects of care. Students are mentored in self-care and developing a life of balance via self-reflection, awareness of spirituality, multicultural sensitivity and the roles these concepts play in health.

Faculty believe that teaching is a core element of professional practice. To promote successful learning, students need to understand the teaching-learning process and content/concepts such as developmental stages, culture, patient preferences, and health literacy when educating individuals or groups. Experiential learning opportunities support student engagement in active teaching and learning processes. As an example, students in pediatric clinical experiences develop health promotion projects to address developmental safety and infection control areas of need to support parents and children. These types of clinical experiences provide opportunities for students to practice teaching skills and build confidence in promoting health education, prevention, and safety goals.

Discovery is the basis of student-centered learning, a process which embraces collaboration between faculty and students. Faculty strive to utilize thoughtful, evidence-based teaching strategies that encourage an environment of discovery in didactic and clinical settings. Students are encouraged to become life-long learners by creating an atmosphere of scholarly inquiry and discovery during their educational experience that will continue throughout their professional careers. By promoting scholarly inquiry and discovery, HUSoN graduates are prepared to use a diverse approach to designing and delivery of safe, quality patient centered care while employing stewardship of healthcare resources.

Consistency of Professional Nursing Standards and Guidelines

The faculty in collaboration with the communities of interest, have developed undergraduate and graduate program goals and expected student outcomes. Faculty used the following professional nursing standards and guidelines in the development and revision of goals.

- *The Essentials of Baccalaureate Education for Professional Nursing Practice* (AACN, 2008)
- *The Essentials of Master's Education for Advanced Practice Nursing* (AACN, 2011)
- *Criteria for the Evaluation of Nurse Practitioner Programs* [National Task Force on Quality Nurse Practitioner Education (NTF, 2016)]
- *Nursing Scope and Standards of Practice* (ANA, 2015)
- *Guide to Code of Ethics for Nursing with Interpretive Statements* (ANA, 2015)
- National Council of State Boards of Nursing NCLEX-RN® Test Blueprint (2016)
- *Consensus Model for APRN Regulation: Licensure, Accreditation, Certification, & Education* (ANA, 2008)
- Maine State Board of Nursing (MSBON) *Standards for Educational Programs in Nursing* (Chapter 7) <http://www.maine.gov/boardofnursing/docs/Chapter%207.pdf>

Expected Program Outcomes

At the completion of the undergraduate program, graduates will be expected to:

- Synthesize evidence-based knowledge from liberal education, nursing and other disciplines to guide baccalaureate generalist nursing practice (Essential I).
- Design culturally appropriate, holistic, patient-centered strategies to promote health and manage illness for diverse individuals, families, groups, communities, and populations across the lifespan. (Essential VII, IX)
- Engage in inter- and intra-professional communication and collaboration that promotes the achievement of quality patient outcomes and safety in various environments and healthcare settings. (Essential II, III, & VI)

- Demonstrate skills in the use of informational and health care technologies that support quality outcomes and improve care. (Essential III & IV)
- Adhere to a professional moral, ethical, and legal framework to guide conduct and decision-making. (Essential VIII)
- Investigate current issues in healthcare policy, finance, and regulatory environments and propose initiatives that will impact the quality and safety of healthcare delivery. (Essential II & V)

Faculty have further defined the expected program outcomes by subdividing outcomes by program level. The outline of the expected program outcomes by level is demonstrated below in Table 1A.3.

Table 1A.3 HUSoN BSN Program Level Outcomes

Level I Outcomes – Freshman/Sophomore	Level II Outcomes – Junior	Level III/Terminal Outcomes – Senior
1. Acquire evidence-based knowledge from liberal education, nursing and other disciplines to guide baccalaureate generalist nursing practice.	1. Interpret evidence-based knowledge from liberal education, nursing and other disciplines to guide baccalaureate generalist nursing practice.	1. Synthesize evidence-based knowledge from liberal education, nursing and other disciplines to guide baccalaureate generalist nursing practice
2. Define culturally appropriate, holistic, patient-centered strategies to promote health and manage illness for diverse individuals, families, groups, communities, and populations across the lifespan.	2. Apply culturally appropriate, holistic, patient-centered strategies to promote health and manage illness for diverse individuals, families, groups, communities, and populations across the lifespan.	2. Design culturally appropriate, holistic, patient-centered strategies to promote health and manage illness for diverse individuals, families, groups, communities, and populations across the lifespan.
3. Recognize inter- and intra-professional communication and collaboration that promotes the achievement of quality patient outcomes and safety in various environments and healthcare settings.	3. Practice inter- and intra-professional communication and collaboration that promotes the achievement of quality patient outcomes and safety in various environments and healthcare settings.	3. Engage in inter- and intra-professional communication and collaboration that promotes the achievement of quality patient outcomes and safety in various environments and healthcare settings.
4. Identify skills in the use of informational and health care technologies that support quality outcomes and improve care.	4. Practice skills in the use of informational and health care technologies that support quality outcomes and improve care.	4. Demonstrate skills in the use of informational and health care technologies that support quality outcomes and improve care.
5. Describe a professional moral, ethical, and legal framework to guide conduct and decision-making.	5. Apply a professional moral, ethical, and legal framework to guide conduct and decision-making.	5. Adhere to a professional moral, ethical, and legal framework to guide conduct and decision-making.
6. Discuss current issues in healthcare policy, finance, and regulatory environments and propose initiatives that will impact the quality and safety of healthcare delivery.	6. Discover current issues in healthcare policy, finance, and regulatory environments and propose initiatives that will impact the quality and safety of healthcare delivery.	6. Investigate current issues in healthcare policy, finance, and regulatory environments and propose initiatives that will impact the quality and safety of healthcare delivery.

Faculty have defined the graduate core outcomes (Table 1A.4), FCNP track outcomes (Table 1A.5), and PMHNP track outcomes (Table 1A.6) in relationship to AACN Master’s Essentials (2011), and Advanced Practice Nursing standards and guidelines. Nurse Educator track outcomes in relationship to AACN Master’s Essentials (2011) and Nurse Educator Core Competencies (NLN, 2013) found in Table 1A.7.

Table 1A. 4 MSN Core Outcomes

	Outcome	Essentials	NONPF Comps
1	Integrate scientific theories from nursing, biopsychosocial fields, physical sciences, genetics, public health, quality improvement and organizational sciences to support advanced nursing practice	Essential I Background for Practice from science & humanities Essential VIII Clinical Prevention/Population Health	NONPF 1 Scientific Foundation Comps
2	Utilize leadership skills to foster collaboration, change and advocacy to influence advanced nursing practice and improve healthcare	Essential II Organizational and Systems Leadership	NONPF 2 Leadership Comps NONPF 8 Health Delivery System Comps
3	Engage in complex, evidence-based advanced nursing practice and evaluate innovative approaches to care of diverse individuals, families, communities and populations	Essential III QI and Safety	NONPF 3 Quality Comps
4	Translate current evidence to guide practice by demonstrating competence and the knowledge base for research methodology and the research process	Essential IV Translating/Integrating Scholarship into Practice	NONPF 4 Practice Inquiry Comps
5	Integrate current and emerging technologies to deliver timely, accurate, coordinated patient care across all settings while maintaining communication and participation of the interprofessional healthcare team to continuously improve quality and safety in healthcare	Essential V Informatics and Healthcare Tech Essential VII IP Collaboration for Improving Patient/Pop Health Outcomes	NONPF 5 Tech and Info Comps
6	Analyze complex health systems to improve the delivery of care and patient outcomes	Essential III QI and Safety	NONPF 8 Health Delivery System Comps
7	Provide competent evidence-based advanced practice nursing care within a primary care setting to diverse individuals, families and pops	Essential IX Master's Level Nursing Practice	NONPF 9 Ethics Comps
8	Translate knowledge into practice and policy to reduce health disparities, encourage cultural sensitivity and promote access to quality care while advocating for social justice and equity locally, nationally and globally	Essential IV Translating and Integrating Scholarship into Practice Essential VI Health Policy/Advocacy	NONPF 4 Practice Inquiry Comps NONPF 6 Policy Comps

Table 1A.5 FNP Track Outcomes

	Outcomes	Essentials	NONPF
1	Assume a position in a primary care setting as a nurse practitioner upon successful completion of national certification exams	Essential IX Master's Level Nursing Practice	NONPF 9 Independent Practice
2	Provide comprehensive primary health care emphasizing health promotion and disease prevention to individuals, families and groups across the lifespan	Essential IX Master's Level Nursing Practice	NONPF 9 Independent Practice
3	Utilize and conduct research that will promote quality health care and its delivery to improve clinical outcomes for selected pop groups	Essential IV Translating/Integrating Scholarship into Practice	NONPF 4 Practice Inquiry Competencies
4	Manage available tech and/or IS in the delivery of primary care	Essential V	NONPF 5 Tech/Info Lit

		Informatics/Healthcare Technology	
5	Implement culturally competent primary care with a focus on quality improvement/safety that incorporates the socioeconomic, political, ethical and diversity variables of each population	Essential III QI and Safety	NONPF 3 Quality
6	Apply theoretical foundations and change principles while leading in the development and implementation of innovations that advance practice in a primary care setting	Essential I Background for practice	NONPF 1 (?) Scientific Foundation
7	Use ethical principles in decisions regarding issues related to individuals, pops and healthcare delivery systems	Essential IX Master's Level Nursing Practice	NONPF 8 Ethics
8	Provide advocacy and leadership in the primary care setting that addresses the needs of vulnerable and culturally diverse populations, providers and environments	Essential II Org/Systems Leadership Essential VI Health Policy/Advocacy Essential VIII Clinical Prevention/Pop Health	NONPF 2 Leadership NONPF 6 Policy

Table 1A.6 PMHNP Track Outcomes

	Outcomes	Essentials	NONPF
1	Provide primary mental health care to clients of all ages, within diverse practice settings	Essential IX Master's Level Nursing Practice	NONPF Independent practice
2	Utilize a biopsychosocial perspective in evaluating client needs and planning mental health care	Essential IX Master's Level Nursing Practice	NONPF Independent practice
3	Incorporate relevant theories and specialized knowledge into clinical practice	Essential I Background for Practice	NONPF 1 Scientific Foundation
4	Analyze research used for improving health outcomes	Essential IV Translating/Integrating Scholarship into Practice	NONPF 4 Practice Inquiry
5	Contribute to the improvement of mental health care by influencing health policy of the underserved living in rural communities	Essential VI Health Policy/Advocacy	NONPF 6 Policy
6	Influence psychiatric/mental health nursing practice by exhibiting competence in leadership, case management and education	Essential II Org/Systems Leadership	NONPF 2 Leadership
7	Assume responsibility for continued professional G&D	Essential IX Master's Level Nursing Practice	NONPF 9 Independent Practice
8	Utilize and apply healthcare informatics in the AP role	Essential V Informatics and Healthcare Technology	NONPF 5 Tech/Info Lit

Faculty defined the expected APRN track outcomes to meet the NP core competencies in abbreviated form above. The Nurse Practitioner Core Competencies, a delineation of suggested content specific to the NP core competencies (Appendix B 2014 Nurse Practitioner Core Competencies Content) which can also be found at <http://c.ymedn.com/sites/www.nonpf.org/resource/resmgr/competencies/2014npcorecompscontentfinaln.pdf>

Table 1A.7 Nurse Educator Core Outcomes

	Outcomes	Essentials	NE Core Competencies
1	Provide educational strategies to meet diverse learning needs in the classroom, clinical and nontraditional settings.	Essential IV Translating/Integrating Scholarship into Practice	NEC Competency I Facilitate learning
2	Utilize comprehensive assessment and evaluation processes in nursing education.	Essential IX Master's Level Nursing Practice	NEC Competency III Use assessment & evaluation strategies
3	Synthesize relevant theories and specialized knowledge in nursing education.	Essential I Background for practice	NEC Competency IV Participate in curricula design and programmatic outcomes
4	Analyze and apply research for improving nursing education in diverse settings.	Essential IV Translating/Integrating Scholarship into Practice	NEC Competency VI Pursue cont QI in nurse educator role
5	Influence nursing education by exhibiting competence in teaching, counseling, consultation, research, leadership and collaboration.	Essential II Org/Systems Leadership	NEC Competency VIII Function within the educational environment
6	Utilize an interdisciplinary focus in the delivery of nursing education.	Essential VII IP Collaboration for Improving Patient/Pop Health Outcomes	NEC Competency II Facilitate learner development and socialization
7	Contribute to the improvement of health and professional nursing education by influencing health policy.	Essential VI Health Policy/Advocacy	NEC Competency VI Pursue cont QI in nurse educator role
8	Utilize and apply health care informatics in nursing education.	Essential V Informatics and Healthcare Technology	NEC Competency I Facilitate learning
9	Practice with personal integrity and a willingness to search for ethical truths in a constantly changing environment.	Essential IX Master's Level Nursing Practice	NEC Competency VIII Function within the educational environment
10	Assume responsibility for continued professional growth and development	Essential IX Master's Level Nursing Practice	NEC Competency VII Engaging in scholarship

For better student understanding of the relationship between program outcomes and professional nursing standards and guidelines, undergraduate and graduate program outcomes are found in the HUSoN Student Handbook and located on the HUSoN webpage at <http://www.husson.edu/college-of-health-and-education/assets/husson-academics-cohe-son-handbook%20-fa2017-18-official.pdf>.

As described in the preceding paragraphs, HUSoN mission, goals, and expected outcomes are informed by the mission and strategic plan of the University. HUSoN mission, goals, and expected outcomes for both undergraduate and graduate programs are consistent with professional standards and guidelines. Faculty as a whole review the mission, goals and expected outcomes annually for congruence with the University and professional standards and guidelines. The Curriculum Committee and the Assessment and Evaluation Committee review the aggregated outcomes and recommend revisions to the mission, goals, and outcomes. Expected student outcomes are clear and are expressed as competencies with selected benchmarks (see Standard IV).

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

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

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

Program Response:

The mission, goals, and expected student outcomes, curriculum/program outcomes, and the individual student learning outcomes are reviewed and revised by the nursing faculty to reflect trends in nursing and healthcare, most current professional nursing standards, and guidelines, as well as the needs and expectations of the community of interest. The Systematic Plan of Evaluation (SPE) is utilized to guide the review and revision of the mission, goals, and aggregate expected outcomes of HUSoN. The process allows faculty to focus on continuous quality improvement and uses assessment data to inform programmatic decisions. Table 1B.1 provides an example page of the SPE. The expected aggregate student outcomes are measured against the actual outcomes on an annual basis by the Assessment and Evaluation Committee and then reported to HUSoN Faculty Organization. The SPE addresses comprehensive periodic review and revision of HUSoN's mission, goals, and expected outcomes and is available for review in the Resource Room in Standard I document file.

Table 1B.1 Example of SPE

AREAS OF PROGRAM EVALUATION	CRITERIA OR STRATEGIC INDICATOR	METHODOLOGY	TIMING	PERSON(S) RESPONSIBLE	DOCUMENTATION
Standard I Program Quality: Mission and Governance					
1. The mission, goals, and expected outcomes are congruent with Husson and with professional nursing standards. (I-A & I-B)	Mission, goals and expected outcomes are congruent with those of Husson and discipline.	Review college, DON, and professional documents	Every 2 years in October	Program Director	Directors Meeting Minutes and DON Faculty Organization Minutes as needed
2. The mission, goals, and expected outcomes reflect the needs and expectations of the community of interest. (I-C)	Mission, goals and expected outcomes reflect needs of the community of interest.	Discussion with Excellence Coalition	Every 4 years in November, or as needed	Program Directors	Minutes of Coalition Meetings
3. Roles of the faculty and students in the governance of the program are clearly defined and enable meaningful participation. (I-D)	DON Bylaws define faculty role and student involvement in committees.	Review of DON Bylaws	Every 3 years or as needed	Program Directors	DON Faculty Minutes, Undergraduate and Graduate Faculty Minutes
4. Documents and publications are accurate. (I-E)	Documents accurately reflect all	Review of DON and institutional documents and publications	Yearly or as needed	Program Directors	Directors Meeting Minutes, DON Faculty Organization

	aspects of the programs.				and Faculty Forum Minutes. Review dates on documents
5. Policies are fair, equitable, published, and are reviewed and revised as necessary. (I-F)	Academic policies are reviewed and revised as needed to reflect ongoing improvement.	Review of DON documents Institutional documents	Every 2 years or as needed Every 2 years or as needed	Program Directors	DON Faculty Organization Minutes, Undergraduate and Graduate Faculty Minutes Review dates on documents

In addition to the annual review, periodic reviews and revisions are made as appropriate. As an example, in spring 2017, the HUSoN Chair appointed an ad hoc committee to restructure the current RN/BSN curriculum based on *The Essentials of Baccalaureate Education for Professional Nursing Practice* (AACN, 2013) and the *AACN White Paper on Expectations for Practice Experiences in the RN to Baccalaureate Curriculum* (<http://www.aacn.nche.edu/aacn-publications/white-papers/RN-BSN-White-Paper.pdf>). During this process the ad hoc committee reviewed, in addition to the standards and guidelines set forth from AACN, best practice in post-licensure education. The curriculum was revised and received unanimous faculty approval in April 2017. The restructured curriculum then went forward for University approval and was again unanimously approved for implementation in the 2017/2018 academic year.

Community of Interest

To ensure the mission, goals, and expected outcomes reflect the needs of the communities of interest, HUSoN collaborates with groups identified as our community. HUSoN defines our community of interest (COI) as regional, national and international healthcare agencies or entities that provide experiential learning opportunities, employment, and/or guidance for students, alumni, and faculty. COI are invited to collaborate with HU leadership to facilitate the needs of the public, guide quality healthcare delivery, and expand educational opportunities. Students, alumni, HUSoN faculty and staff, and the University are included in our communities of interest. Through the collaborative efforts of COI, HU, and HUSoN the mission, goals, and expected outcomes are reviewed and revised to include current trends in healthcare and public policy.

Illustration of COIs, Input/Communication Methods, and Exemplars that Guide Program Improvement – Table 1B.2

Community of Interest	Input/Communication Methods	Exemplars
Eastern Maine Medical Center (EMMC) Leadership Team	Quarterly meetings with Nursing Leadership and HUSoN Chair	Additional clinical sites and clinical nurse educators to support experiential learning opportunities. Education Department supports the Simulation and Learning Resource Center with equipment and supplies. Discussion ongoing regarding the support of five scholarships to students from outside the New England Region. Annual funding in the amount of \$150,000.00.
STTI – Omicrom Xi Chapter at Large	Chapter and National Meetings, inductions, and Leader Presentations	Spring 2017 National President presented at the Annual Induction Ceremony. Faculty presentation at STTI Convention. Guidance for scholarship to students and faculty.
Advisory Council	Feedback on student and faculty	Identified that clinical educators and preceptors in their agencies working with students needed to receive additional training and feedback on performance. Online educational site and handbooks were implemented by Clinical Coordinator in 2015 and expanded in 2016, and 2017 to include 8 online modules for training.
Professional and Community Agencies and Groups	University Administration, HUSoN Faculty and Staff serve on a variety of community and professional committees and boards. Faculty and Staff engage in professional practice.	Dr. Robert Clark, HU President serves on St. Joseph Hospital Boards. Dr. Teresa Steele, HU Fellow and Professor Emerita serves on Acadia Hospital Board. HUSoN Chair is an active member of Organization of Maine Nurse Executives (OMNE), Maine Nursing Education Collaboration (MeNEC), American Nurses Association (ANA). Faculty are active in professional organizations; Example - Maine Nurse Practitioner Association (MNPA). HUSoN Clinical Coordinator and Coordinator, SLRC are active on education and administration committees at EMMC.
Students	Course/Faculty/Clinical Evaluation. Student Representatives in HUSoN committees and Organization of Student Nurses (OSN).	NL 427 developed simulated learning activity to evaluate preparedness for partnership experience. NU 841 and NU 842 students to develop proposals for Capstone Projects based on area of interest. Proposal to be completed in NU 710. OSN officer and faculty represent HUSoN at Annual Nurses Day Tea in Augusta at the Home of the Governor. Institutional Research for informal surveys from current students for programmatic improvements.

Alumni	Post-graduation surveys, formal and informal contact with alumni	Alumni are invited to participate in the "Alumni Panel" in NL 427 or NU 426 to discuss new graduate experiences, NCLEX-RN® preparation, and mentorship to seniors. Incorporation of "Alumni Panel" for NU 700 and NU 841/842 to discuss graduate education and capstone project preparation. Faculty position changes to enhance learning environment both undergraduate and graduate programs. Support from the Office of Institutional Research for informal surveys from graduates for programmatic improvements.
HUSoN Faculty and Staff	Faculty Organization Meetings, Committee Meetings, University Service, Professional Development, and Conference/Workshop attendance.	Clinical assessment revision to include a valid and reliable tool (Creighton Tool) to be utilized across the programs. ExamSoft training and incorporation for exam analysis to improve retention, program completion, and NCLEX-RN® first time pass rates.
University	Faculty and Staff service on University Committees Director, Curriculum and Assessment	See Table 1D.1 Coordinator, Curriculum and Assessment – Nursing position created. Provides training and support in areas of curriculum revision based on evaluation data.
MSBON	Annual Reports, Annual Education Meeting	Reviewed pre-licensure compliance with MSBON standards and guidelines, NCSBN – NCLEX-RN® blueprint review, and NCSBN recommendations for educational practices.

The following is an example of COI and HUSoN collaboration to increase the number of quality nurse educators. The Healthcare COI within the state of Maine identified the need for an increase in qualified nurse educators in an effort to ameliorate the nursing shortage at the bedside. HUSoN with the support of a HRSA grant, designed the MSN with a concentration in Nursing Education which was first offered in spring of 2012, after receiving CCNE approval in 2011. A total of 9 individuals enrolled over a 3-year period, with 9 completing the Program; 5 received an MSN and 3 received a Post-Master's Certificate (PMC). HRSA grant funding was provided for a three year period and applications were limited upon the completion of the three years. The last student from the initial cohort successfully graduated in spring 2016. Subsequently, the marketing and recruitment for the program was placed on hold until the current market could be better understood. However, data analysis, continual feedback from COI, and results of a needs assessment has prompted the restructuring of the MSN program. The proposed MSN will include graduate program core coursework, with concentration curriculum in either health systems leadership or nurse education. Admission to the revised track is anticipated for fall 2018.

COI feedback, review of national needs, and increased interest in the Psychiatric Mental Health Nurse Practitioner track has the faculty reviewing professional standards, guidelines and best practice to revise the existing curriculum. A hold on admissions is in effect for the 2017/2018 academic year while processes for redesign of curriculum and approval processes are completed. Admission to the redesigned track is anticipated for fall 2018.

HUSoN responds to the needs and expectations of the COI by involving them in policy development and implementation, curriculum and program development, and systematic evaluation of the programs. COI involvement is vital to the mission, vision, and expected outcomes the undergraduate and graduate programs.

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

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

Program Response:

The expected faculty outcomes in teaching, service, scholarship, and practice are congruent with HUSoN, COHE, and HU’s mission, strategic goals, and expected outcomes and are outlined in the HU Faculty Handbook. The Faculty Handbook, Employee Handbook, and policies are available for faculty and staff using HU’s shared network (go.husson.edu). A copy of both the faculty and employee handbooks are available for review in the Resource Room in the Standard One document file. The expected faculty outcomes for full time faculty are illustrated in Table 1C.1.

Expectations of Faculty – Table 1C.1

Ranked Faculty	Expectations
Assistant Professor	<ol style="list-style-type: none"> 1. Teaching excellence and demonstrated dedication to improving pedagogy; 2. Preparation and implementation of faculty development plans in consultation with the Chair of the school; 3. Advising students in accordance with Section 2.5.4; 4. Participation in discipline or field of study; 5. Participation fully in life and governance of the University in accordance with Section 2.5.3; and 6. Participation in department, committee, school and Faculty Forum meetings
Associate Professor	<ol style="list-style-type: none"> 1. Teaching excellence and demonstrated dedication to improving pedagogy; 2. Preparation and implementation of faculty development plans in consultation with the Chair of the school; 3. Advising students in accordance with Section 2.5.4; 4. Contribution to the discipline or field of study through refereed articles; textbooks or books; presentation at conferences; or other evidence; 5. Participation in course development and/or curriculum development; 6. Demonstration of leadership in the life and governance of University in accordance with Section 2.5.3, including but not limited to: committees, clubs, and organizations; and 7. Demonstration of leadership in department, committee, school and Faculty Forum meetings
Professor	<ol style="list-style-type: none"> 1. Teaching excellence and demonstrated dedication to improving pedagogy; 2. Preparation and implementation of faculty development plans in consultation with the Chair of the school; 3. Advising students in accordance with Section 2.5.4; 4. Substantial scholarly contribution to the discipline or field of expertise through refereed articles; authored textbooks or books; presentation at conferences; or other evidence; 5. Course development and curriculum development/improvement; 6. Demonstration of leadership in the life and governance of University in accordance with 2.5.3, including but not limited to: committees, clubs, and organizations; and 7. Demonstration of leadership in department, committee, school and Faculty Forum meetings.
Ranked Faculty with Administrative Appointments (Academic Directors/Department Chairs)	<p>When a faculty member holds a teaching appointment and is also appointed to carry out formal administrative responsibilities as well, that person’s teaching load and administrative responsibilities will be set forth in a written job description designed specifically for the position they will be holding.</p> <p>The Dean of the College or School will review their performance on a yearly basis or more frequently if appropriate. Coordinators can be full or part-time faculty.</p>
Unranked Faculty	Criteria
Instructor	<ol style="list-style-type: none"> 1. Previous work experience within the lecturer’s profession or area of expertise and/or earned

	master's degree from a graduate institution of recognized standing; 2. Evidence of teaching competency or potential thereof; and 3. Demonstrated dedication to improving pedagogy Additional duties for Instructor: 1. Attend department meetings as required by your school
Graduate Faculty	Criteria
	Maintains standards of achievement as specified for ranked faculty. Teaches graduate and professional knowledge and skills consistent with guidelines and/or accreditation criteria of that scholarly discipline or profession. Maintains currency in knowledge and skills Exhibits a disciplinary specialization and/or expertise in knowledge and/or skills. Advances disciplinary knowledge and skills as appropriate to the discipline (as defined by Boyer) Advances the profession through discipline-specific service. Engages in program and/or disciplinary accountability. Provides academic advising, and in addition provides advising for career counseling, and recommendations for licensure, employment, and professional opportunities as appropriate.

In accordance with HU's adoption of Boyer's Model of Scholarship, faculty responsibilities that are subject for evaluation include four specific areas of scholarship. A description of the areas of scholarship is provided below. Supporting evidence for each area is provided in Appendix C – HUSoN Examples of Boyer Model of Scholarship.

Faculty Responsibilities Subject to Evaluation (found in Faculty Handbook Section 2.5, p. 27)

Teaching

The primary responsibility of all Faculty is teaching - more specifically, scholarly teaching (the pedagogy of self-reflective teaching). Scholarly teaching entails an on-going process by which Faculty improve the effectiveness or quality of their pedagogical practices in light of critical self-reflection on these practices. Such reflection is founded on qualities that Husson values in its Faculty: open-mindedness, a spirit of integrity, and a respect for students. Faculty are evaluated on their performance in the areas listed below, as well as on the nature and consistency of their self-assessment in these areas.

- Delivery of course content
- Course design
- Currency of course content
- Creativity and/or currency in pedagogical practices

Scholarship, Professional Activity and Creative Work

Effective university teachers are also active scholars, and their scholarship informs their teaching. The University expects scholarship from its faculty members consistent with departmental and institutional responsibilities in at least one of four categories: the scholarship of teaching, the scholarship of application, the scholarship of discovery, and the scholarship of integration. Although a faculty member may pursue scholarship in more than one category, and the scholarly focus may change over time, the normative expectation is that faculty will seek substantive achievement in one of these categories of scholarship.

The University encourages attendance at professional meetings as an essential activity of scholars that enhances teaching and professional development; however, this type of participation does not, by itself, supplant scholarship.

Service

Faculty members are part of the university community, their respective professions, and the community-at-large, and they have responsibilities to render service beyond the basic requirements of teaching and scholarship. This service is essential to the University's success in fulfilling its mission.

Academic Advising

Faculty members have the responsibility to offer competent advice to students on matters relating to their academic progress and success. Where a formal advising relationship exists, faculty members assume an obligation to review with the advisee progress toward degree completion, provide informed counsel and assistance in the registration process, support the student's professional growth, and make referrals when appropriate. Even when no formal advising relationship exists, faculty members are expected to be available to confer with students, support students' growth and development through the collegiate experience, and make informed referrals when appropriate.

HU is a non-tenure institution that offers faculty an initial contract outlining the rank and timeline for review. Faculty are reviewed for multi-year contracts by the Contract Review Committee (CRC) based on the evidence contained in the review file of the faculty member. The CRC forwards a recommendation to the Dean, COHE after careful review of all supporting evidence provided by the faculty member. The Dean, COHE, then forwards the recommendations from the CRC to the Provost along with her own recommendations. The Provost forwards these recommendations to the President along with her own recommendations. The final decision on awarding a multi-year contract is made by the President. In the event the faculty member is not awarded a multi-year contract, the faculty member is awarded a one-year terminal contract. (HU Faculty Handbook).

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

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

Program Response:

HU is governed by a duly adopted by-laws and a Board of Trustees which includes one ex-officio member who is a ranked member of the University faculty, elected by the Faculty for a two-year term. The President of the University serves as the Chief Executive Officer of the University, and is appointed and serves at the pleasure of the Board of Trustees. Dr. Robert Clark, University President, is responsible for the operation and management of the institution and for all directives of the Board of Trustees. The Senior Vice President of Academic Affairs and Provost serves as the chief academic officer directly responsible to the President for the oversight of development, coordination, and implementation of curricula and instruction at the University. Dr. Lynne Coy-Ogan, Senior Vice President of Academic Affairs and Provost, serves as an advisor to the President and spokesperson for the faculty, departmental chairs, and academic deans with regard to matters concerning the instruction program, budget proposals, and University policies. Dr. Coy-Ogan is the Chair of the Deans Council and is appointed by the President, with the approval of the Board of Trustees, and serves at the pleasure of the President.

The Academic Department of the University is organized into colleges, schools, departments, and programs administered by Deans and Academic Directors/Department Chairs. Deans are appointed by the President at the recommendation of the Provost. The COHE Dean serves as one member of the Deans Council, reports directly to the Provost and is responsible for oversight of development, coordination, and implementation of curricula and instruction within the COHE. Each unit within the COHE is administratively headed by a Chair or Director who is directly responsible to the Dean, COHE. Dr. Donna Beuk, Chair of the School of Nursing is a full-time ranked faculty member who serves as the HUSoN's administrative head and chief nurse administrator reporting to the Dean, COHE. Dr. Beuk has the same responsibilities as chair and director in other academic units within the COHE and maintains overall responsibility for resources, budget, personnel, inter-and-intra departmental communications, and leadership in departmental activities such as course administration and curriculum. As a shared governance unit, HUSoN faculty, staff, students, and administration participate at every departmental level in the governance of the HUSoN as illustrated on the organizational chart (Appendix D).

HUSoN ranked faculty members are voting members of the Faculty Forum. The Faculty Forum serves as liaison between the Faculty and administration, offers suggestions for the efficient operation of the University to the appropriate administrators, approves and recommends new policies, procedures, and programs of academic and non-academic nature for implementation, and performs assignments requested by the University administration. HUSoN faculty serve on University committees as illustrated in Table 1D.1. HUSoN Chair serves on the COHE leadership council along with other Chairs and Director in the College.

HUSoN recently underwent re-structuring efforts with the hiring a new chair, and replacement of vacant faculty positions. The effort was undertaken to determine a more efficient method to utilize manpower and resources. In the 2016/2017 academic year, HUSoN operated with four vacant faculty positions, leaving it necessary for the SON to streamline committee assignments, service to the University and the appointment of two interim administrative positions, Chair and Undergraduate Program Director.

HUSoN Faculty Participation in Shared Governance – Table 1D.1

Committee	2014/2015	2015/2016	2016/2017
University Committees			
UAAC	Cyndi Peterson	Cyndi Peterson	
Gen Ed	Cyndi Peterson	Cyndi Peterson	
Handbook Committee	Cathi Goebel	Cathi Goebel	Cathi Goebel
Handbook Committee		Deb Whittemore	
Compensation committee	Moira O'Neill		
Faculty Development committee	Mary Tedesco-Schneck		
HUSoN Standing Committees			
Curriculum	Deb Whittemore, Chair Moira O'Neill Cyndi Peterson	Deb Whittemore, Chair Moira O'Neill Cyndi Peterson Mary Jude	Cathi Goebel, Chair Connie Sprague Jeanne Ann Ouellette Mary Jude Priscilla Young Tracey Arno
Assessment & Evaluation	Mary Tedesco-Schneck Connie Sprague, Chair Val Sauda Jeanne Ann Ouellette	Connie Sprague, Chair Val Sauda Cyndi Peterson Steve Babin	Laurie Eddy, Chair Val Sauda Tammy Campbell Mary Jude Priscilla Young Steve Babin Jinger Pepin
Admission & Progression	Laurie Eddy, Chair Jeanne Ann Ouellette Mary Jude	Laurie Eddy, Chair Tracey Arno Jeanne-Anne Ouellette	Laurie Eddy, chair Tracey Arno
Faculty/Student Development	Mary Tedesco-Schneck, Chair Cathi Goebel Jinger Pepin	Mary Tedesco-Schneck, Chair Cathi Goebel Tammy Campbell Jinger Pepin	
Learning Resources	Tracey Arno, Chair Laurie Eddy Mary Jude	Tracey Arno, Chair Jinger Pepin Steve Babin Val Herbert	Tracey Arno, Chair Jinger Pepin Steve Babin Mary Jude
HUSoN Ad Hoc Committee			
Search committee- Chair/Undergraduate Coordinator			Val Sauda, Chair Laurie Mouradian Rhonda Wieskevicz
Search Committee-Faculty			Val Sauda, Chair

			Tammy Campbell Tracey Arno Cyndi Peterson Erin Owens (outside member)
RN/BSN Restructuring			Val Sauda, Chair Laurie Eddy Cathi Goebel Mary Jude

In spring 2017, the University hired Dr. Priscilla Young as fulltime faculty and PMHNP Track Coordinator and Dr. Donna Beuk, Chair. The faculty and staff interviewed and recommended for hire three additional full-time nursing faculty members, one part-time faculty and FCNP Track Coordinator, one Interprofessional Simulation Faculty (shared position with SoPT), and one full-time Healthcare Simulation Specialist. The Undergraduate Program Director position was not utilized, rather the re-structuring provided for release time to Lead Faculty who have oversight in levels within the undergraduate program and report directly to the Chair. With the new organizational structure of the SON, standing committee representation has been established as set forth in the HUSoN Bylaws (Appendix E – HUSoN Bylaws) and illustrated in Table 1D.2. The faculty organization as outlined in the bylaws is the principal decision making body for HUSoN and serves as the major means of faculty governance. The faculty organization meetings are held throughout the academic year (August through May). The faculty organization consists of full-time and part-time faculty, professional staff of HUSoN as “active” members. Active members have voting privileges. The Dean, COHE serves as an ex-officio member. Associate members include the Director of Assessment and Curriculum, Director of Online and Extended Learning, adjunct faculty (undergraduate and graduate), and student representatives from each program of study. Associate members of the faculty organization have a voice in actions of the organization and do not have voting privileges. The HUSoN Chair is also the Chair of the Faculty Organization and the HUSoN Administrative Assistant is the Secretary of the organization.

HUSoN Standing Committee Assignments 2017-2019 – Table 1D.2

HUSoN Standing Committee	2017-2019 (two year assignments)
Curriculum FUNCTION: Coordinates the overall undergraduate and graduate curricula, and related policies and recommends these to the HUSoN Chair and members. A. Plans, evaluates, and makes recommendations to the HUSoN for curricular change by program tracks to insure implementation of the mission, goals and expected outcomes. B. Reviews new course syllabi and proposed changes to existing course syllabi for content and relevance to level objectives within each program. C. Formulates academic policies as related to the curriculum. D. Reviews student proposals for accelerated or alternative programs of study. E. Reviews Standards and items appropriate to curricular oversight in Systematic Plan of Evaluation.	Undergraduate Representatives Valerie Sauda - Chair Diane Jenks Graduate Representative Patricia Eldershaw Curriculum & Assessment Representatives Cynthia Peterson Travis Allen Student Representatives Graduate Undergraduate Undergraduate – RN/BSN Online & Extended Learning Representative David Haus Ex Officio – Donna Beuk
Assessment & Evaluation FUNCTION: Coordinates the evaluation processes of the HUSoN Undergraduate and Graduate Nursing Programs; and makes recommendations to the HUSoN Chair and members A. Provides oversight of HUSoN function of the Systematic Plan of Evaluation. B. Evaluates all data related to progression, retention and/or graduation of undergraduate and graduate students,	Undergraduate Representatives Tammy Campbell Cathleen Goebel - Chair Graduate Representative Priscilla Young Curriculum & Assessment Representatives Cynthia Peterson Travis Allen Student Representatives Graduate

certification and NCLEX passage rates, and employer satisfaction. C. Provides recommendations for change and/or improvements to HUSoN Chair and members	Undergraduate Undergraduate – RN/BSN Ex Officio – Donna Beuk
Admission & Progression FUNCTION: Upholds educational and professional standards of HUSoN Undergraduate Nursing Program and Graduate Nursing Programs by individual review of specific applicants and progression of all nursing students. A. Recommends to the HUSoN Chair and members procedures for the selection and admission of qualified candidates. B. Recommends acceptance and rejections of applicants for the HUSoN Programs to the HUSoN Chair and COHE Dean. C. Recommends to HUSoN Chair individual student progression based on program, school and university policies	Undergraduate Representatives Valerie Sauda Cathleen Goebel Graduate Representative Ramona Lazenby - Chair Curriculum & Assessment Representatives Cynthia Peterson Travis Allen Student Representatives Graduate Undergraduate Undergraduate – RN/BSN Ex Officio – Donna Beuk
Faculty/Student Development FUNCTION: Coordinates the faculty and student development activities and recommends these to the HUSoN Chair and members. A. Plans and evaluates recruitment activities of the HUSoN Programs. B. Reviews and communicates student requests, concerns, and grievances to the appropriate body. C. Plans, implements and evaluates faculty development seminars and workshops for the nursing faculty. D. Selects student scholarship awards and Sigma Theta Tau nominations and forwards to the HUSoN Chair.	Undergraduate Representatives Alicia Mooney - Chair Amanda Savage Graduate Representative Laurie Eddy Organization of Student Nurses (OSN) Advisor Jinger Pepin Student Representatives Graduate Undergraduate Undergraduate – RN/BSN Ex Officio – Donna Beuk
Learning Resources FUNCTION: To plan and maintain educational resources to support and enhance classroom and clinical learning experiences of the HUSoN Chair and members. A. Assess, evaluate and recommend integration of teaching strategies and resources within the HUSoN. B. Develop short and long term planned growth for the Simulation and Learning Resource Center (LRC) and teaching resources. C. Determine priorities for capital and operating purchases to maintain and improve simulation, learning, and teaching resources.	Tracey Arno – Chair Graduate and Undergraduate Representatives Jinger Pepin Kelly Macauley Amanda Savage Diane Jenks Curriculum & Assessment Representative Cynthia Peterson Online & Extended Learning Representative David Haus Student Representatives Graduate Undergraduate Undergraduate – RN/BSN Ex Officio – Donna Beuk

Student representation in departmental governance is critical in the mission, goals, and expected faculty and student outcomes. Therefore, students in each level are to select representatives to the governance committees and to the departmental faculty meetings. Student representatives are expected to collaborate with peers prior to committee and faculty meetings to identify any questions, concerns, or problems with proposed solutions and bring such forward to the respective committee or faculty as a whole. Student representatives are then expected to provide peers with feedback after respective meetings. Students serve as non-voting members of committees and the faculty organization. During the previous academic years 2014/2015, 2015/2016, and 2016/2017 student representation recruitment was unsuccessful. Student feedback from these years was collected through informal discussions among students, faculty, and advisors. With the revision of HUSoN Bylaws, effective July 2017, undergraduate and graduate student representation was incorporated across committees. The

Organization of Student Nurses has been the voice of students in decision making for the years when formal student representation was absent.

HUSoN leverages technology ongoing to receive direct student feedback. Each semester all pre-licensure undergraduate courses are taught in the classroom with the use of the University's Learning Management System (Canvas®) as a supplement for the syllabus, content information, notes, email access, etc. Graduate and post-licensure undergraduate courses are taught online with the same supplemental resources. Each semester faculty teaching online hold face-to-face meetings with students using Zoom® technology.

Online and distance education is not a barrier with regards to student governance issues. For example, the Chair and Clinical Coordinator held a graduate program meeting via Zoom® to gain student feedback in response to concerns from students. The meeting was one hour and fifteen minutes, and resulted in changes to how clinical placements are coordinated, capstone projects are selected, and other programmatic areas of delivery within the graduate program. As a result of the meeting, beginning academic year 2017/2018 the HUSoN Chair, Track Coordinators, and Clinical Coordinator plan to hold graduate program open forum meetings at the beginning, mid-term, and end of each semester. The Chair and faculty teaching in the RN/BSN program will also hold open forum meetings to engage online students in governance of the department.

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

Elaboration: References to the program's offerings, outcomes, accreditation/approval status, academic calendar, recruitment and admission policies, grading policies, degree/certificate completion requirements, tuition, and fees are accurate. Information regarding licensure and/or certification examinations for which graduates will be eligible is accurate. For APRN education programs, transcripts or other official documentation specify the APRN role and population focus of the graduate.^{1,2}

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

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

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

Program Response:

Documents and publications for HU, COHE, and HUSoN are available via the Internet through the university, college, and school webpages. These are the primary means of communicating HUSoN's offerings, outcomes, accreditation/approval status, University's academic calendar, recruitment and admission policies, grading policies, degree completion requirements, tuition, and fees. Materials designed to promote or advertise HUSoN are developed in collaboration with the University's Communications and Public Affairs Office, which includes the University's Marketing Department. For the RN to BSN program, the Director of Online and Extended Learning and The Learning House staff are involved in efforts to advertise and promote the program.

HUSoN graduate and undergraduate faculty have developed Google webpages that provide enrolled students with information on program, school, college, and university events, policies, and supplemental

¹ *Consensus Model for APRN Regulation: Licensure, Accreditation, Certification and Education (July 2008).*

² *Criteria for Evaluation of Nurse Practitioner Programs (National Task Force on Quality Nurse Practitioner Education, 2012).*

information. These sites have previously been maintained by the HUSoN Administrative Assistant and a grant funded Graduate Administrative Assistant. The funding for the Graduate Administrative Assistant ended on June 30, 2017. Beginning August, 2017 the newly hired Healthcare Simulation Specialist will maintain all Google webpages and social media sites for HUSoN. The following links are examples for review of the sites: [Graduate Nursing Google Site](#), [Undergraduate Google Site](#), [HUSoN Facebook Page](#), [HUSoN Twitter](#).

The University Catalog is available online through the Registrar’s webpage at <http://www.husson.edu/academics/registrar/catalog>. The webpage contains the current catalog along with previous academic year calendars and catalog addendums. Content related to HUSoN is reviewed and updated annually by the Administrative Assistant with input from faculty and staff, reviewed by the Chair, and approved for publication by the Dean, COHE.

Since the primary method of communication is the HU website via the internet, it facilitates being able to notify constituents about changes in document and publications in real time. Links to location of resources are illustrated in Table 1E.1.

Table 1E.1 - Location of Information related to HUSoN

Program Offerings	http://www.husson.edu/college-of-health-and-education/school-of-nursing/graduate-nursing/
Accreditation	http://www.husson.edu/college-of-health-and-education/school-of-nursing/nursing-accreditation
University Catalog	http://www.husson.edu/academics/registrar/catalog
Registrar	http://www.husson.edu/academics/registrar/
Financial Aid	http://www.husson.edu/financial-aid/
Tuition and Costs	http://www.husson.edu/admissions/tuition-and-costs/
Academic Calendar	http://www.husson.edu/academics/academic_calendar
Admissions and Recruitment	http://www.husson.edu/admissions/

The Student Handbook is reviewed and revised annually by the faculty and staff of HUSoN. Students are provided a copy of the handbook each year and sign an attestation that the student has read and understands the contents of the handbook including but not limited to policies, curriculum, completion requirements, licensure and certification. Students are notified of changes after the publication of the handbook through written notification, announcements in the classroom, meeting with advisors, emails, and updates provided on the Google webpages for graduate and undergraduate programs. For example, the RN to BSN curriculum was re-structured to become effective in the academic year 2017/2018. Students currently enrolled in the program were notified via email of the change and provided options for teaching out the old curriculum or transitioning to the new curriculum (Appendix F – Notification of RN/BSN Student). The Director of Online and Extended Learning along with HUSoN Chair, collaborated with The Learning House staff and advisors to ensure that students were provided information on degree completion. A detailed schedule of classes was provided to The Learning House staff and advisors by the Director of Online and Extended Learning in order to maintain congruency with the teach-out plans. The schedule is available in the Resource Room in Standard III document file.

Official transcripts and diplomas are available through the Registrar’s Office. Transcripts indicate the degree and concentration, diplomas indicate the degree earned. Specifically, graduates from the APRN track and certificate program transcript specifies the role and population focus (Appendix G Sample Transcript and Diploma for APRN graduate).

