# Assessment Year 2017-2018

**Program – Associate of Science in Nursing**

**College: College of Nursing (College of Nursing and School of Allied Health)**

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**Approved by: Dr. Dana Clawson, Dean                Date: 6-26-2018**

**Northwestern Mission.** Northwestern State University is a responsive, student-oriented institution that is committed to the creation, dissemination, and acquisition of knowledge through teaching, research, and service. The University maintains as its highest priority excellence in teaching in graduate and undergraduate programs. Northwestern State University prepares its students to become productive members of society and promotes economic development and improvements in the quality of life of the citizens in its region.

**College of Nursing's Mission.** Northwestern State University College of Nursing serves the people of Louisiana and in so doing improves the health of its citizens while advancing the mission of Northwestern State University through excellence in accessible undergraduate, graduate, and continuing education programs that are designed to assist individuals in achieving their professional goals as responsible and contributing members of their profession and society.

**Associate of Science in Nursing's Mission Statement:** Same as the CON

**Purpose (optional):** The Associate of Science in Nursing (ASN) degree program prepares graduates to function as registered nurses in hospitals, nursing homes, and other health care agencies. The curriculum is constructed to promote career mobility to the baccalaureate nursing educational level. Upon completion of the Program, the graduate is eligible to apply for the National Council Licensure Examination for Registered Nurses (NCLEX-RN).

**Methodology:** The assessment process for the ASN program is as follows:

(1) Data from assessment tools (both direct & indirect, quantitative & qualitative) are collected and sent to the program director.

(2) The program director enters the data in the Student Learning Outcomes (SLO) database.

(3) The results are shared with the Director of Assessment and analyzed at the ASN Assessment Committee meeting. The committee discusses data analysis, interpretation, actions, trends, results, and future plans to address needed improvements.

(4) The Assessment committee findings are discussed in the program curriculum committee meetings.  Additional insights and actions are added to the SLOs based on faculty input.

(5) Significant findings are reported in the Administrative Council meeting.

## Student Learning Outcomes:

**Note[1]: Skyfactor™ Survey** (a student satisfaction tool) is given the semester the student graduates. Skyfactor™ is a tool that is based on research and is designed to provide data for benchmarking and longitudinal comparisons. Questions utilized in Skyfactor™ are designed based on specialized/professional accreditation standards. The survey is administered by Skyfactor™, ensuring student anonymity.  Results from the year are compiled by Skyfactor™ into an aggregate report which provides student responses and compares the NSU ASN program with like programs across the nation. Programs can choose 6 schools to be utilized for comparison (Select 6).  The Skyfactor™ company then compares the NSU program mean to the Select 6 mean score and to schools at the same Carnegie level. Since many ASN schools are in community colleges, the ASN program uses the Select 6 as a standard for comparison for most of the Skyfactor™ questions used as an SLO measure. The scale for responses to the Skyfactor™ questions ranges from one to seven with seven being the highest score.

**Note [2]:** In the 2016-2017 assessment year, the expected outcome measure (Select 6 mean score) for several measures using the Skyfactor survey was not available. This was due to Skyfactor removing the questions from a "Factor" component. The result was no comparative data for those questions. NSU was unable to resolve the issue or obtain the data for the 2016-2017 assessment year. As a result, faculty decided to continue to use the measure and change the expected outcome to the score 6.0.  A score of 6.0 on the 1-7 scale is higher than any previous Select 6 mean scores for those questions and is a high mean score showing excellence. In addition, NSU will still be able to use previous data as comparison.

**Note[3]:** Assessment period.  The ASN assessment data is based on the calendar year, Jan – Dec.  For clarity and to be consistent with university programs, we will label the 2016 year as 2016-2017 and 2017 year as 2017-2018.

Course Map:
Pre-Clinical   NURA 1050 History, Issues, and Trends in Nursing
1st Level      NURA 1100 Introduction to Nursing
               NURA 1110 Introduction to Nursing Skills
2nd Level      NURA 1500 Nursing Concepts I
               NURA 1510 Application of the Nursing Process I
3rd Level      NURA 2100 Nursing Concepts II
               NURA 2110 Application of the Nursing Process II
4th Level      NURA 2500 Nursing Concepts III
               NURA 2510 Application of the Nursing Process III
               NURA 2550 Humanistic Nursing Care

**SLO 1.** Provide nursing care founded upon selected scientific principles and evidence-based research utilizing the nursing process.

**Measure 1.1 (Indirect-Knowledge)**

*Assessment Method:* Skyfactor™ Question – "To what degree did your nursing program teach you to: Apply research-based knowledge as a basis for practice."
*Expected Outcome:* Equal or greater than the Select 6 mean score

**Findings**

**AY 2016-2017:** Target Met    ASN mean score – 6.33; Select 6 mean score – 5.7
**AY 2017-2018**: Target Met    ASN mean score – 6.23; Select 6 mean score – 5.82

Trending:

|            | 2014-2015 | 2015-2016 | 2016-2017 | 2017-2018 |
|------------|-----------|-----------|-----------|-----------|
| Skyfactor™ | Q 67      | Q61       | Q61       | Q61       |
|            |           |           | N=92      | N=79      |
| NSU        | 5.95      | 6.18      | 6.33      | 6.23      |
| Select 6   | 5.46      | 5.67      | 5.7       | 5.82      |

**Analysis:** Faculty in the ASN program teach concepts in didactic and clinical/lab courses based on scientific principles, evidence-based practice, and the nursing process. Required text books were selected with consideration of the content on evidence-based practice, research, and the nursing process. Current texts contain this content in each chapter.  Evidence-based content is taught from the first nursing courses through the end of the program. Assignments made in each level require students to utilize research and evidence-based practice, include creating a care plan and developing and implementing teaching plans.

   In the 2016-2017 assessment year, the target/expected outcome of meeting or exceeding the Skyfactor™ Select 6 mean was met as the ASN mean score of 6.33 was higher than the Select 6 mean score of 5.7. This data is evidence that graduating students believed that the ASN program taught them to apply research-based knowledge as a basis for practice. The trend for the two (2) years previous years showed an upward trend. Based on the analysis of the results, the plan for 2017-2018 was to use ATI resources more fully in the clinical and didactic courses.  ATI resources are based on research and evidence-based practice. The plan included using ATI modules to prepare students for class and tests.

   In the 2017-2018 assessment year, the faculty assigned students modules from ATI based on the concepts being covered for a test. Students had to score a 90% for the assignment to be considered complete.  Students also had to submit the assignments before the test to receive credit for their work. For each module that was not submitted, two (2) points were deducted from their test score.  Fourth level faculty found that students were better prepared for class and tests.  Second level faculty noticed a two-point increase in the average test score from previous semesters. In the 2017-2018 assessment year, the target/expected outcome for this measure was met as

evidenced by the ASN mean score of 6.23 being higher than the expected outcome of the Select 6 mean score, which was 5.82. The trend for the Select 6 over the past 4 years has been a slight increase each year. Though the ASN mean score increased annually from 2014-2017, there was a very slight decrease this year (0.1 point). However, the ASN mean score was still above the Select 6 mean score and above the ASN mean scores from 2014-2016. The expected outcome was met for 2017-2018. Based on the analysis of the results, the plan for the 2018-2019 assessment year is for 1) faculty to review other texts for each level to evaluate for use of research and evidence-based practice and available resources for student learning, and 2) third level (3rd Level) faculty will incorporate care plans and case studies utilizing evidence-based practice in class.

**Decision:** In the 2017-2018 assessment year, faculty increased the use of ATI modules to prepare students for content being taught in the classroom. Students had to score a minimum of 90% to avoid deductions on test scores. As a result, faculty found that students were better prepared for class and scored higher on tests. In the 2017-2018 assessment year, the target/expected outcome for this measure was met as evidenced by the ASN mean score of 6.23 being higher than the expected outcome of the Select 6 mean score, which was 5.82. Based on the analysis of the results, the plan for the 2018-2019 assessment year is for 1) faculty to review other texts for each level to evaluate for use of research and evidence-based practice and available resources for student learning, and 2) third level (3rd Level) faculty to incorporate care plans and case studies in class, supporting the interventions with research and evidence-based practice.

## Measure 1.2 (Direct-Knowledge)

*Assessment Method*: Care Plans (2nd Level and 4th Level)
*Expected Outcome:* 90% of students will achieve a final score of satisfactory

## Findings

**AY 2016-2017:** Target Met    100% of students achieved a final score of Satisfactory on the care plan assignment in levels 2 & 4.
**AY 2017-2018**: Target Met    100% of students achieved a final score of Satisfactory on the care plan assignment in levels 2 & 4.

Trending:

|  | 2015-2016 |  | 2016-2017 |  | 2017-2018 |  |
|---|---|---|---|---|---|---|
| Level 2 | Shreveport n = 54 | 100% | Shreveport n = 44 | 100% | Shreveport n = 31/31 | 100% |
|  | Leesville n = 17 | 100% | Leesville n = 33 | 100% | Leesville n = 14/14 | 100% |
|  |  | N/A |  | N/A | Alexandria n=10/10 | 100% |
| Level 4 | Shreveport n = 55 | 100% | Shreveport n = 57 | 100% | Shreveport n = 50/50 | 100% |
|  | Leesville n = 12 | 100% | Leesville n = 13 | 100% | Leesville n = 32/32 | 100% |
|  | Natchitoches | 100% | Natchitoches | 100% | Natchitoches | 100% |

| | n = 22 | | n = 16 | | n = 7/7 | |
|---|---|---|---|---|---|---|
| | Generic n = 61 | 100% | Generic n = 68 | 100% | Generic n = 60/60 | 100% |
| | Transition n = 28 | 100% | Transition n = 18 | 100% | Transition n = 29/29 | 100% |

**Analysis.**  For the care plan assignment, students analyze the data for a patient and utilize the nursing process to develop a plan of care for the assigned patient. The care plan must be based on the data and individualized to that specific patient. If students do not receive a satisfactory on the first submission, they are given feedback and allowed to resubmit the assignment, as a satisfactory score is a critical behavior (the student must achieve this to pass the course). For the 2016-2017 assessment year, 100% of students achieved a score of satisfactory on the care plan assignment. This data is evidence that students can develop a care plan individualized to their assigned patient. Based on the analysis of the results, the plan for the 2017-2018 assessment year was for students in 1st level to develop care plans in the lab setting, before they cared for patients in the healthcare setting.

