Program-Level Assessment Plan

Program: Accelerated BSN	Degree Level (e.g., UG or GR certificate, UG major, master's program, doctoral program): Undergraduate
Department: Nursing	College/School: School of Nursing
Date (Month/Year): September/ 2020	Primary Assessment Contact: Laura McLaughlin, Laura.McLaughlin@slu.edu

Note: Each cell in the table below will expand as needed to accommodate your responses.

#	Student Learning Outcomes What do the program faculty expect all students to know or be able to do as a result of completing this program? Note: These should be measurable and manageable in number (typically 4-6 are sufficient).	Curriculum Mapping In which courses will faculty intentionally work to foster some level of student development toward achievement of the outcome? Please clarify the level at which student development is expected in each course (e.g., introduced, developed, reinforced, achieved, etc.).	Assessment Methods	
			Artifacts of Student Learning (What) 1. What artifacts of student learning will be used to determine if students have achieved this outcome? 2. In which courses will these artifacts be collected?	Evaluation Process (How) 1. What process will be used to evaluate the artifacts, and by whom? 2. What tools(s) (e.g., a rubric) will be used in the process? Note: Please include any rubrics as part of the submitted plan documents.
1	Relate to people as unique individuals possessing worth, dignity, and potential for self-actualization.	Content introduced in NURS 2500/2520; threaded throughout the rest of the curriculum including clinical courses. (See Curriculum Map of SLO for the ABSN program). Level 1: Beginning Level 2: Reinforced Level 3: Achieved	Artifacts of Learning 1. The first artifact is students' ability to relate to people as demonstrated in (2520, 3435, 3445, 3485, 3495, 3565, 3575 and 4355). (Direct measure on Clinical Evaluation Tool of observed student behavior) Patient Centered Care: Objective #1. Relate to people as unique individuals possessing worth, dignity, and potential for self- actualization. 2. The second artifact is students' scores on the ATI RN Comprehensive Predictor exam, specifically on the item for Category: NLN Educational Competencies: Human Flourishing. This exam is taken in 4405 3. The third artifact of learning is (Direct measure) Student will pass	Evaluation Process 1. The tool used to evaluate students' demonstration of the learning outcome is the Clinical Evaluation Tool. This is completed by the clinical instructors during the last week of 2520, 3435, 3445, 3485, 3495, 3565, 3575, and 4355. The scores on this tool are aggregated the course coordinator by downloading the clinical evaluation rubric in the learning management system at end of each term. 2. The RN Comprehensive is scored in ATI Analytics and are available to the option coordinators for download at the end of the Spring term. 3. The annual NCLEX pass rate is calculated and report to the SON by

			NCLEX exam on first attempt 4. The fourth artifact is students' self-reported ratings for (Direct Measure): Q061 (provide culturally competent care), Q064 (act as an advocate for vulnerable patients), Q066 (Honor rights of patients). Skyfactor MAP Works survey. This survey is administered to graduates upon completion of the program. Which courses: Level 1: 2500, 2520. Level 2: 3435, 3445, 3565, 3575, 3485, 3495. Level 3: 4355. 4405	Mountain Measurement in April of every academic year. 4. The Skyfactor MAP Works results are available to the associate dean who shares the report with the option coordinator. What tools: 1. Appendix A, B and C (Clinical evaluation tools: Levels 1, 2, 3). 2. ATI Analytics RN Comprehensive predictor Report 3. The Annual Mountain Measure NCLEX Report 4. Skyfactor MAP Works Report
2	Synthesize theoretical and empirical knowledge from the humanities and natural, social, behavioral, and nursing sciences to provide safe, effective nursing care.	Content introduced in NURS 2500/ 2520; threaded throughout the rest of the curriculum including clinical courses. Level 1: Beginning Level 2: Reinforced Level 3: Achieved	Artifacts of Learning 1. The first artifact is students' ability to relate to synthesize theoretical and empirical knowledge in (2520, 3435, 3445, 3485, 3495, 3565, 3575 and 4355). (Direct measure on Clinical Evaluation Tool of observed student behavior) Objective #4. Synthesize theoretical and empirical knowledge from the humanities and natural, social, behavioral, and nursing sciences to provide safe, effective nursing care. 2. The second artifact is students' scores on the ATI RN Comprehensive Predictor exam (Direct measure), specifically on the item for Category: Client.	Evaluation Process 1. The tool used to evaluate students' demonstration of the learning outcome is the Clinical Evaluation Tool. This is completed by the clinical instructors during the last week of 2520, 3435, 3445, 3485, 3495, 3565, 3575, and 4355). These scores on this tool are aggregated the course coordinator by downloading the clinical evaluation rubric in the learning management system at end of each term. 2. The RN Comprehensive is scored in ATI Analytics and are available to the option coordinators for download at the end of the Spring term.

			Needs: Safe/effective environment and Category: BSN Essentials: Liberal Education for BSN Generalist. The exam is taken in 4405. 3. The third artifact of learning is (Direct measure) Student will pass NCLEX exam on first attempt 4. The fourth artifact is students' self-reported ratings (Indirect measure), for Q074 (integrate theories and concepts from liberal education into nursing practice); Q078 (integrate theory to develop a foundation for practice) on the Skyfactor MAP Works survey administered to graduates upon completion of the program. 5. The fifth article is (Direct measure) is the Senior Concept Map assignment which demonstrates their ability to synthesize nursing knowledge to provide safer and effective care which is complete Spring in 4355. Which courses: Level 1: 2500, 2520, 3360 Level 2: 3330, 3375, 3435, 3445, 3565, 3575, 3485, 3495. Level 3: 4355, 4405.	3. The annual NCLEX pass rate is calculated and report to the SON by Mountain Measurement in April of every academic year. 4. The Skyfactor MAP Works results are available to the associate dean who shares the report with the option coordinator. 5. The clinical instructors grade the Senior Concept Map assignments. The course coordinators of 4355 aggregates the scores for the Senior Concept Map assignment. What tools: What tools: 1. Appendix A, B and C (Clinical evaluation tools: Levels 1, 2, 3). 2. ATI Analytics RN Comprehensive predictor Report 3. The Annual Mountain Measure NCLEX Report 4. Skyfactor MAP Works Report 5. See Appendix D for Senior Concept Map Evaluation Rubric.