I-F. Academic policies of the parent institution and the nursing program are congruent and support achievement of the mission, goals, and expected student outcomes. These policies are:

- fair and equitable;
- published and accessible; and
- reviewed and revised as necessary to foster program improvement.

Elaboration: Academic policies include, but are not limited to, those related to student recruitment, admission, retention, and progression. Policies are written and communicated to relevant constituencies. Policies are implemented consistently. Differences between the nursing program policies and those of the parent institution are identified and support achievement of the program's mission, goals, and expected

student outcomes. A defined process exists by which policies are regularly reviewed. Policy review occurs and revisions are made as needed.

Program Response:

Academic policies of HU and HUSoN are congruent and support the achievement of the mission, goals, and expected outcomes. These academic policies are fair, equitable, and without discrimination based on race, creed, national origin, age, disability, or gender identification. University policies are published in the *Husson University Catalog* and are accessible via the HU website under “Academics”, “Registrar”, and “Catalog”. The direct link to the University catalogs is <http://www.husson.edu/academics/registrar/catalog>. HUSoN policies are published in the *Student Handbook*. The handbook is accessible through undergraduate and graduate Google sites, course webpages through Canvas® under “Resources”, and available from academic advisor. The *Student Handbook* can be obtained using the link, [Student Handbook 2017/2018](#).

Nursing faculty are involved in the development, review, and revision of the academic program policies and participate in decision making and policy development through shared governance which is an integral part of the mission of HUSoN. As previously stated, HUSoN has Standing Committees of the Faculty Organization in which faculty, professional staff, and students are members and from which development, review, and revision of academic policies are initiated. The Bylaws of HUSoN (Appendix E – HUSoN Bylaws) and the Systemic Plan of Evaluation (Appendix H – SPE) clarify the composition, functions, and methods of evaluation by the committees. The Standing Committees make voting recommendations to the Faculty Organization. For example, policies of the HUSoN related to student recruitment, admission, retention, progression, and graduation are reviewed by the Admissions and Progression Committee with recommendations forwarded to the Faculty Organization. In addition, policies related to educational resources to support and enhance classroom and clinical learning are reviewed by the Learning Resource Committee and forwarded to the Faculty Organization and resources of capital expenditure are forwarded to the Dean, COHE for budget review and recommendation to the Provost for the next academic year budget.

Differences between HUSoN policies and those of HU are identified and support achievement of the programs’ mission, goals, and expected student outcomes. Evidence available for review in the Resource Room illustrates the policies unique to HUSoN and how they differ from HU policies. It also illustrates the rationales used by the faculty and standing committees to develop and maintain these policies. For example, HU admission standards differ from the minimum SAT and GPA for admission into HUSoN. Students desiring to enter the undergraduate nursing program are required to have achieved a SAT score of 1030 or higher and a minimum GPA of 3.0. Students with lower SAT scores and a GPA of less than 3.0 can be admitted to the University as ‘undeclared’ and work to achieve the minimum standards of admission for HUSoN. Students apply for a change of major to nursing at the recommendation of the advisor. In contrast, the HU admission requirements include a minimum SAT score of 890 and a minimum GPA of 2.0.

HUSoN’s policy related to standardized, computerized testing supports student performance, achievement, and progress throughout the program. Nursing students are required to participate in Health Education Systems, Inc. (HESI) Exams administered in all four years of the undergraduate program. Faculty and students receive immediate feedback on the student’s score that identifies areas of strength and limitation and provides a formalized plan of improvement. In the NU 425 Senior Nursing Capstone course, faculty utilized aggregate course exam performance along with scores from the HESI Exit Exam to develop individualized plans for successful completion of the program. This policy related to standardized, computerized testing stimulates students to have accountability and responsibility for their learning, progression, graduation, and post-graduation plans for success on the NCLEX-RN®. Although the MSN program has not yet adopted a policy for HESI testing, plans are in place for the Assessment and Evaluation Standing Committee to review and make recommendations to the Faculty Organization to adopt the HESI standardized Advanced Physical Assessment, Advanced Pharmacology, and Advanced Pathophysiology (3Ps) exams during the 2017/2018 academic year. In spring 2015 the Graduate Coordinator initiated standardized assessments through Advanced Practice Education Associates (APEA) in the 3Ps and a pre/post performance predictor for the FNP certification exam. APEA does not offer a certification performance predictor for the PMHNP certification exam. Previously there was one Graduate Coordinator which was replaced with two positions, a FCNP Track Coordinator and a PMHNP Track

Coordinator. This enhancement has provided congruency with regard to policy and increased support for the achievement of expected student outcomes.

Undergraduate faculty began using ExamSoft for data analysis on learning assessments in 2015. Evaluation data is presented in Standard IV. It is suggested that faculty peer review assessments before and after an assessment is given for purposes of data analysis and feedback. The Office of Assessment and Curriculum is also available for analysis and feedback on assessments in addition to the function of collecting and collating data for faculty review. Faculty in the undergraduate and graduate programs have transitioned to using ExamSoft at different rates over the past few years. Beginning the academic year 2017/2018 the expectation is to use ExamSoft in alignment with the COHE expectations and will be part of the faculty annual evaluation. This expectation provides data for validity and reliability of HUSoN assessments which will support the programs' mission, goals, and expected student outcomes.

Consistency in all undergraduate and graduate policies is not achievable in areas of admission requirements, GPA standards, and pre-requisite coursework requirements in sciences and humanities. This is due to the different program requirements for undergraduate and graduate studies. However, standardized, computerized testing along with resources for establishing validity and reliability in assessments are areas that policy congruency is possible. HUSoN faculty continue to review and revise policies that support the achievement of the mission, goals, and expected student outcomes of both programs. Students are notified of policy changes electronically through Canvas® and/or email, and updates in the handbook. In cases of significant change, such as curriculum design, electronic and written notification is sent to students in HUSoN undergraduate and graduate programs. Examples include the notification to RN to BSN student of curriculum change (Appendix F) and notification to students currently enrolled in the PMHNP program regarding the teach-out plan that is in effect. Supporting evidence is available in the Resource Room in Standard I document file.

STANDARD I SUMMARY

STRENGTHS

- Congruency with HU and COHE mission, strategic goals, and expected student outcomes.
- Faculty continuously review student outcomes, formally and informally, for congruency with nursing standards and guidelines.
- Community of Interest are diverse in nature and demonstrate engagement with success of HUSoN.
- Faculty engagement in University, College, and School shared governance.
- Consistent utilization of standardized assessment products to support review and measurement of outcomes.

OPPORTUNITIES FOR IMPROVEMENT

- Communication of updates to policies and procedures to multiple platforms (websites, social media, bulletin boards, and through email and written correspondence).
- Lack of student involvement in HUSoN governance
- Inconsistent leadership succession planning for HUSoN governance and committee work

ACTION PLAN FOR IMPROVEMENT

OPPORTUNITIES FOR IMPROVEMENT	GOAL	ACTION PLAN
Communication of updates to policies and procedures to multiple platforms (websites, social media, bulletin boards, and through email and written correspondence)	Establish written communication plan and policies to support dissemination of updates to policy and procedure	1. Chair to assign ad hoc committee to develop policy recommendations for faculty consideration
Lack of student involvement in HUSoN governance	Increase both undergraduate and graduate student representation on HUSoN Committees Engage online student engagement in HUSoN governance	1. Recruit student representatives actively through faculty and student groups. 2. Create online community to engage RN/BSN and Graduate students in Faculty Organization and Committee meetings 3. Review opportunities for participation using technology from remote locations (Zoom®)
Inconsistent leadership succession planning for HUSoN governance and committee work	Maintain current leadership for a period of time that affords stability within the HUSoN Develop faculty to engage in leadership activities within HUSON	1. Collaborate effectively with HU Administrative Leadership 2. Faculty development in leadership skills

Standard II

Program Quality: Institutional Commitment and Resources

The parent institution demonstrates ongoing commitment to and support for the nursing program. The institution makes resources available to enable the program to achieve its mission, goals, and expected outcomes. The faculty, as a resource of the program, enable the achievement of the mission, goals, and expected program outcomes.

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

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

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

Program Response:

Administration and the Board of Trustees are dedicated to the success of Undergraduate and Graduate programs at Husson University, as is evidenced in the strategic planning, visioning, and availability of resources for continued viability and sustainability of the School of Nursing (HUSoN). Fiscal and physical resources are sufficient to enable the HUSoN to achieve its mission, goals, and expected aggregate student and faculty outcomes. The HUSoN has a total budget of \$1,580,092 for the 2017/2018 operating year and is divided into Personnel, Capital, and Operational budgets. The Operational budget is managed by the Chair and provides general support for the undergraduate and graduate programs. Faculty and staff have opportunity to provide input for budgetary decisions through group and individual communication. The physical space is sufficient and utilized efficiently to achieve the mission, goals, and expected outcomes of the HUSoN programs.

Fiscal Resources

The University Administration determines the operating and capital budgets for each of the Colleges and Schools, based on the prior year expenditures and projected needs of each program. The Senior Vice President of Academic Affairs and Provost (SVPAA/P) in collaboration with the Deans of the University review budget requests from individual programs. Budget requests are developed with input from faculty and staff in collaboration with the Dean, College of Health and Education (COHE). Husson University is a tuition dependent institution with conservative approaches to budget allocations that maintain a focus on providing a quality, professional education at an affordable/competitive price.

Additional revenue is provided to HUSoN through governmental and private grants and gifts to support achievement of mission, goals, and expected outcomes. For example, HRSA grant monies for three years (July 1, 2014 through June 30, 2017) at an aggregate amount of \$700,000.00 to enrich graduate education and a gift of \$15,000.00 from The Stephen and Tabitha King Foundation (2017) for simulated learning equipment. In 2015 The Giving Fund donated \$8,000.00 to support the Nurse Practitioner Program. Annually Eastern Maine Medical Center provides financial support in the amount of \$150,000.00. The financial support of the University and other resources for the HUSoN are adequate and are provided in the form of operating budgets, physical facilities, technological infrastructure, library access, student services, and faculty and staff support.

For example, the University provided allocations to support additional faculty, staff, and University resources as shown in Table 2A.1.

2014 – HUSoN Clinical Coordinator (1 FTE/10-Month)	Coordinate clinical placements and expand community partnerships for HUSoN
2014 – Simulation Assistant (0.5 FTE/9 months)	Assist Coordinator Simulation and Learning Resource Center in delivery of student experiential learning activities
2015 – HU Director of Online Learning	Liaison for HUSoN online RN/BSN program development and Learning House Partnership
2015 – Coordinator, Nursing Curriculum and Assessment 1 FTE/9-month (2015); 0.75 FTE/12-month (2016)	Provide faculty support in curriculum, assessment, and evaluation of programmatic and student outcomes
2015 – HU Director of Curriculum and Assessment	Collaboration and oversight in assessment and evaluation of programmatic and student outcomes
2016 – HU Safety/Compliance Officer	Oversight for compliance in OSHA standards and safety management and training
2017 – HUSoN Chair (1 FTE/12 months)	Chief Nurse Administrator for the HUSoN
2017 – HU Director of Online and Extended Learning	Restructure of previous position to provide faculty support in both online and extended learning programs with emphasis in instructional methodology and technological infrastructure
2017 – Interprofessional Simulation Faculty (0.5 FTE/10 month)	Collaborate and facilitate interprofessional simulation education in the Simulation and Learning Resource Center
2017 – Healthcare Simulation Specialist (1 FTE/9 month)	Collaborate and facilitate experiential learning in the Simulation and Learning Resource Center

As similar with other institutions of higher education, Husson University has made lean adjustments to the HUSoN budget over the past three years. With tuition increases that average 2% annually during this time, the university has been able to keep college education affordable and accessible. While minimal changes have been made in the total unit allocation, the HUSoN has been able to increase revenues through mindful stewardship of existing resources, adding student fees associated with clinical courses, experiential learning, and valid external assessment tools increasing cost effectiveness, increasing student enrollment in the nursing programs, and employing lean operation measures. HUSoN budget information is provided in Table 2A.2 in aggregate. Additional evidence is available in the Resource Room in the Standard II document file.

Table 2A.2 – HUSoN Financial Detail Report 2014 - 2018

Husson University									
Nursing Program									
Financial Detail FY2014-FY2018									
Description	Annual Budget 2013-2014	Annual Actual 2013-2014	Annual Budget 2014-2015	Annual Actual 2014-2015	Annual Budget 2015-2016	Annual Actual 2015-2016	Annual Budget 2016-2017	Annual Actual 2016-2017	Annual Budget 2017-2018
Personnel Cost (without benefits)									
Instructional Salaries	1,101,516	1,056,615	1,220,099	988,730	1,126,416	1,057,125	1,067,132	1,024,321	1,108,332
Non-instructional Professional Salaries	157,431	132,401	150,414	177,700	159,380	185,796	412,326	221,921	354,521
Clerical & Technical Salaries	59,205	50,354	37,601	36,759	38,966	41,991	63,456	30,160	28,640
Total Personnel Costs	1,318,152	1,239,370	1,408,114	1,203,189	1,324,762	1,284,912	1,542,914	1,276,402	1,491,493
Non-Personnel Cost									
Office Expense	18,650	18,847	18,647	12,099	16,700	10,258	12,038	(19,233)	8,659
Travel & Entertainment	35,370	17,294	35,377	16,340	25,720	19,412	22,692	26,027	24,457
Outside Services	32,693	34,455	32,696	24,627	31,193	23,022	28,515	59,957	24,779
Materials & Supplies	33,857	34,471	33,857	28,384	33,857	31,012	28,879	26,308	30,586
Rent & Leases – Equip & Film Rental	1,800	135	1,800	-	-	-	-	-	-
Other	3,000	(3,460)	3,000	50	1,500	(1,464)	217	169	119
Total Non-Personnel Costs	135,370	103,742	125,377	87,000	108,970	82,341	87,942	97,111	88,399
Unit Totals	1,453,522	1,343,112	1,533,491	1,290,189	1,433,732	1,367,153	1,630,856	1,373,513	1,580,092

The addition of student fees associated with clinical courses originated in 2005 and increased to \$300.00 per course in 2014 to offset the increasing cost of clinical nurse educators utilized in the practice settings and learning resource materials. Program assessment fees are associated with experiential learning and valid external assessment tools. Monies collected directly offset invoices from product providers. Experiential learning and assessment tools are utilized to support aggregated student outcomes resulting in program completion and increased first time NCLEX-RN® pass rates. Fall 2017 student fee schedule by course is indicated below in

Table 2A.3

Course	Description of Fee	Amount
HE 111 – year I	Program Assessment	32.00
Transfer – year I	Program Assessment	32.00
NU/NL 208	Clinical Fee	150.00
Health Assessment	Program Assessment	124.00
NU/NL 211	Clinical Fee	150.00
Interventions I	Program Assessment	203.00
NU/NL 315	Clinical Fee	300.00
Child Health	Program Assessment	25.00
NU/NL 322	Clinical Fee	300.00
Adult Health I	Program Assessment	25.00
NU/NL 323	Clinical Fee	300.00
Adult Health II	Program Assessment	124.00
NU/NL 324	Clinical Fee	300.00
Maternal/Newborn	Program Assessment	25.00
NU/NL 412	Clinical Fee	300.00
Community Health	Program Assessment	153.00
NU/ NL 422	Clinical Fee	300.00
Community Mental Health	Program Assessment	25.00
NU 424	Program Assessment	25.00
Adult Health III		
NU 425	Program Assessment	521.00
Senior Capstone		
NU 426	Program Assessment	25.00
Policy Leadership & Management		
NU 704	Clinical Fee	300.00
Adv. Health Assessment		
NU 808	Clinical Fee	300.00
Women’s Health		
NU 812	Clinical Fee	300.00
Family Psychiatric Nursing II		

Husson University maintains a Certificate of Liability Insurance, underwritten by Cross Insurance, for students and faculty. Each loss/occurrence is covered at \$1,000,000 with an aggregate coverage of \$3,000,000. Undergraduate nursing students and faculty are covered without charge; Graduate Nurse Practitioner students pay \$100 annually for the two years of clinical placement. Graduate students in the non-APRN track are not assessed with a student fee for coverage. A copy of the Certificate of Liability is held in the Associate Provost’s Office and available in the Resource Room in Standard Two document file for review.

A continual process of review, revision, and improvement is employed by the HUSoN Chair and the Dean, COHE with input from faculty throughout the fiscal year and annually. Faculty and students are provided resources appropriate to facilitate the mission, goals, and aggregate achievement of expected outcomes of HUSoN programs. The Administration of Husson University supplement the fiscal budget when additional resources are

needed to enhance the teaching and learning experiences of faculty and students. For example, capital funding was allocated to the Simulation and Learning Resource Center for the purchase of a state of the art medication administration system and a SimMan® Essential with laptop for fiscal year 2017/2018.

Faculty Salaries

Husson University maintains a commitment to fair and equitable faculty salaries. A Compensation Committee of the Faculty Forum regularly studies salary compression and equitabilities. The information presented below from HU and HUSoN is represented by rank without reference to educational preparation. AACN data is provided by both rank and educational preparation. Additional institution and state salary evidence is available in the Resource Room in Standard II document file.

Table 2A.4 Faculty Salary Overview

Rank	Education	*HU Faculty Salary 2016-17 (Mean)	*HU Clinical Adjunct Salary 2016-17 (Mean)	**AACN Salary (Mean)	AACN 25 th Percentile
Instructor		40,941			
	Nondoctoral			68,803	61,977
	Doctoral			72,452	68,000
Assistant Professor		61,317			
	Nondoctoral			70,051	72,000
	Doctoral			81,952	63,500
Associate Professor		74,295			
	Nondoctoral			94,202	80,000
	Doctoral			70,586	62,000
Professor		82,116			
	Nondoctoral				
	Doctoral			127,369	97,000
				Maine Schools of Nursing*** (Mean)	
Nursing Faculty/Theory (Adjunct)			5000/3 credit hour course	3000/3 credit hour course	
Clinical Nurse Educator (Adjunct)			2900-5000 Mean = 40/hr	Mean = 25 - 45/hr	

Source:
 *Human Resources Department – retrieved 09/12/2017
 **2016-2017 Salaries of Instructional and Administrative Nursing Faculty Report; Table 61

With faculty vacancies during the 2016/2017 academic year, faculty members were paid overload stipends, in addition to their base salaries, for exceeding the 24 credit hour general requirement per the Husson

University Faculty Handbook (Section 2.8.2 – Teaching Load). Faculty teaching assignments in the summer semester are available in the RN/BSN track and MSN program. Faculty credentialed to teach courses offered during this time are given priority before offering to adjunct faculty. Full-time nursing faculty are given a day per week to practice in the clinical setting or for pursuit of educational degrees, certificates, and/or fellowships. Financial support for professional memberships, continuing education and professional development are provided annually as deemed appropriate by the Dean, COHE in consultation with the HUSoN Chair. Evidence from the academic years 2015/2016 and 2016/2017 are available in the Resource Room in Standard II document file. Mean funding is \$1,500.00 per faculty member and may exceed this value if the program/fellowship carries benefits not only to the faculty member but the institution as a whole. It is important to note that faculty members are not required to repay educational funding with time worked. Husson University supports professional education of faculty members without required compensation with service and reviews the development as part of the annual review process.

Fiscal resources are sufficient to support competitive faculty salaries, workload assignments, and professional development. University resources facilitate the program in meeting faculty and student aggregate outcomes.

Physical Resources

HUSoN is located on the second floor of O'Donnell Commons, which was constructed in 2005. O'Donnell Commons is shared with the Schools of Occupational Therapy and Physical Therapy, located on the third floor. Admissions, Student Accounts, Financial Aid, and a 100 seating capacity lecture hall are located on the first floor. The second floor consists of an atrium seating area for students, two small conference rooms, a larger classroom, the Simulation and Learning Resource Center, Physical Adaptions Lab, Health Assessment Lab, and the faculty/administration office suite. There are eighteen offices, two clerical cubicles, and one copy/file/meeting room. The Dean, COHE office is located within the office suite, which allows for direct access to administration. Classrooms are assigned by the Registrar's Office and are most frequently in Peabody Hall which is adjoined to O'Donnell Commons. Classrooms are equipped with wireless and wired internet, media stations, and appropriate screens, white boards, and other technology to provide optional learning environments.

Faculty and staff offices are equipped with office furniture, computer docking stations with at minimum one monitor; most have two. Faculty and staff are assigned laptops through Husson IT department. There are two internet copy machines available within the area, one prints only black/white, the other prints both black/white and color. They have the capacity to copy, scan/email, and fax. Documents can be held until accessed by the sender to ensure privacy of information. Sufficient office and classroom supplies are available for both faculty and staff. To request an item that is not normally available, faculty and staff place orders through the HUSoN Administrative Assistant.

The Simulation and Learning Resource Center (SLRC) has undergone recent renovation to include an acute care simulation area with 3-G SimMan®, a maternal birthing suite with Noelle, and a variety of simulated learning equipment. The university has continued to support the SLRC with capital improvement funding; in 2016/2017 academic year HUSoN purchased Leardal Nursing Anne manikin, SimPad Plus, and bedside monitor for SimPad Plus totally \$11,776.00. Recently purchased capital improvements include SimMan® Essential High Fidelity manikin with a LLeap laptop and Omnicell Pixis medication dispensing console for a combined total of \$81,500.00. A complete inventory of equipment can be found in Appendix J – Learning Resource Center Equipment Inventory.

In fall 2015, the Provost charged the Dean, COHE and Dean, School of Pharmacy (SOP) to provide administrative support for IPE at Husson University. In fall 2016, the Dean, COHE established a Task Force for IPE Simulation with the charge of exploring the potential to expand current simulation laboratories to accommodate IPE simulation across the allied health and forensics spectra. The Coordinator, SLRC was lead for the task force activities. Members of the task force from SOT, SOPT, SOP, HUSoN, and Dean, COHE visited University of New England's (UNE) simulation center to tour and discuss best practice with UNE faculty and staff. SLRC, SOP member and Dean, COHE visited Wilkes University and Kings College in Wilkes-Barre, PA to further explore simulation centers for best practice in IPE in multiple disciplines of healthcare programs. SLRC and Dean, COHE visited facilities that support IPE Simulation, resource allocations, to aid the development of a strategic plan within the COHE and HUSoN in IPE. IPE and IP practice activities, travel, professional development, Certified Healthcare Simulation Educator and release time are funded and supported by the

university, Dean, COHE, Dean, SOP, and federal and private grant monies. A complete listing of the education and practice activities is provided as evidence in the Resource Room in Standard II document file. The Provost continues to provide support for IPE with resources and physical space development and equipment. Plans for an IPE Simulation Laboratory is in progress, the location to be determined, and will be utilized by HUSoN, SPT, SOT, SOP, and Departments of Graduate Counseling, and Criminal Justice (Forensics).

The delivery of online learning for the RN to BSN Undergraduate track and Graduate Program has been sufficiently supported through university and grant funding. Grant monies provided faculty with access to headsets, microphones, webcams, blue tooth speakers, and equipment for synchronized classes through Zoom® technology. The Graduate Program purchased five laptops, seven iPads, and three touch and pen tablets to enhance learning in the online environment. Husson IT department provides support and instruction as needed.

Administrative Support

Administrative support is adequate for the operations of the HUSoN. The chair serves as the administrator of the HUSoN and is employed on a 12-month contract. The HUSoN is overseen by the Dean, COHE, employed on a 12-month contract, and located within the HUSoN office suite. The chair oversees the undergraduate and graduate programs. The Advanced Practice Registered Nurse (APRN) tracks are overseen by credentialed faculty in the area of focus. The Family Community Nurse Practitioner (FCNP) track coordinator is employed on a 12-month, part-time contract. The Psychiatric Mental Health Nurse Practitioner (PMHNP) track coordinator is employed on a 10-month, full-time contract and receives a stipend for the two summer months.

Support Staff

HUSoN is supported by one full-time Administrative Assistant (AA). The AA is responsible for clerical and receptionist functions in the HUSoN. The AA is supported by two full-time undergraduate student workers (non-nursing; Physical Therapy students) and funded through the Human Resources budget. One part-time graduate assistant is assigned to the HUSoN and is funded through the Senior Vice President of Academic Affairs/Provost office.

Professional Staff

HUSoN has identified professional staff as Registered Nurses (RN) who facilitate the program in various areas. The Coordinator, SLRC is a MSN prepared RN and a Certified Healthcare Simulation Educator. The Coordinator oversees the operations of the SLRC, serves as chair for the Learning Resource Committee, and supports faculty in evaluation of student outcomes within the SLRC. The coordinator is employed on a full-time 10-month contract and receives a stipend for the two summer months. The coordinator is supported with a full-time 9-month assistant, Healthcare Simulation Specialist (HCSS). This individual holds a MS, BSN, RN and is currently enrolled in a DNP program. Fiscal and professional development support for certification in simulation is provided. The HCSS assists with delivery of educational experiences within the SLRC. The HCSS delivers remediation and re-assessment in identified areas of student needs. This timely remediation allows for improvement within student's current course and ultimately supports continued progression for an on-time completion of the program.

Additionally, the coordinator is supported by a part-time, 10-month Interprofessional Simulation Faculty who assists with design, implementation, and evaluation of IPE simulated learning within the SLRC. This individual holds an EdD, DPT, PT, and two simulation certifications. The position is joint with the School of Physical Therapy which further expands the opportunities for IPE simulation.

The HUSoN Clinical Coordinator (CC) is a BSN, RN and actively pursuing a MSN/NE. The CC supports lead faculty with placement of Clinical Nurse Educators (CNEs) and students in clinical rotations in both the undergraduate and graduate programs. The CC is employed on a full-time 10-month contract and receives a stipend for two summer months. The four professional staff support the operations of the HUSoN programs in achievement of aggregated faculty and student outcomes.

Clinical Nurse Educators

The HUSoN employs CNEs as adjunct faculty. CNEs are hired to teach clinical lab sections both on campus and at clinical partner locations throughout the state. Clinical educators have expertise in the area of placement, hold a minimum of a BSN; MSN preferred. CNEs are supervised by lead clinical faculty who hold a MSN or higher degree, and are full-time faculty in the HUSoN. Lead faculty who oversee CNEs communicate student outcomes, program outcomes, and make clinical placement visits throughout the semester. CNEs undergo an annual day of orientation to ensure HUSoN policies and procedures for student clinical learning experiences

are communicated. CNEs participate in the SLRC as part of supporting student outcomes. The University further supports CNEs through additional education in assessment and evaluation methodology, participation in inter-rater reliability of shared assessment tools, and provision of professional development in best practice.

Husson Fellow

Dr. Teresa Steele is a Husson University Fellow and Professor Emerita from the HUSoN who provides administrative and professional support to the nursing faculty, staff, and students. Dr. Steele's office is located in the Executive Suite of the Beardsley Meeting House. She is on campus one day per week and available other times via email and phone for consultation to the chair in areas of program development, university policies, and community psychiatric liaison (Board member at Acadia Hospital). Dr. Steele served the HUSoN in many capacities, including but not limited to Dean of the School of Health, Founding Director of Advanced Practice Psychiatric Nursing Program (APPNP) and faculty member. Initial funding for the development of the APPNP was received through a HRSA grant in the amount of \$423,968.00, written by Dr. Steele in 1997. A second funding from HRSA in the amount of \$452,843.00 was received in 2000. In addition to the faculty support, the Teresa Willett Steele Endowed Scholarship was established in 2010 to support undergraduate and graduate nursing students, \$500.00 to \$1,000.00 is awarded annually. A copy of the articulation agreement is available for review in the Resource Room in Standard Two document file.

Clinical Contracts

The HUSoN has 185 contracts with clinical agencies across the State of Maine to support aggregate student and program outcomes. Contracts are maintained by the HUSoN Clinical Coordinator. HUSoN is associated with Eastern Maine Medical Center in Bangor and utilizes the facility for acute care, maternal newborn, and pediatrics clinical rotations for undergraduate students. St. Joseph's Hospital in Bangor provides clinical rotations in acute care for undergraduate students. Acadia Hospital and Dorothy Dix Hospital provide acute and chronic inpatient psychiatric learning opportunities for both the undergraduate and graduate programs. Several other hospitals within the state as well as clinics provide for achievement of student outcomes. A more comprehensive description of clinical agencies is included in III-D and III-E.

Fiscal and physical resources are sufficient to meet the needs of the programs. Formal review is completed annually by the HUSoN Chair in consultation with the Dean, COHE. Faculty and staff submit informal request throughout the year to the chair for consideration. Based upon budget allocation and additional funding availability, these informal requests are approved. Capital funding requests are submitted annually to the Senior Vice President of Academic Affairs/Provost by the Dean, COHE. In consultation the Provost and President approve or prioritize funding for capital resource requests. Clinical fees are utilized to support additional SLRC replacement needs though budget allocations overseen by the Coordinator, SLRC and approval from the Chair and COHE Dean.

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

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

Program Response:

Husson University and the HUSoN provide extensive academic support services to enhance student learning and enable programs to achieve expected outcomes. In addition to the academic support services provided by the University, HUSoN provides academic advising to all students admitted to the undergraduate and graduate programs.

First year nursing students are assigned to an advisor that will advise, mentor, and support them throughout the initial phase of the program. If a student is identified as 'at risk' during the first year, the student will remain under the advisor. Students progressing to the second year of the undergraduate program are assigned to a new faculty advisor for the remainder of the program. Reassignment is made if the student or faculty have

conflicts of interest, as it is important for students to maintain a professional, respectful relationship with the faculty member.

RN to BSN students are assigned a HUSoN faculty advisor and an online advisor. In addition to the faculty advisor, the Director of Online and Extended Learning provides assistance with technological aspects of the online learning environment. The Director of Online and Extended Learning provides assistance for graduate students in addition to the assigned faculty advisor. Academic support and counseling to students across the programs is critical for student and faculty expected outcomes.

W. Tom and Bonnie Sawyer Library

The mission of the W. Tom and Bonnie Sawyer Library is to make available the informational resources that are most appropriate to the degree programs at Husson. Resources suitable for introductory-level course work as well as advanced and professional-level scholarship are acquired and routinely evaluated. Library personnel provide instruction in the use of all resources. Library resources can be accessed from anywhere on campus. Distance learners, students at remote sites, and remote faculty have access to all online resources, including electronic books and journals.

The library supports nursing faculty and students with subscriptions such as, PsychINFO, CINAHL (which includes citations to allied health journal articles), and the Cochrane Collection (which includes full-text documents on evidence-based medicine). Recently the library added a subscription to Ovid's Embase, a comprehensive biomedical literature database. Academic Search Complete, ERIC (an education database) and Medline (a medical database) are resources made available by the Maine State Library. Faculty and students who cannot find sufficient information using the library's resources can request materials from other libraries. The library belongs to five consortia whose members provide materials to each other at no cost. Journal articles are delivered to faculty's and students' Husson email address as PDF attachments. Turnaround time for journal articles is typically within five days.

Sawyer Library is located on the second floor of Peabody Hall and is easily accessible from the residence halls. An environment in the library that is conducive to learning and research is maintained. When classes are in session the library is open seven days a week and is open until midnight five days a week. The library seats about one hundred at tables and individual study carrels. Accommodations for small groups working on projects are provided. In addition, there is a small reading room and comfortable lounge chairs throughout the library. Three faculty offices located adjacent to the library have been converted into group study rooms that are open 24/7. There are six computers networked together, and three wall-mounted computers for accessing the library's online resources. Students may use their own laptops with the library's wireless network. Electronic scanning, and color copying and printing are services available.

Routine review of services is conducted to ensure informational resources are current and appropriate. Faculty make recommendations on purchase of resources related to the nursing programs. Additional information on the library can be found at <http://www.husson.edu/library/>.

OASIS – The Center for Student Success

To advance Husson University's mission of transforming student lives and preparing students for professional careers, Husson's Student Success Center - OASIS - encompasses the following services that support expected student outcomes, Academic Services, Career Services, Disability Services, International Student Services, Learning Center, and the Writing Center. The OASIS center is located in Peabody Hall. OASIS provides programs, advice and guidance in the following areas: Academic requirements, career and major exploration, first-year seminar for all students, tutoring and support services, accommodations for disabilities, orientations to the University, international student services, and diversity support. Students visit OASIS for various reasons, examples include: Academic help or advice, advice on choosing a major or career options, an adviser for international students to facilitate adjustment to life in the United States, methods to improve study skills or time management habits, support for a learning disability, assistance in registering for classes, guidance on internship possibilities, and assistance preparing for the job search process. The advisors, staff, and tutors communicate with faculty on student services and assist with accommodations as needed.

Academic Services

Students who are accepted into the undergraduate nursing program and those who are 'undeclared' benefit from services offered through OASIS for academic support. The Academic Services staff members serve as advisers to students who have not yet declared a major area of study and provide advice and guidance on

academic requirements. They offer assistance with study skills and time management as well as utilizing early intervention strategies to guide students in need of support before it is too late. They offer assistance with adjustment to college, facilitate contacts with tutors in the Learning Center and Writing Center, and assist with referrals to other appropriate University resources.

Academic Services also coordinates Husson's First Year Experience course - the Husson Experience (HE 111) - a required, one-credit course designed specifically to assist first-year students in making successful transitions to college life. The Husson Experience facilitates knowledge of Husson's academic policies and procedures as well as the academic and social resources needed for success and engagement with the college community. Students also complete an in-depth career exploration project. The Husson Experience course is taught by faculty in each of the University's Schools/Colleges as well as Academic Services staff. For fall semester 2017 there are four sections of HE 111 that will be taught by nursing faculty. The two faculty teaching the course sections are also the assigned faculty advisors for incoming nursing students to provide additional mentoring and remediation as necessary.

Career Services

Career Services helps students and alumni make informed career decisions, connect with employers, pursue further education, and develop their professional lives and goals. Staff in Career Services achieves this through providing guidance on careers, majors, internships, job search, graduate school advising, use of social media, etc. Career Services partners with employers to help them fill full-time, internship, and part-time opportunities with students and alumni. The services available to students and alumni are extensive and can be located at <https://www.collegecentral.com/husson/>. Career Services is located in Peabody Hall with normal operating hours Monday through Friday. Staff are available via phone and email for students and alumni who are unavailable for appointments during operating hours.

Disability Services

Husson University is committed to providing equitable educational opportunities to all students. Therefore, to advance Husson University's mission of transforming student lives and preparing students for professional careers, Husson offers a range of learning accommodations and services to any student with a disability who requests and qualifies for accommodations. Full disclosure of services available can be found at <http://www.husson.edu/academics/academic-support-oasis/disability-services/>. Husson University complies with the Americans with Disabilities Act (as amended ADA Amendments Act of 2008; 29 U.S.C. 794) and Section 504 of the Rehabilitation Act of 1973 to support the rights of those with disabilities to have equal access to an education. Section 504 states, in part, that "no otherwise qualified handicapped individual...shall solely by reason of his handicap, be excluded from the participation in, be denied the benefits of, or be subject to discrimination under any program or activity receiving federal financial assistance." As an example of how disability services provided support for nursing student to achieve expected outcomes review the following student testimonial. "The OASIS office has helped me make academic achievements through the introduction of the Livescribe Echo® Smart Pen. I began using my smart pen my sophomore year and now that I am nearing the end of my junior year in Nursing school. I can see the improvements in class time productivity over the last two year because I have been able to be more attentive to class lectures and discussions due to my increased ability to hear a lecture and discussion multiple times. I have been accepted into the Sigma Theta Tau International Honor Society of Nursing for the Omicron-Xi Chapter at Large this spring 2015 semester and I attribute much of my academic success to the improved knowledge I achieve through the use of the Livescribe Smart Pen. After doing a trial run for one semester, I purchased a Wi-Fi version of the Smart Pen that syncs with all Wi-Fi devices to constantly have my education at my fingertips no matter where I am. Thanks OASIS!"

- Junior Nursing major

International Student Services

The International Student Services office provides international students with a full range of support and advocacy services. Academic support such as tutoring and writing instruction is available through the Learning and Writing Centers. A designated Student Success Adviser is available assist international students in academic as well as personal advising.

Learning Center

The Learning Center is a student-central resource dedicated to providing tutoring for both general undergraduate classes and degree-specific courses. The atmosphere is supportive, with peer-tutors who have undergone similar situations and are available to students seeking additional resources to meet academic success. The Learning Center provides tutoring services for courses in anatomy and physiology, chemistry, college math, physics, psychology, statistics, and Spanish. There are tutors available with experience in professional courses including nursing. The Learning Center is staffed by both faculty and student tutors. Student Tutors in the center are hired based on mastery of the subject matter as certified by Husson faculty, and are required to carry a minimum 3.0 cumulative GPA. These tutors are current Husson students who have completed courses with excellent grades and have a strong ability to communicate this knowledge to their peers. Appointments at the Learning Center are flexible to accommodate both traditional and non-traditional students.

Writing Center

The Writing Center is a resource used to help students improve writing skills. The writing consultants the center employs can help students invent, organize, and revise documents to meet the specific requirements established for classes. The Writing Center conducts informational workshops throughout the semester/term. Example includes a workshop on how to use APA citation format. Learning to correctly use APA Writing Style is critical for both undergraduate and graduate nursing students. For student on campus information on available workshops is the Writing Center. For distant learners and students at remote locations, the Writing Center provides online writing consultations. The Writing Center is located in Peabody Hall. Writing tutors are available week days between 0900 and 1600. Tutors will make adjustments to the normal operating hours to meet the needs of students. The Writing Center has developed a google site that provides comprehensive information on the resources available at <https://sites.google.com/a/husson.edu/husson-university-writing-center/>.

Chaplain Services

The Office of the Chaplain is committed to addressing the spiritual needs of all members of the Husson Community (students, administration, faculty and staff). The mission of this office is to foster an understanding and appreciation for the diverse religious and spiritual life on the college campus. This is accomplished by sponsoring programs and events that encourage learning about various religious traditions and spiritual practices, offering noontime chapel experiences in Leonard Chapel, collaborating with the greater Bangor religious community to connect students with local faith communities, sponsoring retreats, concerts, and off-campus learning experiences.

The Office of the Chaplain also provides services for the college community such as pastoral care and student program support. All faith traditions are encouraged to and welcome to utilize Leonard Chapel, located in Peabody Hall, by signing up for time in the Office of the Chaplain. The Chapel is open for any member of the Husson community for personal reflection, meditation and or prayer from 6:00 a.m. to 9:00 p.m. seven days a week.

The Chaplain works closely with the Student Life staff and provides a presence at many campus events. The Office of the Chaplain is located at 206 Peabody Hall. All are welcome to drop by or make an appointment Tuesday, Wednesday, or Thursday from 8:00 a.m. to 7:00 p.m.

Counseling Services

The primary mission of Husson University Counseling Services is to assist students in their pursuit of success. In order to do this, counselors help students use their strengths and resources to overcome barriers and to develop new strategies to improve mood, relationships and performance.

Student Health Services

The mission of Student Health Services is to provide high quality, affordable, convenient health care and resources to our students in order to sustain a healthy campus, and ultimately greater academic success at Husson University. Depending on the nature of the services needed students are seen by a registered nurse or a nurse practitioner. Students are seen for any health issue. Some services offered are illustrated in Table 2B.1.

Student Services Offered Table 2B.2

Allergy Injections	Anxiety & Depression Consultations	Birth Control Consultations
Blood Pressure Checks	Depo-Provera Injections	Disease Prevention Advice
Emergency Contraception (Morning After Pill)	Health Education	Illness & Injury Consultations
Laboratory Testing	Men's Health Evaluations	Nutrition Education & Counseling
PAP Smears	Physical Exams	Pregnancy Testing
Prescription and Non-Prescription Medication	Smoking Cessation	Sexually Transmitted Infection (STI) Testing, including HIV
Throat Cultures	Women's Health Evaluation	

Information Technology

The Information Resources Office (IRO) provides staff and students support in the area of computer technology, the use of the library, and other information resources. For example, efforts by the library staff, instructional technologist, and members of IRO support the faculty's undertakings to enhance information literacy in the classroom

Online and Extended Learning

The Office of Online and Extended Learning is a full support office at Husson University. The office assists departments with online course and program creation, development, implementation, and teaching/learning strategies. Instructional Technologist, Gretchen Schaefer, who provides instructional technology support for all classes (online, hybrid, and face-to-face) is a part of the Office. Technologies used to support HUSoN include:

- Zoom®—a livestream video technology
- Canvas®—the Learning Management system
- Vericite®—a plagiarism checker software
- Screencast-O-Matic®—a video recording system for recording asynchronous video

The Office is also responsible for providing professional development opportunities for faculty. Professional development opportunities have included:

- Quality Matters "Applying the Quality Matters Rubric" training
- Course Mapping
- "How to Develop an Online Course" class

Since taking the position as Director of Online and Extended Learning in January 2017, Dr. David Haus has been working with HUSoN on the revision of the RN-BSN and MSN online program and courses. He has been a Quality Matters certified peer reviewer since 2008, a master reviewer since 2016, and a program reviewer since 2017. He is also certified to deliver the "Applying the Quality Matters Rubric" training on campus. The Office of Online and Extended Learning plans on offering the following professional development sessions this academic year:

- November: "Applying the Quality Matters Rubric," Course Mapping, "How to Teach Online"
- January: "Applying the Quality Matters Rubric," Course Mapping, "How to Teach Online"
- March: "Applying the Quality Matters Rubric," Course Mapping, "How to Teach Online"
- May: "Applying the Quality Matters Rubric," Course Mapping, "How to Teach Online"

The Office of Online and Extended Learning also support students in a variety of areas. It offers students training and support for Canvas®, Zoom®, and all online courses. In August 2017, the Office implemented a ticketing system to track, efficiently route, and solve support requests from students.

Assessment

The Director of Assessment is responsible for educational outcomes assessment throughout Husson University and supervises program Coordinators of Curriculum and Assessment. The Director of Assessment participates in a collaborative undertaking that engages all disciplines with the College of Business, College of Health and Education, the School of Pharmacy, and the College of Science and Humanities. The Director of

Assessment has the ability to design, organize, execute, and interpret analytical studies, including determination of approach to data collection, appropriate research methodology, and statistical techniques and be able to translate results for a wide audience. The Director of Assessment works with multiple offices and individuals including, but not limited to Institutional Research, Instructional Technology, Academic Services, Informational Resources, and Academic Deans, to design strategic approaches to learning assessment and provide leadership in the development of meaningful learning outcomes that lead to improved student learning and pedagogical effectiveness as well as provide faculty support and training in areas of curriculum and assessment.

Admissions

The Office of Admissions provides opportunities for recruitment of prospective students. There are two departments, Graduate Admissions and Undergraduate Admissions. Both departments participate in recruitment activities across the New England Region and work with HUSoN chair to identify areas of expanding recruitment efforts. <http://www.husson.edu/admissions/>

Financial Aid

The Financial Aid Counselors are available by phone or appointment to assist students with the financial aid application and processes. Their goal is to help students understand the variety of assistance options available to them and how to navigate the many steps involved in applying for financial aid. The department personnel have prepared pages of information to help guide students through the application process and are available for review at <http://www.husson.edu/financial-aid/>.

Academic Advising

HUSoN faculty serve as academic advisors for students enrolled in the nursing programs. Students are assigned an academic advisor by the Chair and the Registrar documents the assignment in the University database. HUSoN implemented a new advising system for the 2017/2018 academic year. Freshmen students are advised by one of two faculty who have a strong desire to mentor and facilitate success throughout the first year of college. Many of the students at HU are first generation college students and having a dedicated advisor is critical for the success of these students. When students matriculate into the second year of the program, they are re-assigned an academic advisor and will remain with the advisor throughout the length of the program. Each advisor has a designated Canvas®, LMS site for advisees. Advisors have published office hours and are available for additional appointments during registration and final exam times.

Research and Scholarship

The mission of the Office of Research and Scholarship is to support and promote the conduct of scholarship, in all its forms, within the Husson University community. The Office accomplishes this mission by providing numerous services including help in obtaining external and internal funding to support research studies; by offering workshops and programming to enhance the scholarship skills of the faculty; and by ensuring that appropriate research-related policies and procedures are in place and observed by faculty and students. Faculty and students showcase their research to the Husson University campus and community during the Annual Research and Scholarship Day that is held in the Beardsley Meeting House and The Gracie Theatre during the spring semester.

The Annual Research and Scholarship Day represents a continued commitment of Husson University to enrich the academic offers to students and support the scholarship agendas of faculty. The scholarly endeavors of students and faculty lead to new discovery, integrate disciplines of study, and strengthen the application of knowledge. Access to information on the Office of Research and Scholarship can be found at <http://www.husson.edu/academics/research/office-of-research-and-scholarship/>.

Institutional Review Board (IRB)

The goal of the Husson University Institutional Review Board (IRB) is to assist faculty, staff, and student researchers in meeting the highest ethical and professional standards for the use of human subjects in scientific research. All faculty and students at Husson University who are conducting research involving human subjects are required to submit their proposal to the IRB prior to initiating a study. The IRB first determines whether the study is exempt from IRB review. For a study that requires IRB review, the IRB discusses the research proposal thoroughly before determining whether to approve the project. The IRB considers the safety of the subjects involved in the proposed study as well as confirming the scientific merit of the study.

Resources available for faculty and students include tutorials on research proposal design, instructions for preparing informed consent, investigator financial disclosure policy, types of IRB review, and IRB meeting and

submission dates. The required NIH training is outlined on the webpage and location of the tutorial <https://phrp.nihtraining.com/users/login.php>. Complete information about IRB processes can be found at <http://www.husson.edu/academics/research/institutional-research-board-irb/>.

