

ALLEN COLLEGE ASSESSMENT PLAN

# Report of College Goals Achievement

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# Allen College Goals 2015-2019

- 1. Prepare outstanding healthcare practitioners who are committed to lifelong learning.
- 2. Develop and implement accessible academic programs of excellence that are responsive to the workforce needs of Iowa and the nation.
- 3. Recruit and retain highly qualified and engaged students, faculty, and staff who represent diverse populations and who embrace diversity, cultural and global awareness, and the inclusion of all its members.
- 4. Promote a commitment by all members of the Allen College community to lives of service.
- 5. Adopt management practices that demonstrate outstanding stewardship of all resources to our constituents.

# **College Goals Achievement Report**



2018-2019 Reporting Year

# College Goals 2015-2019

College Goal 1 - Prepare outstanding healthcare practitioners who are committed to lifelong learning.

### **Admin - Diversity and Inclusion Services**

### **AU Outcome: DIS 2.0**

Diversity education is threaded throughout all levels of college curricula (ODS Goal 2: Curriculum transformation--Incorporate principles of multiculturalism, pluralism, equity, and diversity into Allen College program curricula.)

**Outcome Status:** Active

Measures	Results	Actions
AD: Report - Internal - Curricular Transformation Assessment [Report of assessment of diversity education in courses for which it would be appropriate and feasible to include such content] Target: 50% of courses include a diversity component. Timeframe: Year 1 Responsible Parties: DIS Coordinator	Reporting Year: 2018 - 2019 (Year 1) Target Met: No The Curricular Transformation Assessment was not conducted during the 2018-2019 academic year. The Coordinator of Diversity Services left at the end of the academic year, and this task was not completed prior to her departure. (11/19/2019)	Action: The recommendation for this goal (ODS 2.0) is to take the goal and measure to the Diversity and Inclusion Committee for review. This measure had some identified concerns with validity the last time it was conducted (2014-2015) in relation to faculty understanding of MPED (multiculturalism, pluralism, equity, and diversity). If the tool is used again, one recommendation is to define MPED more clearly for faculty in regard to use of the instrument. (11/19/2019)

### **Admin - Teaching & Learning Committee**

# **Admin - Teaching & Learning Committee**

**AU Outcome: TLC 1.0** 

Allen College courses will reflect Quality Matters standards.

Outcome Status: Active Start Date: 07/01/2015

Measures	Results	Actions
SL: Survey - Mean rating of all 8 items on course evaluation tool completed by students (1.0 = strongly disagree, 2.0 = disagree, 3.0 = agree, 4.0 = strongly agree). The mean rating of each item will be averaged for an overall mean rating for each course.  Target: 100% of courses will have a mean rating for all 8 items of at least a 3.0 (agree) on a 4.0 (strongly agree) scale.  Timeframe: Health Sciences courses based on evaluation cycle.  Nursing courses based on curriculum course review schedule.  Responsible Parties: TLC Chair and Committee Members  Related Documents:  Allen College Course Evaluation Criteria.pdf	compared to 2017-2018 where 96% (44/46) of courses reviewed had achieved a 3.0 or above.  This demonstrates improvement.  2018-2019  DMS 100% (14/14)	Action: TLC will keep CAP on agenda under current business to address progress towards CAP data collection and CAP completion during each meeting. Additionally, TLC will work to gather evaluations at the end of the academic year, prior to the beginning of the next (prior to instructor end of contract).TLC will share results of evaluation with Dean of Nursing and Dean of Health Science.

**AU Outcome: TLC 2.0** 

# **Admin - Teaching & Learning Committee**

**AU Outcome: TLC 2.0** 

Allen College courses will reflect Chickering and Gamson's 7 principles of good teaching/education practice.

Outcome Status: Inactive Start Date: 05/08/2017

SL: Survey - Mean rating of 7 items on instructor evaluation tool (1.0 = strongly disagree, 2.0 = disagree, 3.0 = agree, 4.0 = strongly agree). The mean rating of each item will be averaged for an overall mean rating for each course.  Target: 100% of courses will have an Target: 100% of courses will have a	demic year. TLC genda under o address CAP data
overall mean rating at least 3.0.  Timeframe: Health Sciences courses based on evaluation cycle. Nursing courses based on curriculum course review schedule.  Responsible Parties: TLC Chair and Committee Members Related Documents: Allen College Instructor Evaluation Criteria.pdf  Allen College In	ather evaluations cademic year, ning of the next end of contract).  Its of evaluation ing and Dean of 4/14/2020)  aching & ee voted in spring is measure. No umented in the tes. In the past, oncerns ty when they are results of their this assessment

# **Admin - Teaching & Learning Committee**

**AU Outcome: TLC 3.0** 

Graduates will demonstrate commitment to lifelong learning

Outcome Status: Active

Measures	Results	Actions
AD: Survey - Alumni survey lifelong learning items Target: 100% of alumni will report at least one lifelong learning activity in the previous 12 months Timeframe: Annually Responsible Parties: Evaluation and Study Committee/TLC Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: No  Less than 100% of respondents to alumni surveys provided a description of their lifelong learning activities in response to the alumni survey item, "Describe your lifelong learning activities." This finding is consistent from year to year, as indicated on the "Alumni Lifelong Learning Report 2018-2019" (attached), and probably does not reflect the true extent to which alumni are engaged in lifelong learning. It is likely that many survey respondents choose not to answer the question. The open-ended item was used in surveys of 2018-2019 alumni in accordance with the action plan for this item proposed in the 2017-2018 CAP report. A "select all that apply" question would probably yield more credible results. This finding is also not representative of all Health Sciences programs because the results have not been consistently available for most of those programs.  Responses to the open-ended survey item continue to fit into one of the following categories:  1. Employer-provided training or education for job competence/effectiveness  2 Studying or preparing for professional licensure and/or certification  3. Earning or planning to earn an additional and/or advanced academic degree  4. Continuing education activities required to maintain licensure or certification  5. Attending professional conferences  6. Providing health care to clients*  7. Reflecting on professional practice and experiences  8. Reading professional and/or scholarly publications (e.g., journal articles, textbooks, practice updates, etc.)  9. Collaborating with colleagues*  10. Synthesizing and disseminating evidence for evidence-based practice  *These items are not clearly lifelong learning activities. (03/14/2020)  Related Documents:  Alumni Life Long Learning Report 2018-2019.pdf	Action: Create a multiple-response lifelong learning item to be included on future alumni surveys. The item will be based on the narrative descriptions of lifelong learning activities that have been provided by past respondents. Request that directors of Health Sciences Programs devise a plan for conducting and filing alumni survey results. (03/15/2020)

# Program (HS) - Associate of Science in Radiography (ASR)

**AU Outcome: ASR 1.1** 

Students will practice proper radiation protection

Measures	Results	Actions
SL: Clinical evaluation tool - RA: 135 Competency Testing/CCE Part II, numbers 5, 7, 9, 15, 17 Target: Average score of >= 3 (0-4 pt. scale) Timeframe: Level 1-Fall Semester Responsible Parties: Lab Instructor/ Program Faculty/ Health Sciences(HS) Faculty Org. Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  2018 = 3.90 (N=13) Benchmark met  Previous years  2017=3.97(n=14)  2016 = 3.89 (n=13)  2015 = 3.95 (n=16)  2014 = 3.97 (n=17)  Students continue to exceed benchmark. The importance of collimation, exposure factors and radiation protection are emphasized and practiced in each lab. Students are practicing radiation protection and demonstrating clinical competence. (07/02/2019)	Action: To continue to exceed the target/ benchmark instructors will continue to have student practice radiation protection in each lab and in the clinical settings. The program will continue to assess for trends with each new cohort. (07/02/2019)
SL: Clinical evaluation tool - RA: 275 Final Clinical Competency Testing/ CCE Part II, numbers 5,7,9,15,17  Target: Average score of >= 3 (0-4 pt. scale) Timeframe: Level II-Spring Semester Responsible Parties: Clinical Instructors/Program Faculty/HS Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes 2019 = 4 (n=12) Benchmark met Previous data: 2018 = 3.96 (n=12) 2017 = 3.96 (n=15) 2016=3.96 (n=17) 2015=3.96 (n=15) 2014=3.99 (n=17)  This year's cohort received an average score of 4 on every line item assessed. Students continue to exceed the benchmark. The various methods of radiation protection are emphasized and reinforced throughout the program. Students also have access to an appropriate exam volume in a variety of settings which helps prepare them for their final competencies. No changes recommended (07/02/2019)	Action: To continue to exceed the target/benchmark the instructors will provide various methods of radiation protection and reinforce this throughout the program.  Students will continue to have access to an appropriate exam volume in a variety of settings to prepare them for their final competencies. (07/02/2019)  Action: This year's cohort received an average score of 4 on every line item assessed. Students continue to exceed the benchmark. The various methods of radiation protection are emphasized and reinforced throughout the program. Students also have access to an appropriate exam volume in a variety of settings which helps

### **AU Outcome: ASR 1.1**

Measures	Results	Actions
		prepare them for their final competencies. No changes recommended (07/02/2019)

**AU Outcome: ASR 1.2** 

Students will apply correct positioning skills

Measures	Results	Actions
SL: Didactic - RA: 145 Certification Testing/ Part I, numbers 3,12,14,15  Target: Average score of >= 3. (0-4 pt. scale) Timeframe: Level I-Spring Semester Responsible Parties: Clinical Instructors/ Program Faculty/ HS Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes 2019 = 3.88 (n=13) Benchmark/Target met Previous data: 2018 = 3.86 (n=14) 2017 = 4 (n=12) 2016 = 3.96 (n=16) 2015=3.79 (n=17) 2014=3.86 (n=15) Students continue to exceed benchmark. The students demonstrated the ability to apply correct positioning skills. The students demonstrated knowledge of positioning in relation to their level of placement in the program. (07/03/2019)	Action: Course instructors recommend continuing to assess this item since certification testing is completed at various clinical sites and with different clinical instructors. (07/03/2019)
SL: Didactic - RA: 265 Certification Testing/Part I, numbers 3,12,14,15  Target: Average score of >= 3. (0-4 pt. scale) Timeframe: Level II-Fall Semester Responsible Parties: Clinical Instructors/ Program Faculty/ HS Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes 2018=3.95(n=12) Benchmark/Target met. Previous data: 2017=3.90(n=12) 2016=3.97(n=15) 2015=3.99 (n=17) 2014= 3.96 (n=15) Average scores exceed benchmark. Students demonstrated clinical competence by applying correct positioning skills. This is the final semester that certifications are completed in the	Action: The instructors will continue to assess the students' positioning skills on more advanced procedures appropriate to their level in the program. (07/03/2019)

### **AU Outcome: ASR 1.2**

Measures	Results	Actions
	program. This was the second cohort to exclude ankle, finger, foot, hand, and wrist procedures. The program made this change to ensure the procedural exam difficulty correlated with the student's level in the program. (07/03/2019)	

### **AU Outcome: ASR 2.1**

Students will demonstrate effective communication skills in the clinical setting

Measures	Results	Actions
SL: Clinical evaluation tool - RA:135 Clinical Instructor/ Preceptor Evaluations/ Numbers 3, 6, 10,11  Target: Average score >= 3.5 (0-4 pt. scale) Timeframe: Level I-Fall Semester Responsible Parties: Clinical Instructors/ Program Faculty/ HS Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes 2018 3.67 (n=13) Benchmark/Target met.  Previous data: 2017 3.68 (n=14) 2016 3.56 (n=13) 2015 3.81 (n=16) 2014 3.8 (n=17)  The students' average scores had slight increases in two areas of the performance criteria; patient care and multicultural diversity and decreases in two areas; interpersonal relationships and age appropriate care. All student evaluations are completed on Trajecsys by the clinical instructors. Students have immediate access to the completed evaluations on Trajecsys. Students continue to exhibit effective communication skills in the clinical environment. (07/03/2019)	Action: To continue to provide immediate access and feedback to students these evaluations will be completed on Trajecsys by the clinical instructors. (07/03/2019)
SL: Clinical evaluation tool - RA:275 Clinical Instructor/ Preceptor Evaluations/Numbers 3, 6,10,11  Target: Average score >= 3 (0-4 pt. scale) Timeframe: Level II -Spring Semester Responsible Parties: Clinical Instructors/ Program Faculty/ HS	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes 2018-2019-3.9 (n=12)  Target/benchmark met.  Previous data: 2017-2018- 3.78 (n=12) 2016-2017 - 3.95 (n=15) 2015-2016 - 3.97 (n=17) 2014-2015 - 3.95 (n=15)	Action: To continue to exceed the target/benchmark for this measure the clinical instructors/preceptors in the clinical setting will continue to provide excellent instruction and supervision of students to assess their communication skills. (07/03/2019)

### **AU Outcome: ASR 2.1**

Measures	Results	Actions
Curriculum Committee	This result is an increase compared to the previous year. The student scores were higher than the previous year in areas of; patient care, interpersonal relationships, multicultural diversity and age appropriate care. (07/03/2019)	
SL: Clinical evaluation tool - RA:135 Clinical Competency Evaluation/ Part I – Number 4 Part III- Numbers 1,3,6-8  Target: Average score >= 3 (0-4 pt. scale) Timeframe: Level I-Fall Semester Responsible Parties: Clinical Instructor/Program Faculty/ HS Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes 2018 = 3.95 (n=13)  Benchmark/Target met.  Previous data: 2017=3.98 (n=14) 2016=3.92 (n=13) 2015=3.99 (n=16) 2014=3.98 (n=17)  Students continue to exceed the benchmark. The students are demonstrating communication skills reflective of their level in the program. (07/03/2019)	Action: To continue to exceed this measure the clinical instructors will continue to provide effective instruction, supervision and feedback to the students in their clinical settings. (07/03/2019)
SL: Clinical evaluation tool - RA:275 Final Clinical Competency Evaluation/ Part I – Number 4 Part III- Numbers 1,3,6-8  Target: Average score >= 3.5 (0-4 pt. scale) Timeframe: Level II- Spring Semester Responsible Parties: Clinical Instructor/ Program Faculty/ HS Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  2019 = 4 (n=12)  Benchmark/Target met.  Previous data:  2018=3.98 (n= 12)  2017=4 (n=15)  2016=4 (n=17)  2015=3.99 (n=15)  2014=3.99 (n=17)  This year's cohort received an average score of 4 on every line item assessed. Students continue to exceed the benchmark. Students have access to an appropriate exam volume in a variety of settings which helps prepare them for their final competencies. (07/03/2019)	Action: The program will continue to provide students with access to an appropriate exam volume in a variety of settings to prepare them for their final competencies. (07/03/2019)

**AU Outcome: ASR 2.2** 

Students will practice written communication skills

# **AU Outcome: ASR 2.2**

Measures	Results	Actions
SL: Didactic - RA: 115 Patient Care Presentation Target: Average score of >= 85% Timeframe: Level I-Fall Semester Responsible Parties: RA: 115 Course Instructor/HS Faculty Org. Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  Results for fall 2018 98% (n=13)  Benchmark/Target met:  Previous data:  2017 98% (n=14)  2016 97% (n=13)  2015 98.01% (n=16)  2014 98.2% (n=17)  Students continue to demonstrate effective written communication skills. Two of the thirteen students had deductions on the title page; not double spacing and bolding of the title of the paper. Five of the thirteen students had deductions on the reference page. These deductions included: no hanging indent, not having correct spacing in the paper, not having correct margins, bullets when listing the references, and formatting of the reference page. Under the formatting portion of the paper evaluation; the deductions were; not including a running head, no page numbers, and not indenting when beginning a new paragraph. The course instructor communicates the paper requirements on the first day of the semester. On the first day of class, the instructor goes onto the Allen College website and displays to all students where the academic resources page is located and the APA resources information for APA review. One student met with the course instructor to clarify formatting questions concerning the reference page. (07/03/2019)	Action: The course instructor will continue to communicate the paper requirements on the first day of the semester. The instructor will instruct students to the Allen College website and display to all students where the academic resources page is located and the APA resource information for APA review. (07/03/2019)
SL: Didactic - RA:258 Pathology Systems Presentation Target: Average score of >= 85% Timeframe: Level II-Fall Semester Responsible Parties: RA: 258 Course Instructor/ HS Faculty Org. Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  Results for fall 2018: 96% (n=12)  Benchmark/Target met:  Previous data  2017: 96% (n=12)  2016: 97% (n=15)  2015: 98.01% (n=16)  2014: 98.2% (n=17)  Students continue to exhibit effective communication skills through written communication.  Three of the twenty-four papers had deductions on the title page and seventeen had deductions on the reference page. Two papers had deductions in the accuracy and substance portion of the evaluation, not meeting the depth of the paper requirement by adequately	Action: The instructor will instruct students to the Allen College website and display to all students where the academic resources page is located and the APA resource information for APA review. (07/03/2019)

### **AU Outcome: ASR 2.2**

Measures	Results	Actions
	covering the subject. Seven papers had deductions in the format portion of the paper, five papers didn't have correct margins, one paper had spelling errors and one paper was not double-spaced. Two of the students made the same errors on both of their papers. The course instructor discusses the paper requirements on the first day of class. The instructor reviewed the APA format and reminded students that the APA resources information is located on the Allen College website. Two students asked questions prior to their first paper presentation. They had questions about the structure of their paper and how to properly incorporate the radiographs into their presentation. The same two students reviewed their first paper with the instructor after their presentation to receive feedback and they were the only students that received 100% on both of their papers. (07/03/2019)	

**AU Outcome: ASR 2.3** 

Students will demonstrate oral communication skills

Measures	Results	Actions
SL: Didactic - RA:258 Pathology Systems Presentation Target: Average score of >= 85% Timeframe: Level II-Fall Semester Responsible Parties: RA: 258 Course Instructor/ HS Faculty Org. Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  Results for fall 2018: 99% (n=12)  Benchmark/Target met  Pervious data:  2017: 97% (n=12)  2016= 95% (n=15)  2015: 98.82% (n=17)  2014: 99.13% (n=15)  Students continue to demonstrate effective oral communication skills. Five papers received deductions in the oral presentation portion of the evaluation. Four of the papers did not include information discussing the exposure factors/exposure to ionizing radiation for the exam and two papers had deductions for not explaining why they selected the pathology for their paper. Two papers are required for this course. The paper requirements are discussed the first day of class. (07/03/2019)	Action: The course instructor will continue to communicate the paper requirements the first day of class. This measure will be continued to be assessed with each new cohort. (07/03/2019)
SL: Didactic - RA: 115 Patient Care Presentation	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes	Action: To meet or exceed the target for this measure during the

### **AU Outcome: ASR 2.3**

Measures	Results	Actions
Target: Average score of >= 85% Timeframe: Level I-Fall Semester Responsible Parties: RA: 115 Course Instructor/HS Faculty Org. Committee	2019=98% (n=19) 2018=99% (n=13) 2017 =99% (n=14) 2016=99% (n=13) 2015=94.53% (n=16) Four students had deductions in their oral presentation portion due to voice level and words not stated correctly during the presentation. (07/27/2020)	2020-2021 academic year, the course instructor will continue to discuss the paper requirements with the students. Also, encourage students to practice reading their papers before the due date to assist them in demonstrating effective oral communication skills. (07/27/2020)
	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes Results for fall 2018: 99% (n=13) Benchmark met Previous data: 2017: 99% (n=14) 2016: 99% (n=13) 2015: 94.53% (n=16) 2014: 100% (n=17) Two students had deductions in the area of voice level was easily heard, due to using a soft voice and reading the paper very quickly. One student had a deduction in words were stated correctly area of the evaluation. The course instructor explains the paper requirements the first day of class. Students continue to demonstrate effective communication skills. (07/03/2019)	Action: The course instructor will continue to explain the paper requirements the first day of class. This measure will be continued to be assessed with each new cohort. (07/03/2019)

**AU Outcome: ASR 3.1** 

Students will appropriately critique radiographic images

Measures	Results	Actions
SL: Didactic - RA: 255 Radiographic image analysis worksheets Target: Average score of >= 80% Timeframe: Level II-Summer	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes 2018 = 93.75% (n=12) Benchmark/Target met.	Action: The course instructor will continue the extension of the due date for the shoulder chapter. This will allow two additional weeks for

### **AU Outcome: ASR 3.1**

Measures	Results	Actions
Semester  Responsible Parties: RA: 255 Course Instructors/ Program Faculty/HS Faculty Org. Committee	Previous data: 2017=87.75% (n=12) 2016: 90.19% (n=16) 2015: 89.88% (n=17) 2014: 89.13% (n= 15) This cohort achieved the highest-class average since 2014. One student in this cohort chose to submit low scores for the first and last worksheets. These worksheets are open book, open note, and are not timed. The worksheets allow two attempts with the scores averaged. It	this more difficult chapter. (07/03/2019)
	appears this particular student did not choose to take the time to read and carefully answer each question for two of the five chapters. This student was counseled after the first submission of a low grade. The only change made to this assessment item for 2018 was an extension of the due date for the shoulder chapter. This allowed two weeks for this more difficult chapter compared to one week in prior years. Overall, students continue to demonstrate an ability to critique radiographic images. (07/03/2019)	
<b>SL: Didactic</b> - RA: 265 Radiographic image analysis worksheets	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes	Action: To continue to exceed the benchmark/target for this measure
Target: Average score of >= 80% Timeframe: Level II- Fall Semester	2018 = 93.33% (n=12)  Benchmark/Target met.  Previous data: 2017 = 88.83% (n=12)	the course instructor will provide the appropriate radiographs to critique and effective feedback. (07/03/2019)
Responsible Parties: RA: 265 Course Instructors/ Program Faculty/HS	2016 = 91.66% (n=15) 2015= 90.71% (n=17)	(07/05/2019)
Faculty Org. Committee	2014= 93.13% (n=15) This year's cohort performed exceptionally well in completing this assignment. Students continue to demonstrate the ability to appropriately critique radiographic images. (07/03/2019)	

**AU Outcome: ASR 3.2** 

Students will demonstrate ability to practice critical thinking

Measures	Results	Actions
SL: Didactic - RA:145 Scientific	<b>Reporting Year:</b> 2018 - 2019 (Year 1)	

### **AU Outcome: ASR 3.2**

Measures	Results	Actions
Exhibit Evaluation  Target: Average score of >= 80%  Timeframe: Level I- Spring Semester Responsible Parties: RA: 145  Program Faculty/ HS Curriculum  Committee	Target Met: Yes  2019 = 87% N = 9 posters (13 students)  Benchmark/Target met  Previous data:  2018 = 91.5% N= 8 posters (14 students)  2017 = 92.14% N= 7 posters (12 students)  2016 = 92.6% N= 10 posters (16 students)  2015 = 96.5%, N= 11 posters (17 students)  2014= 94%, N = 11 posters (15 students)  Scores for 2019 continue to demonstrate the student's ability to practice critical thinking skills when developing their scientific exhibits. Most grade reductions occurred in line item #8 "grammar, spelling, and punctuation" and # 6 the visually attractive category on the evaluation form. Some also received deductions for #7 "easily understood in a maximum of three minutes" since there was too much text. Average scores continue to exceed the benchmark. (07/03/2019)	Action: To continue to exceed the benchmark for this measure the course instructors will provide the effective feedback to the students on their exhibits. (07/03/2019)
SL: Exam/Quiz - Standardized - RA: 203B Corectec exams Target: > 80% of the students will achieve a score of 70 or greater on one of the four exams. Timeframe: Level II- Spring Semester Responsible Parties: RA: 203B Course Instructor/HS Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  2019 = 100% (n=12)  Benchmark/Target met.  Previous data:  2018 = 100% (n=12)  2017 = 93% (n=15)  2016 = 100% (n=17)  2015 = 93% (n=15)  2014 = 76% (n=17)  This was the second cohort for implementation of the 2% reduction in the overall course grade for each percentage point below 70 on the four Corectec exam average score, an action plan from 2016-2017. This may have provided additional incentive for the students to put forth their best effort on every exam attempt. The ASR Program curriculum continues to prepare the students for mock board exams. Students continue to demonstrate the ability to practice critical thinking. (07/03/2019)	Action: Upon further review of this grade reduction policy, the instructor reduced the % reduction to 1% and will reevaluate in 2020. (07/03/2019)

