STUDENT LEARNING ASSESSMENT REPORT

SUBMITTED BY: C.KOPAC AND M. VENZKE
DATE: JUNE 26, 2014 REvised JANUARY 2015 TO MEET UAC RECOMMENDATIONS SEE BELOW-HEADING HIGHLIGHTED IN GREY

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EXECUTIVE SUMMARY

List all of the program’s learning outcomes: (regardless of whether or not they are being assessed this year)

<table>
<thead>
<tr>
<th>Learning Outcome</th>
<th>Year of Last Assessment</th>
<th>Year of Next Planned Assessment</th>
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</thead>
<tbody>
<tr>
<td>I. DEVELOP NEW APPROACHES TO ADVANCED NURSING PRACTICE AND HEALTH CARE DELIVERY BASED ON SCIENTIFIC KNOWLEDGE AND THEORIES OF NURSING AND OTHER DISCIPLINES</td>
<td>2013-2014</td>
<td>2013-2014</td>
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<tr>
<td>II. DEMONSTRATE CLINICAL, ORGANIZATIONAL, AND SYSTEMS-LEVEL LEADERSHIP THROUGH THE DESIGN OF INNOVATIVE MODELS OF CARING</td>
<td>2011-2012</td>
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<tr>
<td>III. DESIGN METHODS FOR EVALUATING CLINICAL OUTCOMES TO DIRECT EVIDENCE-BASED PRACTICE FOR IMPROVING HEALTH CARE</td>
<td>2012-2013</td>
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<tr>
<td>IV. UTILIZE KNOWLEDGE DRAWN FROM EPIDEMIOLOGICAL, STATISTICAL, AND TECHNOLOGICAL DATA TO IMPLEMENT QUALITY IMPROVEMENT INITIATIVES FOR PRACTICE WITH INDIVIDUALS, AGGREGATES, AND POPULATIONS</td>
<td>2010-2011</td>
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<tr>
<td>V. LEAD INTER-PROFESSIONAL TEAMS IN THE ANALYSIS OF COMPLEX PRACTICE AND ORGANIZATIONAL ISSUES</td>
<td>2011-2012</td>
<td></td>
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<tr>
<td>VI. DEMONSTRATE LEADERSHIP IN HEALTH POLICY AT THE STATE, LOCAL, AND FEDERAL LEVEL</td>
<td>2011-2012</td>
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<tr>
<td>VII. DEMONSTRATE ADVANCED LEVELS OF CLINICAL JUDGMENT, SYSTEMS THINKING, AND ACCOUNTABILITY IN DESIGNING, DELIVERING, AND EVALUATING EVIDENCE-BASED CARE TO IMPROVE PATIENT OUTCOMES</td>
<td>2012-2013</td>
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</table>
IX. USE CONCEPTUAL AND ANALYTICAL SKILLS IN EVALUATING THE LINKS AMONG PRACTICE.

Describe how the program’s outcomes support Marymount’s Mission, Strategic Plan, and relevant school plan:

The nine Doctor of Nursing Practice (DNP) program outcomes are derived from Marymount University's mission and that of the Malek School of Health Professions. The University mission “emphasizes academic excellence at the undergraduate and graduate levels. Committed to the liberal arts tradition, the University combines a foundation in the arts and sciences with career preparation and opportunities for personal and professional development.” Well aligned with the University, the Malek School is “committed to improving health and wellness through the advancement of scholarship, leadership and service”. As the highest level of academic preparation for clinical nursing, the DNP program builds on our Master’s degree program by “providing education in leadership, evidence-based practice, quality improvement, systems thinking and population-based care.” The program prepares clinical leaders poised to improve health and health care across the nation and the world.

Provide a brief description of the assessment process used including strengths, challenges and planned improvements:

The Department of Nursing recognizes assessment as the foundation for a continuous process of quality improvement. Several key assessment activities occurred during the 2013 academic year. In August 2013, the faculty submitted a self-study report to the Commission on Collegiate Nursing Education (CCNE) as part of the re-accreditation process. This self-study process was aimed at evaluating the success of the DNP program in achieving its program outcomes within the framework of the university and school mission, vision, strategic plan and the American Association of Colleges of Nursing’s (AACN) The Essential of Doctoral Education for Advanced Nursing Practice. The self-study was followed by an accreditation site visit by a CCNE review team in October 2013 to validate the self-study. The rigorous assessment process resulted in the affirmation of undergraduate and graduate programs meeting the CCNE accreditation standards. As a result, all nursing programs received the maximum re-accreditation term of ten years. Throughout the year, department leadership and faculty conducted an assessment and improvement process to assure that the program was meeting its goals.

