STUDENT LEARNING ASSESSMENT REPORT

PROGRAM: Doctor of Nursing Practice
SUBMITTED BY: Maureen Moriarty DNP, ANP-BC
DATE: September 30, 2017
BRIEFLY DESCRIBE WHERE AND HOW ARE DATA AND DOCUMENTS USED TO GENERATE THIS REPORT BEING STORED: Data used to generate this report are stored at the University on the MSHP shared drive and in files on the chair's and faculty computers. There are hard copies of preceptor evaluations, student journals, and papers in locked cabinets in the main office of the MSHP. Data are accessible to only faculty and staff.

EXECUTIVE SUMMARY

Program description from the Course Catalog: Please copy and paste the current year's catalog description of this program. This is generally a one-two paragraph description immediately following the name of the program. Please be sure to include the listing of program outcomes as printed.
 Marymount's Doctor of Nursing Practice (D.N.P.) Program provides the knowledge, skills, and abilities needed to negotiate and improve the health care system. Acquired skills include those needed to develop evidence-based practice protocols, develop and utilize databases, and apply epidemiological methods. Students will endeavor to develop new models of care delivery and to become expert in a specific area of nursing. Further, students will expand their knowledge of health care policy and finance so as to better negotiate and influence the health care delivery system and to advocate for improved care for individuals and aggregates. Graduates with this terminal degree will be prepared for roles in direct care or indirect, systems-focused care.

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

Learning Outcome	Year of Last Assessment	Assessed This Year	Year of Next Planned Assessment
I. DEVELOP NEW APPROACHES TO ADVANCED NURSING PRACTICE AND HEALTH CARE DELIVERY BASED ON SCIENTIFIC KNOWLEDGE AND THEORIES OF NURSING AND OTHER DISCIPLINES	*2013-2014*		*2016-2017*
II. DEMONSTRATE CLINICAL, ORGANIZATIONAL, AND SYSTEMS-LEVEL LEADERSHIP THROUGH THE DESIGN OF INNOVATIVE MODELS OF CARING	*2011-2012*		*2015-2016*
III. DESIGN METHODS FOR EVALUATING CLINICAL OUTCOMES TO DIRECT EVIDENCE-BASED PRACTICE FOR IMPROVING HEALTH CARE		*2014-2015*	*2017-2018*
IV. UTILIZE KNOWLEDGE DRAWN FROM EPIDEMIOLOGICAL, STATISTICAL, AND TECHNOLOGICAL DATA TO IMPLEMENT QUALITY IMPROVEMENT INITIATIVES FOR PRACTICE WITH INDIVIDUALS, AGGREGATES, AND POPULATIONS	*2010-2011*	*2014-2015*	*2015-2016*
V. LEAD INTER-PROFESSIONAL TEAMS IN THE ANALYSIS OF COMPLEX PRACTICE AND ORGANIZATIONAL ISSUES	*2011-2012*	*2014-2015*	*2017-2018*

VI. DEMONSTRATE LEADERSHIP IN HEALTH POLICY AT THE STATE, LOCAL, AND FEDERAL LEVEL	2011-2012		2017-2018
VII. DEMONSTRATE ADVANCED LEVELS OF CLINICAL JUDGMENT, SYSTEMS THINKING, AND ACCOUNTABILITY IN DESIGNING, DELIVERING, AND EVALUATING EVIDENCE-BASED CARE TO IMPROVE PATIENT OUTCOMES	2012-2013		2015-2016
VIII. APPLY ETHICAL ANALYSIS WHEN GENERATING POLICY, RESEARCH, AND PRACTICE	2013-2014		2016-2017
IX. USE CONCEPTUAL AND ANALYTICAL SKILLS IN EVALUATING THE LINKS AMONG PRACTICE.	2013-2014		2016-2017

Describe how the program's outcomes support Marymount's mission strategic plan, and relevant school plan:

The curriculum and the program outcomes of DNP program are developed, implemented, and revised as needed to be congruent with and support the school and University mission, vision, and strategic plan. The University's mission emphasizes academic excellence, a liberal arts foundation, career preparation, and personal and professional development. Congruent with this mission, the aim of the MSHP is to foster the individual development of each student and enable students to become competent advanced practice health professionals prepared to contribute and respond to society's changing health needs. Every effort is made to meet the individual learning needs and foster the individual development of each student, while providing a foundation for advanced nursing practice at the doctoral level. The DNP program directly supports Marymount's strategic plan of offering a rigorous graduate curriculum grounded in the mission, vision and values of the university and school that produces superior graduates able to succeed in their positions and communities.