# **AU Outcome: ASR 3.3**

Students will be able to critically think in the clinical setting

**AU Outcome: ASR 3.3** 

Outcome Status: Active

Measures	Results	Actions
SL: Clinical evaluation tool - RA:145 Clinical Instructor/ Preceptor Evaluations/Numbers 2,4,7,8  Target: Average score >= 3. (0-4 pt. scale) Timeframe: Level I-Spring Semester Responsible Parties: RA: 145 Course Instructor/HS Faculty Org. Committee	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes 2019 3.36 (n=13) Target/benchmark met. Previous data: 2018 - 3.53 (n=14) 2017 - 3.63 (n=12) 2016 - 3.63 (n-16) 2015 - 3.67 (n=17) This result is a decline compared to previous years reported. The student scores were lower than the previous year in areas of; application of knowledge, ability to follow directions, self-image for level in the ASR program, and composure and adaptability (07/03/2019)	Action: To continue to meet or exceed the target/benchmark for this measure during the 2019-2020 academic year, clinical instructors/preceptors in the clinical setting will continue to provide excellent instruction and supervision of students to assess their critical thinking skills. (07/03/2019)
SL: Clinical evaluation tool - RA:265 Clinical Instructor/ Preceptor Evaluations/Numbers 2,4,7,8  Target: Average score >= 3. (0-4 pt. scale) Timeframe: Level II- Fall Semester Responsible Parties: RA: 265 Course Instructors/HS Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes 2018 3.81 (n=12)  Target/benchmark met  Previous data: 2017 3.79 (n=12) 2016 3.86 (n=15) 2015 3.81 (n=17) 2014 3.75 (n=15)  The student's average scores increased in three performance criteria areas; application of knowledge, ability to follow directions, and self-image for level in the ASR program. There was a slight decrease in the area of composure and adaptability. All student evaluations are completed on Trajecsys by the clinical instructors. Students have immediate access to their evaluations on Trajecsys. Students continue to be able to critically think in the clinical setting. (07/03/2019)	Action: To continue to meet or exceed the target/benchmark for this measure during the 2019-2020 academic year, clinical instructors/preceptors in the clinical setting will continue to provide excellent instruction and supervision of students to assess their critical thinking skills. (07/03/2019)

**AU Outcome: ASR 4.1** 

Students will integrate leadership skills and construct professional practices

### **AU Outcome: ASR 4.1**

Measures	Results	Actions
SL: Service - RA:135 Community Service/Service Learning Evaluation Target: Average score of >= 80% Timeframe: Level I-Fall Semester Responsible Parties: RA: 135 Course Instructors/HS Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes 2018: 83.69% (n=13) Benchmark met Previous data: 2017: 94.78 (n=14) 2016: 72% (n=13) 2015: 92.56% (n=16) 2014: 97.94% (n=17) The majority of point deductions occurred in the overall writing and the research categories of the assessment rubric. Some students did not answer all questions or did not provide any citations in their paper to evidence that they researched the organization. All students performed service learning through a variety of organizations. Students demonstrated leadership skills and professionalism through their involvement in service learning activities. (07/03/2019)	Action: The course instructors will make a few editorial changes to the assignment instructions for emphasis and clarification. (07/03/2019)
SL: Service - RA: 265 Community Service/Service Learning Evaluation Target: Average score of >= 80% Timeframe: Level II-Fall Semester Responsible Parties: RA: 265 Course Instructors/HS Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: No 2018: 76.75% (n=12) Benchmark not met.  Previous data: 2017: 93.33% (n=12) 2016: 93.4% (n=15) 2015: 82.47% (n=17) 2014: 99.13% (n=15)  Two students in this cohort attempted to submit hours that were not performed during the offering of this course. These students received half of the possible points. The assignment instructions did state that all service hours must be completed during the offering of this course. Some students provided limited and below average reflection statements resulting in point deductions in the research and writing categories of the assessment rubric. One student did not follow the instructions to provide evidence of participation as part of their paper resulting in a 10% total grade reduction. (07/03/2019)	Action: The course instructors will make a few editorial and organizational changes to the assignment instructions in an attempt to better emphasize and clarify the expectations for the assignment. (07/03/2019)

**AU Outcome: ASR 4.2** 

**AU Outcome: ASR 4.2** 

Students will practice professionalism

Outcome Status: Active

Measures	Results	Actions
SL: Clinical evaluation tool - RA:135 Clinical Instructor/Preceptor Evaluations Numbers 1,5,9,12,13  Target: Average score >= 3 (0-4 pt. scale) Timeframe: Level I- Fall Semester Responsible Parties: Clinical Instructors/ Program Faculty/HS Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes 2018 - 3.68(n=13) Benchmark met.  Previous data: 2017 - 3.68(n=14) 2016 - 3.6 (n=13) 2015 - 3.83(n=16) 2014 - 3.80(n=17)  The students' average scores had a slight increase in two areas; appearance and ethical and professional behaviors. The students' initiative score remained the same and a slight decrease in organization of assignments and policies and procedures. All student evaluations are completed on Trajecsys by the clinical instructors. Students have immediate access to the completed evaluations on Trajecsys. Students continue to practice professionalism in the clinical environment. (07/03/2019)	Action: Clinical instructors will continue to provide effective and timely feedback to students. (07/03/2019)
SL: Clinical evaluation tool - RA:275 Clinical Instructor/Preceptor Evaluations Numbers 1,5,9,12,13  Target: Average score >= 3 (0-4 pt. scale) Timeframe: Level II-Spring Semester Responsible Parties: Clinical Instructors/ Program Faculty/HS Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes 2018-2019- 3.83 (n=12)  Target/benchmark met.  Previous data: 2017-2018 3.76 (n=12) 2016-2017 3.96 (n=15) 2015-2016 3.98 (n=17) 2014-2015 3.91 (n=15)  This result is an increase compared to the previous year. The student scores were lower in only one area which was organization of assignments and higher in areas of initiative, appearance, policies and procedures, and ethical and professional behaviors. (07/03/2019)	Action: To continue to meet or exceed the target/benchmark for this measure during the 2019-2020 academic year, clinical instructors/preceptors in the clinical setting will continue to provide excellent instruction and supervision of students to access their professionalism. (07/03/2019)

# Program (HS) - Doctor of Education (Ed.D.)

**AU Outcome: EdD 1.2** 

### **AU Outcome: EdD 1.2**

Students will assume leadership roles in interprofessional collaboration to improve the health outcomes of individuals, families, and populations through the educational preparation and graduation of health science and nursing professionals.

Measures	Results	Actions
SL: Didactic - EdD 710: Leading a Health Sciences Learning Organization — Case Study: Making Changes in Higher Education Target: 100% of students will receive a score of >=85% Timeframe: When course is taught (e.g., 2015, 2018, etc.) Responsible Parties: Program Chair/ HS Grad Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1) Target Met: NA Course not offered. (08/01/2019)	
SL: Didactic - EdD 730: Professional, Ethical and Legal Issues and Trends in Health Professions Education — Literature Review Target: Each student will receive an average score of >80% Timeframe: When course is taught Responsible Parties: Program Chair/HS Grad Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1) Target Met: NA Course not offered. (08/01/2019)	
SL: Service - EdD 740: Today's Health Sciences Student: Trends, Issues and Challenges – Service Learning Project Target: 100% of students will receive a score of >= 85% Timeframe: When course is taught (e.g., Fall 2016) Responsible Parties: Program Chair/ HS Grad Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  100% of students received a score of >85%  Overall average score = 97.9% (23.5/24)  This project was developed so that students could create an individual or group interprofessional service learning project; however, based on the last time this course was taught and the current small enrollment, this was changed to explore service learning as a viable teaching strategy and how it could be implemented within the student's setting. Time constraints and logistics within individual teaching settings make it difficult to complete an actual service learning project. The requirement for this project was a narrated presentation.	Action: This assignment will be included the next time the course is offered, but the focus will change to creating a syllabus for a course that contains service learning. (08/01/2019)

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# Program (HS) - Doctor of Education (Ed.D.)

### **AU Outcome: EdD 1.2**

Measures	Results	Actions
	Students previously met target when this course was offered during the 2016-2017 academic year, but slight changes were made to the assignment as noted above for the 2018-2019 academic year. These changes were not made as a result of the previous action plan; rather, they were due to the number of students enrolled in the course. (08/01/2019)  Related Documents:  Service Learning Project Information.pdf	

### **AU Outcome: EdD 2.1**

Students will facilitate curriculum design, development, and evaluation of program and learner outcomes using evidence-based strategies.

Measures	Results	Actions
SL: Didactic - EdD 790: Practicum in	<b>Reporting Year:</b> 2018 - 2019 (Year 1)	
Health Professions Education –	Target Met: NA	
Project Conferences	Course not offered. (08/01/2019)	
Target: Students will receive an		
average score of >80%		
Timeframe: When course is taught		
(e.g., Spring 2017)		
Responsible Parties: Program		
Chair/HS Graduate APG Committee		
SL: Didactic - EdD 750: Curriculum	<b>Reporting Year:</b> 2018 - 2019 (Year 1)	
Theory and Design in the Health	Target Met: NA	
Professions – Progressive Project	Course not offered. (08/01/2019)	
<b>Target:</b> 100% of students will receive		
an average score of >=85%		
Timeframe: When course is taught		
Responsible Parties: Program		
Chair/HS Graduate APG Committee		
SL: Didactic - EdD 760: Pedagogy in	<b>Reporting Year:</b> 2018 - 2019 (Year 1)	
Health Professions Education –	Target Met: NA	
Student Choice Activities	Course not offered. (08/01/2019)	

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# Program (HS) - Doctor of Education (Ed.D.)

### **AU Outcome: EdD 2.1**

Measures	Results	Actions
Target: 100% of students will receive		
an average score of at least 90%		
across the three student choice		
activities		
Timeframe: When course is taught		
(e.g., 2014, 2017, etc.)		
Responsible Parties: Program		
Chair/HS Graduate Curriculum		
Committee		

### **AU Outcome: EdD 4.1**

Students will apply analytical methods and research to develop best practices and practice guidelines.

Measures	Results	Actions
SL: Didactic - EdD 800: Evidence Based Practice in the Health Professions – Final Written Report Target: 100% of students will receive a score of >=85% Timeframe: When course is taught (e.g., 2015, 2018, etc.) Responsible Parties: Program Chair/ HS Grad Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  100% of students received a score of >85%  Overall average score = 87.5% (49/56)  2017-2018 - 85.3% (overall average)  2015-2016 - 86.4700% (average)  The final paper in this course was a culmination of several smaller assignments that required students to complete a literature review on a topic of their choice. The intent of this assignment was for students to explore the viability of a potential dissertation topic. The standardized EdD Writing Rubric served as the grading basis for this assignment. Feedback assignments are incorporated into the course, but some students still find academic writing to be challenging.  Because students have continuously met target on this item each time it's been assessed, no changes have been indicated in previous action plans. (08/01/2019)  Related Documents:  EdD 800 Final Paper Overview.pdf	Action: Due to a curriculum revision for the EdD program, this course will no longer be offered and this item will no longer be assessed. (08/01/2019)

# **AU Outcome: EdD 4.1**

Measures	Results	Actions
SL: Didactic - EdD 810: Methods of Inquiry – Collaborative Group Activity: Mock Qualitative Research Project Target: 100% of students will receive a score of >= 85% Timeframe: When course is taught (e.g., 2021, 2024, etc.) Responsible Parties: Program Chair/HS Graduate APG Committee	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes 100% of students (3 of 3) met this target with one achieving 94.3%, one achieving 95.7%, and one achieving 97.1%.  New assessment item for this year.  This project that was completed near the end of the semester promoted group collaboration, which is best practice, especially in qualitative research projects. Students independently completed interviews of two different new faculty members (one known to them, and one unknown). Individually they transcribed the interviews and submitted the transcriptions and fieldnotes. Then as a team they completed a qualitative data analysis of all six interviews to come up with themes and subthemes. (08/01/2019)	Action: Due to a curriculum revision for the EdD program, this course will no longer be offered and this item will no longer be assessed. (08/01/2019)
SL: Didactic - EdD 820: Methods of Inquiry - Quantitative Research – Research Proposal Target: Students will receive an average score of at least 80% Timeframe: When course is taught (e.g., 2016, 2019, etc.) Responsible Parties: Program Chair/HS Graduate APG Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  3/3 students scored at least 80% on Paper 3 of the research proposal assignment (90%, 89%, 80%), so the target was met. The average score (M = 86%, SD = 2.75) was slightly less than spring 2016 (M = =88%, SD = 1.08). The slight dip in performance may be due to a change in the weighting of substantive and writing criteria. Previously the assignment was weighted too heavily toward writing (8/20 points = 40%), so it was revised spring 2019 such that writing comprised 5/50 points (10%) and substantive criteria comprised 90% of the points earned.  Based on student feedback spring 2016 (when course was last taught), students considered the research proposal to be a valuable experience. In each paper, students received up to 5 points for the revised sections of the previous paper(s).  To facilitate target achievement for 2018-2019, the social sciences research methods textbook was replaced with an education research methods textbook and a survey research methods textbook was added to the course. Relevant YouTube video content was also required to supplement readings. Discussion board and Wiki assignments, quizzes, and SPSS statistics assignments were assigned so students could apply theory content and receive formative feedback in advance of the three research proposal assignments.	Action: The sequenced, cumulative research proposal assignment (Paper 1, Paper 2, Paper 3) will be continued because it allows students to directly apply course theory and helps prepare them for dissertation. Paper 1 is comprised of the introduction of the problem, statement of study purpose, and hypotheses or research questions. Paper 2 is a continuation of Paper 1 (Paper 1 part revised to reflect professor feedback) with the addition of the study methods. Paper 3 is a continuation of Paper 2 (with revisions to Paper 1 and Paper 2 parts based on professor feedback) with the addition of the statistical analysis plan. Discussions and Wikis will continue to be

**AU Outcome: EdD 4.1** 

Measures	Results	Actions
	The course evaluation spring 2019, completed by only 1 of 3 students, provides some evidence that assignment expectations were too difficult and that instructor feedback was beyond students' level of readiness. (08/01/2019)	assigned to allow students to apply course content and to demonstrate achievement of module objectives. Discussions and wikis will be part of module participation points. Quizzes and SPSS assignments will also be continued to assess students' understanding of module concepts and to demonstrate achievement of module objectives. Optional synchronous web conferencing will be implemented in each module to answer students' questions about module content. (08/01/2019)
SL: Didactic - EdD 830: Dissertation Seminar – Prospectus Target: Students will receive an average score of >80% Timeframe: When course is taught (e.g., summer 2016, summer 2017) Responsible Parties: Program Chair/HS Graduate APG Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  100% of students received a score of >85%  Overall average score = 100% (20/20)  Overall Averages  2016 – 100%  2017 – 100%  The goal of this course is for students to examine potential dissertation topics as well as explore the dissertation process – establish a research question, work on a literature review, and consider methodology. The student in this section took this out of sequence due to changes in course offering. The student was still able to complete a prospectus and a draft of Chapter 1. (08/01/2019)  Related Documents:  Dissertation Prospectus_apr2016.docx	Action: Due to a curriculum revision for the EdD program, this course will no longer be offered and this item will no longer be assessed. (08/01/2019)

### **AU Outcome: EdD 4.1**

Measures	Results	Actions
Health Professions Education –	<b>Reporting Year:</b> 2018 - 2019 (Year 1)	
Student Choice Activities	Target Met: NA	
Target: 100% of students will receive	Course not offered. (08/01/2019)	
an average score of >90% across the		
three student choice activities		
Timeframe: When course taught		
(e.g., spring, Year 1)		
Responsible Parties: Program		
Chair/HS Graduate APG Committee		

### **AU Outcome: EdD 5.1**

Students will advance the scholarship of education in a variety of health science and nursing professions.

Measures	Results	Actions
SL: Didactic - EdD 780: Integrating Evolving Technology in Health Professions Education — Tech Topic Assignment Target: 100% of students will receive a score of >= 85% Timeframe: When course is taught (e.g., 2015, 2018, etc.) Responsible Parties: Program Chair/ HS Grad Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  100% of students received a score of >85%  Overall average score = 100% (100/100)  New assessment item.  Students were required to present on an assigned topic that covered emerging technology trends in health sciences educational settings. Specific criteria were used to assess each student's work. Students were allowed to present their topic using whatever methods best applied to their topic. (08/01/2019)	Action: This assignment will be included the next time this course is taught with no revisions. Specific criteria will be used to assess each student's work and the criteria will be available to help students complete their submissions. Students will be allowed to present their topic using whatever methods best apply to their topic. Subsequent sections will be assessed on this measurement tool to ensure the target continues to be met. (08/01/2019)
SL: Didactic - EdD 790: Practicum in Health Professions Education — Course Discussions Target: Students will receive an	Reporting Year: 2018 - 2019 (Year 1) Target Met: NA Course not offered. (08/01/2019)	

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# Program (HS) - Doctor of Education (Ed.D.)

### **AU Outcome: EdD 5.1**

Measures	Results	Actions
average score of >80%		
Timeframe: When course is taught		
(e.g., spring 2017)		
Responsible Parties: Program		
Chair/HS Graduate APG Committee		

### Program (HS) - Masters in Occupational Therapy (MS in OT)

### AU Outcome: MS in OT 1.1 Case Study Report

Students will use critical reasoning skills to successfully develop a case study report.

Measures	Results	Actions
SL: Didactic - OT 602 – OT School System Practice Case Report Assignment  Target: Minimum of 80% on case report assignment Timeframe: When course taught (year 2 of program, e.g., Fall 2016) Responsible Parties: OT 602 Instructor/ Program Faculty/ HS Grad Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1) Target Met: No 18 out of 22 students received at least 80% on this assignment, with a class average for this assignment of 26.7/30 or 89%. Four students out of the 22 did not achieve a score of 80% or higher. The class average is slightly up from last year overall. (03/16/2020)	Action: The program plans to include more practice case studies, specifically, case studies that involve writing up an evaluation report as this assignment requires, be done in class to better prepare students to do this individual assignment. (03/16/2020)

### AU Outcome: MS in OT 1.2 Therapeutic Intervention

Students will accurately use critical reasoning skills in development of therapeutic intervention.

Measures	Results	Actions
SL: Didactic - OT 611 – Written final: Initial evaluation note and intervention plan Target: All students will achieve a	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  22/22 students received a minimum grade of 80% on the initial evaluation note and intervention plan with the class average on this written final being 90.95%. This result was	Action: No Program changes are needed for this goal area. Faculty will continue to provide opportunities to plan interventions

# Program (HS) - Masters in Occupational Therapy (MS in OT)

### AU Outcome: MS in OT 1.2 Therapeutic Intervention

Measures	Results	Actions
minimum score of 80% on initial evaluation note and intervention plan  Timeframe: When course taught (Year 2 of program, e.g., Spring 2017)  Responsible Parties: OT 611  Instructor/ Program Faculty/HS Grad Curriculum Committee	improved to meet the goal compared to last year where 18/19 students received an 80% or better on the same task. (03/16/2020)	for a variety of clients to continue to promote student success with the development of therapeutic interventions. (03/16/2020)

# Program (HS) - Medical Imaging (MI)

**AU Outcome: MI 1.1** 

Students will demonstrate appropriate patient preparation for imaging procedures.

Measures	Results	Actions
SL: Didactic - MI: 460 Competency Evaluation/CCE Part I, numbers 4, 5, 6, 7 and CCE Part II, numbers 1, 2  Target: Average score of >= 3. (0-4 pt. scale) Timeframe: Spring Semester Responsible Parties: Clinical Instructors/ Program Faculty/ Health Sciences(HS) Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  2019= 3.96 (n=1)  No prior data available for comparison  This measurement tool allowed the student to demonstrate appropriate patient preparation for various MRI procedures. The student demonstrated the ability to provide education to the patient, appropriately screen patients, document history, and position the patient on the MRI table. The procedures that the student was evaluated on coincide with the procedures being taught in other courses this semester. The student had the opportunity to gain effective feedback on patient preparation during the evaluation process. Clinical competence was demonstrated. (10/01/2019)	Action: The instructor will continue to use this measurement tool as it demonstrated that it is beneficial to student learning and growth within the clinical environment. (10/01/2019)
SL: Didactic - MI: 445 Competency Evaluation/CCE Part I, numbers 4, 5, 6 and CCE Part II, numbers 1, 2	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes 2019= 3.81 (n=1)	Action: The instructor will continue to use this measurement tool as it demonstrated that it is beneficial to

# Program (HS) - Medical Imaging (MI)

### **AU Outcome: MI 1.1**

Measures	Results	Actions
Target: Average score of >= 3 (0-4 pt. scale). Timeframe: Spring Semester Responsible Parties: Clinical Instructors/ Program Faculty/ HS Curriculum Committee	No prior data available for comparison.  This measurement tool allowed the student to demonstrate appropriate patient preparation for various CT procedures. The student demonstrated the ability to provide education to the patient, document history, and position the patient on the CT table. The procedures that the student was evaluated on coincide with the procedures being taught in other courses this semester. The student also experienced procedures that will be taught in the summer semester. The student had the opportunity to gain effective feedback on patient preparation during the evaluation process. Clinical competence was demonstrated. (10/01/2019)	student learning and growth within the clinical environment. (10/01/2019)

### **AU Outcome: MI 1.2**

Outcome: Students will demonstrate appropriate protocol and parameter selection for imaging procedures.

