M.S. in Nursing
2006 NCA Progress Report #9

Introduction/Context

The MSN nursing program has the overarching goal of preparing nurses for an advanced role in professional practice. Four tracks are available.

Population Health

This track prepares RN’s for advanced specialized practice in population-based care and is designed for full- or part-time students. Population-based care includes the ability to assess health needs of a population; plan, advocate and participate in policy development; think analytically and strategically; and act effectively with other organizations and systems. Students gain skill in collaborating with health care professionals and the community to provide for the health needs of specific populations in a complex society.

Forensic Nursing

In addition to completion of the MSN program’s core content, students who elect the forensic nursing track concentrate their study on the science and the art of applying nursing to both criminal and civil investigations and legal matters. More particularly, emphasis is given the scientific investigation and treatment of victims/perpetrators of criminal activity or traumatic accidents within the clinical or community institution. Students acquire the in-depth knowledge and skill that interfaces the law, forensic science, law enforcement, mental health, health care and nursing.

Clinical Nurse Leader

This track retains the population health focus but concentrates the application of principles to a particular subset of clients within a system. Students gain skill in collaborating with health care professionals to provide for the health needs of a specific population in a complex health care system. Students in the Clinical Nurse Leader track are required to take coursework in information technology and pharmacology in addition to all core MSN Courses.

MSN/MBA

The MSN/MBA track is intended to prepare nurses for careers in management and leadership. This unique program offers students advanced knowledge, competencies, and skills in nursing of populations (see above) and a foundation for their growth into competent business managers. The graduates will have in-depth skills in demography, epidemiology, data analysis, evaluation research, survey research, data projections, cost-benefit analysis and the ability to apply nursing theory, business theory, ethics, cultural awareness and political strategies to design, implement, manage, and evaluate health programs, departments, and facilities.
Accreditation

The MSN program is currently accredited by the Commission on Collegiate Nursing Education (CCNE) and was approved for re-accreditation upon review in April 2005. This review was conducted early in the accreditation cycle by request of the nursing faculty so that future reviews of the graduate and undergraduate nursing programs would be conducted on the same timetable.

For national accreditation, the program is required to have a comprehensive evaluation plan that includes documentation of compliance with state laws, adequate resources to operate the program, an organizational structure that supports achieving the School’s mission, accurate information on the program available to the public, documentation of faculty productivity, and other measures. The student learning outcome data reported here is taken from that evaluation plan.

Requirements

Students enter the MSN program having completed a BSN degree. They progress through two distinct phases of that program and complete a self-evaluation of their progress in realizing terminal objectives/outcomes upon completion of Phase 1 and Phase 2 courses. One of the primary evaluative tools used in the MSN program is a student portfolio in which students present artifacts documenting achievement of the program’s terminal objectives or outcomes. Students begin collecting work for inclusion in their portfolios early in the program and continue adding items until completion of the degree. Over the past two years, there have only been three graduates of the program and their portfolios have been evaluated according to a scoring rubric developed by the faculty. For the next group of students progressing through the program, the faculty have identified specific courses to become formal checkpoints for portfolio evaluation.

The second direct measure used to assess student outcomes is an action research project completed during enrollment in NUR 606. This project functions as the exit requirement for the program and includes development of a research proposal with IRB approval, submission of a written report detailing project findings, and preparation and presentation of an oral report.

Goal

The primary goal of the MSN program has not changed. It remains as follows: Graduates will demonstrate readiness to practice nursing in the advanced role of their chosen track: Population Health, Forensic Nursing, or Nursing Administrator.

Outcomes & Related Research Measures

Direct Measures

Professional Portfolio Requirements. Since submission of the last status report, Faculty in the School of Nursing have revised program outcomes to specifically reflect student learning. As now defined, outcomes assessed by direct assessment through submission of an acceptable professional portfolio are as follows:
Phase 1 Outcomes

Knowledge. Demonstrates a knowledge base in nursing practice, theory, stress, disease of adaptation, population theory, and in the ability to seek out evidence applicable to population focused care.

Nursing Process. Uses population models and the nursing process to enhance the assessment and planning phase of the nursing process.