The DNP program outcomes support the acquisition and enhancement of the knowledge, skills, and abilities to negotiate the health care system as an advanced practice nurse, develop evidence-based practice protocols, and design methods for evaluating clinical outcomes to direct evidence-based practice (EBP). Scholarship, leadership, service, and ethics, which are the hallmarks of a Marymount education are reflected in the program outcomes. The program enables students to become health care professionals who have the necessary skills for advanced practice and who will contribute to the body of knowledge that supports best practices through education, scholarship, and service. Strongly linked to Marymount's hallmark of leadership, the goals of the program focus on preparing graduates to lead inter-professional teams in the analysis of complex practice and organizational issues, demonstrate clinical, organizational, and systems-level leadership through the design of innovative models of caring and demonstrate leadership in health policy at the state, local, and federal level.

Provide a brief description of the assessment process used including strengths, challenges and planned improvements and provide evidence of the existence of a culture of continuous improvement based on assessment:

The Department of Nursing has a robust and cyclical assessment process which is a major component of the accreditation process. In early 2013 the Department of Nursing submitted a self-study report to the Commission on Collegiate Nursing Education (CCNE) accreditation program as part of the re-accreditation process. The self-study examined the curriculum, teaching and learning practices and program effectiveness based on student and faculty outcomes. In fall 2013, a site visit was completed and all nursing programs were granted full accreditation status (10 years, with a 5-year interim report due to CCNE). The documents used for this assessment specific to the DNP program included the American Association of Colleges of Nursing (AACN) Essentials of Doctoral Education for Advanced Nursing Practice (2011). Information from the annual learning outcomes assessments is included in these accreditation reports. Additional program review is completed annually in the full faculty systematic evaluation meeting in the spring semester (May).

Each fall the nursing assessment committee and the faculty choose the learning outcomes and outcome measures to be evaluated during the upcoming academic year. Throughout the academic year the department chair and assessment committee collaborate with the faculty to assure that data are collected using specific measures/standards in their courses. In the past academic year, faculty remained involved to assure compliance with University, School and accreditation standards. A continuing challenge for the program has been the small number of students enrolled in the program. This limits the selection of direct and indirect measures that accurately reflect achievement of program outcomes by students. The program suspended admissions for the academic year 2014-2015. Recruitment of students continued and a cohort of 5 students enrolled beginning with the academic year 2015-2016. A 5-year program review was conducted during the academic year 2015-2016 and submitted in winter 2017. Included in this document is the response to comments made by the dean and APBP Committee following review of this document and program recommendations from an external auditor. Additionally, student learning objectives for academic year 2016-2017 are detailed below with evaluative methods and analysis of the results.

Describe how the program implemented its planned improvements from last year:

(Taken from Component 7-Action Plan Progress)

ACTION PLAN PROGRESS
(Nursing, DNP), (September 30, 2017)

GOAL	ACTION TAKEN	PROGRESS
1. Review and streamline post-baccalaureate/post-master's DNP curriculum	Nursing faculty teaching in the graduate programs reviewed the post-baccalaureate/post-master's DNP curriculum during Summer 2017. Terminal program objectives for FNP/DNP, Master's/DNP AACN essentials mapped to streamlined courses. There is a substantive change in Advanced Pathophysiology. This 6-credit course will be collapsed into 4 credit hours. Other changes involve sequencing of courses. Three draft options are created: Post-baccalaureate to DNP, Post-baccalaureate to Master's FNP, and Post-Master's to DNP.	Draft curriculum will be submitted to Nursing Curriculum Committee September 27, 2017. Following review, changes will be presented to nursing faculty at October meeting for approval. Changes will then be presented to the Malek School curriculum committee for approval, to the faculty of the Malek School, Quality Matter's Committee and Graduate Studies. It is anticipated approval through all committees be obtained by early 2018.
2. Transition post-baccalaureate DNP program to blended on-line platform	Three courses (Nursing Theory, Advanced Pathophysiology I, and Pharmacology are being piloted Fall 2017 in a blended (in-class, synchronous web-based and asynchronous) format. Additionally,	Students will be polled via discussion during the 4 Fall 2017 on-campus experiences and electronically at mid-term regarding impressions of the blended on-line platform. Data will be presented to nursing faculty