Measures	Results	Actions
SL: Didactic - MI: 460 Competency Evaluation/CCE Part II, numbers 3, 4, 5  Target: Average score of >= 3 (0-4 pt. scale). Timeframe: Spring Semester Responsible Parties: Clinical Instructors/ Program Faculty/ HS Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes 2019 = 3.98 (n=1)  No prior data available for comparison.  This measurement tool allowed the student to demonstrate appropriate protocol, coil, and scan parameter selections for various MRI procedures. The student had the opportunity to gain effective feedback from professional technologists in the clinical setting. Clinical competence was demonstrated. (10/01/2019)	Action: The instructor will continue to use this measurement tool as it demonstrated that it is beneficial to student learning and growth within the clinical environment. (10/01/2019)
SL: Didactic - MI: 445 Competency Evaluation/CCE Part II, numbers 3, 4 Target: Average score of >= 3. (0-4 pt. scale)  Timeframe: Spring Semester Responsible Parties: Clinical Instructors/ Program Faculty/ HS	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes 2019= 3.82 (n=1)  No prior data available for comparison.  This measurement tool allowed the student to demonstrate appropriate protocol and scan parameter selections for various CT procedures. The student had the opportunity to gain effective feedback from professional technologists in the clinical setting. Clinical competence	Action: The instructor will continue to use this measurement tool as it demonstrated that it is beneficial to student learning and growth within the clinical environment. (10/01/2019)

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# Program (HS) - Medical Imaging (MI)

### **AU Outcome: MI 1.2**

Measures	Results	Actions
Curriculum Committee	was demonstrated. (10/01/2019)	

### **Program (HS) - Medical Laboratory Science (MLS)**

**AU Outcome: MLS 1.1** 

Students will apply theory and principles related to laboratory testing

Measures	Results	Actions
SL: Didactic - Exam scores – MLS 440: Clinical Hematology and Hemostasis Target: 75% of students will receive an average score of >= 80% Timeframe: Annually Responsible Parties: Program Chair/HS Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1) Target Met: No Fall 2018 – 13 students  69.2% (9/13) earned an average score of >80%.  Overall average score = 86.6%  Fall 2017 = 88.3% Fall 2015 = 91.3% (overall averages)  This course helps students to apply theory and principles related to hematology. This course followed the new curriculum plan with students taking a precursor course to Hematology. Four proctored exams were given. A new assignment, the Hematology Portfolio was incorporated into the course this year to help students create a comprehensive study guide. This assignment was graded as an exam and included in the exam total points. This course was peer reviewed by two faculty members and will be put through a QM template in the future. (08/07/2019) Related Documents: MLS 440 - Exam Scores.pdf	Action: This course will continue to have four proctored exams. Previously the Hematology Portfolio was included in the exam grades and counted as an exam. This assignment will be moved into the homework grade category and the assignment will be moved to the end of the course for students to complete during clinical rotation hours.  In spring of 2020, we discovered all of the exams from this course were posted on the internet. All exams will be rewritten for the next time this course is offered. (08/07/2019)
SL: Didactic - Clinical Microbiology Exam Scores (formerly Exam Scores	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes	Action: This course will continue to include four exams (two proctored,

### **AU Outcome: MLS 1.1**

Measures	Results	Actions
<ul> <li>MLS 460: Clinical Microbiology)</li> <li>Target: 75% of students will receive an average score of &gt;= 80%</li> <li>Timeframe: Annually</li> <li>Responsible Parties: Program</li> <li>Chair/HS APG Committee</li> </ul>	Spring 2019 100% (14/14) students earned average scores of >80% on five exams.  Overall average score = 88.1%, out of 250 points  Spring 2018 55.5% (5/9) students earned average score of >80% on five exams.  Overall average score = 81.6%, out of 250 points  This course helps students to apply theory and principles related to microbiology. Five exams were given in this course (three proctored, two unproctored), which is a change from the previous year, when four exams were proctored. Together, the multiple-choice exams and the hands-on competency exam help prepare students for clinical rotations, where theory and principles of microbiology will be applied. This measurement tool is the same as the previous year, but the target was changed from 100% to 75% of students for 2018-2019,	two unproctored) and a competency exam prior to clinical rotation hours for the next academic year. Additionally, following clinical rotations, a proctored comprehensive exam will be given. Student outcomes will be assessed with the same target.  In spring of 2020, we discovered all of the exams from this course were posted on the internet. All exams will be rewritten for the next time this course is offered. (08/02/2019)
	which aligns with the benchmarks set forth by the MLS program accreditor. (08/02/2019)	

### **AU Outcome: MLS 1.2**

Students will apply concepts and principles of laboratory operations in a clinical setting

Measures	Results	Actions
SL: Didactic - Case study discussions  – MLS 460: Clinical Microbiology Target: 75% of students will receive an average score of >= 80% Timeframe: Annually Responsible Parties: Program Chair/HS Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  Spring 2019  92.9% (13/14) students earned average score of >80% on case study assignments.  Overall average score = 95.4%, out of 40 points  Spring 2018  100% (9/9) students earned average score of >80% on case study assignments.	Action: This assignment will be included with no changes to delivery for the next academic year. Students will be asked to demonstrate knowledge of microorganism identity through four case presentations during onsite labs. The same target will be used. (08/02/2019)

### **AU Outcome: MLS 1.2**

Measures	Results	Actions
	Overall average score = 97.2%, out of 50 points  This assignment is required to cover bacteriology and tests included in the knowledge base for the BOC exam. Students demonstrated knowledge of microorganism identity through four case presentations during onsite lab only, instead of also using a discussion board format, which is a change from the previous year. This measurement tool is the same as the previous year, but the target was changed from 100% to 75% of students for 2018-2019, which aligns with the benchmarks set forth by the MLS program accreditor. (08/02/2019)	
SL: Exam/Quiz - Standardized - MediaLab Exam Simulator Scores - MLS 465: Clinical Management and Review Target: 75% of students will achieve a CAT difficulty of 5.0 Timeframe: Annually Responsible Parties: Program Chair/HS APG Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  Spring 2019 – 12 students  83.3% (10/12) of students achieved a CAT difficulty level of 5.0  Average level of difficulty = 5.9  2018 – 90%; 5.3  Exam Simulator (ES) is a preparatory resource we purchase for students to help them prepare for the BOC exam. Students take four CAT exams during the last eight weeks of the semester. Performance on the CAT has been shown to be a good predictor of performance on the BOC exam. We opted to not have any of the CAT attempts proctored due to the expense associated with proctoring. We did see evidence that students were looking up answers while completing the CAT exams (exam time indications inconsistent with other program exams). (08/02/2019)	Action: Next academic year, we will require some of the CAT attempts to be proctored and we will include additional remediation activities for students who do not meet benchmarks for each CAT attempt. The review section course will be updated for 2019-2020, so we will monitor this item to ensure students continue to meet the target. (08/02/2019)

### **AU Outcome: MLS 2.2**

Students will assess the accuracy of laboratory test results by correlating laboratory data with clinical diagnoses

Measures	Results	Actions
SL: Didactic - Graphic Organizer assignment – MLS 445: Clinical Chemistry	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes 92.8% (13/14) earned an average score of >80%.	Action: This assignment will be included the next time this course is taught with no revisions. This

### **AU Outcome: MLS 2.2**

Measures	Results	Actions
Target: 75% of students will receive an average score of >= 80% Timeframe: Annually Responsible Parties: Program Chair/HS Curriculum Committee	2018-2019 = 95.7% (overall average) 2017-2018 = 88.6% (overall average) 2016-2017 = 98.0% (overall average) 2015-2016 = 95.0% (overall average) 2014-2015 = 97.0% (overall average)  This assignment incorporates all chemistry analytes from the ASCP BOC Exam Content Guideline as a study supplement during fall clinical rotations. Students complete five categories for each test, including reference ranges, reflex tests, and disease correlation; in order to associate high, low, or normal results and related tests with the clinical condition of the patient. One student turned in late work during one of four weeks, resulting in a score of zero for one late submission. (08/02/2019)  Related Documents: MLS 445 Graphic Organizer Rubric 2018.pdf	assignment will incorporate all chemistry analytes from the ASCP BOC Exam Content Guideline as a study supplement during fall clinical rotations. Students will complete five categories for each test, including reference ranges, reflex tests, and disease correlation; in order to associate high, low, or normal results and related tests with the clinical condition of the patient. Subsequent sections will be assessed on this measurement tool to ensure the target continues to be met. (08/02/2019)
SL: Didactic - MLS 465: Clinical Management and Review - Case study assignments Target: 75% of students will receive an average score of >= 80% Timeframe: Annually Responsible Parties: Program Chair/HS Faculty Org Committee	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes 83.3% (10/12) students earned an average score of >85%  Overall average score = 55.8/60 points; 93%  The case study assignments helped students reviewed content covered during the summer and fall semesters. Grading for this assignment awards points to students for summarizing cases in their own words and answering all questions. Students evaluate their answers against keys released after the due date and report on areas that require additional studying. Students lost points for turning in assignments late and not completing all requirements. We received a lot of negative feedback about this assignment given its placement in the course. This assignment falls during rotation hours. Students expressed concern with the amount of time required to complete this assignment. (08/02/2019)	Action: The review section of the course will be updated for 2019-2020 and this assignment will no longer be included in the course. This measurement tool will be retired. (08/02/2019)
SL: Clinical - MLS 440: Clinical Hematology and Hemostasis - Virtual Microscope Assignments	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes 84.6% (11/13) of students received an average score of >90%	Action: The virtual microscope program is proprietary software

### **AU Outcome: MLS 2.2**

Measures	Results	Actions
Target: 75% of students will receive an average score of >= 80% Timeframe: Annually Responsible Parties: Program Chair/HS Curriculum Committee	Overall average = 92.2%  The virtual microscope (VM) allows students to practice differentials on their personal computer as a bridging activity to performing them on a microscope during clinical rotations. These assignments provide patient case history, so students are able to correlate their results with potential clinical diagnoses. One of the most powerful aspects of the VM allows the instructor to take snapshots of actual cells on each differential to use as a teaching tool to help students classify cells. Students were required to spend 12 hours of rotation time with a hematology instructor in a prerequisite course. For the next cohort, more time will be spent on normal differentials to allow students to build a stronger core base of knowledge within this course. Late submissions lowered the scores for one student. Late submissions violate the Professional Behavior objectives within the course and are monitored. (08/02/2019) Related Documents:  428 and 440 - Differential Grading Rubric.pdf	that requires a subscription. The next time the course is taught, this item will be changed to measure a different assignment since we will no longer purchase access to the virtual microscope. (08/02/2019)

**AU Outcome: MLS 3.1** 

Students will maintain competency in the laboratory field of study

Measures	Results	Actions
SL: Didactic - Annotated Bibliographies – MLS 426: Evidence- Based Laboratory Medicine  Target: 75% of students will receive an average score of >80% Timeframe: Annually  Responsible Parties: Program Chair/HS APG Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  Fall 2018 – 14 students  78.6% (11/14) earned an average score of >85%.  Overall average score = 91.1%  2017-2018 = 88.4% (overall average) 2016-2017 = 96.2% (overall average) 2015-2016 = 90.9% (overall average)	Action: This assignment will be included the next time this course is taught. Additional explanation about the assignment requirements, for example, in a narrated presentation, would benefit all students. Subsequent sections will be assessed on this measurement tool to ensure the target continues to be met.  Continue to monitor. (08/02/2019)

### **AU Outcome: MLS 3.1**

Measures	Results	Actions
	Students were required to use the evidence-based practice (EBP) process to complete annotated bibliographies on two pieces of evidence that related to a student-selected topic. Skills learned throughout the course culminated in a final project that encompassed the entire EBP process. Students were provided with a list of expectations along with a breakdown of how points were earned to help guide project development. This course was developed to meet the needs of learners with varying backgrounds in research to show how the EBP process is used in the laboratory setting. Students who did not do well lost points for missing required elements. (08/02/2019)  Related Documents:  426 Annotated Bibliography and Grading.pdf	

# Program (HS) - Public Health (PH)

**AU Outcome: PH 1.1** 

Student will be able to identify determinants of health and illness

Measures	Results	Actions
SL: Exam/Quiz - Teacher-made - PH: 430 Final exam Target: Average score of >80% Timeframe: Fall Semester Responsible Parties: Program faculty / HS APG committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes In Fall 2018, seven students took the course and received an average of 81.3% on the final exam. In Fall 2017, two students took the course and earned an average of 90% on the final exam. The lower score is likely due to a change in curriculum that included new textbooks and a new exam. The changes included a dedicated epidemiology textbook as a method to focus more on the topic, changing the course from more biostatistics focused to a more even split between epidemiology and statistics. (05/23/2019)	Action: More time of course will be spent on biostatistic fundamentals and some of the epidemiology concepts will be truncated. (05/23/2019)
SL: Didactic - Community needs assessment as part of mid-term project. Target: Average score of >80% Timeframe: Spring semester Responsible Parties: Program faculty	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  All (n=7) students scored above 80%, with an average score of 93.33%. In Spring 2018, four students had an average score of 92.25%. Student achievement on this project appears to be consistent year-over-year due to a detailed outline for the project. Additional, an assignment	Action: Students will gather reputable health data sources in an assignment prior to the midterm project, ensuring they have good information to write their

# Program (HS) - Public Health (PH)

### **AU Outcome: PH 1.1**

Measures	Results	Actions
/ Health Science (HS) Curriculum committee	prior to the midterm project requires students to gather reputable health data sources prior to the assignment, which ensures they will have good information to synthesize prior to working on the midterm project. (05/23/2019)	community assessments. A grading rubric will be available to students when they start the project. (05/23/2019)

**AU Outcome: PH 1.2** 

Student will be able to identify sources of public health data and information

Outcome Status: Active

Measures	Results	Actions
SL: Didactic - Community needs assessment as part of mid-term project.  Target: Successful completion of report Average score of >80%  Timeframe: Spring semester  Responsible Parties: Program faculty / Health Science (HS) Curriculum committee	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes All (n=7) students scored above 80%, with an average score of 93.33%. In Spring 2018, four students had an average score of 92.25%. Student achievement on this project appears to be consistent year-over-year due to a detailed outline for the project and a prior assignment that requires them to gather reputable health data sources prior to undertaking the project. This data gathering assignment requires students to find a variety of data sources on the demographics and health status of residents of Black Hawk County. (05/23/2019)	Action: Students will gather reputable health data sources in an assignment prior to the midterm project, ensuring they have good information to write their community assessments. A grading rubric will be available to students when they start the project. (05/23/2019)

### **AU Outcome: PH 2.1**

Student will be able to gather information on policy

Measures	Results	Actions
SL: Exam/Quiz - Teacher-made - PH	<b>Reporting Year:</b> 2018 - 2019 (Year 1)	
495 Final Exam	Target Met: NA	
Target: Average score >= 80%	Measure not assessed for 2018-2019 academic year. New measure for 2019-2020.	
Timeframe: Summer semester	(05/18/2020)	
Responsible Parties: PH 495 Course		
Instructor/HS Curriculum Committee		

College Goal 1 - Prepare outstanding healthcare practitioners who are committed to lifelong learning.

### Program (HS) - Public Health (PH)

**AU Outcome: PH 2.2** 

Student will be able to identify mechanism to evaluate programs for their quality and effectiveness

Outcome Status: Active

Measures	Results	Actions
SL: Exam/Quiz - Teacher-made - PH 480 Final Exam. (Public Health Research and Evaluation) Target: Average score > 80% Timeframe: Spring semester Responsible Parties: Program faculty / Health Science (HS) Curriculum committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  Eleven students took the course with an average score of 88.1% on the final exam. The previous year, two students took the course with an average score of 83.33%. There was significant improvement despite no changes being made to the curriculum or exam. This is likely to a larger, "more true" sample. (05/23/2019)	Action: The instructor will give students two attempts at this exam in Spring 2020, with the goal of students improving their learning by studying items they may have missed the first time through. (05/23/2019)

**AU Outcome: PH 3.2** 

Student should be able to describes the role of governmental and non-governmental organizations in the delivery of community health services

Outcome Status: Active

Measures	Results	Actions
SL: Exam/Quiz - Teacher-made - PH: 410 Final exam Target: Average score of >80% Timeframe: Fall semester Responsible Parties: Program faculty / HS Faculty Org. committee	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes Eleven students received an average of 82.6% on the final exam. In Fall 2017, three students earned an average of 91.7%. (05/23/2019)	Action: This measure will remain but test questions missed by five or more students will be edited or removed. The instructor will also consider allowing students to take the exam twice in order to study material that might have been missed the first time through. (05/23/2019)

**AU Outcome: PH 4.1** 

Student should be able to describe the scientific foundation of the field of public health

Measures	Results	Actions
<b>SL: Exam/Quiz - Teacher-made -</b> PH: 400 Identify prominent events in the	Reporting Year: 2018 - 2019 (Year 1)	Action: The action plan from 2017-

# Program (HS) - Public Health (PH)

### **AU Outcome: PH 4.1**

Measures	Results	Actions
history of public health Midterm Exam and assignments Target: Average score of >80% Timeframe: Fall semester Responsible Parties: Program faculty / HS Curriculum committee	<b>Target Met:</b> Yes Seven students earned an average of 91.8% on the midterm exam. In Fall 2017, four students earned an average of 83.5% on the midterm exam. There was a significant year-over-year increase despite no changes to the curriculum. It is believed that this is due to a larger sample size and this is closer to the "true mean." (05/23/2019)	2018, "This measure will be kept and compared to a larger cohort," had no impact on the achievement of the target. A third year of data will assist in making future decisions about this measure. (05/23/2019)
SL: Exam/Quiz - Teacher-made - PH: 430 Final exam Target: Average score of >80% Timeframe: Fall semester Responsible Parties: Program faculty / HS Faculty Org. committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes In Fall 2018, seven students took the course and received an average of 81.3% on the final exam. In Fall 2017, two students took the course and earned an average of 90% on the final exam. The lower score is likely due to a change in curriculum that included new textbooks and a new exam. The changes included a dedicated epidemiology textbook as a method to focus more on the topic, changing the course from more biostatistics focused to a more even split between epidemiology and statistics. (09/03/2019)	Action: Based on these results, more time of course will be spent on biostatistic fundamentals and some of the epidemiology concepts will be truncated. (09/03/2019)

# **Program (Nursing) - Bachelor of Science in Nursing (BSN)**

### **AU Outcome: BSN 1.0 Lead**

Provide basic organizational and systems leadership.

Outcome Status: Active Start Date: 08/01/2014

Measures	Results	Actions
AD: Survey - Alumni Survey Item: How well BSN education prepared you to provide basic organizational and systems leadership (1= very poorly, 2 = poorly, 3 = well, 4 = very well). Target: 75% of respondents will report that their BSN education	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  100% of 2017-2018 alumni survey respondents (n = 38) reported their BSN education prepared them well (42.11%) or very well (57.89%) to perform this outcome.  100% of 2016-2017 alumni survey respondents (n = 57) reported their BSN education prepared them well (61.40%) or very well (38.60%) to perform this outcome.  Results are consistent with previous alumni surveys. The target of 75% favorable responses	Action: Survey 2018-2019 alumni during 2020. Compare responses and monitor for favorable and unfavorable trends. (03/09/2020)

### **AU Outcome: BSN 1.0 Lead**

Measures	Results	Actions
prepared them well or very well to provide basic organizational and systems leadership.  Timeframe: Annually Responsible Parties: CIRE, Evaluation & Study Committee	(well or very well) has been consistently met or exceeded. (03/09/2020)	
AD: Survey - Employer Survey Item: How well BSN graduate provides basic organizational and systems leadership (1= very poorly, 2 = poorly, 3 = well, 4 = very well, NA = not applicable, e.g., does not perform outcome, or outcome not applicable to current role). Target: 75% of respondents will report that the BSN graduate provides basic organizational and systems leadership well or very well. Timeframe: Annually Responsible Parties: CIRE, Evaluation & Study Committee	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes Survey of employers of 2017-2018 BSN graduates: 100% of employers who responded to the survey (n = 6) reported the 2017-2018 BSN program graduate performs this outcome very well. This result exceeds those of previous alumni surveys.  Survey of employers of 2016-2017 BSN graduates: 78% of employers who responded to the survey of 2016-2017 graduates (n = 9) reported the BSN program graduate performs this outcome well (22.22%) or very well (55.56%). (poorly = 1 [11.11%]; not applicable = 1 [11.11%)  The target for this measure has been consistently met or exceeded. (03/09/2020)	Action: Survey employers of 2018-2019 graduates during 2020. Compare responses and monitor for favorable and unfavorable trends. (03/09/2020)
SL: Didactic - NU270 Nursing Philosophy Paper Target: 100% of the students will achieve at least 75% on the nursing philosophy paper. Timeframe: Year 1 Responsible Parties: BSN Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  Summer, 2018 – 100% (18/18) on campus and (7/7) hybrid met the target.  Fall 2018- 97% (61/63) met the target.  Students discussed their shadowing experiences during one of the last class periods focusing on leadership qualities observed in the nurse they shadowed. (11/26/2019)  Related Documents:  Outcome 1 NU 270 Nursing Philosophy Shadowing  Paper.docx	Action: This measure will no longer be used for this outcome as this course is no longer being offered. (11/26/2019)
AD: Survey - Alumni Survey Item: How often in current professional nursing practice you provide basic	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  100% of 2017-2018 alumni survey respondents who answered this item (n = 37) reported	Action: Survey 2018-2019 alumni during 2020. Compare responses and monitor for favorable and

### **AU Outcome: BSN 1.0 Lead**

Measures	Results	Actions
organizational and systems leadership (1= not at all, 2 = rarely, 3 = some of the time, 4 = most of the	they perform this outcome some (27.03%) or most (72.97%) of the time in their current professional practice.	unfavorable trends. (03/09/2020)
time, NA = not applicable, e.g., not working in a BSN nursing role, or outcome not applicable to current	92% of 2016-2017 alumni survey respondents who answered this item (n = 51) reported they perform this outcome some (15.69%) or most (80.39%) of the time in their current professional practice.	
role).	Results are consistent with previous alumni surveys. (03/09/2020)	
Target: 75% of respondents will	results are consistent with previous diamin surveys. (05/05/2020)	
report that they provide basic		
organizational and systems		
leadership some or most of the time in their current professional nursing		
practice.		
Timeframe: Annually		
Responsible Parties: CIRE,		
Evaluation & Study Committee		
AD: Survey - Employer Survey Item:	<b>Reporting Year:</b> 2018 - 2019 (Year 1)	Action: Survey employers of 2018-
How often BSN graduate provides	Target Met: Yes	2019 graduates during 2020.
basic organizational and systems	Survey of employers of 2017-2018 BSN grads: >95% of employers who responded to the	Compare responses and monitor
leadership (1= not at all, 2 = rarely, 3 = some of the time, 4 = most of the	survey (n = 6) reported the BSN program graduate performs this outcome some (16.67%) or	for favorable and unfavorable
time, NA = not applicable, e.g., does	most (83.33%) of the time in current professional practice.	trends. (03/09/2020)
not perform outcome or outcome	Survey of employers of 2016-2017 BSN grads: 83% of employers who responded to the	
not applicable to current role).	survey (n = 12) reported the BSN program graduate performs this outcome some (8.33 %) or	
	most (75%) of the time in current professional practice.	
Target: 75% of respondents will		
report that BSN graduate provides basic organizational and systems	The target for this measure has been consistently met or exceeded. (03/09/2020)	
leadership some or most of the time		
in current professional nursing		
practice.		
Timeframe: Annually		
Responsible Parties: CIRE,		

#### **AU Outcome: BSN 1.0 Lead**

Measures	Results	Actions
Evaluation & Study Committee		

#### **AU Outcome: BSN 2.0 EBP**

Integrate evidence-based practice in nursing care.

Outcome Status: Active Start Date: 08/01/2014

Measures	Results	Actions
AD: Survey - Alumni Survey item: How well BSN education prepared you to integrate evidence-based practice in nursing care (1= very poorly, 2 = poorly, 3 = well, 4 = very well). Target: 75% of respondents will report that their BSN education prepared them well or very well to integrate evidence-based practice in nursing care. Timeframe: Annually Responsible Parties: CIRE, Evaluation & Study Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  100% of 2017-2018 alumni survey respondents (n = 38) reported their BSN education prepared them well (52.63%) or very well (47.37%) to perform this outcome.  95% of 2016-2017 alumni survey respondents (n = 57) reported their BSN education prepared them well (52.63%) or very well (42.11%) to perform this outcome.  Results are consistent with previous alumni surveys. The target of 75% favorable responses (well or very well) has been consistently met or exceeded. (03/09/2020)	Action: Survey 2018-2019 alumni during 2020. Compare responses and monitor for favorable and unfavorable trends. (03/09/2020)
AD: Survey - Employer Survey item: How well BSN graduate integrates evidence-based practice in nursing care (1= very poorly, 2 = poorly, 3 = well, 4 = very well, NA = not applicable, e.g., does not perform outcome, or outcome not applicable to current role). Target: 75% of respondents will report that BSN graduate integrates evidence-based practice in nursing	<b>Reporting Year:</b> 2018 - 2019 (Year 1) <b>Target Met:</b> Yes  Survey of employers of 2017-2018 BSN graduates: 100% of employers who responded to the survey (n = 6) reported the 2017-2018 BSN program graduate performs this outcome very well. This result exceeds those of previous alumni surveys.  Survey of employers of 2016-2017 BSN graduates: 78% of employers who responded to the survey (n = 9) reported the 2016-2017 BSN program graduate performs this outcome well (33.33%) or very well (44.44%). (poorly = 1, 11.11%; not applicable = 1, 11.11%)  The target for this measure has been consistently met or exceeded. (03/09/2020)	Action: Survey employers of 2018-2019 graduates during 2020. Compare responses and monitor for favorable and unfavorable trends. (03/09/2020)

### **AU Outcome: BSN 2.0 EBP**

Measures	Results	Actions
care well or very well.  Timeframe: Annually Responsible Parties: CIRE, Evaluation & Study Committee		
SL: Clinical - NU335 graded care plans Target: 100% of students will achieve at least 73% on each graded care plan Timeframe: Year 1 Responsible Parties: BSN Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  Both cohorts in the 2018-2019 academic year achieved the target goal of all students obtaining a minimum of 73% on each graded care plan. The action plan to was successful in attaining the target. May be beneficial to develop rubrics for each care plan to ensure reliability and consistency of grading. (11/26/2019)  Related Documents:  Outcome 2 NU 335 Graded Care Plan-Concept Map #1.pdf  Outcome 2 NU 335 Graded Care Plan-Concept Map #2.pdf	Action: Due to revisions in the BSN CAP, this will no longer be used as a measure. (11/26/2019)
SL: Clinical - NU486 Clinical Seminar Target: 100% of students will provide refereed journal article to support nursing interventions discussed in clinical seminar.  Timeframe: Year 3  Responsible Parties: BSN Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1) Target Met: NA New measure for year 3. (03/11/2020)	
AD: Survey - Alumni Survey item: How often in current professional nursing practice you integrate evidence-based practice in nursing care (1= not at all, 2 = rarely, 3 = some of the time, 4 = most of the time, NA = not applicable, e.g., not working in a BSN nursing role, or outcome not applicable to current role). Target: 75% of respondents will report that they integrate evidence-	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes >90% of 2017-2018 alumni survey respondents who answered this item (n = 37) reported they perform this outcome some (16.22%) or most (78.38%) of the time in their current professional practice.  92% of 2016-2017 alumni survey respondents who answered this item (n = 51) reported they perform this outcome some (27.45%) or most (70.59%) of the time in their current professional practice.  Results are consistent with previous alumni surveys. (03/09/2020)	Action: Survey 2018-2019 alumni during 2020. Compare responses and monitor for favorable and unfavorable trends. (03/09/2020)

#### **AU Outcome: BSN 2.0 EBP**

Measures	Results	Actions
based practice in nursing care some or most of the time in current professional nursing practice.  Timeframe: Annually Responsible Parties: CIRE, Evaluation & Study Committee		
AD: Survey - Employer Survey item: How often BSN graduate integrates evidence-based practice in nursing care (1= not at all, 2 = rarely, 3 = some of the time, 4 = most of the time, NA = not applicable, e.g., not working in a BSN nursing role, or outcome not applicable to current role). Target: 75% of respondents will report that BSN graduate integrates evidence-based practice in nursing care some or most of the time in current professional nursing practice. Timeframe: Annually Responsible Parties: CIRE, Evaluation & Study Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  Survey of employers of 2017-2018 BSN grads:100% of employers who responded to the survey (n = 6) reported the BSN program graduate performs this outcome some most of the time in current professional practice. This result exceeds those of previous alumni surveys. Survey of employers of 2016-2017 BSN grads: 83% of employers who responded to the survey (n = 12) reported the BSN program graduate performs this outcome some (8.33%) or most (75%) of the time in current professional practice.  The target for this measure has been consistently met or exceeded. (03/09/2020)	Action: Survey employers of 2018-2019 graduates during 2020. Compare responses and monitor for favorable and unfavorable trends. (03/09/2020)

#### **AU Outcome: BSN 3.0 Informatics**

Manage healthcare data, information, knowledge, and technology.