3	Establish relationships based on understanding of self and others, and of interpersonal and group dynamics.	Content introduced in NURS 2500/ 2520; threaded throughout the rest of the curriculum including clinical courses. Level 1: Beginning Level 2: Reinforced Level 3: Achieved	Artifacts of Learning 1. The first artifact is students' ability to relate to people as demonstrated in (2520, 3435, 3445, 3485, 3495, 3565, 3575 and 4355). (Direct measure on Clinical Evaluation Tool of observed student behavior) Promoting adaptation: Objective #2. Synthesize theoretical and empirical knowledge from the humanities and natural, social, behavioral, and nursing sciences to provide safe, effective nursing care. 2. The second artifact is students' self-reported ratings for (Indirect measure) on: Q070 Provide emotional support on the Skyfactor MAP Works survey administered to graduates upon completion of the program. 3. The third artifact of learning is (Direct measure) Student will pass NCLEX exam on first attempt Which courses: Level 1: 2500, 2520,3360 Level 2: 3330, 3375, 3435, 3445, 3565, 3575, 3485, 3495. Level 3: 4355.	Evaluation Process 1. The tool used to evaluate students' demonstration of the learning outcome is the Clinical Evaluation Tool. This is completed by the clinical instructors during the last week of 2520, 3435, 3445, 3485, 3495, 3565, 3575, and 4355). These scores on this tool are aggregated the course coordinator by downloading the clinical evaluation rubric in the learning management system at end of each term. 2. The Skyfactor MAP Works results are available to the associate dean who shares the report with the option coordinator. 3. The annual NCLEX pass rate is calculated and report to the SON by Mountain Measurement in April of every academic year. What tools: 1. Appendix A, B and C (Clinical evaluation tools: Levels 1, 2, 3). 2. Skyfactor MAP Works Report 3. The Annual Mountain Measure NCLEX Report
4	Practice in a variety of settings with clients of all ages and diverse sociocultural backgrounds.	Content introduced in NURS 2520; threaded throughout the rest of the curriculum including clinical courses. Level 1: Beginning Level 2: Reinforced	Artifacts of Learning 1. The first artifact is students' ability to relate to people as demonstrated in (2520, 3435, 3445, 3485, 3495, 3565, 3575 and 4355). (Direct measure on Clinical	Evaluation Process 1. The tool used to evaluate students' demonstration of the learning outcome is the Clinical Evaluation Tool. This is completed by the clinical

		Level 3: Achieved	Evaluation Tool of observed student behavior) Promoting adaptation: Objective #3. Practice in a variety of settings with clients of all ages and diverse 2. The second artifact is students' scores on the ATI RN Comprehensive Predictor exam, specifically on the item for BSN Essentials: Baccalaureate Generalist. This exam is taken in 4405 3. The third artifact of learning is (Direct measure) Student will pass NCLEX exam on first attempt 4. The fourth artifact is students' self-reported ratings for (Indirect measure) on: Q067 (Incorporate nursing standards into practice); Q069 (Provide physical support); Q070(provide emotional support) on the Skyfactor MAP Works survey administered to graduates upon completion of the program. 2. Which courses Level 1: 2520. Level 2: 3435, 3445, 3565, 3575, 3485, 3495. Level 3: 4355, 4405.	instructors during the last week of 2520, 3435, 3445, 3485, 3495, 3565, 3575, and 4355). These scores on this tool are aggregated the course coordinator by downloading the clinical evaluation rubric in the learning management system at end of each term. 2. The Skyfactor MAP Works results are available to the associate dean who shares the report with the option coordinator. 3. The annual NCLEX pass rate is calculated and report to the SON by Mountain Measurement in April of every academic year. 4. The RN Comprehensive is scored in ATI Analytics and are available to the option coordinators for download at the end of the Spring term. What tools: 1. Appendix A, B and C (Clinical evaluation tools: Levels 1, 2, 3). 2. ATI Analytics RN Comprehensive predictor Report 3. Skyfactor MAP Works Report 4. The Annual Mountain Measure NCLEX Report
5	Utilize critical thinking and problem solving skills, in application of the nursing process, to achieve optimal client adaptation.	Content introduced in NURS 2500/ 2515/ 2520; threaded throughout the rest of the curriculum including clinical courses. Level 1: Beginning	Artifacts of Learning 1. The first artifact is students' ability to relate to people as demonstrated in (2520, 3435, 3445, 3485, 3495, 3565, 3575 and	Evaluation Process 1. The tool used to evaluate students' demonstration of the learning outcome is the Clinical Evaluation Tool. This is

		Level 2: Reinforced Level 3: Achieved .	4355). (Direct measure on Clinical Evaluation Tool of observed student behavior) Promoting adaptation: Objective #5. Utilize critical thinking and problem solving skills, in application of the nursing process, to achieve optimal client adaptation. 2. The second artifact is students' scores on the ATI RN Comprehensive Predictor exam, specifically on the item for Nursing Process RN Planning. This exam is taken in 4405 3. The third artifact of learning is (Direct measure) Student will pass NCLEX exam on first attempt. 4. The fourth artifact is students' self-reported ratings for (Indirect measure) on: Q054 (use appropriate technologies to assess); Q078 (assess predictive factors); *Q089 (provide pain reduction measures);* Q090 (Manage wounds); Q071 (evaluate individual's ability to assume responsibility for self-care) on the Skyfactor MAP Works survey administered to graduates upon completion of the program. Which courses: Level 1: 2520. Level 2: 3435, 3445, 3565, 3575, 3485, 3495. Level 3: 4355 4405.	completed by the clinical instructors during the last week of 2520, 3435, 3445, 3485, 3495, 3565, 3575, and 4355). These scores on this tool are aggregated the course coordinator by downloading the clinical evaluation rubric in the learning management system at end of each term. 2. The RN Comprehensive is scored in ATI Analytics and are available to the option coordinators for download at the end of the Spring term. 3. The annual NCLEX pass rate is calculated and report to the SON by Mountain Measurement in April of every academic year. 4. The Skyfactor MAP Works results are available to the associate dean who shares the report with the option coordinator. What tools: 1. Appendix A, B and C (Clinical evaluation tools: Levels 1, 2, 3). 2. ATI Analytics RN Comprehensive predictor Report 3. Skyfactor MAP Works Report 4. The Annual Mountain Measure NCLEX Report

6	Assist clients, at any point on the health-illness continuum, to mobilize and use adaptive resources for promotion, maintenance and restoration of health.	Content introduced in NURS 2520; threaded throughout the rest of the curriculum including clinical courses. Level 1: Beginning Level 2: Reinforced Level 3: Achieved	Artifacts of Learning 1. The first artifact is students' ability to relate to people as demonstrated in (2520, 3435, 3445, 3485, 3495, 3565, 3575 and 4355). (Direct measure on Clinical Evaluation Tool of observed student behavior) Promoting adaptation: Objective #6. Assist clients, at any point on the health-illness continuum, to mobilize and use adaptive resources for promotion, maintenance, and restoration of health. 2. The second artifact is students' scores on the ATI RN Comprehensive Predictor exam, specifically on the items for BSN Essentials: Clinical prevention & population health. This exam is taken in 4405 3. The third artifact of learning is (Direct measure) Student will pass NCLEX exam on first attempt. 4. The fourth artifact is students' self-reported ratings for (Indirect measure) Q089 (assist patients to interpret the meaning of health information); Q090 (act as an advocate for vulnerable patients); Q092 (Honor the rights of patient to make decisions about their health care) Q072 (assist patient to achieve a peaceful end of life) on the Skyfactor MAP Works	Evaluation Process 1. The tool used to evaluate students' demonstration of the learning outcome is the Clinical Evaluation Tool. This is completed by the clinical instructors during the last week of 2520, 3435, 3445, 3485, 3495, 3565, 3575, and 4355). These scores on this tool are aggregated the course coordinator by downloading the clinical evaluation rubric in the learning management system at end of each term. 2. The RN Comprehensive is scored in ATI Analytics and are available to the option coordinators for download at the end of the Spring term. 3. The annual NCLEX pass rate is calculated and report to the SON by Mountain Measurement in April of every academic year. 4. The Skyfactor MAP Works results are available to the associate dean who shares the report with the option coordinator.