GOAL	ACTION TAKEN	PROGRESS
	since Spring 2017, master's students can take the first of three-doctoral level evidence-based practice courses as a course substitution for the master's level evidence-based practice course. During this transition period, master's students continue with clinical courses on-ground. It is anticipated complete transition to the blended format will be in place by September 2019.	during December faculty meeting. Following discussion, final adjustments will be made to pilot courses for Spring 2018. By Spring 2018, all courses not previously taught in a distance platform will be presented to Quality Matters Committee.
3. Addition of adult gerontology track	Nursing faculty teaching in the graduate programs reviewed this action item Summer 2017. Given content and platform updates, development of separate track tabled for academic year 2017-2018. Inclusion of this content is an accreditation requirement in a master's family nurse practitioner program. The faculty is currently reviewing all courses in the master's curriculum for this content.	Anticipated completion of gerontology content mapping complete by December 2017. As Spring 2018 marks submission for 5-year review of Master's in Nursing program, an external curricular expert will review for alignment with AACN Master's Essentials surrounding this content. Following faculty review of curricular mapping, evaluation by external expert and updated market analysis a decision about adding separate gerontology track will be made. Anticipate decision by end of spring 2018 semester. Potential collaboration with Shenandoah University for a joint adult gerontology track is an alternative, given their relatively new program.
4. Enhance global perspective	Spring 2017 Department of Nursing began collaboration with Department of Physical Therapy and School of Education in service trip to Ecuador. Overarching mission of this trip is development of sustainable health care facility.	Although no DNP candidates participated in this opportunity during the initial offering in spring 2017, 3 students in the master of science in nursing made this trip. While in Ecuador, students participated in population health promotion focused program planning, execution and evaluation of data. Following the experience, a scholarly presentation of data collected while abroad was given at an International Conference in June 2017. This learning opportunity with a global perspective is offered again spring 2018. Early dissemination of trip information with doctoral students this fall will hopefully increase participation.

Provide a response to last year's University Assessment Committee review of the program's learning assessment report:
(Taken from Component 7-Action Plan Progress)

Task 1 – Respond to the Dean's Letter

Dear Dean Matthews,

Thank you and the APBP Committee for examining the Program Review for the DNP program and comments made by an external expert reviewer during the spring of 2017. Below is a response to your letter dated May 2, 2016. Your letter summarizes input from the APBP Committee in categories of viability, commendations and recommendations/requests. For clarity, when describing efforts made since the review, I've responded keeping categories listed in your letter.

Viability: The number of post-master's students enrolled in the DNP program has declined (n=2 fall 2017). The number of new post-baccalaureate students enrolled in the Family Nurse Practitioner program designating the DNP track, however, increased with the Fall 2017 admission cycle (n=2), making a total of 5 currently enrolled. Total new enrollment in the DNP program for fall 2017 (combining post-baccalaureate and post-master's students) was 4.   The committee has requested a three-year mid-term update be presented in spring 2019. Enrollment numbers (current and incoming fall 2018 students) combined with student response (via electronic survey) to content and format changes will be submitted to Dean Matthews and the APBP Committee for review. Viability of the program will be determined based on number of designated post-baccalaureate to doctor of nursing practice students and number of post-master's students enrolled in the program. Streamlining the post-baccalaureate to doctor of nursing practice program to eliminate content redundancy as well as change in delivery platform are efforts to enhance program viability. Other actions to promote viability are listed below.

Commendations: Thank you to the Committee for recognizing the faculty commitment to the success of the program, including a change in the delivery to make the program more accessible to working professionals. The nursing faculty is actively engaged in streamlining program content. Several graduate nursing classes with instruction previously in an on-ground delivery platform are being piloted as blended on-line offerings during the fall 2017 semester. Additionally, since spring 2017, master's students are offered an introductory Evidence-Bases Practice course at the doctoral level. Experienced on-line faculty educators serve as mentors to colleagues new to this delivery platform.
The DNP program continues collaborative offerings with the School of Business and the Department of Health and Human Performance (HHP). For example, professors such as Dr. Jennifer Tripken, from HHP lead the DNP Epidemiology course. Students from these concentrations take several DNP courses as graduate level electives. Adjunct instructors, such as Suzanne Miyamoto, PhD, RN, FAAN, Chief Policy Officer for the American Association of Colleges of Nurses, lend expertise in the doctoral health policy course.

The nursing faculty, while assuring alignment with professional regulatory and accreditations recommendations, strives to meet market place forces. Efforts to enhance a virtual presence are in progress. Website updates are underway. Strategic planning meetings with enrollment management and Dr. Jason Craig (Director of Graduate Student Academic Success) will be held by September 30, 2017. A plan for workload dissemination in creating website changes is in place. The nursing faculty will be available for virtual student recruitment/retention activities and will partner with marketing creating real-time "twitter" and "Facebook" feeds. With piloted curricular changes in fall 2017, students will be surveyed at midterm and semester's end for feedback regarding the program

platform. Faculty continue face-to-face recruitment efforts via interaction with our community health care partners. Reciprocal benefits occur with large medical systems such as INOVA or Virginia Hospital Center as faculty serve on system-wide research committees (e.g., Graduate Chair member of INOVA Evidence-Based Practice Research Committee) or place student leads in evidence-based practice projects benefiting the organization (e.g., doctoral students leading quality improvement projects identified by VHC and INOVA systems). Community participation raises awareness of MU graduate programs. Anecdotally, students report hearing of our programs through these partnerships and word of mouth communication with students working within these organizations.