Outcome Status: Active Start Date: 08/01/2015

Measures	Results	Actions
SL: Clinical evaluation tool - NU335 Clinical Evaluation tool Target: 100% of students will	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  Both cohorts in the traditional section achieved the target of 100% of students will obtain the	Action: In order to continue to meet this outcome, course faculty

# **AU Outcome: BSN 3.0 Informatics**

Measures	Results	Actions
achieve rating of "S" in Informatics Competencies on the Clinical Evaluation tool.  Timeframe: Annually (as of 2019- 2020 reporting year; assessed in Year 1 prior to 2019-2020 reporting year)  Responsible Parties: BSN Curriculum Committee	rating of "S" in Informatics on the Clinical Evaluation tool. The course faculty required electronic documentation training, i.e. Omnicell and EPIC, as a requirement of clinical orientation which was successful in achieving the expected target. (11/26/2019)  Related Documents:  Outcome 3 NU 335 Level I and II Clinical Evaluation  Tool.docx	will require electronic documentation training, i.e. Omnicell and EPIC, as a requirement of clinical orientation. Guidance from clinical faculty will assist in continued growth in electronic documentation. (11/26/2019)
AD: Survey - Alumni Survey Item: How well your BSN education prepared you to manage healthcare data, information, knowledge, and technology (1= very poorly, 2 = poorly, 3 = well, 4 = very well). Target: 75% of respondents will report that their BSN education prepared them well or very well to manage healthcare data, information, knowledge, and technology. Timeframe: Annually Responsible Parties: CIRE, Evaluation & Study Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  >95% of 2017-2018 alumni survey respondents (n = 38) reported their BSN education prepared them well (50%) or very well (47.37%) to perform this outcome.  91% of 2016-2017 alumni survey respondents (n = 56) reported their BSN education prepared them well (58.93%) or very well (32.14%) to perform this outcome.  Results are consistent with previous alumni surveys. The target of 75% favorable responses (well or very well) has been consistently met or exceeded. (03/09/2020)	Action: Survey 2018-2019 alumni during 2020. Compare responses and monitor for favorable and unfavorable trends. (03/09/2020)
AD: Survey - Employer Survey Item: How well BSN graduate manages healthcare data, information, knowledge, and technology (1= very poorly, 2 = poorly, 3 = well, 4 = very well, NA = not applicable, e.g., does not perform outcome, or outcome not applicable to current role).  Target: 75% of respondents will report that BSN graduate manages	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  Survey of employers of 2017-2018 BSN graduates: 100% of employers who responded to the survey (n = 6) reported the 2017-2018 BSN program graduate performs this outcome very well. This result exceeds those of previous alumni surveys.  Survey of employers of 2016-2017 BSN graduates: 89% of employers who responded to the survey (n = 9) reported the 2016-2017 BSN program graduate performs this outcome well (44.44%) or very well (44.44%).  The target for this measure has been consistently achieved or exceeded. (03/09/2020)	Action: Survey employers of 2018-2019 graduates during 2020. Compare responses and monitor for favorable and unfavorable trends. (03/09/2020)

# **AU Outcome: BSN 3.0 Informatics**

Measures	Results	Actions
healthcare data, information, knowledge, and technology well or very well. Timeframe: Annually Responsible Parties: CIRE, Evaluation & Study Committee		
SL: Clinical evaluation tool - NU486 Informatics Clinical competencies on clinical evaluation tool Target: 100% of students will receive "S" rating for Informatics clinical competencies on clinical evaluation tool. Timeframe: Year 3 Responsible Parties: BSN Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1) Target Met: NA New measure for year 3. (03/11/2020)	
AD: Survey - Alumni Survey Item: How often in current professional nursing practice you manage healthcare data, information, knowledge, and technology (1= not at all, 2 = rarely, 3 = some of the time, 4 = most of the time, NA = not applicable, e.g., not working in a BSN nursing role, or outcome not applicable to current role). Target: 75% of respondents will report that they manage healthcare data, information, knowledge, and technology some or most of the time in current professional nursing practice. Timeframe: Annually Responsible Parties: CIRE,	<b>Reporting Year:</b> 2018 - 2019 (Year 1) <b>Target Met:</b> Yes  100% of 2017-2018 alumni survey respondents who answered this item (n = 37) reported they perform this outcome some (16.22%) or most (83.78%) of the time in their current professional practice.  94% of 2016-2017 alumni survey respondents who answered this item (n = 51) reported they perform this outcome some (11.76%) or most (82.35%) of the time in their current professional practice.  Results are consistent with previous alumni surveys. (03/09/2020)	Action: Survey 2018-2019 alumni during 2020. Compare responses and monitor for favorable and unfavorable trends. (03/09/2020)

#### **AU Outcome: BSN 3.0 Informatics**

Measures	Results	Actions
Evaluation & Study Committee		
AD: Survey - Employer Survey Item: How often BSN graduate manages healthcare data, information, knowledge, and technology (1= not at all, 2 = rarely, 3 = some of the time, 4 = most of the time, NA = not applicable, e.g., not working in a BSN nursing role, or outcome not applicable to current role).  Target: 75% of respondents will report that BSN graduate manages healthcare data, information, knowledge, and technology some or most of the time in current professional nursing practice.  Timeframe: Annually Responsible Parties: CIRE, Evaluation & Study Committee	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes Survey of employers of 2017-2018 BSN grads: 100% of employers who responded to the survey (n = 6) reported the BSN program graduate performs this outcome some most of the time in current professional practice. This result exceeds those of previous alumni surveys. Survey of employers of 2016-2017 BSN grads: 87% of employers who responded to the survey (n = 12) reported the BSN program graduate performs this outcome some (16.77 %) or most (75%) of the time in current professional practice.  The target for this measure has been consistently met or exceeded. (03/09/2020)	Action: Survey employers of 2018-2019 graduates during 2020. Compare responses and monitor for favorable and unfavorable trends. (03/09/2020)

#### **AU Outcome: BSN 4.0 HC Policy & Finance**

Demonstrate understanding of healthcare policy, finance, and regulatory environments.

Outcome Status: Active Start Date: 08/01/2014

Measures	Results	Actions
SL: Didactic - RN-NU 421 Health Care Delivery and Finance Paper Target: 100% of the students will achieve at least 73% on the NU 421 Health Care Delivery and Finance Paper Timeframe: Annual Responsible Parties: BSN Curriculum	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  100% of the students achieved at least 73% on the Health Care Delivery and Finance Paper.  This target was met. The faculty provided detailed instructions to the students about the assignment as well as the due date. (11/26/2019)  Related Documents:  Outcome 4 RN NU 421 Health Care Delivery and Finance	Action: Continue to give detailed instructions about the assignment and the due dates. Encourage students to email instructor with questions about details of assignment and due dates. (11/26/2019)

### **AU Outcome: BSN 4.0 HC Policy & Finance**

Measures	Results	Actions
Committee	Paper.pdf	
AD: Survey - Alumni Survey Item: How well BSN education prepared you to demonstrate understanding of healthcare policy, finance, and regulatory environments (1= very poorly, 2 = poorly, 3 = well, 4 = very well). Target: 75% of respondents will report that their How well BSN education prepared them well or very well to demonstrate understanding of healthcare policy, finance, and regulatory environments. Timeframe: Annually Responsible Parties: CIRE, Evaluation & Study Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes >90% of 2017-2018 alumni survey respondents (n = 38) reported their BSN education prepared them well (6.053%) or very well (31.58%) to perform this outcome. 80% of 2016-2017 alumni survey respondents (n = 56) reported their BSN education prepared them well (58.93%) or very well (21.43%) to perform this outcome. Results are consistent with previous alumni surveys. The target of 75% favorable responses (well or very well) has been consistently met or exceeded. (03/09/2020)	Action: Survey 2018-2019 alumni during 2020. Compare responses and monitor for favorable and unfavorable trends. (03/09/2020)
AD: Survey - Employer Survey Item: How well BSN graduate demonstrates understanding of healthcare policy, finance, and regulatory environments (1= very poorly, 2 = poorly, 3 = well, 4 = very well, NA = not applicable, e.g., does not perform outcome, or outcome not applicable to current role). Target: 75% of respondents will report that BSN graduate demonstrates understanding of healthcare policy, finance, and regulatory environments well or very well.	<b>Reporting Year:</b> 2018 - 2019 (Year 1) <b>Target Met:</b> Yes  Survey of employers of 2017-2018 BSN graduates: 100% of employers who responded to the survey (n = 6) reported the 2017-2018 BSN program graduate performs this outcome very well. This result exceeds those of previous alumni surveys.  Survey of employers of 2016-2017 BSN graduates: 67% of employers who responded to the survey (n = 9) reported the 2016-2017 BSN program graduate performs this outcome well (33.33%) or very well (33.33%). (poorly = 2, 22.22%; 1 = not applicable, 11.11%).  The target was not met for this measure for the survey of 2016-2017 graduates, but has been consistently achieved or exceeded in past and subsequent surveys. (03/09/2020)	Action: Survey employers of 2018-2019 graduates during 2020. Compare responses and monitor for favorable and unfavorable trends. (03/09/2020)

### **AU Outcome: BSN 4.0 HC Policy & Finance**

Measures	Results	Actions
Timeframe: Annually Responsible Parties: CIRE, Evaluation & Study Committee		
SL: Exam/Quiz - Teacher-made - NU270 Healthcare policy & Finance Quiz Target: 100% of students will achieve at least 75% on Healthcare Policy and Finance Quiz. Timeframe: Year 1 Responsible Parties: BSN Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  Summer, 2018-100% (25/25) accelerated students met the target  Fall, 2018 – 98% (62/63) accelerated and upper division students met the target  Students were required to read the article titled: Should All Americans Have the Right to  Health Care? During class time, students were divided into groups and discussed the Pros and  Cons presented as to whether or not healthcare is a right based on the arguments presented in the article. Students did not discuss their own health care coverage.  (11/26/2019)  Related Documents:  Outcome 4 NU 270 HC Policy finance quiz.docx	Action: This measure will no longer be used for this outcome as this course is no longer being offered. (11/26/2019)
SL: Didactic - RN - NU421 Healthcare Delivery and Finance Paper Target: 100 % of students will achieve 75% or better on the Healthcare Delivery and Finance Paper . Timeframe: Year 4 Responsible Parties: BSN Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1) Target Met: NA New measure for year 4. (03/11/2020)	
AD: Survey - Alumni Survey Item: How often in current professional nursing practice they demonstrate understanding of healthcare policy, finance, and regulatory environments (1= not at all, 2 = rarely, 3 = some of the time, 4 = most of the time, NA = not applicable, e.g., not working in a BSN	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  100% of 2017-2018 alumni survey respondents who answered this item (n = 37) reported perform this outcome some (32.43%) or most (67.57%) of the time in their current professional practice.  84% of 2016-2017 alumni survey respondents who answered this item (n = 50) reported they perform this outcome some (28%) or most (56%) of the time in their current professional practice.  Results are consistent with previous alumni surveys. (03/09/2020)	Action: Survey 2018-2019 alumni during 2020. Compare responses and monitor for favorable and unfavorable trends. (03/09/2020)

### **AU Outcome: BSN 4.0 HC Policy & Finance**

Measures	Results	Actions
nursing role, or outcome not applicable to current role).  Target: 75% of respondents will report that they demonstrate understanding of healthcare policy, finance, and regulatory environments some or most of the time in current professional nursing practice.  Timeframe: Annually Responsible Parties: CIRE, Evaluation & Study Committee		
AD: Survey - Employer Survey Item: How often BSN graduate demonstrates understanding of healthcare policy, finance, and regulatory environments (1= not at all, 2 = rarely, 3 = some of the time, 4 = most of the time, NA = not applicable, e.g., not working in a BSN nursing role, or outcome not applicable to current role). Target: 75% of respondents will report that BSN graduate demonstrates understanding of healthcare policy, finance, and regulatory environments some or most of the time in current professional nursing practice. Timeframe: Annually Responsible Parties: CIRE, Evaluation & Study Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  Survey of employers of 2017-2018 BSN grads: 100% of employers who responded to the survey (n = 6) reported the BSN program graduate performs this outcome some (16.67%) or most (83.33%) of the time in current professional practice. This result exceeds those of previous alumni surveys.  Survey of employers of 2016-2017 BSN grads: 84% of employers who responded to the survey (n = 12) reported the BSN program graduate performs this outcome some (41.67%) or most (41.67%) of the time in current professional practice.  The target for this measure has been consistently met or exceeded. (03/09/2020)	Action: Survey employers of 2018-2019 graduates during 2020. Compare responses and monitor for favorable and unfavorable trends. (03/09/2020)

**AU Outcome: BSN 5.0 Teamwork & Collaboration** 

#### **AU Outcome: BSN 5.0 Teamwork & Collaboration**

Facilitate inter-professional communication and collaboration in healthcare teams.

Outcome Status: Active Start Date: 08/01/2014

Measures	Results	Actions
AD: Report - Internal - BSN Simulation Summary Report Target: 100% of students completing simulation will achieve at least 73% on the simulation rubric. Timeframe: Annual Responsible Parties: BSN curriculum Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  This is a new measure for 2018-2019. 100% of students completing simulation were able to achieve at least 73% on the simulation rubric. (11/26/2019)  Related Documents:  Outcome 5 Simulation Summary 2018-2019.docx	Action: In order to continue to meet this target in the future, simulation faculty will require students to complete preparatory work before coming to the simulation. Faculty will assure that students are aware of how they will be evaluated using the simulation rubric. (11/26/2019)
AD: Survey - Alumni Survey Item: How well BSN education prepared you to facilitate inter-professional communication and collaboration in healthcare teams (1= very poorly, 2 = poorly, 3 = well, 4 = very well). Target: 75% of respondents will report that their BSN education prepared them well or very well to facilitate inter-professional communication and collaboration in healthcare teams. Timeframe: Annually Responsible Parties: CIRE, Evaluation & Study Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  >75% of 2017-2018 alumni survey respondents (n = 38) reported their BSN education prepared them well (52.63%) or very well (42.11%) to perform this outcome.  >90% of 2016-2017 alumni survey respondents (n = 56) reported their BSN education prepared them well (57.14%) or very well (41.07%) to perform this outcome.  Results are consistent with previous alumni surveys. The target of 75% favorable responses (well or very well) has been consistently met or exceeded. (03/09/2020)	Action: Survey 2018-2019 alumni during 2020. Compare responses and monitor for favorable and unfavorable trends. (03/09/2020)
AD: Survey - Employer Survey Item: How well BSN graduate facilitates inter-professional communication and collaboration in healthcare teams (1= very poorly, 2 = poorly, 3 = well, 4 = very well, NA = not	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  Survey of 2017-2018 BSN graduates: 100% of employers who responded to the survey (n = 6) reported the BSN program graduate performs this outcome very well. This result exceeds those of previous alumni surveys.  Survey of employers of 2016-2017 BSN graduates: 89% of employers who responded to the	Action: Survey employers of 2018-2019 graduates during 2020. Compare responses and monitor for favorable and unfavorable trends. (03/09/2020)

### **AU Outcome: BSN 5.0 Teamwork & Collaboration**

Measures	Results	Actions
applicable, e.g., does not perform outcome, or outcome not applicable to current role).  Target: 75% of respondents will report that BSN graduate facilitates inter-professional communication and collaboration in healthcare teams well or very well.  Timeframe: Annually Responsible Parties: CIRE, Evaluation & Study Committee	survey (n = 9) reported the BSN program graduate performs this outcome well (44.44%) or very well (44.44%). (poorly = 1, 11.11%).  The target for this measure as been consistently achieved or exceeded. (03/09/2020)	
SL: Didactic - NU 335 Interprofessional Exploration Assignment Target: 100% of students will achieve at least 75% on the Interprofessional Exploration Assignment. Timeframe: Year 1 Responsible Parties: BSN Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  All students in the traditional cohort for Fall 2018 and Spring 2019 met the target of achieving 75% on the IPE assignment. The clinical faculty reviewed the assignment and encouraged the students to answer the questions that best fit with their shadowing experience and, also, shared this experience during clinical post-conference. (11/26/2019)  Related Documents:  Outcome 5 NU 335 Interprofessional Experience Reflective  Assignment.docx	Action: Due to revisions in the BSN CAP, this will no longer be used as a measure. (11/26/2019)
SL: Didactic - NU480/NU486 Interprofessional Assignment Target: 100% of students will achieve at least 75% on Interprofessional Assignment. Timeframe: Year 3 Responsible Parties: BSN Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1) Target Met: NA New measure for year 3. (03/11/2020)	
AD: Survey - Alumni Survey Item: How often in current professional nursing practice you facilitate inter- professional communication and collaboration in healthcare teams	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  100% of 2017-2018 alumni survey respondents who answered this item (n = 37) reported perform this outcome some (5.41%) or most (95.59%) of the time in their current professional practice.	Action: Survey 2018-2019 alumni during 2020. Compare responses and monitor for favorable and unfavorable trends. (03/09/2020)

### **AU Outcome: BSN 5.0 Teamwork & Collaboration**

Measures	Results	Actions
(1= not at all, 2 = rarely, 3 = some of the time, 4 = most of the time, NA = not applicable, e.g., not working in a BSN nursing role, or outcome not applicable to current role).  Target: 75% of respondents will report that facilitate interprofessional communication and collaboration in healthcare teams some or most of the time in current professional nursing practice.  Timeframe: Annually Responsible Parties: CIRE, Evaluation & Study Committee	100% of 2016-2017 alumni survey respondents who answered this item (n = 51) reported they perform this outcome some (3.92%) or most (96.08%) of the time in their current professional practice.  Results are consistent with previous alumni surveys. (03/09/2020)	
AD: Survey - Employer Survey Item: How often BSN graduate facilitates inter-professional communication and collaboration in healthcare teams (1= not at all, 2 = rarely, 3 = some of the time, 4 = most of the time, NA = not applicable, e.g., not working in a BSN nursing role, or outcome not applicable to current role).  Target: 75% of respondents will report that BSN graduate facilitates inter-professional communication and collaboration in healthcare teams some or most of the time in current professional nursing practice	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  Survey of employers of 2017-2018 BSN grads: 100% of employers who responded to the survey (n = 6) reported the BSN program graduate performs this outcome most of the time in current professional practice. This result exceeds those of previous alumni surveys.  Survey of employers of 2016-2017 BSN grads: 84% of employers who responded to the survey (n = 12) reported the BSN program graduate performs this outcome some (41.67%) or most (41.67%) of the time in current professional practice.  The target for this measure has been consistently met or exceeded. (03/09/2020)	Action: Survey employers of 2018-2019 graduates during 2020. Compare responses and monitor for favorable and unfavorable trends. (03/09/2020)
Timeframe: Annually Responsible Parties: CIRE, Evaluation & Study Committee		

**AU Outcome: BSN 5.0 Teamwork & Collaboration** 

**AU Outcome: BSN 8.0 QI** 

Use data to monitor outcomes and improve care.

Outcome Status: Active Start Date: 08/01/2014

Measures	Results	Actions
SL: Didactic - NU320 Nursing Safety Assignment Target: 100% of students will achieve at least 73% on Nursing Safety Assignment Timeframe: Annually (starting 2019- 2020; assessed Year 1 prior to 2019- 2020) Responsible Parties: BSN Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: No  Safety check assignments: FA18 H – 80% met target, FA18 Accel – 72% met target, FA18 UD – 60% met target, SP19 Accel – 81.5% met target, SP19 UD – 53.5% met target. This target was not achieved in any of the cohorts. Students tend to do well on the nursing safety assignment, as it is a group assignment. Students indicated on course evaluation that they like the group aspect of this assignment. The action plan to improve student achievement on the nursing safety assignment includes keeping this as a group assignment and keeping the due date toward the end of the semester so students have as much content knowledge needed to be successful on this assignment.  (11/26/2019)  Related Documents:  Outcome 8 NU 320 Safety Check 1.docx  Outcome 8 NU 320 Safety Check 2.docx  Outcome 8 NU 320 Safety Check 3.docx  Outcome 8 NU 320 Safety Check 4.docx	Action: Require 2 instead of 4 safety checks to allow more time to cover CNS and CV content. Course faculty will also include 5 review questions at the end of each class period related to patient safety/medication administration. Course faculty will also include quiz/exam questions taken directly from the required readings to encourage student to be more accountable to the required readings for each medication topic area. (11/26/2019)
SL: Didactic - NU 380 Final Project Target: 100% of students will achieve at least 75% on the final project. Timeframe: Year 3 Responsible Parties: BSN Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1) Target Met: NA New measure for year 3. (03/11/2020)	
AD: Survey - Employer Survey Item: How well BSN graduate uses data to monitor outcomes and improve care. Target: 75% of respondents will	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  Survey of employers of 2017-2018 BSN graduates: 100% of employers who responded to the survey (n = 6) reported the BSN program graduate performs this outcome very well.  Survey of employers of 2016-2017 BSN graduates: 67% of employers who responded to the	Action: Survey employers of 2018-2019 graduates during 2020. Compare responses and monitor for favorable and unfavorable trends. (03/09/2020)

### **AU Outcome: BSN 8.0 QI**

Measures	Results	Actions
report that the BSN graduate uses data to monitor outcomes and improve care (1= very poorly, 2 = poorly, 3 = well, 4 = very well, NA = not applicable, e.g., does not perform outcome, or outcome not applicable to current role).  Timeframe: Annually Responsible Parties: CIRE, Evaluation & Study Committee	survey (n = 9) reported the 2016-2017 BSN program graduate performs this outcome well (22.22%) or very well (44.44%). (poorly = 1, 11.11%; NA = 1, 11.11%; if the NA response were excluded, the percentage of grads who performed this measure well or very well would be $6/8=75\%$ ) With the exception of the survey of employers of 2016-2017 grads, the target for this measure as been consistently achieved or exceeded. (03/09/2020)	
SL: Survey - Alumni Survey Item: How often in current professional nursing practice you use data to monitor outcomes and improve care (1= not at all, 2 = rarely, 3 = some of the time, 4 = most of the time, NA = not applicable, e.g., not working in a BSN nursing role, or outcome not applicable to current role). Target: 75% of respondents will report that they use data to monitor outcomes and improve care some or most of the time in current professional nursing practice. Timeframe: Annually Responsible Parties: CIRE, Evaluation & Study Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  100% of 2017-2018 alumni survey respondents who answered this item (n = 37) reported perform this outcome some (10.81%) or most (89.19%) of the time in their current professional practice.  90% of 2016-2017 alumni survey respondents who answered this item (n = 51) reported they perform this outcome some (19.61%) or most (70.59%) of the time in their current professional practice.  Results are consistent with previous alumni surveys. (03/09/2020)	Action: Survey 2018-2019 alumni during 2020. Compare responses and monitor for favorable and unfavorable trends. (03/09/2020)
SL: Survey - Employer Survey Item: How often BSN graduate uses data to monitor outcomes and improve care (1= not at all, 2 = rarely, 3 = some of the time, 4 = most of the time, NA = not applicable, e.g., not working in a BSN nursing role, or	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  Survey of employers of 2017-2018 BSN grads: 100% of employers who responded to the survey (n = 6) reported the BSN program graduate performs this outcome some (46.67%) or most (83.33%) of the time in current professional practice. This result exceeds those of previous alumni surveys.  Survey of employers of 2016-2017 BSN grads: 66% of employers who responded to the	Action: Survey employers of 2018-2019 graduates during 2020. Compare responses and monitor for favorable and unfavorable trends. (03/09/2020)

### **AU Outcome: BSN 8.0 QI**

Measures	Results	Actions
outcome not applicable to current role).  Target: 75% of respondents will report that BSN graduate uses data to monitor outcomes and improve care some or most of the time in current professional nursing practice.  Timeframe: Annually Responsible Parties: CIRE, Evaluation & Study Committee	survey (n = 12) reported the BSN program graduate performs this outcome some (8.33%) or most (58.33%) of the time in current professional practice. $4/12$ respondents to this survey item indicated the BSN grad rarely performed this outcome. The target for this measure was not met for the survey of employers of 2016-2017 grads, but has been met in previous and subsequent surveys. $(03/09/2020)$	

#### **AU Outcome: BSN 9.0 Safe Care**

Deliver safe care through system effectiveness and individual performance.