Institutional Research

The Office of Institutional Research (OIR) advances Husson University's mission of preparing students for professional careers by providing comprehensive information to support in areas of institutional planning and decision making, policy formation, and evaluation of effectiveness. The OIR coordinates responses to external accountability mandates, and internal and external requests for information about the campus. The OIR provides assessment information and course evaluation summaries to HUSoN. Supporting information can be found at <http://www.husson.edu/about/office-of-institutional-research/>

The OIR provides services in three major areas: **External Reporting:** Prepares and submits official reports mandated by the federal government as well as requests from publishers of college guides and other institutions. Aids in fulfilling requests from the media, local government and the general public. **Planning Support:** Identifies, gathers, analyzes and organizes institutional data to support University requirements for strategic planning, policy analysis and institutional research (student characteristics, admissions, financial aid, enrollment, retention and graduation rates, degrees awarded, teaching workloads, employee characteristics, research productivity, facilities utilization). Information is disseminated to the University community through annual reports, websites and responses to ad hoc requests. **Institutional Effectiveness:** Responsible for coordinating campus-wide and department or program level assessment of academic programs and administrative departments to support the University's quality improvement efforts.

II-C. The chief nurse administrator:

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

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

Program Response:

Dr. Donna Beuk assumed the position of Chair for HUSoN in February, 2017 after a national search was conducted. The process was facilitated by R.E. Riley and Associates, LLC.

Dr. Beuk is a Registered Nurse (RN) with over nineteen years of experience in the nursing profession and over ten years of experience in academic positions with different colleges and universities. She earned a Doctor of Education (EdD) from The University of Alabama, Tuscaloosa, AL majoring in Instructional Leadership with Specialization in Nursing Education. Dr. Beuk earned a Master of Science (MSN) with Honors from the University of Mobile with a dual concentration in Nursing Administration and Nursing Education. She has received numerous academic honors and awards and is actively involved in many professional and academic organizations.

Since arriving in February, 2017, Dr. Beuk has demonstrated strong leadership and a well-articulated vision for the future of HUSoN. Through her leadership, curriculum revisions to the RN/BSN track were

implemented, an innovative interprofessional faculty position was created, 4 new faculty and 2 professional staff were hired, enrollment in both undergraduate and graduate programs increased, and curricula revisions for graduate tracks were planned.

The Chair serves as the Chief Nurse Administrator for both the undergraduate and graduate programs of HUSoN and reports directly to the Dean of the COHE. Dr. Waskiewicz served as COHE, Dean from July 2015 until September 2017 when she was transitioned to Interim Dean, School of Pharmacy. Dr. Teresa Steele is serving the University as the Interim Dean for the COHE currently. The Dean, COHE reports to the Senior Vice President of Academic Affairs and Provost. The Chair's position is vested with the authority to make operational decisions necessary to accomplish the mission, goals, expected faculty and student outcomes. She fulfills the duties and responsibilities as outlined in the job description for the Chair, HUSoN. The job description and CV are available for review in the Resource Room in Standard Two document file.

II-D. Faculty are:

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

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

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

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

Program Response:

The faculty and professional nursing staff of HUSoN are sufficient in number and academically and experientially prepared to accomplish the mission, goals, and expected student and faculty outcomes. The number of full-time FTEs allotted to HUSoN for the 2017/2018 academic year include a total of 14.75 FTEs with nine 1.0 FTE faculty positions, two 0.5 FTE faculty positions, one 1.0 FTE Clinical Coordinator, one 1.0 FTE Coordinator, SLRC, one 1.0 FTE Healthcare Simulation Specialist (HSS), and 0.75 FTE Coordinator, Assessment and Curriculum – Nursing. The two 0.5 FTE faculty positions include the FCNP Coordinator/Professor and the Interprofessional Simulation Faculty (IPSF)/Assistant Professor. The IPSF is a shared position with the SoPT. The Clinical Coordinator, Coordinator, SLRC, and HSS are full-time FTE professional staff positions and do not carry classroom teaching responsibilities; however, they do carry teaching responsibilities in the SLRC and Clinical settings. The FCNP Coordinator/Professor is a 0.5 FTE with teaching and administrative responsibilities and the IPSF is a 0.5 FTE with teaching responsibilities in the SLRC. Appendix K – Faculty and Staff Teaching, Practice, and Qualifications, illustrates faculty and professional staff academic qualifications, teaching responsibilities, and experiential practice.

One FTE for undergraduate faculty equals a teaching load of 12 credit hours per semester or the equivalent of 24 in an academic year. This loading policy is consistent with HU faculty requirements. The 0.5 FTE faculty teach in the graduate program and have teaching loads equivalent of 9 credit hours per academic year or the equivalent and is consistent with HU graduate faculty requirements. The HUSoN faculty workloads are

consistent with other university faculty workloads. Full-time faculty, Coordinator, Assessment and Curriculum/Nursing, and the HSS are on nine month contracts; the Clinical Coordinator, Coordinator, SLRC, PMHNP Coordinator, and the IPSF are on ten month contracts. The Chair and FCNP Coordinator are on twelve month contracts. Summer semester courses require separate contracts and are excluded from workload calculations for nine and ten month faculty/professional staff.

Part-time FTEs for nursing faculty (adjunct) in the didactic courses are calculated based on credit hour. For the 2017/2018 academic year there are eight part-time nursing faculty (adjunct) teaching in the undergraduate and graduate programs. FTE calculations range from 3 credit hours per semester to 6 credit hours per semester based on the program and course offering. Nursing faculty (adjunct) are academically and experientially prepared to accomplish the mission, goals, and expect student and faculty outcomes as illustrated in Appendix K.

HUSoN Faculty and Professional Staff are academically prepared for the areas in which they teach. Academic preparation of faculty includes degree specialization, specialty coursework, or other preparation sufficient to address the major concepts included in courses they teach. Clinical Nurse Educators (CNEs) are expert clinicians in the specialty areas of the clinical course in which they teach and are academically prepared, CNEs who hold a BSN are overseen by full-time ranked faculty prepared at the MSN or higher educational level. Appendix L – Clinical Nurse Educator Teaching, Practice, and Qualifications provides detailed information on CNEs.

The faculty and professional staff as a whole represent a variety of clinical expertise that support current, evidence based practice that is shared with students in both the undergraduate and graduate programs. Major clinical specialties are represented by full-time and part-time faculty and professional staff of HUSoN. Most maintain expertise through actively working in the practice setting while others are actively engaged in educational endeavors. Didactic courses are taught by faculty holding a minimum of a Master's degree, eleven hold terminal degrees (PhD, EdD, and DNP). The Chair, FCNP Coordinator, and PMHNP Coordinator hold doctoral degrees, and the Coordinators hold national certification in the population focus of the APRN track that they oversee. The Coordinator, SLRC holds a Master's degree and is a Certified Healthcare Simulation Educator. The IPSF holds both an EdD and DPT along with certifications in simulation and the HSS holds a BSN and is enrolled in a DNP program. The Clinical Coordinator is a Registered Nurse with a BSN and is enrolled in a MSN program. The Coordinator, Assessment and Curriculum/Nursing holds a MSN, PMC/NE. One faculty is currently enrolled in a PhD program at the University of Maine in Interprofessional Studies with a dual specialization in Nursing and Education. Two faculty and one professional staff hold Certified Nurse Educator (CNE) certifications through the National League of Nursing and one faculty is CNE (ret). Several faculty hold certification in their area of expertise. For faculty and professional staff who do not hold a MSN or terminal degree, various means of support are provided to further their education. For the academic year 2017/2018 there are no vacant faculty and professional staff positions.

All faculty, professional staff, and CNEs hold current, unencumbered Registered Nurse (RN) licensure. Faculty and CNEs teaching a clinical/practicum course are experienced in the clinical area of the course and maintain clinical expertise. Clinical expertise is maintained through clinical practice, continuing education, research, and/or professional presentations and publications. CNEs are trained in assessment and evaluation and have oversight of grading in the clinical courses by the Lead Faculty. Experiential learning in the SLRC is overseen by the Coordinator, SLRC, IPSF, HSS, and course faculty. The Coordinator, SLRC is a certified simulation educator with academic and experiential expertise, and has undergone training for inter-reliability of the evaluation tool utilized in this learning environment.

The faculty and professional staff of HUSoN are sufficient to maintain a student ratio that promotes quality education, adequate supervision and evaluation, and maintains compliance with contractual agreements and best practice standards. Clinical student ratio is a 1:8 which meets the Maine State Board of Nursing (MSBON) regulation, however, some clinical contracts require a 1:6 ratio. Faculty oversight of in-direct care, community experiential learning is overseen by a RN at the site with full-time lead faculty oversight. Partnership students work directly with a designated preceptor (defined in II-E) with oversight of a full-time lead faculty. HUSoN does not specify the student faculty ratio, nor the MSBON regulate the student faculty ratio, for in-direct experiential learning or partnership oversight. The ratio and faculty assignments offer supervision that is necessary for safe practice and accomplishment of student outcomes. Courses taught on campus have varying class size limitations with the typical section size of 30 – 50. Online courses have a class size limitation of 20-30

depending on the course. If registration for a single course exceeds 35, a new section will be offered to ensure expected student outcomes. These ratios are consistent in both the undergraduate and graduate programs. Appendix M - illustrates the faculty/student ratio by course and clinical location.

Full-time ranked nursing faculty are expected to dedicate the majority of their time to teaching. As noted in Standard One, faculty have the expectation to maintain scholarship in discovery, integration, application, and teaching (Boyer, 1990) to enhance and motivate student engagement in learning. Professional staff are expected to maintain expertise in teaching, assessment, and evaluation methodology, and clinical/experiential learning best practice. Additional information on support for areas of teaching, scholarship, and service are outlined in II-F. Faculty and Professional Staff of HUSoN meet expected outcomes through scholarly activities, community and public service, and active participate in University and HUSoN governance.

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

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

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

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

Program Response:

Preceptors are an extension of the faculty and are academically and experientially qualified for their role in assisting in the achievement of HUSON mission, goals, and expected student outcomes. Preceptors are utilized in both the undergraduate and graduate programs. HUSoN's senior year of the undergraduate program offers students the opportunity to engage in supervised, direct patient care in preparation for transition to practice, NL 427 – Senior Practicum, which consists of 180 clinical hours. Students enrolled in the APRN tracks of the graduate program engage in a combined total of 48 Credit Hours/672 Clinical Hours (FCNP) and 50 Credit Hours/798 Clinical Hours (PMHNP) during the special population focus component of the program.

A summary of academic and experiential qualifications including the preceptors' roles in teaching, supervision, and student evaluations is available for review in the Resource Room in the Standard II document file. Preceptors in the undergraduate program hold a current and unencumbered RN license, and a minimum of a BSN. Preceptors also have a minimum of one year clinical experience in the clinical area in which they supervise students. Primary preference is given to preceptors in the graduate program that hold both a current and unencumbered RN license and national certification as an APRN in the population of focus. Secondary preference is given to preceptors who hold current and unencumbered certification as Physician Assistants or Physician in primary care or psychiatric care settings. Preceptors supervise and guide students in the preceptor's area of expertise as consistent with CCNE's definition of a preceptor.

The roles of preceptors with respect to teaching, supervision, and student evaluation are clearly defined in the Undergraduate Preceptor Handbook and Graduate Preceptor Handbooks (FCNP and PMHNP respectively). These roles are congruent with the mission, goals, and expected student outcomes of HUSoN and professional nursing standards and guidelines. Preceptor roles and expectations are clearly communicated by the student, faculty, clinical coordinator, agency contact person, and in writing via the Preceptor Agreement Form (available in the Resource Room in the Standard II document file). The preceptor supports the student in roles as care provider, patient educator, advocate, inter and intra-professional team member, and leader. Preceptors do not assign the grades for students, rather they provide input on students' progress in achievement of expected course and program outcomes through verbal and written communication with the lead course faculty. In the past, this process has yielded positive student evaluations and continues to be the process.

II-F. The parent institution and program provide and support an environment that encourages faculty teaching, scholarship, service, and practice in keeping with the mission, goals, and expected faculty outcomes.

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

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

Program Response:

HU has created an environment that supports and encourages faculty in the areas of teaching, scholarship, professional activity, creative work, service, and academic advising, thereby allowing faculty to maintain the mission, goals, and expected student and faculty outcomes. As per the *HU Faculty Handbook, Section 2.3 Development and Evaluation - The professional development of Faculty and the process of Faculty evaluation are valued at the University. The evaluation process is a means by which members of the Faculty can obtain constructive and reliable feedback that will inform their ongoing plan for professional development.* (Faculty Handbook available for review in the Resource Room in the Standard II document file).

The University, COHE, and HUSoN provide ongoing support in areas of expectations and evaluation of the faculty role as defined by the *HU Faculty Handbook*. These areas include teaching, scholarship (scholarship of teaching, application, discovery, and integration), professional activity, creative work, service, and academic advising through professional development, enrichment exercises, and funding for educational advancement of faculty.

Professional Development opportunities include but are not limited to:

- Institutional Faculty Development Days – Fall and Spring Semesters
- Institutional Communities of Learning – Prior to Faculty Development Days
- Global Scholarship Program
- Funding for Graduate/Terminal Degree Education
- Funding for Continuing Education

HUSoN and COHE budgets allocate monies for faculty development in these areas. The typical amount provided per faculty is \$1,500.00 annually or as deemed appropriate by the Dean, COHE in collaboration with the Chair, HUSoN. Professional development is further supported at the Institutional level through Faculty Sabbatical Leaves, Educational and Self-Improvement Leaves, and Educational Conferences/Faculty Development.

Service is an expectation of all full-time ranked faculty. Each faculty member is expected to participate in HUSoN governance. Example, active participation in the Faculty Organization and on Standing and Ad Hoc Committees. In addition to service of academic governance within the HUSoN, faculty are expected to participate in Institutional governance through active work in the Faculty Forum and University Committees. Faculty participation in academic governance for years 2014/2015 – 2017/2018 is available in the Resource Room in Standard II document file.

Professional Practice is an expectation of faculty. Service to the profession is performed as community service, engagement in clinical practice, continuing education, scholarship and research in nursing practice, education, and healthcare delivery. Faculty can negotiate a practice day to maintain current in professional practice as necessary for certification as APRNs, and RNs. Example, Laurie Eddy maintains current practice as a Nurse Practitioner through work at the HU Student Health Services providing care to students, faculty, and staff. Faculty engagement in professional practice is illustrated in Appendix K.

Academic Advising is also an expectation of faculty. Faculty are supported in their roles of advising through inter-departmental mentoring. New faculty are assigned a formal mentor to facilitate the role of academic advisor and carry a lower advising student ratio for the first academic year.

A formal mentoring program for HUSoN was implemented for the academic year 2017/2018 to support new faculty. Onboarding faculty are assigned a mentor from the current nursing faculty to provide guidance in the role and expectations of faculty at HU, in the COHE, and HUSoN. Details of the mentoring program are available in the Resource Room in the Standard II document file.

University Faculty Awards

On an annual basis, HU invites nominations and applications for applications for the Research Award and Service Awards. All full-time faculty are eligible for nomination or application. Nominations are welcome from students, peers, or self-nomination; however, each student or colleague can nominate any one (1) individual per award. Previous recipients are not eligible to apply within four (4) years of receipt of an award.

Husson Research Award and Husson Service Awards

- Service to the University
- Service to the Community

Criteria

The Husson Research Award will be presented to a full-time faculty member who demonstrates and achieves scholarly work as recognized by his or her peers. There are two Husson Service Awards. The first award will be presented to a full-time or part-time faculty member who best demonstrates outstanding service as a volunteer to Husson University (the internal community in which we live and work). The second award will be presented to a full-time or part-time faculty member who best demonstrates outstanding service to the University's community (the external community in which we live and work) while fulfilling his/her responsibilities.

Process

Completed nominations/applications should emphasize the basis for the recommendation and include:

1. A description of the nominee's service or research activities to be considered
2. Materials supporting the engagement of the nominee in the community
3. Examples of scholarly work to be considered

Global Scholars Program Award

Husson University is pleased to sponsor a Global Scholars Program, an initiative designed to forge global understanding and advance educational excellence. The program supports a faculty member who wishes to partake in scholarship, curriculum development, travel and/or research activities that will help infuse a global perspective into the classroom. The successful applicant will receive a \$1,000 stipend and \$2,000 for professional development expenses such as materials and travel. Additionally, the scholar will be eligible for a single course release during one semester and expected to write and present on their experience.

The Global Scholars Program recognizes one faculty member each academic year. Interested applicants should submit a proposal not to exceed 500 words. The Deans will bring the proposals to the Deans Council.

The intent of the Global Scholars Program is to further the University's first key strategic initiative of "Delivering Educational Excellence Through Experiential Learning and Global Understanding." It recognizes that educational excellence is fostered when faculty broaden their experiences, engage in scholarship, and bring those experiences and ideas into the classroom for the benefit of students. Given the direct expectation that experience will positively impact the delivery and content with the classroom, proposed projects should be within the professional discipline, be a visible contribution to scholarship, and enhance communal awareness of Husson's global undertakings.

William H. Beardsley Teaching Excellence Award

The William F. Beardsley Teaching Excellence Award recognizes overall excellence in teaching by a Husson University faculty member. Excellence in teaching is evidenced by pedagogy that engages students in the learning process, creates an environment that stimulates intellectual curiosity, and facilitates acquisition of knowledge. Faculty eligible for this award should:

- Demonstrate expert knowledge in their field.
- Utilize innovative teaching strategies.
- Teach from a philosophy of student centered learning.
- Relate to students with dignity and respect.
- Create a learning environment that encourages open exchange of ideas.

Teresa W. Steele Teaching Excellence Award

The Teresa H. Steele teaching excellence award recognizes the contribution of a Husson University faculty member to research on teaching practices at the university level. Research should emphasize applied teaching practices and might include evaluating a methodology or instructional model, synthesizing prior pedagogical research to arrive at new conclusions, or conducting other research that enhances our understanding of teaching or learning.

STANDARD II SUMMARY

STRENGTHS

- HUSoN has sufficient fiscal and physical resources to meet expected learning outcomes in accordance with the mission and goals.
- Academic support services are extensive and support both faculty and on campus and distant education students.
- Faculty are academically and experientially prepared to support the mission, goals, and expected student outcomes.
- Volunteer preceptors at the undergraduate and graduate level demonstrate professional commitment to nursing education and delivery of safe, quality patient-centered care
- HU and HUSoN support and encourage faculty to engage in professional development and advanced educational preparation.
- HU and HUSoN support faculty scholarship through financial and release time from teaching responsibilities.
- HU and HUSoN provide faculty mentorship through both formal and informal networks of support
- HUSoN provide faculty practice time as part of the scheduled work week.

OPPORTUNITIES FOR IMPROVEMENT

- Improve communication of mentorship opportunities for faculty through scholarship and teaching.
- Improvements in the system of maintaining data related to faculty, CNE, and preceptor qualifications, practice, and education preparation.
- Continue professional development in the area of online and extended learning methodology and delivery

ACTION PLAN FOR IMPROVEMENT

OPPORTUNITIES FOR IMPROVEMENT	GOAL	ACTION PLAN
Improve communication of mentorship opportunities for faculty through scholarship and teaching.	Establish a formal process for communication of mentorship opportunities for research and teaching development	1. Faculty and Student Development Committee to research and develop a process that will be presented to faculty as a whole
Improvements in the system of maintaining data related to faculty, CNE, and preceptor qualifications, practice, and education preparation.	Establish and maintain a systematic approach to collection of data	1. Curriculum Committee to research and develop a process that will support continuous review process and present to faculty as a whole
Continue professional development in the area of online and extended learning methodology and delivery	Collaboration with Office of Online and Extended Learning for expanded professional development opportunities in areas of online teaching methodology and delivery	1. Faculty and Student Development Committee to meet with Dr. Haus and development action plan to address professional development opportunities for nursing faculty

Standard III

Program Quality: Curriculum and Teaching-Learning Practices

The curriculum is developed in accordance with the program's mission, goals, and expected student outcomes. The curriculum reflects professional nursing standards and guidelines and the needs and expectations of the community of interest. Teaching-learning practices are congruent with expected student outcomes. The environment for teaching-learning fosters achievement of expected student outcomes.

III-A. The curriculum is developed, implemented, and revised to reflect clear statements of expected student outcomes that are congruent with the program's mission and goals, and with the roles for which the program is preparing its graduates.

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

Program Response:

The curricula of both the Baccalaureate and Master of Science Nursing programs are congruent with the mission, goals, and expected outcomes of Husson University School of Nursing (HUSoN). HUSoN's vision is "The School of Nursing will be an innovative leader in educating nurses who are caring, competent and committed to individual and global health." The mission of the HUSoN is "The School of Nursing produces leaders in nursing and healthcare that provide thoughtful innovation in healing, teaching and discovery." The vision and mission are "...accomplished through curricula grounded in experiential learning, evidence-based standards, and collaborative strategies to build effective interprofessional teams to ensure quality healthcare delivery for diverse populations." These expectations are integrated throughout the BSN program, the MSN program, and APRN post-master's certificate (PMC) program. The traditional BSN track is delivered on campus, while the RN to BSN track, the MSN program, and the PMC program are delivered via an innovative, comprehensive online learning format.

The BSN and MSN transformative curricula are developed, implemented and revised to reflect clear statements of expected aggregate student outcomes. Outcomes of professional preparation are supported and emphasized in clinical excellence, critical thinking, student-centered learning, experiential learning, holistic and compassionate care, self-reflection, leadership, and interprofessional collaboration. These eight principles of professional practice are formed from and informed by the HU, COHE, and HUSoN missions, and AACN's "The Essentials of Baccalaureate Education for Professional Nursing Practice" (2013) and "The Essentials of Master's Education in Nursing" (2011). The MSN curricular outcomes are designed by programmatic outcomes and population focus outcomes for each track of the MSN program. Progression through the programs (BSN and MSN) enables aggregate achievement of outcome objectives. Program response to III-B outlines recent changes to both the BSN and MSN programs for alignment with the 2011 and 2013 Essentials. Curricular changes share the same mission, goals, and expected outcomes with more defined systematic approach to assessment and evaluation as described in program response to IV-A.

Several significant phases of curricula changes experienced by the HUSoN were implemented through collaboration with the University's Assessment Director and Coordinator. The initial phase of redesign began in fall 2015 as faculty began creating curricular maps in courses across the programs. Currently, course assessments are mapped to student outcomes in such detail that students can easily identify areas of assessments as it directly assesses mastery of a specific outcome or benchmark on a performance-based rubric. Following the initial phase, in 2016 measures for congruence with the updated programmatic outcomes were developed. The expected student outcomes have remained consistent within each course. Assessments, however, continue to be fluid and dynamic as data is collected and analyzed. Examples are outlined in Standard IV-H.

As part of the initial phase of redesign, the charge for the Curriculum Committee changed in 2015. The Curriculum Committee was charged with overseeing coherence of HUSoN mission, goals, and expected outcomes. Committee functions include, but are not limited to, planning, evaluating, and making recommendations to the Faculty Organization for curricular changes by program and/or tracks to insure consistent implementation of the mission, goals and expected outcomes across the programs. The Committee reviews new

course syllabi and proposed changes to existing course syllabi for content and relevance to level/track outcomes within each program.

Evidence of curricula changes are available for review in the Resource Room in Standard III document file.

III-B. Curricula are developed, implemented, and revised to reflect relevant professional nursing standards and guidelines, which are clearly evident within the curriculum and within the expected student outcomes (individual and aggregate).

- Baccalaureate program curricula incorporate *The Essentials of Baccalaureate Education for Professional Nursing Practice* (AACN, 2008).
- Master's program curricula incorporate professional standards and guidelines as appropriate.
 - a. All master's degree programs incorporate *The Essentials of Master's Education in Nursing* (AACN, 2011) and additional relevant professional standards and guidelines as identified by the program.
 - b. All master's degree programs that prepare nurse practitioners incorporate *Criteria for Evaluation of Nurse Practitioner Programs* (NTF, 2012).
- Graduate-entry program curricula incorporate *The Essentials of Baccalaureate Education for Professional Nursing Practice* (AACN, 2008) and appropriate graduate program standards and guidelines.
- DNP program curricula incorporate professional standards and guidelines as appropriate.
 - a. All DNP programs incorporate *The Essentials of Doctoral Education for Advanced Nursing Practice* (AACN, 2006) and additional relevant professional standards and guidelines if identified by the program.
 - b. All DNP programs that prepare nurse practitioners incorporate *Criteria for Evaluation of Nurse Practitioner Programs* (NTF, 2012).
- Post-graduate APRN certificate programs that prepare nurse practitioners incorporate *Criteria for Evaluation of Nurse Practitioner Programs* (NTF, 2012).

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

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

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

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

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

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

Program Response:

The curricular outcomes serve as the foundation for the course objectives. These are the basis for expanded modules/content and with expected student learning outcomes. The course objectives and module/content outcomes are consistent with the level of professional practice expected of graduates. Traditional BSN students are prepared as generalist nurses who will be able to function in multiple roles as a professional Registered Nurse utilizing evidenced based practice. The RN to BSN students are practicing Registered Nurses prepared through transformative learning to function in the multiple capacities of the professional nursing roles. MSN graduates are prepared to practice in APRN roles as Family and Community Nurse Practitioners or Psychiatric Mental Health Nurse practitioners, or in the role of a Nurse Educator. Students entering with a MSN degree, follow the specialized curriculum in either the FCNP or PMHNP track for a Post-Master's APRN Certificate. A non-APRN option is available for students with a MSN degree who are pursuing advanced education for nursing leadership and education roles. The curricula of HUSoN are from and informed by *The Essentials of Baccalaureate Education for Professional Nursing Practice* (AACN, 2013), *The Essentials of Master's Education in Nursing*, (AACN, 2011), and *Criteria for Evaluation of Nurse Practitioner Programs* (NTF, 2012).

In addition to the AACN and NTF standards, the faculty utilize other professional practice standards and guidelines such as, Quality and Safety Education for Nursing (QSEN, 2005) to inform the selection of content within the courses. Professional standards are incorporated into courses as appropriate based on faculty judgement. Students may access professional education and practice standards through links within the Learning Management System, Canvas®.

HUSoN adheres to the rules and regulations established by the Maine Board of Nursing (MBON) for pre-licensure nursing programs. HUSoN clinical hour to credit ratio is 3:1, which is consistent with the MBON regulations. An 8:1 student to faculty ratio is utilized in acute care clinical settings. Eastern Maine Medical Center (EMMC) requires the student to faculty ratio to be 6:1 on all medical units, faculty meet this requirement for students placed at EMMC. The student to faculty ratio in community settings, and preceptorship rotations with faculty oversight are not mandated by the MBON. The MBON requires that community and preceptor rotation sites have a Registered Nurse as direct supervisor, not a clinical faculty. The MBON does not provide rules or regulations for the post-licensure BSN or MSN programs.

Examples of how curricula are developed, implemented, and revised to reflect relevant professional nursing standards and guidelines are below.

In fall 2015 after a downward shift in aggregate student outcomes, the faculty developed a strategy to improve student outcomes and assess student readiness for the NCLEX-RN® licensing exam, and HU contracted with Health Education Systems, Inc. (HESI) for web-based standardized assessments and learning materials. The HESI program is embedded into the traditional BSN core curriculum and includes learning modules, practice tests, remediation, and comprehensive course assessments (Suggest you reference Evidence they can see regarding this). In the final semester of the program, students enrolled in NU 425 complete a comprehensive NCLEX-RN® predictor assessment, participate in a three-day NCLEX-RN® review that is offered virtual and onsite, with a follow-up predictor. The incorporation of the HESI products has improved student outcomes and first time NCLEX passage rates as outlined in Standard IV-C. The faculty decision for using HESI came after several years of having contracted with Assessment Technologies Inc. (ATI®) products. The ATI® assessment products were not thoroughly embedded in the BSN curriculum, therefore, valid and reliable data to evaluate outcomes was not established. Additional evidence provided in Standard IV.

Under the previous directorship, the RN to BSN curriculum was designed and passed by the faculty in fall 2014. Upon implementation it was determined there were not sufficient connections between the traditional BSN and RN to BSN curricula. The initial curriculum implementation did not contain clear progression standards. In spring 2015, the first students were admitted to the RN to BSN to MSN track of the BSN program. Course outcomes were not sufficiently aligned with the traditional BSN program outcomes as stated above, and therefore were not completely congruent with *The Essentials of Baccalaureate Education for Professional Nursing Practice* (AACN, 2013), and professional standards such as QSEN for BSN education. In spring 2017, a faculty ad hoc committee was formed and charged with restructuring the curriculum for congruency with the traditional HUSoN BSN outcomes, AACN Essentials, and professional standards and guidelines. The restructured curriculum was reviewed and adopted by the faculty in spring 2017 with students currently enrolled in the program provided an opportunity to matriculate based on the updated curriculum.

In January 2017, Husson University hired a new Director of Online and Extended Learning, Dr. David Haus. Dr. Haus examined the online RN-BSN curriculum and the online courses in collaboration with the Chair and ad hoc committee. It was noted that they were not completely congruent with *The Essentials of Baccalaureate Education for Professional Nursing Practice* (AACN, 2013), and they were not collecting and reporting assessment data to HUSoN. The Office on Online and Extended Learning now requires that all programs moving online have a curriculum map that aligns with AACN (2013) standards; has aligned, valid assessments; and those assessment data must be collected, interpreted, and used to drive changes in the online program. Dr. Haus worked with the HUSoN Chair to identify course writers to redevelop the RN-BSN courses to align with the new curriculum. The Office of Online and Extended Learning has also adopted a development model aligned with the Quality Matters rubric, and the RN-BSN courses will be sent forward to Quality Matters over the course of the next two academic years for review. Alignment Chart of RN to BSN to AACN (2013) standards will be available for review in the Resource Room in the Standard III document file.

The Office of Online and Extended Learning has worked with HUSoN to develop a timeline for the redevelopment of RN-BSN online courses. The first courses were redesigned in the summer of 2017 and the last courses will be completed by January 2018. During the spring of 2018, the Director of Online and Extended Learning will work with the School of Nursing to have all tracked course assessments entered into ExamSoft for data collection and tracking of student outcomes achievement

Table 3.B.1 - RN to BSN Course Plan for Development Time Line

Course	Redevelopment complete	ExamSoft	QM submission
NU 441 Role Transition to BSN	August 2017	January 2018	October 2018
NU 442 Health Informatics and Technology	October 2017	January 2018	December 2018
NU 443 Quality Improvement in Healthcare Systems	August 2017	January 2018	October 2018
NU 495 Capstone for Professional Practice	January 2018	March 2018	August 2018
NU 446 Nursing Practice Science and Skills for the Professional Nurse	January 2018	March 2018	May 2018
NU 445 Evidence Based Practice for the Professional Nurse	October 2017	January 2018	January 2018
NU 448 Interprofessional Collaboration in Rural Public Health	January 2018	March 2018	May 2018
NU 449 Health Policy Issues and Challenges	January 2018	March 2018	May 2018
NU 455 Gerontological Nursing for the Professional Nursing	January 2018	March 2018	May 2018
NU 447 Leadership Development for the Professional Nurse	January 2018	March 2018	May 2018

In fall 2014, HUSoN Graduate students participated in a pilot offering of an assessment in the “3Ps” (Advanced Pathophysiology, Pharmacology, and Physical/Health Assessment) with Advanced Practice Education Associates (APEA). In spring 2015, APEA was contracted for use in the MSN program. Students tested following completion of advanced pathophysiology, pharmacology, and physical/health assessment for readiness for clinical progression. Students who do not demonstrate readiness through achievement of assessment benchmarks are provided remediation and retested prior to engagement in advanced clinical practice placement. During the last semester of the FCNP program, students are given a standardized assessment as a predictor of outcome on the certification examination. Students scoring below benchmark are provided remediation and support from faculty in areas of need. Evidence of successful certification exam results is outlined in Standard IV-C.

In 2013, the Advanced Practice Psychiatric Nursing (AANP) track graduated its last cohort, due to changes in the national certification requirements for examination. The curriculum of the current PMHNP track, which addresses the professional standards in provision of care to individuals across the lifespan, was developed and approved by CCNE in 2014/15. The first cohort of students was admitted to the PMHNP track in fall 2016 with an anticipated completion in spring 2020. Faculty, in response to the change in professional standards and certification requirements, developed and implemented a bridge program that provided content necessary for alumni from the previous Psychiatric Nurse Practitioner track to meet requirements for the new certification in PMH. Curriculum was approved by CCNE in 2014, and eight students were enrolled for this one-time course offering in fall 2016. Evidence of the PMHNP curriculum and bridge course process is available in the Resource Room in Standard III document file.

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

- Baccalaureate curricula build upon a foundation of the arts, sciences, and humanities.
- Master’s curricula build on a foundation comparable to baccalaureate level nursing knowledge.
- DNP curricula build on a baccalaureate and/or master’s foundation, depending on the level of entry of the student.
- Post-graduate APRN certificate programs build on graduate level nursing competencies and knowledge base.

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

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

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

Program Response:

The curricula of HUSoN programs incorporates content and learning experiences essential to practice professional and advanced practice nursing. Curricula are sequentially and logically organized to facilitate student achievement of the curricular outcomes and the individual and aggregate student learning outcomes. Professional preparation is supported and emphasized through clinical excellence, critical thinking, student-

centered learning, experiential learning, holistic and compassionate care, self-reflection, leadership, and interprofessional collaboration. The transformative curricula increase in breadth and depth as the student progresses in the curricula. HUSoN faculty developed the BSN curriculum that flows from The Essentials of Baccalaureate Education for Professional Nursing Practice (AACN, 2008) and other professional standards and guidelines such as the Maine Nurse Competencies developed in 2013 (MNC, 2013).

The traditional BSN curriculum is logically structured across four years of study, and divided into two components: the general education component and professional nursing component. The majority of general education coursework is completed in the first two years of the program. Faculty believe that the third and fourth year coursework builds upon the underpinning education in the arts, sciences, humanities, and foundational nursing coursework completed in the first two years of the BSN program. General education coursework comprises a total of sixty credit hours, incorporating the arts, sciences, and humanities. There are a total of sixty-five credit hours of core nursing coursework, beginning with NU 100 Principles of Professional Nursing and ending with NL 427 Senior Practicum. In addition to the 125 credit hours of coursework, HU students are required to actively participate in a minimum of forty hours of community service as an integral aspect of achievement of individual student outcomes for the University, COHE, and HUSoN.

The RN to BSN curriculum is logically structured to achieve individual and aggregate student outcomes. Students enrolled in the RN to BSN track are required to complete the same general education coursework requirements as traditional BSN students. General education coursework can be awarded through transfer credit or enrollment at the University. Faculty encourage students to complete all general education requirements prior to beginning the professional nursing component of the program. During the restructuring of the RN-BSN curriculum, the HUSoN concluded that RN-BSN students must have most of the General Education sequence complete before taking their first Nursing course. Required courses in writing, mathematics, statistics, lab science, and social science are all foundational courses in nursing, and the HUSoN expects these to be complete before taking nursing courses. RN students who have graduated from an accredited associate degree nursing program receive thirty nine credit hours for previous nursing coursework. Participation in professional and community service for the practicing RNs is recognized in lieu of the required community service hours for traditional BSN students.

Beginning fall 2017, the sequencing of nursing coursework for the RN to BSN track supports the transformation from RN to professional nurse and is congruent with AACN standards and guidelines for BSN education.

Table 3.3 RN to BSN Professional Component Curriculum

Fall 1 Session 1	Fall 1 Session 2	Spring 1 Session 1	Spring 1 Session 2	Summer 1 Session 1	Summer 1 15 Week Session
NU 441 – Role Transition to BSN (3) NU 442 – Health Informatics and Technology (3)	NU 445 – Evidence Based Practice for the Professional Nurse (3) NU 446 – Nursing Practice Science and Skills for the Professional Nurse (3)	NU 448 – Interprofessional Collaboration in Rural Public Health (4) (*Experiential Learning Hours) NU 452 - Study on Population Health- Gerontology (3)	NU 443 – Quality Improvement in Healthcare Systems (3) NU 447 – Leadership Development for the Professional Nurse (3)	NU 449 – Health Policy Issues and Challenges (3)	NU 495 – Capstone for Professional Practice (4) (*Experiential Learning Hours)

The MSN curriculum builds on the generalist preparation of the BSN graduate. The baccalaureate education includes a foundation in the arts, sciences and humanities. These areas facilitates the student’s ability to think analytically, reason logically, and develop a fundamental understanding of the patient from a biological and psychological perspective. The student entering the MSN program is expected to come with an understanding of health promotion and disease prevention, a basic knowledge of writing in the discipline, technology and informatics, and basic skills in math and statistics. Graduate education is more specialized and focused, flowing from the AACN Essentials (2011) along with other professional standards and guidelines.

MSN curricula are sequentially and logically organized to facilitate student achievement of MSN program outcomes, specialized track outcomes, course objectives, and the individual and aggregate student learning outcomes. For example, the core MSN curriculum is designed so that advanced theoretical foundations, interprofessional collaboration, policy, leadership, diversity, and advanced research methodology are introduced during the first four semesters of the program. MSN core curriculum coursework include NU 700 Theories & Roles for Advanced Practice Nursing, NU 710 Nursing Research, and NU 740 Public & Health Policy Issues & Challenges. NU 706 Advanced Pathophysiology, NU 702 Advanced Pharmacology, and NU 704 Advanced Physical/Health Assessment are taken in the second, third, and fourth semesters and are components of the MSN core coursework. Students advance to clinical placement and specialized coursework upon demonstration of skill competency in the three areas of advanced practice coursework. Sequencing of specialized coursework is logical and provides students with didactic and clinical practice. The clinical hour requirement of the program/tracks meet the criterion requirements which make students eligible to take certification exams for FCNP, PMHNP, and CNE. Individual track and PMC coursework is defined in Tables 3.4, 3.5, 3.6, 3.7, and 3.8. Students in the FCNP track requested an option to extend the time of the program, allowing for fewer courses each semester to accommodate the working RN. A ten semester option was developed to in response to student feedback. Fall 2017, the first cohort was admitted to this expanded option. A Tracking Grid for this option is available for review in the Resource Room in the Standard III document file.

Students enrolled in the FCNP track of the MSN program follow the 2015 CCNE approved revised curriculum that is logically sequenced for program outcomes, track outcomes, and expected student outcomes. Students enrolled in the Post-Master’s FCNP Certificate program follow the same FCNP curriculum, transfer credit is granted for previous coursework equivalent to NU 700, 702, 704, 706, 710 and 740. PMC students would be required to take NU 730, 802, 806, 807, 808, and 841 with completion of 672 clinical hours. Table 3.4 outlines the FCNP curriculum.

Table 3.4 – FCNP 8 Semester Curriculum (48 Credit Hours/672 Clinical Hours)

Year 1 Fall Semester	Year 1 Spring Semester	Year 1 Summer Semester
NU700 Theories & Roles For Advanced Nursing Practice (3) NU706 Advanced Pathophysiology (3)	NU 710 Nursing Research (3) NU 740 Public & Health Policy Issues And Challenges (3)	NU 702 Advanced Pharmacotherapeutics (3)
Year 2 Fall Semester	Year 2 Spring Semester	Year 2 Summer Semester
NU 704 Advanced Health Assessment (3) NU 730 Interprofessional Collaboration In Rural Public Health (3)	Nu 802 Family Health II – Adult Health (168 Clinical Hours) (6)	NU 807family Health I - Pediatrics (168 Clinical Hours) (6) NU 841 Family And Community Nurse Practitioner Capstone (1)

Year 3 Fall Semester	Year 3 Spring Semester	
NU 808 Family Health III -Women's Health (168 Clinical Hours) (6) NU 841 Family And Community Nurse Practitioner Capstone (1)	NU 806 Family Health IV – Integrating Primary Care (168 Clinical Hours) (6) NU 841 Family And Community Nurse Practitioner Capstone (1)	

*Clinical hours are set at a 3:1 ratio (3 clinical hours/1 credit hour)

Students enrolled in the PMHNP track of the MSN program follow the 2014 CCNE approved revised curriculum that is logically sequenced for program outcomes, track outcomes, and expected student outcomes. Students enrolled in the Post-Master's PMHNP Certificate program follow the same PMHNP curriculum, transfer credit is granted for previous coursework equivalent to NU 700, 702, 704, 706, 710 and 740. PMC students would be required to take NU 707, 722, 810, 812, 814 and 842 with completion of 798 clinical hours. Table 3.5 outlines the PMHNP curriculum.

Table 3.5 – PMHNP 8 Semester Curriculum (50 Credit Hours/798 Clinical Hours)

Year 1 Fall Semester	Year 1 Spring Semester	Year 1 Summer Semester
NU700 Theories & Roles For Advanced Nursing Practice (3) NU706 Advanced Pathophysiology (3)	NU 710 Nursing Research (3) NU 707 Neurobiology (3)	NU 702 Advanced Pharmacotherapeutics (3)
Year 2 Fall Semester	Year 2 Spring Semester	Year 2 Summer Semester
NU 704 Advanced Health Assessment (3) NU 705 Advanced Psychopharmacology (3)	NU 740 Public and Health Policy Issues & Challenges (3) NU 801 Advanced Mental Health Assessment – Across the Lifespan (168 Clinical Hours) (5)	NU 810 Family Psychiatric Nursing I (210 Clinical Hours) (6) NU 842 Family Psychiatric NP Capstone (1)
Year 3 Fall Semester	Year 3 Spring Semester	
NU 812 Family Psychiatric Nursing II (210 Clinical Hours) (6) NU 842 Family Psychiatric NP Capstone (1)	NU 814 Family Psychiatric Nursing III (210 ClinicalHours) (6) NU 842 Family Psychiatric NP Capstone (1)	

*Clinical hours are set at a 6:1 ratio (6 clinical hours/1 credit hour)

Students previously enrolled in the Nursing Education track of the MSN Program followed the curriculum approved by CCNE in 2011. The sequencing of coursework was logical and flowed from and informed by *The Essentials of Master's Education for Professional Nursing Practice* (AACN, 2011) and *Nursing Faculty Qualifications and Roles*, (NCSBN, 2008). The Nursing Education curriculum is currently under revision. Faculty are evaluating best practice in nursing education curriculum that build upon the foundational knowledge of a baccalaureate education in nursing, informed by AACN Graduate Essentials (2011), *Nursing*

Faculty Qualifications and Roles, (NCSBN, 2008), and *The Scope of Practice for Academic Nurse Educators*, (National League for Nurses, 2013). Curriculum changes will include but are not limited to a reduction in total number of credit and clinical hours and an online delivery format. Such changes will support student enrollment outside the region, promoting an increase in nurse educator nationally. Table 3.8 displays the 2011 approved MSN/NEd curriculum and highlights the coursework required for a Post-Master's Certificate in Nursing Education. The curriculum was in effect through 2016.

Table 3.8 Nursing Education 7 Semester Curriculum (40 Credit Hours/546 Clinical Hours)

Semester	7 Semester/Full-Time Option	Part-Time Option
Year 1 Fall	NU 700-Theories and Roles for APN (3cr) NU 704-Advanced Health Assessment (3cr)* NU 706-Advanced Pathophysiology (3cr) 9cr.	NU 700-Theories and Roles for APN (3cr) NU 706-Advanced Pathophysiology (3cr) 6 cr.
Year 1 Spring	NU 710-Nursing Research (3cr) NU 830-T/L Theories and Strategies (3cr) 6cr.	NU 710-Nursing Research (3cr) NU 740-Public and Health Policy (3cr) 6cr.
Year 1 Summer	NU 702-Pharmacotherapeutics (3cr) NU 836-Health Informatics & Tech (3cr) 3cr.	NU 702-Pharmacotherapeutics (3cr) 3cr.
Year 2 Fall	NU 832-Curriculum Development (3cr)* NU 730-Rural/Community Health Nsg (3cr) 6 cr.	NU 704-Advanced Health Assessment (3cr)* NU 730-Rural/Community Health Nsg (3cr) 6 cr.
Year 2 Spring	NU 740-Public and Health Policy (3cr) NU 834-Assessment and Evaluation (3cr)* 6 cr.	NU 830-T/L Theories and Strategies (3cr) NU 834-Assessment and Evaluation (3cr)* 6 cr.
Year 2 Summer	NU 836-Informatics & Technology (3cr) NU 838-Internship Practicum (2-4cr)* NU 840-Scholarly Project (1-3cr) 6-10cr.	NU 836-Health Informatics & Tech (3cr) NU 838-Internship Practicum (2-4cr)* 3-7cr.

Year 3 Fall	NU 838-Internship Practicum (2-4cr)* NU 840-Scholarly Project/Paper (1-3cr) (3-7cr.)	NU 832-Curriculum Development (3cr)* NU 838-Internship Practicum (2-4cr)* NU 840-Scholarly Project/Paper (1-2cr) 6-9- cr.
Spring		NU 838-Internship Practicum (2-4cr)* NU 840-Scholarly Project/Paper (1-3cr) 3-7cr.
Summer		NU 840-Scholarly Project/Paper (1-3cr) 1-3cr.

*Clinical hours are set at a 6:1 ratio (6 clinical hours/1 credit hour)

In 2013 CCNE granted HUSoN approval to offer a PMC in Women's Health Nurse Practitioner. The certificate program was logically structured for attainment of expected student outcomes. Coursework consisted of four courses, 21 credit hours, and 688 clinical hours.