			survey administered to graduates upon completion of the program. Which courses: Level 1: 2520. Level 2: 3435, 3445, 3565, 3575, 3485, 3495. Level 3: 4355 4405.	What tools: 1. Appendix A, B and C (Clinical evaluation tools: Levels 1, 2, 3). 2. ATI Analytics RN Comprehensive predictor Report 3. Skyfactor MAP Works Report 4. The Annual Mountain Measure NCLEX Report
7	Collaborate with interprofessional colleagues, community representatives, and consumers to enhance health care.	Content introduced in NURS 2500, threaded throughout the nursing curriculum including clinical courses. Level 1: Beginning Level 2: Reinforced Level 3: Achieved	Artifacts of Learning 1. The first artifact is students' ability to relate to people as demonstrated in (2520, 3435, 3445, 3485, 3495, 3565, 3575 and 4355). (Direct measure on Clinical Evaluation Tool of observed student behavior) Promoting adaptation: Objective #7. Collaborate with interprofessional colleagues, community representatives, and consumers to enhance healthcare. (direct measure). 2. The second artifact is students' scores on the ATI RN Comprehensive Predictor exam, specifically on the items for: BSN Essentials: Interprofessional Communication and Collaboration. This exam is taken in 4405. 3. The third artifact of learning is (Direct measure) Student will pass NCLEX exam on first	Evaluation Process 1. The tool used to evaluate students' demonstration of the learning outcome is the Clinical Evaluation Tool. This is completed by the clinical instructors during the last week of 2520, 3435, 3445, 3485, 3495, 3565, 3575, and 4355). These scores on this tool are aggregated the course coordinator by downloading the clinical evaluation rubric in the learning management system at end of each term. 2. The RN Comprehensive is scored in ATI Analytics and are available to the option coordinators for download at the end of the Spring term. 3. The annual NCLEX pass rate is calculated and report to the SON by Mountain Measurement in April of every academic year. 4. The Skyfactor MAP Works

			attempt. 4. The fourth artifact is students' self-reported ratings for (Indirect measure) 058(communicate with health care professionals) Q085 (Work with interprofessional teams) on the Skyfactor MAP Works survey administered to graduates upon completion of the program. Which courses: Level 1: 2520. Level 2: 3435, 3445, 3565, 3575, 3485, 3495. Level 3: 4355 4405.	results are available to the associate dean who shares the report with the option coordinator. What tools: 1. Appendix A, B and C (Clinical evaluation tools: Levels 1, 2, 3). 2. ATI Analytics RN Comprehensive predictor Report 3. The Annual Mountain Measure NCLEX Report 4. Skyfactor MAP Works Report
8	Apply evidence-based knowledge as the basis for safe, effective nursing practice.	Introduced in NURS 2705 and threaded throughout the rest of the curriculum including clinical courses. Level 1: Beginning Level 2: Reinforced Level 3: Achieved	Artifacts of Learning 1. The first artifact is students' ability to relate to people as demonstrated in (2520, 3435, 3445, 3485, 3495, 3565, 3575 and 4355). (Direct measure on Clinical Evaluation Tool of observed student behavior) Promoting adaptation: Objective #9. Apply evidence-based knowledge as the basis for safe, effective nursing practice. 2. The second artifact is students' scores on the ATI RN Comprehensive Predictor exam, specifically on the items for: BSN Essentials: Scholarship	Evaluation Process 1. The tool used to evaluate students' demonstration of the learning outcome is the Clinical Evaluation Tool. This is completed by the clinical instructors during the last week of 2520, 3435, 3445, 3485, 3495, 3565, 3575, and 4355). These scores on this tool are aggregated the course coordinator by downloading the clinical evaluation rubric in the learning management system at end of each term. 2. The RN Comprehensive is scored in ATI Analytics and are available to the option coordinators for

			for Evidence Based Practice. This exam is taken in 4405. 3. The third artifact of learning is (Direct measure) Student will pass NCLEX exam on first attempt. 4. The fourth artifact is students' self-reported ratings for (Indirect measure) Q077 (Apply research based knowledge as basis for practice) on the Skyfactor MAP Works survey administered to graduates upon completion of the program. 5. The fifth article is (Direct measure) is the Evidence Synthesis Assignment which requires students to evaluate nurse research findings. This assignment is completed in 2705. Which courses: Level 1: 2520, 2705 Level 2: 3435, 3445, 3565, 3575, 3485, 3495. Level 3: 4355 4405.	download at the end of the Spring term. 3. The annual NCLEX pass rate is calculated and report to the SON by Mountain Measurement in April of every academic year. 4. The Skyfactor MAP Works results are available to the associate dean who shares the report with the option coordinator. 5. The course coordinator of 2705 aggregates student scores on the Evidence synthesis Assignment at the end of the term and curates examples of student work. What tools: 1. Appendix A, B and C (Clinical evaluation tools: Levels 1, 2, 3). 2. ATI Analytics RN Comprehensive predictor Report 3. The Annual Mountain Measure NCLEX Report 4. Skyfactor MAP Works Report 5. See Appendix E for the Evidence Synthesis Assignment rubric.
9	Apply the professional code of ethics and professional standards to clinical practice.	Content introduced in NURS 2500, threaded throughout rest of the nursing curriculum including clinical courses. Level 1: Beginning Level 2: Reinforced	Artifacts of Learning 1. The first artifact is students' ability to relate to people as demonstrated in (2520, 3435, 3445, 3485, 3495, 3565, 3575 and 4355). (Direct measure on	Evaluation Process 1. The tool used to evaluate students' demonstration of the learning outcome is the Clinical Evaluation Tool. This is

		Level 3: Achieved .	Clinical Evaluation Tool of observed student behavior) Promoting adaptation: Objective #11. Apply the professional code of ethics and professional standards to clinical practice. (direct measure). 2. The second artifact is students' scores on the ATI RN Comprehensive Predictor exam, specifically on the items for BSN Essentials: Professionalism and Professional values. This exam is taken in 4405. 3. The third artifact of learning is (Direct measure) Student will pass NCLEX exam on first attempt. 4. The fourth artifact is students' self-reported ratings for (Indirect measure) Q088 (support fairness in the delivery of care); Q092 (honor rights of patients to make decisions); Q093(incorporate nursing standards into practice); Q094 (apply an ethical decision making framework) on theSkyfactor MAP Works survey administered to graduates upon completion of the program. Which courses: Level 1: 2520. Level 2: 3435, 3445, 3565, 3575, 3485, 3495.	completed by the clinical instructors during the last week of 2520, 3435, 3445, 3485, 3495, 3565, 3575, and 4355). These scores on this tool are aggregated the course coordinator by downloading the clinical evaluation rubric in the learning management system at end of each term. 2. The RN Comprehensive is scored in ATI Analytics and are available to the option coordinators for download at the end of the Spring term. 3. The annual NCLEX pass rate is calculated and report to the SON by Mountain Measurement in April of every academic year. 4. The Skyfactor MAP Works results are available to the associate dean who shares the report with the option coordinator. What tools: 1. Appendix A, B and C (Clinical evaluation tools: Levels 1, 2, 3). 2. ATI Analytics RN Comprehensive