Outcome Status: Active Start Date: 08/01/2014

Measures	Results	Actions
AD: Survey - Alumni Survey Item: How well BSN education prepared you to deliver safe care through system effectiveness and individual performance (1= very poorly, 2 = poorly, 3 = well, 4 = very well). Target: 75% of respondents will report that their BSN education prepared them well or very well to deliver safe care through system effectiveness and individual performance. Timeframe: Annually Responsible Parties: CIRE, Evaluation & Study Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  100% of 2017-2018 alumni survey respondents (n = 38) reported their BSN education prepared them well (36.84%) or very well (63.16%) to perform this outcome.  100% of 2016-2017 alumni survey respondents (n = 56) reported their BSN education prepared them well (43.64%) or very well (56.36%) to perform this outcome.  Results are consistent with previous alumni surveys. the target of 75% favorable responses (well or very well) has been consistently met or exceeded. (03/09/2020)	Action: Survey 2018-2019 alumni during 2020. Compare responses and monitor for favorable and unfavorable trends. (03/09/2020)
AD: Survey - Employer Survey Item:	<b>Reporting Year:</b> 2018 - 2019 (Year 1)	

### **AU Outcome: BSN 9.0 Safe Care**

Measures	Results	Actions
How well BSN graduate delivers safe care through system effectiveness and individual performance (1= very poorly, 2 = poorly, 3 = well, 4 = very well, NA = not applicable, e.g., does not perform outcome, or outcome not applicable to current role).  Target: 75% of respondents will report that BSN graduate delivers safe care through system effectiveness and individual performance well or very well.  Timeframe: Annually  Responsible Parties: CIRE,  Evaluation & Study Committee	Target Met: Yes Survey of employers of 2017-2018 BSN graduates:100% of employers who responded to the survey (n = 6) reported the BSN program graduate performs this outcome very well. Survey of employers of 2016-2017 BSN graduates: 89% of employers who responded to the survey (n = 9) reported the 2016-2017 BSN program graduate performs this outcome well (44.44%) or very well (44.44%). The target for this measure as been consistently achieved or exceeded. (03/09/2020)	Action: Survey employers of 2018-2019 graduates during 2020. Compare responses and monitor for favorable and unfavorable trends. (03/09/2020)
SL: Clinical - NU 280 Integrated head to toe assessment Target: 100% of students will achieve at least 73% on integrated head to toe assessment. Timeframe: Year 1 Responsible Parties: BSN Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  Summer 2018 (A & H), Fall 2018 (A & U), and Spring 2019 100% of students achieved a 73% or greater on the Integrated head to toe assessment. Faculty included a lecture and lab on the Integrated head to toe assessment. An additional "open lab" was provided for students to practice the Integrated assessment. Faculty demonstrated a head to toe assessment in lab prior to students practicing. (11/26/2019)  Related Documents:  Outcome 9 NU 280 Integrated Checklist.docx	Action: Due to the revisions in the BSN CAP, this measure will no longer be used. (11/26/2019)
AD: Survey - Alumni Survey Item: How often in current professional nursing practice you deliver safe care through system effectiveness and individual performance (1= not at all, 2 = rarely, 3 = some of the time, 4 = most of the time, NA = not applicable, e.g., not working in a BSN nursing role, or outcome not	perform this outcome some (2.70%) or most (94.59%) of the time in their current professional practice.	Action: Survey 2018-2019 alumni during 2020. Compare responses and monitor for favorable and unfavorable trends. (03/09/2020)

#### **AU Outcome: BSN 9.0 Safe Care**

Measures	Results	Actions
applicable to current role).  Target: 75% of respondents will report that they deliver safe care through system effectiveness and individual performance some or most of the time in current professional nursing practice .  Timeframe: Annually Responsible Parties: CIRE, Evaluation & Study Committee		
AD: Survey - Employer Survey Item: How often BSN graduate delivers safe care through system effectiveness and individual performance (1= not at all, 2 = rarely, 3 = some of the time, 4 = most of the time, NA = not applicable, e.g., not working in a BSN nursing role, or outcome not applicable to current role). Target: 75% of respondents will report that BSN graduate delivers safe care through system effectiveness and individual performance some or most of the time in current professional nursing practice . Timeframe: Annually Responsible Parties: CIRE, Evaluation & Study Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  100% of employers who responded to the survey (n = 6) reported the BSN program graduate performs this outcome most of the time in current professional practice. This result exceeds those of previous alumni surveys.  Survey of employers of 2016-2017 BSN grads: 100% of employers who responded to the survey (n = 12) reported the BSN program graduate performs this outcome some (25%) or most (75%) of the time in current professional practice.  The target for this measure has been consistently met or exceeded in previous surveys. (03/09/2020)	Action: Survey employers of 2018-2019 graduates during 2020. Compare responses and monitor for favorable and unfavorable trends. (03/09/2020)

### **AU Outcome: BSN 10.0 Synthesis of Knowledge**

Synthesize knowledge from liberal and baccalaureate nursing education to guide generalist practice.

Outcome Status: Active

AU Outcome: BSN 10.0 Synthesis of Knowledge

Start Date: 08/01/2014

Measures	Results	Actions
AD: Report - Internal - ATI Summary Report Target: 100% of Allen College BSN cohorts will exceed the norming data set by ATI on the ATI Content Mastery proctored assessments. Timeframe: Annual Responsible Parties: BSN Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  This is a new measure. 100% of Allen College BSN cohorts exceeded the norming data set by ATI on the ATI Content mastery proctored assessments for the Summer 2018, Fall 2018, and Spring 2019 semesters. (11/26/2019)  Related Documents:  Outcome 10 ATI Complete Insights Review March 2019.pdf  Outcome 10 ATI Summary Report 2018-2019.docx	Action: In order to meet this target in the future, course faculty will continue to follow the current ATI policy which requires students to take one of the practice assessments prior to the proctored assessment and to review all of the questions that were answered incorrectly. (11/26/2019)
AD: Survey - Alumni Survey Item: How well BSN education prepared you to synthesize knowledge from liberal and baccalaureate nursing education to guide generalist practice (1= very poorly, 2 = poorly, 3 = well, 4 = very well).  Target: 75% of respondents will report that their BSN education prepared them well or very well to synthesize knowledge from liberal and baccalaureate nursing education to guide generalist practice. Timeframe: Annually Responsible Parties: CIRE, Evaluation & Study Committee	<b>Reporting Year:</b> 2018 - 2019 (Year 1) <b>Target Met:</b> Yes  100% of 2017-2018 alumni survey respondents (n = 38) reported their BSN education prepared them well (42.11%) or very well (57.89%) to perform this outcome.  92% of 2016-2017 alumni survey respondents (n = 56) reported their BSN education prepared them well (55.36%) or very well (42.86%) to perform this outcome.  Results are consistent with previous alumni surveys. the target of 75% favorable responses (well or very well) has been consistently met or exceeded. (03/09/2020)	Action: Survey 2018-2019 alumni during 2020. Compare responses and monitor for favorable and unfavorable trends. (03/09/2020)
AD: Survey - Employer Survey Item: How well BSN graduate synthesizes knowledge from liberal and baccalaureate nursing education to guide generalist practice (1= very poorly, 2 = poorly, 3 = well, 4 = very	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes Survey of employers of 2017-2018 BSN graduates: 100% of employers who responded to the survey (n = 6) reported the BSN program graduate performs this outcome very well. This result exceeds those of previous alumni surveys. Survey of employers of 2016-2017 BSN graduates: 89% of employers who responded to the	Action: Survey employers of 2018-2019 graduates during 2020. Compare responses and monitor for favorable and unfavorable trends. (03/09/2020)

### AU Outcome: BSN 10.0 Synthesis of Knowledge

Measures	Results	Actions
well, NA = not applicable, e.g., does not perform outcome, or outcome not applicable to current role).  Target: 75% of respondents will	survey (n = 9) reported the 2016-2017 BSN program graduate performs this outcome well (44.44%) or very well (44.44%).  The target for this measure as been consistently achieved or exceeded. $(03/09/2020)$	
report that BSN graduate synthesizes knowledge from liberal and baccalaureate nursing education to guide generalist practice well or very		
well.  Timeframe: Annually  Responsible Parties: CIRE,  Evaluation & Study Committee		
AD: Survey - Alumni Survey Item: How often in professional nursing practice you synthesize knowledge from liberal and baccalaureate nursing education to guide generalist practice (1= not at all, 2 = rarely, 3 = some of the time, 4 = most of the time, NA = not applicable, e.g., not working in a BSN nursing role, or outcome not applicable to current role).  Target: 75% of respondents will report that they synthesize knowledge from liberal and baccalaureate nursing education to guide generalist practice some or most of the time in current	<b>Reporting Year:</b> 2018 - 2019 (Year 1) <b>Target Met:</b> Yes  >95% of 2017-2018 alumni survey respondents who answered this item (n = 37) reported perform this outcome some (5.41%) or most (91.89%) of the time in their current professional practice.  98% of 2016-2017 alumni survey respondents who answered this item (n = 51) reported they perform this outcome some (14%) or most (84%) of the time in their current professional practice.  Results are consistent with previous alumni surveys. (03/09/2020)	Action: Survey 2018-2019 alumni during 2020. Compare responses and monitor for favorable and unfavorable trends. (03/09/2020)
professional nursing practice.  Timeframe: Annually Responsible Parties: CIRE, Evaluation & Study Committee		

### AU Outcome: BSN 10.0 Synthesis of Knowledge

Measures	Results	Actions
AD: Survey - Employer Survey Item: How often BSN graduate synthesizes knowledge from liberal and baccalaureate nursing education to guide generalist practice (1= not at all, 2 = rarely, 3 = some of the time, 4 = most of the time, NA = not applicable, e.g., not working in a BSN nursing role, or outcome not applicable to current role). Target: 75% of respondents will report that BSN graduate synthesizes knowledge from liberal and baccalaureate nursing education to guide generalist practice some or most of the time in current professional nursing practice. Timeframe: Annually Responsible Parties: CIRE, Evaluation & Study Committee	Survey of employers of 2017-2018 BSN grads: 100% of employers who responded to the survey (n = 6) reported the BSN program graduate performs this outcome most of the time in current professional practice. This result exceeds those of previous alumni surveys. Survey of employers of 2016-2017 BSN grads: 75% of employers who responded to the survey (n = 12) reported the BSN program graduate performs this outcome some (8.33%) or most (66.67%) of the time in current professional practice. The target for this measure has been consistently met or exceeded in previous surveys. $(03/09/2020)$	Action: Survey employers of 2018-2019 graduates during 2020. Compare responses and monitor for favorable and unfavorable trends. (03/09/2020)

# **Program (Nursing) - Doctor of Nursing Practice (DNP)**

#### **AU Outcome: DNP 1.0**

Practice at the highest level of nursing through integration and application of nursing science in clinical practice, management, and education

Outcome Status: Active

Measures	Results	Actions
<b>SL: Summative Evaluation</b> - Practice at the highest level of nursing through integration and application of nursing science in clinical practice,	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  100% (5 of 5) students achieved an acceptable level or above on all criteria included in the DNP Summative Evaluation. This is consistent with 2017-2018 results when 3 of 3 students	Action: Will continue to monitor this target since the number of DNP graduates remains low and it is essential to assure graduates have
	(100%) achieved acceptable or above ratings on all criteria on the DNP Summative	essential to assure graduates have

### **AU Outcome: DNP 1.0**

Measures	Results	Actions
Target: 100% of students achieve an acceptable level (1) on a scale of 0-2 Timeframe: Annually upon program completion Responsible Parties: Assistant Dean, Graduate Nursing /Graduate Curriculum Committee	Evaluation. Considering that the summative evaluation is completed upon program completion, it is to be expected that all students would demonstrate achievement of program outcomes as reflected in summative evaluation tool. (07/22/2019)	documented achievement of program outcomes. (07/22/2019)
SL: Didactic - NU805 Educational Concepts for Advanced Nursing Practice Patient Educational Materials Critique Part II assignment Target: 100% of students will achieve 73% or higher on the Patient Educational Materials Critique Part II assignment Timeframe: Annually Responsible Parties: Graduate Curriculum Committee, Course Faculty	Reporting Year: 2018 - 2019 (Year 1) Target Met: NA New measure for 2019-2020. (03/10/2020)	
AD: Survey - DNP Alumni Survey: Graduate perceptions of how well their DNP education prepared them to practice at the highest level of nursing through integration and application of nursing science in clinical practice, management, and education (very poorly, poorly, well, very well). Target: 75% of respondents will report that their DNP education prepared them to practice at the highest level of nursing through	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes Survey of 2017-2018 DNP Alumni: One of two graduates responded to the survey. The graduate reported that they perform this outcome very well. Survey of 2015-2016 and 2016-2017 DNP Alumni: Three graduates responded to the survey. The graduates reported that they perform this outcome very well (100%). Results are consistent with previous DNP alumni surveys. (03/10/2020)	Action: Survey 2018-2019 DNP graduates during 2020. Monitor trends in response to this measure. (03/10/2020)

### **AU Outcome: DNP 1.0**

Measures	Results	Actions
integration and application of nursing science in clinical practice, management, and education well or very well.  Timeframe: Annually Responsible Parties: Evaluation & Study Committee/CIRE		
AD: Survey - DNP Alumni Employer Survey: Employer perceptions of how well graduates practice at the highest level of nursing through integration and application of nursing science in clinical practice, management, and education (very poorly, poorly, well, very well). Target: 75% of respondents will report that DNP graduate practices at the highest level of nursing through integration and application of nursing science in clinical practice, management, and education well or very well. Timeframe: Annually Responsible Parties: Evaluation & Study Committee/CIRE	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  There were no employer responses to the survey of employers of 2017-2018 DNP graduates (2 graduates were surveyed and asked to provide employer survey link to their supervisor). Survey of employers of August 2016, May 2017, and August 2017 graduates had 9 responses: 100% reported that the DNP graduate performs the program outcome very well. Findings are consistent with previous employer surveys. (03/10/2020)	Action: Survey 2018-2019 employers of DNP graduates during 2020. Monitor trends in response to this measure. (03/10/2020)
AD: Survey - DNP Alumni Survey: Graduate perceptions of how often they practice at the highest level of nursing through integration and application of nursing science in clinical practice, management, and education (not at all, rarely, some of the time, most of the time). Target: 75% of respondents will	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  Survey of 2017-2018 DNP Alumni: One of two graduates responded to the survey reporting that they perform this outcome most of the time.  Survey of 2015-2016 and 2016-2017 DNP graduates: Three graduates responded to the survey. They reported that they perform this outcome most of the time (100%).  Results are consistent with previous DNP alumni surveys. (03/10/2020)	Action: Survey 2018-2019 DNP graduates during 2020. Monitor trends in response to this measure. (03/10/2020)

### **AU Outcome: DNP 1.0**

Measures	Results	Actions
report that they practice at the highest level of nursing through integration and application of nursing science in clinical practice, management, and education some or most of the time.  Timeframe: Annually Responsible Parties: Evaluation & Study Committee/CIRE		
AD: Survey - DNP Alumni Employer Survey: Employer perceptions of how often graduates practice at the highest level of nursing through integration and application of nursing science in clinical practice, management, and education (not at all, rarely, some of the time, most of the time). Target: 75% of respondents will report that graduates practice at the highest level of nursing through integration and application of nursing science in clinical practice, management, and education some or most of the time. Timeframe: Annually Responsible Parties: Evaluation & Study Committee/CIRE	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  There were no responses to the survey of employers of 2017-2018 DNP graduates.  Survey of employers of August 2016, May 2017, and August 2017 graduates had 9 responses: 100% reported that the DNP graduate performs the program outcomes some (0%) or most of the time (100%).  Findings are consistent with previous employer surveys. (03/10/2020)	Action: Survey 2018-2019 employers of DNP graduates during 2020. Monitor trends in response to this measure. (03/10/2020)
SL: Didactic - NU710 Advanced Theory Final Theory Application assignment Target: 100% of students will achieve 73% or higher on Final Theory Application assignment	Reporting Year: 2018 - 2019 (Year 1)  Target Met: NA  Course is on a 2-year cycle and was not offered during the 2018-2019 academic year. (07/22/2019)	Action: This course has been eliminated from the DNP Curriculum. No further data will be reported for this measure. (07/22/2019)

College Goal 1 - Prepare outstanding healthcare practitioners who are committed to lifelong learning.

### **Program (Nursing) - Doctor of Nursing Practice (DNP)**

#### **AU Outcome: DNP 1.0**

Measures	Results	Actions
<b>Timeframe:</b> Each time course is		
offered Responsible Parties: Graduate		
Curriculum Committee		

**AU Outcome: DNP 2.0** 

Demonstrate organizational and systems leadership to advance quality improvement and systems change

Outcome Status: Active

Measures	Results	Actions
SL: Summative Evaluation - Demonstrate organizational and systems leadership to advance quality improvement and systems change Target: 100% of students achieve an acceptable level (1) on a scale of 0-2 Timeframe: Annually upon program completion Responsible Parties: Assistant Dean, Graduate Nursing /Graduate Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes 100% (5 of 5) students achieved an acceptable level or above on this criterion of the DNP Summative Evaluation. This is consistent with 2017-2018 results when 3 of 3 students (100%) achieved acceptable or above ratings on this criterion of the DNP Summative Evaluation. Considering that the summative evaluation is completed upon program completion, it is to be expected that all students would demonstrate achievement of program outcomes as reflected in summative evaluation tool. (07/22/2019)	Action: Will continue to monitor this target since the number of DNP graduates remains low and it is essential to assure graduates have documented achievement of program outcomes. (07/22/2019)
SL: Didactic - NU720 Quality Outcomes for Organizations and Systems CQI Analysis Paper Target: 100% of students will achieve 73% or higher on CQI Analysis Paper Timeframe: Each time course is offered Responsible Parties: Graduate Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1) Target Met: NA Course is on a 2-year cycle and was not offered during the 2018-2019 academic year. (07/22/2019)	Action: Evaluate results at next course offering. (07/22/2019)
AD: Survey - DNP Alumni Survey:	Reporting Year: 2018 - 2019 (Year 1)	Action: Survey 2018-2019 DNP

### **AU Outcome: DNP 2.0**

Measures	Results	Actions
Graduate perceptions of how well their DNP education prepared them to demonstrate organizational and systems leadership to advance quality improvement and systems change (very poorly, poorly, well, very well).  Target: 75% of respondents will report that their DNP education prepared them well or very well to demonstrate organizational and systems leadership to advance quality improvement and systems change  Timeframe: Annually  Responsible Parties: Evaluation & Study Committee/CIRE	Target Met: Yes Survey of 2017-2018 DNP Alumni: One of two graduates responded to the survey. The graduate reported that they perform this outcome very well. Survey of 2015-2016 and 2016-2017 DNP Alumni: Three graduates responded to the survey. The graduates reported that they perform this outcome well (33.33%) or very well (66.67%). Results are consistent with previous DNP alumni surveys. (03/10/2020)	graduates during 2020. Monitor trends in response to this measure. (03/10/2020)
AD: Survey - DNP Alumni Employer Survey: Employer perceptions of how well DNP graduates demonstrate organizational and systems leadership to advance quality improvement and systems change (very poorly, poorly, well, very well).  Target: 75% of respondents will report that DNP graduates demonstrate organizational and systems leadership to advance quality improvement and systems change well or very well.  Timeframe: Annually Responsible Parties: Evaluation & Study Committee/CIRE	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  There were no responses to the survey of employers of 2017-2018 DNP graduates.  Survey of employers of August 2016, May 2017, and August 2017 graduates had 9 responses: 100% reported that the DNP graduate performs the program outcome very well.  Findings are consistent with previous employer surveys. (03/10/2020)	Action: Survey 2018-2019 employers of DNP graduates during 2020. Monitor trends in response to this measure. (03/10/2020)

### **AU Outcome: DNP 2.0**

Measures	Results	Actions
AD: Survey - DNP Alumni Survey: Graduate perceptions of how often they demonstrate organizational and systems leadership to advance quality improvement and systems change (not at all, rarely, some of the time, most of the time). Target: 75% of respondents will report that they demonstrate organizational and systems leadership to advance quality improvement and systems change some or most of the time. Timeframe: Annually Responsible Parties: Evaluation & Study Committee/CIRE	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  Survey of 2017-2018 DNP Alumni: One of two graduates responded to the survey reporting that they perform this outcome most of the time.  Survey of 2015-2016 and 2016-2017 DNP graduates: Three graduates responded to the survey. They reported that they perform this outcome most of the time (100%).  Results are consistent with previous DNP alumni surveys. (03/10/2020)	Action: Survey 2018-2019 DNP graduates during 2020. Monitor trends in response to this measure. (03/10/2020)
AD: Survey - DNP Alumni Employer Survey: Employer perceptions of how often DNP graduates demonstrate organizational and systems leadership to advance quality improvement and systems change (not at all, rarely, some of the time, most of the time). Target: 75% of respondents will report that graduates demonstrate organizational and systems leadership to advance quality improvement and systems change some or most of the time. Timeframe: Annually Responsible Parties: Evaluation & Study Committee/CIRE	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  There were no responses to the survey of employers of 2017-2018 DNP graduates.  Survey of employers of August 2016, May 2017, and August 2017 graduates had 9 responses: 100% reported that the DNP graduate performs the program outcomes some (11.11%) or most of the time (88.89%).  Findings are consistent with previous employer surveys. (03/10/2020)	Action: Survey 2018-2019 employers of DNP graduates during 2020. Monitor trends in response to this measure. (03/10/2020)

**AU Outcome: DNP 3.0** 

Apply analytical methods and research to develop best practices and practice guidelines