Table 3.9 Women's Health NP Certificate Curriculum

Semester 1	Semester 2	Semester 3
NU 809 – Advanced Women's Health Assessment (168 clinical hours) (6) NU 811 – Women's Health Issues – A Public Health Approach to Care & Policy (3)	NU 813 – Advanced Women's Health Assessment III (168 clinical hours) (6)	NU 815 – Women's Health NP – Final Practicum (352 Clinical Hours) (6)

One student enrolled in the program. She enrolled in two courses, NU 809 and 811 - The student did not return to the program. No additional applications were made to the certificate program, and it was officially closed for admissions for academic year 2016/2017. HUSoN faculty and University Administration reviewed the lack in certificate enrollment and collaboratively decided to place a moratorium on admissions and close the certificate program.

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

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

Program Response:

Faculty of HUSoN practice a variety of teaching/learning practices and chose learning environments to support students across the BSN and MSN programs in achievement of program outcomes, course objectives, and expected student outcomes. Teaching/learning practices are selected based on course objectives and learning environment.

Traditional BSN courses are offered on campus in classrooms and in the Simulation and Learning Resources Center and support the achievement of expected individual and aggregate student learning outcomes. Active teaching/learning strategies such as seminars, small group work and discussions, theory bursts followed by discussions, case studies, computer-facilitated instruction, online standardized testing, flipped classroom, and use of audio-visual materials are utilized to promote critical thinking, collaboration, and clinical decision making.

Faculty use the learning management system (LMS), Canvas®, as support for student learning outcomes outside of the traditional classroom. Students engage in online discussions, have access to the course syllabus, learning activities, course calendar, announcements, and the gradebook.

RN to BSN courses are offered online through Canvas® and support individual and aggregate student outcomes using a variety of teaching/learning strategies. Faculty engage students through online discussions, synchronous and asynchronous content delivery, individual and group collaborations, projects, and presentations. An example includes, students in NU 426 – Policy, Leadership and Management in Nursing course complete a group project; each group may have up to 4 students. The Quality Improvement Learning Project integrates knowledge of nursing research, policy, leadership, management, and nursing theories to design, implement, and develop a project that will improve policy, leadership, and management outcomes. Student conduct the project in an appropriate health care, community, or educational setting. The project relates to improving outcomes for an identified population. It is a broad approach to solving a problem. Given the time frame of this course, students do not implement your project, but they will have the framework set. Again, the project will target an identified policy, leadership, or management issue within your local community, college, or clinical setting. The capstone project consists of (1) Identification of an issue/problem written in a PICO format and the development of a written proposal for the project; (2) A full written proposal with introduction and background of QI project, literature review, and appropriate tool to address QI initiative, and action plan that would be implemented; and (3) Oral and visual presentation of project to peers. Additional evidence from the BSN and MSN programs is available in the Resource Room in Standard III document file.

Courses are designed and implemented using best practice in online course delivery in support of student learning. Faculty have scheduled synchronous class sessions to promote group dialogue and reinforce content/concepts presented in online modules. HU has partnered with The Learning House (TLH) to assist Husson in building its online program infrastructure. TLH provides student success coaching, advising, marketing, and course development assistance.. Courses are offered in seven week terms that allow the working RN to complete one to two courses per term, completing the professional component of the track is as little as three semesters.

The environment of the MSN program supports innovative and appropriate teaching/learning practices aimed at supporting individual and aggregate student outcomes. An array of teaching strategies are used throughout the program from large and small group discussions in the online classroom to one to one mentoring with faculty/student outside of the online learning environment. Examples of teaching/learning activities include the use of synchronous and asynchronous content delivery. Scheduled synchronous classes provide opportunities for group discussions, case study presentations, and question/answer sessions.

The Simulation and Learning Resource Center supports achievement of student outcomes through acquisition of basic to advanced psychomotor skills prior to application in the clinical environment for both the BSN and MSN students. The simulation and laboratory supports student learning in a ‘safe’ environment where students have opportunities to develop and refine clinical skills. The Center is available for students 24/7 for practice along with scheduled ‘open lab’ hours with peer mentors and faculty to assist students with meeting the expected student outcomes for each course. MSN students participate in two clinical intensives whereby they are exposed to clinical scenarios that enhance clinical reasoning, critical thinking, health promotion, and preventive diagnosis skills, while facilitating the development in a feeling of community among the online students.

Students in the fourth year of the traditional BSN track, the RN to BSN track, and MSN students entering clinical rotations have increasing independence and choices in their clinical experiences as they progress through the different curricula. For example, a preceptor model is utilized in the fourth year of the BSN program in order to help students transition into a more autonomous role. RN to BSN students engage in self-selected, faculty-approved, experiential learning hours in both NU 448 – Interprofessional Collaboration in Rural Public Health and NU 495 – Capstone for Professional Practice. MSN students, in collaboration with the Graduate Track Coordinators and Clinical Coordinator, select preceptors for adult, pediatric, and women’s health clinical learning. Faculty support student independence as the student matures into the professional or advanced practice role. Students across the programs are encouraged to self-reflect throughout each semester to determine progress in meeting student outcomes. Self-reflection promotes student awareness as students meet with faculty and faculty advisors throughout the semester to determine progression towards achieving expected student outcomes. Feedback from Clinical Nurse Educators and Preceptors also provide students opportunity to assess progress in

meeting individualized student outcomes for each course and aggregate student outcomes of the program. Additional supporting evidence on teaching/learning and environments in the attainment of student outcomes is available in the Resource Room in the Standard III document file.

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

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

Elaboration: To prepare students for a practice profession, each track in each degree program and post-graduate APRN certificate program affords students the opportunity to develop professional competencies in practice settings aligned to the educational preparation. Clinical practice experiences are provided for students in all programs, including those with distance education offerings. Clinical practice experiences involve activities that are designed to ensure students are competent to enter nursing practice at the level indicated by the degree/certificate program. The design, implementation, and evaluation of clinical practice experiences are aligned to student and program outcomes.

Program Response:

HUSoN works in collaboration with clinical agencies across the State and Region in planning clinical experiences for students in the BSN, RN to BSN, and MSN Programs. Students are exposed to a variety of healthcare settings, including rural community hospitals, urban hospitals, acute and chronic inpatient mental health facilities, critical access hospitals, public health, home health and hospice care, school health, clinics and with many other providers of healthcare.

The Traditional BSN curriculum has planned clinical rotations and preceptorships that support integration of new knowledge and demonstrate attainment of program outcomes. Students complete a total of 900 hours of clinical experiences. Second year students engage in forty-five hours of physical/health assessment, including demonstration of competency in a complete head-to-toe assessment in NL 208 – Health Assessment Clinical. NL 211 – Interventions I Lab and NL 212 – Interventions II Lab support students in basic skill acquisition in the Simulation and Learning Resources Center; fall semester students have 90 clinical lab hours and spring semester students have approximately half the hours (45 hours) in the clinical lab before going for clinical rotation in a hospital setting. The second year provides intensive psychomotor training in the clinical lab prior to the student entering the clinical setting to provide care to patients. NL 427 – Senior Practicum provides the student with 180 hours of clinical practice under the supervision of a RN preceptor. Student, Preceptor, and Faculty evaluate attainment of program outcomes and expected student outcomes during the Senior Practicum.

The RN to BSN student engages in two separate experiential learning activities during the professional component of the curriculum. Example: Students enrolled in NU 448 - Interprofessional Collaboration in Rural Public Health “Apply interprofessional and intraprofessional educational concepts to develop an intervention plan that takes into account determinants of health, available resources, and the range of activities that contribute to health and the prevention of illness, injury, disability, and premature death” and “Use evaluation results to influence the delivery of care, deployment of resources, and to provide input into the development of policies to promote health and prevent disease.”. Projects may be group or individual, and require students to spend a minimum of 30 hours with a student-selected, faculty-approved, professional RN (BSN prepared or higher). A minimum of thirty hours of experiential learning is associated with NU 495 - Capstone for Professional Practice with the student learning outcome to “Develop an evidence-based project in a healthcare setting applying leadership principles to professional nursing practice impacting patient/client outcomes”.

Clinical sites for the FCNP and PMHNP tracks of the MSN Program are student-selected and faculty-approved prior to the student engaging in clinical activities. Faculty assist students in site selection to ensure clinical experiences meet course objectives. The FCNP track has a total of 672 clinical hours, 168 hours in each of the four clinical courses. The PMHNP track has a total of 798 clinical hours, 210 hours in each of the three clinical courses, and 168 hours in the Advanced Mental Health Assessment course. Course faculty maintain contact with the preceptor and student throughout the semester to monitor the teaching/learning process. Preceptors are provided with a training handbook, course syllabus, and student outcomes. A preceptor agreement letter and agency articulation contract must be current prior to the student beginning clinical hours. Examples of

agreement letters and articulation contracts will be available for review in the Resource Room in the Standard III document file.

Examples of how student, preceptor, and faculty feedback support improved clinical experiences. Feedback collected from students through informal mid-term evaluation and formal course evaluations provided through the Office of Institutional Research program is utilized by faculty for program improvement. Volunteer preceptors in the MSN program provide feedback via Typhon, on student performance and suggestions for program improvement. Nursing courses identified by (NU) that include a clinical component, have syllabi that outline theory objectives but do not clearly outline separate clinical objectives. Student Feedback through course evaluation and conversations with faculty indicated that the lack of specific clinical objectives led to ambiguity in what student outcomes were and how they were to be measured during clinical experiences. The need for improvement was identified after a change in Graduate Coordinator to FCNP and PMHMP Track Coordinators in collaboration with faculty and students. Having identified a lack of specific clinical outcomes between theory and clinical student objectives, Track Coordinators began working with course faculty and the Curriculum Committee to separate course objectives to identify both theory and clinical objectives. The result will provide the student, clinical preceptor, and faculty measures to assess attainment of professional competencies and aggregate student outcomes. Separate course syllabi (example provided in Resource Room in Standard III document file from NU/NL 211). Fall 2017 was the first semester for implementing the change.

A comprehensive list of agency and provider contracts are available in the Resource Room in the Standard III document file.

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

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

Program Response:

The curricula of the BSN and MSN Programs and specific teaching/learning practices were designed to meet the needs identified by the communities of interest. As identified in Standard I-B, the communities of interest include the professional community, healthcare entities, the Advisory Board, students (past, current, and future), the faculty and administration. There are a variety of means of obtaining input and feedback from the communities of interests. Examples include student evaluation of courses, clinical sites, and faculty; clinical partners providing evaluation of students and faculty; graduate survey; advisory board meetings, and quarterly meetings with EMMC leadership team. These are only a few of the means of receiving input and areas of influence by the communities of interest. In spring 2017 under the new leadership of Dr. Beuk, a course summary was developed and implemented that provided faculty with means to review the course for strengths, areas of improvement, and suggested action plans to improve teaching/learning outcomes. Examples of course summaries are available in the Resource Room in the Standard III document file.

Students are the key community of interest for the programs. Teaching/learning practices must be appropriate for the student population and build on prior learning. Many of the BSN students are Gen X and Millennials, first generation college students, very computer savvy, digitally competent, demand instant gratification, require stimulating teaching/learning strategies, competitive, and team player challenged. The faculty work to provide teaching/learning practices to this generation of students. For example, all nursing course are on CANVAS® and provide the syllabus, detailed calendars, reading lists, notes, handouts, links to important resources, assignments, forms, etc. Students look to CANVAS® for announcements for reminders of assignments and due dates. While some usage of traditional lecture exists, many faculty members incorporate innovative pedagogical techniques such as group activities, discussion, challenge questions, reflective journaling and computer-aided learning activities to engage student learning and promote critical thinking and problem solving. In 2015 faculty adopted computerized HESI standardized assessments and ExamSoft for testing, analysis and

evaluation of student performance. Changes to teaching/learning delivery by faculty resulted from student input and feedback.

Student population enrolled in the RN to BSN track and MSN Program tend to be outside of the Gen Z and Millennial age group and tend not to be as computer savvy, digitally competent, and require different methods of teaching/learning practices to achieve student outcomes. Both the RN to BSN and MSN curricula are delivered online with synchronous and asynchronous classes via CANVAS®. Feedback from students by informal and formal course evaluation methods has led to some a changes in course design and delivery. An example is the integration of synchronous sessions that support building a community of learners. All courses now follow a similar format, provide links to resources and assignments, and allow for online chat and messaging, which allow students instant interaction with peers and faculty. Course evaluations are reviewed every by faculty and Chair and provide critical feedback from a group of students so that faculty members can continue to meet teaching/learning needs.

HUSoN Advisory Board is comprised of local leaders in healthcare, business, faculty, alumni, HU Assessment and Curriculum, HU Online and Extended Learning, and members of the surrounding community. The Board is designed to typically meet twice during the academic year. The first Advisory Board meeting under the leadership of Dr. Beuk was August 10, 2017. This community of interest group provided valuable feedback on student performance in the clinical settings, informed the group that many recent HUSoN graduates had been hired and were performing above expectations of a new graduate nurse. Several local healthcare agency leaders discussed the opening of available clinical sites and preceptors for the BSN and MSN programs. Example of curricula updates from the Advisory Board members includes a recommendation to include content and clinical experiences to address the opioid epidemic and caring for individuals with addiction, both inpatient and outpatient. The Advisory Board is scheduled for the second meeting of the academic year in January 2018. Advisory Board Meeting minutes are available for review in the Resource Room in the Standard III document file.

HUSoN receives input and feedback informally from the various communities of interest. Faculty work closely with professional organizations, community groups, and other interest groups for input on engagement of students in local, state, regional, and national policy issues and challenges. NU 740 - Public & Health Policy Issues and Challenges specifically engages students at the state and national political level during Nurses Day at the Capital during spring semester.

Clinical partners that BSN and MSN students utilize for preceptorship are critical to the ongoing evaluation of the curricula and teaching/learning practices of faculty. Lead faculty in NL 427 – Senior Practicum, FCNP and PMNP Track Coordinators, and the SON Clinical Coordinator interact with nurse educators, executives, office managers, and providers in the institutions and offices students are placed for preceptorship. Continuous interaction and regular feedback supports the current curricula and teaching/learning practices of the programs. Evaluations facilitate identification of issues and provide for prompt action from the faculty in addressing the issues. Example: As previously noted, feedback from MSN preceptors identified the need for specific clinical objectives in the FCNP and PMHNP courses. Input, feedback, and evaluations from clinical partners demonstrate the importance communities of interest have in the curricula and teaching/learning processes of the programs. Examples of evidence are available in the Resource Room in the Standard III document file.

III-G. Individual student performance is evaluated by the faculty and reflects achievement of expected student outcomes. Evaluation policies and procedures for individual student performance are defined and consistently applied.

Elaboration: Evaluation of student performance is consistent with expected student outcomes. Grading criteria are clearly defined for each course, communicated to students, and applied consistently. Processes exist by which the evaluation of individual student performance is communicated to students. In instances where preceptors facilitate students' clinical learning experiences, faculty may seek input from preceptors regarding student performance, but ultimately faculty are responsible for evaluation of individual student outcomes. The requirement for evaluation of student clinical performance by qualified faculty applies to all students in all programs. Faculty evaluation of student clinical performance may be accomplished through a variety of mechanisms.

Program Response:

HUSoN has a consistent, faculty developed, grading policy that is published in the Student Nursing Handbook, which is accessible to students via CANVAS® “Resources” at <https://sites.google.com/a/husson.edu/student-nurse-conference/student-success-resources> and both the Undergraduate <https://sites.google.com/a/husson.edu/student-nurse-conference/announcements/nursing-student-handbook> and Graduate <https://sites.google.com/a/husson.edu/gradnursing/home/student-handbook> Google sites. The grading policy is distributed in all course syllabi via CANVAS®. The lead faculty assigned to a course update, maintain, and submit syllabi through their respective CANVAS® course webpage. The syllabi are developed following a faculty developed syllabi format (Appendix XX) that includes the listing of methods of evaluation and of obtaining a grade for the course. Course faculty self-evaluate the syllabi informally for completeness using a Syllabus Checklist (Appendix XX) prior to uploading to the CANVAS® course webpage. Course syllabi are electronically submitted to the Administrative Assistant for upload to the Undergraduate and Graduate Google Sites. All current course syllabi are available for student review, previous semester syllabi are closed for student review, yet remain on the sites for faculty review purposes. In accordance with the Faculty Organization of HUSoN Bylaws, Article XI – the Curriculum Committee “Reviews new course syllabi and proposed changes to existing syllabi for content and relevance to level objectives within each program”.

Program curricular outcomes function as the basis for the evaluation of student performance. Planned teaching/learning activities guide the student achievement of the outcomes/objectives. Program Curricular outcomes and course outcomes/objectives are evaluated by online exams, web-supported standardized assessments (HESI), presentations, case studies, projects, or in a lab/clinical course by student learning outcomes and performance standards. At the beginning of each semester, lead faculty provide students with a course orientation that outlines methods of evaluation and grading policy for successful course progression. Individual students are provided grades on didactic and clinical performance following assessments. Students are provided opportunity to review performance evaluations with faculty.

HUSoN follows the University grading scale for both the BSN and MSN Programs. This scale is used in all didactic course, a Pass/Fail grading scale is used for lab/clinical nursing courses. A grade of 77 (c+) or better is required for successful completion of nursing and science courses and continued progression in the both the BSN and MSN programs. The University grading scale is provided below.

Letter Grade (Grade-Point Average)	Numeric Grade
A	4.0
A-	3.7
B+	3.3
B	3.0
B-	2.7
C+	2.3
C	2.0
C-	1.7
D+	1.3
D	1.0
D-	0.7
F	0.0
	Below 60

Students are required to complete lab/clinical requirements with a grade of 77 (C+) or higher to successfully complete the co-requisite NU course. Individual student achievement of lab/clinical objectives at a grade below the minimum grade of 77 (C+) results in non-progression in the NU course.

In fall 2015, faculty adopted HESI tests to evaluate the traditional BSN student performance. Each standardized assessment has a benchmark set by faculty and discussed with students. Year 3 and 4 student test outside of the scheduled class time during a “test block”. Individual student grades are provided by faculty,

students who did not achieve the minimum benchmark are encouraged to complete web-assisted remediation through Evolve/Elsevier and HESI. In 2016/2017 faculty incorporated additional HESI assessments and in 2017/2018 fully implemented the plan for incorporation of HESI assessment into the BSN curriculum. Table 3.10 outlines how HESI assessments are incorporated across the BSN curriculum.

Level of Student	Course	HESI Exam
1 st year, First Semester	HE 111 – Husson Experience (Accepted Nursing Students and Undeclared Nursing Students)	Admission Assessment (A2)
2nd year, First Semester	NU208	RN Health Assessment
2nd year, Second Semester	NU212 NU214	RN Fundamentals RN Pharmacology
3rd year, First and Second Semesters	NU315 NU324	RN Pediatrics RN Maternity
3rd year, Second Semester only	NU322 (if not sequential) NU323	RN Medical-Surgical RN Medical-Surgical
4th year, First and Second Semesters	NU412 NU422 NU424 NU425 NU426	RN Community Health RN Psychology/Mental Health RN Critical Care RN Exit 1 and Exit 2 RN Management
Level of Student	Course	ATI Exam
2nd year, Second Semester	NU212 NU214	RN Fundamentals RN Pharmacology
3rd year, First and Second Semester	NU315 NU323 NU324	RN Nursing Care of Children RN Adult Medical-Surgical RN Maternal Newborn
4th year, First and Second Semester	NU412 NU422 NU424 NU426	RN Community Health RN Mental Health RN Comprehensive Predictor RN Leadership & Management

HESI assessments are not incorporated into the RN to BSN curriculum, since assessments are designed to prepare students for the NCLEX-RN® licensure exam.

Faculty adopted APEA assessment in 2014, with full integration beginning in January 2015. In Year 2 of the MSN Program after completion of Advanced Pathophysiology, Advanced Pharmacology, and Advanced Physical/Health Assessment, all MSN students are evaluated for clinical competency in the three areas uses the APEA 3P assessment. Individual students are provided remediation in the sixteen core content areas. A pre-predictor and post-predictor assessment designed to prepare students for the FCNP Certification examination is taken in NU 806. Faculty review assessment results and work with individual students on areas of improvement to support aggregate student outcomes and success on the FCNP Certification examination.

Table 3.12 APEA Assessment

MSN Core	FCNP Track
Completion of NU 702, 704, 706 (3Ps) 3P Assessment*	Completion of NU 802, 807, 808 Pre-Predictor – FCNP Certification** Completion of NU 806 Post-Predictor – FCNP Certification**

*Core MSN Assessment

**Core FCNP Assessment

APEA Pre and Post Predictor assessments are not incorporated into the PMHNP or NEd curricula, as the assessments are designed to prepare students for the FCNP Certification examination. FAPEA does not offer a PMHNP Certification predictor. Faculty are reviewing options for PMHNP Certification predictor assessments as part of the curriculum revision. The MSN-NEd is a non-APRN option and does not require certification for practice upon program completion.

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

Elaboration: Faculty use data from faculty and student evaluation of teaching-learning practices to inform decisions that facilitate the achievement of student outcomes. Such evaluation activities may be formal or informal, formative or summative. Curriculum is regularly evaluated by faculty and other communities of interest as appropriate. Data from the evaluation of curriculum and teaching-learning practices are used to foster program improvement.

Program Response:

Curriculum, Clinical, and teaching/learning practices are reviewed on regularly scheduled intervals to provide data for decisions to foster ongoing improvements across the programs. An example includes the need for improved writing skills for students across the curricula. In collaboration with HU committee for professional development workshops in *“Writing in the Curriculum”* and *“Writing in the Discipline”*, were initiated in fall 2017. Minutes from the Faculty and Student Development Committee further outlines discussion and review of student and COI feedback on teaching/learning practices across the curricula. Methods of evaluating curriculum are aimed at evaluation of expected aggregate student outcomes as well as individual student learning and Program outcomes. Evidence is available for review in the Resource Room in the Standard III document file.

STANDARD III SUMMARY

STRENGTHS

- A wealth of state of the art teaching-learning resources in both the undergraduate and graduate programs
- 24 hour on campus lab access for independent and small group practice
- Excellent clinical sites with well established relationships and interprofessional connections
- Expanded simulation education opportunities
- LMS, Canvas® that provides supplemental support for on-site course, delivery platform for online courses, and real-time chat between faculty and students.
- Excellent academic and student support services available at University level to support achievement of expected student outcomes

OPPORTUNITIES FOR IMPROVEMENT

- Improved formal processes for ensuring timely student, graduate and faculty input- regarding curriculum and instruction.
- Recording input for use over time.
- Ensuring recommendations for curricula change from student and faculty feedback is consistently processed through the HUSoN Curriculum Committee
- Consistent monitoring for effectiveness in teaching/learning
- Curriculum Committee evaluates curricula change consistently and provides feedback to faculty as a whole

ACTION PLAN FOR IMPROVEMENT

OPPORTUNITIES FOR IMPROVEMENT	GOAL	ACTION PLAN
Improved formal processes for ensuring timely student, graduate and faculty input- regarding curriculum and instruction.	Benchmark at 80% student response for end of course evaluation Evaluate the new process of end of course summaries from faculty	1. Develop the expectation of professionalism in responding to course evaluations 2. Curriculum Committee will review all course summaries at the end of the semester
Lack of transparency through historical records (minutes)	Provide transparency with timely and accurate committee minutes with electronic storage for retrieval by all faculty	1. Establish expectations for submission of minutes by committee secretary to a secure electronic database.

<p>Ensuring recommendations for curricula change from student and faculty feedback is consistently processed through the HUSoN Curriculum Committee</p>	<p>Standardized process for communicating to HUSoN Curriculum Committee Establish the expectation that curricula change recommendations are submitted in writing to the Curriculum Committee for review prior to recommendations to the faculty as a whole</p>	<ol style="list-style-type: none"> 2. Develop a tool for submission of curricula change; including electronic submission and response. 3. Chair to present at October Faculty Organization Meeting the expectation with evaluation of compliance through collaboration with Curriculum Committee
<p>Consistent monitoring for effectiveness in teaching/learning</p>	<p>Faculty will receive at least one Chair review to inform effectiveness of teaching/learning per academic year Faculty will receive at least one peer review to inform effectiveness of teaching/learning per academic year Faculty will develop plans of improvement in teaching/learning effectiveness in response to student evaluations</p>	<ol style="list-style-type: none"> 1. Establish a schedule for faculty class/course review and post on FO agenda monthly 2. Faculty will invite at least one nursing faculty AND one inter-professional faculty to class/course for feedback on teaching/learning 3. Faculty will review student course evaluations and establish specific benchmarks for improvement in teaching/learning
<p>Curriculum Committee follow up on curricula change consistently and provides feedback in collaboration with the Assessment and Evaluation Committee and report to faculty as a whole</p>	<p>Transparency and accountability in curricula change evaluation</p>	<ol style="list-style-type: none"> 1. Establish expectations for submission of minutes by committee secretary to a secure electronic database.

Standard IV

Program Effectiveness: Assessment and Achievement of Program Outcomes

The program is effective in fulfilling its mission and goals as evidenced by achieving expected program outcomes. Program outcomes include student outcomes, faculty outcomes, and other outcomes identified by the program. Data on program effectiveness are used to foster ongoing program improvement.

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

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

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

Program Response:

Husson University School of Nursing (HUSoN) has been developing an ongoing formal process of review of the assessment processes and products of assessment across the curriculum. The current Systematic Plan of Evaluation (SPE) is formed and informed by the AACN Essentials (2011; 2013) and HUSoN mission and strategic plan. The SPE details what criteria or indicators are being sought for each assessment area, what methodology is used for evaluation, the timeline for data collection and analysis, the responsible parties, verification of the work being done, and supporting documentation. This process began in earnest with a paid consultation for programmatic assessment in 2010 where an initial SPE document was crafted. Since then, the HUSoN assessment process has been updated; meaningful assessment has been reported, and reviewed by various HUSoN committees; and plans for change in processes or policies have been considered. HUSoN SPE is found in Appendix H and is available for review in the Resource Room in Standard IV document file [SPE](#).

One area of improvement for HUSoN is that assessment data has not been collated into a single document due to the limitations of the previous SPE design (usability), and changes in accreditation standards and guidelines which required HUSoN faculty to relook at internal reporting systems. The 2010 SPE document was revisited in 2015, with continuous improvements as faculty began preparation of the self-study and for the fall 2017 accreditation on-site visit. The first full unified SPE report will be presented to HUSoN faculty by the Assessment and Evaluation Committee for review and discussion during the Faculty Organization meeting scheduled for October 5, 2017. Faculty Organization minutes are available for review in the Resource Room in the Standard IV document file.

Example of the current SPE:

AREAS OF PROGRAM EVALUATION	BENCHMARK, CRITERIA OR STRATEGIC INDICATOR	METHODOLOGY	TIMING	PERSON(S) RESPONSIBLE	DOCUMENTATION	Verification of completion
IV-A: A systematic process is used to determine program effectiveness	All aspects of the SPE will be completed and presented to the HUSoN faculty for any given calendar by October of the following academic year.	The SPE will be used to gather data and guide programmatic change aligned to the CCNE accreditation requirements. Entities or individuals who should complete each section are identified within the document. The Assessment Committee will maintain the SPE, communicate needs to the identified individuals, and update the official SPE report with information as it becomes available.	Annual report to HUSoN in October	Assessment Committee (to guide the completion of the SPE by all parties involved)	SPE Report	
<p>IV-A Notes:</p> <ul style="list-style-type: none"> • 7-25-17: SPE is being reviewed as part of the 2017 self-study <ul style="list-style-type: none"> ◦ In a review of the status – there are still multiple areas to verify completion (This section will be last), but the overall document is on-track for the October 2017 presentation to the faculty - TDA <p>Recommendations moving forward:</p> <ul style="list-style-type: none"> • Gather feedback from faculty and others involved in data collection / entry / use for the Assessment Committees review. 						

Examples have been identified that support the effectiveness of a comprehensive assessment system. As example, an important outcome of the implementation of a comprehensive assessment system on the undergraduate BSN curriculum has revealed a need for improvement in basic science preparation, specifically in the area of biology. HUSoN has not traditionally included biology as a core science course in the curriculum. Collaboration among science and nursing faculty in conjunction with feedback from students during a focus group meeting contributed in faculty decision to add General Biology to the science core beginning in fall 2018. Data was gathered from faculty, who met with science and humanities faculty on two separate occasions to identify needs, and plan for the integration of General Biology to support student performance in Anatomy & Physiology I and II, Microbiology, and Pathophysiology. Additionally, in review of student progression and curricular needs within the academic period of 2015-2017, faculty identified the need to include General Biology in upcoming curricular revision. This result was based from both qualitative and quantitative data collected and reviewed by faculty in collaboration with the HU Assessment and Curriculum Director and Coordinator.

The proposed curriculum change to include General Biology (SC191 and laboratory) is scheduled to be in place for entering students in the fall of 2018. Prior to full implementation of the curricular change, HUSoN faculty discussed and supported that students entering the program in the fall of 2017 will be encouraged to take General Biology as a fulfillment of the nursing elective, providing the foundational knowledge for promotion of student success without incurring the cost of an increased number of credits required for graduation. Evidence is available in the Resource Room in Standard IV document file.

Data used at Admission

Analysis of admission data gathered within the student acceptance process did not offer meaningful predictive value towards first term GPA. The most significant predictor of progression towards attaining a BSN degree is the first term GPA. In a linear regression analysis, first term GPA accounted for roughly 32% of the variance of towards the dichotomous outcome of earning a BSN or not ($p < .001$), yet the most predictive model found for first term GPA involving specific grades from high school transcripts, specifically high school math (Algebra 1 & 2) and high school sciences (Chemistry and Biology) only accounted for roughly 7% of the variance towards first term GPA. This has led HUSoN faculty to explore additional admissions criteria to more accurately

identify student's academic needs early enough to offer intervention and remediation within the first term as identified by the HUSoN Admissions and Progression Committee. As a result, the HESI A2 (Admissions Assessment) is being utilized for evaluation of students not meeting benchmarks in the areas of reading, math, A&P, and biology. First year student advisors will work with students to identify available support and remediation options. The overall data set will be evaluated at the conclusion of the 2018-2019 academic year to determine the predictive nature and usefulness of the HESI A2 as a potential admissions tool and changes if needed will be proposed by the HUSoN Admissions and Progression Committee. Evidence will be available for review in the Resource Room in the Standard IV document file.

IV-B. Program completion rates demonstrate program effectiveness.

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

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

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

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

Program Response:

HUSoN complies with Standard IV-B in using the following formula to calculate the number of eligible candidates. This formula is appropriate for the reasons provided below.

$$\text{Program Completion} = \frac{\text{NU students accepted} - \text{students leaving for CCNE approved reason}}{\text{NU students who progressed to graduation within 150\% of time}}$$

Eligible high school students are accepted directly into the traditional BSN track. All entering first year students are supported in alternative career explorations within the required one credit HE-111-Husson Experience course, and as such, it is not uncommon for accepted nursing students to discover that nursing is not the desired career path and are supported in pursuing a change of major within the University with collaborative efforts of the faculty serving as student advisors. Each student is encouraged to find the academic path most aligned to their individual skill, interest, and aptitude. This process applies to students desiring to leave the nursing program as well as non-declared degree students seeking entry into the nursing program. The program completion formula is also an appropriate measure for the RN to BSN track as participants of this online program are able to enter with a limited number of general education requirements completed. The program completion formula is also an appropriate measure for the Graduate Program. HUSoN recognizes students as adult learners, with employment ranging from part to full time, with family/life obligations, and other professional commitments that may extend the expected completion time to 150%. The utilization of reporting at 150% time is consistent with the University's reporting to the United States Department of Education.

HUSoN recognizes the role of valid and reliable assessments in all tracks across both programs; and utilizes these assessments throughout all phases of each program to help ensure that students have the necessary skills and knowledge to meet the rigorous academic standards of HUSoN curricula and the profession of nursing.

If a student has an identified need for improvement in required skill and/or knowledge area, their progression to program completion may be delayed to allow for the acquisition of the skill and/or knowledge area. Husson University's rich history of being a school of opportunity may be seen in in the design of this assessment system, as when a student's skill and/or knowledge has an identified area of deficit, HUSoN supports that student with targeted remediation and opportunities for growth in the specified area.

Program completion rates include:

- The Baccalaureate of Science Nursing Degree (both traditional and RN-BSN tracks) is compliant as the completion rate for the most recent calendar year (82% for 2017) is over 70% with the given formula.
- The Masters of Science in Nursing Degree- Family & Community NP is compliant as the completion rate for the most recent calendar year (75% for 2017) is over 70% with the given formula.
- The Post Masters – Family & Community NP is compliant as the completion rate for the most recent calendar year (100% for 2017) is over 70% with the given formula. (Of note, the cohort size is low with an N size 1 of 1)
*PMHNP was not projected to have completion rates for 2017

In accordance with the CCNE and United States Department of Education benchmarks using 150% of completion time of eight (8) semesters, the following program is in process of meeting the program completion rate benchmark of 70% as follows:

- The Family Psychiatric Nurse Practitioner tracks (Masters and Post-Masters) will reach 150% of time in 2020. As part of data review completed by the HUSoN assessment and evaluation committee, HUSoN is aware of the potential of a below 70% completion rate in 2020. Steps are currently underway to identify and address the barriers to progression. These steps include a review of the complete curriculum in collaboration with the Director of Online Learning with proposed changes and recommendations developed through the HUSoN Curriculum Committee.

The following Programs did not meet the 70% threshold due to program enrollment:

- The Nursing Education tracks (Masters and Post-Masters) have graduated all completed cohorts to date (spring 2016) and have been placed temporarily on hold for marketing and admission as curriculum revisions are being made to adjust the curriculum to meet AACN Essentials (2011) and NLN Core Competencies (2013). Neither track had any cohort graduation expectation for 2017, but both tracks have had their last graduates who belong in the 2018 grouping based on program entry.

Table IVB.1 demonstrates completion rate summary 2015-2017 based on entering cohorts that have reached 150% of time.

Table IVB.1 Summary of Completion Rates

	2015	2016	2017
Undergraduate			
• The Bachelors of Nursing Degree	57.1% (44 of 77)	72.2% (57 of 79)	81.6% (62 of 76)
Graduate: Nursing Education			
• The MS Nursing - Nursing Education Track (Pilot)	50% (1 of 2)	50% (2 of 4)	NA (0 of 0) *2018 = 100% (1 of 1)
• Post-Masters - Nursing Education Track (Pilot)	100% (1 of 1)	0% (0 of 1)	NA (0 of 0) *2018 = 100% (2 of 2)
Graduate: Family Psychiatric Nurse Practitioner			

<ul style="list-style-type: none"> MS Nursing - Family Psychiatric Nurse Practitioner 	NA –150% of time will occur in 2020	NA –150% of time will occur in 2020	This program is on track for 67% (8 of 12) for 2020, and 100% (2 of 2) for 2021. HUSoN has noted the initial struggles with progression in this track, and is in the process of identify causes. We hope to re-engage some of the missing students so they may complete their program.
<ul style="list-style-type: none"> Post-Masters - Family Psychiatric NP 	NA –150% of time will occur in 2020	NA –150% of time will occur in 2020	This program is on track for 60% (3 of 5) for 2020, and 100% (1 of 1) for 2021. HUSoN has noted the initial struggles with progression in this track, and is in the process of identify causes. We hope to re-engage some of the missing students so they may complete their program.
Graduate: Family & Community NP			
<ul style="list-style-type: none"> MS Nursing - Family & Community NP 	57% (8 of 14)	50% (1 of 2)	75% (9 of 12)
<ul style="list-style-type: none"> Post Masters – Family & Community NP 	NA (0 of 0)	NA (0 of 0)	100% (1 of 1) *2018 projection: NA (0 of 0)

The BSN Program

- Traditional BSN track: 100% of time = 4 academic years
- Post-licensure BSN Track: 100% of time = 3 academic years
- Yellow = Time Remaining

BSN: Entering Term	Count of students being first registered as a NU student in each term		changed major		100% target		100% of time graduation		150% target		Graduation within 150%		Registered for fall 2017		Potential 150% graduation	
2009/SS	4	3	2013/SP	0	0.0%	2015/SP	0	0.0%								
2009/FA	78	10	2013/SP	26	38.2%	2015/SP	12	55.9%								
2010/SP	9	1	2013/FA	5	62.5%	2015/FA	1	75.0%								
2015 total	91	14		31	40.3%		13	57.1%								
2010/SS	4	1	2014/SP	2	66.7%	2016/SP	0	66.7%								
2010/FA	93	22	2014/SP	42	59.2%	2016/SP	11	74.6%								
2011/SP	7	2	2014/FA	2	40.0%	2016/FA	0	40.0%								
2016 total	104	25		46	58.2%		11	72.2%								
2011/SS	0	0	2015/SP		0.0%	2017/SP	0	0.0%								
2011/FA	95	27	2015/SP	40	58.8%	2017/SP	17	83.8%								
2012/SP	9	1	2015/FA	2	25.0%	2017/FA	3	62.5%								
2017 Total	104	28		42	55.3%		20	81.6%								
2012/SS	1	1	2016/SP	0	0.0%	2018/SP	0	0.0%	0	0.0%	0	0.0%				
2012/FA	78	12	2016/SP	33	50.0%	2018/SP	14	71.2%	3	75.8%						
2013/SP	4	0	2016/FA	2	50.0%	2018/FA	2	100.0%	0	100.0%						
2018 total & Projection	83	13		35	50.0%		16	72.9%	3	77.1%						

MSN Program - Family & Community NP Track

- 100% of time = 3 academic years
- Yellow = Time Remaining

MS Nrs/ Family & Community NP (Program 103)	Entry Year	initiated the program (and did not change major)	Expected graduation (100% of time)	Graduation within 100% of time	% of students completing in 100% of time	Expected graduation (150% of time)	Additional students to graduate within 150% of time	% of students completing in 150% of time	Count of students still active	Projected 150% of time completion rate
	2010/SP		6 2012/FA	2	33%	2014/SP		2	67%	
	2010/SS		2 2013/SP	2	100%	2014/FA		0	100%	
	2010/FA		9 2013/SP	9	100%	2014/FA		0	100%	
2014 Total			17	13	76%			2	88%	
	2011/SP		2 2013/FA	1	50%	2015/SP		0	50%	
	2011/SS		1 2014/SP	1	100%	2015/FA		0	100%	
	2011/FA		11 2014/SP	5	45%	2015/FA		1	55%	
2015 Total			14	7	50%			1	57%	
	2012/SP		0 2014/FA	0	0%	2016/SP		0	0%	
	2012/SS		2 2015/SP	1	50%	2016/FA		0	50%	
	2012/FA		0 2015/SP	0	0%	2016/FA		0	0%	
2016 total			2	1	0%			0	50%	
	2013/SP		8 2015/FA	4	50%	2017/SP		2	75%	
	2013/SS		0 2016/SP	NA	NA	2017/FA	NA	NA	NA	NA
	2013/FA		4 2016/SP	3	75%	2017/FA		0	75%	0 75%
2017 total			12	7	58%			2	75%	75%
	2014/SP		3 2016/FA	2	67%	2018/SP		0	67%	67%
	2014/SS		0 2017/SP	NA	NA	2018/FA	NA	NA	NA	NA
	2014/FA		11 2017/SP	6	55%	2018/FA		0	55%	2 73%
2018 total and projection			14	8	57%			0	57%	73%

Post Masters Certificate: Family and Community Nurse Practitioner

- 100% of time = 3 academic years
- Yellow = Time Remaining

Post Masters - Nsg/Fam Pract (Program 121)	Entering Term	initiated the program (and did not change major)	Expected graduation (100% of time)	Graduation within 100% of time	% of students completing in 100% of time	Expected graduation (150% of time)	Additional students to graduate within 150% of time	% of students completing in 150% of time
	2011/SP		0 2013/FA	NA	NA	2015/SP		
	2011/SS		0 2014/SP	NA	NA	2015/FA		
	2011/FA		0 2014/SP	NA	NA	2015/FA		
2015 TOTAL					NA			
	2012/SP		0 2014/FA	NA	NA	2016/SP		
	2012/SS		0 2015/SP	NA	NA	2016/FA		
	2012/FA		0 2015/SP	NA	NA	2016/FA		
2016 TOTAL					NA			
	2013/SP		0 2015/FA	NA	NA	2017/SP		
	2013/SS		1 2016/SP	1	100%	2017/FA	0	100%
	2013/FA		0 2016/SP	NA	NA	2017/FA		
2017 TOTAL			1	1	100%		0	100%
	2014/SP		0 2016/FA	NA	NA	2018/SP		
	2014/SS		0 2017/SP	NA	NA	2018/FA		
	2014/FA		0 2017/SP	NA	NA	2018/FA		
2018 Total / Projection								NA

MSN Program - Family Psychiatric Nurse Practitioner Track

- 100% of time = 3 academic years
- Yellow = Time Remaining

MS Nursing - Family Psychiatric Nurse Practitioner (Program 353)		initiated the program (and did not change major)	Expected graduation (100% of time)	Graduation within 100% of time	% of students completing in 100% of time	Expected graduation (150% of time)	Additional students to graduate within 150% of time	% of students completing in 150% of time	Count of students still active	projected 150% of time completion rate
	2016/SP	4	2018/FA			2020/SP			1	25.0%
	2016/FA	8	2019/SP			2020/FA			7	87.5%
2020 total and projection		12							8	66.7%
	2017/SP	0	2019/FA	NA		2021/SP				
	2017/SS	0	2020/SP	NA		2021/FA				
	2017/FA	2	2020/SP			2021/FA			2	100.0%
2021 total and projection		2							2	100.0%

Post-Masters Certificate - Family Psychiatric NP

- 100% of time = 3 academic years
- Yellow = Time Remaining

Post-Masters - Family Psychiatric NP (360)		initiated the program (and did not change major)	Expected graduation (100% of time)	Graduation within 100% of time	% of students completing in 100% of time	Expected graduation (150% of time)	Additional students to graduate within 150% of time	% of students completing in 150% of time	Count of students still active	projected 150% of time completion rate
	2016/SP	3	2018/FA			2020/SP			2	66.7%
	2016/SS		2019/SP			2020/FA				
	2016/FA	2	2019/SP			2020/FA			1	50.0%
2020 Total		5							3	60.0%
	2017/SP	1	2019/FA			2021/SP			1	100.0%
	2017/SS	0	2020/SP			2021/FA				
	2017/FA	0	2020/SP			2021/FA				
2021 Total		1							1	100.0%

The MSN Program - Nursing Education Track (Pilot)

- 100% of time = 3 academic years
- Yellow = Time Remaining

MS Nursing - Nursing Education (249)	Entering Term	initiated the program (and did not change major)	Expected graduation (100% of time)	Graduation within 100% of time	% of students completing in 100% of time	Expected graduation (150% of time)	Additional students to graduate within 150% of time	% of students completing in 150% of time
	2011/SP	1	2013/FA	0	0%	2015/SP	0	0%
	2011/SS	0	2014/SP	NA	NA	2015/FA	NA	NA
	2011/FA	1	2014/SP	1	100%	2015/FA	0	100%
2015 total		2		1	50%			50%
	2012/SP	1	2014/FA	1	100%	2016/SP	0	100%
	2012/SS	0	2015/SP	NA	NA	2016/FA	NA	NA
	2012/FA	3	2015/SP	1	33%	2016/FA	0	33%
2016 Total		4		2	50%		0	50%
	2013/SP	0	2015/FA	NA	NA	2017/SP	NA	NA
	2013/SS	0	2016/SP	NA	NA	2017/FA	NA	NA
	2013/FA	0	2016/SP	NA	NA	2017/FA	NA	NA
2017 total (No active students)		0		0	0%		NA	NA
	2014/SP	1	2016/FA	1	100%	2018/SP	0	100%
	2014/SS	NA	2017/SP	NA	NA	2018/FA	NA	NA
	2014/FA	NA	2017/SP	NA	NA	2018/FA	NA	NA
2018 Total (No active students)		1		1	100%			100%

The Post-Masters Certificate - Nursing Education Track (Pilot)

- 100% of time = 3 academic years
- Yellow = Time Remaining

Post Masters - Nursing Education (257)	Entering Term	initiated the program (and did not change major)	Expected graduation (100% of time)	Graduation within 100% of time	% of students completing in 100% of time	Expected graduation (150% of time)	Additional students to graduate within 150% of time	% of students completing in 150% of time
Post-Masters	2011/FA	1	2014/SP	1	100%	2015/FA		100%
2015 Total		1		1	100%			100%
Post-Masters	2012/SP	1	2014/FA	0	0%	2016/SP	0	0%
Post-Masters	2012/SS	0	2015/SP	NA	NA	2016/FA	NA	NA
Post-Masters	2012/FA	0	2015/SP	NA	NA	2016/FA	NA	NA
2016 Total		1		0	0%		0	0%
Post-Masters	2013/SP	0	2015/FA	NA	NA	2017/SP	NA	NA
Post-Masters	2013/SS	0	2016/SP	NA	NA	2017/FA	NA	NA
Post-Masters	2013/FA	0	2016/SP	NA	NA	2017/FA	NA	NA
2017 Total		0						NA
Post-Masters	2014/SP	1	2016/FA	1	100%	2018/SP	0	100%
Post-Masters	2014/SS	1	2017/SP	1	100%	2018/FA	0	100%
Post-Masters	2014/FA	0	2017/SP	NA	NA	2018/FA	NA	NA
2018 Total		2		2	100%			100%

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

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

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

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

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

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

annual pass rates for the three most recent calendar years are averaged, or (3) the pass rate for that certification examination is 80% or higher for all takers (first-time and repeat) when the annual pass rates for the three most recent calendar years are averaged.