			Level 3: 4355 4405.	predictor Report 3. The Annual Mountain Measure NCLEX Report 4. Skyfactor MAP Works Report
10	Demonstrate personal and professional responsibility, accountability, and self-direction.	Content introduced in NURS 2500; threaded throughout the rest of the curriculum including clinical courses. Level 1: Beginning Level 2: Reinforced Level 3: Achieved	Artifacts of Learning 1. The first artifact is students' ability to relate to people as demonstrated in (2520, 3435, 3445, 3485, 3495, 3565, 3575 and 4355). (Direct measure on Clinical Evaluation Tool of observed student behavior) Promoting adaptation: Objective #12. Demonstrate personal and professional responsibility, accountability, and self-direction. 2. The second artifact is students' scores on the ATI RN Comprehensive Predictor exam, specifically on the items for Category: NLN Competency Professional Identity. This exam is taken in 4405. 3. The third artifact of learning is (Direct measure) Student will pass NCLEX exam on first attempt. 4. The fourth artifact is students' self-reported ratings for (Indirect measure) Q091 (demonstrate accountability for your own actions) Q099 (delegate nursing care while retaining accountability). on the Skyfactor MAP Works survey administered to graduates upon completion of the program.	Evaluation Process 1. The tool used to evaluate students' demonstration of the learning outcome is the Clinical Evaluation Tool. This is completed by the clinical instructors during the last week of 2520, 3435, 3445, 3485, 3495, 3565, 3575, and 4355). These scores on this tool are aggregated the course coordinator by downloading the clinical evaluation rubric in the learning management system at end of each term. 2. The RN Comprehensive is scored in ATI Analytics and are available to the option coordinators for download at the end of the Spring term. 3. The annual NCLEX pass rate is calculated and report to the SON by Mountain Measurement in April of every academic year. 4. The Skyfactor MAP Works results are available to the associate dean who shares the report with the option coordinator.

			Which courses: Level 1: 2520. Level 2: 3435, 3445, 3565, 3575, 3485, 3495. Level 3: 4405	What tools: 1. Appendix A, B and C (Clinical evaluation tools: Levels 1, 2, 3). 2. ATI Analytics RN Comprehensive predictor Report 3. The Annual Mountain Measure NCLEX Report 4. Skyfactor MAP Works Report
11	Demonstrate leadership principles in professional and interprofessional practice.	Content introduced in NURS 2500/ 2520, threaded throughout rest of IPE and nursing curriculum including clinical courses. Level 1: Beginning Level 2: Reinforced Level 3: Achieved	Artifacts of Learning 1. The first artifact is students' ability to relate to people as demonstrated in (2520, 3435, 3445, 3485, 3495, 3565, 3575 and 4355). (Direct measure on Clinical Evaluation Tool of observed student behavior) Promoting adaptation: Objective #8. Demonstrate leadership principles in professional and interprofessional practice. 2. The second artifact is students' scores on the ATI RN Comprehensive Predictor exam, specifically on the items for BSN Essential: Basics Organization and Systems Leadership for Quality and patient Safety. This exam is taken in 4405. 3. The third artifact of learning is (Direct measure) Student will pass NCLEX exam on first attempt. 4. The fourth artifact is students' self-reported ratings for (Indirect measure) Q085 (Work with interprofessional teams) on the Skyfactor MAP Works survey administered to	Evaluation Process 1. The tool used to evaluate students' demonstration of the learning outcome is the Clinical Evaluation Tool. This is completed by the clinical instructors during the last week of 2520, 3435, 3445, 3485, 3495, 3565, 3575, and 4355). These scores on this tool are aggregated the course coordinator by downloading the clinical evaluation rubric in the learning management system at end of each term. 2. The RN Comprehensive is scored in ATI Analytics and are available to the option coordinators for download at the end of the Spring term. 3. The annual NCLEX pass rate is calculated and report to the SON by Mountain Measurement in April of every academic year. 4. The Skyfactor MAP Works results are available to the associate dean who shares the report with the option coordinator. 5. The course coordinator of 4355 aggregates student scores on

			graduates upon completion of the program. 5. The fifth article is (Direct measure) the Senior Capstone Clinical Log Assignment which covers professional behaviors and demonstration of the nursing process. The Capstone Clinical Log is completed in 4355. Which courses: Level 1: 2520. Level 2: 3435, 3445, 3565, 3575, 3485, 3495. Level 3: 4405	the Senior Capstone Clinical Log at the end of the term and curates examples of student work. What tools: 1. Appendix A, B and C (Clinical evaluation tools: Levels 1, 2, 3). 2. ATI Analytics RN Comprehensive predictor Report 3. The Annual Mountain Measure NCLEX Report 4. Skyfactor MAP Works Report 5. See Appendix F for Senior Capstone Clinical Log Rubric.
12	Demonstrate understanding of health care policy issues, trends and strategies as they influence accessibility, accountability and affordability in health care delivery.	Content introduced in NURS 3100/4105, threaded throughout rest of IPE/IPTS and nursing curriculum including clinical courses. Level 1: Beginning Level 2: Reinforced Level 3: Achieved	Artifacts of Learning 1. The first artifact is students' ability to relate to people as demonstrated in (2520, 3435, 3445, 3485, 3495, 3565, 3575 and 4355). (Direct measure on Clinical Evaluation Tool of observed student behavior) Promoting adaptation: Objective #13. Demonstrate understanding of health care policy issues, trends and strategies as they influence accessibility, accountability and affordability in health care delivery. 2. The second artifact is students' scores on the ATI RN Comprehensive Predictor	Evaluation Process 1. The tool used to evaluate students' demonstration of the learning outcome is the Clinical Evaluation Tool. This is completed by the clinical instructors during the last week of 2520, 3435, 3445, 3485, 3495, 3565, 3575, and 4355). These scores on this tool are aggregated the course coordinator by downloading the clinical evaluation rubric in the learning management system at end of each term. 2. The RN Comprehensive is scored in ATI Analytics and are available to the option coordinators for

			exam, specifically on the items for BSN Essentials: Health Care Policy. This exam is taken in 4405. 3. The third artifact of learning is (Direct measure) Student will pass NCLEX exam on first attempt. 4. The fourth artifact is students' self-reported ratings for (Indirect measure) Q050 (understand how health care delivery system is organized); Q055 (understand the effects of health policies on diverse populations) Q056 (Understand the global health care environment); Q057 (Incorporate knowledge of cost factors when delivering care); Q062 (Support fairness in the delivery of care) on the Skyfactor MAP Works survey administered to graduates upon completion of the program. 5. The fifth article (Direct measure) ABNS Student in NUR 3445 completes a Population Focused Analysis Projects which is completed in 3445. Which courses: Level 1: 2520. Level 2: 3435, 3445, 3565, 3575, 3485, 3495. Level 3: 4405	download at the end of the Spring term. 3. The annual NCLEX pass rate is calculated and report to the SON by Mountain Measurement in April of every academic year. 4. The Skyfactor MAP Works results are available to the associate dean who shares the report with the option coordinator. 5. The course coordinator of 3445 aggregates student scores on the Population Focused Analysis Project at the end of the term and curates examples of student work. What tools: 1. Appendix A, B and C (Clinical evaluation tools: Levels 1, 2, 3). 2. ATI Analytics RN Comprehensive predictor Report 3. The Annual Mountain Measure NCLEX Report 4. Skyfactor MAP Works Report 5. See Appendix G for Population Focused

