

FRANCES PAYNE BOLTON SCHOOL OF NURSING SYSTEMATIC PLAN of EVALUATION (Approved December 6, 2021)
EFFECTIVE: Spring 2022

KEY ELEMENT	DATA	RESPONSIBLE PERSON	TIME FRAME	ASSESSMENT METHOD	EXPECTED OUTCOMES	OUTCOME OF ASSESSMENT	ACTION RESULTING FROM ASSESSMENT
I. MISSION AND GOVERNANCE							
Mission, philosophy, goals and expected program outcomes are congruent with those of the University and consistent with relevant professional nursing standards and guidelines for the preparation of nursing professionals. R 4723-05-09 R 4723-05-13	CWRU Mission FPB Mission and philosophy	Dean	Every 5 years or more often as needed	Review of documents to ensure congruence of mission, philosophy, goals, and expected student outcomes with those of the University, and consistent with relevant professional nursing standards and guidelines for the preparation of nursing professionals.	NA	Documents reflect congruence of mission, philosophy, goals and expected student outcomes with those of the University, FPB, and regulations and professional nursing standards.	Evaluation Committee minutes reflect documents have been reviewed and revised as necessary.
	CWRU and FPB Strategic plans FPB Goals Expected Student outcomes	Evaluation Committee	Last revision 12/2018 Next revision 2023			Any inconsistencies are identified and recommendations for revisions are presented to the Dean and Executive Committee.	Faculty Meeting minutes reflect documents have been presented and discussed. Program Meeting minutes reflect actions taken as needed to address any inconsistencies, recommendations or revisions.
Organizational Structure Ensure congruence between University and FPB Organizational Structures R 4723-05-09	University Organizational Chart	Dean	Every 5 years or more often as needed Next revision 2025	Review organizational charts of the University and FPB to ensure congruence between organizational structures	NA	Executive Committee minutes reflect congruence of organizational structures.	Faculty meeting minutes reflect congruence of organizational structures.
	FPB Organizational Chart	Executive Committee Associate Dean Academic Affairs		Review bylaws of the University Faculty Senate and FPB to ensure congruence between bylaws		Executive Committee minutes reflect congruence of the by-laws.	Faculty meeting minutes reflect congruence of the bylaws, and any deviations or recommendations have been addressed.
	CWRU Faculty Senate Bylaws FPB By laws	Program Directors					

CLD 3/27/19, Final - 4/25/19 --- REV 2/18/20, 3/16/21, 9/21/21, 11/16/21
Approved by Evaluation Committee 3/17/20, 10/19/21, 11/16/21
Approved by Faculty 5/4/20, 12/6/21

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	CWRU and FPB committees and membership lists		Every Academic year	Review of committees and membership to assess congruence with the by-laws.		<p>Executive committee reviews committee lists and memberships detailing open positions.</p> <p>Voting faculty vote on membership openings, as specified in bylaws.</p> <p>GSNA and USNA are notified of openings so student committee members can be elected.</p>	Faculty meeting minutes reflect nomination and voting process complete and committee memberships are filled, including student members.
Academic and Non-Academic policies of CWRU and FPB are congruent and reflect relevant regulations and professional nursing standards R 4723-05-12	CWRU Bulletin CWRU Policies FPB Student handbook	Associate Dean for Academic Affairs Executive Committee	Every Academic year	Review FPB policies in FPB Student Handbook to ensure congruence with CWRU policies and CWRU bulletin.	NA	Associate Dean for Academic Affairs and Program Directors will recommend revisions of policies as necessary to support the programs and expected outcomes.	Executive Committee minutes reflect congruence of policies. Faculty meeting minutes reflect updated policies presented for review.
Documents and Publications are accurate R 4723-05-12	Recruitment materials Marketing materials CWRU Bulletin FPB Student handbooks FPB websites	Associate Dean for Academic Affairs Program Directors Internal Communications Manager	Every 6 months for online and marketing Annually for General Bulletin and Student Handbook FPB web sites reviewed in Jan and July	Review of all printed and online materials		All documents, publications, websites are accurate and current	Associate Dean for Academic Affairs, Program Directors, and Internal Communications Mgr review and revise documents and websites as needed. Faculty meeting minutes reflect decisions to revise any print or online documents presented for review and approval, as necessary.