Outcome Status: Active

Measures	Results	Actions
SL: Summative Evaluation - Apply analytical methods and research to develop best practices and practice guidelines Target: 100% of students achieve an acceptable level (1) on a scale of 0-2 Timeframe: Annually upon program completion	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  100% (5 of 5) students achieved an acceptable level or above on this criterion of the DNP  Summative Evaluation. This is consistent with 2017-2018 results when 3 of 3 students (100%) achieved acceptable or above ratings on this criterion of the DNP Summative Evaluation.  Considering that the summative evaluation is completed upon program completion, it is to be expected that all students would demonstrate achievement of program outcomes as reflected in summative evaluation tool. (07/22/2019)	Action: Will continue to monitor this target since the number of DNP graduates remains low and it is essential to assure graduates have documented achievement of program outcomes. (07/22/2019)
Responsible Parties: Assistant Dean, Graduate Nursing / Graduate Curriculum Committee		
SL: Didactic - NU741 Analytic Methods for Evidence-Based Practice I Literature Synthesis Table Target: 100% of students will achieve 83% or higher on the Literature Synthesis Table Assignment. Timeframe: Each time course is offered Responsible Parties: Graduate Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1) Target Met: NA New measure for 2019-2020. (03/10/2020)	
AD: Survey - DNP Alumni Survey: Graduate perceptions of how well their DNP education prepared them to apply analytical methods and research to develop best practices and practice guidelines (very poorly, poorly, well, very well). Target: 75% of respondents will report that their DNP education	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  Survey of 2017-2018 DNP Alumni: One of two graduates responded to the survey. The graduate reported that they perform this outcome very well.  Survey of 2015-2016 and 2016-2017 DNP Alumni: Three graduates responded to the survey. The graduates reported that they perform this outcome well (66.67%) or very well (33.33%). Results are consistent with previous DNP alumni surveys. (03/10/2020)	Action: Survey 2018-2019 DNP graduates during 2020. Monitor trends in response to this measure. (03/10/2020)

### **AU Outcome: DNP 3.0**

Measures	Results	Actions
prepared them to apply analytical methods and research to develop best practices and practice guidelines well or very well.  Timeframe: Annually Responsible Parties: Evaluation & Study Committee/CIRE		
AD: Survey - DNP Alumni Employer Survey: Employer perceptions of how well DNP graduates apply analytical methods and research to develop best practices and practice guidelines (very poorly, poorly, well, very well). Target: 75% of respondents will report that DNP graduates apply analytical methods and research to develop best practices and practice guidelines well or very well. Timeframe: Annually Responsible Parties: Evaluation & Study Committee/CIRE	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes There were no responses to the survey of employers of 2017-2018 DNP graduates. Survey of employers of August 2016, May 2017, and August 2017 graduates had 9 responses: 100% reported that the DNP graduate performs the program outcome well (22.22%) or very well (77.78%). Findings are consistent with previous employer surveys. (03/10/2020)	Action: Survey 2018-2019 employers of DNP graduates during 2020. Monitor trends in response to this measure. (03/10/2020)
AD: Survey - DNP Alumni Survey: Graduates perceptions of how often they apply analytical methods and research to develop best practices and practice guidelines (not at all, rarely, some of the time, most of the time). Target: 75% of respondents will report that they apply analytical methods and research to develop best practices and practice guidelines some or most of the time.	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes Survey of 2017-2018 DNP Alumni: One of two graduates responded to the survey reporting that they perform this outcome most of the time. Survey of 2015-2016 and 2016-2017 DNP graduates: Three graduates responded to the survey. They reported that they perform this outcome some (33.33%) or most of the time (66.67%). Results are consistent with previous DNP alumni surveys. (03/10/2020)	Action: Survey 2018-2019 DNP graduates during 2020. Monitor trends in response to this measure. (03/10/2020)

#### **AU Outcome: DNP 3.0**

Measures	Results	Actions
Timeframe: Annually Responsible Parties: Evaluation & Study Committee/CIRE		
AD: Survey - DNP Alumni Employer Survey: Employer perceptions of how often DNP graduates apply analytical methods and research to develop best practices and practice guidelines (not at all, rarely, some of the time, most of the time). Target: 75% of respondents will report that graduates apply analytical methods and research to develop best practices and practice guidelines some or most of the time. Timeframe: Annually Responsible Parties: Evaluation & Study Committee/CIRE	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes There were no responses to the survey of employers of 2017-2018 DNP graduates. Survey of employers of August 2016, May 2017, and August 2017 graduates had 9 responses: 100% reported that the DNP graduate performs the program outcomes some (0%) or most of the time (100%). Findings are consistent with previous employer surveys. (03/10/2020)	Action: Survey 2018-2019 employers of DNP graduates during 2020. Monitor trends in response to this measure. (03/10/2020)
SL: Didactic - NU740 Analytical Methods for Evidence-Based Practice Critique of DNP Sample Project final exam Target: 100% of students will achieve 80% or higher on the Critique of DNP Sample Project final exam Timeframe: Each time course is offered Responsible Parties: Graduate Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1) Target Met: NA Course is on a 2-year cycle and was not offered during the 2018-2019 academic year. (07/22/2019)	Action: Evaluate results at next course offering. (07/22/2019)

**AU Outcome: DNP 4.0** 

Use information systems and technology-based resources to support clinical and administrative decision making and to improve the health care of individuals, families and populations

**AU Outcome: DNP 4.0** 

Outcome Status: Active

Measures	Results	Actions
SL: Summative Evaluation - Use information systems and technology-based resources to support clinical and administrative decision making and to improve the health care of individuals, families and populations Target: 100% of students achieve an acceptable level (1) on a scale of 0-2 Timeframe: Annually upon program completion Responsible Parties: Assistant Dean, Graduate Nursing /Graduate Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  100% (5 of 5) students achieved an acceptable level or above on this criterion of the DNP  Summative Evaluation. This is consistent with 2017-2018 results when 3 of 3 students (100%) achieved acceptable or above ratings on this criterion of the DNP Summative Evaluation.  Considering that the summative evaluation is completed upon program completion, it is to be expected that all students would demonstrate achievement of program outcomes as reflected in summative evaluation tool. (07/22/2019)	Action: Will continue to monitor this target since the number of DNP graduates remains low and it is essential to assure graduates have documented achievement of program outcomes. (07/22/2019)
SL: Didactic - NU541 Health Care Informatics Annotated Bibliography and Critical Response assignment Target: 100% of students will achieve 85% or higher on the Annotated Bibliography and Critical Response assignment. Timeframe: Each time course is offered Responsible Parties: Graduate Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1) Target Met: NA New measure for 2019-2020. (03/10/2020)	
AD: Survey - DNP Alumni Survey: Graduate perceptions of how well their DNP education prepared them to use information systems and technology-based resources to support clinical and administrative decision making and to improve the health care of individuals, families	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  Survey of 2017-2018 DNP Alumni: One of two graduates responded to the survey. The graduate reported that they perform this outcome very well.  Survey of 2015-2016 and 2016-2017 DNP Alumni: Three graduates responded to the survey. The graduates reported that they perform this outcome well (66.67%) or very well (33.33%). Results are consistent with previous DNP alumni surveys. (03/10/2020)	Action: Survey 2018-2019 DNP graduates during 2020. Monitor trends in response to this measure. (03/10/2020)

### **AU Outcome: DNP 4.0**

Measures	Results	Actions
and populations (very poorly, poorly, well, very well).  Target: 75% of respondents will report that their DNP education prepared them to use information systems and technology-based resources to support clinical and administrative decision making and to improve the health care of individuals, families and populations well or very well.  Timeframe: Annually Responsible Parties: Evaluation & Study Committee/CIRE		
AD: Survey - DNP Alumni Employer Survey: Employer perceptions of how well DNP graduates use information systems and technology-based resources to support clinical and administrative decision making and to improve the health care of individuals, families and populations (very poorly, poorly, well, very well).  Target: 75% of respondents will report that DNP graduates use information systems and technology-based resources to support clinical and administrative decision making and to improve the health care of individuals, families and populations well or very well.  Timeframe: Annually Responsible Parties: Evaluation &	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  There were no responses to the survey of employers of 2017-2018 DNP graduates.  Survey of employers of August 2016, May 2017, and August 2017 graduates had 9 responses: 100% reported that the DNP graduate performs the program outcome well (11.11%) or very well (88.89%).  Findings are consistent with previous employer surveys. (03/10/2020)	Action: Survey 2018-2019 employers of DNP graduates during 2020. Monitor trends in response to this measure. (03/10/2020)

### **AU Outcome: DNP 4.0**

Measures	Results	Actions
Study Committee/CIRE		
AD: Survey - DNP Alumni Survey: Graduates perceptions of how often they use information systems and technology-based resources to support clinical and administrative decision making and to improve the health care of individuals, families and populations (not at all, rarely, some of the time, most of the time). Target: 75% of respondents will report that they use information systems and technology-based resources to support clinical and administrative decision making and to improve the health care of individuals, families and populations some or most of the time. Timeframe: Annually Responsible Parties: Evaluation & Study Committee/CIRE	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  Survey of 2017-2018 DNP Alumni: One of two graduates responded to the survey reporting that they perform this outcome most of the time.  Survey of 2015-2016 and 2016-2017 DNP graduates: Three graduates responded to the survey. They reported that they perform this outcome some (33.33%) or most of the time (66.67%).  Results are consistent with previous DNP alumni surveys. (03/10/2020)	Action: Survey 2018-2019 DNP graduates during 2020. Monitor trends in response to this measure. (03/10/2020)
AD: Survey - DNP Alumni Employer Survey: Employer perceptions of how often DNP graduates apply analytical methods and research to develop best practices and practice guidelines (not at all, rarely, some of the time, most of the time). Target: 75% of respondents will report that graduates use information systems and technology-based resources to support clinical and administrative decision making and to improve the	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  There were no responses to the survey of employers of 2017-2018 DNP graduates.  Survey of employers of August 2016, May 2017, and August 2017 graduates had 9 responses: 100% reported that the DNP graduate performs the program outcomes some (11.11%) or most of the time (88.89%).  Findings are consistent with previous employer surveys. (03/10/2020)	Action: Survey 2018-2019 employers of DNP graduates during 2020. Monitor trends in response to this measure. (03/10/2020)

#### **AU Outcome: DNP 4.0**

Measures	Results	Actions
health care of individuals, families and populations some or most of the time.  Timeframe: Annually Responsible Parties: Evaluation & Study Committee/CIRE		
SL: Didactic - NU541 Health Care Informatics WWW Evaluation assignment Target: 100% of students will achieve 85% or higher on the WWW Evaluation assignment Timeframe: Each time course is offered Responsible Parties: Graduate Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes No results available for this measure. Measure not assessed. (09/05/2019)	Action: It was determined that this measure does not accurately operationalize the DNP outcome. A new measure has been written. (09/05/2019)

#### **AU Outcome: DNP 5.0**

Advocate for healthcare change through policy development and evaluation.

Outcome Status: Active

Measures	Results	Actions
SL: Summative Evaluation - Advocate for healthcare change through policy development and evaluation. Target: 100% of students achieve an acceptable level (1) on a scale of 0-2 Timeframe: Annually upon program completion	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  100% (5 of 5) students achieved an acceptable level or above on this criterion of the DNP  Summative Evaluation. This is consistent with 2017-2018 results when 5 of 5 students (100%) achieved acceptable or above ratings on this criterion of the DNP Summative Evaluation.  Considering that the summative evaluation is completed upon program completion, it is to be expected that all students would demonstrate achievement of program outcomes as reflected in summative evaluation tool. (07/22/2019)	Action: Will continue to monitor this target since the number of DNP graduates remains low and it is essential to assure graduates have documented achievement of program outcomes. (07/22/2019)
Responsible Parties: Assistant Dean, Graduate Nursing / Graduate Curriculum Committee		

### **AU Outcome: DNP 5.0**

Measures	Results	Actions
SL: Didactic - NU520 Policy, Organization, and Financing of Health Care Paper III: Health Care Policy Brief Target: 100% of students will achieve 83% or higher on Paper III: Health Care Policy Brief Timeframe: Annually Responsible Parties: Graduate Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1) Target Met: NA New measure for 2019-2020. (03/11/2020)	
AD: Survey - DNP Alumni Survey: Graduate perceptions of how well their DNP education prepared them to advocate for healthcare change through policy development and evaluation (very poorly, poorly, well, very well). Target: 75% of respondents will report that their DNP education prepared them to advocate for healthcare change through policy development and evaluation well or very well. Timeframe: Annually Responsible Parties: Evaluation & Study Committee/CIRE	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes Survey of 2017-2018 DNP Alumni: One of two graduates responded to the survey. The graduate reported that they perform this outcome very well. Survey of 2015-2016 and 2016-2017 DNP Alumni: Three graduates responded to the survey. The graduates reported that they perform this outcome well (66.67%) or very well (33.33%). Results are consistent with previous DNP alumni surveys. (03/10/2020)	Action: Survey 2018-2019 DNP graduates during 2020. Monitor trends in response to this measure. (03/10/2020)
AD: Survey - DNP Alumni Employer Survey: Employer perceptions of how well DNP graduates advocate for healthcare change through policy development and evaluation (very poorly, poorly, well, very well). Target: 75% of respondents will report that DNP graduates advocate	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  There were no responses to the survey of employers of 2017-2018 DNP graduates.  Survey of employers of August 2016, May 2017, and August 2017 graduates had 9 responses: 100% reported that the DNP graduate performs the program outcome well (33.33%) or very well (66.67%).  Findings are consistent with previous employer surveys. (03/10/2020)	Action: Survey 2018-2019 employers of DNP graduates during 2020. Monitor trends in response to this measure. (03/10/2020)

#### **AU Outcome: DNP 5.0**

Measures	Results	Actions
for healthcare change through policy development and evaluation well or very well.  Timeframe: Annually Responsible Parties: Evaluation & Study Committee/CIRE		
AD: Survey - DNP Alumni Survey: Graduates perceptions of how often they advocate for healthcare change through policy development and evaluation (not at all, rarely, some of the time, most of the time). Target: 75% of respondents will report that they advocate for healthcare change through policy development and evaluation some or most of the time. Timeframe: Annually Responsible Parties: Evaluation & Study Committee/CIRE	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes Survey of 2017-2018 DNP Alumni: One of two graduates responded to the survey reporting that they perform this outcome most of the time. Survey of 2015-2016 and 2016-2017 DNP graduates: Three graduates responded to the survey. They reported that they perform this outcome some (33.33%) or most of the time (66.67%). Results are consistent with previous DNP alumni surveys. (03/10/2020)	Action: Survey 2018-2019 DNP graduates during 2020. Monitor trends in response to this measure. (03/10/2020)
AD: Survey - DNP Alumni Employer Survey: Employer perceptions of how often DNP graduates advocate for healthcare change through policy development and evaluation (not at all, rarely, some of the time, most of the time).  Target: 75% of respondents will report that graduates advocate for healthcare change through policy development and evaluation some or most of the time.  Timeframe: Annually Responsible Parties: Evaluation &	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  There were no responses to the survey of employers of 2017-2018 DNP graduates.  Survey of employers of August 2016, May 2017, and August 2017 graduates had 9 responses: 100% reported that the DNP graduate performs the program outcomes some (33.33%) or most of the time (66.67%).  Findings are consistent with previous employer surveys. (03/10/2020)	Action: Survey 2018-2019 employers of DNP graduates during 2020. Monitor trends in response to this measure. (03/10/2020)

#### **AU Outcome: DNP 5.0**

Measures	Results	Actions
Study Committee/CIRE		

#### **AU Outcome: DNP 6.0**

Assume leadership roles in interprofessional collaboration to improve the health outcomes of individuals, families, and populations

Measures	Results	Actions
SL: Summative Evaluation - Assume leadership roles in interprofessional collaboration to improve the health outcomes of individuals, families, and populations  Target: 100% of students achieve an acceptable level (1) on a scale of 0-2 Timeframe: Annually upon program completion  Responsible Parties: Assistant Dean, Graduate Nursing /Graduate Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  100% (5 of 5) students achieved an acceptable level or above on this criterion of the DNP  Summative Evaluation. This is consistent with 2017-2018 results when 3 of 3 students (100%) achieved acceptable or above ratings on this criterion of the DNP Summative Evaluation.  Considering that the summative evaluation is completed upon program completion, it is to be expected that all students would demonstrate achievement of program outcomes as reflected in summative evaluation tool. (07/22/2019)	Action: Will continue to monitor this target since the number of DNP graduates remains low and it is essential to assure graduates have documented achievement of program outcomes. (07/22/2019)
SL: Didactic - NU750 Leadership and Collaboration Service-Learning Project assignment Target: 100% of students will achieve 80% or higher on the Service-Learning Project assignment Timeframe: Each time course is offered Responsible Parties: Graduate Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes 3 of 3 (100%) of students achieved 80% or higher on the Service-Learning Project assignment.  This was consistent with the previous time this measure was reported (summer 2016), also 100% (6 of 6 students). (07/22/2019)	Action: In order to meet this target with all groups next year, course faculty will encourage completion of the assignment with peers to promote collaboration. The Panopto video that was added provided additional guidance to students for this assignment.  Suggest providing this level of support to students in the future. Encourage students to complete this project with peers in the course. (07/22/2019)

#### **AU Outcome: DNP 6.0**

Measures	Results	Actions
AD: Survey - DNP Alumni Survey: Graduate perceptions of how well their DNP education prepared them to assume leadership roles in interprofessional collaboration to improve the health outcomes of individuals, families, and populations (very poorly, poorly, well, very well). Target: 75% of respondents will report that their DNP education prepared them to assume leadership roles in interprofessional collaboration to improve the health outcomes of individuals, families, and populations well or very well. Timeframe: Annually Responsible Parties: Evaluation & Study Committee/CIRE	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes Survey of 2017-2018 DNP Alumni: One of two graduates responded to the survey. The graduate reported that they perform this outcome very well. Survey of 2015-2016 and 2016-2017 DNP Alumni: Three graduates responded to the survey. The graduates reported that they perform this outcome very well (100%). Results are consistent with previous DNP alumni surveys. (03/10/2020)	Action: Survey 2018-2019 DNP graduates during 2020. Monitor trends in response to this measure. (03/10/2020)
AD: Survey - DNP Alumni Employer Survey: Employer perceptions of how well DNP graduates assume leadership roles in interprofessional collaboration to improve the health outcomes of individuals, families, and populations (very poorly, poorly, well, very well). Target: 75% of respondents will report that DNP graduates assume leadership roles in interprofessional collaboration to improve the health outcomes of individuals, families, and populations well or very well. Timeframe: Annually	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  There were no responses to the survey of employers of 2017-2018 DNP graduates.  Survey of employers of August 2016, May 2017, and August 2017 graduates had 9 responses: 100% reported that the DNP graduate performs the program outcome well (11.11%) or very well (88.89%).  Findings are consistent with previous employer surveys. (03/10/2020)	Action: Survey 2018-2019 employers of DNP graduates during 2020. Monitor trends in response to this measure. (03/10/2020)

#### **AU Outcome: DNP 6.0**

Measures	Results	Actions
Responsible Parties: Evaluation & Study Committee/CIRE		
AD: Survey - DNP Alumni Survey: Graduates perceptions of how often they assume leadership roles in interprofessional collaboration to improve the health outcomes of individuals, families, and populations (not at all, rarely, some of the time, most of the time). Target: 75% of respondents will report that they assume leadership roles in interprofessional collaboration to improve the health outcomes of individuals, families, and populations some or most of the time. Timeframe: Annually Responsible Parties: Evaluation & Study Committee/CIRE	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  Survey of 2017-2018 DNP Alumni: One of two graduates responded to the survey reporting that they perform this outcome most of the time.  Survey of 2015-2016 and 2016-2017 DNP graduates: Three graduates responded to the survey. They reported that they perform this outcome some (0%) or most of the time (66.67%). One reported NA (33.33%)  Except for survey of 2015-2016 and 2016-2017 DNP graduates, results are consistent with previous DNP alumni surveys. (03/10/2020)	Action: Survey 2018-2019 DNP graduates during 2020. Monitor trends in response to this measure. (03/10/2020)
AD: Survey - DNP Alumni Employer Survey: Employer perceptions of how often DNP graduates assume leadership roles in interprofessional collaboration to improve the health outcomes of individuals, families, and populations (not at all, rarely, some of the time, most of the time). Target: 75% of respondents will report that graduates assume leadership roles in interprofessional collaboration to improve the health outcomes of individuals, families, and populations some or most of the	Reporting Year: 2018 - 2019 (Year 1)  Target Met: SPE Task Not Completed  There were no responses to the survey of employers of 2017-2018 DNP graduates.  Survey of employers of August 2016, May 2017, and August 2017 graduates had 9 responses: 100% reported that the DNP graduate performs the program outcomes some (11.11%) or most of the time (88.89%).  Findings are consistent with previous employer surveys. (03/10/2020)	Action: Survey 2018-2019 employers of DNP graduates during 2020. Monitor trends in response to this measure. (03/10/2020)

#### **AU Outcome: DNP 6.0**

Measures	Results	Actions
time. Timeframe: Annually Responsible Parties: Evaluation & Study Committee/CIRE		

#### **AU Outcome: DNP 7.0**

Incorporate a firm conceptual foundation for clinical prevention and population health.

Measures	Results	Actions
SL: Summative Evaluation - Incorporate a firm conceptual foundation for clinical prevention and population health. Target: 100% of students achieve an acceptable level (1) on a scale of 0-2  Timeframe: Annually upon program completion Responsible Parties: Assistant Dean, Graduate Nursing /Graduate Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  100% (5 of 5) students achieved an acceptable level or above on this criterion of the DNP  Summative Evaluation. This is consistent with 2017-2018 results when 3 of 3 students (100%) achieved acceptable or above ratings on this criterion of the DNP Summative Evaluation.  Considering that the summative evaluation is completed upon program completion, it is to be expected that all students would demonstrate achievement of program outcomes as reflected in summative evaluation tool. (07/22/2019)	Action: Will continue to monitor this target since the number of DNP graduates remains low and it is essential to assure graduates have documented achievement of program outcomes. (07/22/2019)
AD: Survey - DNP Alumni Survey: Graduate perceptions of how well their DNP education prepared them to incorporate a firm conceptual foundation for clinical prevention and population health (very poorly, poorly, well, very well). Target: 75% of respondents will report that their DNP education prepared them to incorporate a firm conceptual foundation for clinical prevention and population health	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes Survey of 2017-2018 DNP Alumni: One of two graduates responded to the survey. The graduate reported that they perform this outcome very well. Survey of 2015-2016 and 2016-2017 DNP Alumni: Three graduates responded to the survey. The graduates reported that they perform this outcome well (33.33%) or very well (66.67%). Results are consistent with previous DNP alumni surveys. (03/10/2020)	Action: Survey 2018-2019 DNP graduates during 2020. Monitor trends in response to this measure. (03/10/2020)

#### **AU Outcome: DNP 7.0**

Measures	Results	Actions
well or very well.  Timeframe: Annually Responsible Parties: Evaluation & Study Committee/CIRE		
AD: Survey - DNP Alumni Employer Survey: Employer perceptions of how well DNP graduates incorporate a firm conceptual foundation for clinical prevention and population health (very poorly, poorly, well, very well). Target: 75% of respondents will report that DNP graduates incorporate a firm conceptual foundation for clinical prevention and population health well or very well. Timeframe: Annually Responsible Parties: Evaluation & Study Committee/CIRE	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes There were no responses to the survey of employers of 2017-2018 DNP graduates. Survey of employers of August 2016, May 2017, and August 2017 graduates had 9 responses: 100% reported that the DNP graduate performs the program outcome well (22.22%) or very well (77.78%). Findings are consistent with previous employer surveys. (03/10/2020)	Action: Survey 2018-2019 employers of DNP graduates during 2020. Monitor trends in response to this measure. (03/10/2020)
AD: Survey - DNP Alumni Survey: Graduates perceptions of how often they incorporate a firm conceptual foundation for clinical prevention and population health (not at all, rarely, some of the time, most of the time). Target: 75% of respondents will report that they incorporate a firm conceptual foundation for clinical prevention and population health some or most of the time. Timeframe: Annually Responsible Parties: Evaluation &	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  Survey of 2017-2018 DNP Alumni: One of two graduates responded to the survey reporting that they perform this outcome most of the time.  Survey of 2015-2016 and 2016-2017 DNP graduates: Three graduates responded to the survey. They reported that they perform this outcome some (33.33%) or most of the time (33.33%). One reported NA (33.33%)  Except for survey of 2015-2016 and 2016-2017 DNP graduates, results are consistent with previous DNP alumni surveys. (03/10/2020)	Action: Survey 2018-2019 DNP graduates during 2020. Monitor trends in response to this measure. (03/10/2020)

#### **AU Outcome: DNP 7.0**

Measures	Results	Actions
Study Committee/CIRE		
AD: Survey - DNP Alumni Employer Survey: Employer perceptions of how often DNP graduates incorporate a firm conceptual foundation for clinical prevention and population health (not at all, rarely, some of the time, most of the time).  Target: 75% of respondents will report that graduates incorporate a firm conceptual foundation for clinical prevention and population health some or most of the time.  Timeframe: When course offered Responsible Parties: Evaluation & Study Committee/CIRE	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes There were no responses to the survey of employers of 2017-2018 DNP graduates. Survey of employers of August 2016, May 2017, and August 2017 graduates had 9 responses: 100% reported that the DNP graduate performs the program outcomes some (22.22%) or most of the time (77.78%). Findings are consistent with previous employer surveys. (03/10/2020)	Action: Survey 2018-2019 employers of DNP graduates during 2020. Monitor trends in response to this measure. (03/10/2020)
SL: Didactic - NU730 Clinical Prevention and Population Health Health Disparities Presentation assignment Target: 100% of students will achieve 80% or higher on Health Disparities Presentation assignment Timeframe: Each time course is offered Responsible Parties: Graduate Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: NA  Course is on a 2-year cycle and was not offered during the 2018-2019 academic year. (07/22/2019)	Action: The course will be changing to NU731 Epidemiology and Biostatistics in the fall 2019 semester. Will need to follow-up regarding the need for a change to the measure for this DNP Outcome (#7). (07/22/2019)

**AU Outcome: DNP 8.0** 

Synthesize advanced practice nursing knowledge and competencies into the practice role.