				Analysis Projects Rubric.
13	Utilize appropriate information and healthcare technologies to enhance the delivery of client care.	Content introduced in NURS 2500/ 2520; threaded throughout the rest of the curriculum including clinical courses. Level 1: Beginning Level 2: Reinforced Level 3: Achieved	Artifacts of Learning 1. The first artifact is students' ability to relate to people as demonstrated in (2520, 3435, 3445, 3485, 3495, 3565, 3575 and 4355). (Direct measure on Clinical Evaluation Tool of observed student behavior) Promoting adaptation: Objective#10. Utilize appropriate information and healthcare technologies to enhance the delivery of client care. 2. The second artifact is students' scores on the ATI RN Comprehensive Predictor exam, specifically on the items for BSN Essentials: Information management and applications of patient care technology. This exam is taken in 4405. 3. The third artifact of learning is (Direct measure) Student will pass NCLEX exam on first attempt. 4. The fourth artifact is students' self-reported ratings for (Indirect measure) Q057 (training to use medical computer technology); Q054 (Use appropriate technologies to assess patients) on the Skyfactor MAP Works survey administered to graduates upon completion of the program. Which courses: Level 1: 2520.	Evaluation Process 1. The tool used to evaluate students' demonstration of the learning outcome is the Clinical Evaluation Tool. This is completed by the clinical instructors during the last week of 2520, 3435, 3445, 3485, 3495, 3565, 3575, and 4355). These scores on this tool are aggregated the course coordinator by downloading the clinical evaluation rubric in the learning management system at end of each term. 2. The RN Comprehensive is scored in ATI Analytics and are available to the option coordinators for download at the end of the Spring term. 3. The annual NCLEX pass rate is calculated and report to the SON by Mountain Measurement in April of every academic year. 4. The Skyfactor MAP Works results are available to the associate dean who shares the report with the option coordinator. What tools: 1. Appendix A, B and C (Clinical evaluation

			Level 2: 3435, 3445, 3565, 3575, 3485, 3495. Level 3: 4405	tools: Levels 1, 2, 3). 2. ATI Analytics RN Comprehensive predictor Report 3. The Annual Mountain Measure NCLEX Report 4. Skyfactor MAP Works Report

Use of Assessment Data

1. How and when will analyzed data be used by program faculty to make changes in pedagogy, curriculum design, and/or assessment practices?

Course faculty will aggregate results of clinical evaluation tools reports rubrics, course assignments, and ATI scores at the end of each course. Associate dean will analyze results of NCLEX pass rates and Skyfactor MAP-Works Assessment surveys annually. Results will be compared to trends from previous course offerings. The results, analysis, and recommendations for improvement will be discussed at the ABSN annual dedicated curriculum meeting (August) and reported at an annual Pre-licensure curriculum meeting.

The Associate Dean of the Pre-licensure programs will convene a task force to recommend strategies for the Undergraduate Pre-Licensure Program Committee (UPPC) faculty to implement action if:

1. ≥ 10% of students achieve less than satisfactory on any SLO for Levels 1, 2, or 3 on the clinical evaluation tool (course coordinators will aggregate the data).
2. Analysis of the relevant trend results of Skyfactor Mapworks survey items are less than ≤5.
3. The mean ATI RN Comprehensive Predictor examination component score is ≤70%.
4. The NCLEX-RN first time pass rate is < 90%.

2. How and when will the program faculty evaluate the impact of assessment-informed changes made in previous years?

The option coordinator will review the plan with associated faculty. The results of these reviews and recommendations will be brought to the UPPC. The assessment plan will be reviewed at a dedicated curriculum meeting each academic year, modifications made, with changes being evaluated the subsequent year (following implementation of modifications).

Additional Questions

1. On what schedule/cycle will program faculty assess each of the program's student learning outcomes? (Please note: It is <u>not recommended</u> to try to assess every outcome every year.)

1) Responsibilities: Associate Dean of Undergraduate and Pre-Licensure Programs is responsible for leading this assessment plan.
2) Timeline:
    a. AY 2020-2021: Student Learning Outcomes 1, 2, 3 and 4.
    b. AY 2021-2022: Student Learning Outcomes 5, 6, 7, and 8.
    c. AY 2022-2023: Student Learning Outcomes 9, 10, 11, 12, and 13.
    d. AY 2023-2024: Student Learning Outcomes 1, 2, 3, and 4.
    e. AY 2024-2025: Student Learning Outcomes 5, 6, 7, and 8.
    f. AY 2025-2026: Student Learning Outcomes 9, 10, 11, 12, and 13.

3) Process for implementing this assessment plan:
    a. Option Coordinators (TBSN and ABSN) will collect direct data through course faculty members.
    b. Skyfactor EBI- MAP Works Assessment Tool will be sent out by Associate Dean of Undergraduate and Pre-Licensure Program yearly.
    c. Relevant Skyfactor EBI-MAP Works Assessment Tool Data will be compiled by Associate Dean of Undergraduate and Pre-Licensure Programs.

2. Describe how, and the extent to which, program faculty contributed to the development of this plan.

1) How did program faculty contribute to this plan? The draft items were developed by the undergraduate faculty and approved by the Undergraduate Pre-Licensure Program Committee (UPPC).
2) How students were included in the process and/or how student input was gathered and incorporated into the assessment plan. Student representatives from each of the undergraduate and pre-licensure programs are members of the UPPC.
3) What external sources were consulted in the development of this assessment plan? The *AACN*'s "The Essentials of Baccalaureate Education for Professional Nursing Practice".
4) Assessment of the manageability of the plan in relation to department and personal: The plan is manageable with current resources.

Appendix A

Saint Louis University School of Nursing

ABSN/TBSN Clinical Evaluation Tools

S = Satisfactory
I = Improvement Needed
U = Unsatisfactory
NA = Not Applicable

Level 1 TBSN (NURS 2520); ABSN (NURS 2520)

Student: Agency/Agencies:

Behaviors	Wk	Wk	Wk	Wk	Wk	Wk	Final
Patient Centered Care *(Student Learning Outcomes 1, 3, 4)*							
1. Begins to relate to people as unique individuals, possessing worth, dignity, and potential for self-actualization (SLO 1).							
2. With faculty guidance, begins to form relationships based on understanding of self and others, and of interpersonal and group dynamics (SLO 3).							
3. With faculty guidance, begins to practice in the healthcare setting with a client (SLO 4).							
Behaviors	Wk	Wk	Wk	Wk	Wk	Wk	Final
Promoting Adaptation *(Student Learning Outcomes 2, 5, 6)*							
4. Begins to use theoretical and empirical knowledge from the humanities and natural, social, behavioral, and nursing sciences to provide safe, effective nursing care (SLO 2). • Safely performs nursing care.							
5. Begins to demonstrate critical thinking and problem solving skills, in application of the nursing process to achieve optimal client adaptation (SLO 5). • Assessment • Developing a plan of care • Implementing a plan of care • Evaluating a plan of care							
6. Begins to assist clients, at any point on the health-illness continuum, to mobilize and use adaptive resources for promotion, maintenance and restoration of health (SLO 6).							