A major strength of the process was that multiple measures were used to assess the achievement of learning outcomes. These measures included course examination, journaling student course evaluation and planned evaluation of application of foundational knowledge to advanced nursing practice. The program continues to be challenged by low enrollments. A decision was made to suspend admissions for the 2014-15 academic year, as continuing with the limited number of students/cohort is not fiscally sound and prohibits the rich dialogue and engagement of a critical mass of students and faculty. All regional competitors offer a number of courses online; several programs are totally online with required limited face-to-face contact time. Faculty and leadership are in discussion about the future transition to a hybrid program delivery. Additionally, the comprehensive examination requirement
Academic Year: 2013-2014  
Program: DNP Program

contrasts with the expectations of DNP programs, both regionally and nationally. Faculty will evaluate the use of a professional portfolio as well as a more rigorous capstone project to replace the comprehensive examination. We will retain student presentations to demonstrate how the capstone project integrates knowledge and skills developed during the program. The following table provides an update on the planned improvements from 2013-2014, in addition to a response to the assessment committee’s review of the previous learning assessment. Planned improvements for the 2014-2015 academic year are included later in the assessment document.

**Describe how the program implemented its planned improvements from last year (2012-2013):**

<table>
<thead>
<tr>
<th>Outcome</th>
<th>Planned Improvement</th>
<th>Update (Indicate when, where, and how planned improvement was completed. If planned improvement was not completed, please provide explanation.)</th>
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<tr>
<td><strong>DEVELOP NEW APPROACHES TO ADVANCED NURSING PRACTICE AND HEALTH CARE DELIVERY BASED ON SCIENTIFIC KNOWLEDGE AND THEORIES OF NURSING AND OTHER DISCIPLINES</strong></td>
<td>Ongoing monitoring of students’ ability to complete residency during the academic semester. Rationale: The comprehensive nature of this experience and the minimum 300 hour requirement demands significant faculty-student dialogue and additional lead time to secure agency approval. While not originally identified as a planned improvement, during the year faculty identified: the need to develop and approve a DNP Guide and the creation of a portfolio requirement. Rationale: The Guide provides direction for doctoral students and incorporates the portfolio as an integral part of doctoral coursework and residency. Portfolio development enhances student development as a clinical expert and leader in health/healthcare improvement.</td>
<td>The DNP director, graduate chair and faculty identified the need to begin the discussion and pursuit of the residency placement earlier in the prior semester. While there was some improvement noted by the director, the time commitment during a one semester period presents continued challenges for doctoral students, all of whom are enrolled part-time. The Guide (attached) was well received by the students and has helped students to stay focused in achieving their goals. Due to the challenges of students securing their individual residencies, students were not able to complete residencies in one semester. Flexibility is built into the residency and early awareness of the need to secure the residency has been emphasized to the students.</td>
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<tr>
<td><strong>DESIGN METHODS FOR EVALUATING CLINICAL OUTCOMES TO DIRECT EVIDENCE-BASED</strong></td>
<td>While there were no specified planned curricular changes as program</td>
<td>Based on discussions in faculty meetings and systematic review, the focus on the</td>
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</table>
Provide a response to last year’s University Assessment Committee review of the program’s learning assessment report:  
(List each recommendation and provide a specific response to each)

Report was accepted as submitted

Last years University Assessment Committee recommended the following:

“There should be improvements given for each outcome in the “using to make improvements” section of the report. Even though there are not curricular changes, there should be actions that will be taken based on what was learned from the assessment process. The changes do not have to be extensive in nature. Please see Planning and Institutional Effectiveness for more clarification, if necessary.”  
This has been noted; since there were no planned improvements in last year’s report this is not specifically addressed. Please refer to table above.
Outcome and Past Assessment