## **AU Outcome: DNP 8.0**

Measures	Results	Actions
SL: Summative Evaluation - Synthesize advanced practice nursing knowledge and competencies into the practice role. Target: 100% of students achieve an acceptable level (1) on a scale of 0-2 Timeframe: Annually upon program completion Responsible Parties: Assistant Dean, Graduate Nursing /Graduate Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes 100% (5 of 5) students achieved an acceptable level or above on this criterion of the DNP Summative Evaluation. This is consistent with 2017-2018 results when 3 of 3 students (100%) achieved acceptable or above ratings on this criterion of the DNP Summative Evaluation. Considering that the summative evaluation is completed upon program completion, it is to be expected that all students would demonstrate achievement of program outcomes as reflected in summative evaluation tool. (07/22/2019)	Action: Will continue to monitor this target since the number of DNP graduates remains low and it is essential to assure graduates have documented achievement of program outcomes. (07/22/2019)
AD: Survey - DNP Alumni Survey: Graduate perceptions of how well their DNP education prepared them to synthesize advanced practice nursing knowledge and competencies into the practice role (very poorly, poorly, well, very well). Target: 75% of respondents will report that their DNP education prepared them to synthesize advanced practice nursing knowledge and competencies into the practice role well or very well. Timeframe: Annually Responsible Parties: Evaluation & Study Committee/CIRE	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  Survey of 2017-2018 DNP Alumni: One of two graduates responded to the survey. The graduate reported that they perform this outcome very well.  Survey of 2015-2016 and 2016-2017 DNP Alumni: Three graduates responded to the survey. The graduates reported that they perform this outcome very well (100%).  Results are consistent with previous DNP alumni surveys. (03/10/2020)	Action: Survey 2018-2019 DNP graduates during 2020. Monitor trends in response to this measure. (03/10/2020)
AD: Survey - DNP Alumni Employer Survey: Employer perceptions of how well DNP graduates synthesize advanced practice nursing knowledge and competencies into the practice role (very poorly, poorly, well, very well).	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes There were no responses to the survey of employers of 2017-2018 DNP graduates. Survey of employers of August 2016, May 2017, and August 2017 graduates had 9 responses: 100% reported that the DNP graduate performs the program outcome well (11.11%) or very well (88.89%). Findings are consistent with previous employer surveys. (03/10/2020)	Action: Survey 2018-2019 employers of DNP graduates during 2020. Monitor trends in response to this measure. (03/10/2020)

## **AU Outcome: DNP 8.0**

Measures	Results	Actions
Target: 75% of respondents will report that DNP graduates synthesize advanced practice nursing knowledge and competencies into the practice role well or very well.		
Timeframe: Annually Responsible Parties: Evaluation & Study Committee/CIRE		
AD: Survey - DNP Alumni Survey: Graduates perceptions of how often they synthesize advanced practice nursing knowledge and competencies into the practice role (not at all, rarely, some of the time, most of the time). Target: 75% of respondents will report that they synthesize advanced practice nursing knowledge and competencies into the practice role some or most of the time. Timeframe: Annually Responsible Parties: Evaluation & Study Committee/CIRE	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes Survey of 2017-2018 DNP Alumni: One of two graduates responded to the survey reporting that they perform this outcome most of the time.  Survey of 2015-2016 and 2016-2017 DNP graduates: Three graduates responded to the survey. They reported that they perform this outcome some (33.33%) or most of the time (66.67%). One reported NA (33.33%).  Results are consistent with previous DNP alumni surveys. (03/10/2020)	Action: Survey 2018-2019 DNP graduates during 2020. Monitor trends in response to this measure. (03/10/2020)
AD: Survey - DNP Alumni Employer Survey: Employer perceptions of how often DNP graduates synthesize advanced practice nursing knowledge and competencies into the practice role (not at all, rarely, some of the time, most of the time). Target: 75% of respondents will report that graduates synthesize	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  There were no responses to the survey of employers of 2017-2018 DNP graduates.  Survey of employers of August 2016, May 2017, and August 2017 graduates had 9 responses: 100% reported that the DNP graduate performs the program outcomes most of the time (100%).  Findings are consistent with previous employer surveys. (03/10/2020)	Action: Survey 2018-2019 employers of DNP graduates during 2020. Monitor trends in response to this measure. (03/10/2020)

College Goal 1 - Prepare outstanding healthcare practitioners who are committed to lifelong learning.

## **Program (Nursing) - Doctor of Nursing Practice (DNP)**

#### **AU Outcome: DNP 8.0**

Measures	Results	Actions
advanced practice nursing knowledge and competencies into the practice role some or most of the time.  Timeframe: Annually Responsible Parties: Evaluation & Study Committee/CIRE		

## **Program (Nursing) - Master of Science in Nursing (MSN)**

#### **AU Outcome: MSN 1.0**

Synthesize knowledge from nursing science and related disciplines in order to develop a foundation to guide practice.

Measures	Results	Actions
SL: Clinical evaluation tool - Clinical Evaluations-Critical thinking" criterion Target: 95% of students achieve an acceptable level (1) on all criteria on "Critical thinking" criterion on the faculty clinical evaluation tool. Timeframe: Annually Responsible Parties: MSN Clinical Coordinator / Graduate Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes See attached report - CAP Summary MSN Outcomes 1, 3, 7, and 8 (09/26/2019) Related Documents: 2018-2019 CAP Summary MSN Outcomes 1, 3, 8, & 8.pdf	Action: This is the first year this measure has been used. Review usefulness of this measure with Graduate Curriculum Committee to determine future of this measure. (09/26/2019)
SL: Didactic - NU696 Graduate Seminar II Paper 3 Target: 95% of students achieve 73% or higher on Paper 3 (Draft of MSN Graduate Project Proposal). Timeframe: Annually Responsible Parties: Graduate	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes Summer 2018: 15 of 16 students completed the course by the end of the summer term, and all (100%) scored at least 73% on Paper 3 (73.2-93.4%). Fall 2018: 7 students completed the course, 6 (85.7%) of whom scored at least 73% on Paper	Action: To achieve the target during the 2019-2020 academic year, the importance of timely mentor feedback will be emphasized. Mentors will be asked to provide timely feedback on

## **AU Outcome: MSN 1.0**

Measures	Results	Actions
Curriculum Committee	3 (73.0-99.0%). One student failed Paper 2 twice and failed Paper 3, so s/he failed the course. Spring 2019: Of the 28 students who completed the course by the end of the semester (one student was given an incomplete), all scored at least 73% on Paper 3 (73.43-98.6%).  For the academic year, 49 of 50 students scored at least 73% on Paper 3 (98%), which is consistent with the previous reporting year when 58 of 60 (97%) scored at least 73% on Paper 3.  Reflection on Results and Action Plan for Previous Reporting Year:  To meet this target during the 2018-2019 academic year, all instructions were reviewed and simplified when possible, and mentor feedback was required on most discussion responses. Assignment deadlines were chosen based on module sequencing and scheduled semester breaks. The deadline for Paper 2 was adjusted summer 2018 due to student circumstances. The deadline for Paper 3 was delayed fall 2018 to give mentors more time to provide feedback on Module 5 discussion responses. The Paper 2 deadline was delayed spring 2018 due to delays in mentor feedback on Module 3 discussion responses. (05/21/2019)	discussion responses that relate directly to an impending Paper assignment at least 3 days before the assignment is due. Mentors will be asked to grade Papers 1, 2, and 3 within 2 weeks after the assignment due date fall and spring semesters and within 1 week after the due date summer semester.  Lead faculty should review all instructions before each module begins to detect typographical errors and to ensure the instructions are coherent.  The Dean of the nursing program and director of the MSN program will be advised that the ideal mentor-to-student ratio in this course is 1:4, and that more than 5 students assigned to one mentor is difficult to manage. (05/21/2019)
AD: Survey - MSN Alumni Survey How well MSN graduates perceive that their MSN education prepared them to synthesize knowledge from nursing science and related disciplines in order to develop a foundation to guide practice (very poorly, poorly, well, very well).  Target: 75% of respondents will	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes >90% of 2017-2018 alumni survey respondents (n = 14) reported their MSN education prepared them well (57.14%) or very well (35.71%) to synthesize knowledge from nursing science and related disciplines in order to develop a foundation to guide practice.  100% of 2016-2017 alumni survey respondents (n = 23) reported their MSN education prepared them well (60.87%) or very well (39.13%) to synthesize knowledge from nursing science and related disciplines in order to develop a foundation to guide practice.	Action: Survey 2018-2019 alumni during 2020. Compare responses and monitor for favorable and unfavorable trends. (03/04/2020)

#### **AU Outcome: MSN 1.0**

Measures	Results	Actions
report feeling well or very well prepared to synthesize knowledge from nursing science and related disciplines in order to develop a foundation to guide practice.  Timeframe: Annually Responsible Parties: Evaluation & Study Committee	These results are consistent with the results of survey of 2016-2017 MSN program graduates. (03/04/2020)	
AD: Survey - MSN Alumni Survey How often MSN graduates synthesizes knowledge from nursing science and related disciplines in order to develop a foundation to guide practice (not at all, rarely, some of the time, most of the time).  Target: 75% of respondents will report that they synthesize knowledge from nursing science and related disciplines in order to develop a foundation to guide practice some or most of the time. Timeframe: Annually Responsible Parties: Evaluation & Study Committee	<b>Reporting Year:</b> 2018 - 2019 (Year 1) <b>Target Met:</b> Yes  >75% of 2017-2018 alumni survey respondents (n = 14) reported that some of the time (28.57%) or most of the time (71.43%) they perform this outcome in their current professional practice.  >90% of 2016-2017 alumni survey respondents who answered this question (n = 22) reported that some of the time (9.09%) or most of the time (86.36%) they perform this outcome in their current professional practice.  Results are consistent with previous alumni surveys. (03/04/2020)	Action: Survey 2018-2019 alumni during 2020. Compare responses and monitor for favorable and unfavorable trends. (03/04/2020)
AD: Survey - MSN Graduate Employer SurveyHow well employers perceive that MSN graduates synthesize knowledge from nursing science and related disciplines in order to develop a foundation to guide practice (very poorly, poorly, well, very well). Target: 75% of employers will report	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  100% of employers who responded to the survey (n = 5) reported the MSN program graduate performs this outcome well (40%) or very well (60%). This result is consistent with previous alumni surveys.  100% of employers who answered this item on the survey of 2015-2016 and 2016-2017 MSN graduate employers (n=6) reported the graduate performed the outcome well (16.67%) or	Action: Survey employers of 2018-2019 graduates during 2020. Compare responses and monitor for favorable and unfavorable trends. (03/05/2020)

#### **AU Outcome: MSN 1.0**

Measures	Results	Actions
that MSN graduates provide organizational and systems leadership in practice, service, and scholarship well or very well.  Timeframe: Annually Responsible Parties: Evaluation & Study Committee, CIRE	These results and the results of previous employer surveys indicate employers' perceptions of the Allen College MSN graduate consistently meet or exceed the target. (03/05/2020)	
AD: Survey - MSN Graduate Employer SurveyHow often MSN graduate synthesizes knowledge from nursing science and related disciplines in order to develop a foundation to guide practice (not at all, rarely, some of the time, most of the time).  Target: 75% of respondents will report that MSN graduates synthesize knowledge from nursing science and related disciplines in order to develop a foundation to guide practice some or most of the time. Timeframe: Annually Responsible Parties: Evaluation & Study Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  >75% of employers who responded to the survey (n = 5) reported the MSN program graduate performs this outcome some (20%) or most of the time (80%). This result is consistent with previous alumni surveys.  86% of employers who answered this item on the survey of 2015-2016 and 2016-2017 MSN graduate employers (n = 7) reported the graduate performs this outcome some of the time (0%) or most of the time (85.71%) in current professional practice. One respondent reported the outcome was not applicable (14.29%),  These results and the results of previous employer surveys indicate employers' perceptions of how often the Allen College MSN graduate performs the outcome in current professional practice consistently meet or exceed the target. (03/05/2020)	Action: Survey employers of 2018-2019 graduates during 2020. Compare responses and monitor for favorable and unfavorable trends. (03/05/2020)

## **AU Outcome: MSN 2.0**

Provide organizational and systems leadership in practice, service and scholarship.

Measures	Results	Actions
<b>SL: Didactic -</b> NU505 Nursing Leadership for Advanced Practice	Reporting Year: 2018 - 2019 (Year 1)	Action: Students continue to

#### **AU Outcome: MSN 2.0**

Measures	Results	Actions
Leadership Development paper Target: 95% of students will achieve 73% or better on Leadership Development paper Timeframe: Annually Responsible Parties: Graduate Curriculum Committee	Target Met: Yes 98.5% (65/66) of students achieved a 73% or better on the conceptual leadership paper. (07/16/2019)	appreciate feedback provided on drafts of this paper in order to make changes prior to the final submission. Consider using the Module #7 activities (collaborate session, team paper) to evaluate this outcome rather than the conceptual leadership paper. (07/16/2019)
AD: Survey - MSN Alumni Survey How well MSN graduates perceive that their MSN education prepared them to provide organizational and systems leadership in practice, service and scholarship (very poorly, poorly, well, very well). Target: 75% of MSN graduates will report being well or very well prepared by their MSN education to provide organizational and systems leadership in practice, service and scholarship. Timeframe: Annually Responsible Parties: Evaluation & Study Committee	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes > 90% of 2017-2018 alumni survey respondents (n = 14) reported their MSN education prepared them well (71.43%) or very well (21.43%) to provide organizational and systems leadership in practice, service and scholarship.  100% of 2016-2017 alumni survey respondents (n = 23) reported their MSN education prepared them well (60.87%) or very well (39.13%) to synthesize knowledge from nursing science and related disciplines in order to develop a foundation to guide practice.  These results are consistent with previous alumni survey. (03/04/2020)	Action: Survey 2018-2019 alumni during 2020. Compare responses and monitor for favorable and unfavorable trends. (03/04/2020)
AD: Survey - MSN Alumni Survey How often MSN graduates provide organizational and systems leadership in practice, service, and scholarship (not at all, rarely, some of the time, most of the time). Target: 75% of MSN graduates will report that they provide	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  >75% of 2017-2018 alumni survey respondents (n = 14) reported that some of the time (35.71%) or most of the time (43.86%) they perform this outcome in their current professional practice.  >90% of 2016-2017 alumni survey respondents who answered this question (n = 22) reported that some of the time (31.82%) or most of the time (59.09%) they perform this	Action: Survey 2018-2019 alumni during 2020. Compare responses and monitor for favorable and unfavorable trends. (03/04/2020)

#### **AU Outcome: MSN 2.0**

Measures	Results	Actions
organizational and systems leadership in practice, service, and scholarship some or most of the time. Timeframe: Annually Responsible Parties: Evaluation & Study Committee	outcome in their current professional practice.  Results are consistent with previous alumni surveys. (03/04/2020)	
AD: Survey - MSN Employer Survey-How well employers perceive that MSN graduates provide organizational and systems leadership in practice, service and scholarship (very poorly, poorly, well, very well).  Target: 75% of employers will report that MSN graduates provide organizational and systems leadership in practice, service and scholarship well or very well.  Timeframe: Annually Responsible Parties: Evaluation & Study Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  100% of employers who responded to the survey (n = 5) reported the MSN program graduate performs this outcome well (60%) or very well (40%).  100% of employers who answered this item on the survey of 2015-2016 and 2016-2017 MSN graduate employers (n = 6) reported the graduate performed the outcome well (16.67%) or very well (83.33%) in current professional practice.  These results and the results of previous employer surveys indicate employers' perceptions of the Allen College MSN graduate consistently meet or exceed the target. (03/05/2020)	Action: Survey employers of 2018-2019 graduates during 2020. Compare responses and monitor for favorable and unfavorable trends. (03/05/2020)
AD: Survey - MSN Employer Survey-How often employers perceive that MSN graduates provide organizational and systems leadership in practice, service, and scholarship (not at all, rarely, some of the time, most of the time).  Target: 75% of employers will report that MSN graduates provide organizational and systems leadership in practice, service, and scholarship some or most of the	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  100% of employers who responded to the survey (n = 5) reported the MSN program graduate performs this outcome some (20%) or most of the time (80%). This result is consistent with previous alumni surveys.  86% of employers who answered this item on the survey of 2015-2016 and 2016-2017 MSN graduate employers (n = 7) reported the graduate performs this outcome some of the time (0%) or most of the time (85.71%) in current professional practice. One respondent reported the outcome was not applicable (14.29%),  These results and the results of previous employer surveys indicate employers' perceptions of	Action: Survey employers of 2018-2019 graduates during 2020. Compare responses and monitor for favorable and unfavorable trends. (03/05/2020)

#### **AU Outcome: MSN 2.0**

Measures	Results	Actions
time. Timeframe: Annually Responsible Parties: Evaluation & Study Committee	how often the Allen College MSN graduate performs the outcome in current professional practice consistently meet or exceed the target. (03/05/2020)	

#### **AU Outcome: MSN 3.0**

Apply quality principles to promote patient safety and positive individual and systems outcomes.

Measures	Results	Actions
SL: Clinical evaluation tool - Clinical Evaluations-"Safety/Outcomes" criterion Target: 95% of students achieve an acceptable level (1) on "Safety/Outcomes" criterion on Faculty Clinical Evaluation Tool Timeframe: Annually Responsible Parties: MSN Clinical Coordinator / Graduate Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes See attached report - CAP Summary MSN Outcomes 1, 3, 7, and 8 (09/26/2019) Related Documents: 2018-2019 CAP Summary MSN Outcomes 1, 3, 8, & 8.pdf	Action: This is the first year this measure has been used. Review usefulness of this measure with Graduate Curriculum Committee to determine future of this measure. (09/26/2019)
AD: Report - Internal - Graduate Project Evaluation Form - Item #3 Apply quality principles to promote patient safety and positive outcomes Target: 100% of students achieve an acceptable level (1) on both paper and presentation Timeframe: Annually Responsible Parties: Assistant Dean, Graduate Nursing / Graduate Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes 59 of 59 (100%) of students achieved an acceptable level (1) on both paper and presentation. This is consistent with outcomes from all previous academic years and as expected for an end-of-program project that is guided by a faculty mentor and approved prior to the final presentation. (07/16/2019)	Action: In order to continue to meet this target for all students, graduate project faculty advisers will maintain close working relationships with students as they plan their evidence-based practice/quality improvement projects. This should ensure a high-quality presentation and summary paper at the end of the process. This is still perceived to be a valuable measure of student

#### **AU Outcome: MSN 3.0**

Measures	Results	Actions
		attainment of this outcome; maintain measure and target. (07/16/2019)
AD: Survey - MSN Alumni Survey-How well MSN graduates perceive that their MSN education prepared them to apply quality principles to promote patient safety and positive individual and systems outcomes (very poorly, poorly, well, very well). Target: 75% of respondents will report feeling well or very well prepared to apply quality principles to promote patient safety and positive individual and systems outcomes. Timeframe: Annually Responsible Parties: Evaluation & Study Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  > 90% of 2017-2018 alumni survey respondents (n = 14) reported their MSN education prepared them well (50.00%) or very well (42.86%) to apply quality principles to promote patient safety and positive individual and systems outcomes.  100% of 2016-2017 alumni survey respondents (n = 23) reported their MSN education prepared them well (65.22%) or very well (34.78%) to apply quality principles to promote patient safety and positive individual and systems outcomes.  These results are similar to the results of the survey of 2016-2017 MSN program graduates. Target consistently met or exceeded. (03/04/2020)	Action: Survey 2018-2019 alumni during 2020. Compare responses and monitor for favorable and unfavorable trends. (03/04/2020)
AD: Survey - MSN Alumni Survey How often MSN graduates apply quality principles to promote patient safety and positive individual and systems outcomes (not at all, rarely, some of the time, most of the time). Target: 75% of respondents will report applying quality principles to promote patient safety and positive individual and systems outcomes some or most of the time. Timeframe: Annually Responsible Parties: Evaluation & Study Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  >75% of 2017-2018 alumni survey respondents (n = 14) reported that some of the time (21.43%) or most of the time (78.57%) they perform this outcome in their current professional practice.  100% of 2016-2017 alumni survey respondents who answered this question (n = 22) reported that most of the time they perform this outcome in their current professional practice.  Results are consistent with previous alumni surveys. (03/04/2020)	Action: Survey 2018-2019 alumni during 2020. Compare responses and monitor for favorable and unfavorable trends. (03/04/2020)

#### **AU Outcome: MSN 3.0**

Measures	Results	Actions
AD: Survey - MSN Alumni Employer SurveyHow well MSN graduates apply quality principles to promote patient safety and positive individual and systems outcomes (very poorly, poorly, well, very well).  Target: 75% of respondents will report MSN graduates apply quality principles to promote patient safety and positive individual and systems outcomes well or very well.  Timeframe: Annually Responsible Parties: Evaluation & Study Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  100% of employers who responded to the survey (n = 5) reported the MSN program graduate performs this outcome well (20%) or very well (80%). This result is consistent with previous alumni surveys.  100% of employers who answered this item on the survey of 2015-2016 and 2016-2017 MSN graduate employers (n = 6) reported the graduate performed the outcome well (16.67%) or very well (83.33%) in current professional practice.  These results and the results of previous employer surveys indicate employers' perceptions of the Allen College MSN graduate consistently meet or exceed the target. (03/05/2020)	Action: Survey employers of 2018-2019 graduates during 2020. Compare responses and monitor for favorable and unfavorable trends. (03/05/2020)
AD: Survey - MSN Alumni Employer SurveyHow often MSN graduates apply quality principles to promote patient safety and positive individual and systems outcomes (not at all, rarely, some of the time, most of the time).  Target: 75% of respondents will report that MSN graduates apply quality principles to promote patient safety and positive individual and systems outcomes some or most of the time.  Timeframe: Annually Responsible Parties: Evaluation & Study Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  100% of employers who responded to the survey (n = 5) reported the MSN program graduate performs this outcome most of the time. This result is consistent with previous alumni surveys.  86% of employers who answered this item on the survey of 2015-2016 and 2016-2017 MSN graduate employers (n = 7) reported the graduate performs this outcome some of the time (0%) or most of the time (85.71%) in current professional practice. One respondent reported the outcome was not applicable (14.29%),  These results and the results of previous employer surveys indicate employers' perceptions of how often the Allen College MSN graduate performs the outcome in current professional practice consistently meet or exceed the target. (03/05/2020)	Action: Survey employers of 2018-2019 graduates during 2020. Compare responses and monitor for favorable and unfavorable trends. (03/05/2020)

**AU Outcome: MSN 4.0** 

Use scholarly inquiry and evidence to advance the practice of nursing.