Behaviors	Wk	Wk	Wk	Wk	Wk	Wk	Final
Interprofessional Collaboration and Communication *(Student Learning Outcomes 7, 11)*							
7. Begins to collaborate with interprofessional colleagues, community representatives, and consumers to enhance health care (SLO 7).							
8. Identifies leadership principles in professional and interprofessional practice (SLO 11).							
Behaviors	Wk	Wk	Wk	Wk	Wk	Wk	Final
Patient Safety & Quality Care *(Student Learning Outcomes 8, 13)*							
9. Begins to identify evidence-based knowledge as the basis for safe, effective nursing practice (SLO 8).							
10. With faculty guidance, begins to utilize appropriate information and healthcare technologies to enhance the delivery of client care (SLO 13).							
Behaviors	Wk	Wk	Wk	Wk	Wk	Wk	Final
Professional Leadership*: (Student Learning Outcomes 9, 10, 12)*							
11. Identifies the professional code of ethics and professional standards as the basis to clinical practice (SLO 9).							
12. Demonstrates personal and professional responsibility, and accountability (SLO 10).							
13. With faculty guidance, develops awareness of health care policy issues, trends and strategies as they influence accessibility, accountability and affordability in health care delivery (SLO 12).							
Student Initials/Date:							

Appendix B

Saint Louis University School of Nursing

TBSN/ABSN Clinical Evaluation Tools

S = Satisfactory
I = Improvement Needed
U = Unsatisfactory
NA = Not Applicable

Level 2 ___ TBSN (NURS 3430, 3440, 3460, 3470, 3480, 3490); ABSN (NURS 3565, 3575, 3435, 3445, 3485, 3495)

Student: Agency/Agencies:

Behaviors	Wk	Wk	Wk	Wk	Wk	Wk	Final
Patient Centered Care *(Student Learning Outcomes 1, 3, 4)*							
1. Demonstrates the ability to relate to people as unique individuals, possessing worth, dignity, and potential for self-actualization (SLO 1).							
2. With faculty guidance, establishes relationships based on understanding of self and others, and of interpersonal and group dynamics (SLO 3).							
3. With faculty guidance, practices in a variety of settings with _____clients from diverse sociocultural backgrounds (SLO 4).							
Behaviors	Wk	Wk	Wk	Wk	Wk	Wk	Final
Promoting Adaptation *(Student Learning Outcomes 2, 5, 6)*							
4. Applies theoretical and empirical knowledge from the humanities and natural, social, behavioral, and nursing sciences to provide safe, effective nursing care (SLO 2). • Safely performs nursing care.							
5. Demonstrates critical thinking and problem solving skills, in application of the nursing process to achieve optimal client adaptation (SLO 5). • Assessment • Developing a plan of care • Implementing a plan of care • Evaluating a plan of care							
6. Collaborates to assist clients at any point on the health-illness continuum, to mobilize and use adaptive resources for promotion, maintenance and restoration of health (SLO6).							
Behaviors	Wk	Wk	Wk	Wk	Wk	Wk	Final
Interprofessional Collaboration and Communication *(Student Learning Outcomes 7, 11)*							

7. Collaborates with interprofessional colleagues, community representatives, and consumers to enhance health care (SLO 7).							
8. Begins to demonstrate leadership principles in professional and interprofessional practice (SLO 11).							
Behaviors	Wk	Wk	Wk	Wk	Wk	Wk	Final
Patient Safety & Quality Care *(Student Learning Outcomes 8, 13)*							
9. Begins to apply evidence-based knowledge as the basis for safe, effective nursing practice SLO 8).							
10. With faculty guidance utilizes appropriate information and healthcare technologies to enhance the delivery of client care (SLO 13).							
Behaviors	Wk	Wk	Wk	Wk	Wk	Wk	Final
Professional Leadership*: (Student Learning Outcomes 9, 10, 12)*							
11. Applies the professional code of ethics and professional standards to clinical practice (SLO 9).							
12. Demonstrates personal and professional responsibility, accountability, and increasing self-direction (SLO 10).							
13. Begins to demonstrate understanding of health care policy issues, trends and strategies as they influence accessibility, accountability and affordability in health care delivery (SLO 12).							
Student Initials/Date: _____ _____							

TBSN/ABSN Clinical Evaluation Tool WEEKLY SUMMARY

Week 1 Date:	
Nursing care/Skill performed:	
Strengths:	
Suggestions for improvement:	
Week 2 Date:	
Nursing care/Skill performed:	
Strengths:	
Suggestions for improvement:	
Week 3 Date:	
Nursing care/Skill performed:	
Strengths:	
Suggestions for improvement:	
Week 4 Date:	
Nursing care/Skill performed:	
Strengths:	
Suggestions for improvement:	
Week 5 Date:	
Nursing care/Skill performed:	
Strengths:	
Suggestions for improvement:	

TBSN/ABSN Clinical Evaluation Tool FINAL SUMMARY

Faculty comments:

Overall assessment of student strengths:

Plan for improvement of clinical performance:

Student comments:

Faculty: **Date:**
Student: **Date:**

Appendix C

Saint Louis University School of Nursing

TBSN/ABSN/RN-BSN Clinical Evaluation Tools

S = Satisfactory
I = Improvement Needed
U = Unsatisfactory
NA = Not Applicable

Level 3 __ TBSN (NURS 4350, 4200); ABSN (NURS 4355); RN to BSN (NURS 3457)

Student: Agency/Agencies:

Behaviors							Final
Patient Centered Care *(Student Learning Outcomes 1, 3, 4)*							
1.Consistently relates to people as unique individuals, possessing worth, dignity, and potential for self-actualization (SLO 1).							
2. Becomes increasingly independent in establishing relationships based on understanding of self and others, and of interpersonal and group dynamics (SLO 3).							
3. Becomes increasingly independent in practice in a variety of settings with clients of all ages and diverse sociocultural backgrounds (SLO 4).							
Behaviors							Final
Promoting Adaptation *(Student Learning Outcomes 2, 5, 6)*							
4. Synthesizes theoretical and empirical knowledge from the humanities and natural, social, behavioral, and nursing sciences to provide safe, effective nursing care (SLO 2). • Safely performs nursing care.							
5. Consistently utilizes critical thinking and problem solving skills,							