Recommendations/requests:

1. As noted above, "Spring 2019 enrollment numbers (current and incoming fall 2018 students) combined with student response (via electronic survey) to content and format changes will be submitted to Dean Matthews and the APBP Committee for review.
2. Commencing Fall 2017, a monthly faculty meeting was established with DNP project team leaders. Open to all DNP committee members, this is a forum for idea exchange, discussion of student mentoring issues and consensus building when discussing appropriate project topic selection, project presentation rubrics, and time-line for presentation/final paper submission for graduation in each term.   With the addition of faculty peer mentoring, 8 students (enrolling in the program from 2012-2016) are scheduled for graduation December 2017 or May 2018.
3. The nursing faculty continues to follow recommendations from the accreditation review. Program updates include opportunities for growth identified in a winter 2017 external review. Annual assessment of student learning outcomes is conducted. It is through this iterative process of assessment, review and change implementation that the curriculum evolves, incorporating best practices in DNP education.

Many thanks again for the opportunity to work with such talented and committed faculty, students and staff.

Sincerely,

Maureen Moriarty DNP, ANP-BC

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.
(Last assessment 2013 – 2014)

Assessment Activity

Outcome Measures *Explain how student learning will be measured and indicate whether it is direct or indirect.*	Performance Standard *Define and explain acceptable level of student performance.*	Data Collection *Discuss the data collected and student population*	Analysis *1) Describe the analysis process.* *2) Present the findings of the analysis including the numbers participating and deemed acceptable.*
Direct Measure from course NU 700 Evidence-Based Practice. This written assignment provides students opportunity in describing the guiding evidence-based practice theory used when framing their scholarly project.	90% of students will achieve an 85% on paper describing the theory used as the framework for their scholarly project.	**MET SP 17** 100% of students achieved 85% on paper describing the theory used as the framework for scholarly project (N = 3)	Analysis based on one portion of rubric for "Change Proposal in Clinical Practice" paper. This portion of paper accounts for 20% total score. Rubric reads: ***Evidence based practice change model **** *Identify a model as a framework for your change project proposal. Use this framework to guide your project description.* All students achieved the minimal score of 85% overall on the paper with an average score of 19.3/20 in this section of the rubric. Although this benchmark is met, the small cohort size limits the interpretation of the results. There are other opportunities for evaluation of this outcome found in deliverables from other courses and the final presentation of the scholarly project. With cohort numbers so small, perhaps a better direct measure would lie in assessing this outcome in a variety of those deliverables. Data could be gathered from rubrics of the multiple assignments across the curriculum. As there is a progression in complexity and

Outcome Measures Explain how student learning will be measured and indicate whether it is direct or indirect.	Performance Standard Define and explain acceptable level of student performance.	Data Collection Discuss the data collected and student population	Analysis 1) Describe the analysis process. 2) Present the findings of the analysis including the numbers participating and deemed acceptable.
			synthesis of evidence-based theory as related to the scholarly project, gaps in knowledge growth could be more easily identified with appropriate curricular interventions made.
Indirect Measure Item on end of term DNP survey At the end of each semester all students currently enrolled in the DNP program are sent an electronic survey. Likert scale style questions are used in assessing student opinion including, "How competent are you in describing the evidence based practice change theory selected for your scholarly project?"	90% of students will identify that they are competent (competent or very competent) in describing the evidence based practice change theory related to their scholarly project.	SP 17 **MET** 100% of students responded via Survey Monkey they felt competent in describing theory related to their scholarly project. N = 5	Benchmark met via this indirect measure. All students responded competent (40%) or very competent (60%) when describing the theory related to their scholarly project. Although this benchmark is met, small cohort size limits the interpretation of results. Group discussion of this question during the Executive Session may provide more depth and meaningful results. Such course evaluation discussions will be part of all Executive Sessions beginning fall 2017.

Interpretation of Results

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

These learning outcomes were achieved by students based on direct and indirect measures selected. Given the small total enrollment, the findings from more dynamic outcome measures across this curriculum will add information in interpreting and applying change.

Program strengths and opportunities for improvement <u>relative to assessment of outcome</u>**:**

 Understanding, incorporating and use of theoretical models in problem solving is an essential intellectual quality in the doctorally-prepared nurse. Achieving the benchmarks identified above, illustrates the strength of the program in this area. This learning outcome is evaluated in an evidence-based practice course

offered early in the program. There are multiple opportunities throughout the curriculum for reassessment. For example, the question, "How competent are you in describing the evidence-based practice change theory selected for your scholarly project?" could be rephrased in the leadership course stating, "How competent are you in describing your guiding leadership theory selected for your scholarly project?"   Iterations of this question may be created from all courses in the DNP curriculum. Considering the question from non-project related courses will give a broader view of the student's conceptual understanding.

Discuss planned curricular or program improvements <u>for this year based on assessment of outcome</u>:

A course assignment review will be conducted for academic year 2017-2018. A recommendation to include evaluation and interpretation of theoretical models linked to topical areas be added to at least one assignment rubric per course. Student's perception of learning objective achievement through group discussion will be added to an evaluation session at all executive sessions.