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

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

Program Response:

NCLEX-RN® First Time Pass Rates:

HUSoN is compliant with the requirement of at least 80% first time passage on the NCLEX-RN® for pre-licensure BSN programs within the most recent calendar year. The calendar year of 2016 has a first time passage rate for HUSoN graduates of 87%. The first time passage rate for 2017 is 89.09% with no additional student to test. HUSoN is compliant by alternative measure #1 with 89% passage for unique test takers (first time or repeating) in 2016. HUSoN also meets alternative measure #2 with an 81% three year average for first time passage (2014-2016). Finally, HUSoN meets alternative measure #3 with an 86% three year average for all unique test takers within each calendar year.

First-time test takers within a calendar year

	Fail	Pass	Passing Percentage
2014	14	49	77.8%
2015	13	43	76.8%
2016	7	48	87.3%
		Three Year Average	80.6%
2017	6	55	89.09%

Unique test-takers (first-time or repeated) within a calendar year

	Fail	Pass	Passing Percentage
2014	9	61	87.1%
2015	11	52	82.5%
2016	7	57	89.1%
		Three Year Average	86.2%
2017	2	53	96%

Pass Rates for FCNP Certification

Overall Pass Rate Data by Year of Graduation

Year of Graduation	Number of Examinees		Number of 1 st time Candidates	School Pass Rate, 1 st Time Candidates	School Pass Rate
2014					
2015	Graduate	4	4	100	100
2016	Post-Graduate				
		4	4	100	100

Domain Level Performance, by Year of Graduation

2016				
Domain	Number of Items (175)	GRADUATE	Overall ANCC Average Raw Score	School Average Raw Score
Foundations for Advanced Practice	64		46.59	50.5
Professional Practice	30		21.74	22.25
Independent Practice	81		61.76	69
Domain	Number of Items (175)	POST-GRADUATE	Overall ANCC Average Raw Score	School Average Raw Score
Foundations for Advanced Practice	64		45.38	
Professional Practice	30		21.44	
Independent Practice	81		60.22	

	Overall ANCC Pass Rate, by 1 st Time Candidates	Overall ANCC Pass Rate	Overall ANCC Average Scaled Score, by 1 st Time Candidates	Overall ANCC Average Scaled Score		Overall School Average Scaled Score, by 1 st Time Candidates	Overall School Average Scaled Score
2014, 2015, and 2016 Combined	81.65	77.25	383.26	378.23		417.25	417.25

Exam History (FNP)																					
Degree	Exam Year	Cds	Atts	Prog Avg	Natl Avg	Pass	Pct Pass	Pass 1st	Pct 1st	Assessment			Diagnosis			Planning			Evaluation		
										Items	Natl Avg	Prog Avg	Items	Natl Avg	Prog Avg	Items	Natl Avg	Prog Avg	Items	Natl Avg	Prog Avg
Masters	2016	3	3	57.7	56.4	3	100	3	100	48	35	35	33	25	25	31	23	24	23	17	17
Masters	2015	1	1	N/A	56.1	N/A	N/A	N/A	N/A	48	36	N/A	33	23	N/A	31	22	N/A	23	17	N/A
Masters	2014	2	2	N/A	58.0	N/A	N/A	N/A	N/A	48	36	N/A	33	24	N/A	31	22	N/A	23	17	N/A
Masters	2013	12	12	56.7	58.3	11	92	11	92	48	36	36	33	25	24	31	21	21	23	17	16
Masters	2012	13	13	59.6	58.5	13	100	13	100	48	35	35	33	24	24	31	22	23	23	18	19
Post-Grad	2012	1	1	N/A	58.5	N/A	N/A	N/A	N/A	48	35	N/A	33	24	N/A	31	22	N/A	23	17	N/A

Graduation Year Statistics (FNP)																		
Degree	Exam yr	Grad yr	# of candidates	Pass % rate	Assessment			Diagnosis			Planning			Evaluation				
					Items	Natl Avg	Prog Avg	Items	Natl Avg	Prog Avg	Items	Natl Avg	Prog Avg	Items	Natl Avg	Prog Avg		
Masters	2016	2016	3	100	48	35	35	33	25	25	31	23	24	23	17	17		
Masters	2015	2004	1	N/A	48	32	N/A	33	20	N/A	31	19	N/A	23	16	N/A		
Masters	2014	2014	2	N/A	48	36	N/A	33	24	N/A	31	22	N/A	23	17	N/A		
Masters	2013	2013	12	92	48	37	36	33	25	24	31	22	21	23	17	16		
Masters	2012	2012	13	100	48	36	35	33	25	24	31	23	23	23	18	19		
Masters	2012	2012	1	N/A	48	35	N/A	33	25	N/A	31	22	N/A	23	18	N/A		

Current pass rate data for the PMHNP certification is not applicable at this time as there have been no graduates from the 2015 and 2016 cohorts. The PMHNP track did not admit students in 2014. There is no required certification for graduates from the Nurse Educator track and therefore, no data is not applicable for reporting.

IV-D. Employment rates demonstrate program effectiveness.

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

- The employment rate is collected separately for each degree program (baccalaureate, master's, and DNP) and post-graduate APRN certificate program.
- Data are collected within 12 months of program completion. For example, employment data may be collected at the time of program completion or at any time within 12 months of program completion.
- The employment rate is 70% or higher. However, if the employment rate is less than 70%, the employment rate is 70% or higher when excluding graduates who have elected not to be employed.

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

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

Program Response:

Husson University utilizes *The Outcomes Survey* (TheOutcomesSurvey.com/DataStandards.html), a commercially available online program that allows graduates to contribute employment data at different points within their first 12 months post-graduation. Students are instructed to establish their account within this system during exit interviews, and reminded through emailed information, career counseling services, advisor meetings, and graduation guidelines. Examples of communication are available in the Resource Room in the Standard IV document file.

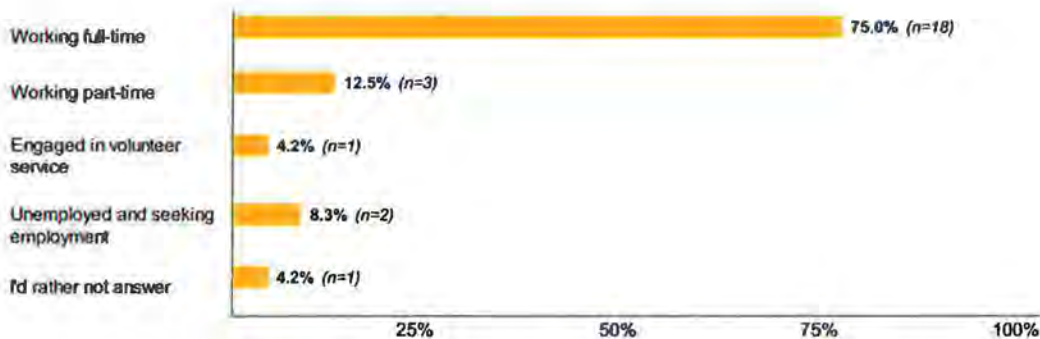
The first collection is a baseline point taken at or near graduation, and then alumni are prompted to respond again at 3 months, 6 months, and 12 months post-graduation. Please note, all of HUSoN alumni employment data is self-reported and has validity concerns, with a low response rate causing generalizability concerns. HUSoN does not receive actual employment data from the Internal Revenue Service or other federal agencies that could verify employment status regarding HUSoN alumni. HU student employment information is provided to the Federal Department of Education via the IPEC report. HU maintains compliance with employment reporting.

The data gathered within this system gives us confidence that at least 70% of our alumni of any given calendar year are gainfully employed (undergraduate and graduate) and this percentage has face validity to what HUSoN alumni subjectively self-report to faculty and/or administrative staff. Detailed BSN and MSN Program data is available in the Resource Room in Standard IV document file. Examples of response to employment surveys are provided below.

BSN:

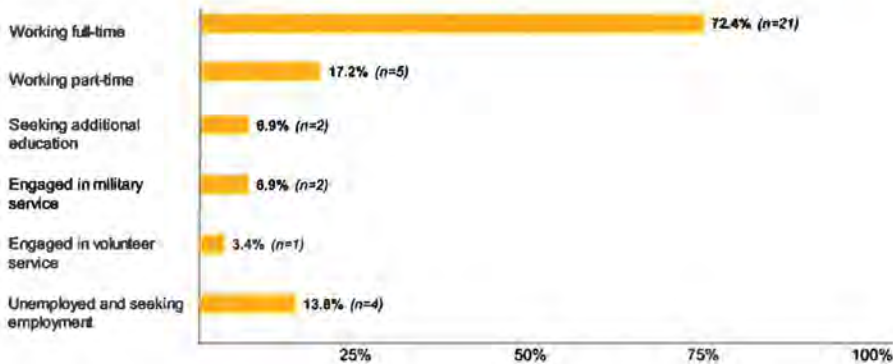
The one year response rate from the class of 2015 indicated a 75% full-time employment. (n=24)

Core 1: Which of the following options represent your post-graduation situation at this time? (Select all that apply) Undergraduate (n=24)



The three month response rate from the class of 2016 indicated a 72.4% full-time employment (n=29)

Core 1: Which of the following options represent your post-graduation situation at this time? (Select all that apply) Undergraduate (n=29)



The one year response rate from the class of 2016 indicated a 83% full-time employment (n=24)

Response rate: 24/50 *(48%)

	Full time	Part time	employed
2016 One year out survey	83%	17%	100%
N size of responders	20	4	24

MSN:

Students graduating from the graduate nursing programs have been less forthcoming with employment data to date. The base line (within three months of graduation) level of self-reported full-time employment for the class of 2016 is 66.7% (n=3). The one year response data from the class of 2015 indicates 100% (n=3) were “working full time.” We are continuing to work with the faculty and students to increase response rates.

IV-E. Program outcomes demonstrate program effectiveness.

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

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

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

Program Response:

As indicated in I-A, HUSoN has drafted programmatic outcomes based on The Essentials of Baccalaureate Education for Professional Nursing Practice (AACN, 2013), and tracks achievement of these outcomes in multiple ways throughout the BSN curriculum. . The BSN program outcomes are outlined as follows:

1. Synthesize evidence-based knowledge from liberal education, nursing and other disciplines to guide baccalaureate generalist nursing practice (*Essential I*).
2. Design culturally appropriate, holistic, patient-centered strategies to promote health and manage illness for diverse individuals, families, groups, communities, and populations across the lifespan. (*Essential VII, IX*)
3. Engage in inter- and intra-professional communication and collaboration that promotes the achievement of quality patient outcomes and safety in various environments and healthcare settings. (*Essential II, III, & VI*)
4. Demonstrate skills in the use of informational and health care technologies that support quality outcomes and improve care. (*Essential III & IV*)
5. Adhere to a professional moral, ethical, and legal framework to guide conduct and decision-making. (*Essential VIII*)
6. Investigate current issues in healthcare policy, finance, and regulatory environments and propose initiatives that will impact the quality and safety of healthcare delivery. (*Essential II & V*)

The BSN program outcomes are aligned to outcomes within The Essentials of Baccalaureate Education for Professional Nursing Practice (AACN, 2013) as well as the 2016 NCLEX-RN® Detailed Test Plan (National Council of State Boards of Nursing, 2015) HUSoN utilizes the NCLEX-RN® pass rate by cohort as one measure of program effectiveness.

HUSoN uses multiple ways of measuring student achievement of the program outcomes through both formative and summative methods of assessment. HUSoN faculty were early adopters in using the assessment platform, ExamSoft, which allows for direct coding and linkage to learning objectives in each course based assessment for the BSN program. As a result of the direct coding, reports are generated for use by the curriculum and assessment and evaluation committees as well as individual course faculty to review learning outcomes and content areas for gaps or mismatching. The sequencing of the outcomes are seen throughout the BSN curriculum map. BSN Curricular maps are available in the Resource Room in Standard IV document file.

An example of a cohort report that is generated by ExamSoft data is given below. Data presented below is for the assessment periods of the 2015-2016 and 2016-2017 academic years.

Standard	2015-16		2016-17	
	# of Items	Group Average	# of Items	Group Average
Baccalaureate Essentials				
Essential I: Liberal Education for Baccalaureate Generalist Nursing Practice	229	81.29%	361	85.46%
Essential II: Basic Organizational and Systems Leadership for Quality Care and Patient Safety	11	81.49%	35	84.84%
Essential III: Scholarship for Evidence-Based Practice	12	82.95%	54	82.34%
Essential IV: Information Management and Application of Patient Care Technology	11	80.77%	28	92.57%
Essential V: Healthcare Policy, Finance, and Regulatory Environments	5	77.69%	13	81.73%
Essential VI: Interprofessional Communication and Collaboration for Improving Patient Health Outcomes	20	73.78%	47	81.97%
Essential VII: Clinical Prevention and Population Health	128	82.54%	177	73.36%
Essential VIII: Professionalism and Professional Values	27	86.42%	31	84.25%
Essential IX: Baccalaureate Generalist Nursing Practice	957	82.17%	1990	81.47%
NCLEX				
NCLEX I. Management of Care	131	88.69%	232	85.20%
NCLEX II. Safety and Infection Control	94	92.89%	67	91.46%
NCLEX III. Health Promotion and Maintenance	336	87.31%	555	77.33%
NCLEX IV. Psycho-social Integrity	265	85.11%	264	84.00%
NCLEX V. Basic Care and Comfort	90	82.44%	182	82.39%
NCLEX VI. Pharmacological Therapies	408	83.58%	508	82.55%
NCLEX VII. Reduction of Risk Potential	264	90.60%	330	83.46%
NCLEX VIII. Physiological Adaptation	261	81.82%	752	80.56%

Outcomes reporting is also measured at the course level using HESI content specialty assessments. These assessments are used as summative course assessments as part of a comprehensive final. Faculty voted for standardized HESI assessments to be 10% of the overall course grade. This recommendations follows best practice and is support by HESI assessment standards. Faculty have used academic freedom and assigned up to 20% of the overall course grade for these assessments. As a result, the Curriculum Committee and the Assessment and Evaluation Committee are developing a policy that restricts high stake assessments. This work is in process with the purpose of supporting student achievement of outcomes while maintaining academic standards.

As a result of implantation of HESI products across the curriculum, program outcomes are analyzed against national benchmarking to inform program outcomes. The summary tables of HESI data is provided below. Additional data sets are available in the Resource Room in the Standard IV document file.

Agragate HESI Score (2015-2016)	First	Second	Third	Fourth	Sparkline
Categories 2008 Liberal Education for BSN Generalist		658.3	743.0	798.4	
Categories 2008 Leadership for Quality Care & Patient Safety		669.3	792.6	836.4	
Categories 2008 Scholarship for Evidence Based Practice		647.6	743.3	836.0	
Categories 2008 Information Mngmt & Pt Care Technology		1035.9	845.0	810.8	
Categories 2008 Health Care Policy		776.3	904.3	777.5	
Categories 2008 Interprofessional Communication		584.7	764.9	768.9	
Categories 2008 Clinical Prevention & Population Health		643.3	750.4	792.4	
Categories 2008 Professionalism & Professional Values		741.4	830.7	1358.8	
Categories 2008 BSN Generalist Nursing Practice		658.3	749.1	795.2	

Agragate HESI Score (2015-2016)	First	Second	Third	Fourth	Sparkline
Client Needs Basic Care/Comfort		381.3	902.8	1007.4	
Client Needs Health Promotion & Maintenance		902.5	711.3	1071.7	
Client Needs Mgmt of Care (RN)		895.1	998.7	784.8	
Client Needs Pharm & Parenteral Tx		705.9	673.6	1027.6	
Client Needs Physio Adaptation		821.2	741.4	1077.3	
Client Needs Physiological Integrity		652.2	724.8	818.8	
Client Needs Psychosocial Integrity		395.4	881.6	817.7	
Client Needs Reduce Risk Potential		730.1	708.1	857.0	
Client Needs Safety & Infect Control		803.2	817.6	921.4	

As identified in Standard III-A, the RN to BSN track is being redeveloped based on Quality Matter certification, the AACN Essentials (2013), and best practice for online course design as provided by the Online and Extended Learning Director. These improvements will yield categorical assessment similar to the traditional BSN track for detailed analysis of student progression and aggregate student outcomes. The Office of Online and Extended Learning and the Office of Assessment have collaborated with HUSoN faculty in the redesign of courses and will be fully implemented in spring 2018. Available in Standard IV-A, is the timeline for assessment analysis, and implementation. Students were first admitted to the RN to BSN in spring 2014. To date three students have completed the program, all are ahead of projected 150% completion time.

Data sets below reflect evaluation of Graduate program outcomes from fall 2014 through summer 2017. Graduate core program outcomes are measured by benchmarking of the “3Ps”, NU 702 Advanced Pharmacology, NU 704 Advanced Physical/Health Assessment, and NU 706 Advanced Pathophysiology. The red highlighted areas indicate a percentage of students achieving below the benchmark of B+.

Percentage of students to earn a B+ or higher

area	Course	2010/FA	2011/SP	2011/SS	2011/FA	2012/SP	2012/SS	2012/FA	2013/SP	2013/SS	2013/FA	2014/SP	2014/SS	2014/FA	2015/SP	2015/SS	2015/FA	2016/SP	2016/SS	2016/FA	2017/SP	2017/SS
Core 3P - Advanced Pharmacology	NU 702				93%			88%						88%						88%		
Core 3P - Advanced Physical/Health Assessment	NU 704	100%			94%			100%						89%								
Core 3P - Advanced Pathophysiology	NU 706	90%			84%			88%						100%						95%		

The FCNP, PMHNP, and Nurse Educator tracks of the Graduate program use specialty courses in addition to the 3Ps. The courses within each track assess outcomes that are consistent with AACN Essentials (2011), and professional standards and guidelines. The benchmark of for these courses are set at achievement of B+. The red highlighted areas indicate a percentage of students achieving below the benchmark of B+.

FCNP Track

Percentage of students to earn a B+ or higher

area	Course	2010/FA	2011/SP	2011/SS	2011/FA	2012/SP	2012/SS	2012/FA	2013/SP	2013/SS	2013/FA	2014/SP	2014/SS	2014/FA	2015/SP	2015/SS	2015/FA	2016/SP	2016/SS	2016/FA	2017/SP	2017/SS	
Family and Community Nurse Practitioner Specialty Core	NU 801																						100%
Family and Community Nurse Practitioner Specialty Core	NU 802			100%			92%				100%			91%			100%			100%			91%
Family and Community Nurse Practitioner Specialty Core	NU 806		100%			100%				83%					83%								90%
Family and Community Nurse Practitioner Specialty Core	NU 808		100%			100%				100%			100%					100%					90%

PMHNP Track

area	Course	2010/FA	2011/SP	2011/SS	2011/FA	2012/SP	2012/SS	2012/FA	2013/SP	2013/SS	2013/FA	2014/SP	2014/SS	2014/FA	2015/SP	2015/SS	2015/FA	2016/SP	2016/SS	2016/FA	2017/SP	2017/SS	
Family Psychiatric Mental Health Nurse Practitioner 3P	NU 705	100%			80%						100%												89%
Family Psychiatric Mental Health Nurse Practitioner 3P	NU 707		100%			100%												100%					
Family Psychiatric Mental Health Nurse Practitioner 3P	NU 722		100%																				
area	Course	2010/FA	2011/SP	2011/SS	2011/FA	2012/SP	2012/SS	2012/FA	2013/SP	2013/SS	2013/FA	2014/SP	2014/SS	2014/FA	2015/SP	2015/SS	2015/FA	2016/SP	2016/SS	2016/FA	2017/SP	2017/SS	
Family Psychiatric Mental Health Nurse Practitioner Specialty Core	NU 810			100%			100%																100%
Family Psychiatric Mental Health Nurse Practitioner Specialty Core	NU 812	100%			100%			100%															
Family Psychiatric Mental Health Nurse Practitioner Specialty Core	NU 814	100%				100%				100%													
Family Psychiatric Mental Health Nurse Practitioner Specialty Core	NU 842																						100%

Nurse Educator Track

area	Course	2010/FA	2011/SP	2011/SS	2011/FA	2012/SP	2012/SS	2012/FA	2013/SP	2013/SS	2013/FA	2014/SP	2014/SS	2014/FA	2015/SP	2015/SS	2015/FA	2016/SP	2016/SS	2016/FA	2017/SP	2017/SS	
NU ED Specialty Core	NU 830					100%								100%									
NU ED Specialty Core	NU 832								100%						100%								
NU ED Specialty Core	NU 834									100%				100%									
NU ED Specialty Core	NU 836						100%							100%									
NU ED Specialty Core	NU 840													100%						100%	100%		

The Graduate program has not incorporated ExamSoft analysis into courses at this time. Faculty in collaboration with the Office of Online and Extended Learning and the Office of Assessment are evaluating each course for validity of assessments. As in the BSN program, all objective and performance assessments will be coded to the course objectives, program outcomes, AACN Essentials (2011), and other professional standards. The integration of this assessment data will provide faculty with comprehensive evaluation data to support aggregate program and student outcomes.

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

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

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

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

Program Response:

Within HUSoN, faculty outcomes and quality of performance based on the HU use of Boyer's model of scholarship are measured and assessed in a variety of ways. In accordance with the University faculty handbook, faculty conduct a self-evaluation that is shared with the Chair, which informs the annual performance evaluation. Both evaluations connect directly to student feedback and peer feedback. In keeping with the use of the Boyer model of scholarship, faculty are assessed and reviewed based on the scholarship model; a summary of faculty contributions to scholarship and can be seen the HUSoN Faculty Summary of Boyer Model of Scholarship Performance (Appendix C).

Undergraduate and Graduate students complete course and faculty evaluations at the end of each semester which are collected by the Office of Institutional Research. The aggregate is shared with individual faculty as well as the Chair for performance evaluation. Spring 2017 course and faculty evaluation data is available for review in the Resource Room in Standard IV document file.

There are clear expectations set forth in the HU faculty handbook that faculty are to incorporate student and course feedback into self-evaluation and performance evaluation processes. Ranked faculty utilize this data as part of the multiple year contract process. Samples of faculty performance evaluations and dossier information are available on for review upon request.

As part of the aggregate faculty review, the Chair submits identified inconsistencies or gaps noted through faculty performance reviews to HUSoN Faculty and Student Development Committee for review and action as determined to support faculty in teaching/learning methodology. HUSoN Faculty and Student Development Committee is charged with identification of faculty teaching educational needs which is considered an ongoing processes.

- The general outcomes from the Table 1C.1 needs to be mobilized – how many faculty do we have at each level and what do those expectations look like within HUSoN, and did the individual faculty achieve that measure.

1. Teaching excellence and demonstrated dedication to improving pedagogy;
 - Faculty self-evaluation and annual performance evaluations
 - Annual faculty driven Professional Development Plans
 - Scholarship of Teaching is the expectation of “Excellence” and is evaluated through student and peer evaluation processes.
2. Preparation and implementation of faculty development plans in consultation with the Chair of the school;
 - University Lunch & Learn Sessions
 - Faculty Learning Communities
 - Professional Development Workshops
 - Educational funding for degree attainment
3. Advising students in accordance with Section 2.5.4;
 - A model of level advisement initiated fall 2017
 - Assignments made by Chair in collaboration with faculty
 - Professional development workshop on student advising offered by the University
 - HUSoN advising mentor for new faculty program
4. Participation in discipline or field of study;
 - Faculty are provided one day of practice release per week to maintain clinical/practice experience
 - Faculty are encouraged to engage in professional organizations
 - 70% of faculty are STTI members
 - 66% of professional staff are STTI members
5. Participation fully in life and governance of the University in accordance with Section 2.5.3; and
 - Faculty assignments to University Committees through nomination from the Dean, COHE
 - Faculty Forum
 - One faculty is active in the HU Wellness Center
6. Participation in school and HUSoN committees
 - Faculty Organization
 - Assignment to HUSoN committees

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

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

Program Response:

HUSoN does provide a mechanism for formal complaints for faculty, staff and students. This is a consistent system shared by all Husson University programs. Formal complaints may be anything that would include difficulties resulting from the University's policies or the actions of its employees, agents, or volunteers. For complaints related to Title IX Sexual Misconduct options for Assistance, the process is noted on the Husson website at [Title IX](#). Complaints relate to ADA/504 Grievance Procedure as outlined on P. 17-18 of the Student Handbook. These issues may extend beyond HUSoN, and are handled by other University officials as appropriate.

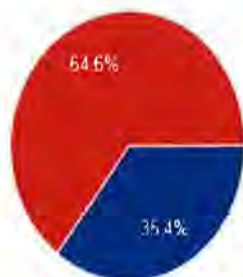
Additional reporting and complaint systems are also available. Maintenance and facility complaints are reported to the Facilities department through a [work order system](#) available online. Information technology concerns are reported through the online helpdesk or telephone system.

The formal student complaint procedure is found on the Husson University website and is outlined in the HUSoN student handbook. The process is outlined as follows:

1. The complainant should seek an informal solution which involves a direct conversation with the person who has caused the difficulty; the conversation is conducted in a fashion that is calm and professional.
 - *If the complaint is not resolved, or a direct conversation is not appropriate:*
2. The complainant should fill out a complaint form and deliver it to the Provost's Office.
3. The Provost will direct the complaint to the appropriate person for resolution (e.g., Dean, Associate Dean, or Department Chair). The student will receive a response within 30 days.
4. If the student is unsatisfied, or if the matter is not resolved, they may again notify the Provost office for further action.
5. Students may also file formal complaint with The New England Association of Schools and Colleges (NEASC), Husson University's accreditor. Directions for this are also on the Husson Website page for student complaints.

In monitoring student knowledge of the official complaint protocol, HUSoN discovered that 65% of the nursing student body self-reported not knowing the formal process for lodging complaints.

As indicated on the Husson web site, I know the official procedure for filing a student complaint.



Yes **23** 35.4%

No **42** 64.6%

This alerted the HUSoN faculty to the need to provide deliberate attention to this policy during syllabus reviews, and as a focused point of emphasis during advisor meetings.

All formal complaints are kept in the student files of the complainant and a record of any resulting action.

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

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

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

Program Response:

HUSoN uses data to drive program outcome improvement and effectiveness. Most recently, outcome data was used to make improvements in BSN curriculum to improve NCLEX-RN® pass rates. Using historic data available from the Maine State Board of Nursing on first time pass rate in the undergraduate nursing program, passage rates had been between 76% and 79% for the time period between October 1st and September 30th in the period of 2013-2015 public report. HUSoN Assessment and Evaluation Committee completed a review of a number of data sets and concluded that the inconsistency in pass rates was a significant finding and recommended immediate action.

In analyzing the NCLEX-RN® categories and subcategories areas of underperformance for graduate nurses who were unsuccessful on first time attempt, combined with review of course assessment data in the aggregate, the NCLEX subcategory Basic Care and Comfort varied greatly from year to year. In contrast subcategories Physiological Adaptation, Reduction of Risk Potential, and Management of Care exhibited consistent trends of underperformance for those who did not pass the NCLEX-RN® on first attempt.

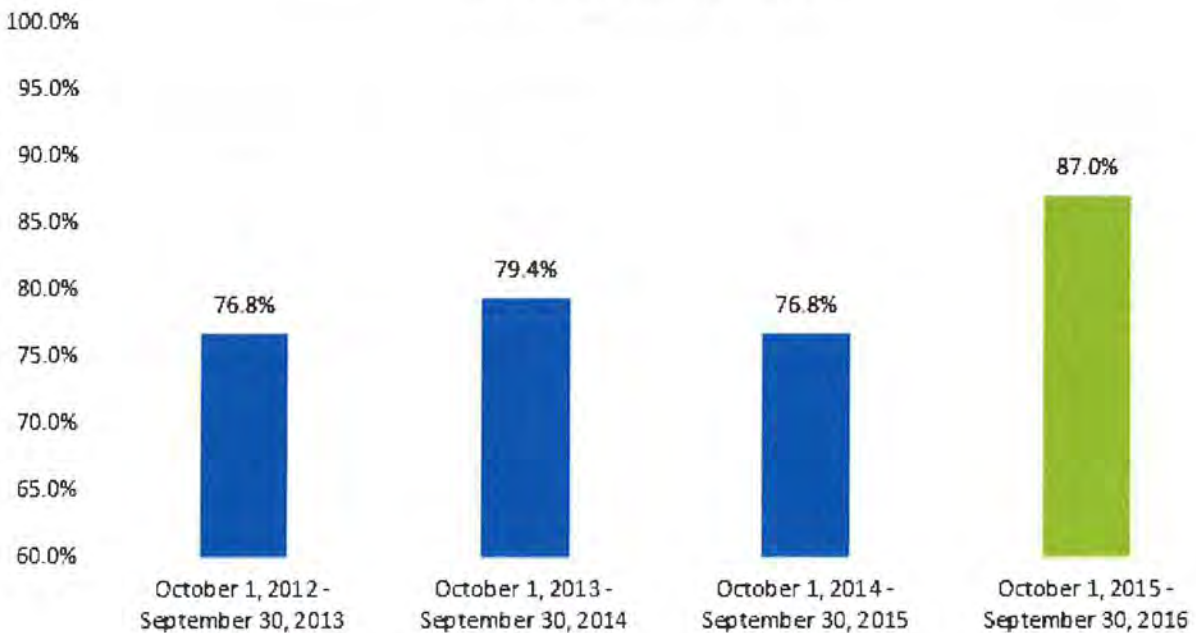
An example of how faculty utilize the data to drive improvement in individual course outcomes, in NU 424, the third medical surgical course faculty incorporated low stakes learning activities such as in class case studies, concept mapping, and NCLEX style questions that draw on the four basic categories and six subcategories of the NCLEX-RN® blueprint. These formative evaluations help faculty recognize where students are struggling and address problems immediately. The evaluations also facilitate student identification of strengths and weaknesses and target areas that need work before attempting higher stakes assessments and HESI examinations. In NU 425, Senior Capstone, faculty now use formative and summative evaluation methods to identify areas of weakness but also to “close the loop” for students. The course has been restructured to provide students with opportunities for curriculum review, test, remediate, and test in all categories and subcategories of the NCLEX-RN® blueprint. In addition to individual course improvements, the faculty approved the redesign in the curriculum map to better address areas of gap, added the NCLEX-RN® review component referenced above in NU 425, and added the HESI exit examination/NCLEX-RN® predictor for all senior students. Table 4H.1 represents data on NCLEX-RN® category and subcategory performance from 2013 through 2016.

Table 4H.1

	2013 Rank need	2014 Rank need	2015 Rank Need	2016 Rank Need	Trendline of need	Average rank of need	Rank of 4 year average	NCLEX Value
Management of Care	2	2	3	6		3.25	3	17-23%
Safety and Infection control	6	2	2	7		4.25	4	9-15%
Health Promotion	4	5	8	5		5.5	7	6-12%
Psychosocial Integrity	5	8	3	8		6	8	6-12%
Basic Care and Comfort	8	1	7	2		4.5	5	6-12%
Pharmacological and parenteral Therapies	7	7	3	2		4.75	6	12-18%
Reduction of risk potential	1	2	3	2		2	1	9-15%
Physiological Adaptation	2	6	1	1		2.5	2	11-17%

As a result of this coordinated action, the NCLEX-RN® pass rate improved significantly in 2015 and 2016 cohorts and is anticipated to be stable in the 2017 cohort.

NCLEX passage: First time Test takers Husson University SON



Given there were multiple areas of need, we redesigned the curricular map. The NCLEX Curricular Map, and the AACN 2013 Standards Curricular Map is available in the Resource Room in the Standard IV document file. This process allowed for full faculty collaboration and transparency in the instructed topics, sequencing of intended learning outcomes, and expectations of sequential courses.

An unintended outcome included the restructuring of NU 322 and NU 323, two of the three medical surgical courses that are offered in the 3rd year of the program. Both courses are offered fall and spring semesters. The fall courses share the same first two learning modules, Fluid and Electrolyte Management/Infusion Therapies and Oxygen Therapy Management/Acid-Base Balance. Content/concepts taught over the remainder of the semester is course specific. Spring semester follows a similar structure for shared content/concepts the first two modules, followed by the course specific content/concepts for the remainder of the semester. The sequential process for these two medical surgical courses support student success and continuation in the program. An example, the student who is unsuccessful in NU 323 in fall semester, can continue with NU 322 in spring semester, and retake NU 323 in fall semester of the next academic year. The student is progressed out of sequence, with a projected completion time one semester beyond the 100% completion time of rather than a full academic year.

After re-mapping the entire curriculum to ensure that the content was in alignment with the NCLEX areas and The Essentials of Baccalaureate Education for Professional Nursing, HUSoN began looking for ways to ensure that all students who had already progressed in the curriculum would not experience any gaps in their foundational education. As such a new NCLEX review component of the Senior Capstone was deployed. This review was to utilize the HESI Exit 1 as a baseline and to provide remediation plans. During the review portion of the class, students would utilize the Elsevier NCLEX preparation online course which addresses all of the NCLEX areas as separate modules with objective style assessments associated with each module. Students were allowed to retake modules as necessary, but a final score of 90% correct was needed to pass each module. Faculty utilized the assessment data from the Elsevier product to identify areas of need within the cohort and provide overall instruction, and also address areas of need at the individual level. Students took the HESI Exit 2 at the end of the course to demonstrate their attainment of the necessary knowledge for the NCLEX assessment.

Unfortunately, there were still several students for whom the HESI Exit score indicated that they may struggle in passing the NCLEX on the first attempt (5 students had HESI E2 scale scores below 700 indicating they need further preparation, and an additional 13 students were below the scaled score of 800 indicating a below acceptable performance.) Based on this data, HUSoN invited these 18 students to a one week intensive review to be held after graduation. This intensive program would be tailored to their specific needs. Student interest in this intervention quickly grew, and HUSoN opened the program to all graduating students at no cost. The intensive review sessions and experiential demonstrations were all recorded and shared online for asynchronous participation, and all sessions were connected to objective style assessment items with associated remediation. 24 students participated in this data driven review post-graduation, and 23 of them (96%) passed the NCLEX on the first attempt. This intensive focused remediation was again offered in 2017, and to date 42 of 47 have been successful in first time passage; three have been successful on the second attempt. The fourth student was unsuccessful on the second attempt and the fifth student has not registered to retest at this time.

Based on this result, the modules from the intensive review has been incorporated within the NCLEX-RN® review module of NU 425 – Senior Capstone course. We will continue to monitor and assess the success of this teaching/learning method.

Coursework in the RN to BSN track is designed for students to achieve the BSN Program outcomes. Students are working RNs with experiential knowledge of nursing who are engaged in teaching/learning activities that promote critical thinking, clinical decision making, interprofessional collaboration, and engagement in policy and leadership. Assignments utilize rubrics to measure the outcomes of course objectives. Faculty evaluate student outcomes in the online learning environment through synchronous and asynchronous sessions.

RN to BSN students complete a Capstone Project in NU 495 as part of the final phase of the professional component of the curriculum. The Capstone Project is designed as a measure of student and faculty evaluation of program outcomes. Students utilize the basics of baccalaureate general education, sciences, and nursing to prepare the project. Examples of student projects are available in the Resource Room in the Standard IV document file.

Graduate courses are currently being mapped to the AACN Essentials (2011), and professional standards and guidelines for APRN practice. ExamSoft will be utilized in tracking outcomes through objective and performance based assessments from each course. Revision of course objectives to align with MSN Program and Track outcomes will provide additional measures to evaluate program and student outcomes. An example of how faculty are actively engaged in program improvement, and student input is sought can be seen in the following example from NU 704 – Advanced Physical/Health Assessment, faculty has broken course outcomes into module objectives and linked each assignment to both. Students have expressed better understanding of ‘why’ an assignment is made and how it will facilitate attainment of skill acquisition and clinical competency. Course alignment and student interaction/feedback is provided below, along with a mapping of module to assignment alignment.

<p>Upon completion of these modules, the MSN student will be able to obtain a pertinent, relevant, problem-specific history and conduct a physical exam utilizing advanced assessment techniques.</p>	<p>You will be able to a) interview Tina Jones to gather pertinent, relevant, subjective data using therapeutic communication (open-ended questions, empathy, patient education) to guide the physical assessment.</p>	<p>Assessment: Shadow Health system-specific and comprehensive history</p>
<p>Upon completion of these modules, the MSN student will be able to conduct a focused and comprehensive physical examination efficiently and systematically for the purpose of health promotion or diagnosis of illness utilizing advanced health assessment techniques.</p>	<p>You will be able to demonstrate a system-specific physical examination of Tina Jones utilizing advanced assessment techniques.</p>	<p>Assessment: Shadow Health system-specific and comprehensive physical assessment.</p>

For modules 2-12, these are two of the course outcomes, followed by module objectives and how the students will achieve the objectives by assignments. In informal student interviews, 4/6 students have expressed appreciation for the detailed objectives linked to specific assignments. One student commented, “I thought the Shadow Health comprehensive health history was busy work, but now I see how it is the measure by which you will evaluate me for that criterion.”

Module	Course Outcome(s)	Module Outcome(s)	Assessment(s)
Module #1: The Health History	Upon completion of this module, the MSN student will be able to obtain a pertinent, relevant, and comprehensive health history.	You will be able to a) utilize interviewing skills that are appropriate to the developmental, educational, and cultural characteristics of the client to obtain subjective data for a comprehensive health history. b) create a 3-generational genetic/genomic assessment and interpret the results to identify risk factors and manage a client's overall health. c) analyze your understanding of foundational genetic-genomic concepts important to nursing practice.	Assessment: Shadow Health comprehensive health history Assessment: Genetic/genomic History using a pedigree Assessment: Genetic/genomic Survey
Module #2-8	Upon completion of these modules, the MSN student will be able to obtain a pertinent, relevant, problem-specific history and conduct a physical exam utilizing advanced assessment techniques.	You will be able to a) interview Tina Jones to gather pertinent, relevant, subjective data using therapeutic communication (open-ended questions, empathy, patient education) to guide the physical assessment. b) demonstrate a system-specific physical examination of Tina Jones utilizing advanced assessment techniques.	Assessment: Shadow Health System-specific history Assessment: Shadow Health System-specific physical assessment.
	Upon completion of these modules, the MSN student will be able to analyze the findings from the health history, physical examination, and diagnostic procedures to differentiate normal from abnormal findings.	c) analyze subjective and objective findings to include diagnostic procedures to determine a problem list and treatment plan.	Assessment: Shadow Health SOAP note documentation
	Upon completion of these modules, the MSN student will be able to present the findings of the history and physical examination in a clear, concise, and organized manner using the problem oriented (SOAP) recording method.		Assessment: Shadow Health SOAP note documentation
Module #9	Upon completion of this module, the MSN student will be able to synthesize the findings from a focused health history, physical examination, diagnostic procedures to identify differential diagnoses and formulate a problem list.	You will be able to a) synthesize the subjective and objective findings from a focused health history and physical examination to include diagnostic test(s). b) propose additional subjective and/or objective data need to make a diagnosis c) discriminate among potential differential diagnoses d) justify your choice of medical diagnosis	Assignment(s): Shadow Health Focused Exam: Abdomen Assignment(s): discussion board case studies Assignment(s): Shadow Health Focused Exam: Abdomen; discussion board case studies Assignment(s): discussion board case studies

In spring 2017, an End of Semester Course Evaluation tool was presented to faculty as a means to assess and evaluate course outcomes and student performance. Recommendations for improvements is a critical aspect of the evaluation tool that can be utilized in preparing future courses. Examples data used to improve program and student outcomes are available as evidence in the Assessment and Evaluation Committee minutes and Curriculum Committee minutes. Documents are available for review in the Resource Room in the Standard IV document file.

STANDARD IV SUMMARY

STRENGTHS

University support for comprehensive system of assessment
 Access to assessment technology
 Growing Institutional culture of the assessment
 Established BSN and MSN program

OPPORTUNITIES FOR IMPROVEMENT

Faculty review and update the SPE for congruency with Essentials 2011; 2013
 Continued faculty development on assessment practices
 Support faculty utilization of assessment data
 Faculty independence in use of assessment data to drive faculty development
 Deploying comprehensive assessment in online course/track options

ACTION PLAN FOR IMPROVEMENT

OPPORTUNITIES FOR IMPROVEMENT	GOAL	ACTION PLAN
Faculty review and update the SPE for congruency with Essentials 2011; 2013	Faculty developed SPE that is current and reflects congruency with Essentials 2011; 2013	Assessment & Evaluation Committee to review the current SPE and develop an updated plan that is reflective of the current Essentials 2011; 2013 and present to the faculty as a whole
Faculty development on assessment practices	Faculty to deliver assessment with acceptable levels of reliability and validity	Provide ongoing faculty development on best practice in assessment and use of assessment technologies
Support faculty utilization of assessment data	Faculty will utilize assessment data in course reviews to guide course and curricula changes	Establish the expectation of categorical analysis of course outcomes at the end of each semester
Faculty independence in use of assessment data to drive faculty development	Faculty will be able to create, deliver, and review assessments without outside support	Provide ongoing faculty development on best practice in assessment and use of assessment technologies
Deploying comprehensive assessment in online course/track options	All online offerings will provide meaningful track assessment data for programmatic review	Implement ExamSoft in all online offerings During course development, work with faculty to develop valid and reliable objective and performance assessment for the online environment

Appendix A

Strategic Plans and Initiatives

Husson University Mission and Vision

Husson University Strategic Plan

Husson University Initiatives

COHE Mission and Vision

COHE Strategic Plan

HUSoN Mission and Vision

HUSon Strategic Plan



Vision

Husson is a University of choice for premier professional programs where students succeed, experiential learning is championed and global engagement is emphasized.

Mission Statement

Husson University inspires and prepares students for professional careers in current and emerging fields within the context of an education informed by the sciences and humanities.

We achieve this career preparation by supporting and emphasizing

- Outstanding teaching.
- Scholarly contributions to one's discipline or field of expertise.
- An undergraduate and graduate curriculum that is challenging, relevant, and promotes critical thinking skills, self-confidence and strong communication skills.
- Commitment to ethical behavior and social responsibility through involvement in the world by faculty and students, administrators and staff, board members, and involved citizenship as a university.
- Lifelong learning to prepare students professionally and personally for the challenges of a constantly changing world.
- A diverse cultural and global perspective achieved through student development and experiential learning opportunities that reinforces our commitment to a strong academic community.



Transforming Student Lives – Advancing Student Success



Shaping Our Future.



BOARD OF TRUSTEES 2011

Thomas V. Barrows '66 FL.
Earl C. Black
John P. Boucher '66 N.H.
Susan A. Carlisle
Daniel B. Coffey '72
Brent A. Cross, '94, '01
Joseph H. Cyr
Edward O. Darling '64 FL.
Kris A. Doody '97
Arthur D. Fuller '66 SC.
Ross Y. Furman '72
James H. Goff
Dr. Stephanie S. Gross, Faculty Trustee
Hon. Philip E. Harriman '77
Kenneth A. Hews
Kelli L. Theriault Hutchins
Carol C. Kanar, Vice Chair FL.
Hilda Hutchins McCollum
Robert D. O'Donnell '72
Dr. Ruth B. Purtilo MA.
George A. Pusey, Student Trustee
John M. Rohman '77
Robert J. Ronan '79
Hon. W. Tom Sawyer, Jr. GA.
Dr. Irving Schneider '68 R.I.
Thomas J. Tierney '71 VT.
Richard C. Trott, Jr. '65, Chair
Randal L. Wadleigh, '87
George E. Wildey
Fred M. Wlodarski
Ex-officio, Dr. Robert A. Clark



Living Learning Center - 2012

HISTORY: Like many of its alumni, Husson University has built success from humble beginnings. The University traces its roots back to a school founded in 1898 to prepare students for careers in commerce, teaching and telegraphy. Husson came of age in 1953, when the State of Maine enacted legislation authorizing Husson to grant Bachelor of Science degrees. In the sixties, to respond to growing needs for space, Husson purchased a dairy farm on what was then the outskirts of Bangor and built a beautiful campus. In 1981, the College responded to growing needs for professional education beyond its traditional business offerings and established the Husson College/ Eastern Maine Medical Center Baccalaureate Nursing Program. Today, Husson offers numerous undergraduate degrees and many innovative advanced degree programs, as well as a diverse selection of core science and humanities courses. On October 11, 2008, Husson became a University that seeks to deliver an exceptional learning experience, while maintaining its small college feel.

VISION: Husson University is a "University of choice" for premier professional programs, where students succeed, experiential learning experiences are championed and global understanding is emphasized.



Commerce Hall, 157 Park Street, 1940-1968



New campus, 1968

MISSION STATEMENT FOR HUSSON UNIVERSITY: Husson University inspires and prepares students for professional careers in current and emerging fields within the context of an education informed by the sciences and humanities.

We achieve this career preparation by supporting and emphasizing

- Outstanding teaching.
- Scholarly contributions to one's discipline or field of expertise.
- An undergraduate and graduate curriculum that is challenging, relevant, and promotes critical thinking skills, self-confidence and strong communication skills.
- Commitment to ethical behavior and social responsibility through involvement in the world by faculty and students, administrators and staff, board members, and involved citizenship as a university.
- Lifelong learning to prepare students professionally and personally for the challenges of a constantly changing world.
- A diverse cultural and global perspective achieved through student development and experiential learning opportunities that reinforces our commitment to a strong academic community.
- Careful management and stewardship of University resources.

In pursuing the mission to achieve its vision, Husson commits itself to providing a selected array of professional programs of exceptional quality in each of its academic areas.