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II. INSTITUTIONAL COMMITMENT AND RESOURCES							
Fiscal and physical resources are sufficient for FPB to fulfill its mission, goals and expected outcomes. R 4723-05-09	FPB budget (developed in conjunction with Program Directors and Associate Dean for Academic Affairs) FPB Budget Committee input per functions outlined in bylaws	Dean Associate Dean for Finance and Administration Budget Committee Associate Dean Academic Affairs Program Directors	Every Academic year and as needed Budget Executive Summary submitted to Dean at end of each academic year (April)	Budget Review	NA	Budget Committee meeting minutes reflect the FPB budget has been reviewed and recommendations for revision, if any, are documented. Budget Committee meeting minutes reflect physical resources have been reviewed and recommendations, if any, for building modification and upgrades are documented. An Executive Summary prepared by the Budget Committee detailing the adequacy of the fiscal and physical resources including identification of areas of excellence and issues of concern/need or improvements are documented.	Annual Budget Committee Executive Summary is submitted to the Dean. Faculty meeting minutes reflect the Budget Committee Executive Summary was presented for discussion or as a consent agenda item.
	University Faculty Climate Survey	CWRU Institutional Research Provost Office	As scheduled by Provost Office	Review of Physical resources Review of Climate Survey results after report published by Provost Office.	NA	Physical resource needs are identified and prioritized within budget parameters.	Faculty meeting minutes reflect outcome of Faculty Climate Survey and prioritization of identified building updates or upgrades.
Academic Support and Learning Resources: Technology, Equipment R 4723-05-09	Student Course Evaluations Faculty Course Evaluations	Dean Associate Dean for Academic Affairs	Every Academic year	Review of academic support and learning resources		Associate Dean for Academic Affairs and Program Directors evaluate learning resource needs, and recommendations, if any, for modifications or upgrades to current systems or equipment are documented.	Faculty meeting minutes reflect plans to address needs, if any, related to academic support or learning resources (including technology upgrades and equipment purchases).

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Chief Nurse Administrator	Curriculum Vitae (CV) State Licensure	President Provost	Annual Review Each new appointment	Review CV and state license		Documentation confirms Dean meets qualifications as Chief Nurse Administrator per University and FPB policy	Change document submitted to University and accreditation agency as necessary.
Faculty Numbers sufficient to accomplish the mission, goals, the learning and expected student outcomes, and the faculty outcomes Preceptors R 4723-05-10	Faculty CVs Faculty Evaluations	Dean Associate Dir of Academic Affairs Program Directors Course Coordinators		Review of Faculty Activity System (FAS) data	100% compliance	Faculty audit results reviewed for congruence with relevant professional nursing standards and guidelines	Associate Dean of Academic Affairs and Program Directors determine any changes of clinical sites or placements based on outcomes of evaluations, site visits, and student and faculty feedback.
	Preceptor Qualification Forms (PQF) PQF Audits		Each semester preceptors are used (Annual)	Review of preceptor criteria in accordance with OBN rules (pre-licensure), and/or relevant professional standards and guidelines for graduate education (NTF, COA, ACME) Completed PQF Forms Review of PQF audits	100%	Program Directors and Course Coordinators review preceptor evaluations to determine preceptor performance meets expectations. PQF audit results reviewed for congruence with relevant professional nursing standards and guidelines.	
III. CURRICULUM							
The curriculum is developed, implemented, and revised to reflect course level objectives that are congruent with the nursing unit’s mission, philosophy, goals, expected student learning outcomes (at	CWRU Mission FPB mission, philosophy, goals Program Outcomes level outcomes, course outcomes,	Curriculum Committee Program Committees FPB Faculty	Every 5 years BSN due 2026 MN due 2025 MSN due 2025 DNP due 2025 Post Masters Cert. due 2025	Review student learning outcomes for each program for clarity and congruence with the CWRU and FPB mission, philosophy, goals, and expected student outcomes. Review Crosswalk detailing objectives and teaching methods mapping expected student learning outcomes.	100% compliance	Crosswalk provides evidence of expected learning related to student outcomes. Curriculum Committee meeting minutes reflect statements of consistency and congruence for each program, as well as documentation of any identified	Curriculum Committee recommends revisions to program curriculum as needed. These actions are systematically presented to the full faculty for discussion, recommendations, and approval of any proposed changes.