Learning Outcome 2: SLO # 8: **Apply Ethical Analysis When Generating Policy, Research, and Practice.**
(Last assessment 2013 – 2014)

Assessment Activity

Outcome Measures *Explain how student learning will be measured and indicate whether it is direct or indirect.*	Performance Standard *Define and explain acceptable level of student performance.*	Data Collection *Discuss the data collected and student population*	Analysis *1) Describe the analysis process.* *2) Present the findings of the analysis including the numbers participating and deemed acceptable.*
Direct NU 707 Written Assignment following presentation of an Ethical Dilemma described in the literature. All students evaluate the same scenario with a standardized rubric.	90% of students will pass with an 85% or above on the "Ethical Organizational Scenarios for Analysis" assignment.	<u>FA16</u> **MET** N = 4 4 of 4 (100%) of students met the performance standard	Evaluative rubric includes the following categories: Application of Transformational and Ethical Leadership Principles, Component of an Ethical Culture, Development of Character and Virtues in an Organization, Power and Ethical Behaviors, and Ethical Drivers and Culture Change Strategies. Each section is allocated 20 possible points. 100% of students achieved an 85 or above on this paper. Although this benchmark is met, small cohort size limits the interpretation of results

Outcome Measures *Explain how student learning will be measured and indicate whether it is direct or indirect.*	Performance Standard *Define and explain acceptable level of student performance.*	Data Collection *Discuss the data collected and student population*	Analysis 1) *Describe the analysis process.* 2) *Present the findings of the analysis including the numbers participating and deemed acceptable.*
Indirect Measure Item on the End of term DNP survey	90% of students will say they are competent in ethical analysis related to policy, research and practice in the end of the term DNP outcomes survey.	SP17 **MET** 100% of students responded on DNP survey that they were competent in areas measured N = 5	Benchmark met via this indirect measure. Five of 5 students responded "competent" or "competent most of the time" when describing ethical analysis ability related to this policy, research and practice. Although this benchmark is met, small cohort size limits the interpretation of results. Group discussion of this question at the Executive Session may provide richer and more meaningful results. Such course evaluation discussions will be part of all Executive Sessions beginning fall 2017.

Interpretation of Results

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

 This learning outcome was achieved by students using both direct and indirect measures.

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

Using the direct and indirect measurements identified above this learning outcome was achieved. This speaks to strength in content, faculty delivery and student understanding in the Leadership, Quality and Ethics in Health Care System course. Learning related to ethical problem analysis is not limited to this course. For example, the DNP Policy and Advocacy in Healthcare course also includes these concepts. Selecting direct learning outcome measures from more than one course will provide greater insight in student outcome achievement. Greater insight will also assist in learning gap identification. As previously mentioned, with cohort numbers so small, a more meaningful indirect evaluation of learning would be group discussion on competence in ethical analysis ability related to policy, research and practice.

Discuss planned curricular or program improvements <u>for this year based on assessment of outcome:</u>

Although this benchmark was met, the faculty struggle with assuring the validity of the assessment due to low cohort size. This assessment is a written assignment. Roles associated with DNP's often involve verbal reporting in a variety of settings. The ability to discuss policy, research or practice issues framed in ethical analysis is a skill developed through practice. Students are given this opportunity through "elevator speech" presentation in the Policy and Advocacy in Health Care course. It will be recommended that this learning outcome measure be added to the rubric in that course presentation. Additionally, inclusion of guest lecturers with an expertise in ethical problem analysis are being added to learning opportunities for graduate nursing students during the fall 2017 semester. Evaluation of this offering will be a portion of group evaluation discussion at end of semester Executive Session.

A discussion of student perception of learning objective achievement will be added to the evaluation session at all Executive Sessions.

Learning Outcome 3: SLO # 9: **Use Conceptual and Analytical Skills in Evaluating the Links Among Practice.**
(Last assessment 2013 – 2014)