Husson has always been a Maine institution, and today it is the largest private educator of Maine students. Eighty-three percent of its traditional undergraduates come from Maine, the majority from the northern and eastern areas of the state. Like New Hampshire and Massachusetts, Maine will graduate fewer and fewer high school students over the next decade, which strongly suggests that Husson's strategic planning now should include developing programs to attract students from a much wider area than before.

Private higher education is an expensive service, but it is a service that many prospective students and families value, one for which they are willing to make sacrifices. However, private colleges must make every effort to keep additional financial burden to a minimum. In the past two recessions, we had a period of jobless recovery where GDP grew, but there was no observable impact on employment for a year or more.

In such an environment, and in order to achieve its vision, Husson must seek moderate growth in its enrollments. Husson has seen significant growth in its health profession enrollments and in the supporting science areas. In the period ahead, this growth needs to be sustained and strengthened through new and innovative clinical placement opportunities. In addition, to support economic development, significant educational attention needs to be placed on preparing business professionals at both the undergraduate and graduate levels.

Enrollment growth is not an end in itself, but a combination of incremental improvements on and diversification in the use of academic facilities, as well as improvements to academic and collegiate life and the campus environment.

Campus life has been enriched with increased programming space for both academic and co-curricular activities that have provided students with increased and diverse choices in student activities. However, the increased enrollments have challenged delivery of services, especially as students enter college with ever higher expectations – both in terms of academics, and also in terms of student living and life opportunities.

THE CHALLENGES: The University's positive enrollment momentum needs to continue as program efficiencies are implemented and additional support resources are prioritized. This plan sets out to make growth a positive experience for the University and its stakeholders. Meeting these challenges, while maintaining tuition and fee increases at affordable levels, is a key priority.

Community engagement in thoughtful planning allows us to stretch our mission more purposefully toward the future while never losing sight of Husson's rich heritage as an institution steeped in educational opportunities accessible to all.

As we work through the initiatives for "Shaping Our Future," please keep in mind that this strategic framework is dynamic, continuously evolving and responsive to change. Because of these particular characteristics, the 2011 Plan does not place an artificial time horizon in play; however, it is developed with the understanding that to be effective in charting Husson's directions, the strategic initiatives must be the guiding focus in all actions undertaken by the institution, as well as guideposts for effective future decision making. The plan will also present the framework for periodic assessment of progress and parameters for revision, if appropriate. As well, it will be common practice for the University to present detailed information for strategic actions as each comes into focus throughout the year.

The University's current challenges are in determining directions for new programs, enriching undergraduate and graduate learning opportunities, prioritizing on-campus programs for quality improvement, extending the use of technology, and expanding public service and educational off-site initiatives for Husson's external community. Because of the wise use of resources and committed faculty and staff, Husson is positioned to take maximum advantage of becoming a premier professional institution of choice. Through its strategic planning, the University will implement actions that cause the initiatives in the strategic plan to occur. We believe that "Shaping Our Future" responds to the challenges as well as opportunities for quality growth through the following initiatives:

- I. Delivering Educational Excellence Through Experiential Learning and Global Understanding
- II. Strengthening University Resources
- III. Enriching Community Engagement
- IV. Integrating Student Life

And, that moving these initiatives along will allow Husson University to progress toward the fulfillment of our core priority: Transforming Student Lives – Advancing Student Success.

A brief synopsis for each initiative follows. Important to the initiatives are the supporting implementation plans which describe in some detail those university-wide strategic actions for shaping the University's future.

Key Strategic Initiative

I. Delivering Educational Excellence

Through Experiential Learning and Global Understanding

RATIONALE: Educational excellence at Husson means engaging our students in their education through quality instruction and experiential learning. In placing this as the first initiative, we re-affirm the centrality of educational excellence to our success as a university. Continuing to build upon our rich heritage of preparing students for professional success, Husson University maintains its commitment to offering academic programs that are challenging and distinctive, with the capacity to create and support transformative experiences for all our students. Vital to advancing this commitment is recruiting and supporting faculty who are excellent teachers, scholars, and advisors. Further, Husson's residential life and co-curricular activities should support and enhance our students' educational experiences by providing an integrated learning environment, enriched by diversity in all its forms, that builds connections to a global society.

STRATEGIC ACTIONS: Educational excellence requires that our programs remain relevant and adapt to changes in the professional world. To this end, Husson University will implement innovative programs and undertake a systematic process of assessment and review. Over the next five years Husson will continue to pursue academic excellence by attending to the following:

- ◆ **Offering premier educational programs.** Academic units will continue to develop and adapt educational offerings to ensure they remain current and relevant in preparing professionals for the emerging future.
 - The University will provide a signature core curriculum that supports its professional education mission. The core curriculum will ensure that our students' learning experiences are informed by the sciences and humanities.
 - All educational programs will model and promote ethically responsible leadership. The University will infuse its undergraduate and graduate curriculum with opportunities to develop ethically responsible leadership. All students will be required to complete core curriculum components that address ethics.
 - The University's student services area will work collaboratively with academic units to support student learning in all program offerings. Learning support services will be offered that champion student success.
 - A comprehensive system of critical review and assessment of University programs and actions is essential to continuous improvement. All programs will be subjected to continuous assessment and improvement to ensure they deliver an excellent education.
 - The University's Living Learning Center will open five new experiential learning classrooms in the summer of 2012 to allow instruction through realistic simulations, such as creating a crime scene venue for criminal justice students, or a studio type environment for NESCom classes.
 - Schools and programs will be encouraged to further develop professional internship or clinical opportunities as an integral part of the students' learning experience.
 - The University will encourage and support the use of professional advisory boards to maintain curricular currency.
 - Husson will continue to utilize technological advancements in the delivery of curricular content and experiential learning.
 - All professional programs will be encouraged and supported to develop collaborative interdisciplinary educational opportunities with other programs. Examples may include links between graduate health science degrees and the Master of Business Administration, or links between NESCom and the College of Business.
 - The College of Health and Education will evaluate the implementation of a Doctorate of Nursing Practice degree for fall 2014.

- ◆ **Embracing a culture and infrastructure that supports faculty in research and scholarship.** The University will develop and implement programs to support faculty scholarship and research. This will include attention to the design and development of professional development initiatives that recognize faculty scholarship in its broadest context.

- o The University will continue to support the annual recognition of an outstanding faculty research colleague.
- o A Global Scholars program will be initiated in spring of 2012 to provide a competitive research grant opportunity to a full-time faculty member to engage in research that informs the campus of global issues.
- o Each School and College will provide professional development funding and opportunities to support faculty in their continued professional development.

- ◆ **Providing Extended Learning opportunities.** The University will become a preferred source of extended learning opportunities. These will include expansions of our programs on campus and hybrid delivery.

- o Distance Learning. The University will implement appropriate hybrid delivery technology and methods to support appropriate distance education programming.
 - New curriculum offerings to respond to emerging market needs.
- o Geographic initiatives. Husson University will also continue to meet the unique needs for professional education opportunities available in particular locals, including:
 - Portland area. To recognize the full potential for the market in Maine's fastest growing region, the University needs a strong physical presence in Southern Maine. This involves the expansion of the University's presence in South Portland through the purchase of space and a facility designed to offer the new MBA program and other Business Program initiatives, and enhanced offerings in graduate nursing, counseling and education. The target for new facilities to support an expanded program offering is the summer of 2013.
 - Wells. Extended learning includes the development of a degree completion program at York Community College in Wells, Maine. The inaugural students entered in the fall of 2011. The program will be hosted at the YCCC campus and involves the awarding of a four-year university degree from Husson for successful completion.
 - Presque Isle. The University will continue to support and explore opportunities for additional program offerings in cooperation with the Northern Maine Community College in Presque Isle.
 - The Canadian Maritime Provinces: NEASC has approved Husson's collaboration with the University of Fredericton to offer an online bachelor degree completion program for students of Canadian Public Community Colleges who have earned

a diploma. This program includes both Business Administration and Criminal Justice degrees offered by the University. Full implementation is expected in 2012.

- ◆ **Forging global understanding through a diverse educational community and international learning opportunities.** The University supports a vibrant and diverse campus community and will increase the international opportunities available to our students by:

- o Implementing an ongoing series of educational opportunities in cultural understanding and appreciation for all employees.
- o Developing a recruitment and retention program for students, faculty and staff of diverse cultures, which will result in an increased presence of diversity on Husson's campus.
- o Creating an International Office that will be responsible for:
 - Recruiting and retaining international students.
 - Collaborating with Eastern Maine Community College to offer English-as-a-Second-Language Program.
 - Developing study abroad and student exchange opportunities for Husson students.
 - Furthering development of foreign language education on the campus.
 - Coordinating with the Bangor Chinese School to provide students with access to language instruction and programming.
 - Providing a resource to international students studying at local high schools.

- ◆ **Seeking and maintaining appropriate accreditations.** The University and all Schools will strengthen existing programs through professional accreditation, while selectively exploring and implementing new opportunities.

- o The University will implement a three-to-five year strategic integration plan that will transition NESCom (The New England School of Communications) from a separately accredited academic unit to a School under the University's NEASC (New England Association of Schools and Colleges) academic portfolio by 2016.
- o The University will complete its NEASC 10-year accreditation review self study for the 2011-12 academic year.
- o The University will host a NEASC peer review team in the spring of 2013.
- o The School of Pharmacy will finalize its specialized accreditation in 2013.
- o The College of Health and Education will evaluate initial CACREP accreditation of its graduate counseling programs by 2014.
- o School of Business and Management will obtain re-accreditation by the I.A.C.B.E. in 2014 for its Business related programs.

Key Strategic Initiative

II. Strengthening University Resources

RATIONALE: The capacity to “shape our future” is heavily dependent upon the quality of the infrastructure and the ways that the institution maximizes its assets, resources, and personnel. Over the past year, administrative staff began the important process of reviewing, developing, and implementing policies and procedures that support efficient and responsible decision-making. For example, a critically needed Office of Institutional Research was established to gather, analyze and maintain institutional data appropriate for creating plans, assessments, and reports. As well, a strategic approach to fundraising has been developed that cultivates new revenue sources aimed at supporting and enhancing programs and services.

STRATEGIC ACTIONS: By fiscal year 2016, Husson will have attended to the following:

- ◆ **Adopting a comprehensive enrollment management program.** As an institution driven by tuition revenues, the University will execute a plan, Targeting Efforts: Enrollment Services, Recruitment and Retention, to be implemented in 2011-12. The plan will be guided by a steady enrollment growth target of 3 percent and include both undergraduate and graduate enrollments. The plan will be reviewed and refreshed at least annually to ensure effectiveness.
- ◆ **Creating a systematic Grants Development and Management Office.** As external funding initiatives offer successful revenue generation, the necessity of expanded resources to deal with both pre- and post-award assistance is essential. Indirect costs of successful awards could self sustain the office and free faculty for more cost-effective scholarly endeavors.
- ◆ **Implementing financial systems improvements.** As the first order of business, the Finance Office will strengthen the procurement process and streamline reporting (FRX) and budgeting processes for more timely release of information and improved management of results; assess and implement improvements to the endowment accounting systems; and, integrate NESCom financial systems.
- ◆ **Implementing a consolidated student financial services operation.** The University will seek to develop additional resources for support of financial aid and its allocation as its role in supporting an increasing number of undergraduate, graduate and professional students is increased. This will include student employment opportunities. In addition, the University will continue to provide financial information to students.
- ◆ **Engaging in a comprehensive capital campaign.** In the summer of 2011, the Board of Trustees approved the launch of a comprehensive capital campaign, which will be conducted over a seven-year period. Funds raised through the campaign will allow the institution to expand campus facilities, grow the endowment, provide student scholarships, and offer study abroad programming, in accordance with the University's vision for its future.

◆ **Providing appropriate compensation and benefit plans.**

The University seeks to provide its employees with competitive compensation and benefit plans.

- During the 2012-13 year the University will review its compensation models with outside support to provide recommendations for future actions.
- The University will review its provision of benefits annually to ensure it is offering market competitive benefits.

◆ **Implementing faculty and staff recruitment, support, and development programs.** Programs to support the recruitment and professional development of quality employees will be developed and implemented.

- Increase the percentage of faculty with terminal degrees to 80 percent.
- Strategize, formalize and implement an optimal role for adjunct and other part-time faculty.
- Develop and deliver programs that support the continued professional development of our staff members.

◆ **Addressing campus infrastructure.** It is recognized that to deliver quality educational experiences, the University needs to maintain its facilities and other infrastructure.

- The University will develop a campus master plan to guide future campus infrastructure development. The current 2004 plan will be updated during the 2011-12 year. The planning horizon will be at least ten years.
- The University will develop and implement a plan to address and prioritize deferred maintenance issues.
- The Dickerman Dining Commons will be expanded and additional seating provided with a target completion date of summer of 2012.
- A new Living Learning Center facility will provide suite-style housing for 245 residents, and new learning spaces. It will be completed and ready for occupancy for the fall of 2012.
- Plans will be executed to address Title IX gender equity issues with regards to the Newman Gymnasium and its athletic facilities.
- A plan to renovate existing residence hall living areas will be developed and executed.
- Completing a wetland mitigation plan for approval by the Maine DOE and the Army Corps of Engineers.
- Developing an outdoor biological laboratory on the campus for students in the natural sciences.
- In the period past 2016, it is anticipated that the

University will seek to construct/renovate new and additional academic space with particular attention to laboratory spaces. Maintaining the percentage of campus residential students as growth occurs may require the construction or purchase of additional campus residences – 3 to 4 units housing 80 to 120 students each.

- To meet enrollment growth and the need for additional academic space, the University will explore adding new academic space to the campus.

◆ **Providing a safe and secure campus community for learning.** The University will develop further plans to provide for the safety of all campus community members. This will include:

- Continuing to provide a campus security force that provides 24/7 coverage for the campus.
- Coordinating with appropriate community public safety agencies to ensure adequate support coverage for the campus.
- Installing monitored video surveillance in selected public spaces.
- Increasing exterior campus lighting.
- Providing for card control access to residence halls.
- Delivering educational programs for community members to support self-protection and awareness.

◆ **Advancing the strategic use of technology.** The University will support a technology-rich environment for learning.

- Technology will be a priority support area for ensuring capacity, currency and relevance.
- The University will support the unique technology demands of NESCom to ensure that its programs maintain current and relevant technology.
- Research, acquire and implement the most appropriate University-wide email and communications system(s). This will include the completion of phone system upgrades.
- A robust program for data security will be executed.
- The University will implement appropriate hybrid delivery technology and methods to support appropriate distance education programming.

◆ **Creating a sustainable campus.** Plans will be developed and implemented to minimize the campus environmental footprint, while recognizing the balances of resources and time. All new campus buildings will be planned and constructed with LEED certification as a goal.

Key Strategic Initiative

III. Enriching Community Engagement

RATIONALE: Husson's role in the community has begun to transform through various community initiatives and a concerted effort to refine the University's image. No longer viewed as a small college in Bangor, Husson is now considered a destination in all of the communities the institution serves, including southern and northern Maine regions, thus instilling a growing sense of awareness of the positive influence Husson has in these communities.



STRATEGIC ACTIONS: By fiscal year 2016, Husson will have attended to the following:

- ◆ ***Integrating a multimedia communications strategy.*** As the landscape of modern communications evolves, the University will develop a comprehensive multimedia communications strategy that fully integrates new media, including an updated website that meshes social media and current technology to better reach core audiences.
 - ◆ ***Branding Husson's story.*** The Board of Trustees has directed the University to create a cohesive, comprehensive brand that speaks to the institution's mission, vision, and strategic goals. Through this process, the institution will move forward with a clear, consistent image that spans across all of Husson's programs.
 - ◆ ***Fostering life-long alumni relationships.*** The University will work to strengthen the bond between the University and its alumni constituency, to create programs which match the interests and needs of the alumni, to maintain and build upon the positive relationships with already-engaged alumni, and to increase the participation, involvement, and communication with younger alumni.
 - ◆ ***Expanding and developing opportunities to serve.*** The University will seek ways to serve the community through the development and expansion of outreach programs. The Richard E. Dyke Center for Family Business will work to provide mentoring and other means of assistance to family businesses in the greater community. Other opportunities include the further development of the Health Institute, Kenduskeag Institute, Swan Center, Richard and Alice Trott Fitness Studio, Gracie Theater, and NESCom programming.
 - ◆ ***Supporting the cultural and educational outreach of the University.*** The Gracie Theater provides an exceptional quality venue for performances and public presentations that supports the cultural arts, and educational engagement of the University with its community. The University will work with community organizations to continue to develop and deliver a robust program of artistic presentations and other lecture and performance series to enrich our community.
-

Key Strategic Initiative

IV. Integrating Student Life

RATIONALE: Much has been written and developed over several decades that recognizes the importance and benefits of creating seamless linkages between in-class and out-of-class undergraduate experiences. Nowhere is this truer than on residential campuses. Husson's capital priority for the new Living Learning Center is a prime ingredient for creating a robust, holistic relationship between these two worlds, to engage students with faculty in ways that significantly enhance student learning.

Further, Husson's core priority of "Transforming Student Lives – Advancing Student Success" allows the institution to engage students not only with faculty but also to create opportunities for an interactive environment with other students and participation in community service activities. Students will have the opportunity to work with members of the Husson community and beyond, providing hands-on learning opportunities to enhance their skills, become exposed to the diversity that exists in all communities, and gain an understanding of the intricacies of the ever-changing, more globally infused landscape. The University will continue its commitment to link resources across boundaries to create these transformative experiences so important to diverse collegiate experiences.

STRATEGIC ACTIONS: By fiscal year 2016, Husson will have attended to the following:

- ◆ **Fostering a culture of civility, respect, and support for all.** Husson's history supports the development of character and humility in its graduates. The University will develop and implement programs that include collaboration between academic and student services areas that foster civility, respect and support for all cultures.
- ◆ **Delivering excellence in student development programming.** The institution will focus on the student as a whole by supplementing each student's personal and professional development through services and programming that provide a wide array of experiences and growth opportunities. Areas of focus include Recreational, Social and Cultural Activities; Student Government; Clubs and Organizations; Wellness Activities; Community Services; and Advising and Counseling Services.
- ◆ **Executing a model Division III athletics program.** Husson's athletic program is grounded in the student athlete focused model of Division III. Its Mission Statement follows.
 - The primary purpose of NCAA Division III Athletics at Husson University is to provide broad-based athletic opportunities with equal emphasis given to all intercollegiate sports. Conducted as part of the student-athlete's educational experience, athletics encourage academic and athletic performance, gender equity, appreciation for diversity and social responsibility. Sportsmanship and building respect for others in athletics can lead to better human relations, global awareness and leadership skills.
 - The Athletic Programs will seek to ensure that Title IX gender equality is supported in its development of new programs.
 - The Athletic Department will add indoor and outdoor women's track during the 2011-12 and 2012-13 seasons.
 - Intramural opportunities will be afforded to all students.
 - To provide support for growing athletic programs and the integration of student life needs the campus will
 - Develop an outdoor recreation area to support student life.

- Construct a multi-use field house to provide facilities for student recreational use.
- Develop an outdoor walking/running trail on the campus.

- ◆ **Supporting a strong Career Services Center.** The University will support students' professional development throughout their time at Husson.
 - A centralized Career Services Center will support students in all academic areas at both undergraduate and graduate levels.
 - Academic units are also important links in the career development of students. The University will support academic units in their roles in providing career services.
 - The Career Services Center will support outreach initiatives that link students with prospective employers through career fairs and other means, both on and off campus.
 - The Career Services Center will be available to support Husson alumni following graduation.
- ◆ **Offering key academic services.** The modern university has a role and responsibility in meeting the needs of its students. To fulfill this role, the University will support:
 - Student Tutoring and Mentoring programs. These programs will actively assist students in their development.
- ◆ **Providing Health and Wellness Services.** To support and maintain student health and wellness, the University will:
 - Require all students to have health insurance coverage. For those students who are not covered at home or at work, the University will provide access to a cost effective student health insurance policy.
 - Provide and staff a health service support office for routine health issues.
 - Support counseling services and referrals to meet student needs.
 - Deliver a "Circle of Wellness" program and services.
- ◆ **Developing a plan of engagement across Services, Academics, and Residential and Commuter Life.** The University will develop a plan which integrates all aspects of student services and activities within the academics culture focusing on strengthening relationships among students, faculty and staff.



While a strategic plan provides for priorities and guidance to the University as it moves forward, it cannot capture all situational conditions and must be continually updated and adjusted to meet the University's core mission of transforming student lives. The plan's strategic initiatives will serve as a guide in prioritizing the deployment of the University's resources.

Adherence to the guiding principles of the University's mission will ensure that Husson University delivers outstanding educational preparation for the professionals of the 21st century and beyond. This is the enduring legacy of its past and is critical to its role in shaping the future.

Submitted by
President Robert A. Clark
to the
Husson University Board of Trustees
October 2011



HUSSON UNIVERSITY & Bangor
 present

POPS
 with **DAVE GREEN**

A FREE COMMUNITY CONCERT

BANGOR SYMPHONY ORCHESTRA
featuring

SEPTEMBER 11, 2011
2 PM at WINKIN STADIUM

For more information, please visit us at www.husson.edu/popsconcertseries

COLTRANK
 Musical Equipment



College of Health and Education Mission

The Husson University College of Health and Education inspires and prepares students for contemporary, evidence-based, and ethical practice in health, counseling, and education professions.

We foster student success by promoting:

- Professional identity
- Self-directed learning
- Critical reflection and scholarship
- Practice focused on the individuals, families, groups and populations we serve
- Integration of state-of-the-art technology
- Cultural competence, social justice, and advocacy for our clients and our professions.

COHE Vision Statement

The College of Health and Education aspires to shape our students into compassionate and effective practitioners, leaders, and scholars who value inter-professional collaboration, lifelong learning, and global engagement.

COHE Strategic Goals 2016-2019	2016-17 Initiatives These need to be realistic to accomplish in an AY and they need to be measurable.
Define the Model of Scholarship used in the COHE to inform the work of the faculty.	Delineate how and where scholarship is realized in the COHE and how it informs the work of the faculty.
Create a niche that focuses and further defines the work of the college in order to inform scholarship, teaching, and experiential activities.	To become informed (educated) regarding the value of defining a college-wide niche. Develop a method for determining what the college niche might be (e.g. forming a representative taskforce)
Expand experiential opportunities to include alternative experiences (such as tele health and online student teaching) for the purpose of meeting clients' needs and minimizing barriers to services. (increasing access)	Plan and host an event that highlights current trends and technology from experts in the field, and if possible, consistent with our niche (open to the community)
Increase meaningful campus and community collaborations that <ul style="list-style-type: none"> · Address academic programmatic needs · Address community healthcare and educational needs <ul style="list-style-type: none"> ● Bring the community on campus ● Improve, increase and consolidate the on-campus hands-on components of the COHE and related professional programs (e.g. Pharmacy) 	Explore the potential to form a committee comprised of community and college stakeholders for the purpose of enhancing community health and education.

School of Nursing
Strategic Plan 2016-2019

Vision

The School of Nursing will be an innovative leader in educating nurses who are caring, competent and committed to individual and global health.

Mission

The School of Nursing provides leadership in nursing and healthcare through thoughtful innovation in healing, teaching and discovery.

We achieve this career preparation by supporting and emphasizing:

- Clinical excellence
- Critical thinking
- Student-centered learning
- Experiential learning
- Holistic and compassionate care
- Self-reflection
- Leadership
- Interprofessional collaboration
- Transformative curricula

Strategic Goals 2016-2019

1. Increase the number of faculty prepared at the doctoral level to at least 50%.
 - a. Institutional support of release time and financial assistance to pursue graduate/terminal degrees.
 - b. Financial incentives to recruit and retain faculty prepared at the doctoral level.
2. Define the School of Nursing's Model of Scholarship, congruent with the COHE scholarship model, to inform the work of the faculty.
 - a. Faculty development funds, release time, and mentoring sufficient to support scholarship and publication.
3. Utilize institutional and program data to inform curriculum revisions, determine admission and progression benchmarks, and improve retention rates.
 - a. Design admission criteria based on programmatic data that predicts student success.
 - b. Make informed curricular revisions based on programmatic and institutional data.
 - c. Strengthen tutoring and remediation methods to improve progression and retention rates.

4. Expand professional staff and infrastructure to support growth in simulation to include other disciplines and the community of interest.
 - a. Recruit and retain simulation certified professional staff to augment and expand simulation curricula across disciplines.
 - b. Create an interdisciplinary simulation lab to provide experiential opportunities for students throughout the University community.

College of Health and Education Mission

The Husson University College of Health and Education inspires and prepares students for contemporary, evidence-based, and ethical practice in health, counseling, and education professions.

We foster student success by promoting:

- Professional identity
- Self-directed learning
- Critical reflection and scholarship
- Practice focused on the individuals, families, groups and populations we serve
- Integration of state-of-the-art technology
- Cultural competence, social justice, and advocacy for our clients and our professions.

COHE Vision Statement

The College of Health and Education aspires to shape our students into compassionate and effective practitioners, leaders, and scholars who value inter-professional collaboration, lifelong learning, and global engagement.

COHE Strategic Goals 2016-2019	2016-17 Initiatives These need to be realistic to accomplish in an AY and they need to be measurable.
Define the Model of Scholarship used in the COHE to inform the work of the faculty.	Delineate how and where scholarship is realized in the COHE and how it informs the work of the faculty.
Create a niche that focuses and further defines the work of the college in order to inform scholarship, teaching, and experiential activities.	To become informed (educated) regarding the value of defining a college-wide niche. Develop a method for determining what the college niche might be (e.g. forming a representative taskforce)
Expand experiential opportunities to include alternative experiences (such as tele health and online student teaching) for the purpose of meeting clients' needs and minimizing barriers to services. (increasing access)	Plan and host an event that highlights current trends and technology from experts in the field, and if possible, consistent with our niche (open to the community)
Increase meaningful campus and community collaborations that <ul style="list-style-type: none"> · Address academic programmatic needs · Address community healthcare and educational needs <ul style="list-style-type: none"> ● Bring the community on campus ● Improve, increase and consolidate the on-campus hands-on components of the COHE and related professional programs (e.g. Pharmacy) 	Explore the potential to form a committee comprised of community and college stakeholders for the purpose of enhancing community health and education.

School of Nursing
Strategic Plan 2016-2019

Vision

The School of Nursing will be an innovative leader in educating nurses who are caring, competent and committed to individual and global health.

Mission

The School of Nursing provides leadership in nursing and healthcare through thoughtful innovation in healing, teaching and discovery.

We achieve this career preparation by supporting and emphasizing:

- Clinical excellence
- Critical thinking
- Student-centered learning
- Experiential learning
- Holistic and compassionate care
- Self-reflection
- Leadership
- Interprofessional collaboration
- Transformative curricula

Strategic Goals 2016-2019

1. Increase the number of faculty prepared at the doctoral level to at least 50%.
 - a. Institutional support of release time and financial assistance to pursue graduate/terminal degrees.
 - b. Financial incentives to recruit and retain faculty prepared at the doctoral level.
2. Define the School of Nursing's Model of Scholarship, congruent with the COHE scholarship model, to inform the work of the faculty.
 - a. Faculty development funds, release time, and mentoring sufficient to support scholarship and publication.
3. Utilize institutional and program data to inform curriculum revisions, determine admission and progression benchmarks, and improve retention rates.
 - a. Design admission criteria based on programmatic data that predicts student success.
 - b. Make informed curricular revisions based on programmatic and institutional data.
 - c. Strengthen tutoring and remediation methods to improve progression and retention rates.

4. Expand professional staff and infrastructure to support growth in simulation to include other disciplines and the community of interest.
 - a. Recruit and retain simulation certified professional staff to augment and expand simulation curricula across disciplines.
 - b. Create an interdisciplinary simulation lab to provide experiential opportunities for students throughout the University community.

Appendix B

2014 NP Core Competencies Content



Nurse Practitioner Core Competencies Content

A delineation of suggested content specific to the NP core competencies

2014

NP Core Competencies Content Work Group

Anne Thomas (Chair), PhD, ANP-BC, GNP, FAANP
M. Katherine Crabtree, DNSc, APN-BC, FAAN
Kathleen Delaney, PhD, PMH-NP, FAAN
Mary Anne Dumas, PhD, RN, FNP-BC, GNP-BC, FAANP, FAAN
Ruth Kleinpell, PhD, RN, FAAN, FCCM
Julie Marfell, DNP, APRN, FNP-BC, FAANP
Donna Nativio, PhD, CRNP, FAAN, FAANP
Kimberly Udalis, PhD, FNP-BC, APNP
Andrea Wolf, DNP, CRNP

Acknowledgments: NONPF also wishes to recognize members of the Curricular Leadership Committee who provided review and comment on the draft document. The comments from the following people shaped the final document: Susan Buchholz, Holly Dileo, Kathy Dontje, Judith Haber, Ann Marie Hart, Kathleen Reeve, Susan Ruppert, Susan Schaffer, and Courtney Young.

Nurse Practitioner Core Competencies with Suggested Curriculum Content 2014

In the development of the nurse practitioner (NP) population-focused competencies, a task force had extensive discussions of competencies vs. content. The task force concluded that it would be beneficial to programs if some content could be included as exemplars of how to support curriculum development for addressing a competency. Within the 2013 edition of the NP population-focused competencies, the final column in each population's competency table presents the respective competency work group's ideas of relevant content.

In 2014, NONPF convened a work group to identify the suggested curriculum content for the NP Core Competencies. This work group consisted of members of the task force that prepared the 2011/12 edition of the NP Core Competencies, as well as additional representation from the NONPF Board and Curricular Leadership Committee. A sub-group of the NONPF Curricular Leadership Committee completed a review of the draft content, and the work group incorporated the review feedback into the final document presented herein. Please see the cover page for a list of work group members and an acknowledgment of the reviewers.

The table that follows includes the NP Core Competencies and a list of suggested curriculum content. NONPF does not intend for the requirement of all of this content, nor is the content list comprehensive for all that a program would cover with population-focused competencies. The content column reflects only suggestions for content relative to the core competencies. This document should be used in combination with the population-focused competencies.

Competency Area	NP Core Competencies	Curriculum Content to Support Competencies <i>Neither required nor comprehensive, this list reflects only suggested content specific to the core competencies</i>
Scientific Foundation Competencies	<ol style="list-style-type: none"> 1. Critically analyzes data and evidence for improving advanced nursing practice. 2. Integrates knowledge from the humanities and sciences within the context of nursing science. 3. Translates research and other forms of knowledge to improve practice processes and outcomes. 4. Develops new practice approaches based on the integration of research, theory, and practice knowledge. 	<p>Comparison of patient data sets with evidence-based standards to improve care</p> <p>Scientific foundations to practice, including, but not limited to, knowledge of advanced pathophysiology, pharmacology, physiology, genetics, and communication skills</p> <p>Science from other disciplines relevant to health care</p>

Competency Area	NP Core Competencies	Curriculum Content to Support Competencies <i>Neither required nor comprehensive, this list reflects only suggested content specific to the core competencies</i>
		<p>Theories/conceptual frameworks/principles for practice:</p> <ul style="list-style-type: none"> • Translational research that guides practice • Critical evaluation of research findings • Mid-range nursing theories and concepts to guide nursing practice • Evidence-based care • Physiologic • Communication • Developmental • Genetic • Behavior change • Population health <p>Critical thinking development:</p> <ul style="list-style-type: none"> • Evidence appraisal • Formulating a practice problem • Use of science-based theories and concepts to assess, enhance, and ameliorate health care delivery phenomena • Use of PICO questions to initiate research and quality improvement projects <p>Qualitative and quantitative research and quality improvement methods</p> <p>Ethical and legal protection of human subjects</p> <p>Inquiry processes and practices related to health literacy, vulnerable populations, and culture</p>
Leadership Competencies	<ol style="list-style-type: none"> 1. Assumes complex and advanced leadership roles to initiate and guide change. 2. Provides leadership to foster collaboration with multiple stakeholders (e.g. patients, community, integrated health care 	<p>Leadership, change, and management theories with application to practice</p> <p>Political processes, political decision making processes, and health care advocacy</p>

Competency Area	NP Core Competencies	Curriculum Content to Support Competencies <i>Neither required nor comprehensive, this list reflects only suggested content specific to the core competencies</i>
	<p>teams, and policy makers) to improve health care.</p> <p>3. Demonstrates leadership that uses critical and reflective thinking.</p> <p>4. Advocates for improved access, quality and cost effective health care.</p> <p>5. Advances practice through the development and implementation of innovations incorporating principles of change.</p> <p>6. Communicates practice knowledge effectively, both orally and in writing.</p> <p>7. Participates in professional organizations and activities that influence advanced practice nursing and/or health outcomes of a population focus.</p>	<p>Problem solving:</p> <ul style="list-style-type: none"> • Influencing and negotiation • Conflict management • Strategic thinking • Managing change <p>Business development:</p> <ul style="list-style-type: none"> • High reliability organization principles • Building and maintaining effective teams • Project management concepts • Principles of effective decision making • Principles of change management • Civility • Principles of innovation <p>Communications:</p> <ul style="list-style-type: none"> • Scholarly writing, manuscript, and abstract preparation • Structuring and presenting persuasive arguments <p>Peer review:</p> <ul style="list-style-type: none"> • Publications • Presentations • Research • Practice. <p>Leadership development:</p> <ul style="list-style-type: none"> • Skills to influence decision-making bodies at the system, state, or national level • Interprofessional leadership • Assuming leadership positions in professional, political, or regulatory organizations • Structure and functions of editorial/board roles

Competency Area	NP Core Competencies	Curriculum Content to Support Competencies <i>Neither required nor comprehensive, this list reflects only suggested content specific to the core competencies</i>
Quality Competencies	<ol style="list-style-type: none"> 1. Uses best available evidence to continuously improve quality of clinical practice. 2. Evaluates the relationships among access, cost, quality, and safety and their influence on health care. 3. Evaluates how organizational structure, care processes, financing, marketing, and policy decisions impact the quality of health care. 4. Applies skills in peer review to promote a culture of excellence. 5. Anticipates variations in practice and is proactive in implementing interventions to ensure quality 	<p>Quality Safety Education in Nursing (QSEN) principles and content</p> <p>Evaluation of outcomes of care such as quality improvement projects with an evaluation component</p> <p>Reflective practice Culture of safety</p> <p>Quality improvement processes and practices</p> <p>Cost benefit analysis</p> <p>Peer review process</p> <p>Collaborative team processes and practices</p> <p>Leadership skills for leading change for quality clinical practice</p>
Practice Inquiry Competencies	<ol style="list-style-type: none"> 1. Provides leadership in the translation of new knowledge into practice. 2. Generates knowledge from clinical practice to improve practice and patient outcomes. 3. Applies clinical investigative skills to improve health outcomes. 4. Leads practice inquiry, individually or in partnership with others. 5. Disseminates evidence from inquiry to diverse audiences using multiple modalities. 6. Analyzes clinical guidelines for individualized application into practice 	<p>Leadership for role in practice improvement</p> <p>Clinical investigation strategies:</p> <ul style="list-style-type: none"> • Identifying clinical practice problems • Appraising evidence for application to practice (e.g., design, methods, tools, analysis) • Literature search methods, including, but not limited to, the PICO Model to define a clinical questions and search for the best clinical evidence <p>Use of electronic databases, such as electronic health records:</p> <ul style="list-style-type: none"> • Assessing clinical practice • Reviewing patient technology • Exploring behaviors and risk factors • Using data to support evidence based changes in clinical management • Template development

Competency Area	NP Core Competencies	Curriculum Content to Support Competencies <i>Neither required nor comprehensive, this list reflects only suggested content specific to the core competencies</i>
		<p>Patient management, including, but not limited to, discerning gaps in care and barriers to care needing resolution during patient encounters</p> <p>Project development and management:</p> <ul style="list-style-type: none"> • Synthesis and translation/extrapolation of research to selected populations • Frameworks to guide projects • Assessment of resources needed and available for projects • Data-based, needs assessment for project • Processes used in conducting projects based on current and best evidence, including evaluation of the application of evidence or inquiry to the population of concern • Evaluation of outcomes (for health status of patient and population as well as system outcomes) • Evaluation of why expected results were or were not attained and lessons learned • Making recommendations for further work • Addressing issues of sustainability of project findings <p>Dissemination of work and findings:</p> <ul style="list-style-type: none"> • Abstract and manuscript writing to support the dissemination of project/research outcomes • Discussion of clinically meaningful results that may or may not be statistically significant • Presentation skill development with modification for different audiences <p>Integration of findings:</p> <ul style="list-style-type: none"> • Results, methods, and tools, as appropriate, into care delivery • Identification of best practices • Opportunities for multidisciplinary team/inter-professional collaboration for patient care

Competency Area	NP Core Competencies	Curriculum Content to Support Competencies <i>Neither required nor comprehensive, this list reflects only suggested content specific to the core competencies</i>
		<ul style="list-style-type: none"> • Development and use of clinical guidelines • Use of clinical judgment to improve practice • Application of evidence to validate or change policy
Technology and Information Literacy Competencies	<ol style="list-style-type: none"> 1. Integrates appropriate technologies for knowledge management to improve health care. 2. Translates technical and scientific health information appropriate for various users' needs. <ol style="list-style-type: none"> 2.a Assesses the patient's and caregiver's educational needs to provide effective, personalized health care. 2.b Coaches the patient and caregiver for positive behavioral change. 3. Demonstrates information literacy skills in complex decision making. 4. Contributes to the design of clinical information systems that promote safe, quality and cost effective care. 5. Uses technology systems that capture data on variables for the evaluation of nursing care. 	<p>Technology available in clinical practice:</p> <ul style="list-style-type: none"> • Electronic resources that identify current evidenced-based care • Electronic resources that enhance patient safety • Technological care delivery systems • Telehealth • Information databases used by health care systems • Electronic communication with other professionals and patients • Encrypted and unencrypted technology • Electronic resources to support differential diagnosis, algorithmic thinking, and medical record review • Templates for documentation in nursing care • Use of electronic datasets to evaluate practice and improve quality, cost, and efficiency of care <p>Technology available to support education:</p> <ul style="list-style-type: none"> • Standardized patient encounters • Electronic/computer based learning modules based on characteristics such as cultural literacy, educational level, and home assessment • Coaching/teaching resources adapted to population, health literacy, and age of patient learning styles, • Age-appropriate concepts and development of educational tools • Use of applications for references at point of care <p>Compliance issues related to patient privacy with use of technology</p> <p>Population-appropriate clinical indicators for incorporation into information systems, such as electronic health records</p>

Competency Area	NP Core Competencies	Curriculum Content to Support Competencies <i>Neither required nor comprehensive, this list reflects only suggested content specific to the core competencies</i>
Policy Competencies	<ol style="list-style-type: none"> 1. Demonstrates an understanding of the interdependence of policy and practice. 2. Advocates for ethical policies that promote access, equity, quality, and cost. 3. Analyzes ethical, legal, and social factors influencing policy development. 4. Contributes in the development of health policy. 5. Analyzes the implications of health policy across disciplines. 6. Evaluates the impact of globalization on health care policy development. 	<p>Policy analysis process:</p> <ul style="list-style-type: none"> • Political environment • Political feasibility • Economic feasibility • Implementation strategy and planning • Outcomes evaluation at local, state, national, and international levels • Specific NP role for influencing health care agenda and patient advocacy <p>Health policy and health care reform:</p> <ul style="list-style-type: none"> • Federal budget • National health priorities • Methods for appropriation of funding • Vulnerable populations and needs • The relationship between the USPSTF guidelines and Affordable Care Act implementation <p>Legislative and regulatory processes:</p> <ul style="list-style-type: none"> • Origin of laws • Regulatory process • How to influence/impact passage of laws and their translation into regulation • Health care financing and third party reimbursement <p>Population health model and its impact on policy planning</p> <p>Introduction of global issues:</p> <ul style="list-style-type: none"> • Infections • Travel • Immigration • Disasters/terrorism • Access to health care

Competency Area	NP Core Competencies	Curriculum Content to Support Competencies <i>Neither required nor comprehensive, this list reflects only suggested content specific to the core competencies</i>
		<p>Ethical issues in health care planning:</p> <ul style="list-style-type: none"> • Fairness • Equity and health disparities • Access and resource allocation • Health behavior • Social determinants of health <p>Comparative health systems</p>
Health Delivery System Competencies	<ol style="list-style-type: none"> 1. Applies knowledge of organizational practices and complex systems to improve health care delivery. 2. Effects health care change using broad based skills including negotiating, consensus-building, and partnering. 3. Minimizes risk to patients and providers at the individual and systems level. 4. Facilitates the development of health care systems that address the needs of culturally diverse populations, providers, and other stakeholders. 5. Evaluates the impact of health care delivery on patients, providers, other stakeholders, and the environment. 6. Analyzes organizational structure, functions and resources to improve the delivery of care. 7. Collaborates in planning for transitions across the continuum of care. 	<p>Organizational practices:</p> <ul style="list-style-type: none"> • Organizational structure, tables of organization • Organizational decision making • Organizational theory • Principles of management <p>Interprofessional collaborative partnerships</p> <p>Informatics/information systems:</p> <ul style="list-style-type: none"> • Interpreting variations in outcomes • Use of data to improve practice • Use of collateral information • Organizational delivery subsystems, (e.g. electronic prescription writing-pharmacy software) <p>Needs assessment of populations served:</p> <ul style="list-style-type: none"> • Socioeconomic and cultural factors • Unique population needs • System resources to meet population needs (e.g. use interpreters to facilitate communication) • Community resources/system outreach to community • Diversity among providers

Competency Area	NP Core Competencies	Curriculum Content to Support Competencies <i>Neither required nor comprehensive, this list reflects only suggested content specific to the core competencies</i>
		<p>Financial issues:</p> <ul style="list-style-type: none"> • Financial business principles • Health care system financing • Reimbursement systems • Resource management • Billing and coding principles <p>Interprofessional/team competencies:</p> <ul style="list-style-type: none"> • Communication (theory) • Collaboration • Conflict resolution • Consultations/referrals • Team building • Values and ethics • Roles and responsibilities <p>Safety and quality:</p> <ul style="list-style-type: none"> • Cost-effective care • Legal/ethical issues • Research and quality improvement • Continuous quality improvement • Quality and Safety Education in Nursing <p>Transitional care:</p> <ul style="list-style-type: none"> • Navigating transitions across health care settings • Coordination of services <p>Planning, delivering and/or evaluating models of care:</p> <ul style="list-style-type: none"> • Models of planned change • Process and evaluation design implementation • Evaluation models • Process of proposing changes in practice

Competency Area	NP Core Competencies	Curriculum Content to Support Competencies <i>Neither required nor comprehensive, this list reflects only suggested content specific to the core competencies</i>
		<p>Legislative and regulatory issues:</p> <ul style="list-style-type: none"> • Relevant and current issues (e.g., Accountable Care Act implementation) • Process of health care legislation • Scope and standards of practice • Cultural competence • Theories of vulnerability • Social determinants of health <p>Policy and advocacy:</p> <ul style="list-style-type: none"> • Reducing environmental health risks • Implications of health policy • Variations in policy
Ethics Competencies	<ol style="list-style-type: none"> 1. Integrates ethical principles in decision making. 2. Evaluates the ethical consequences of decisions. 3. Applies ethically sound solutions to complex issues related to individuals, populations and systems of care. 	<p>Ethics in decision making:</p> <ul style="list-style-type: none"> • Ethical considerations in decision making in clinical practice • Applications of ethical principles in policy making and in care delivery • Sources of information to facilitate ethical decision making <ul style="list-style-type: none"> - theories of ethical decision making - ethics committee - genetic counseling - clinical research - legal statutes - cultural sensitivity - scope of practice <p>Evaluation of ethical decisions:</p> <ul style="list-style-type: none"> • Methods of evaluating outcomes (long-term and short-term) • Debriefing and assessment of outcomes • Ethical frameworks. <p>Population-specific complex ethical issues occurring in clinical practice</p> <p>System-specific resources to implement ethical decisions (e.g. hospice care, palliative care)</p>

Competency Area	NP Core Competencies	Curriculum Content to Support Competencies <i>Neither required nor comprehensive, this list reflects only suggested content specific to the core competencies</i>
Independent Practice Competencies	<ol style="list-style-type: none"> 1. Functions as a licensed independent practitioner. 2. Demonstrates the highest level of accountability for professional practice. 3. Practices independently managing previously diagnosed and undiagnosed patients. <ol style="list-style-type: none"> 3.a Provides the full spectrum of health care services to include health promotion, disease prevention, health protection, anticipatory guidance, counseling, disease management, palliative, and end-of-life care. 3.b Uses advanced health assessment skills to differentiate between normal, variations of normal and abnormal findings. 3.c Employs screening and diagnostic strategies in the development of diagnoses. 3.d Prescribes medications within scope of practice. 3.e Manages the health/illness status of patients and families over time. 4. Provides patient-centered care recognizing cultural diversity and the patient or designee as a full partner in decision-making. <ol style="list-style-type: none"> 4.a Works to establish a relationship with the patient characterized by mutual respect, empathy, and collaboration. 4.b Creates a climate of patient-centered care to include confidentiality, privacy, comfort, emotional support, mutual trust, and respect. 4.c Incorporates the patient's cultural and spiritual preferences, values, and beliefs into health care. duplicate. 	<p>Clinical decision making based on evidence and patient/provider partnership</p> <p>Current and emerging professional standards</p> <p>Novice to expert continuum of clinical practice</p> <p>Political, policy and regulatory issues regarding licensure, national certification, and scope of practice.</p> <p>Leadership approaches for employment contract negotiation, networking, and advancing professional standards and roles</p> <p>Application of select sciences to practice:</p> <ul style="list-style-type: none"> • Pharmacology • Physiology • Pathophysiology <p>Specific areas of assessment, including but not limited to:</p> <ul style="list-style-type: none"> • Physical • Psychosocial • Developmental • Family • Psychiatric mental health • Oral health <p>Screenings</p> <p>Diagnostics (tests, labs)</p> <p>Specific procedures</p> <p>Health promotion, prevention, and disease management</p> <p>Pharmacology and complementary alternative therapies</p> <p>Provider-patient relationship:</p>