In the 2017-2018 assessment year, the faculty in 1st level implemented the above plan. The next semester, second level faculty found that most students were able to achieve a score of satisfactory the first time they submitted the care plan. This reduced the resubmissions and thereby reduced the workload of the student (by not having to rework the care plan) and the faculty (by not having to grade the re-submissions).  For the 2017-2018 assessment year, 100% of students achieved a final score of satisfactory on the care plans. This included students at all campuses and students in different tracks (generic ASN and LPN to ASN students).  The analysis of the evidence shows that 100% of students have achieved the outcome for the last 3 years. Faculty discussed what would be a better indicator of learning for this measure. As a result, the plan for the 2018-2019 assessment year is to collect data on what percent of students are able to complete the care plan on the first attempt and to continue to collect data on achievement a score of satisfactory on the final submission.  This data would give a better indicator of the ability of the student.  Having additional data to analyze will give more information on the students understanding of creating a care plan.  This will help faculty revise teaching methods, offer more student resources, and generally guide faculty in ways to facilitate student learning.  Since this SLO states "Provide nursing care founded upon selected scientific principles and evidence-based research utilizing the nursing process," students will also be required to document rationale under the interventions listed in the care plan.  By implementing these actions, faculty should be able to measure the percent of students able to successfully complete a nursing care plan on their first attempt.  In addition, the data can be compared between levels.

**Decision:** In the 2017-2018 assessment year, 100% of students in the 2nd and 4th level clinical courses have been able to achieve a final score of satisfactory on the care plan assignment. Based on the analysis of the results, the plan for the 2018-2019 assessment year is to 1) collect data on what percent of students can complete the care plan on the first attempt, 2) continue to collect data on achievement a score of satisfactory on the final submission, and 3) require students to document rationale for interventions listed in the care plan.

**Measure 1.3 (Direct-Knowledge/Skill)**
This assignment in the pre-clinical course, NURA 1050, requires students to find a research article from a nursing journal and document: 1) what in the article lead them to believe it was a research article, 2) the name of the nursing journal in which it was published, 3) the year the article was published, 4) the name of a nurse in the article who assisted with the research, and 5) where the research was conducted in the United State.  In addition, students are required to attach the article and turn the assignment in on time. This activity is a first step in the student being able to identify a research article for future nursing courses.

*Assessment Method:* score on NURA 1050 Research Assignment
*Expected Outcome:* 80% of students will achieve a score of > 86%

**Findings**

**AY 2016-2017:** Target Not Met   59.2% of students scored at or above 86%.
**AY 2017-2018**: Target Met         81.7% of students scored at or above 86%

Trending:

|  | 2015-2016 | | 2016-2017 | | 2017-2018 | |
|---|---|---|---|---|---|---|
|  | Shreveport n=75/92 | 81.5% | Shreveport n= 75/131 | 57% | Shreveport n= 84/87 | 96.55% |
|  | Leesville n= 17/28 | 61% | Leesville n= 48/88 | 54% | Leesville n= 66/100 | 66% |
|  |  |  | Alexandria n= 18/19 | 94.7% | Alexandria n= 47/54 | 87% |
| TOTAL | 92/120 | 77% | 141/238 | 59.2% | 197/241 | 81.7% |

**Analysis**. In the 2016-2017 assessment year, the outcome measure of 80% of students achieving a score of 86% or greater was not met, as only 59% of students achieved a score of 86% on the Research assignment.  This measure was also not met in 2015-2016 (77%).  The result of 59% was a significant decrease in the outcome from the previous year.  Faculty identified problems causing students to score low on this assignment.  These included students 1) not completing the assignment at all, 2) demonstrating poor usage of APA format, 3) not selecting a research article, 4) not utilizing the assistance offered by faculty, and 5) not following directions when completing the assignment.  In addition, there was inconsistency in grading by faculty teaching different sections of the course. Measures historically in place to assist students with this assignment include instructions given in class, posted on Moodle, and provided in the course syllabus. In addition, a rubric is provided, exemplar examples are available for review, faculty offer to give feedback on the assignment before it is turned in for a grade, faculty demonstrate how to find a research article in class, and a video is available on how to complete the assignment. This assignment is a first step in students being able to identify and find research articles in future nursing courses. Based on the analysis of the results, the plans for 2017-2018 were for faculty to 1) meet to discuss

consistency in grading the assignment, and 2) offer all currently utilized methods to assist students with this assignment.

In the 2017-2018 assessment year, faculty met to discuss consistency in grading the research assignment and discuss how to facilitate a better outcome for the students. Faculty discussed all the measures that should be taken to assist students with this assignment (posting directions/rubrics, reviewing in class, feedback opportunities, etc.). Faculty also reviewed the rubric and discussed grading, deductions, and assignment of grades. Faculty also decided to give students the opportunity to resubmit the assignment which could result in a higher grade. These activities were implemented on all campuses for the summer and fall semesters of 2017. In the 2017-2018 assessment year, less than half of the students took advantage of seeking feedback and/or resubmitting the assignment. However, the benchmark was met. In the 2017-2018 assessment year, 81.7% of all students achieved a score of 86% or better on the research assignment. Though the Leesville students did not meet the benchmark, there was an upward trend in the number of successful students from the spring to fall semester on that campus. Based on the analysis of the results, the plans for 2018-2019 are as follows: 1) one faculty will be identified as the lead faculty for this course and will ensure that new faculty teaching this course receive an orientation, 2) all faculty teaching this course will meet each semester to ensure that the consistency in current practices continue, 3) allow resubmission of the assignment after it is graded with the chance for the student to earn a higher grade, and 4) continue to offer all currently utilized methods to assist students with the research assignment.

**Decision:** In the 2017-2018 assessment year, 81.7% of students achieved a score of 86% or better on the Research assignment, meeting the expected outcome. Consistency in grading practices and allowing resubmission of the assignment after feedback was given resulted in a significant improvement in students being able to demonstrate basic knowledge about a research article. Based on the analysis of the results, the plans for 2018-2019 are as follows: 1) one faculty will be identified as the lead faculty for this course and will ensure that new faculty teaching this course receive an orientation, 2) all faculty teaching this course will meet each semester to ensure that the consistency in current practices continue, 3) allow resubmission of the assignment after it is graded with the chance for the student to earn a higher grade, and 4) continue to offer all currently utilized methods to assist students with the research assignment.

**SLO 2.** Perform caring interventions which assist the person to achieve dynamic equilibrium by facilitating the satisfaction of needs.

**Measure 2.1 (Indirect-Knowledge/Skills)**

*Assessment Method:* Skyfactor™ Question – "To what degree did your nursing program teach you to: Assist patients to interpret the meaning of health information."
*Expected Outcome:* Equal or greater than 6.0 on a 7.0 scale in the ASN Skyfactor ™ survey.

**Findings**

**AY 2016-2017:** Target Met    ASN mean score – 6.44; Select 6 mean - unavailable
**AY 2017-2018**: Target Met    ASN mean score – 6.36; Score of 6.0

Trending:

| Skyfactor™ | 2014-2015 | 2015-2016 | 2016-2017 | | 2017-2018 |
|---|---|---|---|---|---|
| | Q 82 | Q76 | Q76 | | Q76 |
| | | | N=90 | | N=78 |
| NSU | 6.02 | 6.39 | 6.44 | | 6.36 |
| Select 6 | 5.63 | 5.75 | Not available | New Bench-mark 6.0 | 6.0 |

**Analysis: (See Note[2])** ASN faculty teach communication skills and the meaning of health information throughout the ASN program. Students demonstrate their ability to assist patients in interpreting the meaning of health information through teaching plan assignments and in providing nursing care for patients. The teaching plan assignment requires the student to identify a teaching need for the patient, develop a teaching plan, get approval of the faculty, and implement the teaching plan.

For the 2016-2017 assessment year, the ASN score of 6.44 (scale 1-7) was higher than the 2014-2015 assessment year (6.02) and the 2015-2016 assessment year (6.39). Data shows a three (3) year upward trend in the students' perception of their ability to assist patients to interpret the meaning of health information. During this year, occasionally a patient would be discharge before the student had the opportunity to implement the teaching plan.  The student would then have to select another patient and develop another teaching plan.  Based on the analysis of the results, the plan for the 2017-2018 assessment year was for the students to present their teaching plan to fellow students in the post-conference clinical time if their patient had been discharged. In the 2017-2018 assessment year, this plan was implemented.  Students presented to fellow students and other interested staff.  This plan allowed all students to implement their teaching and gain more experience in teaching health information, while decreasing the frustration of students.  In the 2017-2018 assessment year, the ASN mean score was 6.36, a slight decrease from the 2016-2017 mean score of 6.44. Based on the analysis of the results, the plan for 2018-2019 will be for 1) students in the 1st level clinical course to watch students in the 2nd level clinical implement a teaching plan in the clinical setting (when possible), and 2) students in upper level clinicals (2nd through 4th levels) to show 1st level students (in lab) how to implement a teaching plan. These two practices will help 1st level students to prepare for the next clinical levels and help the upper level clinical students practice their skills and be a role model for lower level students.  In addition, new teaching resources planned for 2018-2019 will include patient teaching resources (handouts on medications, disease processes, health promotion, etc.) for patients from pediatrics to older adults.

**Decision:** In the 2017-2018 assessment year, the ASN mean score of 6.36 was a slight decrease (0.08) from the 2016-2017 mean score of 6.44. A mean score of 6.36 on a 7-point scale is evidence that students believe that the ASN program taught them to assist

patients to interpret the meaning of health information.  Based on the analysis of the results, the plan for 2018-2019 will be for 1) students in the 1st level clinical course to watch students in the 2nd level clinical implement a teaching plan in the clinical setting (when possible), 2) students in upper level clinicals (2nd through 4th levels) to show 1st level students (in lab) how to implement a teaching plan, and 3) faculty and students to utilize the new patient teaching resources for the teaching plan.  The first two practices will help 1st level students to prepare for the next clinical levels and help the upper level clinical students practice their skills and be a role model for lower level students.

**Measure 2.2 (Indirect-Knowledge/Skills)**

*Assessment Method:* Skyfactor™ Survey: Factor 10 – Technical Skills
*Expected Outcome:* Achieve a mean score of >5.5 on the ASN Skyfactor™ survey

Factor 10 on the Skyfactor™ Assessment consists of 2 questions:
1) To what degree did this nursing program teach you to: Provide physical support in preparation for therapeutic procedures
2) To what degree did this nursing program teach you to: Provide emotional support in preparation for therapeutic procedures

**Findings**

**AY 2016-2017:**  Target Met    ASN mean score – 6.53; Expected Outcome – 5.5
**AY 2017-2018**:  Target Met    ASN mean score – 6.44; Expected Outcome – 5.5

Trending:

| Skyfactor™ | 2014-2015 | 2015-2016 | 2016-2017 | 2017-218 |
|---|---|---|---|---|
| | Factor 10 | Factor 10 | Factor 10 | Factor 10 |
| | | | N=92 | N=80 |
| NSU | 6.02 | 6.36 | 6.53 | 6.44 |
| Skyfactor™ score | 5.5 | 5.5 | 5.5 | 5.5 |

**Analysis:**  Faculty teach emotional support and physical support provided to patients in preparation for procedures beginning in the first clinical/lab and didactic courses (NURA 1100/1110) through the last courses (NURA 2500/2510).  Faculty teach this content in class, demonstrate it in clinical and the lab, and give feedback to students in the lab and clinical settings.