in application of the nursing process to achieve optimal client adaptation SLO 5). • Assessment • Developing a plan of care • Implementing a plan of care • Evaluating a plan of care							
6. Consistently assists clients, at any point on the health-illness continuum, to mobilize and use adaptive resources for promotion, maintenance and restoration of health (SLO6).							
Behaviors							Final
Interprofessional Collaboration and Communication *(Student Learning Outcomes 7, 11)*							
7. With increasing independence utilizes appropriate information and healthcare technologies to enhance the delivery of client care (SLO 7).							
8. Consistently demonstrates leadership principles in professional and interprofessional practice (SLO 11).							
Behaviors							Final
Patient Safety & Quality Care*: (Student Learning Outcomes 8, 13)*							
9. Consistently applies evidence-based knowledge as the basis for safe, effective nursing practice (SLO 8).							
10.With increasing independence utilizes appropriate information and healthcare technologies to enhance the delivery of client care (SLO 13).							
Behaviors							Final
Professional Leadership: *(Student Learning Outcomes 9, 10, 12)*							
11. Consistently applies the professional code of ethics and professional standards to clinical practice (SLO 9).							
12. Consistently demonstrates personal and professional responsibility, accountability, and self-direction (SLO 10).							
13. Demonstrates understanding of health care policy issues, trends and strategies as they influence accessibility, accountability and affordability in health care delivery (SLO 12).							

Student Initials/Date: _____ _____							

TBSN/ABSN/RN-BSN Clinical Evaluation Tool WEEKLY SUMMARY

Date:	
Nursing care/Skill performed:	
Strengths:	
Suggestions for improvement:	
Date:	
Nursing care/Skill performed:	
Strengths:	
Suggestions for improvement:	
Date:	
Nursing care/Skill performed:	
Strengths:	
Suggestions for improvement:	
Date:	
Nursing care/Skill performed:	
Strengths:	
Suggestions for improvement:	
Date:	
Nursing care/Skill performed:	
Strengths:	
Suggestions for improvement:	

TBSN/ABSN/RN-BSN Clinical Evaluation Tool FINAL SUMMARY

Faculty comments:

Overall assessment of student strengths:

Plan for improvement of clinical

performance:

Student comments:

Faculty: **Date:**
Student: **Date:**

Appendix D

NURS 4350/4355 Complex Multi-System Nursing Care
Guidelines and Grading Criteria for Concept Maps

1. Concept map must be submitted to the appropriate clinical faculty by the posted date using the correct map format. (10).
2. Identifying patient information must be included: (40)
    a. Age, gender, admission date, and allergies (5)
    b. Admitting diagnosis (5)
    c. Brief synopsis of what brought the patient to seek care (5)
    d. Medications patient is receiving and indications (5)
    e. Appropriate/pertinent labs (5)
    f. Appropriate diagnostic testing (5)
    g. Psychosocial information (5)
    h. Barrier to healthcare access (5)
3. Nursing Diagnosis
    a. Two (most important) Nursing Diagnosis (10)
    b. Measureable goal(s) or for each diagnosis (10)
    c. Appropriate interventions with supporting rationales (30)

The nursing diagnosis needs to be a standard nursing diagnosis with 'related to…' and 'as manifested by…' statements. The interventions need to be individualized to your patient and references if necessary (you should be able to generate your own rationales at this point). The evaluation needs to be the actual outcome because I want to know what the outcome of your care was.

Each Concept Map is worth a total of 100 points.

The student must obtain 90points or another concept map will have to be submitted. There are several templates for concept maps. Below is a link to one. You are free to use other templates if you find something you like better.

**No references are needed for the concept map.

http://office.microsoft.com/en-us/templates/concept-map-primary-TC101887901.aspx

STUDENT NAME _____ **DATE** _____

NURS 4350/4355 Concept Map Evaluation Form

ASSESSMENT **(Criteria: systematic, complete, accurate, using correct terminology)**	**Diagnosis**
Patient age, gender, admission date and allergies	**5 4 3 2 1 0**
Admitting diagnosis and pathology	**5 4 3 2 1 0**
History of present illness	**5 4 3 2 1 0**
Appropriate medications including indications	**5 4 3 2 1 0**
Pertinent lab values and indicates normal, high or low	**5 4 3 2 1 0**
Appropriate diagnostic testing	**5 4 3 2 1 0**
Psychosocial information	**5 4 3 2 1 0**
Barriers to healthcare access	**5 4 3 2 1 0**

NURSING DIAGNOSES	**Diagnosis #1**	**Diagnosis #2**
Correctly stated with appropriate assessment information	**5 4 3 2 1 0**	**5 4 3 2 1 0**

GOALS	**Diagnosis #1**	**Diagnosis #2**
Measurable and appropriate	**5 4 3 2 1 0**	**5 4 3 2 1 0**

INTERVENTIONS	Diagnosis #1	Diagnosis #2
Appropriate to diagnosis	**5 4 3 2 1 0**	**5 4 3 2 1 0**
Individualized plan of care	**5 4 3 2 1 0**	**5 4 3 2 1 0**
Appropriate rationales	**5 4 3 2 1 0**	**5 4 3 2 1 0**

EVALUATION	Diagnosis #1	Diagnosis #2
Documented of actual outcomes	**5 4 3 2 1 0**	**5 4 3 2 1 0**

Total Points _____

Faculty Signature: _____

Appendix E

NURS 2705 Evidence Synthesis Assignment Grading Rubric

Directions #	Criterion	Points possible	Points earned
1.	Identification of clinical problem	5	
2.	Clinical question in PICO format	5	
3.	Literature search • Explanation of database(s) and terms used • Search obtained appropriate article types • Summary of search results included • Inclusion of search printout	20	
4.	Appraisal of 3 articles • Use of appraisal criteria • Discussion of how article applies to the clinical question • Identification of level of evidence	45	
5.	Conclusion • How could this evidence be used to change practice on your unit? • Do 3 sources agree? Which is most credible?	15	
6.	Format: • Readability, grammar, 6th edition APA format used • Concise (limited to 10 pages of text)	10	
	Total	**100**	

Appendix F

NURS 4350/4355
CLINICAL LOG EVALUATION TOOL

STUDENT NAME: _____

CLINICAL SITE: _____

Criteria for rating clinical log performance:

4. high degree of intellectual initiative; ability to think and to perform independently; weighs alternatives; makes critical judgments; carries out work in a timely manner; transfers scientific principles to practical work.
3. achievement beyond required performance; demonstrates transfer of theory to practice; rarely needs follow-up.
2. completion of objectives in accordance with basic requirements for safe, care; acceptable and/or required performance of skills; ability to transfer knowledge in some areas; potential for further development.
1. work of inferior quality; no transfer of knowledge demonstrated; requires constant guidance; failure to accomplish assignments as required by the course; no change in behavior achieved.