Competency Area	NP Core Competencies	Curriculum Content to Support Competencies <i>Neither required nor comprehensive, this list reflects only suggested content specific to the core competencies</i>
	4.d Preserves the patient's control over decision making by negotiating a mutually acceptable plan of care.	<ul style="list-style-type: none"> • Role of culture in patient-centered care • Contracting a management plan with patient and/or family • Culture of trust in interpersonal relationship w/patient and/or families <p>Business of practice:</p> <ul style="list-style-type: none"> • Legal, business, and ethical issues • How to set up, finance and evaluate a practice , • Writing a business plan <p>Cultural issues</p> <p>Concepts of life-long learning</p>

Appendix C

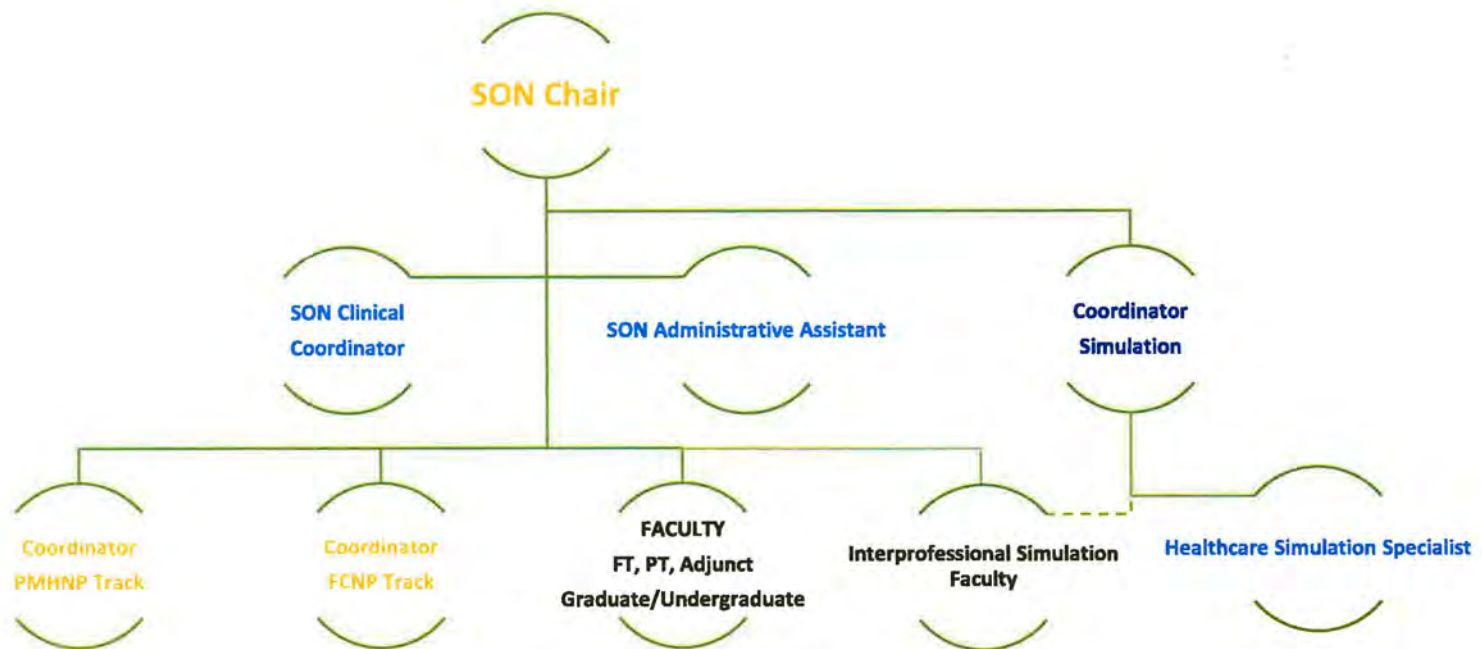
HUSoN Examples of Boyer Model of Scholarship Teaching

Name	Teaching	Scholarship, Professional Activity(Practice), Creative Work	Service	Academic Advising
Undergraduate faculty				
Donna Beuk, chair				
Valerie Sauda	NU412, NL412, NL427 and coordination	PhD student-UMaine, Certified Gerontological nurse, presenter-STTI conference Fall 2017, Poster presenter-Spring 2018-NLN/STTI educator conference	VP Husson-Omicron Xi chapter at Large, Co-chair Maine Geriatrics Conference, Advisory Board-CCLC grant-Fairmount School, UMaine Center on Aging-Community member, NLN member	General advisor-undergraduate-Fall 2014-Spring 2017, Senior level advising-Fall 2017
Alicia Mooney	NU412, NL412, NL427	Certified Hospice & Palliative Care Nurse, Socialization Grant implementation with OT department and community agency	Hospice & Palliative Nurses Association Board member	Senior level advising-Fall 2017
Laurie Eddy	NU324, NU808, He 111, Nu 100	Double certified NP- Women's Health (1983) NCC and Family Nurse NP (2000) AANP; taking CNE exam in Nov. 17 , Nationally Certified Natural Family Planning Educator, SANE-trained, Husson Global Scholar Award 2015	Husson- Title IX committee; Omicron Xi member, AANP member, AWAONN member, Maine NP association member, Founding/past member for the Maine Health Access Foundation	Undergraduate Freshmen level advising
Patricia Eldershaw	HE111, NU422, NL422, IPE730	Eldershaw P.L and Morse, J. (2017). Self-Transcendence and Self-reformulation: One Concept or Two? In Janice Morse (ed.), Analyzing and Constructing the Conceptual and Theoretical Foundations of Nursing (pp. 357 – 386). New York, NY: Springer Publishing Company.	New undergraduate faculty-2017	Undergraduate advisor Freshman level 2017-18
Priscilla Young	NU 422, NL 422, NU 841, NU 842, NU 812	ANCC certified PMH NP and ANCC certified PMH CNS	New undergraduate faculty-2017	Undergraduate and graduate advisor
Tammy Campbell	NU 323, NL 322/323, NU 424, NU 425	MSN Student - Grand Canyon University	New faculty-Instructor	Undergraduate advisor, Junior level
Diane Jenks	NU208, NU322	Summer 2017 completed NLN Test writing course, Certified Critical Care nurse	New undergraduate faculty-2017	Undergraduate advisor, Sophomore level 2017-18
Cathi Goebel	NU2II, NL211, NU315, NL315	Summer 2017 Completed NLN Test writing course	Counselor Husson-OmicronXi Chapter at Large; Husson Handbook Committee until Fall 2017	Undergraduate advisor all levels until Fall 2017, Sophomore level advising Fall 2017
Graduate Faculty				
Ramona Lazenby * FNP coordinator		Brown, J. L., Parker, F. M., & Lazenby, R. (2014) Determining the effects of past negative experiences involving patient care. Online Journal of Health Ethics, 10(1). Retrieved from http://aquila.usm.edu/ojhe/vol10/iss1/3 . Developed protocols for Baptist Health System Employee Health; AANC certified Family Nurse Practitioner. American Heart Association BLS Instructor.	Monthly screenings for Unity Adult Day Care and Nutrition site	Graduate advisor-FNP
Priscilla Young, PHMNP c	See above			
Patricia Eldershaw	See above			
Stephanie Nichols, adjunct	NU 705			
Kathy Wall, adjunct	NU 706			

Appendix D

HUSoN Organization Chart

School of Nursing Organizational Chart



- Gold = Faculty with Administrative Duties**
- Green = Faculty Ranking**
- Blue = Professional Staff with Administrative Duties**
- Light Blue = Professional Staff**

Appendix E

HUSoN Bylaws

BY-LAWS

FACULTY ORGANIZATION AND STANDING COMMITTEES OF THE HUSSON UNIVERSITY SCHOOL OF NURSING (HUSoN)

ARTICLE I - NAME

This organization shall be known as the Faculty Organization of the Husson University School of Nursing (HUSoN).

ARTICLE II - PURPOSE

The overall purpose of this organization is to plan, implement and evaluate effective baccalaureate and masters programs in nursing.

ARTICLE III - FUNCTIONS

1. Review and revise the mission, goals, expected outcomes, and related curriculum documents of HUSoN.
2. Review and approve policies governing the operation of HUSoN.
3. Plan, implement, and evaluate programs of study based on Essentials, Standards, and Criteria for baccalaureate and masters programs in nursing.
4. Consider and act on recommendations of committees and the student organization.
5. Communicate and cooperate with other schools and departments of Husson University (HU) in order to maintain an overall environment conducive to learning.
6. Develop and maintain essential records.
7. Represent the programs and its needs within the University and in the community.
8. Plans, oversees the implementation of, and evaluates activities to fulfill accreditation criteria.

ARTICLE IV - MEMBERSHIP

Active members: All full-time and part-time faculty and professional staff of HUSoN and Coordinator, Nursing Assessment and Curriculum. The Dean of

the College of Health and Education will serve as an ex-officio member.

Associate members: Director of Assessment, Director of Online and Extended Learning, adjunct faculty (graduate and undergraduate) and student representatives from each program will be considered associate members and will not be considered in the quorum; they will have a voice but no vote.

ARTICLE V - OFFICERS

The officers shall be:

1. Chairperson: Director for School of Nursing.
2. Secretary: SON Administrative Assistant or designee.

ARTICLE VI - PARLIAMENTARY AUTHORITY

SECTION I Quorum

A majority of all active members and the Chairperson or his/her designee shall constitute a quorum for conducting committee business.

SECTION II Roberts' Rules of Order

Except as specifically noted otherwise, Roberts' Rules of Order, current Revision, shall be the accepted authority for conducting the business of the Organization and its committees.

ARTICLE VII - DUTIES OF THE OFFICERS

SECTION I The Chairperson shall:

- A. Prepare an agenda for meeting of the HUSoN, in conjunction with faculty members.
- B. Preside at meetings of the HUSoN.
- C. Convene meetings of the HUSoN.
- D. Request faculty members to serve on committees and ad hoc committees.
- E. Develop a yearly schedule of meetings.
- F. Prepare an annual report of HUSoN activities.

G. Oversee the preparation and filing of all written HUSoN materials.

SECTION II

The Chairperson's designee shall assume the duties of the Chairperson in his/her absence.

SECTION III

The Secretary shall:

- A. Maintain a record of all proceedings.
- B. Place copies of minutes and appropriate attachments in HUSoN Committee notebook and appropriate computer folder, as directed by the Committee Chairperson.

ARTICLE VIII - VOTING

SECTION I

All active members of the HUSoN including officers, shall have the right to vote.

SECTION II

Associate members are not counted in the quorum, and have voice but no vote.

SECTION III

Motions shall carry by simple majority vote.

ARTICLE IX - COMMITTEES

SECTION I

The HUSoN shall have the following standing committees:

- A. CURRICULUM COMMITTEE
- B. ASSESSMENT & EVALUATION COMMITTEE
- C. ADMISSION & PROGRESSION & GRADUATION COMMITTEE
- D. FACULTY / STUDENT DEVELOPMENT COMMITTEE
- E. LEARNING RESOURCES COMMITTEE

SECTION II

Ad Hoc committees of the HUSoN:

- A. The need for Ad Hoc committees may be identified by the Chairperson or at the recommendation of active members of the Faculty Organization.
- B. Members of an Ad Hoc committee shall be requested to serve by the Chairperson.
- C. The objectives of an Ad Hoc committee shall be determined by the active members of the HUSoN in collaboration with the Chairperson.
- D. Ad Hoc committee Chairpersons shall be elected by vote of the given Ad Hoc committee members.

- E. The Chairperson of an Ad Hoc committee shall select a secretary to document the activities of the committee.
- F. The committee shall be dissolved when the objective(s) has/have been achieved.

ARTICLE X - MEETINGS

SECTION I

The Faculty Organization of HUSoN shall meet at least once per month while school is in session. The exception are the months of August, December and May when the Faculty Organization of HUSoN Faculty will meet as a "Retreat".

The HUSoN Standing Committees shall meet at least once per semester while school is in session.

SECTION II

The active members are expected to be present at all Faculty Organization meetings unless excused by the Chairperson.

The active members are expected to be present at all Standing and Ad Hoc Committee meetings unless excused by the Committee Chairperson.

ARTICLE XI - BY-LAWS OF CURRICULUM COMMITTEE

SECTION I

FUNCTION: Coordinates the overall undergraduate and graduate curricula, and related policies and recommends these to the HUSoN Chairperson and members.

- A. Plans, evaluates, and makes recommendations to the HUSoN for curricular change by program tracks to insure implementation of the mission, goals and expected outcomes.
- B. Reviews new course syllabi and proposed changes to existing course syllabi for content and relevance to level objectives within each program.
- C. Formulates academic policies as related to the curriculum.
- D. Reviews student proposals for accelerated or alternative programs of study.
- E. Reviews Standards and items appropriate to curricular oversight in Systematic Plan of Evaluation.

SECTION II

COMPOSITION OF THE COMMITTEE

- A. The active members of the Curriculum Committee will be composed of at least two undergraduate nursing faculty, one graduate nursing faculty, HU Curriculum and Assessment Representative(s), HU Online and Extended Learning Representative whereby representing all levels of the school and university. The Chairperson of HUSoN will serve as an ex-officio member of the committee. HUSoN student representative(s).
- B. The Dean of the College of Health and Education (COHE) may serve as ex-officio member of the Committee.

SECTION III

OFFICERS

- A. The Chairperson of the Committee will be elected by the membership and serve for two years in that capacity, or rotate among the active members.
- B. The Secretary of the Committee will rotate among the members.

SECTION IV

MEETINGS OF THE COMMITTEE

- A. Meetings will be scheduled at regular intervals.
- B. Special meetings may be scheduled at the discretion of the Committee Chairperson or the majority of committee members.

SECTION V

MINUTES AND ANNUAL REPORTS OF THE COMMITTEE

- A. The secretary records and files the minutes of all meetings. The Committee will submit a monthly report and an annual report of the Committee's activities to the HUSoN Chairperson.
- B. Actions and recommendations of this Committee will be reported to the HUSoN Chairperson and members.

SECTION VI

QUORUM AND VOTING

- A. A majority of all active members and the Committee Chairperson shall constitute a simple majority for conducting committee business.

- B. Motions shall be carried by a simple majority vote of members present.

ARTICLE XII - BY-LAWS OF ASSESSMENT & EVALUATION COMMITTEE

SECTION I **FUNCTION:** Coordinates the evaluation processes of the HUSoN Undergraduate and Graduate Nursing Programs; and makes recommendations to the HUSoN Chairperson and members

- A. Provides oversight of HUSoN function of the Systematic Plan of Evaluation.
- B. Evaluates all data related to progression, retention and/or graduation of undergraduate and graduate students, certification and NCLEX passage rates, employer satisfaction.
- C. Provides recommendations for change and/or improvements to HUSoN Chairperson and members

SECTION II **COMPOSITION OF THE COMMITTEE**

- A. The active members of the Assessment & Evaluation Committee will be composed of at least two undergraduate nursing faculty, one graduate nursing faculty, HU Curriculum and Assessment Representative(s), thereby representing all levels of the school and university. The Chairperson of HUSoN will serve as an ex-officio member of the committee. HUSoN student representative(s).
- B. The Dean of the COHE may serve as ex-officio member of the Committee.

SECTION III **OFFICERS**

- A. The Chairperson of the Committee will be elected by the membership and serve for two years in that capacity, or rotate among the active members.
- B. The Secretary of the Committee will rotate among the members.

SECTION IV **MEETINGS OF THE COMMITTEE**

- A. Meetings will be scheduled at regular intervals.
- B. Special meetings may be scheduled at the discretion of the Committee Chairperson or the majority of committee members.

SECTION V MINUTES AND ANNUAL REPORTS OF THE COMMITTEE

- A. The secretary records and files the minutes of all meetings. The Committee will submit a monthly update and an annual report of the Committee's activities to the Chairperson.
- B. Actions and recommendations of this Committee will be reported to the HUSoN Chairperson and members.

SECTION VI QUORUM AND VOTING

- A. A majority of all active members and the Committee Chairperson shall constitute a simple majority for conducting committee business.
- B. Motions shall be carried by a simple majority vote of members present.

ARTICLE XIII BY-LAWS OF ADMISSIONS & PROGRESSION COMMITTEE

SECTION I FUNCTION: Upholds educational and professional standards of HUSoN Undergraduate Nursing Program and Graduate Nursing Programs by individual review of specific applicants and progression of all nursing students.

- A. Recommends to the HUSoN Chairperson and members procedures for the selection and admission of qualified candidates.
- B. Recommends acceptance and rejections of applicants for the HUSoN Programs to the HUSoN Chairperson and COHE Dean.
- C. Recommends to HUSoN Chairperson individual student progression based on program, school and university policies

SECTION II COMPOSITION OF THE COMMITTEE

- A. The active members of the Admission & Progression Committee will be composed of at least two undergraduate nursing faculty, one graduate nursing faculty, HU Curriculum and Assessment Representative(s), thereby representing all levels of the school and university. The Chairperson of HUSoN will serve as an ex-officio member of the committee. HUSoN student representative(s).
- B. The Dean of the COHE may serve as ex-officio members.

SECTION III

OFFICERS

- A. The Chairperson of the Committee will be elected by the membership and serve for two years in that capacity, or rotate among the active members.
- B. The Secretary of the Committee will rotate among the members.

SECTION IV MEETINGS OF THE COMMITTEE

- A. Meetings will be scheduled regularly, end of each semester and as needed.
- B. Special meetings may be scheduled at the discretion of the Committee Chairperson or majority of the committee members.

SECTION V MINUTES AND ANNUAL REPORTS OF THE COMMITTEE

- A. The secretary records and files the minutes of all meetings. The Committee will submit a monthly update and an annual report of the Committee's activities to the HUSoN Chairperson.
- B. The Secretary records the committee's decisions regarding applicant admission and recommendations for student progression.
- C. Applicant admission decisions and student progression recommendations of the Committee will be reported to the HUSoN Chairperson and COHE Dean.

SECTION VI QUORUM AND VOTING

- A. A majority of all active members and the Committee Chairperson shall constitute a simple majority for conducting committee business.
- B. Motions shall be carried by a simple majority vote of members present.

ARTICLE XIV - BY-LAWS OF FACULTY & STUDENT DEVELOPMENT COMMITTEE

SECTION I FUNCTION: Coordinates the faculty and student development activities and recommends these to the HUSoN Chairperson and members.

- A. Plans and evaluates recruitment activities of the HUSoN Programs.
- B. Reviews and communicates student requests, concerns, and grievances to the appropriate body.

- C. Plans, implements and evaluates faculty development seminars and workshops for the nursing faculty.
- D. Selects student scholarship awards and Sigma Theta Tau nominations and forwards to the HUSoN Chairperson.

SECTION II COMPOSITION OF THE COMMITTEE

- A. The active members of the Faculty & Student Development Committee will be composed of at least two undergraduate nursing faculty, one graduate nursing faculty, member advisor to the Organization of Student Nurses (OSN), thereby representing all levels of the school. The Chairperson of HUSoN will serve as an ex-officio member of the committee. HUSoN student representative(s).
- B. The Dean of the COHE may serve as ex-officio member of the Committee.

SECTION III OFFICERS

- A. The Chairperson of the Committee will be elected by the membership and serve for two years in that capacity, or rotate among the active members.
- B. The Secretary of the Committee will be rotated among the members.

SECTION IV MEETINGS OF THE COMMITTEE

- A. Meetings will be scheduled at regular intervals.
- B. Special meetings may be scheduled at the discretion of the Committee Chairperson or the majority of committee members.

SECTION V MINUTES AND ANNUAL REPORTS OF THE COMMITTEE

- A. The secretary records and files the minutes of all meetings. The Committee will submit a monthly update and an annual report of the Committee's activities to the HUSoN Chairperson.
- B. Actions and recommendations of this Committee will be reported to the HUSoN Chairperson and members.

SECTION VI QUORUM AND VOTING

- A. A majority of all active members and the Committee Chairperson shall constitute a simple majority for conducting committee business.
- B. Motions shall be carried by a simple majority vote of members present.

ARTICLE XV BY-LAWS OF LEARNING RESOURCE COMMITTEE

SECTION I **FUNCTION:** To plan and maintain educational resources to support and enhance classroom and clinical learning experiences of the HUSoN Chairperson and members.

- A. Assess, evaluate and recommend integration of teaching strategies and resources within the HUSoN.
- B. Develop short and long term planned growth for the Simulation and Learning Resource Center (LRC) and teaching resources.
- C. Determine priorities for capital and operating purchases to maintain and improve simulation, learning, and teaching resources.

SECTION II **COMPOSITION OF THE COMMITTEE**

- A. The active members of the Learning Resources Committee will be composed of the HUSoN Simulation and LRC Coordinator, HUSoN Clinical Coordinator, at least one undergraduate nursing faculty, one graduate nursing faculty, HU Curriculum and Assessment Representative(s), HU Online and Extended Learning Representative, and additional staff as assigned, thereby representing all levels of the school and university. The Chairperson of HUSoN will serve as an ex-officio member of the committee. HUSoN student representative(s).
- C. The Dean of the College of Health and Education may serve as ex-officio members.

SECTION III **OFFICERS**

- A. The Chairperson of the Committee will be the Simulation and LRC Coordinator.

SECTION IV

B. The Secretary of the Committee will rotate among the members.

MEETINGS OF THE COMMITTEE

A. Meetings will be scheduled at regular intervals.

B. Special meetings may be scheduled at the discretion of the Committee Chairperson or the majority of committee members.

SECTION V

MINUTES AND ANNUAL REPORTS OF THE COMMITTEE

- A. The secretary records and files the minutes of all meetings. The Committee will submit a monthly update and an annual report of the Committee's activities to the HUSoN Chairperson.
- B. Actions and recommendations of this Committee will be reported to the HUSoN Chairperson and members.

SECTION VI

QUORUM AND VOTING

- A. A majority of all active members and the Committee Chairperson shall constitute a simple majority for conducting committee business.
- B. Motions shall be carried by a simple majority vote of members present.

Revised and adopted by the Faculty Organization of the School of Nursing

Appendix F

Notification of RN-BSN Student Email

Dear Student,

We hope that you have had a rewarding Spring semester! As part of our usual review of programs, Husson has made some changes to its programs that may affect you, and we wanted to send you this letter to inform you of the changes.

The revised curriculum for obtaining a Baccalaureate of Science in Nursing (BSN) degree through the RN to BSN track from Husson University is included with this letter. The School of Nursing (SON) faculty at Husson University reviewed the American Association of College of Nursing's (AACN) Essentials of Baccalaureate Education for Professional Nursing Practice and specifically the guidelines for post licensure programs to make informed decisions in the curriculum. Beginning Fall 2017, all students entering the program will follow the sequenced Professional component of the track in pursuit of a BSN degree from Husson.

There were several changes made to the current curriculum to reflect AACN's guidelines for post-licensure BSN programs. The focus of the program will be to prepare graduates for professional nursing leadership roles as well as a strong foundation for graduate studies.

Students currently enrolled in the RN to BSN track, your plan of study will have minor changes related to the 700 level courses and the replacement of nursing elective with a core course in gerontology. The status of your enrollment must be clearly stated through the Registrar's office as enrollment in this track. If you have any questions, please contact your advisor for clarification. The 700 level courses listed under the current curriculum are taught at the graduate level and you are not eligible to take these courses as an undergraduate student. Upon completion of the BSN Capstone course you will may for the Graduate Program.

Due to the significant changes in the curriculum, it will be necessary for students to apply to re-enter the program if they are unsuccessful in the current curriculum. Additional course work may be required to complete the degree requirements if re-entering into the new curriculum.

Please do not hesitate to contact us to ask questions about your program, your status, or how these changes may affect you. We wish you continued success in your endeavors at Husson University!

Sincerely,

Dr. Donna Beuk, EdD, MSN, RN, CNE
Chair, School of Nursing
Husson University
1 College Circle, Comm224
Bangor, Maine 04401
beukd@husson.edu

(207) 941-7745 (office)

(207) 941-7198 (fax)

RN-to-BSN Program

The RN-to-BSN program requires a minimum of 120 credits to graduate from the School of Nursing. As part of the application process, official transcripts will be evaluated by the Husson University Admissions Office and applicable transfer credits awarded. Depending on the individualized progression plan, to seamlessly move RNs to the BSN level at Husson University and integrate with existing structure will require completion of coursework in general education prior to taking nursing coursework. With completion of all program requirements, student is awarded a BSN.

Program requirements are as follows:

Admission requirements of GPA 2.5

Transfer up to 90 applicable credits toward the total of 120 credits needed for BSN

Award block transfer nursing credits or equivalents at ADN/diploma level up to 39 credits

General Education Courses Required for BSN at Husson (total 52 credits)

EH 123 Rhetoric & Composition I (3)

EH124 Rhetoric & Composition II (3)

EH200 Approaches to Literature (3)

MS 132 Probability & Statistics (3)

MS 141 Contemporary College Algebra (or higher) (4)

PH 110 Introduction to Ethics (3)

PY 111 General Psychology (3)

SY 201 Principles of Sociology (3)

PY 141 Human Growth & development (3)

SC/SL 121 Anatomy & Physiology I/Lab (4)

SC/SL 122 Anatomy & Physiology II/Lab (4)

SC/SL 241 Microbiology/Lab (4)

Fine Arts Elective (3)

Language/Culture Elective (3)

Communications/Speech Elective (3)

Nursing Courses Required for RN-BSN at Husson University (total 30 Credits)

NU 441 Role Transition to BSN (3)

NU 442 Health Informatics & Technology (3)

NU 443 Quality Improvement in Healthcare Systems (3)

NU 445 Evidence Based Practice for the Professional Nurse (3)

NU 446 Nursing Practice Science and Skills for the Professional Nurse (3)

NU 447 Leadership Development for the Professional Nurse (3)

NU 448 Interprofessional Collaboration in Rural Public Health (4)

NU 449 Health Policy Issues and Challenges (3)

NU 455 Gerontological Nursing for the Professional Nursing (3)

NU 495 Capstone for Professional Practice (4)

Revised 04.06.2017 deb

Revised 02.08.2015 vmh

Appendix G

Sample Transcript and Diplomas for Graduate Program

9/13/2017

STUDENT ADVISOR TRANSCRIPT

Page 1 of 2

Student Name :

Student ID : 0110372

Provided Solely for:

Date of Birth: 10/12/1982

Major: MS Nrsng/Family & Community NP

Advisor: Ms. Mary Jude

Degree: Bachelor of Science	05/30/2005	UnGrad
Transfer: No		
Conferred: 05/30/2005		
Majors: BS Nursing		
Honors: Cum laude		
Degree: Master of Science	05/05/2017	
Transfer: No		
Conferred: 05/05/2017		
Majors: MS Nrsng/Family & Community NP		

*** Grad ***

Term: 2014/FA

NU 700	Theories and Roles for Advanced Nursing Practice	3.00	A
NU 706	Advanced Pathophysiology	3.00	A

	<u>ATT</u>	<u>ERN</u>	<u>HRS</u>	<u>PTS</u>	<u>GPA</u>
<u>TERM:</u>	6.00	6.00	6.00	24.00	4.000
<u>CUM:</u>	6.00	6.00	6.00	24.00	4.000

Term: 2015/SP

NU 710	Nursing Research	3.00	A
NU 740	Public Health Policy Issues and Challenges	3.00	A

	<u>ATT</u>	<u>ERN</u>	<u>HRS</u>	<u>PTS</u>	<u>GPA</u>
<u>TERM:</u>	6.00	6.00	6.00	24.00	4.000
<u>CUM:</u>	12.00	12.00	12.00	48.00	4.000

Term: 2015/SS

NU 704	Advanced Health Assessment	3.00	A
--------	----------------------------	------	---

	<u>ATT</u>	<u>ERN</u>	<u>HRS</u>	<u>PTS</u>	<u>GPA</u>
<u>TERM:</u>	3.00	3.00	3.00	12.00	4.000
<u>CUM:</u>	15.00	15.00	15.00	60.00	4.000

Term: 2015/FA

IP 730	Interprofessional Collaboration in Rural Public Health	3.00	A
NU 702	Pharmacotherapeutics	3.00	A-

	<u>ATT</u>	<u>ERN</u>	<u>HRS</u>	<u>PTS</u>	<u>GPA</u>
<u>TERM:</u>	6.00	6.00	6.00	23.10	3.850
<u>CUM:</u>	21.00	21.00	21.00	83.10	3.957

Term: 2016/SP

NU 807	Family Health I – Pediatrics (168 Internship Hours)	6.00	A
NU 841	Family and Community Nurse Practitioner Capstone	1.00	A

	<u>ATT</u>	<u>ERN</u>	<u>HRS</u>	<u>PTS</u>	<u>GPA</u>
<u>TERM:</u>	7.00	7.00	7.00	28.00	4.000
<u>CUM:</u>	28.00	28.00	28.00	111.10	3.968

Term: 2016/SS

NU 802	Family Health II – Adult-Gero Health (168 Internship Hours)	6.00	A
NU 841	Family and Community Nurse Practitioner Capstone	1.00	A

	<u>ATT</u>	<u>ERN</u>	<u>HRS</u>	<u>PTS</u>	<u>GPA</u>
<u>TERM:</u>	7.00	7.00	7.00	28.00	4.000
<u>CUM:</u>	35.00	35.00	35.00	139.10	3.974

Term: 2016/FA

NU 808	Family Health III – Women's Health (168 Internship Hours)	6.00	A
NU 841	Family and Community Nurse Practitioner Capstone	1.00	A

	<u>ATT</u>	<u>ERN</u>	<u>HRS</u>	<u>PTS</u>	<u>GPA</u>
<u>TERM:</u>	7.00	7.00	7.00	28.00	4.000
<u>CUM:</u>	42.00	42.00	42.00	167.10	3.979

Term: 2017/SP

NU 806	Family Health IV – Integrating Primary Care (168 Internship)	6.00	A
--------	--	------	---

	<u>ATT</u>	<u>ERN</u>	<u>HRS</u>	<u>PTS</u>	<u>GPA</u>
<u>TERM:</u>	6.00	6.00	6.00	24.00	4.000
<u>CUM:</u>	48.00	48.00	48.00	191.10	3.981

*** End of Grad ***

*** UnGrad ***

Term: 2001/FA

EH 111	Composition	3.00	A
MI 111	Introduction to Microcomputing	3.00	B+
MS 111	Algebra	3.00	B
PY 111	General Psychology	3.00	B+
SC 121	Anatomy and Physiology I	3.00	B-
SL 121	Anatomy Lab I	1.00	B+

	<u>ATT</u>	<u>ERN</u>	<u>HRS</u>	<u>PTS</u>	<u>GPA</u>
<u>TERM:</u>	16.00	16.00	16.00	52.20	3.263
<u>CUM:</u>	16.00	16.00	16.00	52.20	3.263

Term: 2002/SP

EH 112	Literature and Research	3.00	A-
NU 100	Professional Concepts in Nursing	3.00	B+
SC 122	Anatomy & Phys II	3.00	C+
SC 180	Principles of Gen Chemistry	3.00	B
SL 122	Anat & Phys Lab II	1.00	A-
SL 180	Prin of Gen Chemistry Lab I	1.00	A-
SY 201	Principles of Sociology	3.00	B+

	<u>ATT</u>	<u>ERN</u>	<u>HRS</u>	<u>PTS</u>	<u>GPA</u>
<u>TERM:</u>	17.00	17.00	17.00	54.20	3.188
<u>CUM:</u>	33.00	33.00	33.00	106.40	3.224

9/13/2017

STUDENT ADVISOR TRANSCRIPT

Page 2 of 2

Student Name :

Student ID : 0110372

Provided Solely for:

Date of Birth: 10/12/1982

*** UnGrad ***

Term: 2002/SS

EH	121	Speech	3.00	A
MS	132	Probability and Statistics	3.00	B+

	ATT	ERN	HRS	PTS	GPA
<u>TERM:</u>	6.00	6.00	6.00	21.90	3.650
<u>CUM:</u>	39.00	39.00	39.00	128.30	3.290

Term: 2002/FA

Dean's List

PH	201	Introduction to Philosophy	3.00	A
PY	241	Human Growth and Development	3.00	A-
SC	233	Pathophysiology	3.00	B+
SC	234	Nutrition	3.00	A-

	ATT	ERN	HRS	PTS	GPA
<u>TERM:</u>	12.00	12.00	12.00	44.10	3.675
<u>CUM:</u>	51.00	51.00	51.00	172.40	3.380

Term: 2003/SP

Dean's List

NL	306	Clinical:Health Promotion	0.00	--
NL	311	Clinical: Interv I Lab	0.00	--
NU	306	Health Promotion Across the Life Span	5.00	A-
NU	311	Nursing Intervention I	3.00	A-
SC	241	Microbiology	4.00	B
SL	241	Microbiology Lab	0.00	--

	ATT	ERN	HRS	PTS	GPA
<u>TERM:</u>	12.00	12.00	12.00	41.60	3.467
<u>CUM:</u>	63.00	63.00	63.00	214.00	3.397

Term: 2003/SS

PY	212	Applied Psychology	3.00	B	/I
----	-----	--------------------	------	---	----

	ATT	ERN	HRS	PTS	GPA
<u>TERM:</u>	3.00	3.00	3.00	9.00	3.000
<u>CUM:</u>	66.00	66.00	66.00	223.00	3.379

Term: 2003/FA

Dean's List

NL	308	Clinical:Health Assessment	0.00	--
NL	312	Clinical:Nursing Intervn II	0.00	--
NL	324	Clinical:Nrsng Childbearing	0.00	--
NU	308	Health Assessment	4.00	A-
NU	312	Nursing Intervention II	3.00	B+
NU	314	Pharmacology	3.00	B+
NU	324	Nursing Childbearing	4.00	B+

	ATT	ERN	HRS	PTS	GPA
<u>TERM:</u>	14.00	14.00	14.00	47.80	3.414
<u>CUM:</u>	80.00	80.00	80.00	270.80	3.385

Term: 2004/SP

Dean's List

NL	322	Clinical:Adult/Family Hlth II	0.00	--
NL	414	Clinical:Child Health	0.00	--
NU	320	Nursing Research	3.00	A
NU	322	Adult/Family Health I	5.00	A
NU	414	Child Health	4.00	B+
PH	301	Ethics	3.00	B+

	ATT	ERN	HRS	PTS	GPA
<u>TERM:</u>	15.00	15.00	15.00	55.10	3.673
<u>CUM:</u>	95.00	95.00	95.00	325.90	3.431

Term: 2004/SS

NU	440	Nursing Internship	3.00	A
----	-----	--------------------	------	---

	ATT	ERN	HRS	PTS	GPA
<u>TERM:</u>	3.00	3.00	3.00	12.00	4.000
<u>CUM:</u>	98.00	98.00	98.00	337.90	3.448

Term: 2004/FA

Dean's List

LF	111	French I	3.00	A
NL	418	Clinical:Adult/Family Hlth II	0.00	--
NL	422	Clinical:Comm Mental Health	0.00	--
NU	418	Adult/Family Health II	5.00	A-
NU	422	Community Mental Health	4.00	A-
PY	344	Early Childhood	3.00	A

	ATT	ERN	HRS	PTS	GPA
<u>TERM:</u>	15.00	15.00	15.00	57.30	3.820
<u>CUM:</u>	113.00	113.00	113.00	395.20	3.497

Term: 2005/SP

Dean's List

NL	412	Clinical:Community Health	0.00	--
NL	424	Senior Practicum	0.00	--
NU	412	Community Health	4.00	B+
NU	424	Senior Practicum	6.00	B+
NU	426	Policy Leadership and Management in Nursing	3.00	A

	ATT	ERN	HRS	PTS	GPA
<u>TERM:</u>	13.00	13.00	13.00	45.00	3.462
<u>CUM:</u>	126.00	126.00	126.00	440.20	3.494

*** End of UnGrad ***

The Family Educational Rights and Privacy Act of 1974 (as amended) prohibits the release of this information without the student's written consent. An official transcript must include the signature of the registrar and the seal of the college or university. This document reports academic information only.

9/13/2017

STUDENT ADVISOR TRANSCRIPT

Page 1 of 2

Student Name :

Student ID : 0161345

Provided Solely for:

Date of Birth: 01/07/1967

Major: Post Masters - Nsg/Fam Pract

Advisor: Ms. Mary Jude

Degree:	Certificate	08/23/2013
Transfer:	No	
Conferred:	08/23/2013	
Majors:	Adult Psy Mental Health NP Cer	
Degree:	Master of Science	05/10/2013
Transfer:	No	
Conferred:	05/10/2013	
Majors:	MS Nursng/Psychiatric Nrsng	
Degree:	Master of Science	05/05/2017
Transfer:	No	
Conferred:	05/05/2017	
Majors:	MS Nrsng/Family & Community NP	

*** Grad ***

Term: 2011/SP

NU 707	Neurobiology	3.00	A
NU 740	Public Health Policy Issues and Challenges	3.00	A
	<u>ATT</u> <u>ERN</u> <u>HRS</u> <u>PTS</u> <u>GPA</u>		
	<u>TERM:</u> 6.00 6.00 6.00 24.00 4.000		
	<u>CUM:</u> 6.00 6.00 6.00 24.00 4.000		

Term: 2011/SS

NU 702	Pharmacotherapeutics	3.00	A-
	<u>ATT</u> <u>ERN</u> <u>HRS</u> <u>PTS</u> <u>GPA</u>		
	<u>TERM:</u> 3.00 3.00 3.00 11.10 3.700		
	<u>CUM:</u> 9.00 9.00 9.00 35.10 3.900		

Term: 2011/FA

NL 704	Clinical:Adv Health Assessment	0.00	P
NU 700	Theories and Roles for Advanced Nursing Practice	3.00	A
NU 704	Advanced Health Assessment	3.00	B+
NU 706	Advanced Pathophysiology	3.00	A-
	<u>ATT</u> <u>ERN</u> <u>HRS</u> <u>PTS</u> <u>GPA</u>		
	<u>TERM:</u> 9.00 9.00 9.00 33.00 3.667		
	<u>CUM:</u> 18.00 18.00 18.00 68.10 3.783		

Term: 2012/SP

NL 722	Clinical:Adv Mental Hlth	0.00	P
NU 710	Nursing Research	3.00	A
NU 722	Adv Mental Health Assessment	3.00	B
	<u>ATT</u> <u>ERN</u> <u>HRS</u> <u>PTS</u> <u>GPA</u>		
	<u>TERM:</u> 6.00 6.00 6.00 21.00 3.500		
	<u>CUM:</u> 24.00 24.00 24.00 89.10 3.713		

Term: 2012/SS

NL 810	Clinical:Psychiatric Nursing I	0.00	P
NU 810	Psychiatric Nursing I	5.00	A
	<u>ATT</u> <u>ERN</u> <u>HRS</u> <u>PTS</u> <u>GPA</u>		
	<u>TERM:</u> 5.00 5.00 5.00 20.00 4.000		
	<u>CUM:</u> 29.00 29.00 29.00 109.10 3.762		

Term: 2012/FA

NL 812	Clinical:Psych Nursing II	0.00	P
NU 812	Psychiatric Nursing II	5.00	A
	<u>ATT</u> <u>ERN</u> <u>HRS</u> <u>PTS</u> <u>GPA</u>		
	<u>TERM:</u> 5.00 5.00 5.00 20.00 4.000		
	<u>CUM:</u> 34.00 34.00 34.00 129.10 3.797		

Term: 2013/SP

NL 814	Clinical:Psych Nursing III	0.00	P
NU 705	Adv Psychopharmacology	3.00	A
NU 814	Psychiatric Nursing III	6.00	A
	<u>ATT</u> <u>ERN</u> <u>HRS</u> <u>PTS</u> <u>GPA</u>		
	<u>TERM:</u> 9.00 9.00 9.00 36.00 4.000		
	<u>CUM:</u> 43.00 43.00 43.00 165.10 3.840		

Term: 2013/SS

NL 816	Clinical: Psychiatric NP Internship/Practicum	0.00	P
NU 816	Psychiatric NP Internship/Practicum	3.00	A
	<u>ATT</u> <u>ERN</u> <u>HRS</u> <u>PTS</u> <u>GPA</u>		
	<u>TERM:</u> 3.00 3.00 3.00 12.00 4.000		
	<u>CUM:</u> 46.00 46.00 46.00 177.10 3.850		

Term: 2015/FA

IP 730	Interprofessional Collaboration in Rural Public Health	3.00	A-
	<u>ATT</u> <u>ERN</u> <u>HRS</u> <u>PTS</u> <u>GPA</u>		
	<u>TERM:</u> 3.00 3.00 3.00 11.10 3.700		
	<u>CUM:</u> 49.00 49.00 49.00 188.20 3.841		

Term: 2016/SP

NU 807	Family Health I - Pediatrics (168 Internship Hours)	6.00	A-
	<u>ATT</u> <u>ERN</u> <u>HRS</u> <u>PTS</u> <u>GPA</u>		
	<u>TERM:</u> 6.00 6.00 6.00 22.20 3.700		
	<u>CUM:</u> 55.00 55.00 55.00 210.40 3.825		

Term: 2016/SS

NU 802	Family Health II - Adult-Gero Health (168 Internship Hours)	6.00	A
	<u>ATT</u> <u>ERN</u> <u>HRS</u> <u>PTS</u> <u>GPA</u>		
	<u>TERM:</u> 6.00 6.00 6.00 24.00 4.000		
	<u>CUM:</u> 61.00 61.00 61.00 234.40 3.843		

9/13/2017

STUDENT ADVISOR TRANSCRIPT

Page 2 of 2

Student Name :

Student ID : 0161345

Provided Solely for:

Date of Birth: 01/07/1967

*** Grad ***						
Term: 2016/FA						
NU	808	Family Health III – Women's Health (168 Hours)	6.00	A		
			<u>ATT</u>	<u>ERN</u>	<u>HRS</u>	<u>PTS</u> <u>GPA</u>
			6.00	6.00	6.00	24.00 4.000
			<u>CUM:</u>			
			67.00	67.00	67.00	258.40 3.857
Term: 2017/SP						
NU	808	Family Health IV – Integrating Primary Care (168 Hours)	6.00	A-		
			<u>ATT</u>	<u>ERN</u>	<u>HRS</u>	<u>PTS</u> <u>GPA</u>
			6.00	6.00	6.00	22.20 3.700
			<u>CUM:</u>			
			73.00	73.00	73.00	280.60 3.844
*** End of Grad ***						

The Family Educational Rights and Privacy Act of 1974 (as amended) prohibits the release of this information without the student's written consent. An official transcript must include the signature of the registrar and the seal of the college or university. This document reports academic information only.

Official Transcript
Advisor Use Only

Husson University

College of Health & Education

On recommendation of the Faculty and by authority of the Board of Trustees
hereby confers on

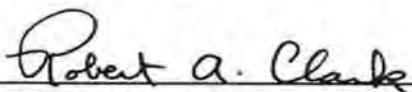
Husson Student
the degree of
Master of Science in Nursing

SAMPLE

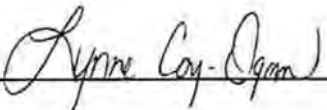
together with all the rights, privileges and honors appertaining thereto, in recognition
of the satisfactory completion of the course of study prescribed by this institution.

In Testimony Whereof the undersigned have subscribed their names and affixed the Seal of the University.
Given at Bangor, Maine, this month of May, 2017.


Chairperson, Board of Trustees


President




Provost


Dean

Husson University

College of Health & Education

On recommendation of the Faculty and by authority of the Board of Trustees
hereby confers on

Husson Student

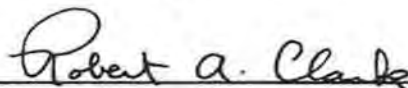
the degree of

Post Masters in Family and Community Nurse Practitioner

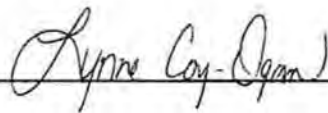
together with all the rights, privileges and honors appertaining thereto, in recognition
of the satisfactory completion of the course of study prescribed by this institution.

In Testimony Whereof the undersigned have subscribed their names and affixed the Seal of the University.
Given at Bangor, Maine, this month of May, 2017.


Chairperson, Board of Trustees


President




Proost


Dean

Husson University

College of Health & Education

On recommendation of the Faculty and by authority of the Board of Trustees
hereby confers on

Husson Student

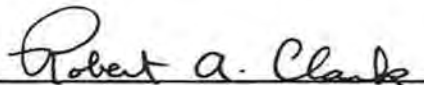
the degree of

Post Masters in Family Psychiatric Nurse Practitioner

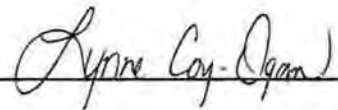
together with all the rights, privileges and honors appertaining thereto, in recognition
of the satisfactory completion of the course of study prescribed by this institution.