Research. Synthesizes published research literature on a population health topic. Able to write a research proposal to investigate a question related to a specific population group.

Interdisciplinary Relationships. Identifies the roles a population health nurse expert may take in relation to those from other disciplines in the practice of population health nursing.

Leadership. Identifies leadership techniques and managerial skills that could be used to effect changes in the delivery of health care to populations.

Accountability. Demonstrates responsible, accountable, and ethical behavior.

Life-Long Learning. Recognizes the need for life long learning and continued professional growth.

Phase 2 Outcomes

Knowledge. Uses knowledge and skill from the natural, physical, behavioral, and nursing sciences, the humanities, stress and disease of adaptation, multiple theories and population-focused research to practice nursing across multiple care environments.

Nursing Process. Uses the nursing process and population models to provide therapeutic interventions at each level of preventive care to assist populations to achieve, maintain, or regain health.

Research. Generates and uses nursing research findings in the delivery of the care of aggregates.

Leadership. Uses leadership and managerial skills to effect changes in the delivery of health care to a population.

Interdisciplinary Relationships. Participates as an equal member of a multidisciplinary health team to coordinate, manage, plan or evaluate the care of a population group.

Accountability. Demonstrates responsible, accountable, and ethical behavior.

Life-Long Learning. Recognizes the need for life long learning and continued professional growth.

The scoring form and attendant rubric used to evaluate students’ portfolios can be found in the appendix that accompanies this report.

NUR 606 Action Research Project. In addition to submission of a portfolio, all students are required to design and complete a qualitative or quantitative action research project during their enrollment in NUR 606 (Practicum in Population Health Care). This project serves as the exit requirement for the program unless the student otherwise elects to complete a thesis.
The purpose of the action research project is to demonstrate ability in the utilization of new knowledge to provide high quality health care, initiate change, and improve nursing practice. The project allows the student to fulfill this goal by demonstrating their skill in:

1. accessing current and relevant data needed to answer questions identified in nursing practice;
2. utilizing new knowledge to analyze the outcomes of nursing interventions, to initiate change, and to improve practice;
3. understanding and applying quantitative and/or qualitative research methods;
4. employing information systems for the storage and retrieval of data, consistent with the particular population focus;
5. initiating a line of inquiry into comprehensive databases in order to apply available research in the practice of nursing; and
6. writing and communicating effectively to identify a clinical problem, summarize research related to this problem, critically analyze the problem and current knowledge, and develop a strategy for the incorporation of the research into the treatment regimen.

The quantitative and qualitative scoring rubrics for the action research project are included in the appendix to this report.

**Indirect Measures**

Indirect measures are also used to assess program goals and outcomes. They include a 17-item survey administered at the conclusion of Phase 1 and Phase 2 courses. More particularly, this instrument asks students to indicate their perceived level of confidence in carrying out specific behaviors on a scale of 1-5. In addition, alumni and employer surveys are also employed to obtain further feedback on the quality and value of the program.

**Findings**

For convenience, findings are tabled in the accompanying Status Report #8. With the exception of items on the alumni survey dealing with issues of career advancement or change, all established benchmarks have been met.

**Review**

Assessment results are periodically reviewed on an annual basis by the entire faculty, the MSN Program Coordinator, and the director of the School of Nursing.

**Actions**

In May 2005, faculty further refined the portfolio review process to include formal (rather than informal) checkpoints of progress. These checkpoints will allow for formal tracking of each student’s progress and will be needed as the numbers of students in the program increase.
The School of Nursing has recently proposed adding a Clinical Nurse Leader (CNL) track to the existing MSN program in population health. Students electing this track would effectively give up their current electives to take a course in technology (ETE 501) and a course in advanced pharmacology (HCHS 536001). HCHS 536001, an offering of the Division of Continuing Education, would need to be renumbered and offered for semester credit if the proposal is approved. In addition, nominal changes would need to be made in the clinical components of NUR 604, NUR 605, and NUR 606 so that students in these courses would have an opportunity to enact the CNL role by working with practice partners. The impetus to establish this new track was a recent AACN resolution calling for required development of more generic master’s degree programs in nursing that aim to better prepare students for horizontal leadership roles as required in the clinical management of comprehensive client care in all settings. Pending approval of the College of Graduate Studies, the School of Nursing hopes to institute this track in the fall of 2005 as one means of helping students change or further advance in their careers. Consideration is likewise being given the establishment of a new specialization in the Ph.D. program in urban education that would focus on nursing and health education.