Objectives & Behavior	Log 1	Log 2	**AVERAGE**
1. <u>Professionalism (max of 1 point)</u> ○ What "went right" and what "went wrong" in the clinical area that week and what was learned from those experiences **(0.25 point)** ○ Course objectives listed in the syllabus are met or not met. **(2 needed) (0.25 point)** ○ Specific activities engaged in and how they met objectives for student learning.**(0.25 point)** ○ Proposed goals/objectives as listed for the personal goals of the course are included (**0.25 point)**			

Objectives & Behavior	Log 1	Log 2	AVERAGE
2. <u>Nursing Process (max of 2 points)</u> ○ Proficient in comprehensive assessment when planning care utilizing data from all domains: ▪ psychological ▪ physiological ▪ sociocultural ▪ spiritual ○ Plans & implements individualized client care based on scientific rationale. ○ Uses evaluation of outcomes to modify care and provide continuity by collaboration with client, family and other members of the health team. ○ Uses research in delivery of care **<u>Additional (max of 1 point)</u>** ○ **Teaching or learning is documented in the plan of care. (0.5 points)** ○ APA citation (running head, title page, NO ABSTRACT, references on reference page) **(0.5 points**)			
	____ **4**	____ **4**	____ **4**

Faculty Comments:

Student's Comments:

Signatures:
Faculty _____ Date _____

Student _____ Date _____

Appendix G

NURS 3445 PUBLIC HEALTH NURSING: THEORY & PRACTICE

Population Focused Analysis Project

DESCRIPTION: This project integrates the core functions of public health: assessment, policy development, and assurance. The project focuses on identifying a population with health problems, assessing the quantitative and qualitative date on the population and health problem, identifying policies and programs in place to assist the population and health problem, and assuring that these programs assist the population identified.

OBJECTIVES: At the end of the activity, the learner will:

1. Develop a community profile based on the health needs of the population.
2. Identify health needs of the selected population based on a literature review.
3. Utilize interviewing techniques and web based data to identify policies and resources available for the selected population.
4. Identify how a community health nurse would address the problems from the individual/family, community, and system perspectives.
5. Work collaboratively in the clinical group.
6. Present findings with members of the clinical group to class.

Examples of populations:

- Male shelter dwellers
- Children affected by domestic violence
- Incarcerated pregnant women
- Physically disable mothers
- Mentally ill women with children
- Teen smokers
- Female college students with eating disorders
- Adult cancer patients who live alone
- Obese adults considering weight reduction surgery
- Families with autistic children
- Teenagers with sexually transmitted diseases
- Young adults with HIV
- Adolescents who have experienced the death of a loved one

PART I: ASSESSMENT: 30% **(This section should provide the rationale for the project described below)**		
1. Clinical group identifies population and health needs of the population. Literature review should reflect at least 10 references from professional journals within the last five years	15	
2. Summarize demographic data on the selected population and health needs as identified by the Community Database.	15	

PART II: 35%		
1. Identify policies and programs currently in place to support the needs of the selected community and/or health problems. Can be local or national.	10	_____
2. Provide evidence thru literature, policies, or programs of community resources. (Please screen shot or provide active web pages for information and put in appendix.)	10	_____
3. Present evidence of positive and negatives issues of specific programs.	5	_____
4. Interviews of local persons of programs are encouraged. Please narrate the conversation, avoiding using first person.	10	_____

PART III: 15%		
1. Address the gaps in policies and programs of the selected community and health problems.	10	_____
2. Identify ways in which a CHN could address the gaps of programs	5	_____

APPENDICES: 10%		
1. Community Database	5	_____
2. Describe the search strategy used for identifying relevant literature and the results of the search. (Medline, CINAL, etc).	5	_____

REFERENCES & SCHOLARLY FORMAT: 10%		
1. Use APA formatting (6th edition), citation of sources in text, tables, and reference list. Remember to title each table, and provide the source of the data. **ABSTRACT is not necessary	4	_____
2. Include a title page, running head (this is different on the first page), table of contents, and ABSTRACT is not necessary.	2	_____
3. Include a reference list of all print and electronic sources used.	2	_____
4. At least 10 references from nursing or public health journals should be included to provide the rationale for the project within the last 10 years.	2	_____

The paper should be a maximum of **10 typed pages**, excluding appendices.

Student Learning Outcomes Measures

	Clinical Evaluation Tool Measure	Course Outcome % of students achieving Satisfactory rating
SLO#1	Clinical Evaluation Tool: Objective #1. Relate to people as unique individuals possessing worth, dignity, and potential for self- actualization.	
SLO#2	Clinical Evaluation Tool: Objective #4. Synthesize theoretical and empirical knowledge from the humanities and natural, social, behavioral, and nursing sciences to provide safe, effective nursing care.	
SLO#3	Clinical Evaluation Tool: Objective #2. Establish relationships based on understanding of self and others, and of interpersonal and group dynamics.	
SLO#4	Clinical Evaluation Tool: Patient centered care: Objective #3. Practice in a variety of settings with clients of all ages and diverse sociocultural backgrounds.	
SLO#5	Clinical Evaluation Tool: Objective #5. Utilize critical thinking and problem solving skills, in application of the nursing process, to achieve optimal client adaptation.	
SLO#6	Clinical Evaluation Tool: Objective #6. Assist clients, at any point on the health-illness continuum, to mobilize and use adaptive resources for promotion, maintenance and restoration of health.	
SLO#7	Clinical Evaluation Tool: Objective #7. Collaborate with interprofessional colleagues, community representatives, and consumers to enhance healthcare.	
SLO#8	Clinical Evaluation Tool: Objective #9. Apply evidence-based knowledge as the basis for safe, effective nursing practice.	
SLO#9	Clinical Evaluation Tool: Objective #11. Apply the professional code of ethics and professional standards to clinical practice.	
SLO#10	Clinical Evaluation Tool: Objective #12. Demonstrate personal and professional responsibility, accountability, and self-direction.	
SLO#11	Clinical Evaluation Tool: Objective #8. Demonstrate leadership principles in professional and interprofessional practice.	
SLO#12	Clinical Evaluation Tool: Objective #13. Demonstrate understanding of health care policy issues, trends and strategies as they influence accessibility, accountability and affordability in health care delivery.	
SLO#13	Clinical Evaluation Tool: Objective #10. Utilize appropriate information and healthcare technologies to enhance the delivery of client care.	

Rubrics

	Rubric/Assignment	**Course Outcome** % of Students achieving 80% or > on assignment
SLO#2	NURS 4355: Senior Concept Map assignment	
SLO#8	NURS2705 Evidence Synthesis Assignment	
SLO#11	NURS 4355: Senior Capstone Clinical Log Assignment	
SLO#12	NUR 3445: Population Focused Analysis Projects	

ATI Comprehensive Predictor Sub-category Scores

	Category	**% of students achieving 850 or >**
SLO#1	NLN Educational Competencies: Human Flourishing	
SLO#2	BSN Essentials: Liberal Education Client Need: Safe/Effective Environment	
SLO#4	BSN Essentials: Baccalaureate Generalist	
SLO#5	Nursing Process: RN Planning	
SLO#6	BSN Essentials: Clinical prevention & population health	
SLO#7	BSN Essentials: Interprofessional Communication	
SLO#8	BSN Essentials: Scholarship for Evidence Based Practice	
SLO#9	BSN Essentials: Professionalism and Professional values	
SLO#10	NLN Competency: Professional Identity	
SLO#11	BSN Essentials: Basic Organization and Systems Leadership for Quality and Patient Safety.	
SLO#12	BSN Essentials: Health Care Policy	
SLO#13	BSN Essentials: Information management and patient care technology	