In Testimony Whereof the undersigned have subscribed their names and affixed the Seal of the University.
Given at Bangor, Maine, this month of May, 2017.


Chairperson, Board of Trustees


President




Probst


Dean

Appendix H

Systematic Plan of Evaluation

**SCHOOL OF NURSING
SYSTEMATIC PLAN OF EVALUATION
2015-2016 report
Need 2013
2014
2015 –changed
2016
2017**

AREAS OF PROGRAM EVALUATION	BENCHMARK, CRITERIA OR STRATEGIC INDICATOR	METHODOLOGY	TIMING	PERSON(S) RESPONSIBLE	DOCUMENTATION	Verification of completion
Standard I Program Quality: Mission and Governance						
I-A. The mission, goals, and expected program outcomes are; <ul style="list-style-type: none"> ● Congruent with Husson; and ● Consistent with relevant professional nursing standards and guidelines for the preparation of nursing professionals. 	All mission, goals, and expected outcomes are congruent with those of Husson and discipline.	Review college, DON, and professional documents	Every 2 years in October	Program Directors	Directors Meeting Minutes and DON Faculty Organization Minutes as needed	
<p>I-A Notes: 2015-2016: All outcomes were reviewed in relation to the new CCNE accreditation standards.</p> <ul style="list-style-type: none"> ● Husson University's mission and strategic plan is congruent with those of HUSoN ● HUSoN's mission, goals, and program outcomes are aligned to CCNE expectations and those of professional nursing <p><u>Recommendations moving forward:</u> None at this time</p>						

Updated copy-created by Cindy Peterson/Oct.
,2015

<p>I-B The mission, goals, and expected student outcomes are reviewed periodically and revised, as appropriate, to reflect:</p> <ul style="list-style-type: none"> • Professional nursing standards and guidelines; and • The needs and expectations of the community of interest. 	<p>All mission, goals and expected outcomes reflect needs of the community of interest.</p>	<p>Discussion with Excellence Coalition</p> <p>Discussion with advisory board, feedback from alumni, information gathered from healthcare professionals within our geographic area, etc.</p>	<p>Every 4 years in November, or as needed</p> <p>Annually as part of the Advisory meeting</p>	<p>Program Directors</p>	<p>Minutes of Coalition Meetings</p> <p>Advisory Meeting Minutes - alumni</p>	
<p>I-B notes: Per feedback, there does not seem to be any adjustment to the mission and goals at this time.</p> <p><u>Recommendations moving forward:</u> None at this time</p>						

Updated copy-created by Cindy Peterson/Oct. ,2015

I-D Faculty and students participate in program governance.	All faculty and at least one graduate and one undergraduate student on each committee related to program governance	Review of the committee assignments and student volunteers	Annually	Assessment Committee	<ul style="list-style-type: none"> • Committee meeting minutes • Committee assignment 	
---	---	--	----------	----------------------	---	--

I-D Notes:

Recommendations moving forward:

DATA:

2015-2016	Count of Undergraduate faculty	Count of Graduate Faculty	Count of students
Assessment Committee			
Curriculum Committee			
2016-2017	Count of Undergraduate faculty	Count of Graduate Faculty	Count of students
Assessment Committee			
Curriculum Committee			
2017-2018	Count of Undergraduate faculty	Count of Graduate Faculty	Count of students
Assessment Committee			
Curriculum Committee			

Updated copy-created by Cindy Peterson/Oct. ,2015

I-E 1-E.1: Documents and publications are accurate. 1-E.2: A process is used to notify constituents about changes in documents and publications.	1-E.1: 100% of current documents and publications are accurate 1-E.2 – the process for informing constituents about changes in publications and documents is consistently utilized	1-E.1 Documents and publications are reviewed annually, and if errors are detected that are corrected. 1-E.2 – Constituents will be asked about their receiving of information	Annually	Assessment Committee	Advisory meeting min. Assessment Meeting min.	
<p>1-E Notes:</p> <p>2015-2016</p> <p>2015-2016</p> <p>2016-2017:</p> <ul style="list-style-type: none"> • The Web was reviewed in Spring 2017 by the Deans Administrative assistance, with recommendations to the NU Chair, and then to the Husson Marketing Department • CY meet with the marketing department on 7-21-17 to guide multiple changes to the content on the web site. • Number of corrections made: <p>2017-2018</p> <p>Recommendations moving forward:</p>						

Updated copy-created by Cindy Peterson/Oct.
,2015

<p>I-F Academic policies of the parent institution and the nursing program are congruent and support achievement of the mission, goals, and expected student outcomes. These policies are:</p> <ul style="list-style-type: none"> • fair and equitable; • published and accessible; and • reviewed and revised as necessary to foster program improvement. 	<p><u>All</u> Husson University and HUSoN academic policies are congruent, and support achievement of the mission, goals, and expected student outcomes</p>	<p>Gather data from</p> <ul style="list-style-type: none"> • Faculty survey • Student Survey • Alumni survey <p>Review of HUSoN policies, with revision if appropriate</p>	<p>Annually</p>	<p>Assessment Committee</p>	<p>Student handbook Website Progressions data</p>	
<p>I-F Notes</p> <p><u>Recommendations moving forward:</u></p>						

Standard II Program Quality: Institutional Commitment and Resources						
II-A	<ul style="list-style-type: none"> Fiscal and physical resources are sufficient to enable the program to fulfill its mission, goals, and expected outcomes. <i>The budget also supports the development, implementation, and evaluation of the program</i> <i>Compensation of nursing unit personnel supports recruitment and retention of qualified faculty and staff</i> <i>Equipment and supplies (e.g., computing, laboratory, and teaching-learning) are sufficient to achieve the</i> <i>A defined process is used for regular review of the adequacy of the program's fiscal and physical resources.</i> <i>Review of fiscal and physical resources occurs and improvements are made as appropriate.</i> 	<p>HUSoN has the physical and fiscal resources to operate, achieve the mission, goals, and outcomes.</p> <p>HUSoN and can recruit and maintain qualified faculty as evidenced by a salary within 15% of the national mean.</p>	<p>Review budget: capital funding, grants, donations</p> <p>Review physical resources and program needs</p> <p>Gather data from faculty (Faculty survey)</p> <p>Review of HUSoN faculty salary</p>	Annual	Program Directors and Dean	<p>HUSoN and Program minutes, and annual committee reports.</p> <p>Documentation of Facilities and Equipment</p> <p>Document of HUSoN's budget & Capital funding</p> <p>Documentation of NU salaries compared to National data</p>
II-A Notes:						

Updated copy-created by Cindy Peterson/Oct. ,2015

DATA:

	National mean	HUSoN mean	% difference	Husson University faculty salary mean
2015-2016 NU Faculty salary				
2016-2017 NU Faculty salary				
2017-2018 NU Faculty salary				

Recommendations moving forward:

Updated copy-created by Cindy Peterson/Oct.
,2015

<p><i>II-B Academic support services (e.g., library, technology, distance education support, research support, admission, and advising services) are adequate for students and faculty to meet program requirements and to achieve the mission, goals, and expected program outcomes.</i></p> <p><i>There is a defined process for regular review of the adequacy of the program's academic support services.</i></p> <p><i>Review of academic support services occurs and improvements are made as appropriate.</i></p>	<p><i>Academic support services will be sufficient to support faculty and student need.</i></p> <p><i>Identified technologies will be available to all students and faculty to aid in student attainment of the intended learning outcomes.</i></p>	<p>Review of the end-of-year and program evaluations (students & faculty).</p> <p>Faculty feedback provided during supervision or in HUSoN meetings</p> <p>Review of technologies currently utilized</p>	<p>Annually</p>	<p>Program Directors, Dean, Assessment Committee</p>	<p>HUSoN minutes</p> <p>Survey forms</p> <p>Dean's Council minutes</p>	
--	---	--	-----------------	--	--	--

II-B Notes:

EXAMPLE – Needs more....	2015-2016	2016-2017	2017-2018
Databases maintained			
OVID		X	X
Writing Center made available to students in all syllabi	X	X	X
Canvas utilized by all Faculty	X	X	X

Updated copy-created by Cindy Peterson/Oct. ,2015

Percentage of didactic undergraduate courses utilizing ExamSoft	80%	95%	100%
Percentage of didactic graduate courses utilizing ExamSoft	0%	0%	TBA

Recommendations moving forward:

Updated copy-created by Cindy Peterson/Oct.
,2015

<p>II-C The Chief Nursing Administrator:</p> <ul style="list-style-type: none"> ● is a registered nursing (RN); ● holds a graduate degree in nursing; ● holds a doctoral degree if the nursing unit offers a graduate program in nursing; ● is academically and experientially qualified to accomplish the mission, goals, and expected program outcomes; ● is vested with the administrative authority to accomplish the mission, goals, and expected program outcomes; and ● provides effective leadership to the nursing unit in achieving its mission, goals, and expected program outcomes. 	<p>Education and experience are comparable to peers within Husson and the profession.</p>	<p>Faculty evaluations, Provost evaluation and CNA's CV</p>	<p>Annual</p>	<p>Dean of COHE</p>	<p>HR files</p>	
<p>IIC: Notes</p>						

Updated copy-created by Cindy Peterson/Oct. ,2015

2015-2016

The Chief Nursing Administrator is:	Yes/No
• is a registered nursing (RN)	Yes
• holds a graduate degree in nursing	Yes
• holds a doctoral degree if the nursing unit offers a graduate program in nursing	Yes
• is academically and experientially qualified to accomplish the mission, goals, and expected program outcomes	Yes
• is vested with the administrative authority to accomplish the mission, goals, and expected program outcomes	Yes
• provides effective leadership to the nursing unit in achieving its mission, goals, and expected program outcomes	Yes

Recommendations moving forward:

Updated copy-created by Cindy Peterson/Oct.
,2015

<p>II-D Faculty are:</p> <ul style="list-style-type: none"> • sufficient in number to accomplish the mission, goals, and expected program outcomes; • academically prepared for the areas in which they teach; and • Experientially prepared for the areas in which they teach. 							<p>100% meet MSBON requirements 50% with doctorate 80% with certification in area of practice Clinical ratio meets state guidelines.</p>	<p>Review Faculty Development Plans for congruence with Faculty Handbook</p> <p>Review course and clinical evaluations</p> <p>Review faculty: student clinical ratios</p>	<p>Annually</p>	<p>Program Directors</p>	<p>HR files</p> <p>Program minutes</p> <p>Clinical rosters</p>															
<p>II-D Notes</p> <p>DATA: 2015-2016</p> <table border="1"> <thead> <tr> <th></th> <th>2015-2016</th> <th>2016-2017</th> <th>2017-2018</th> </tr> </thead> <tbody> <tr> <td>% of faculty that meet MSBON requirements</td> <td></td> <td></td> <td></td> </tr> <tr> <td>% of faculty with doctorate</td> <td></td> <td></td> <td></td> </tr> <tr> <td>% of faculty with certification in area of practice</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Clinical ratio</td> <td></td> <td></td> <td></td> </tr> </tbody> </table>								2015-2016	2016-2017	2017-2018	% of faculty that meet MSBON requirements				% of faculty with doctorate				% of faculty with certification in area of practice				Clinical ratio			
	2015-2016	2016-2017	2017-2018																							
% of faculty that meet MSBON requirements																										
% of faculty with doctorate																										
% of faculty with certification in area of practice																										
Clinical ratio																										

Updated copy-created by Cindy Peterson/Oct.
,2015

Recommendations moving forward:

<p>II-E Preceptors, when used by the program as an extension of faculty, are academically and experientially qualified for their role in assisting in the achievement of the mission, goals, and expected student outcomes.</p>	<p>80% of preceptors have masters degrees</p> <p>90% of preceptors have a BSN degree</p> <p>100% of preceptors have been in their field for at least 5 years</p>	<p>Clinical Placement Coordinator will monitor the CV's of all preceptors and will maintain a dataset of qualifications</p>	<p>Ongoing data collection, reporting annually</p>	<p>Clinical placement Coordinator</p>	<p>Preceptor Qualifications report</p>	
---	--	---	--	---------------------------------------	--	--

II-E: Notes

	2015-2016	2016-2017	2018-2019
<p>% of preceptors have masters degrees</p>			
<p>% of preceptors have a BSN degree</p>			
<p>% of preceptors have been in their field for at least 5 years</p>			

Recommendations moving forward:

<p>II-F The parent institution and program provide and support an environment that encourages faculty teaching, scholarship, service, and practice in keeping with the mission, goals, and expected faculty outcomes.</p>	<p>90% of faculty report sufficiency of support in Faculty survey</p> <p>Professional development opportunities will be provided every academic year</p>					
<p>II-F Notes:</p> <p>2015-2016: Professional development offered</p> <ul style="list-style-type: none"> ● CCNE Jump-Start (Travis Allen – Director of Assessment) 2-10-16 ● Assessment Mapping and Assessment Item Design (Travis Allen – Director of Assessment) 5-10-16 ● Assessment Item Design (KVCC) May, 2016 ● Etc. <p><u>Recommendations moving forward:</u></p>						

Updated copy-created by Cindy Peterson/Oct.
,2015

Standard III Program Quality: Curriculum and Teaching-Learning Practice						
III-A The curriculum is developed, implemented, and revised to reflect clear statements of expected student outcomes that are congruent with the program's missions and goals, and with the roles for which the program is preparing its graduates.	The curriculum map will be maintained and reviewed by the Curriculum committee <u>All</u> syllabi will contain clear linkage between curriculum and program objectives, mission, and philosophy.	Review: Course syllabi Level outcomes Terminal outcomes Husson / HUSoN mission and goals	Annually, or more frequently as needed	Annual course review by faculty Curricular committee Program Directors	Program and annual retreat minutes Annual course review by faculty	
III-A Notes:						
<u>Recommendations moving forward:</u>						

Updated copy-created by Cindy Peterson/Oct.
,2015

<p>III-B Curricula are developed, implemented, and revised to reflect relevant professional nursing standards and guidelines, which are clearly evident within the curriculum and within the expected student outcomes. (individual and aggregate).</p> <ul style="list-style-type: none"> ● Baccalaureate program curricula incorporate <i>The Essentials of Baccalaureate Education for Professional Nursing Practice</i> (AACN, 2008) ● Master's program curricula incorporate professional standards and guidelines as appropriate. <ul style="list-style-type: none"> a. All master's degree programs incorporate <i>The Essentials of Master's Education for Advanced Practice Nursing</i> (AACN, 1996) and additional relevant professional standards and guidelines as identified by the program. b. All master's degree programs that prepare nurse practitioners incorporate <i>Criteria for Evaluation of</i> 	<p>All program will be based upon the BSN 'Essentials' document and QSEN competencies</p> <p>Program is based upon the MSN 'Essentials' document</p> <p>Specialty tracks are based upon NONPF, QSEN and specialty certification standards.</p>	<p>Review: Student clinical evaluation rubric</p> <p>Written work criteria Oral presentation guidelines</p> <p>Preceptor evaluations Documentation of faculty observation Clinical logs Summary of standards</p>	<p>Annual</p>	<p>Curriculum Committee Chair</p> <p>MSN Track Directors</p> <p>MSN Track Directors</p>	<p>CCNE Self-Study Report</p> <p>Minutes of HUSoN Program meetings</p> <p>Course syllabus</p> <p>ExamSoft data</p> <p>BSN Program Annual Report</p> <p>CCNE Self-Study Report</p> <p>MSN Track minutes</p> <p>MSBON Report</p>	
---	--	--	---------------	---	--	--

Updated copy-created by Cindy Peterson/Oct. ,2015

<p>III-C: The curriculum is logically structured to achieve expected student outcomes.</p> <ul style="list-style-type: none"> • Baccalaureate curricula build upon a foundation of the arts, sciences, and humanities. • Master’s curricula build on a foundation comparable to baccalaureate level nursing knowledge. • DNP curricula build on a foundation and/or master’s foundation, depending on the level of entry of the student. • Post-graduate APRN certified programs build on graduate level nursing competencies and knowledge base. 	<p>Student surveys indicates satisfaction with structure of curriculum an average of “Agree” or “Satisfied”.</p> <p>Faculty review indicates appropriateness of all required BSN prerequisite courses.</p> <p>Faculty review indicates MSN builds on BSN foundation.</p>	<p>Review senior BSN and MSN program evaluation follow-up surveys (1 and 5 years)</p> <p>Review rationale for pre-requisites</p> <p>Program review</p>	<p>Annual</p>	<p>Program Directors</p> <p>BSN Curriculum Comm. Chair</p> <p>MSN Track Directors</p>	<p>Student evaluations BSN and MSN Program/Track minutes</p> <p>BSN Program minutes</p> <p>MSN Track minutes</p>	
<p>III-C Notes:</p>						

Recommendations moving forward:

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

Course and teacher evaluation mean scores >3 (on and after 2009)

Review course and clinical evaluations

Annually each August beginning 2007

Program Directors

Faculty Annual Reviews

III-D Notes:

Recommendations moving forward:

<p>III-G: Individual student performance is evaluated by the faculty and reflects achievement of expected student outcomes. Evaluation policies and procedures for individual student performance are defined and consistently applied.</p>	<p>90% of all summative assessments are previewed by the Coordinator of Curriculum and Assessment to assist with establishment of validity and reliability of assessments as related to expected student outcome.</p>	<p>Faculty will meet with the Coordinator of Curriculum and Assessment or with the Director of Assessment for Husson University to discuss the intended student learning outcomes, appropriate assessment methodology, and assessment development. Faculty are also invited to participate in an assessment autopsy after the assessment has been delivered to determine rates or reliability, identify areas of weakness in the students' knowledge or ability, and areas that should be revisited with additional instruction and re-assessment.</p>	<p>Annually</p>	<p>Coordinator of Curriculum and Assessment</p>	<p>Spiceworks Ticket report HUSoN Meeting min.</p>	<p>Assessment committee</p>	<p>Assessment Committee Min.</p>	<p>90% of all summative assessments will have a post assessment review with the Coordinator of Curriculum and Assessment or the Director of Assessment</p>	<p>All assessment policies will be reviewed by the Assessment Committee and</p>
--	---	--	-----------------	---	--	-----------------------------	----------------------------------	--	---

Updated copy-created by Cindy Peterson/Oct. ,2015

		modified to reflect best practices				
--	--	------------------------------------	--	--	--	--

III-G Notes:

	2014-2015	2015-2016	2016-2017	2017-2018
% of summative assessments previewed prior to delivery				
% of summative assessments reviewed post delivery				

Recommendations moving forward:

<p>IV-A: A systematic process is used to determine program effectiveness</p>	<p>All aspects of the SPE will be completed and presented to the HUSoN faculty for any given calendar by October of the following academic year.</p>	<p>The SPE will be used to gather data and guide programmatic change aligned to the CCNE accreditation requirements. Entities or individuals who should complete each section are identified within the document. The Assessment Committee will maintain the SPE, communicate needs to the identified individuals, and update the official SPE report with information as it becomes available.</p>	<p>Annual report to HUSoN in October</p>	<p>Assessment Committee (to guide the completion of the SPE by all parties involved)</p>	<p>SPE Report</p>	
<p>IV-A Notes:</p> <ul style="list-style-type: none"> ● 7-25-17: SPE is being reviewed as part of the 2017 self-study <ul style="list-style-type: none"> ○ In a review of the status – there are still multiple areas to verify completion (This section will be last), but the overall document is on-track for the October 2017 presentation to the faculty - TDA <p>Recommendations moving forward:</p> <ul style="list-style-type: none"> ● Gather feedback from faculty and others involved in data collection / entry / use for the Assessment Committees review. 						
<p>IV-B: Program completion rates demonstrate program effectiveness</p>						

Updated copy-created by Cindy Peterson/Oct. ,2015

First time passage: National FNP Board Certifications

	2013	2014	2015	2016	2017	2018
First time passage rate	12/13 (92%)	7/7 (100%)	5/5 (100%)	7/7 (100%)		
Meet target of 90%	Yes	Yes	Yes	Yes		

For those who failed the NCLEX:

Data collected in 2 year intervals to increase the N size.

With the lower failure rate and the more evenly distributed “problem areas” in the 2016/2017 grouping, it would seem the curricular gap identified from the 2015-2015 data set in Basic Care and Comfort has been at least partially addressed.

Percentage of Failing test takers who scored "Below The Passing Standard" in each area



Updated copy-created by Cindy Peterson/Oct. ,2015

IV-G: The program defines and reviews formal complaints according to established policies						
<u>IV-G Notes:</u>						
<u>Recommendations moving forward:</u>						

Updated copy-created by Cindy Peterson/Oct. ,2015

Appendix I

HUSoN Policies

Admission Policy

Testing Policy

Current 2017-2018 HUSoN Admission Requirements

From HUSoN Student Handbook-2017-2018 Pre-licensure BSN (p. 26-27)

II. BSN ADMISSION POLICY

A. BSN Admission Requirements:

- Graduation from an approved high school or credentials indicating equivalent preparation.
- SAT combined score of at least 1400 (or ACT equivalent); students with lower SAT scores must have a high school average of at least 89 (GPA 3.3)
- High school average of at least 86 (GPA 3.0)
- Completion of the following high school subjects with a grade of B or better
 - Four years of English
 - Two years of mathematics, including algebra 1 and 2
 - Two years of science including biology and chemistry
- Health care provider examination and current immunization record
- Meet essential qualifications

Students who do not meet the admissions criteria for the Nursing Program may apply for undeclared status and submit a Change of Major request at the end of the first academic year. It is recommended that students take courses from the freshman level program of study. There are a limited number of positions for change of major students and there is no guarantee of admission.

B. Change of Major to Undergraduate Nursing Program

Students may apply for a change of major after completing two semesters of academic work. To be considered for internal transfer students must have a GPA of at least 3.0. Students interested in the nursing major must submit a Change of Major form along with an essay that describes their rationale for selecting the profession of nursing and the potential strengths they would bring to the profession. The Change of Major process is competitive and students with the highest potential for success are selected. Admission is based on space available. An interview may be required. Students must meet the Essential Qualifications.

C. External Transfers to the Nursing Undergraduate Nursing Program

To be considered for external transfer, applicants must have a GPA of at least 3.0.

Applicants must submit an essay that describes their rationale for selection the profession of nursing and the potential strengths they would bring to the profession. Two references from professors and/or employers are required. For transfer credit, each course must be comparable to courses offered by Husson University and the nursing program. Grades of C or above (C+ or above for core science and nursing courses) will be considered for transfer credit. Applicants must meet Essential Qualifications standards.

From HUSoN Student Handbook 2017-2018 RN-BSN program requirements (p. 37)

Program requirements are as follows:

- Admission requirements of GPA 2.5
- Transfer up to 90 applicable credits toward the total of 120 credits needed for BSN
- Award block transfer nursing credits or equivalents at ADN/diploma level up to 39 credits
- Dual admission into both BSN and MSN programs for those potential candidates indicating desire to continue at the graduate level.

From HUSoN Student Handbook 2017-2018 Graduate Admissions (p. 40)

ADMISSION STANDARDS

Minimum admission requirements for the Graduate Nursing Program include at least two years recent acute or primary care experience, a 3.0 GPA in BSN/MSN coursework and a successful interview. Admission to the graduate program gives permission to the student to attempt graduate level work at Husson University. Admission does not imply that Husson guarantees that a student will necessarily graduate. Once admitted, it is up to the student to demonstrate the ability to perform at the graduate level. Students who do not demonstrate this ability will be dismissed.

When a student begins study at Husson University leading to a degree or certificate, he or she must meet the curriculum requirements in effect at that time. Should the curriculum requirements change, the student may choose to meet the new requirements or those in effect at the beginning of his or her enrollment. However, without prior notice, Husson University may at any time replace or update curricula and courses. All courses may not be offered during a given academic year. If a student should take a leave of absence for a calendar year or more, he or she is obligated to meet any new course curriculum requirements imposed by Husson University during that absence. Students must complete their degree within five years of matriculation. Courses are only accepted for transfer credit if they are less than five years old. We can only accept a maximum of nine (9) credits in transfer.

Testing Policy Addendum Fall 2017-2018

Updated by Cathi Goebel, Handbook committee chair

Posted on Google site under Student Handbook on 9/6/2017, Val Sauda and discussed in classes by faculty

Each program participates in standardized testing for assessment of student learning at key points in the curriculum.

Undergraduate

External Assessments:

In the undergraduate nursing program freshman through senior students will participate in external assessments, and are billed each year for standardized assessment testing in selected topic areas. ***External assessments are all done on laptops and therefore laptops are required for all nursing courses.*** When the results are used as part of course grade, specific grading criteria are identified in the course syllabi. Students will be required to participate in a LIVE NCLEX-RN review course as part of NU 425 during the last semester of the program.

- If a student scores \geq than or equal to 1000 on version 1 of any HESI RN Specialty or Exit Assessment, the student will not be required to remediate or take version 2 of the HESI assessment, if offered. If the student chooses to take version 2, the higher of the two scores will be recorded as part of the course assessment.
- If a student scores between 900 and 999 on version 1 of any HESI RN Specialty or Exit assessment, the student will not be required to remediate but will be required to take version 2 of the HESI assessment. The higher of the two scores will be recorded as part of the course assessment.
- If a student scored $<$ than or equal to 899 on version 1 of any HESI RN Specialty or Exit assessment, the student will be required to complete a remediation plan as outlined by the course faculty and provide documentation of remediation before being admitted to the second assessment (version 2), if offered.
- The student is strongly encouraged to complete a second remediation as outlined in the student's individual RN Specialty or Exit report of version 2.

Internal Assessments

- All nursing course exams will be given through ExamSoft ***and therefore Laptops are required for all courses. ExamSoft is not supported on any tablets except I pads.***
- All assessments will align with the NCLEX 2016 Blueprint (12-18% pharmacology, 11-17% physiological adaptation, etc.) and The AACN Baccalaureate Essentials
- Rounding of Assessment Scores: When the final course grade is calculated, the standard rounding rules are applied. Individual assessment scores are not rounded.
- Testing Blocks will be implemented in the spring of 2017. Students will be required to complete assessments within the scheduled block period unless prior approval is obtained from the course faculty.

Appendix J

Equipment Inventory

Manikins:

- **SimMan3G**
- **SimMan Essential**
- **Noelle**
- **Baby Hal**
- **Nursing Kelly vital Ann**
- **(3) Vital Ann**
- **Child Vital Ann**

Task Trainers:

- **(2) Chester chest**
- **(2) Seymour Butts wound models**
- **Avkin wearable trach vest**
- **Avkin wearable catheter insertion model**

Pumps:

- **(3) plum pumps**
- **(2) Alaris pumps**
- **Alaris syringe pump**
- **PCA pump**
- **(2) Kangaroo tube feed pumps**

(5) workstations on wheels with computers

Code cart

Propac

(5) Simpads

Isolation cart

Instructors provide recorded film for different procedures- uploaded in canvas

Appendix K

Faculty and Staff Teaching,
Practice and Qualifications

2017 Faculty teaching, practice and qualifications

Faculty & Professional Staff FT/PT Present Rank Year of Appointment Contract Status	Degrees Held Granting Institutions Certifications	Experience	Teaching/Course Assignments
Arno, Tracey FT-Professional staff Coordinator of Learning Resources and Simulation for SoN.	MSN: Nursing Education Husson University BSN- Husson College CHSE- Certified Healthcare Simulation Educator through Society for Simulation in Healthcare	29+ years critical care RN 10 years as experiential education through simulation	Learning Resource Coordinator, Simulation Coordinator
Beuk, Donna 1 FTE Chair/ Associate Professor 2017 Initial Contract	EdD – The Univ of Alabama/Tuscaloosa – Instructional Leadership w Nursing Education Specialization MSN – Univ of Mobile – Nursing Administration/Education BSN – Univ of Mobile ADN – Univ of Mobile CNE – Certified Nurse Educator – National League of Nursing	19+ years Registered Nurse 10+ Higher Education	NU 426 – Policy, Leadership, Mgmt NU 700 – Roles and Theories of Adv. Nursing
Campbell, Tammy 1 FTE Instructor 2015 Annual	MS Business - Healthcare Management - Husson University BSN - Husson University	26+ years Registered Nurse 2 years Higher Education	NU 323 - Adult Health II NU 424 - Adult Health III NU 425 - Nursing Senior Capstone
Laurie Eddy 1 FTE Assistant Professor 2006 Multi-year contract (renewal pending Spring 2018)	MSN/FNP University of Maine (Certified AANP) WHCNP- Certificate University of Penn. (certified NCC) BSN- University of Maine RN EMMC School of Nursing	42+ years Registered nurse 34+ years WHCNP 17 years FNP 11 years Higher Education	NU 324- Maternity and Newborn Nursing NU 808- Graduate Women's Health/OB Nu 100- Nursing Concepts He 111-

	BSPA- Concentration Adult Education - St. Joseph College		
Patricia Eldershaw 1 FTE Assistant Professor 2017 Initial probationary	MSN - Univ of Maine BSN - Univ of Maine at Fort Kent Post Doc - International Institute for Qualitative Methodology PhD - Univ of Waterloo MA - Acadia Univ BA - McMaster Univ	4 years Registered Nurse 5 years Higher Education	NU422 - Community Mental Health NU730 Interprofessional Education HE111
Cathleen Goebel 1 FTE Instructor 2011 Annual	MSN Oncology Nursing Rush University BSN University of Connecticut	32 years Registered Nurse in Oncology, Home Health and Hospice, and Pediatrics 6 years Nursing Educator	NU 211 & 212 Interventions I and II NU 315 Child Health
Diane Jenks 1 FTE Assistant Professor 2017 Initial probationary	MSN Nursing Education Western Governors University BSN, St. Petersburg College Associates Degree in Nursing, North Iowa Area Community College	24 years Registered Nurse in Med/Surg, Obstetrics, Critical Care, Cardiac Cath Lab, Staff Development. 2 years Nursing Educator	NU208 Nursing Assessment NU322 Adult/Family Health
Ramona Lazenby 0.5 FTE Professor FCNP Graduate Coordinator 2017 Annual	EdD - Auburn University - Curriculum and Supervision Post Master's Family Nurse Practitioner Certificate -- University of Alabama at Birmingham MSN - Troy University - Adult Health and Education BSN - University of Alabama at Birmingham	11 years Critical Care 5 years Home Health 20 years Family Nurse Practitioner 30+ years Higher Education (Faculty and Associate Dean)	NU 806

	CNE -- Certified Nurse Educator – National League of Nursing FNP-BC - American Nurses Credentialing Center		
Kelly Macauley 1 FTE Assistant Professor 2017 Initial probationary	EdD-University of Phoenix in Educational Leadership with a specialization in Educational Technology DPT- MGH Institute of Health Professions BA- Williams College CCS- Board Certified Clinical Specialist in Cardiovascular and Pulmonary Physical Therapy GCS- Board Certified Clinical Specialist in Geriatric Physical Therapy	16+ acute & critical care as PT 8+ years higher Education	
Alicia Mooney 1 FTE Assistant Professor 2017 Initial probationary	MSN-Nursing Education-Saint Joseph's College BSN- University of Maine, Orono CHPN- Certified Hospice and Palliative Care Nurse-Hospice and Palliative Credentialing Center	27+ years RN experience, 24 years home care, 20 years hospice, 5 years adjunct faculty	NU/NL412- Community Health Nursing-preceptor NL427-Senior Practicum-preceptor NU 320- Nursing Research
Jinger Pepin 1 FTE Clinical Coordinator 2014 Annual	BSN - Husson University enrolled at SNHU MSN education	16+ pediatric, level 2 NICU, PICU RN 5 years pediatric home health/case management 1 year school nurse 3 year clinical coordination	Clinical Coordinator

<p>Cynthia Peterson Assessment and Curriculum Coordinator 2015 Annual</p>	<p>MS -- Arizona State University - Critical Care PMC/NEd -- Husson University BSN -- Husson University CNE -- Certified Nurse Educator – National League of Nursing</p>	<p>30+ years Registered Nurse 17 years Higher Education</p>	<p>Coordinator, Nursing Curriculum & Assessment NU704 - Advanced Health Assessment</p>
<p>Valerie Sauda 1 FTE Assistant Professor 2014 Third year-probationary</p>	<p>PhD University of Maine (anticipated completion Fall 2018) Interprofessional Studies with dual specialization in Nursing and Education MSN-University of Southern Maine, concentration in Community Health Nursing, BS-Biology, University of Southern Maine Fellow, Maine Gerontological Society RN-C-Gerontology nursing, ANCC</p>	<p>25 years Registered nurse 11+ years Higher Education</p>	<p>NU/NL412- Community Health Nursing NL427-Senior Practicum</p>
<p>Amanda Savage 1 FTE Healthcare Simulation 2017 Initial</p>	<p>BSN- University of Southern Maine Exercise Physiology M.ed - University of Maine Orono Athletic Training BSN- University of New England</p>	<p>10 Years Registered Nurse Critical Care and Nursing Leadership. Currently enrolled in a DNP program</p>	<p>Healthcare Simulation Specialist</p>
<p>Priscilla Young 1 FTE Assistant Professor 2016 Initial</p>	<p>DNP-Mass General Hosp Institute of Health Professions MBA - Husson Univ MSN - Husson College BSN - Univ Southern ME BSW - Univ Southern ME ADN - Univ ME Augusta Post Master's Psych NP - Husson College Family Psych NP Certificate - Husson Univ</p>	<p>21+ years Registered Nurse 12+ years PMHNP/CNS 2+ years higher education</p>	<p>NU/NL 422 - Community Mental Health NU 810 - NU 812 NU 814</p>

	PMHNP- BC-Psychiatric Mental Health Nurse Practitioner PMHCNS-BC-Psychiatric Mental Health Clinical Nurse Specialist LSW-Licensed Social Worker		
Husson Fellow			
Teresa Steele			
Nursing Professor Emerita FT Interim Dean COHE	PhD- The Union Institute & University - Organizational Behavior MSN- Univ of Texas (UTEP) Psychiatric Mental Health Nursing MEd-Univ of Maine Adult Education BUS-Univ of Maine Diploma-Mercy Hospital	52 years RN including 16 years APRN 38 years Higher Education Faculty, Director,Dean	
Nursing Faculty/PT didactic Adjuncts			
Denise Dunne 0.5 FTE Instructor Semester 2017	MA-Azusa Pacific Leadership & Organizational Studies-Azusa Pacific Univ BS-Healthcare Management-St. Francis Univ RN-Saddleback College	25 years Registered Nurse 3+ years Higher Education	
Judy Duvall 0.5 FTE Instructor Semester 2017	EdD-The University of Alabama: Instructional Leadership with Specialization in Nursing Education MSN- University of Central Florida: Nursing Education BSN-Graceland University, Lamoni, IA	40+ years in critical care, cardiac cath lab, Cardiac/Pulmona ry Rehab 10 years nursing faculty	

	RN-Evanston Hospital School of Nursing, Evanston, IL		
Debbie Faulk 0.5 FTE Instructor 2017	PhD - Auburn University: Public Administration/Policy MSN - Troy University, Montgomery, Al BSN Auburn University Montgomery, Al	RN-BSN coordinator 2001-2015 ICU, leadership, evidence based practice	NU441 Transition to RN-BSN, NU449 Undergraduate policy, NU740 Policy
Melesia Henry 0.5 FTE Instructor 2017	PhD-Cappella University MSN-University of Mississippi BSN-Mississippi College	35 years Education, Maternal newborn and medical surgical, leadership	
Lois (Ginny) Langham 0.5 FTE Instructor 2017	DNP in Community/Public Health Administration- Univ of South Alabama, Mobile, AL MSN - Univ of South Alabama, Mobile, AL BSN - Auburn Univ at Montgomery, Montgomery, AL	24+ years Registered Nurse; 5 years Home Health; 17+ years Higher Education	
Nathaniel Lesser 0.5 FTE Instructor 2017	RN-MSN Mass General Institute of Health Professions-Pediatric NP-1998 BA-Bethany College Philosophy and Communications-1994	20 years- Registered Nurse 17 years-Clinical Preceptor 1 year-Graduate Nursing Education	NU:807: Family NP:Intro to Pediatrics
Kathleen Wall Professor Emerita 0.5 FTE 2017	PhD Clemson University - animal physiology - 1975 MS Clemson University BS University of Florida Post Doc in anatomy - University of Maine	42 years university teaching - courses taught: anatomy, physiology, pathophysiology, neurophysiology, et al.	Nu 706 Advanced Patho Nu 707 Neurobiology

Appendix L

Adjunct Faculty Teaching, Practice and Qualifications

Qualifications of Clinical Nurse Educators
2017

Clinical Nurse Educators	Degrees Held Granting Institutions Certifications	Experience	Teaching/Course Assignments
Elizabeth O'Toole	BSN - University of Maine/Massachusetts Certification Hospice/Palliative Care (CHPN)	26 years experience Critical care/ Hospice/Medical/ Surgical/Palliative Care	NL 323 Adult Health II Clinical
Megan Dube	BSN - Husson University	4 years experience Cardiac/respiratory Medical	NL 323 Adult Health II Clinical
Kim Newey	BSN - University of Maine	11 year experience Surgical/Cardiac/ Emergency	NL 322 Adult Health I Clinical
Patricia Trask	BSN - Huson University	26+ years experience Medical/Surgical/ Critical Care/Leadership	NL 322 Adult Health I Clinical
Amber Willey	BSN - University of Maine	13 years experience Medical/Surgical/ Critical Care/Cath Lab	NL 323 Adult Health II Clinical NL 212 SP17
Katherine Estey	BSN - University Maine	8 years OB, ED, M/S, CCU, Nursing Supervisor & Informatics	NL 322 Adult Health I Clinical
Amanda Savage	10+ years experience BSN- University Southern Maine Master of Education - Exercise Physiology - USM BS - Athletic Training	Critical Care/Medical/Surgical /Supervisor	NL 323 Adult Health II Clinical
Kristina Leonard	MSN (University of Maine), BSN (University of Maine), CCRN	17+ years Medical/Surgical Critical Care/ Management/Clinical Educator	NL 322 Adult Health I Clinical
Ellen Beauchaine	BSN- St. Joseph's College, Maine BA- Liberal Arts/ English- RI College, Providence, RI CPR Instructor 21 years	23 years experience Medical/Surgical/OR/ PACU/Case Management	NL 208 Health Assessment Lab

	Army Nurse Corp - Captain		
Meghan MacDonald	BSN - Husson University	1 year experience Medical/Surgical	NL 208 Health Assessment Lab
Sandy Benton	BSN 1991 University of South Florida MSN 1993 University of South Florida CCRN certification	Critical care nursing, critical transport, nurse manager of education at EMMC	NL 208 Health Assessment Lab NL427 simulation and mentoring
Barbara Brooks	BSN - Husson University RN Diploma - EMMC	33 years RN Critical care/Dialysis/ Interventional Radiology	NL 208 Health Assessment Lab Simulation
Wendi Mitchell	BSN - Husson University	23 years Occupational Health Long term/Skilled Acute-pulmonary/ cardiac CCU/ICU/PICU PACU	NL 208 Health Assessment Lab
Lisa St. Pierre	BSN - University of Maine	10 years experience Medical/Surgical/ Specialty Outpatient/ Primary Care	NL 208 Health Assessment Lab
Vanessa Henry	BSN - University of Southern Maine	4 year sexperience Medical/Surgical/ Critical Care	NL 208 Health Assessment Lab
Glenna McDaniel	BSN-St. Francis Xavier, Antigonish, NB, Canada MSN-student, University of Maine	14years-interventional radiology and vascular access/Critical Care	NU412 Community Health clinical-Fall, 2017
Deborah Deans			NU412 Community Health clinical-Fall 2017
Rachel Brooks	BSN-Husson University CPR Instructor	21 years of experience clinical nurse educator, acute rehab staff nurse, charge nurse	NL211 Interventions Lab
Mary Nichols	BSN- University of Maine Orono	10 years clinical nurse educator ortho/neuro unit	NL211 Interventions Lab
Louise Banville	BSN-Husson University AD- EMCC	28 years of experience	NL211 Interventions Lab

		staff nurse med/surg, acute rehab, ortho, charge, IS education specialist	
Lisa Adams	BSN-University of Maine Orono	13 years experience CPCU, staff development, nursing supervisor	NL211 Interventions Lab
Holly Hogan	BSN-Husson University	17 years experience Cardiac, CCU, endoscopy	NL211 Interventions Lab
Nancy Prescott	BSN-Rhode Island College PMP- Project Management Professional	35 years of nursing experience 18 years ICU experience, care coordinator, project manager	NL 211 Interventions Lab
Monique Babineau	BSN-Saint Francis Xavier University ACLS, PALS, CPR Instructor Forensic examiner SAFE TNCC, CCRN	25 years experience long term care, ED, ICU, ambulatory surgical staff nurse, ground transport team	NL 211 Interventions Lab
Lynn Johnston	BSN-University of Maine MBA- Husson University MSN (expected graduation 2018) CPR instructor CNA, CRMA instructor	30 years experience in acute care, management, and educating roles. Current Staff Development Coordinator at Maine Veterans Homes	NL 212 SP17
Heather Campbell	BSN-Husson University	21 years experience as staff nurse in acute rehabilitation at EMMC	NL 212 SP17
Elizabeth Hawthorne	BSN - University of Maine 2004 Chemo/Biotherapy Certification	12.5 years nursing experience including Oncology and Infusion Nursing	NL 212 SP17
Shelley Ryan	BSN-University of Maine Orono CPR, PALS Instructor	21 years of experience staff pediatric/PICU nurse, charge, staff developer	NL315 Child Health
Laurie George	BSN-University of Southern Maine BS - Child Dev.	30 years experience acute pediatric staff nurse, PICU, charge	NL315 Child Health

	University of Maine Orono CPN	nurse, clinical educator	
Barbara Todd	CPN BSN - University of Maine BS Biology - Virginia Commonwealth University	22 years experience Pediatric Nursing, PICU	NL315 Child Health
Charles Hogan	BSN from Husson 2000	Med/surg tele Emergency EMMC and St Joes Clinical educator emergency department EMMC Float nurse/House resource EMMC Flight Nurse Lifeflight of Maine Base manager Lifeflight of Maine Clinical educator Husson university USAF Veteran	Adult Health 3 experiential experiences NL212 simulations

Appendix M

Faculty/Student Ratios By Course and Sites

**Appendix N- HUSoN Faculty/Student ratios across courses and clinical sites
Fall 2017**

A. Undergraduate program-Pre-licensure BSN

- Course ratios of faculty to student-
 - HU maintains a course ratio up to a maximum of 1 faculty:40 students
 - SON maintains a course ratio in general of 1 faculty:32 students as determined
 - In laboratory components of the courses the ratio is 1 faculty:8 students
 - In clinical components of the courses, the ratio is determined by both Maine State Board of Nursing Rules as well as site specific clinical policy.
 - MSBN maintains a 1 faculty:8 students in direct patient care in clinical settings
 - Eastern Maine Medical Center maintains a 1 faculty:6 students ratio in direct patient care in clinical settings

Supporting information:

Maine State Board of Nursing faculty:student ratio: Please refer to section 5 (h) Teaching load and faculty responsibility found at: <http://www.maine.gov/boardofnursing/docs/Chapter%207.pdf>

h. Teaching load and faculty responsibility

The teaching load shall be interpreted as including all classroom and laboratory teaching, as well as clinical laboratory guidance and conference time. Faculty-student ratio will be no greater than 1:8 in clinical areas involving direct patient care.

The change in ratio from 1:10 to 1:8 will be effective July 1, 2001.

Eastern Maine Medical Center policy "Student Nurses: Medication Administration":
Patient care Directive #03.007:

IV Procedure

EMCC Level One / Junior Nursing Students

- A. EMCC Level One and junior nursing students will be supervised by their nursing faculty during medication preparation, administration and documentation
- B. Medications that may be administered at this level are via oral, IM, subcutaneous, and PR routes.
- C. Medications for administration will be obtained through the instructor. Clinical faculty will have access to the Pyxis machines and may withdraw medications for up to six students per clinical shift
- D. If the RN assigned to the patient has concerns about the students' medication administration process, he/she will discuss these concerns with the student and/or clinical instructor prior to the end of the students shift.

EMCC Level Two / Senior Nursing Students

- A. EMCC Level Two and senior nursing students will be supervised by their nursing faculty during medication preparation, administration and documentation
- B. Medications that may be administered at this level are via oral, IM, subcutaneous, PR, and IV routes.
- C. Medications for administration will be obtained through the instructor. Clinical faculty will have access to the Pyxis machines and may withdraw medications for only six students per clinical shift
- D. Senior nursing students or EMCC Level Two nursing students may hang IV solutions with additives; prepare IV meds, push IV meds change IV drip rates and make adjustments to the IV pump if accompanied by the faculty. Narcotics must be countersigned by the faculty or registered nurse.
- E. If the RN assigned to the patient has concerns about the medication administration process, he/she will discuss these concerns with the student and/or clinical instructor prior to the end of the students shift.

Undergraduate program-RN-BSN online program

- Course ratios of faculty to student are being moved in the HUSoN to 1:25 students based on information provided by Dr. David Haus, Director of Online and Extended learning found at [Online class caps](#) and also at [Nursing class caps](#)
- Experiential learning experiences are individual to the student with 1:1 faculty oversight

Graduate program-FNP and PMHNP programs

- Course ratios of faculty to student are currently 1 faculty: students
- Clinical components of the course are 1 preceptor:1 student

Graduate program-MSN-education and post-Masters certificate programs

- Course ratios of faculty to student are currently 1 faculty:
- Clinical components of the course are 1 preceptor:1 student