In the 2016-2017 assessment year, the ASN mean score was 6.53 which met the expected outcome of 5.5.  This data was evidence that the students believed that the program taught them the technical skills of providing physical and emotional support to patients in preparation for therapeutic procedures.  Scores for this Factor show an upward trend from 2014-2015 (6.02) through 2016-2017 (6.53). In the 2016-2017 assessment year, the Leesville campus initiated a "Skills Fair" day for the Leesville and Natchitoches 4th Level clinical students. Students in the 4th Level were able to review and practice all skills learned while in school. Since students have different opportunities in clinical, it provided a great review for procedures that are not seen often

in the clinical setting and for skills that individual students may not have had the opportunity to perform. The feedback from students was overwhelmingly positive. Students encouraged faculty to continue this event for future students. Based on the analysis of the results, the plan for the 2017-2018 assessment year was to expand the "Skills Fair" and include the Shreveport students.

In the 2017-2018 assessment year the plan was implemented. In addition, faculty continued to teach the technical skills in nursing courses throughout the program. Feedback from all students attending the "Skills Fair" day was again very positive. In the 2017-2018 assessment year, the ASN mean score was 6.44 – a higher mean score than the expected outcome score of 5.5 on a 1-7 scale. The mean score of 6.44 shows excellence in the technical skills outlined in the Factor 10 questions. Based on the analysis of the results, the plan for the 2018-2019 assessment year will be for students in the 3rd Level to teach patients coping skills which are aimed at decreasing anxiety, build self-esteem, and increase mindfulness. These skills will provide emotional support for patients.

**Decision**: In the 2017-2018 assessment year, the ASN mean score was 6.44 – a higher mean score than the expected outcome score of 5.5 on a 1-7 scale. The score of 6.44 provides evidence that students believed that the program taught them the ability to provide emotional and physical support in preparations for a procedure. Based on the analysis of the results, the plan for the 2018-2019 assessment year will be for students in the 3rd Level to teach patients coping skills which are aimed at decreasing anxiety, build self-esteem, and increase mindfulness. These skills will help prepare students to provide emotional support for patients.

**Measure 2.3 (Direct-Knowledge)**

*Assessment Method:* ATI Comprehensive Predictor
The ATI Comprehensive Predictor is a standardized exam given for the purpose of predicting success on the NCLEX-RN licensing exam. The score on exam provides the probability that the student will be able to pass the NCLEX-RN and provides information on the student's strong and weak content areas. This report is used for remediation to strengthen areas of weakness.

*Expected Outcome:* At least 85% of first time takers will achieve a score equal to 94/95 percentile prediction of passing the NCLEX-RN

**Findings**

**AY 2016-2017:** Target Not Met    Overall 83.7% scored at a 94/95 percentile
**AY 2017-2018**: Target Met      Overall 85.4% scored at a 94/95 percentile

# Assessment Year 2017-2018

Trending:

| | | 2015-2016 | | 2016-2017 | | 2017-2018 | |
|---|---|---|---|---|---|---|---|
| Comprehensive Predictor | Shreveport n = 47/55 | 85.45% | Shreveport n = 45/57 | 78% | Shreveport n = 43/50 | 86% |
| | Leesville n = 12/12 | 100% | Leesville n = 13/13 | 100% | Leesville n = 27/32 | 84.3 % |
| | Natchitoches n = 21/21 | 100% | Natchitoches n = 14/16 | 87.5% | Natchitoches n =6/7 | 86% |
| | Total 80/88 | 90.9% | Total 72/86 | 83.7% | Total=76/89 | 85.4% |
| | Generic n = 52/60 | 86.67% | Generic n = 57/68 | 83% | Generic n = 50/60 | 83.3% |
| | *Transition n = 28/28 | 100% | *Transition n = 15/18 | 83% | *Transition n = 26/29 | 90% |
| | Total 80/88 | 90.9% | Total 72/86 | 83.7% | Total =76/89 | 85.4% |

*Transition students are LPN to ASN students

**Analysis:** The measures for this SLO assessment are presented by campus and by type of student (same students presented 2 different ways). Generic students are typically students without previous nursing experience and Transition students are LPN students returning for their ASN degree. Transition students must have a higher score on the TEAS to enter the program and must pass the Fundamentals Exam before entering the program.

The ATI Comprehensive Predictor is given in the 4th Level and the student's score counts as a part of the NURA 2500 course grade. In the 2016-2017 assessment year, the percentage that the ATI Comprehensive Predictor counted toward the course grade increased from four percent (4%) in the spring semester to 14% in the fall semester. The material tested on the ATI Comprehensive Predictor is from all material that was been taught throughout the ASN program. In Fall 2016, students attended a NCLEX-RN review before the ATI Comprehensive Predictor was given. However, the percent of students passing the ATI Comprehensive Predictor on the first attempt was similar for both semesters with 83% passing in the spring semester and 84% passing in the fall semester.

In the 2016-2017 assessment year, 83.7 % of students passed the ATI Comprehensive Predictor on their first attempt. This result (83.7%) did not meet the expected outcome of 85% of students achieving the 94th percentile predictor and the score was a decrease from the 2015-2016 outcome of 90.9%. The success rate between generic students and the transition students was equal. The outcomes are also presented by campus. The Leesville and Natchitoches campus met the expected outcome, but the Shreveport campus did not. Leesville students usually stay on that campus through their program. For the previous two years, 100% of Leesville students passed the ATI Comprehensive Predictor on the first attempt. Natchitoches students transition to that campus in the 3rd or 4th level of clinical. Their first 2 levels of clinical are on one of the other campuses – usually Shreveport. Students may request the Natchitoches campus for convenience if it is closer to their home. Selection for the Natchitoches campus is through achievement – higher levels earning the slot on the Natchitoches campus. Hence, it is not unusual for those students to perform well on this assessment. The Natchitoches data shows a decrease in the percent of students achieving the expected outcome from 2015-2016 (100%).

Based on the analysis of the results, the plan for 2017-2018 was to 1) schedule a NCLEX-RN review each semester for 4th Level students, and 2) increase the ATI practice tests required for students prior to taking the ATI Comprehensive Predictor.

In the 2017-2018 assessment year, the above plan was implemented. Students selected and paid for an NCLEX-RN review. However, the review was expensive and not all students could afford it. Consequently, the review was not required, but was highly encouraged. The results for the 2017-2018 assessment year show that 85.4% of students passed the ATI Comprehensive Predictor on the first attempt, which met the expected outcome of 85%. While the pass rate in Leesville dropped significantly, the pass rate in Natchitoches remained constant, and the pass rate in Shreveport increased significantly. The percent of transition students passing on the first attempt increased also. Based on the analysis of the results, the plan for the 2018-2019 assessment year is to 1) require weekly ATI practice exams for students, 2) require students to submit their ATI transcript showing completion of all required practice before the ATI Comprehensive Predictor, and 3) provide an ATI NCLEX-RN review in 4th level. The cost of the ATI NCLEX-RN will be included in the fees that the students have paid throughout the program and will not cost extra in their final semester.

**Decision:** In the 2017-2018 assessment year, 85.4% of students passed the ATI Comprehensive Predictor on the first attempt, which met the expected outcome of 85%. NCLEX-RN reviews have been scheduled and students have taken many practice exams prior to the ATI Comprehensive Predictor. Based on the analysis of the results, the plan for the 2018-2019 assessment year is to 1) require weekly ATI practice exams for students, 2) require students to submit their ATI transcript showing completion of all required practice before the ATI Comprehensive Predictor, and 3) provide an ATI NCLEX-RN review in 4th level.

## Measure 2.4 (Direct-Knowledge/Skills/Attitudes)

*Assessment Method:* Clinlical Evaluation
*Expected Outcome:* At least 90% of 2nd, 3rd, and 4th, level clinical students will achieve a final grade of PASS.

## Findings

**AY 2016-2017:** Target Met          100% of students achieved a final grade of pass.
**AY 2017-2018**: Target Met          100% of students achieved a final grade of pass.

Trending:

|  | 2015-2016 |  | 2016-2017 |  | 2017-2018 |  |
|---|---|---|---|---|---|---|
| Level 2 | Shreveport n = 54 | 100% | Shreveport n = 44 | 100% | Shreveport n =31/31 | 100% |
|  | Leesville n = 17 | 100% | Leesville n = 33 | 100% | Leesville n =14/14 | 100% |
|  |  |  |  |  | Alexandria n=10/10 | 100% |
|  | 71/71 | 100% | 77/77 | 100% | 55/55 | 100% |

| Level 3 | Shreveport n =67 | 100% | Shreveport n =47 | 100% | Shreveport n =56/56 | 100% |
|---|---|---|---|---|---|---|
| | Leesville n = 13 | 100% | Leesville n = 18 | 100% | Leesville n =32/32 | 100% |
| | Natchitoches n = 18 | 100% | Natchitoches n = 15 | 100% | Natchitoches n =4/4 | 100% |
| | | | | | Alexandria n=10/10 | 100% |
| | 98/98 | 100% | 80/80 | 100% | 102/102 | 100% |
| | Generic n = 32 | 100% | Generic n =61 | 100% | Generic n =27/27 | 100% |
| | Transition n = 16 | 100% | Transition n = 19 | 100% | Transition n =75/75 | 100% |
| Level 4 | Shreveport n = 55 | 100% | Shreveport n = 57 | 100% | Shreveport n =50/50 | 100% |
| | Leesville n = 12 | 100% | Leesville n = 13 | 100% | Leesville n =32/32 | 100% |
| | Natchitoches n = 22 | 100% | Natchitoches n = 16 | 100% | Natchitoches n =7/7 | 100% |
| | 89/89 | 100% | 86/86 | 100% | 89/89 | 100% |
| | Generic n = 61 | 100% | Generic n = 68 | 100% | Generic n =60/60 | 100% |
| | Transition n = 28 | 100% | Transition n = 18 | 100% | Transition n =29/29 | 100% |

**Analysis:** Students are taught to provide caring interventions in the clinical setting throughout the program and receive feedback on their ability to do so during clinical. Students are evaluated (1-5 scale) in the clinical setting based on the following behavioral expectations: 1) explains to client the rationale for nursing measures performed, 2) performs nursing measures according to accepted procedure and professional standards, 3) actively listens to client's perception of his/her needs, 4) provides effective patient care without allowing one's own value system to interfere, 5) demonstrates a caring and respectful attitude to client while delivering care, 6) verbalizes and examines own emotional response to interactions, and 7) selects an affective response appropriate for the situation. If a student is not meeting a criterion on the evaluation tool, faculty meet with the student to institute a learning contract outlining specifically what the student is lacking and what needs to happen for that student to pass the course. Feedback is given to the student regarding their progress toward meeting those goals for the rest of the semester.