Learning Outcome 1: DEVELOP NEW APPROACHES TO ADVANCED NURSING PRACTICE AND HEALTH CARE DELIVERY BASED ON SCIENTIFIC KNOWLEDGE AND THEORIES OF NURSING AND OTHER DISCIPLINES

Is this outcome being reexamined? Yes
The outcomes were partially met in previous reports. The timeline for residency planning was accelerated in effort to have student complete residency and assess this data in the student journal/log. The performance standard for the third outcome was changed to 100% and a decision made to evaluate the outcomes for a second year

Assessment Activity

<table>
<thead>
<tr>
<th>Outcome Measures</th>
<th>Performance Standard</th>
<th>Data Collection</th>
<th>Analysis</th>
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<tr>
<td>Explain how student learning will be measured and indicate whether it is direct or indirect.</td>
<td>Define and explain acceptable level of student performance.</td>
<td>Discuss the data collected and student population</td>
<td>1) Describe the analysis process. 2) Present the findings of the analysis including the numbers participating and deemed acceptable.</td>
</tr>
<tr>
<td>NU 702 Epidemiology Paper project (Direct) Appendix 1</td>
<td>100% of the DNP students will receive a grade of 85 or better</td>
<td>No students are enrolled in course for Summer 2014</td>
<td>This standard was not met. Enrollment is low; admissions to DNP Programs suspended for 2014-2015.</td>
</tr>
<tr>
<td>NU 705 Regression Analysis Assignment (Direct) Appendix 2</td>
<td>100% of the DNP students will receive an 85% or better on the selected assignment</td>
<td>All students scored an 85% or better on the selected assignment</td>
<td>This standard was met. This assignment requires creative teamwork from the student and each student receives an independent grade. Of the six students who did the assignment, all were successful and all exceeded a score of 85% or better.</td>
</tr>
<tr>
<td>DNP Exit Interview (Indirect) Appendix 3</td>
<td>100% of students will evaluate that they have successfully achieved this outcome</td>
<td>100% of the three students said that indeed they had met this outcome</td>
<td>This standard was met. Each student articulated the new approaches they had learned in the program of study. Exit Interview is attached.</td>
</tr>
</tbody>
</table>

Interpretation of Results

Extent this Learning Outcome has been achieved by students (Use both direct and indirect measure results):
This learning outcome related to the foundational knowledge of advanced practice was partially met. Since there were no students enrolled in NU 702, there was no way to have grades evaluated for the NU 702 Epidemiology Paper. The remaining two outcome measures address student evaluation, individual course evaluation and overall summative evaluation.

**Program strengths and opportunities for improvement relative to assessment of outcome:**

Use of the epidemiology paper to evaluate student application of epi concepts to clinical challenges remains an effective means of evaluating whether students have developed the knowledge and skills needed for advanced practice. Enrollment challenges prevented our ability to offer the course and thereby, evaluate student skills. It has been recognized that hybrid or online delivery of the Epidemiology course, along with other foundational courses in the DNP Program, would greatly enhance student enrollment. A number of options are available to us as we explore hybrid or online offerings.

**Discuss planned curricular or program improvements for this year based on assessment of outcome:**

With admissions suspended for this year, our planned improvements will be related to changing the delivery model for the DNP courses, including NU 702.

Process improvement: NU 702 course was scheduled to be taught by a professor emeritus and NU 705 is taught by a professor outside of the Department of Nursing. In the future, it will be prudent to have clear communication with the faculty member collecting the data for the outcome measure. The measurement tool/rubric should be submitted to the Graduate Chair (or designee) or the Department of Nursing at the time the outcome is selected for assessment. Rubric for the NU 705 regression assignment in fall 2013 is no longer available.
Learning Outcome 2: APPLY ETHICAL ANALYSIS WHEN GENERATING POLICY, RESEARCH, AND PRACTICE

Is this outcome being reexamined?  ☐ Yes  ☑ No

If yes, give a brief summary of previous results (including trends) and any changes made to the program.