Employer and alumni surveys will continue to be administered over time.
Program: M.S. in Nursing

Program Goal: Graduates will demonstrate readiness to practice nursing in the advanced role of their chosen track: Population Health, Forensic Nursing, or Nursing Administrator.

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<th>REVIEW OF RESULTS (comparisons with target objectives)</th>
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<td>A. Portfolio Review: Every graduate of the program must submit a portfolio documenting achievement of all program requirements (terminal objectives/outcomes).</td>
<td>Portfolios are scored according to a rubric developed by the faculty (see appendix).</td>
<td>To date, all program graduates (N=12) have satisfactorily completed the portfolio requirement. There have been 5 graduates of the program over the past 3 years: the first completed the program and submitted an acceptable portfolio in AY 03-04 two students completed the program and submitted acceptable portfolios for review in May 2005. Two additional students completed the nursing coursework in May 2005 including the submission of portfolios. They graduated in May 2006 after completing elective coursework.</td>
<td>Faculty review portfolios and scores annually; graduating students have completed the requirement at a satisfactory level.</td>
<td>In May 2005, faculty further refined the portfolio review process to include formal (rather than informal) checkpoints of progress. These checkpoints will allow for formal tracking of each student’s progress and will be needed as the numbers of students in the program increase.</td>
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<td>B. Action Research Requirement</td>
<td>Action research projects are scored according to a rubrics developed by the faculty (see appendix).</td>
<td>To date, all program graduates have satisfactorily completed the action research project requirement</td>
<td>Faculty review projects and scores annually; graduating students have completed the requirement at a satisfactory level.</td>
<td>No further action required.</td>
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<td>C. Students completing Phase 2 courses document their perceived attainment of terminal objectives.</td>
<td>Phase 1 assessment tool is a 17-item survey where students indicate their perceived confidence in carrying out specific behaviors on a scale of 1 (low) to 5 (high).</td>
<td>Mean rating across all surveys (N=13) has been 4.213. Range for each item has been between 3–5.</td>
<td>Expected outcome has been rating of 3 or better. To date, all students completing Phase 1 classes have met the targeted expected outcome.</td>
<td>No further action required.</td>
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<td>D. Students completing Phase 2 courses document their perceived attainment of terminal objectives.</td>
<td>Phase 2 assessment tool is a 17-item survey where students indicate their perceived confidence in carrying out specific behaviors on a scale of 1 (low) to 5 (high).</td>
<td>Mean rating across all surveys (N=9) has been 4.51. Range for each item has been between 4–5.</td>
<td>Expected outcome has been rating of 3 or better. Students have met the expected outcome.</td>
<td>No further action required.</td>
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<td>E. Program alumni complete an alumni survey assessing their reflections on their preparedness to function in an advanced nursing role.</td>
<td>The Alumni Survey is an 10–item tool asking program graduates to reflect on their education and their readiness to function in advanced nursing roles.</td>
<td>Survey sent to all program graduates (N=8) in Summer 2004</td>
<td>There was a 50% return rate for the alumni survey. While the number of respondents is quite low, their response to all but two items was positive.</td>
<td>Items for which there was not a positive response were related to career changes/career advancement upon program completion. Faculty discussed the fact that a number of students from the first cohort in the program were required to complete the MSN degree to maintain their current positions, such that career advances may not have the relevance as in other cases. Addition of a CNL track and/or new specialization in the Ph.D. program are under consideration.</td>
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<td>F. Employers of alumni report program graduates are prepared for advanced nursing roles.</td>
<td>A 10-item questionnaire was used to obtain feedback from those who employ program graduates.</td>
<td>Employers of six graduates completed the request for evaluations.</td>
<td>Number of responses is low; employers that responded indicated that graduates are able to perform in advanced roles.</td>
<td>Employer feedback will continue to be solicited and data will be reviewed over time.</td>
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