In the 2016-2017 assessment year, the expected outcome of 90% of students achieving a score of Pass on the clinical evaluation in the 2nd, 3rd, and 4th Levels was met. One hundred percent (100%) of students in these levels passed their clinical course.  As the evidence shows, the students were able to demonstrate the required behaviors, knowledge, skills, attitudes, and professionalism required in clinical courses. Since all students are meeting this outcome, the faculty reflected on measures to help students be successful and enhance learning. Students are required to complete a specified number of clinical hours per semester.  If the student misses too much time,

the student has to repeat the course and corequisite courses to advance to the next clinical course and to graduate. Based on the analysis of the data, the plan for 2017-2018 was to offer students who experienced extenuating circumstances a grade of 'incomplete' and allow the student to complete the required clinical hours without having to repeat the whole semester. The ability to offer this would depend on many factors (the number of hours the student missed, time available till the next semester begins, and the availability of faculty).

In the 2017-2018 assessment year, this plan was implemented.  One student did have extenuating circumstances, was given an incomplete, and was able to complete the requirements before the next semester.  This process has saved the student time, money, and allowed the student to progress with the classmates. The results for the 2017-2018 assessment year were 100% of students achieving a score of pass in all clinical courses. This was consistent on all campuses and in the generic and transition students. The results for the past three years have been 100% of students meeting the expected outcome. As these measures are consistent and show maximum accomplishment for this expected outcome, the faculty decided look at individual scores on the evaluation tool for the 2018-2019 assessment year, in addition to the overall score of pass/fail.  As student's progress through the clinical courses, they are expected to assume more of the responsibilities of the registered nurse, utilize higher level knowledge in the care of patients, and demonstrate more critical thinking skills and professionalism. By measuring the percent of students who score a four (4) or five (5) average on the clinical evaluation, the faculty will be able to determine if students are accomplishing the "bare minimum" or if they are excelling in the clinical setting. An average score of three (3) is required to pass the course. The score of 4 indicates a student who is demonstrating the required skills consistently, safely, accurately, and confidently, with only occasional supporting cues.  Based on the analysis of the results, the plan for 2018-2019 is for faculty to 1) measure the percentage of students scoring a four or five on the clinical evaluation tool and 2) measure the percentage of students achieving a "pass" in the 2nd through 4th level clinical courses. The expected outcome for the percent of students achieving a four or five on the clinical evaluation is 75%.

**Decision:** In the 2017-2018 assessment year, 100% of students achieved a score of pass in all clinical courses.  This was consistent on all campuses and for the generic and transition students. The results for the past three years have been 100% of students meeting the expected outcome. Based on the analysis of the results, the plan for 2018-2019 is for faculty to 1) measure the percentage of students scoring a four or five on the clinical evaluation tool and 2) measure the percentage of students achieving a "pass" in the 2nd through 4th level clinical courses. The expected outcome for the percent of students achieving a four or five on the clinical evaluation is 75%.

**SLO 3.** Communicate effectively with the person and health care team members to promote, maintain and restore health.

**Measure 3.1 (Indirect-Knowledge/Skills)**

*Assessment Method:* Skyfactor™ Question – "To what degree did your nursing program teach you to: Assist patients to interpret the meaning of health information."
*Expected Outcome:* Equal or greater than 6.0 on a 7.0 scale in the ASN Skyfactor™ survey.

**Findings**

**AY 2016-2017:**  Target Met    ASN mean score – 6.44; Select 6 mean - unavailable
**AY 2017-2018**:  Target Met    ASN mean score – 6.36; Score of 6.0

Trending:

| Skyfactor™ | 2014-2015 | 2015-2016 | 2016-2017 | | 2017-2018 |
|---|---|---|---|---|---|
| | Q 82 | Q76 | Q76 | | Q76 |
| | | | N=90 | | N=78 |
| NSU | 6.02 | 6.39 | 6.44 | | 6.36 |
| Select 6 | 5.63 | 5.75 | Not available | New Bench-mark 6.0 | 6.0 |

**Analysis: (See Note[2])** ASN faculty teach communication skills and the meaning of health information throughout the ASN program. Students demonstrate their ability to assist patients in interpreting the meaning of health information through teaching plan assignments and in providing nursing care for patients. The teaching plan assignment requires the student to identify a teaching need for the patient, develop a teaching plan, get approval of the faculty, and implement the teaching plan.

For the 2016-2017 assessment year, the ASN score of 6.44 (scale 1-7) was higher than the 2014-2015 assessment year (6.02) and the 2015-2016 assessment year (6.39). Data shows a three (3) year upward trend in the students' perception of their ability to assist patients to interpret the meaning of health information. During this year, occasionally a patient would be discharge before the student had the opportunity to implement the teaching plan.  The student would then have to select another patient and develop another teaching plan.  Based on the analysis of the results, the plan for the 2017-2018 assessment year was for the students to present their teaching plan to fellow students in the post-conference clinical time if their patient had been discharged. In the 2017-2018 assessment year, this plan was implemented.  Students presented to fellow students and other interested staff.  This plan allowed all students to implement their teaching and gain more experience in teaching health information, while decreasing the frustration of students.  In the 2017-2018 assessment year, the ASN mean score was 6.36, a slight decrease from the 2016-2017 mean score of 6.44. Based on the analysis of the results, the plan for 2018-2019 will be for 1) students in the 1st level clinical course to watch students in the 2nd level clinical implement a teaching plan in the clinical setting (when possible), and 2) students in upper level clinicals (2nd through 4th levels) to show 1st level students (in lab) how to implement a teaching plan. These two practices will help 1st level students to prepare for the next clinical levels and help the upper level clinical students practice their skills and be a role model for lower level students.  In addition, new teaching resources planned for 2018-2019 will include

patient teaching resources (handouts on medications, disease processes, health promotion, etc.) for patients from pediatrics to older adults.

**Decision:** In the 2017-2018 assessment year, the ASN mean score of 6.36 was a slight decrease (0.08) from the 2016-2017 mean score of 6.44. A mean score of 6.36 on a 7-point scale is evidence that students believe that the ASN program taught them to assist patients to interpret the meaning of health information.  Based on the analysis of the results, the plan for 2018-2019 will be for 1) students in the 1st level clinical course to watch students in the 2nd level clinical implement a teaching plan in the clinical setting (when possible), 2) students in upper level clinicals (2nd through 4th levels) to show 1st level students (in lab) how to implement a teaching plan, and 3) faculty and students to utilize the new patient teaching resources for the teaching plan.  The first two practices will help 1st level students to prepare for the next clinical levels and help the upper level clinical students practice their skills and be a role model for lower level students.

**Measure 3.2 (Indirect-Knowledge)**

*Assessment Method:* Skyfactor™ Question – "To what degree did your nursing program teach you to: Evaluate individual's ability to assume responsibility for self-care?"
*Expected Outcome:* Equal or greater than 6.0 on a 7.0 scale in the ASN Skyfactor™ survey.

**Findings**

**AY 2016-2017:**  Target Met    ASN mean – 6.43; Expected Outcome – not available
**AY 2017-2018**:  Target Met    ASN mean – 6.24; Expected Outcome - 6.0

Trending:

| Skyfactor™ | 2014-2015 | 2015-2016 | 2016-2017 | | 2017-2018 |
|---|---|---|---|---|---|
| | Q85 | Q81 | Q81 | | Q81 |
| | | | N=92 | | N=80 |
| NSU | 5.96 | 6.26 | 6.43 | | 6.24 |
| Select 6 | 5.6 | 5.7 | Not available | New Bench-mark 6.0 | 6.0 |

**Analysis: (See Note[2])** For students to accomplish this measure, they must be able to communicate well with the patient and can evaluate what the patient says and is able to do. Students learn these skills through faculty demonstration, practicing communication with patients and their significant others, and in analyzing a conversation (process recording assignment). One way that students demonstrate these skills is through the teaching plan assignment. The teaching plan assignment requires the student to assess the patient and identify a knowledge deficit, research and learn about the identified deficit, develop a teaching plan, get approval from faculty, implement the teaching plan, and document the evaluation of the teaching. The teaching plan is a clinical assignment in 2nd and 3rd Levels. In addition, students are evaluated on communication skills each semester and identify teaching needs for patients in all clinical levels.

In the 2016-2017 assessment year, the ASN mean score of 6.43 was higher than the 2014-2015 assessment year (5.96) and the 2015-2016 assessment year (6.26). The

data showed a three year upward trend in this measure and showed that students believe that the ASN program taught them to evaluate the patient's ability to assume responsibility for self-care. Based on the analysis of the results, the plan for the 2017-2018 assessment year was for 1st Level faculty to develop scenarios for the purpose of allowing students to practice assessment skills, communication skills, and teaching skills.

In the 2017-2018 assessment year, this plan was implemented. First level faculty developed a patient scenario in which students assessed the patient's understanding of their medications, their condition, and other treatments that were in the scenario (i.e. oxygen, IV). Faculty received positive feedback from students on this activity. Since students do not take the Skyfactor survey until they are in 4th level, this will not affect the results for another year. In the 2017-2018 assessment year, the ASN mean score decreased slightly from 2016-2017 (6.43 down to 6.24), which is a -0.19-point difference. However, 6.24 is above the benchmark of 6 and met the expected outcome. Based on the analysis of the evidence, the plan for the 2018-2019 assessment year is to 1) utilize the Virtual Simulation resource related to teaching in the new text selected, and 2) ensure that students utilize a return demonstration or a return verbalization to evaluate patient comprehension of student teaching.

**Decision:** Based on the analysis of the results, the 2017-2018 ASN mean score of 6.24 was above the expected outcome of 6.0 but below the 2016 score of 6.43. The score of 6.24 on a 7.0 scale is evidence that students believe that the ASN program taught them to evaluate individual's ability to assume responsibility for self-care. Based on the analysis of the evidence, the plan for the 2018-2019 assessment year is to 1) utilize the Virtual Simulation resource related to teaching in the new text selected, and 2) ensure that students utilize a return demonstration or a return verbalization to evaluate patient comprehension of student teaching.