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the program level), and relevant professional standards and guidelines. R 4723-05-13	Curricular plan for each program			Crosswalk = Program / level / course / student learning outcomes /professional standards/measures		areas requiring changes or updates.	Curriculum Committee presents annual report to Faculty/Staff meeting each academic year.
Curriculum outcomes Expected individual learning outcomes are consistent with the roles for which the program is preparing its graduates and reflects professional nursing standards and guidelines. R 4723-05-13	Relevant professional standards and guidelines (regulatory/ accrediting agencies) Programs Outcomes Level Outcomes Course Outcomes Student Learning Outcomes FPB Course Syllabi	Curriculum Committee, PhD Council (for PhD), Associate Dean for Academic Affairs	At minimum - every 5 years BSN due 2023 MN due 2025 MSN due 2025 DNP due 2025 Post Masters Cert. due 2025	Review FPB documents for consistency and congruence with relevant professional standards and guidelines (regulatory and accrediting agencies)	N/A	Crosswalk correlates the knowledge and skills identified in the relevant professional standards and guidelines with program and course outcomes. Curriculum Committee meeting minutes reflects statements of consistency for each program.	Curriculum Committee will recommend revisions to current programs' outcomes as needed.
Curriculum content is logically structured to achieve expected student learning outcomes R 4723-05-13	CWRU Bulletin – course descriptions of nursing and non-nursing courses FPB Course Syllabi Canvas course site(s)	Curriculum committee PhD Council (for PhD) Associate Dean for Academic Affairs Program Directors Program Faculty	At minimum - every 5 years BSN due 2025 MN due 2025 MSN due 2025 DNP due 2025 Post Masters Cert. due 2025	Review of curriculum map reveals progression from basic to more complex concepts, from knowledge to application, from understanding to integration. Content progresses logically across courses and all program levels. Course objectives progress from knowledge acquisition to higher level mastery and application and student learning evaluations reflect this progression of development.	NA	Program faculty review of the Crosswalk document demonstrates curriculum logical progression. Crosswalk = Program / level / course / student learning outcomes /professional standards/measures	Program Faculty meeting minutes affirm or refine logical progression of curriculum.

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				BSN - demonstrates knowledge from arts, sciences, and humanities course which are incorporated into nursing practice MN – addresses BSN and Master’s essentials into curriculum MSN – addresses comprehensive graduate level courses to address APRN core DNP – addresses standards relevant to curriculum track offered			
Teaching-Learning practices are evaluated regularly R 4723-05-13	Course Syllabi	Program Faculty Program Directors Associate Dean for Academic Affairs PhD Council (for PhD)	Every Academic year	Review course/clinical documents to ensure appropriate and adequate teaching/learning strategies to achieve course outcomes. Review of evaluation documents to ensure all clinical sites/learning environments are appropriate and adequate to achieve expected outcomes.	100%	Program faculty meeting minutes reflect the course outcomes and teaching strategies have been evaluated and recommendations for change have been made, if necessary, to foster improvement.	Program faculty meeting minutes affirm or refine logical progression of curriculum. Program faculty meeting minutes reflect decisions and action plans based on evaluations to facilitate achievement of student outcomes and continuation of clinical site assignments.
Teaching-Learning environments evaluated regularly to foster ongoing improvement and support the achievement of expected learning outcomes R 4723-05-13	Faculty Evaluations of Course			Review of evaluations per course per semester	80% participation		
	Faculty Evaluations of Clinical Site(s)				80% participation		
	Student Evaluation of Clinical Site(s)				50% participation		

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IPE Collaboration Clinical Practice Experiences include opportunities for inter-professional collaboration R 4723-05-13	Student Evaluation of IPE basic course	Program Directors	Each semester offered	Review of pre-licensure student evaluations of IPE sessions	80% participation	Program faculty meeting minutes reflect integration of nursing practice with IPE.	Program faculty meeting minutes reflect refinement of program and student IPE experiences.
	Student Evaluation of team experience	IPE Team Coordinators Course Faculty		APRN students’ collaborative practice opportunities in clinical areas (review clinical site evaluations)	80% participation		
Student evaluation by faculty reflects achievement of expected individual student learning outcomes. Evaluation policies and procedures are defined and consistently applied. R 4723-05-13	Student Handbook	Associate Dean for Academic Affairs	Every Academic year	Review of student handbook and Canvas sites and course syllabi for course outcomes and grading policy.	100%	Student outcomes as evaluated by faculty demonstrate achievement of learning objectives.	Program directors provide guidance for issues arising within courses and programs.
	Canvas – course sites	Program Directors					
	Course Syllabi	Course Faculty PhD Council (for PhD)		Syllabi content audit	80%	Foster ongoing improvement of evaluation process.	Evaluation Committee presents annual report of syllabi content audits to Faculty/Staff meeting each academic year.
Partnerships/ Contracts with all partner agencies are current and in compliance with regulations and professional nursing standards for each site. R 4723-05-17	Partnership affiliation agreements/contracts	Dean Faculty Affairs and Special Program Manager	Every Academic year	Review: Affiliation Agreements Contracts Memorandum of Understanding (MOU) - Preceptor Agreements	100%	Agreements are current, and in compliance with professional regulations and University policies.	Agreements revised as required.