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<td>1) Describe the analysis process. 2) Present the findings of the analysis including the numbers participating and deemed acceptable.</td>
</tr>
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<td>DNP Program Comp Oral Exam Presentation (Direct) Appendix 4</td>
<td>100% of the students will successfully address application of ethical analysis in research and practices their oral comp exam</td>
<td>100% (4 of 4 students) of the students achieved this goal</td>
<td>Of the four students taking the oral comp exam, all four students addressed ethical issues when describing their proposed scholarly project.</td>
</tr>
<tr>
<td>NU 703 Research Completion of the (8) CITI modules (Direct) (MU IRB website)</td>
<td>100% of students will achieve an 80% or better on completion of the (8) CITI modules on first attempt</td>
<td>100% of the students achieved this goal</td>
<td>This standard was met. Seven students took this course and all students submitted certificates of completion (the CITI system mandates an 80% score, or better). The use of the CITI modules is the “gold standard” for teaching ethical standards involving human participants.</td>
</tr>
<tr>
<td>DNP Exit Interview (Indirect) Appendix 3</td>
<td>100% of students will evaluate that they have successfully completed this outcome</td>
<td>Three out of the four students who did an exit interview reported that ethics was clearly a part of their learning in the DNP Program.</td>
<td>This standard was not met. One student articulated that she would have preferred more coursework in ethical behavior in organizations. The program has evolved since the time this student did coursework. (See program strengths and opportunities for improvement below.)</td>
</tr>
</tbody>
</table>
Academic Year: 2013-2014
Program: DNP Program

Interpretation of Results

Extent this Learning Outcome has been achieved by students (Use both direct and indirect measure results):
As the highest academic preparation for the practice of nursing and as a doctoral program within a university with a culture of values, the DNP demands a commitment to the analysis of the ethical challenges within health care today. Whether graduates will be engaged in policy, direct care or research at private or public sector institutions, ethical principles should guide their practice. Examination of ethical dilemmas of advanced nursing practice and health care within the student experience allows for a strengthening of skills in this area. This expected outcome for doctoral coursework has been met. One student during her exit interview did relate that she would have liked more applied ethics in her coursework. Following this input, in 2011-2012, the Graduate Chair and the Director of the DNP Program made substantive changes, based upon curricular assessment and the need to align with DNP Essentials*. One of the changes was the development of a new course entitled “Leadership, Quality and Ethics in Health Care Organizations” which should lead to a heightened focus on ethics in practice.

Program strengths and opportunities for improvement relative to assessment of outcome:
These students were under the 2010-2011 graduate catalog. At that time the DNP Program included a course in Cultural Diversity that the students were required to take. During the 2011-2012, the Graduate Chair and the Director of the DNP Program made substantive changes, based upon curricular assessment and the need to align with DNP Essentials*. One of the changes was the development of a new course entitled “Leadership, Quality and Ethics in Health Care Organizations.” This course is now a part of the curriculum and future students may well evaluate this outcome differently.

Below is requested information/revision by UAC: Articulate database reason for dropping the cultural diversity course

In 2012-2013, the DNP program overall goal was to increase enrollment and also make refinement in course content areas to meet the eight curricular elements/competencies in the American Association of Colleges of Nursing’s (AACN) The Essential of Doctoral Education for Advanced Nursing Practice. (“This document is hyperlinked. Page 1 of the document lists the 8 elements). The “DNP Essentials” outline the curricular elements and competencies that must be present in programs conferring the Doctor of Nursing Practice degree.

The following steps were taken to make revisions in MU DNP program:

- Summer 2012/Fall 2012 A new course to include content in leadership in organizations, ethics and quality improvement was developed to meet DNP essentials
- Increasing the number of program credits (with one additional 3 credit course) was not an option. Dean Cappello wanted our program to be competitive (not more expensive) with other DNP programs in the area.
The Department of Nursing faculty voted yes to the curricular changes (see attached memo - appendix 5) in the DNP program in the fall 2012. Spring 2013, Graduates Studies and Faculty Council approved the changes. The leadership, quality and ethics course was adopted as a new course in the curriculum and the cultural diversity course was deleted as a required course. The revised DNP curriculum is listed in the 2013-2014 graduate catalog.

Faculty acknowledged that cultural diversity content was important and that these concepts could be threaded through other DNP coursework rather than in a stand-alone course.