**Measure 3.3 & 3.4 (Indirect-Knowledge/Skills)**
Measure 3.3 and 3.4 are similar in how they are taught and methods to improve. Each question and findings will be presented first, and the analysis and decision will be addressed together.

*Measure 3.3*
*Assessment Method:* Skyfactor™ Question – "To what degree did your nursing program teach you to: Communicate with healthcare professionals to deliver high quality patient care?"
*Expected Outcome:* Equal or greater than the mean score of the Select 6 in the ASN Skyfactor™ survey

**Findings**

**AY 2016-2017:** Target Met    ASN mean – 6.32; Select 6 mean score - 5.67
**AY 2017-2018**: Target Met    ASN mean – 6.46; Select 6 mean score - 5.76

Trending:

| Skyfactor™ | 2014-2015 | 2015-2016 | 2016-2017 | 2017-2018 |
|---|---|---|---|---|
| | Q 74 | Q 68 | Q68 | Q 68 |
| | | | N=91 | N=79 |
| NSU | 5.87 | 6.07 | 6.32 | 6.46 |
| Select 6 | 5.39 | 5.55 | 5.67 | 5.76 |

*Measure 3.4*
*Assessment Method:* Skyfactor™ Question – "To what degree did your nursing program teach you to: Work with inter-professional teams?"
*Expected Outcome:* Equal or greater than the mean score of the Select 6 in the ASN Skyfactor™ survey

**Findings**

**AY 2016-2017:** Target Met    ASN mean score – 6.36; Select 6 mean score – 5.61
**AY 2017-2018**: Target Met    ASN mean score – 6.18; Select 6 mean score – 5.72

Trending:

| Skyfactor™ | 2014-2015 | 2015-2016 | 2016-2017 | 2017-2018 |
|---|---|---|---|---|
| | Q 75 | Q 69 | Q69 | Q69 |
| | | | N=91 | N=80 |
| NSU | 5.84 | 5.96 | 6.36 | 6.18 |
| Select 6 | 5.35 | 5.53 | 5.61 | 5.72 |

**Analysis:** Students learn communication skills and to work with interprofessional teams through a variety of methods, which include: didactic courses, practice in the clinical setting, simulation with classmates, mock code simulation, receiving report from the nurse when initiating care for patients, and reporting off to the nurse when leaving the clinical setting. In the simulation scenarios students work with other nurses, respiratory therapists, physicians, pharmacists, and physical therapists, or students in those fields.

In the 2016-2017 assessment year, the expected outcome for Measure 3.3 was the Select 6 mean score of 5.67.  The ASN mean score was 6.32, and therefore, met the expected outcome. This score continued a three year upward trend in this measure, each exceeding the expected outcome and providing evidence that students believed that the ASN program taught them to communicate with healthcare professionals to deliver high quality patient care.

The expected outcome for Measure 3.4 was the Select 6 mean score of 5.61. The ASN mean score was 6.36, and therefore, the program met the expected outcome. This score also continued a three year upward trend on this measure, each year exceeding the expected outcome and providing evidence that students believed that the ASN program taught them to work with inter-professional teams. Based on the analysis of the results, the plan for the 2017-2018 assessment year (for both measures) was for 1) students giving/receiving report to/from other nursing students on leaving/beginning the clinical shift (when possible), and 2) encourage students to make rounds with physicians.

During the 2017-2018 assessment year, these measures were implemented. Several clinical sites had different level students entering and leaving the same floor. These students were able to give and receive report from fellow students. This helped both groups to practice communication skills. Also, during 2017-2018 assessment year, faculty encouraged students to make rounds with physicians who expressed an interest and agreement with the idea. Students stated that they enjoyed both experiences and learned more about communication and how to communicate in these situations. The ASN mean score for Measure 3.3 (communication with healthcare professionals) for 2017-2018 was 6.46, meeting the expected outcome of the Select 6 mean score (5.76). This measure continued the upward trend over the past four (4) years. The mean score for Measure 3.4 (work with inter-professional teams) for 2017-2018 was 6.18, which met the expected outcome of the Select 6 mean score (5.72). The score of 6.18 was a decrease from the previous year, but still exceeded the 2014-2016 assessment years mean scores. A possible reason for the actions not resulting in a higher mean score is that the students experiencing the benefits were in lower levels and have not reached the final semester where they take the Skyfactor survey. Based on the analysis of the results, the plan for 2018-2019 is to initiate interprofessional simulation training in the last semester of the program.

**Decision:** The ASN mean score for Measure 3.3 (communication with healthcare professionals) for 2017-2018 was 6.46, meeting the expected outcome of the Select 6 mean score (5.76). This measure continued the upward trend over the past four (4) years. The mean score for Measure 3.4 (work with inter-professional teams) for 2017-2018 was 6.18, which met the expected outcome of the Select 6 mean score (5.72). The score of 6.18 was a decrease from the previous year, but still exceeded the 2014-2016 assessment years. Based on the analysis of the results, the plan for 2018-2019 is to initiate interprofessional simulation training in the last semester of the program. This activity will facilitation student communication and collaboration with students in other professions.

**Measure 3.5 (Direct-Knowledge/Skills)**
This measure comes from the Clinical Evaluation Tool of the clinical courses (NURA 1110, 1510, 2110, and 2510). As a component of the evaluation tool, Critical Element #2 is an evaluation of the ability of the student to use therapeutic verbal and written communication skills in the clinical course. Students must make a satisfactory on this critical element to pass the course.

*Assessment Method:* Clinical Evaluation: Critical Element #2 Communication Demonstrates therapeutic verbal and written communication skills with faculty, clients, family/significant others, and health care team members with minimal assistance.
*Expected Outcome:* At least 90% of 1st, 2nd, 3rd, and 4th level students will achieve a final grade of Satisfactory.
**Findings**

**AY 2016-2017:** Target Met    100% of students achieved a final grade of Satisfactory
**AY 2017-2018**: Target Met    100% of students achieved a final grade of Satisfactory

Trending:

| | 2015-2016 | | 2016-2017 | | 2017-2018 | |
|---|---|---|---|---|---|---|
| Level 1 | Shreveport n = 53 | 100% | Shreveport n = 46/46 | 100% | Shreveport n = 69/69 | 100% |
| | Leesville n = 24 | 100% | Leesville n = 26/27 | 96.3% | Leesville n = 32/32 | 100% |
| | | | Alexandria n= 12/13 | 92.3% | Alexandria n= 22/22 | 100% |
| | 77/77 = 100% | | 84/86 | 97.7% | 123/123 | 100% |
| Level 2 | Shreveport n = 54 | 100% | Shreveport n =44 | 100% | Shreveport n =31 | 100% |
| | Leesville n = 17 | 100% | Leesville n = 33 | 100% | Leesville n =14 | 100% |
| | | | | | Alexandria n= 10 | 100% |
| | 71/71 | 100% | 77/77 | 100% | 55/55 | 100% |
| Level 3 | Shreveport n = 67 | 100% | Shreveport n = 47 | 100% | Shreveport n =56 | 100% |
| | Leesville n = 13 | 100% | Leesville n = 18 | 100% | Leesville n =32 | 100% |
| | Natchitoches n = 18 | 100% | Natchitoches n = 15 | 100% | Natchitoches n =4 | 100% |
| | | | | | Alexandria n=10 | 100% |
| | 98/98 | 100% | 80/80 | 100% | 112/112 | 100% |
| | Generic n = 82 | 100% | Generic n = 61 | 100% | Generic n =27 | 100% |
| | Transition n = 16 | 100% | Transition n = 19 | 100% | Transition n =75 | 100% |
| Level 4 | Shreveport n = 55 | 100% | Shreveport n = 57 | 100% | Shreveport n = 50 | 100% |
| | Leesville n = 12 | 100% | Leesville n = 13 | 100% | Leesville n = 32 | 100% |
| | Natchitoches n = 22 | 100% | Natchitoches n = 16 | 100% | Natchitoches n = 7 | 100% |
| | 89/89 | 100% | 86/86 | 100% | 89/89 | 100% |
| | Generic n = 61 | 100% | Generic n = 68 | 100% | Generic n = 60 | 100% |
| | Transition n = 28 | 100% | Transition n = 18 | 100% | Transition n = 29 | 100% |

**Analysis:** Communication is a skill that is taught from the first nursing course through the last nursing course, as it is an essential skill that nurses utilize daily. Students demonstrate communication skills each clinical day by communicating with patients, faculty, nurses, and other health care providers.  In addition, students communicate by written means through documenting assessments, nursing notes (patient care documentation), care plans, process recordings (analysis of a conversation), and

teaching plans. Students are initially taught the principles of therapeutic communication in the first clinical courses and use those principles more in depth in subsequent nursing courses.  Demonstrating therapeutic verbal communication skills is a critical behavior on the clinical evaluation – students must score a satisfactory to pass the course. If a student is not meeting the criteria for this element during the semester, the faculty counsels the student regarding the deficit and discusses how they can meet this element successfully. The faculty and the student sign a learning contract outlining specific behaviors that must be demonstrated to be successful and pass the course.

In the 2016-2017 assessment year, 97.7% of clinical students in the 1st through 4th levels achieved a score of satisfactory, thus meeting and exceeding the expected outcome of 90% of students achieving a score of satisfactory. The evidence shows that students were able to demonstrate the communication skills required for each clinical course. Based on the analysis of the results, the plan for 2017-2018 was for 1) students giving/receiving report to/from other nursing students on leaving/beginning the clinical shift (when possible), 2) encourage students to make rounds with physicians, and 3) continue all other teaching measures in place.

In the 2017-2018 assessment year, the above plan was implemented.  Several clinical sites had different level students entering and leaving the same floor. These students were able to give and receive report from fellow students. This helped both groups to practice communication skills. Where there was not another student group to report to, the students continued the practice of reporting off to the staff nurse.  Also, during 2017-2018, faculty encouraged students to make rounds with physicians who expressed an interest and agreement with the idea.  Students stated that they enjoyed both of these experiences and learned more about communication and what is the more information to communicate. In the 2017-2018 assessment year 100% of students achieved a satisfactory score on number two of the Critical Elements section of the clinical evaluation tool. This measure exceeded the expected outcome of 90%.  Based on the analysis of the evidence, the plan for 2018-2019 is to initiate interprofessional simulation training in the last semester of the program. This will give students more opportunities to practice communication with students from other professions.