Assessment Activity

Outcome Measures *Explain how student learning will be measured and indicate whether it is direct or indirect.*	Performance Standard *Define and explain acceptable level of student performance.*	Data Collection *Discuss the data collected and student population*	Analysis *1) Describe the analysis process.* *2) Present the findings of the analysis including the numbers participating and deemed acceptable.*
Direct Measure NU 703 Written assignment. This scholarly paper requires students to select a topic interest, develop a PICO statement, provide a synthesis of literature review, describe EBP recommendations and strategies to improve clinical practice based on EBP.	90% of student will achieve an 85% or greater on their PICO paper.	<u>FA16</u> **NOT MET (during term)** N = 4 3 of 4 (75%) students achieved the performance standard (achieved 85% or greater on their PICO paper).	As noted in the outcome measure section, the paper has areas for evaluation. Identified as *"DNP Draft Project Proposal"* 3 of 4 students taking the course achieved a score of 85 or above. The unsuccessful student received an incomplete due to family concerns limiting academic engagement during the term. Subsequently, the student successfully completed the course and scored an 85% on this assignment. Ultimately this benchmark measure was met. Although this benchmark is met, small cohort size limits interpretation of results.
Direct Measure NU 700 This scholarly presentation requires students to orally	Students will achieve an 85% or above on their oral presentation incorporating conceptual and analytical skills to identify linkages	<u>SP17</u> **MET** Students achieved 85% or above on their oral presentations. (N = 3)	Elements in the *Change Proposal in Clinical Practice* rubric include: Problem statement, background (including summarization of research in area), identification of evidence-based practice change model, project description, and identification of desired project outcomes. Specifically targeting this outcome measure,

Outcome Measures *Explain how student learning will be measured and indicate whether it is direct or indirect.*	Performance Standard *Define and explain acceptable level of student performance.*	Data Collection *Discuss the data collected and student population*	Analysis *1) Describe the analysis process.* *2) Present the findings of the analysis including the numbers participating and deemed acceptable.*
present a change proposal in clinical practice.	between practice and the evidence. For details related to rubric with this standard please see analysis section		the rubric requires students "consider information gathered from your organizational analysis, discuss the usefulness of applying the evidence-based treatment/intervention into clinical practice, based on your synthesis of studies with subsequent feasibility evaluation using gathered research evidence in your identified population or setting." 100% of students achieved an 85% or above on oral presentations. Although this benchmark is met, small cohort size limits interpretation of results.

Interpretation of Results

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

All students achieved the identified learning outcome. The student with a course incomplete, did successfully meet the 85% benchmark when coursework completed the following semester. Both measures used for this student learning outcome were direct assessments.

Program strengths and opportunities for improvement <u>relative to assessment of outcome</u>**:**

 This student learning objective was assessed and met using direct measurements from two different courses. There are however opportunities for improvement. The SLO #9, *Use Conceptual and Analytical Skills in Evaluating the Links among Practice,* may be assessed in a variety of ways. In this assessment cycle an oral and written deliverable was chosen. Assessed assignments occur relatively early in the program. This was intentional as several courses associated with scholarly project development had not been offered in the blended on-line format. Inclusion of an assessment measure later in course progression, for example during the time of final oral presentation of the scholarly project, would provide insight into student progression towards mastery surrounding this learning outcome. The faculty will explore innovative deliverables with the CTL surrounding this outcome measure.

Discuss planned curricular or program improvements <u>for this year based on assessment of outcome:</u>

In December 2017, DNP students enrolled in the first distance platform cohort will complete the program. This gives faculty an opportunity to review all courses with a scholarly project focus through direct scholarly work (written or oral). Graduating students will be surveyed electronically and in face to face discussion groups about their level of competence surrounding this learning outcome. Although course work related to the scholarly project logically builds through the evidence-based practice course sequence, faculty strives to improve areas where further scaffolding may be required for optimal student outcome. One such anecdotal example was identified in faculty project team meetings during the 2016-2017 academic year. Faculty believed students struggled with creating project aims linking synthesizing recommendations from the literature. Assignment revisions in the introductory evidence-base practice course offered during Fall 2017 reflect this concern. Faculty during the 2017-2018 academic year will review key deliverables in all project related courses surrounding this learning outcome and will make suggestions for any needed changes. An expanded DNP project guide is planned for students. This will include all assignment rubrics for scholarly project related courses, project management templates and required dates for completion of written scholarly paper and oral presentation ensuring graduation during the fall or spring semester.

Appendices

Curriculum Map

These will be sent for review and feedback to the Liberal Arts Core Committee. (N/A for doctoral program)

GRADUATE CURRICULUM MAP

Degree Program: Doctor of Nursing Practice Program
Year: 2016-201

Program Outcomes:

Program Outcome	Critical Reading[1]	Written Communication	Oral Communication/Persuasive Argument	Identification, Investigation, and Application of Theory and Principles of the Discipline	Scholarly Presentation and the Use Resource Materials
I. DEVELOP NEW APPROACHES TO ADVANCED NURSING PRACTICE AND HEALTH CARE DELIVERY BASED ON SCIENTIFIC KNOWLEDGE AND THEORIES OF NURSING AND OTHER DISCIPLINES	X	X	X	X	X
II. DEMONSTRATE CLINICAL, ORGANIZATIONAL, AND SYSTEMS-LEVEL LEADERSHIP THROUGH THE DESIGN OF INNOVATIVE MODELS OF CARING	X	X	X	X	X
III. DESIGN METHODS FOR EVALUATING CLINICAL OUTCOMES TO DIRECT EVIDENCE-BASED PRACTICE FOR IMPROVING HEALTH CARE	X	X	X	X	X
IV. UTILIZE KNOWLEDGE DRAWN FROM EPIDEMIOLOGICAL, STATISTICAL, AND TECHNOLOGICAL DATA TO IMPLEMENT QUALITY IMPROVEMENT INITIATIVES FOR PRACTICE WITH INDIVIDUALS, AGGREGATES, AND POPULATIONS	X	X		X	
V. LEAD INTER-PROFESSIONAL TEAMS IN THE ANALYSIS OF COMPLEX PRACTICE AND ORGANIZATIONAL ISSUES	X	X		X	X
VI. DEMONSTRATE LEADERSHIP IN HEALTH POLICY AT THE STATE, LOCAL, AND FEDERAL LEVEL	X	X		X	
VII. DEMONSTRATE ADVANCED LEVELS OF CLINICAL JUDGMENT, SYSTEMS THINKING, AND ACCOUNTABILITY IN DESIGNING, DELIVERING, AND EVALUATING EVIDENCE-BASED CARE TO IMPROVE PATIENT OUTCOMES	X	X	X	X	X
VIII. APPLY ETHICAL ANALYSIS WHEN GENERATING POLICY, RESEARCH, AND PRACTICE	X	X		X	
IX. USE CONCEPTUAL AND ANALYTICAL SKILLS IN EVALUATING THE LINKS AMONG PRACTICE.	X	X	X	X	X

---

[1] Graduate program competencies derived from GSC Committee Requirements for New Graduate Programs: "Achieving this criteria may be demonstrated by, but is not limited to:

1. Course content that is increasingly more complex and rigorous than UG courses (course objectives, learning activities, outcome expectations, etc.)
2. Coursework that produces graduates with advanced skills in reading critically.
3. Coursework that produces graduates with advanced skills in writing clearly.
4. Coursework that produces graduates with advanced skills in arguing persuasively.
5. Coursework that produces graduates competent in identifying, investigating, and applying theory and principles of the discipline to new ideas, problems, and materials.
6. Competence in the scholarly presentation of the results of independent study and in the use of bibliographic and other resource materials with emphasis on primary sources for data.
7. A capstone or final integrative activity that demonstrates achievement of graduate-level knowledge and application of the theory and principles of the discipline"

Curriculum Map:

For each course, indicate which competencies are included using the following key. Please refer to the director of assessment in Planning and Institutional Effectiveness if you need more detailed explanation of the four core competencies.

  Level of instruction: F-foundational, A-advanced, M-mastery
  Assessment: PR-project, P-paper, E-exam, O-oral presentation, I-internship, OT-other (explain briefly)

Required Course	Critical Reading[1]		Written Communication		Oral Communication/Persuasive Argument		Identification, Investigation, and Application of Theory and Principles of the Discipline		Scholarly Presentation and Use of Resource Materials	
	Level	Assess	Level	Assess	Level	Assess	Level	Assess	Level	Assess
HCM 550 Health Care Finance	A	P,E	A	P						
NU 700 Evidence Based Practice	A	P,O	A	P	A	O	A	P,O	A	P,O
NU 701 Innovative Models of Care Delivery	A	P,O	A	P	A	O	A	P,O	A	P,O
NU 702 Epidemiology	A	P,E	A	P			F	P	A	P
NU 703 Research Methods and Applications	A	P,O	A	P	A	O	A	P,O	A	P,O
NU 705 Multivariate Analysis	A	E	A	P						
NU 706 Policy and Advocacy in Health Care	A	P	A	P	A	O	F	P,O	A	P,O

Course										
NU 707 Leadership, Quality & Ethics in Health Care Systems	A	P,O	A	P	A	O	A	P,O	A	P,O
NU 800 Residency	M	PR	M	P, PR OT (CLINICAL PROJECT HOURS)	M	O	M	PR, OT (CLINICAL PROJECT HOURS), O	M	PR,P,O
NU 801 Doctoral Project	M	P PR	M	PR	M	PR,O	M	P,PR	M	PR, P, O
NU 899 *Doctoral Independent Study (course designed for scholarly project completion, competencies as applicable to specific student course learning objectives	M	P, PR	M	PR,P, OT (CLINICAL PROJECT HOURS)	M	PR,O	M	PR, OT (CLINICAL PROJECT HOURS), O	M	PR, P, O

MAP OF CURRICULUM AND PROGRAM LEARNING OUTCOMES

List and label (e.g., 1-6) the learning outcomes.

List all required courses for the <u>major</u> in column on the left.

For each course indicate which outcomes are addressed using the following key.