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IV. PROGRAM EFFECTIVENESS: ASSESSMENT AND ACHIEVEMENT OF PROGRAM OUTCOMES							
PROGRAM							
Program Completion R 4723-05-15	Graduation Data	Associate Dean for Academic Affairs Program Directors	Every Academic Year	A ratio is calculated using the number of students who require longer than the target to complete the program of study as the numerator and the total number in the class on admission as the denominator. BSN – 6 years MN – 4 Years MSN – 5 years DNP – 5 years	100%	Program faculty meeting minutes reflect trends identified and evaluated to inform program improvements. Annual program report provided to the Evaluation Committee for review and program improvement.	Faculty meeting minutes reflect annual program reports submitted to inform program improvements.
BSN - NCLEX First Time Pass Rates	NCLEX Reports		Every Academic Year	Report from NCSBN	80%		
MN - NCLEX First Time Pass Rates	NCLEX Reports			Report from NCSBN	80%		
MSN - Certification Pass Rates	Student Feedback			Reports from organizations that certify population focus advanced practice	80%		
Post Masters Certification Pass Rates	Student Feedback			Reports from organizations that certify population focus advanced practice	80%		
Employment Rate	Student Surveys and LinkedIn search			Evaluate in relation to peer schools	70%		
ADDITIONAL PROGRAM OUTCOMES							
Program outcomes demonstrate program effectiveness R 4723-05-15	Program Exit Surveys: <i>Skyfactor</i>	Program Directors Evaluation Committee	Every Academic year	Evaluate in relation to peer schools as appropriate	5.0 (scale = 0-7)	Program faculty meeting minutes reflect trends identified and evaluated to inform program improvements and appropriate curricular actions.	Faculty meeting minutes reflect annual program reports submitted to inform program improvements.
	CWRU Senior Survey (FPB Undergraduates First Destination Survey)		Every Academic year	Evaluate in relation to other CWRU schools	30% participation	Assessments and resulting actions are systematically reported to the Evaluation Committee.	Findings are reported to students and input is invited.

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ADDITIONAL AGGREGATE STUDENT OUTCOMES							
Student Retention	Retention Rates	Associate Dean Academic Affairs Program Directors	Every Academic Year	The total number of students who leave FPB (excluding those who leave for health reasons or family reasons, transfer to other schools within the university, transfer to other schools of higher education) divided by the total number of students admitted.	80%	Program faculty meeting minutes reflect trends identified and evaluated to inform program improvements and appropriate curricular actions. Assessments and resulting actions are systematically reported to the Evaluation Committee.	Faculty meeting minutes reflect annual program and outcome reports submitted to inform program improvements.
Academic Achievement	Grade Point Averages		Every Academic Year	Students will maintain 3.0 or better GPA	80%		
Separation	Individual Decision Letters	Associate Dean for Academic Affairs Program Directors Executive Committee	Every Academic Year	Students who fail to meet academic requirements as specified in the handbook are separated from the program. All such decisions are reported to and reviewed by the Executive Committee.	<20%	Executive Committee meeting minutes reflect the decisions and actions related to student separation.	
Grievances	Individual Complaints	Associate Dean for Academic Affairs Grievance Committee	Every Academic Year	A log of all student complaints regarding faculty or curriculum or other aspects of the student experience and the response to these complaints is maintained by the Academic Dean and available for review.	Target: 100% of complaints are addressed according to policy	Executive Committee meeting minutes reflect receipt of a report from the Associate Dean for Academic Affairs detailing the number of grievances, length of time between filing and hearing, and resolutions.	
AGGREGATE FACULTY OUTCOMES							
Teaching R 4723-05-13	Student Evaluations of Faculty Teaching	Faculty	Every Semester	Faculty are evaluated by their students as meeting or exceeding expectations. Summary reports of student feedback are generated at the close of each semester. These reports are shared with individual faculty, program leadership, and the academic dean.	3.0 (scale = 0-5)	Program faculty meeting minutes reflect trends identified and evaluated to inform program improvement and appropriate support for faculty development.	Faculty meeting minutes reflect annual program and outcome reports submitted to inform program improvements and faculty development needs.
	Student Evaluations of Courses	Program Director			3.0 (scale = 0-5)		
	Student participation in course Evaluations	ARPT Committee			50%		

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Research	Annual Faculty Activity Report	ARPT Committee	Annually or more frequently as needed	Tenure track faculty are engaged in research. Tenure track faculty are expected to submit proposals or secure funding for research.	80%		
Scholarship	Annual Faculty Activity Report			Tenure and non-tenure track faculty are engaged in dissemination of scholarly work.	80%		
Practice	Annual Faculty Activity Report			Non-tenure track faculty are engaged in clinical practice, administration or research.	80%		
Faculty Development							
Mentoring	Annual Faculty Activity System Report	ARPT Committee	Annually	Faculty Information System data-mentees meet with mentor at least annually	80%	Annual review of mentor-mentee assignments prepared by ARPT Committee	Faculty receive feedback during annual performance review and individual plans are created to support improvement.
Orientation R 4723-05-09	Orientation Records	Associate Dean for Academic Affairs Director, Faculty Development or designee	Ongoing	All new faculty participate in orientation at FPB and CWRU.	100%	Review of roster of new faculty indicating attendance at required orientation session(s). Individual orientation plans created and mentor selection confirmed for faculty joining outside of scheduled orientation periods.	