**Decision:** In the 2017-2018 assessment year 100% of students achieved a satisfactory score on number two of the Critical Elements section of the clinical evaluation tool. This measure exceeded the expected outcome of 90%. Based on the analysis of the evidence, the plan for 2018-2019 is to initiate interprofessional simulation training in the last semester of the program. This will give students more opportunities to practice communication with students from other professions.

**SLO 4.** Provide health education to reduce risk, promote and maintain optimal health

**Measure 4.1 (Direct-Knowledge/Skills)**

*Assessment Method:* Teaching Plan (3rd Level)

# Assessment Year 2017-2018

*Expected Outcome:* At least 80% of students will achieve a score of 3 or higher on scale of 1-5.

**Findings**

**AY 2016-2017:** Target Met    Finding – 100% of students achieved a score of $\geq$ 3
**AY 2017-2018**: Target Met    Finding – 100% of students achieved a score of $\geq$ 3

Trending:

|  | 2014 | 2015 |  | 2016 |  | 2017 |  |
|---|---|---|---|---|---|---|---|
| Level 3 | 100% | Shreveport n = 67 | 100% | Shreveport n = 47 | 100% | Shreveport n =56/56 | 100% |
|  |  | Leesville n = 13 | 100% | Leesville n = 18 | 100% | Leesville n =32/32 | 100% |
|  |  | Natchitoches n = 18 | 100% | Natchitoches n = 15 | 100% | Natchitoches n =4/4 | 100% |
|  |  |  |  |  |  | Alexandria n=10/10 | 100% |
|  |  | Generic n = 82 | 100% | Generic n = 61 | 100% | Generic n =27/27 | 100% |
|  |  | Transition n = 16 | 100% | Transition n = 19 | 100% | Transition n =75/75 | 100% |

**Analysis.** The teaching plan assignment requires the student to assess the patient and identify a knowledge deficit, research and learn about the topic, develop a teaching plan, get approval from faculty, implement the teaching plan, and document the evaluation of the teaching. For students to score a three on the teaching plan, they must be able to communicate well with the patient and have the ability to evaluate what the patient says and is able to do. Students learn these skills through faculty demonstration of communication, practicing communication with patients and their significant others, and in analyzing conversations (process recording assignment). In addition, students are evaluated on communication skills each semester and identify teaching needs for patients in all clinical levels.

In the 2016-2017 assessment year, 100% of ASN students on all campuses scored a three or higher on the teaching plan. This was consistent with the results from 2015-2016. Based on the analysis of the results, the plan for the 2017-2018 assessment year was for 1st Level faculty to develop scenarios for practicing assessment skills, communication skills, and teaching skills. Though the first level students will not affect this measure until they enter 3rd Level, it will facilitate an earlier development of communication and teaching skills in these students.

In the 2017-2018 assessment year, this plan was implemented. First level faculty developed a patient scenario in which students assess the patient's understanding of medication, their condition, and other treatments that are in the scenario (i.e. oxygen, IV). Faculty received positive feedback from students on the scenarios. In the 2017-2018 assessment year, 100% of students achieved a score of three or better on the teaching plan assignment. In the 2017-2018 assessment year, students were assigned a teaching plan in the women's health clinical rotation. For the 2018-2019 assessment year, the plan is to add a teaching plan in the psych-mental health rotation. The focus of

this teaching plan will be for students to teach patients coping skills which are aimed at decreasing anxiety, build self-esteem, and increase mindfulness.

**Decision:** In the 2017-2018 assessment year, 100% of students achieved a score of three or better on the teaching plan assignment. This continued the trend of 100% of students meeting the expected outcome over the past four years.  Based on the analysis of the results, the plan for the 2017-2018 assessment year is to add a teaching plan in the psych-mental health rotation. The focus of this teaching plan will be for students to teach patients coping skills which are aimed at decreasing anxiety, build self-esteem, and increase mindfulness.

## Measure 4.2 (Direct-Knowledge/Skills)

*Assessment Method:* Service Learning Project (2nd Level)
*Expected Outcome:* At least 95% of students will achieve a score of PASS.

## Findings

**AY 2016-2017:**  Target Met     Finding – 100% of students achieved a score of PASS
**AY 2017-2018**:  Target Met     Finding – 100% of students achieved a score of PASS

Trending:

|  | 2015-2016 | | 2016-2017 | | 2017-2018 | |
|---|---|---|---|---|---|---|
| Level 2 | Shreveport n= 54 | 100% | Shreveport n= 44 | 100% | Shreveport n= 31/31 | 100% |
|  | Leesville n= 17 | 100% | Leesville n= 33 | 100% | Leesville n= 14/14 | 100% |
|  |  |  |  |  | Alexandria N=10/10 | 100% |
|  |  |  |  |  | 55/55 | 100% |

**Analysis.** The service learning project involves groups of students performing a community needs assessment, identifying a project from the needs assessment, obtaining faculty approval, developing a teaching plan, and presenting the project incorporating a PowerPoint presentation. Groups consist of three to four students who select a project, such as teaching health food choices to a group in the community (i.e. seniors, youth groups).  Students often had difficulty with identifying a project.  This project counts two percent of the student's course grade in 2nd Level.  In the 2016-2017 assessment year, 100% of students were able to achieve an 80% or higher (a score of pass) on the service learning project. This result was equal to the results from the previous year (2015-2016).  Based on the analysis of the results, the plan for the 2017-2018 assessment year was to 1) provide a list of examples of service learning opportunities, and 2) accommodate community requests for students when possible and appropriate.

During the 2017-2018 assessment year, the above plan was implemented. Faculty provided a list of examples of service learning projects and some students

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accepted a service request of helping with a health fair. Students stated that they enjoyed the service learning projects and they felt good about the impact of their project. In the 2017-2018 assessment year, 100% of students were able to achieve an 80% or higher (a score of pass) on the service learning project. This continued the previous trend of all students being able to successful implement the service learning project. Based on the analysis of the results, the plan for the 2018-2019 assessment year is to revise the rubric for the presentation portion of this project and allow the students to use not only PowerPoint, but to use other modalities to enhance their presentation (i.e. display board, pamphlets, apps, technology)

**Decision:** In the 2017-2018 assessment year, 100% of students were able to achieve an 80% or higher on the service learning project. Based on the analysis of the results, the plan for the 2018-2019 assessment year is to revise the rubric for the presentation portion of this project and allow the students to use not only PowerPoint, but to use other teaching modalities to enhance their presentation (i.e. display board, pamphlets, apps, technology).  It is expected that expanding how the students present their project will allow for more creativity and encourage the use of technology.

**SLO 5.** Manage nursing care effectively utilizing human, physical, financial, and technological resources to meet the needs of the person.

**Measure 5.1 (Indirect-Knowledge & Attitude)**

*Assessment Method:* Skyfactor™ Question – "To what degree did your nursing program teach you to: Delegate nursing care while retaining accountability?"
*Expected Outcome:* Equal or greater than 6.0 on a 7.0 scale in the ASN Skyfactor™ survey.

**Findings**

**AY 2016-2017:**  Target Met    ASN mean – 6.39; Expected Outcome – not available
**AY 2017-2018**:  Target Met    ASN mean – 6.14; Expected Outcome - 6.0

Trending:

| Skyfactor™ | 2014-2015 | 2015-2016 | 2016-2017 | | 2017-2018 |
|---|---|---|---|---|---|
| | Q 87 | Q 83 | Q83 | | Q83 |
| NSU | 6.02 | 6.08 | 6.39 | New | 6.14 |
| Select 6 | 5.54 | 5.58 | Not available | Bench-mark 6.0 | 6.0 |

**Analysis. (Note[2])** Faculty teach delegation in the class room and the clinical setting starting with NURA 1100 & 1110 and continuing through the last courses (NURA 2500/2510/2550).  This includes didactic content taught in the classrooms (content related to what you can delegate and to whom, standards, and accountability) and application in the clinical setting. In the 4th Level course, NURA 2550, delegation is taught through Discussion Board assignments and activities.  In the 2016-2017 assessment year, the ASN mean score was 6.39, which was higher than the previous

two years and continued the upward trend from 2014-2016.  This score of 6.39 on a scale of 1-7 is evidence that students believe that the ASN program taught them to delegate nursing care while retaining accountability.  Based on the analysis of the results, the plan for 2017-2018 was for faculty to 1) assign students as team leaders in 2nd level and develop criteria for the assignment, and 2) utilize delegation teaching materials from ATI more fully.

During the 2017-2018 assessment year the above plan was implemented. Faculty in 2nd level assigned students as team leader weekly.  The team leader assigned patients, delegated work to other students, assigned breaks, and was held responsible/accountable for all work implemented by the other students. In addition, the faculty in 4th Level used ATI resources for course assignments in NURA 2550. While the 4th Level assignment could have an immediate impact on the Skyfactor score, the 2nd Level students will not take the Skyfactor survey until they are in 4th Level. The ASN mean for the 2017-2018 assessment year was 6.14, which met the expected outcome of 6.0.  However, this score was a decrease from 2016-2017 mean score, but above the scores from 2014-2016.  Based on the analysis of the evidence, the plan for the 2018-2019 assessment year is utilize the new text resources (multi-media) planned for 2018-2019 to enhance teaching delegation in each level.

**Decision:** The ASN mean for the 2017-2018 assessment year was 6.14, which met the expected outcome of 6.0. Though the plan for 2017-2018 had been implemented well, the score of 6.14 was a decrease from the previous year.  Based on the analysis of the evidence, the plan for the 2018-2019 assessment year is utilize the new text resources (multi-media) planned for 2018-2019 to enhance teaching delegation in each level.

**Measure 5.2 (Indirect-Knowledge/Skill)**

*Assessment Method:* Skyfactor™ Question – "To what degree did your nursing program teach you to: Use appropriate technologies to assess patients?"
*Expected Outcome:* Equal or greater than the mean score of the Select 6 in the ASN Skyfactor™ survey.

**Findings**

**AY 2016-2017:**  Target Met    ASN mean – 6.32; Expected Outcome – 5.63
**AY 2017-2018**: Target Met    ASN mean – 6.28; Expected Outcome – 5.74

Trending:

| Skyfactor™ | 2014-2015 | 2015-2016 | 2016-2017 | 2017-2018 |
|---|---|---|---|---|
|  | Q 70 | Q 64 | Q64 | Q64 |
| NSU | 5.93 | 6.04 | 6.32 | 6.28 |
| Select 6 | 5.38 | 5.47 | 5.63 | 5.74 |

**Analysis.** Students are taught to use technology while in the ASN program.  A few examples of the technology are medication dispensing machines, IV infusers, vital sign machines, and telemetry. Use of this technology is taught in the didactic courses

(some), in the lab, and in clinical settings. Students in the Leesville and Alexandria clinical sites had access to the healthcare facilities electronic health record (EHR). However, students in the Shreveport area did not have access to any EHR.  In addition, the healthcare facilities in the Shreveport area commented at the Advisory Council that the graduates had a difficult time learning how to use the EHR as new graduates/employees.  In the 2016-2017 assessment year, the ASN mean score was 6.32 on a scale of one to seven (1-7).  This score met the expected outcome of the Select 6 mean score of 5.63.  Based on the analysis of the results, the plan for the 2017-2018 assessment year was for students in the Shreveport area to purchase an EHR subscription to facilitate learning how to use technology for documenting all nursing care.