Level of instruction: I – Introduced, R-reinforced and opportunity to practice, M-mastery at the senior or exit level

Assessment: P-paper, E-exam, PO – Portfolio, O-oral presentation, I-internship, OT-Other (explain briefly)

COURSE	LEARNING OUTCOMES					
	Learning Outcome 1		**Learning Outcome 2**		**Learning Outcome 3**	
	DEVELOP NEW APPROACHES TO ADVANCED NURSING PRACTICE AND HEALTH CARE DELIVERY BASED ON SCIENTIFIC KNOWLEDGE AND THEORIES OF NURSING AND OTHER DISCIPLINES		DEMONSTRATE CLINICAL, ORGANIZATIONAL, AND SYSTEMS-LEVEL LEADERSHIP THROUGH THE DESIGN OF INNOVATIVE MODELS OF CARING		DESIGN METHODS FOR EVALUATING CLINICAL OUTCOMES TO DIRECT EVIDENCE-BASED PRACTICE FOR IMPROVING HEALTH CARE	
	Level	**Assessment**	**Level**	**Assessment**	**Level**	**Assessment**
HCM 550 Health Care Finance	I,R	P				
NU 700 Evidence Based Practice					I,R	P,O,PO
NU 701 Innovative Models of Care Delivery	I,R	P,O,PO			I,R	P,O,PO
NU 702 Epidemiology						
NU 703 Research Methods and Applications	I,R	P, O, PO			I,R	P, O, PO
NU 705 Multivariate Analysis						
NU 706 Policy and Advocacy in Health Care						
NU 707 Leadership, Quality & Ethics in Health Care Systems						
NU 800 Residency						
NU 801 Doctoral Project	M	P,O,I,PO			M	P,O,I,PO
NU 899 Doctoral Independent Study						

COURSE	LEARNING OUTCOMES					
	Learning Outcome 4		Learning Outcome 5		Learning Outcome 6	
	UTILIZE KNOWLEDGE DRAWN FROM EPIDEMIOLOGICAL, STATISTICAL, AND TECHNOLOGICAL DATA TO IMPLEMENT QUALITY IMPROVEMENT INITIATIVES FOR PRACTICE WITH INDIVIDUALS, AGGREGATES, AND POPULATIONS		LEAD INTER-PROFESSIONAL TEAMS IN THE ANALYSIS OF COMPLEX PRACTICE AND ORGANIZATIONAL ISSUES		DEMONSTRATE LEADERSHIP IN HEALTH POLICY AT THE STATE, LOCAL, AND FEDERAL LEVEL	
	Level	Assessment	Level	Assessment	Level	Assessment
HCM 550 Health Care Finance	I,R	P				
NU 700 Evidence Based Practice	I,R	P,O				
NU 701 Innovative Models of Care Delivery			I,R	P,O		
NU 702 Epidemiology	I,R,M	P				
NU 703 Research Methods and Applications						
NU 705 Multivariate Analysis	I,R,M	E				
NU 706 Policy and Advocacy in Health Care						
NU 707 Leadership, Quality & Ethics in Health Care Systems	I,R,M	P,O,PO,I	I,R,M	P,O,PO, I		
NU 800 Residency	R,M	O,PO,I			R,M	O,PO,I
NU 801 Doctoral Project	M	P,O,I,PO				
NU 899 Doctoral Independent Study						

COURSE	LEARNING OUTCOMES					
	Learning Outcome 7		Learning Outcome 8		Learning Outcome 9	
	DEMONSTRATE ADVANCED LEVELS OF CLINICAL JUDGMENT, SYSTEMS THINKING, AND ACCOUNTABILITY IN DESIGNING, DELIVERING, AND EVALUATING EVIDENCE-BASED CARE TO IMPROVE PATIENT OUTCOMES		APPLY ETHICAL ANALYSIS WHEN GENERATING POLICY, RESEARCH, AND PRACTICE		USE CONCEPTUAL AND ANALYTICAL SKILLS IN EVALUATING THE LINKS AMONG PRACTICE, ORGANIZATIONAL, POPULATION, FISCAL, AND POLICY ISSUES	
	Level	Assessment	Level	Assessment	Level	Assessment
HCM 550 Health Care Finance			I,R	P	I,R	P
NU 700 Evidence Based Practice	I,R	P,O,PO				
NU 701 Innovative Models of Care Delivery	I,R	P,O,PO	I	P,O		
NU 702 Epidemiology						
NU 703 Research Methods and Applications						
NU 705 Multivariate Analysis						
NU 706 Policy and Advocacy in Health Care					I,R	
NU 707 Leadership, Quality & Ethics in Health Care Systems	I,R,M	P,O.I,PO	I,R,M	P,O,I,PO	I,R,M	P,O,I,PO
NU 800 Residency	R,M	P,O,PO,I			R,M	P,O,PO,I
NU 801 Doctoral Project	M					
NU 899 Doctoral Independent Study	*VARY DEPENDING ON FOCUS OF PROJECT ALL ARE LINKED TO NU 801 SO MASTERY EXPECTED	I,P,O,PO				