Discuss planned curricular or program improvements for this year based on assessment of outcome:

When current students move into this new course, we will evaluate their attainment of this outcome through written work and will tailor an exit interview question to measure student perception of skill in this area.
**Outcome and Past Assessment**

**Learning Outcome 3:** Use conceptual and analytical skills in evaluating the links among practice, organizational, population, fiscal and policy issues.

Is this outcome being reexamined? □ Yes □ No

If yes, give a brief summary of previous results (including trends) and any changes made to the program.

### Assessment Activity

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| **NU 800 DNP Residency**
- is completed during one semester (Direct)
- Student journal/log record should link this learning outcome to activities performed in residency/practicum
- Appendix 6 | 100% of students will show evidence of this outcome | Practicum journal and logs (no data collected). Tracking of hours in residency (See additional updated comments below this table)
- 7 out of 7 DNP students with residency sites documented this outcome in the journal/log fall 2014
- 1 student did not attempt to complete the course or develop a residency site | All students enrolled in the Residency received an Incomplete because of the challenges of securing residency placements, as well as, doing residency hours within one semester. It is anticipated that by the completion of Fall 2014 semester all students will have completed the residency. Accelerated planning was not begun early enough to have students begin during the first week of semester.
- The standard was partially met. All 7 students recorded this outcome and linked it to the practicum, however, there was very little student reflection on how the outcome was attained. Student often did not self reflect but provided a description of what they did in the practicum. One student stopped attending the course and never completed the practicum. |
| **NU 801 Project Proposal**
- (Direct)
- Appendix 7 | 100% will achieve an 85% or better on their project proposal which addresses the use of | Six of the seven students in NU 801 course achieved an 85% or better on their | This standard was partially met. 85% of the students successfully completed a project proposal. One student, with challenges in writing and paper organization, had difficulty delivering a workable |
### Interpretation of Results

**Extent this Learning Outcome has been achieved by students** *(Use both direct and indirect measure results):*

This learning outcome has been met.

**Program strengths and opportunities for improvement relative to assessment of outcome:***

The reported outcome measures account for coursework activity as well as residency and is an outcome requiring the synthesis and integration of all of the DNP program work. We must identify ways to improve student completion within one semester, so that they are able to meet course/residency requirements and outcomes in a timely fashion. If the outcomes require more than one semester to attain, we will explore splitting credits so that the expectations are realistic.

**Discuss planned curricular or program improvements for this year based on assessment of outcome:**

The execution of the residencies frequently takes longer than one semester. Data collection does not fall into the academic schedule. Perhaps another measure, e.g., a paper grade from the “Leadership, Quality and Ethics in Health Care Organizations” course (NU 707) might be a more stable measure.

Below is requested information/revision by UAC: Better connect residency with learning outcomes

The DNP journal/log template has 2 purposes. One to document residency/practicum hours in the DNP program and secondly it requires the students to document how the activities performed in the practicum are linked to DNP program outcomes. Two other documents are important in order to complete the journal/log. Journal instructions about what types of activities are recorded and the numbered DNP program outcomes (see Appendix 5)
On the journal log recording sheet template, students match the DNP Program outcome number (learning outcome) to the activity performed and then provide a reflection. The student can record multiple numbers (outcomes) for various activities performed. Without the DNP program outcome document, the reader cannot understand the meaning of the listed numbers in column#4 of the journal/log template.

Opportunities for improvement: The journal/log template does not have explicit instructions on how to complete it. Secondly, based on review of student completed documents student reflection is sparse and often is not a true self reflection on how the activity meets the program outcome.

Additional planned curricular improvements: Consider separating out the journal from the log document. Improve instructions to complete log template and recording of practicum activities and hours. Faculty also to develop a rubric for journal and self reflection.

A complete student learning assessment report includes appendix of rubrics, survey questions, or other relevant documents and information.

Attached to this report are the following appendices:

Appendix 1: NU 702 project rubric
Appendix 2: NU 705 Regression analysis homework assignment in syllabus per Dr. Michael Cassidy, January 2015
Appendix 3: DNP exit interview survey
Appendix 4: DNP comp oral exam rubric by Dr. Cathy Kopac
Appendix 5: Memo documenting changes in the DNP program 2012
Appendix 6: DNP Journal/Log, Journal Instructions and DNP program outcomes document
Appendix 7: NU 801 Nursing project Final Report
DNP Guide