In the 2017-2018 assessment year, the above plan was implemented, and started with 1st and 2nd levels. Students in the Leesville and Alexandria area continued to have access to use the EHR in their healthcare facilities. During this year, new resources that became available were medication dispensing machine in the nursing skills lab at NSU and read-only access to the EHR at five area hospitals. In the 2017-2018 assessment year, the ASN mean score was 6.28 which met the expected outcome of the Select 6 mean score of 5.74.  Though the expected outcome was met, it was a decrease from the 2016-2017 assessment year by 0.04 points. It was, however, a higher mean score than the 2014-2016 scores.  The mean score of 6.28 is evidence that students believe that the ASN program taught them to use appropriate technologies to assess patients.  Based on the analysis of the evidence, the plan for the 2018-2019 assessment year is to utilize the new resources that will be available with the new texts selected for 2018-2019 assessment year. Resources will include online resources, virtual simulations, and care plan resources and templates. In addition, another area hospital will be granting read-only access to their EHR.

**Decision:** In the 2017-2018 assessment year students on all campuses gained access to an EHR to some degree and labs provided a medication dispensing machine for student practice. For the 2017-2018 assessment year, the ASN mean score was 6.28 which met the expected outcome of the Select 6 mean score of 5.74.  Based on the analysis of the evidence, the plan for the 2018-2019 assessment year is to utilize the new resources that will be available with the new texts selected for 2018-2019 assessment year. Resources will include online resources, virtual simulations, and care plan resources and templates. In addition, another area hospital will be granting read-only access to their EHR. It is believed that with these resources, the students will feel better equipped to use the EHR after graduation.

**Measure 5.3 (Indirect-Knowledge)**

*Assessment Method:* Skyfactor™ Question – "To what degree did your nursing program teach you to: Incorporate knowledge of cost factors when delivering care?"
*Expected Outcome:* Equal or greater than the mean score of the Select 6 in the ASN Skyfactor™ survey.

**Findings**

**AY 2016-2017:** Target Met    ASN mean score – 6.19; Expected Outcome – 5.47
**AY 2017-2018**: Target Met    ASN mean score – 6.01; Expected Outcome – 5.61

Trending:

| Skykfactor™ | 2014-2015 | 2015-2016 | 2016-2017 | 2017-2018 |
|---|---|---|---|---|
|  | Q 73 | Q 67 | Q67 | Q67 |
| NSU | 5.62 | 5.76 | 6.19 | 6.01 |
| Select 6 | 5.07 | 5.17 | 5.47 | 5.61 |

**Analysis.** Students begin learning about the cost factors associated with delivering healthcare in the first pre-clinical nursing course, NURA 1050. First level and subsequent levels also contribute in teaching this concept, including the cost of healthcare and the cost of high risk areas that contribute to the cost burden for healthcare faculties.  In the 2016-2017 assessment year, the ASN mean score was 6.19 which met the expected outcome of the Select 6 mean score of 5.47.  This score was higher than the previous two years and continued an upward trend over the last 3 years.  Based on the analysis of the results, the plan was to incorporate cost information regarding healthcare costs into didactic content.  This updated information is provided to faculty during an orientation by a large area health care provider each year.

In the 2017-2018 assessment year, faculty attended a meeting with the health care system mentioned above and shared the cost factor and other information with students in didactic courses.  The ASN mean score for this year was 6.01, which met the expected outcome of the Select 6 score of 5.61.  Though the expected outcome was met, this score was lower than the 2016-2017 score, but higher than the 2014-2016 mean scores.  Based on the analysis of the results, the plan for the 2018-2019 assessment year is to incorporate cost factors to all content (as appropriate) in the nursing courses with statistics that show the cost associated with delivering care.

**Decision:** The ASN mean score for this year was 6.01, which met the expected outcome of the Select 6 score of 5.61.  Though the expected outcome was met, this score was lower than the 2015-2016 score, but higher than the 2014-2016 mean scores.  Based on the analysis of the results, the plan for the 2018-2019 assessment year is to incorporate cost factors to all content (as appropriate) in the nursing courses with statistics that show the cost associated with delivering care.

**SLO 6.**   Demonstrate professional behaviors including adherence to standards of practice and legal and ethical codes of nursing conduct and accountability to the profession of nursing and society.

**Measure 6.1 (Indirect-Knowledge)**

*Assessment Method:* Skyfactor™ Question – "To what degree did your nursing program teach you to: Apply an ethical decision-making framework to clinical situations."

*Expected Outcome:* Equal or greater than 6.0 on a 7.0 scale in the ASN annual Skyfactor™ survey.

**Findings**

**AY 2016-2017:** Target Met     ASN mean – 6.48; Select 6 mean score – not available
**AY 2017-2018**: Target Met     ASN mean – 6.50; Expected Outcome - 6.0 (Scale 1-7)

Trending:

| Skyfactor™ | 2014-2015 | 2015-2016 | 2016-2017 | | 2017-2018 |
|---|---|---|---|---|---|
| | Q 81 | Q 75 | Q75 | | Q75 |
| NSU | 6.13 | 6.32 | 6.48 | New | 6.5 |
| Select 6 | 5.7 | 5.76 | Not available | Bench-mark 6.0 | 6.0 |

**Analysis: (See Note[2])** Students in the ASN program learn about standards of practice, ethical and legal codes of nursing conduct, and accountability throughout nursing course. These concepts are integrated in didactic and clinical courses. Teaching begins in NURA 1050 in which students are introduced to the ANA Code of Ethics and continues in 1st Level through 4th level with discussions and scenarios incorporating the ANA Code of Ethics.

In the 2016-2017 assessment year, the ASN mean score for this question was 6.48 on a scale of one to seven (1-7).  This was higher than the mean score from 2014-2015 (6.13) and 2015-2016 (6.32), revealing a three year upward trend in the mean score for this question. The 2016-2017 ASN mean score is also higher than the previous two years Select 6 mean scores.  Though the Select 6 mean score was not available for this year, the ASN program finds evidence enough to affirm that the expected outcome was met.  These mean scores are evidence that the students believe that the ASN program taught them to apply an ethical decision-making framework to clinical situations.  Based on the analysis of the evidence, the plan for 2017-2018 was to plan a simulation with an ethics-based scenario.

In the 2017-2018 assessment year, a simulation scenario was implemented in the 2nd Level clinical course.  The simulation was one half of a clinical day. For the second half of the day, the faculty used the same scenario to have students debate the issues in the simulation scenario.  Students were assigned to debate each side and other students were assigned to be the ethics committee. As an ethics committee, they had to come to a decision on the issue that was debated. Students shared with faculty that they felt they learned a lot through the simulation and the debate process.  The ASN mean score for the 2017-2018 assessment year was 6.5, which continued the upward trend over the past four (4) years. Based on the analysis of the results, the plan for the 2018-2019 assessment year is for the 1) faculty in 2nd Level ASN to share this simulation and debate information with all nursing faculty on all campuses. The

expectation is for all ASN clinical levels to have one activity/exercise/assignment related to ethics.

**Decision:** In the 2017-2018 assessment year, the ASN mean score was 6.5, which continued the upward trend over the past four (4) years. Based on the analysis of the results, the plan for the 2018-2019 assessment year is for the 1) faculty in 2nd Level ASN to share the teaching methods and tools utilized in 2016-2017 with the other clinical levels, nursing campuses, and other undergraduate nursing programs at NSU. The expectation is for all ASN clinical levels to have one activity/exercise/assignment related to ethics.

**Measure 6.2 (Indirect-Knowledge/Attitude)**
Professional Values is measured by the Skyfactor™ Survey Factor 8 which is comprised of five questions: To what degree did this nursing program teach you to: 1) provide culturally competent care, 2) support fairness in the delivery of care, 3) act as an advocate for vulnerable patients, 4) demonstrate accountability for your own actions, and 5) honor the right of patients to make decisions about their health care? Students can score these items from a 1 (Not at all) to a 7 (Exceptional).

*Assessment Method:* Skyfactor™ Factor 8 (comprised of 5 questions)
*Expected Outcome:* Equal or greater than a mean score of 5.5 on a 7.0 scale on the ASN Skyfactor™ survey.

**Findings.**

**AY 2016-2017:** Outcome Met     ASN mean – 6.54;  Select 6 mean score - 5.94
**AY 2017-2018**: Outcome Met     ASN mean – 6.46;  Select 6 Mean score - 5.93

Trending:

| Skyfactor™ | 2014-2015 | 2015-2016 | 2016-2017 | 2017-2018 |
|---|---|---|---|---|
| | Factor 8 | Factor 8 | Factor 8 | Factor 8 |
| NSU | 6.13 | 6.36 | 6.54 | 6.46 |
| Select 6 | 5.73 | 5.86 | 5.94 | 5.93 |

**Analysis:**     Each of the questions in Factor 8 of SLO 6 is a part of the American Nurses' Association (ANA) Code of Ethics for Nurses. Students in the ASN program are introduced to the ANA Code of Ethics for Nurses in NURA 1050. Faculty teach professional values in each nursing course (didactic and clinical) and are role models for this behavior. Professional behaviors that are taught and modeled include cultural competence, patient advocacy, patient rights, communication skills, integrity, accountability, and collaboration. Additionally, in the clinical courses students are evaluated on professionalism (accountability, responsibility, honesty, integrity, respectfulness, and adherence to professional standards), which is a critical behavior (required to pass the course).

The Skyfactor results from the 2016-2017 assessment year show the ASN mean score for Factor 8 was 6.54, which met the expected outcome of the Select 6 mean score, which was 5.94. The ASN mean score of 6.54 is well above the Select 6 mean score which is evidence that this outcome measure was met and students believe that the ASN program taught students to provide culturally competent care, support fairness in the delivery of care, act as an advocate for vulnerable patients, demonstrate accountability for their own actions, and honor the right of patients to make decisions about their health care. Based on the analysis of the evidence the plan for 2017-2018 was to plan a simulation with an ethics-based scenario.

In the 2017-2018 assessment year, a simulation scenario was implemented in the 2nd Level clinical course. The simulation was one half of a clinical day. For the second half of the day, the faculty used the same scenario to have students debate the issues in the simulation scenario. Students were assigned to debate each side and other students were assigned to be the ethics committee. As an ethics committee, they had to come to a decision on the issue that was debated. Students shared with faculty that they felt they learned a lot through the simulation and the debate process. In the 2017-2018 assessment year, the ASN mean score for Factor 8 was 6.46 which net the expected outcome of the Select 6 mean score of 5.93. The ASN mean score of 6.46 was a very slight decrease of 0.08 points. However, the results did remain very high and higher than the 2014-2016 ASN mean scores. The mean score of 6.46 is evidence that students believe the ASN program taught them nursing professional values. Based on the analysis of the evidence, the plan for 2018-2019 to enhance student learning is to add a cultural diversity project to the NURA 2550 course.

**Decision:** In the 2017-2018 assessment year, the ASN mean score for Factor 8 was 6.46 which net the expected outcome of the Select 6 mean score of 5.93. After a three year upward trend, the measure was essentially the same with a 0.08 decrease in mean score. The mean score of 6.46 (scale 1-7) is evidence that students believe the ASN program taught them nursing professional values. Based on the analysis of the evidence, the plan for 2018-2019 to enhance student learning is to add a cultural diversity project to the NURA 2550 course.

**Measure 6.3 (Direct-Knowledge)**
This outcome is measured by collecting the data from the evaluation of care plans developed by students in NURA 2110, which is the third clinical course for ASN Students. Item #4 on the evaluation tool indicates the score the student achieved on this assignment. Scores can range from 1-5. During the semester, the students will have three rotations. For each of the three clinical rotations in NURA 2110 the student will receive a score between 1 and 5. The scores for each rotation are averaged for one score. The measurement of 6.3 consists of the percentage of students who achieve an average score of 3 (passing) on the final attempt of the care plan assignment. The outcome measure states that 90% of the students will achieve a score of 3 or higher.

*Assessment Method:* Clinical Evaluation Item #4 in NURA 2110. Formulate appropriate plan of nursing interventions which adequately meets client needs relevant to formulated goal(s).

# Assessment Year 2017-2018

*Expected Outcome:*  90% of students will achieve a score of 3 or higher.

**Findings.**

**AY 2016-2017:**  Target Met     Finding – 100% of students achieved a score of $\geq$ 3
**AY 2017-2018**:  Target Met     Finding – 100% of students achieved a score of $\geq$ 3

Trending:

| | 2015-2016 | | 2016-2017 | | 2017-2018 | |
|---|---|---|---|---|---|---|
| Level 3 | Shreveport n = 67 | 100% | Shreveport n = 47 | 100% | Shreveport n = 56/56 | 100% |
| | Leesville n = 13 | 100% | Leesville n = 18 | 100% | Leesville n = 32/32 | 100% |
| | Natchitoches n = 18 | 100% | Natchitoches n = 15 | 100% | Natchitoches n = 4/4 | 100% |
| | Generic n = 82 | 100% | Generic n = 61 | 100% | Generic n = 75/75 | 100% |
| | Transition n = 16 | 100% | Transition n = 19 | 100% | Transition n = 27/27 | 100% |

**Analysis**:   For the care plan assignment, students analyze the data for a patient and utilize the nursing process to develop a plan of care for the assigned patient. The care plan must be based on the data and *individualized* to that specific patient. If students do not receive a satisfactory on the first submission, they are given feedback and allowed to resubmit the assignment, as a satisfactory score is a critical behavior (the student must achieve this to pass the course).

Students in the ASN program are introduced to the ANA Code of Ethics for Nurses in NURA 1050. Faculty teach professional values in each nursing course (didactic and clinical) and are role models for this behavior. Professional behaviors that are taught and modeled include cultural competence, patient advocacy, patient rights, communication skills, integrity, accountability, and collaboration.

In the 2016-2017 assessment year, 100% of students achieved a score of 3 or higher on Item #4 of the Clinical Evaluation for students in 3rd Level.  This data is evidence that students were able to develop an individualized plan of care for patients. Based on the analysis of the evidence, the plan for 2017-2018 for students in 1st level to develop care plans in the lab setting, before they cared for patients in the healthcare setting. In teaching students earlier in the program, it is expected that students will be able to complete a satisfactory care plan with less difficulty in the upper clinical courses.

In the 2017-2018 assessment year, the faculty in 1st level implemented this plan. Faculty in 2nd level found that most students were able to achieve a score of satisfactory the first time they submitted the care plan. This reduced the resubmissions and thereby reduced the workload of the student (by having to rework the care plan) and the faculty (having to grade the submissions).  For the 2017-2018 assessment year, 100% of students achieved a final score of satisfactory on the care plans. The results for the last three years have been 100% achievement. Faculty discussed what would be a better indicator of learning for this measure. As a result, the plan for the 2018-2019

assessment year is to 1) collect data on what percent of students can score a score of three or better on the care plan on the first attempt, and 2) continue to collect data on achievement of a score of three or better on the final submission.  Having additional data to analyze will give more information on how much students understand about creating a care plan initially.  This will help faculty revise teaching methods, offer more resources, and generally guide faculty in ways to facilitate student learning.

**Decision:** For the 2017-2018 assessment year, 100% of students achieved a final score of satisfactory on the care plans. The results for the last three years have been 100% achievement. Based on the analysis of the results, the plan for the 2018-2019 assessment year is to 1) collect data on what percent of students can score a score of three or better on the care plan on the first attempt, and 2) continue to collect data on achievement of a score of three or better on the final submission.  Having additional data to analyze will give more information on how much students understand about creating a care plan initially.  This will help faculty revise teaching methods, offer more resources, and generally guide faculty in ways to facilitate student learning.

## Comprehensive summary of key evidence of improvements based on analysis of results.

In the 2017-2018 assessment year, the ASN program implemented many plans to enhance student learning with the overall goals of students graduating, passing the NCLEX-RN, and finding employment.  Statistics related to these goals are:

- 68.3% of students who started in cohorts to graduate in 2017 did graduate on schedule. Another 13.8% of those cohorts are still enrolled.

- 97.5% pass rate for first time takers of the NCLEX-RN

- 100% of graduates who sought employment are employed

All Skyfactor survey ASN mean scores were above the expected outcome by 0.04-0.25 points and all but two ASN mean scores were increased from the past assessment year.  The Comprehensive Predictor (predictive test for the NCLEX-RN) weighted percentage of the course increased from 4% to 14%.  The individual student report of strengths and deficits in knowledge from the ATI Comprehensive Predictor was utilized to facilitate student remediation on those concepts in 4th Level, thereby helping prepare students for the NCLEX-RN exam.  In addition, a NCLEX-RN review course was scheduled for students in their last semester. Students have been taught content based on evidence-based practice (EBP), developed presentations on EBP, and practiced nursing care based on EBP. As these measures increase the knowledge base of the students, they directly contributed to preparation of students and the graduates being successful on the NCLEX-RN licensing exam. Faculty initiated planning for interprofessional simulation for the Fall 2017 semester. As a result, some students were

able to participate in interprofessional simulation in students from pharmacy and physician's assistant programs.

Some interventions taken will not result in immediate improvements on SLO measures, like the Skyfactor survey. Some measures initiated affected the freshmen or sophomore level students (i.e. ethical simulation and debate) and those students will not take the Skyfactor survey until they are graduating seniors.

These actions facilitated the success of graduates in passing the NLCEX-RN on the first attempt. In 2017 the pass rate for the ASN program was 97.5% which was an increase from 2015 (88%) and 2016 (93%). The employment rate of graduates who sought employment is 100%. Below are other measures that have contributed to student learning and success of ASN students in the 2017-2018 assessment year:

- Utilized ATI teaching content and assigned practice exams to prepare students for exams in all levels.

- Utilized ATI standardized exams each clinical level to assess and inform students of content areas of competency and deficiency.

- Utilized Electronic Health Record for 1st and 2nd Level clinical students in Shreveport.

- Increased the weighted percentage for ATI exams in nursing courses.

- Utilized texts containing evidence-based practice in each chapter.

- Last level students worked on areas of knowledge deficits identified by the Comprehensive Predictor.

- Admitted ASN nursing cohorts on the Alexandria and Leesville campus twice a year.

- Two (2) ASN faculty are supported/provided through healthcare partnerships with Willis-Knighton Health Systems.

- 94% of graduating students express the intent to continue their education in the future.

- Initiated student participation in Interprofessional Simulation.

- Tutored students on course content in each level by tutors and faculty.

- Implemented learning contracts for students not meeting passing criteria throughout the semester.

- Faculty met individually with students to review tests and counsel on study habits.

- Utilized case studies in didactic and clinical courses.

- Students had mock interviews (for job employment) in 4th Level.

- Students had access to high fidelity simulation through a healthcare partner – Willis-Knighton Health Systems.

- Faculty advised students pre-clinical and each clinical semester.

- Employment Rates: 100% of graduates from 2017 who want to work are employed.

- Five (5) ASN faculty are working on their doctorate.

- Reviewed resources that have increase in type and amount of technology-based teaching resources.

- Surveyed students on technology and apps utilized for nursing courses for use with anticipated iPad requirement.

- Initial steps taken to obtain iPads for student testing and resources.

- In 1st Level, began teaching development of care plans, and used scenarios to enhance student assessment and communication skills

- Faculty collaborated to ensure consistency of teaching practices in NURA 1050

- Student presenting all teaching even when pt discharged.

- Initiated "Skills Fair" day on all campuses to review skills

- Faculty developed and implemented an ethical simulation and debate in 2nd Level

- Students participate in a mock "code" simulation in 4th level

- Students gained experience acting as team leaders in 2nd Level

- Upper level students interacting more with lower levels in giving report on patients

## Plan of action moving forward.

As is evident in the measures of the student learning outcomes, students must be able to utilize technology comfortably as it continues to expand and become a part of each course that we teach. In the 2018-2019 assessment year, the ASN program will be moving toward utilization of technology to facilitate student learning, increase student comfort with testing online, and increase the amount and variety of resources available. Books with a variety of learning resources will be adopted starting in the first clinical courses in the fall semester. The NCLEX-RN is a computerized exam, so all testing will be given via computer. The program will move toward the use of iPads to support these endeavors and decrease the cost of expanding computer labs.

The 2018-2019 assessment year will also be a time of in-depth review of the Student Learning Outcomes and measures to ensure a more concise and effective use

of measures. The program will also use this time to review the content of the curriculum, making changes to facilitate the preparation of students for their future career in the nursing profession.