#### **AU Outcome: MSN 4.0**

Measures	Results	Actions
SL: Didactic - NU535: Evidence-Based Practice I: Finding and Appraising Evidence, Evidence Synthesis Assignment Target: At least 95% of student will achieve a score of 73% or higher on the Evidence Synthesis Assignment Timeframe: Annual Responsible Parties: NU535 Course Instructor, Graduate Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1) Target Met: NA Course was not taught during 2018-2019 academic year. New measure for 2019-2020. (03/05/2020)	
SL: Didactic - NU536: Evidence- Based Practice II: Applying Evidence for Practice Change Target: 95% of students will achieve 80% or better on Paper 3: First Draft of MSN Grad Project Proposal. Timeframe: Annual Responsible Parties: NU536 Course Instructor, Graduate Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: NA  Course was not taught during 2018-2019 academic year. New measure for 2019-2020 (03/05/2020)	
SL: Didactic - NU540 Preliminary Literature Review assignment Target: 95% of students achieve 73% or better on Preliminary Literature Review assignment Timeframe: Annually Responsible Parties: Graduate Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  100% of students (22/22 fall 2018 and 31/31 spring 2019) met the target of 73% or better on Preliminary Literature Review assignment. (07/30/2019)	Action: In order to continue to meet this target with all groups of students next year, course assignments will be offered in written and oral format to address different learning styles of students and facilitate understanding. (07/30/2019)
AD: Survey - MSN Alumni Survey How well MSN graduates perceive that their MSN education prepared them to use scholarly inquiry and	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes > 90% of 2017-2018 alumni survey respondents (n = 14) reported their MSN education prepared them well (28.57) or very well (64.29%) to use scholarly inquiry and evidence to	Action: Survey 2018-2019 alumni during 2020. Compare responses and monitor for favorable and unfavorable trends. (03/04/2020)

## **AU Outcome: MSN 4.0**

Measures	Results	Actions
evidence to advance the practice of nursing (very poorly, poorly, well, very well).  Target: 75% of respondents will report feeling well or very well prepared to use scholarly inquiry and evidence to advance the practice of nursing.  Timeframe: Annually  Responsible Parties: Evaluation & Study Committee	advance the practice of nursing.  100% of 2016-2017 alumni survey respondents (n = 23) reported their MSN education prepared them well (56.52%) or very well (43.48%) to apply quality principles to promote patient safety and positive individual and systems outcomes.  These results are similar to the results of the survey of 2016-2017 MSN program graduates. Target has been met or exceeded consistently. (03/04/2020)	
AD: Survey - MSN Alumni Survey-How often MSN graduates use scholarly inquiry and evidence to advance the practice of nursing (not at all, rarely, some of the time, most of the time).  Target: 75% of respondents will report using scholarly inquiry and evidence to advance the practice of nursing some or most of the time.  Timeframe: Annually  Responsible Parties: Evaluation & Study Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  >75% of 2017-2018 alumni survey respondents (n = 14) reported that some of the time (35.71%) or most of the time (64.29%) they perform this outcome in their current professional practice.  100% of 2016-2017 alumni survey respondents who answered this question (n = 22) reported that some of the time (22.73%) or most of the time (77.27%) they perform this outcome in their current professional practice.  Results are consistent with previous alumni surveys. (03/04/2020)	Action: Survey 2018-2019 alumni during 2020. Compare responses and monitor for favorable and unfavorable trends. (03/04/2020)
AD: Survey - MSN Alumni Employer SurveyHow well employers perceive that MSN graduates use scholarly inquiry and evidence to advance the practice of nursing (very poorly, poorly, well, very well).  Target: 75% of respondents will report that MSN graduates use scholarly inquiry and evidence to advance the practice of nursing well	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  100% of employers who responded to the survey (n = 5) reported the MSN program graduate performs this outcome very well.  100% of employers who answered this item on the survey of 2015-2016 and 2016-2017 MSN graduate employers (n = 6) reported the graduate performed the outcome well (33.33%) or very well (66.67%) in current professional practice.  These results and the results of previous employer surveys indicate employers' perceptions of	Action: Survey employers of 2018-2019 graduates during 2020. Compare responses and monitor for favorable and unfavorable trends. (03/05/2020)

#### **AU Outcome: MSN 4.0**

Measures	Results	Actions
or very well.  Timeframe: Annually  Responsible Parties: Evaluation &  Study Committee	the Allen College MSN graduate consistently meet or exceed the target. (03/05/2020)	
AD: Survey - MSN Alumni Employer SurveyHow often employers perceive that MSN graduates use scholarly inquiry and evidence to advance the practice of nursing (not at all, rarely, some of the time, most of the time).  Target: 75% of respondents will report that MSN graduates use scholarly inquiry and evidence to advance the practice of nursing some or most of the time.  Timeframe: Annually Responsible Parties: Evaluation & Study Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  100% of employers who responded to the survey (n = 5) reported the MSN program graduate performs this outcome most of the time. This result is consistent with previous alumni surveys.  86% of employers who answered this item on the survey of 2015-2016 and 2016-2017 MSN graduate employers (n = 7) reported the graduate performs this outcome some of the time (14.29%) or most of the time (71.43%) in current professional practice. One respondent reported the outcome was not applicable (14.29%),  These results and the results of previous employer surveys indicate employers' perceptions of how often the Allen College MSN graduate performs the outcome in current professional practice consistently meet or exceed the target. (03/05/2020)	Action: Survey employers of 2018-2019 graduates during 2020. Compare responses and monitor for favorable and unfavorable trends. (03/05/2020)
SL: Didactic - NU596 Major Written Assignment Target: 95% of students achieve 73% or better on the major written assignment. Timeframe: Annually Responsible Parties: Graduate Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes 100% of students achieved at least a 73% on the Academic Paper Assignment. (07/16/2019)	Action: In order to continue to meet target for all groups, will continue with the new rubric and allow students to revise and resubmit paper to facilitate success if needed. Will also consider adjusting the focus of the paper away from an analysis of sources to research topic exploration. (07/16/2019)

**AU Outcome: MSN 5.0** 

Use informatics and healthcare technologies to enhance patient care and to improve healthcare systems.

#### **AU Outcome: MSN 5.0**

Measures	Results	Actions
SL: Didactic - NU541 Health Care Informatics Annotated Bibliography and Critical Response assignment Target: 95% of students will achieve an average of 73% or higher on the Annotated Bibliography and Critical Response assignment. Timeframe: Annually Responsible Parties: Graduate Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: NA  This is a new measure for 2019-2020. (03/10/2020)	
AD: Survey - MSN Alumni Survey How well MSN graduates perceive that their MSN education prepared them to use informatics and healthcare technologies to enhance patient care and to improve healthcare systems (very poorly, poorly, well, very well). Target: 75% of respondents will report feeling well or very well prepared to use informatics and healthcare technologies to enhance patient care and to improve healthcare systems. Timeframe: Annually Responsible Parties: Evaluation & Study Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  > 75% of 2017-2018 alumni survey respondents (n = 14) reported their MSN education prepared them well (28.57%) or very well (50.00%) to use informatics and healthcare technologies to enhance patient care and to improve healthcare systems. These results are similar to the results of the survey of 2016-2017 MSN program graduates.  88% of 2016-2017 alumni survey respondents (n = 23) reported their MSN education prepared them well (60.87%) or very well (26.09%) to apply quality principles to promote patient safety and positive individual and systems outcomes.  These results are similar to the results of the survey of 2016-2017 MSN program graduates. Target has been consistently met or exceeded. (03/04/2020)	Action: Survey 2018-2019 alumni during 2020. Compare responses and monitor for favorable and unfavorable trends. (03/04/2020)
AD: Survey - MSN Alumni Survey How often MSN graduates use informatics and healthcare technologies to enhance patient care and to improve healthcare systems (not at all, rarely, some of the time, most of the time).	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  100% of 2017-2018 alumni survey respondents (n = 14) reported that some of the time (28.57%) or most of the time (71.43%) they perform this outcome in their current professional practice.  78% of 2016-2017 alumni survey respondents who answered this question (n = 22) reported	Action: Survey 2018-2019 alumni during 2020. Compare responses and monitor for favorable and unfavorable trends. (03/04/2020)

## **AU Outcome: MSN 5.0**

Measures	Results	Actions
Target: 75% of respondents will report using informatics and healthcare technologies to enhance patient care and to improve healthcare systems some or most of the time.  Timeframe: Annually Responsible Parties: Evaluation & Study Committee	that some of the time (18.18%) or most of the time (59.09%) they perform this outcome in their current professional practice.  Survey of 2017-2018 alumni demonstrates improvement over survey of 2016-2017 survey results. Survey results demonstrate graduate perceptions consistently achieve or exceed of target. (03/04/2020)	
AD: Survey - MSN Alumni Employer SurveyHow well employers perceive that MSN graduates use informatics and healthcare technologies to enhance patient care and to improve healthcare systems (very poorly, poorly, well, very well). Target: 75% of respondents will report that MSN graduates use informatics and healthcare technologies to enhance patient care and to improve healthcare systems well or very well.  Timeframe: Annually Responsible Parties: Evaluation & Study Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  100% of employers who responded to the survey (n = 5) reported the MSN program graduate performs this outcome well (40%) or very well (60%).  83% of employers who answered this item on the survey of 2015-2016 and 2016-2017 MSN graduate employers (n = 6) reported the graduate performed the outcome well (0%) or very well (83.33%) in current professional practice. One respondent reported the graduate performed the outcome poorly.  These results and the results of previous employer surveys indicate employers' perceptions of the Allen College MSN graduate consistently meet or exceed the target. (03/05/2020)	Action: Survey employers of 2018-2019 graduates during 2020. Compare responses and monitor for favorable and unfavorable trends. (03/05/2020)
AD: Survey - MSN Alumni Employer SurveyHow often employers perceive that MSN graduates use informatics and healthcare technologies to enhance patient care and to improve healthcare systems (not at all, rarely, some of the time, most of the time). Target: 75% of respondents will	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  80% of employers who responded to the survey (n = 5) reported the MSN program graduate performs this outcome some (20%) or most of the time (60%). This result is consistent with previous alumni surveys.  100% of employers who answered this item on the survey of 2015-2016 and 2016-2017 MSN graduate employers (n = 7) reported the graduate performs this outcome some of the time (0%) or most of the time (100%) in current professional practice.	Action: Survey employers of 2018-2019 graduates during 2020. Compare responses and monitor for favorable and unfavorable trends. (03/05/2020)

### **AU Outcome: MSN 5.0**

Measures	Results	Actions
report that MSN graduates use informatics and healthcare technologies to enhance patient care and to improve healthcare systems some or most of the time.  Timeframe: Annually Responsible Parties: Evaluation & Study Committee	These results and the results of previous employer surveys indicate employers' perceptions of how often the Allen College MSN graduate performs the outcome in current professional practice consistently meet or exceed the target. (03/05/2020)	
SL: Didactic - NU541 Health Care Informatics team short essay assignments Target: 95% of students will achieve an average of 73% or higher on team short essay assignments. Timeframe: Annually Responsible Parties: Graduate Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes A total of 98% (83/85) of students met the target of 73% on the short essays for the 2018-2019 academic year. Summer 2018 the number of team short essays was decreased to two instead of three based on evaluation from the previous year. This was more manageable for the students. (07/16/2019)	Action: One aspect of the DNP informatics outcome (#4) was not sufficiently addressed in the short essays. To remedy this, some discussion items were moved to the short essays, and some short essay items were moved to discussions. This will be implemented starting in Fall 2019. Faculty teaching NU541 were notified of this action plan on July 16, 2019. (07/16/2019)

#### **AU Outcome: MSN 6.0**

Employ advocacy strategies to influence health policy and to improve outcomes of care.

Measures	Results	Actions
SL: Didactic - NU520 Policy, Organization, and Financing of Health Care Paper III: Health Care Policy Brief Target: 95% of students achieve 73% or higher on Paper III: Health Care Policy Brief	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  98.3% (57/58) students achieved at least 73% or higher on Paper III: Health Care Policy Brief during the 2018-2019 academic year. (07/22/2019)	Action: In order to continue to meet this target with all groups next year, course faculty will continue to use the newly developed Issue Brief (Paper III) template and rubric. Course faculty

#### **AU Outcome: MSN 6.0**

Measures	Results	Actions
Timeframe: Annually Responsible Parties: Graduate Curriculum Committee		will continue to give targeted feedback to students on Papers I and II that build to Paper III.
		The target will continue to read "95% of students who complete the assignment will achieve 73% on Paper III Health Care Policy Brief assignment." per the recommendation of the Graduate Curriculum Committee. (07/22/2019)
AD: Survey - MSN Alumni Survey-How well MSN graduates perceive that their MSN education prepared them to employ advocacy strategies to influence health policy and to improve outcomes of care (very poorly, poorly, well, very well).  Target: 75% of respondents will report feeling well or very well prepared to employ advocacy strategies to influence health policy and to improve outcomes of care.  Timeframe: Annually Responsible Parties: Evaluation & Study Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  > 88% of 2017-2018 alumni survey respondents (n = 14) reported their MSN education prepared them well (28.57%) or very well (50.00%) to employ advocacy strategies to influence health policy and to improve outcomes of care.  >90% of 2016-2017 alumni survey respondents (n = 23) reported their MSN education prepared them well (52.177%) or very well (39.13%) to apply quality principles to promote patient safety and positive individual and systems outcomes.  These results are similar to the results of the survey of 2016-2017 MSN program graduates. Target has been consistently met or exceeded. (03/04/2020)	Action: Survey 2018-2019 alumni during 2020. Compare responses and monitor for favorable and unfavorable trends. (03/04/2020)
AD: Survey - MSN Alumni Survey How often MSN graduates employ advocacy strategies to influence health policy and to improve outcomes of care (not at all, rarely, some of the time, most of the time).	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  >75% of 2017-2018 alumni survey respondents (n = 14) reported that some of the time (50.00%) or most of the time (35.71%) they perform this outcome in their current professional practice.	Action: Survey 2018-2019 alumni during 2020. Compare responses and monitor for favorable and unfavorable trends. (03/04/2020)

## **AU Outcome: MSN 6.0**

Measures	Results	Actions
Target: 75% of respondents will report employing advocacy strategies to influence health policy and to improve outcomes of care some or most of the time.  Timeframe: Annually Responsible Parties: Evaluation & Study Committee	77% of 2016-2017 alumni survey respondents who answered this question (n = 22) reported that some of the time (27.27%) or most of the time (50.00%) they perform this outcome in their current professional practice.  Survey results demonstrate consistent achievement of target. (03/04/2020)	
AD: Survey - MSN Alumni Employer SurveyHow well employers perceive that MSN graduates employ advocacy strategies to influence health policy and to improve outcomes of care (very poorly, poorly, well, very well). Target: 75% of respondents will that MSN graduates employ advocacy strategies to influence health policy and to improve outcomes of care well or very well. Timeframe: Annually Responsible Parties: Evaluation & Study Committee	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes 100% of employers who responded to the survey (n = 5) reported the MSN program graduate performs this outcome well (40%) or very well (60%).  100% of employers who answered this item on the survey of 2015-2016 and 2016-2017 MSN graduate employers (n = 6) reported the graduate performs this outcome very well in current professional practice.  These results and the results of previous employer surveys indicate employers' perceptions of the Allen College MSN graduate consistently meet or exceed the target. (03/05/2020)	Action: Survey employers of 2018-2019 graduates during 2020. Compare responses and monitor for favorable and unfavorable trends. (03/05/2020)
AD: Survey - MSN Alumni Employer SurveyHow often employers perceive that MSN graduates employ advocacy strategies to influence health policy and to improve outcomes of care (not at all, rarely, some of the time, most of the time). Target: 75% of respondents will report that MSN graduates employ advocacy strategies to influence health policy and to improve	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  100% of employers who responded to the survey (n = 5) reported the MSN program graduate performs this outcome some (40%) or most of the time (60%). This result is consistent with previous alumni surveys.  86% of employers who answered this item on the survey of 2015-2016 and 2016-2017 MSN graduate employers (n = 7) reported the graduate performs this outcome some of the time (28.57%) or most of the time (57.14%) in current professional practice. One respondent reported the outcome was not applicable (14.29%),	Action: Survey employers of 2018-2019 graduates during 2020. Compare responses and monitor for favorable and unfavorable trends. (03/05/2020)

#### **AU Outcome: MSN 6.0**

Measures	Results	Actions
outcomes of care some or most of the time. Timeframe: Annually Responsible Parties: Evaluation & Study Committee	These results and the results of previous employer surveys indicate employers' perceptions of how often the Allen College MSN graduate performs the outcome in current professional practice consistently meet or exceed the target. (03/05/2020)	

#### **AU Outcome: MSNO 7.0**

Collaborate within inter-professional teams to manage and improve health care services for individuals, families and populations.

Measures	Results	Actions
SL: Clinical evaluation tool - Clinical Evaluations-Collaboration Criterion Target: 95% of students achieve an acceptable level (1) on "Collaboration" criterion on Faculty Clinical Evaluation tool Timeframe: Annually Responsible Parties: MSN Clinical Coordinator / Graduate Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes Ser attached report - CAP Summary MSN Outcomes 1, 3, 7, and 8 (09/26/2019) Related Documents: 2018-2019 CAP Summary MSN Outcomes 1, 3, 8, & 8.pdf	Action: This is the first year this measure has been used. Review usefulness of this measure with Graduate Curriculum Committee to determine future of this measure. (09/26/2019)
AD: Report - Internal - Graduate Project Evaluation Form - Item #7 Collaborate within interprofessional teams.  Target: 100% of students achieve an acceptable level (1) on both paper and presentation Timeframe: Annually Responsible Parties: Assistant Dean, Graduate Nursing / Graduate Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  59 of 59 (100%) of students achieved an acceptable level (1) on both paper and presentation.  This is consistent with outcomes from all previous academic years and as expected for an end-of-program project that is guided by a faculty preceptor and approved prior to the final presentation. (07/22/2019)	Action: In order to continue to meet this target for all students, graduate project faculty advisers will maintain close working relationships with students as they plan and develop their evidence-based practice/quality improvement projects. This should ensure a high-quality presentation and summary paper at the end of the process. This is still perceived to be a valuable measure of

## **AU Outcome: MSNO 7.0**

Measures	Results	Actions
		student attainment of this outcome; maintain measure and target. (07/22/2019)
AD: Survey - MSN Alumni Survey-How well MSN graduates perceive that their MSN education prepared them to collaborate within interprofessional teams to manage and improve health care services for individuals, families and populations (very poorly, poorly, well, very well). Target: 75% of respondents will report feeling well or very well prepared to collaborate within interprofessional teams to manage and improve health care services for individuals, families and populations. Timeframe: Annually Responsible Parties: Evaluation & Study Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  >85% of 2017-2018 alumni survey respondents (n = 14) reported their MSN education prepared them well (57.14%) or very well (28.57%) to collaborate within inter-professional teams to manage and improve health care services for individuals, families and populations. These results are similar to the results of the survey of 2016-2017 MSN program graduates.  >90% of 2016-2017 alumni survey respondents (n = 23) reported their MSN education prepared them well (52.17%) or very well (39.13%) to apply quality principles to promote patient safety and positive individual and systems outcomes.  These results are similar to the results of the survey of 2016-2017 MSN program graduates. Target has been consistently met or exceeded. (03/04/2020)	Action: Survey 2018-2019 alumni during 2020. Compare responses and monitor for favorable and unfavorable trends. (03/04/2020)
AD: Survey - MSN Alumni Survey-How often MSN graduates collaborate within inter-professional teams to manage and improve health care services for individuals, families and populations (not at all, rarely, some of the time, most of the time).  Target: 75% of respondents will report collaborating within interprofessional teams to manage and improve health care services for individuals, families and populations	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  >75% of 2017-2018 alumni survey respondents (n = 14) reported that some of the time (21.43%) or most of the time (78.57%) they perform this outcome in their current professional practice.  100% of 2016-2017 alumni survey respondents who answered this question (n = 22) reported that some of the time (13.64%) or most of the time (86.36%) they perform this outcome in their current professional practice.  Survey results demonstrate graduate perceptions consistently achieve or exceed of target. (03/04/2020)	Action: Survey 2018-2019 alumni employers during 2020. Compare responses and monitor for favorable and unfavorable trends. (03/04/2020)

## **AU Outcome: MSNO 7.0**

Measures	Results	Actions
some or most of the time.  Timeframe: Annually  Responsible Parties: Evaluation &  Study Committee		
AD: Survey - MSN Alumni Employer SurveyHow well employers perceive that MSN graduates collaborate within inter-professional teams to manage and improve health care services for individuals, families and populations (very poorly, poorly, well, very well).  Target: 75% of respondents will report that MSN graduates collaborate within inter-professional teams to manage and improve health care services for individuals, families and populations well or very well.  Timeframe: Annually Responsible Parties: Evaluation & Study Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  100% of employers who responded to the survey (n = 5) reported the MSN program graduate performs this outcome very well.  100% of employers who answered this item on the survey of 2015-2016 and 2016-2017 MSN graduate employers (n = 6) reported the graduate performs this outcome very well in current professional practice.  These results and the results of previous employer surveys indicate employers' perceptions of the Allen College MSN graduate consistently meet or exceed the target. (03/05/2020)	Action: Survey employers of 2018-2019 graduates during 2020. Compare responses and monitor for favorable and unfavorable trends. (03/05/2020)
AD: Survey - MSN Alumni Employer SurveyHow often employers perceive that MSN graduates collaborate within inter-professional teams to manage and improve health care services for individuals, families and populations (not at all, rarely, some of the time, most of the time).  Target: 75% of respondents will report that MSN graduates collaborate within inter-professional	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  100% of employers who responded to the survey (n = 5) reported the MSN program graduate performs this outcome most of the time.  100% of employers who answered this item on the survey of 2015-2016 and 2016-2017 MSN graduate employers (n = 7) reported the graduate performs this outcome most of the time in current professional practice.  These results and the results of previous employer surveys indicate employers' perceptions of how often the Allen College MSN graduate performs the outcome in current professional practice consistently meet or exceed the target. (03/05/2020)	Action: Survey employers of 2018-2019 graduates during 2020. Compare responses and monitor for favorable and unfavorable trends. (03/05/2020)

#### **AU Outcome: MSNO 7.0**

Measures	Results	Actions
teams to manage and improve health care services for individuals, families and populations some or		
most of the time.  Timeframe: Annually  Responsible Parties: Evaluation &  Study Committee		

**AU Outcome: MSN 8.0** 

Integrate patient-centered and culturally responsive strategies into the delivery of clinical prevention, health promotion, and population-focused services.

Measures	Results	Actions
SL: Clinical evaluation tool - Clinical Evaluations-"Clinical Interventions" criterion Target: 95% of students achieve an acceptable level (1) on "Clinical Interventions" criterion on Faculty Clinical Evaluation tool. Timeframe: Annually Responsible Parties: MSN Clinical Coordinator / Graduate Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes See attached report - CAP Summary MSN Outcomes 1, 3, 7, and 8 (09/26/2019) Related Documents: 2018-2019 CAP Summary MSN Outcomes 1, 3, 8, & 8.pdf	Action: This is the first year this measure has been used. Review usefulness of this measure with Graduate Curriculum Committee to determine future of this measure. (09/26/2019)
SL: Didactic - NU530 Population Health Issues Paper Target: 95% of students will achieve 73% or better on Population Health Issues Paper Timeframe: Annually Responsible Parties: Graduate Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes 96% (56/58) of students achieved 73% or better on the Population Health Issues Paper. (07/22/2019)	Action: To maintain an average of 95% or higher, continued instruction and explanations of paper expectations will be provided throughout the semester. Prompt responses to "Ask The Professor" will occur which often answers questions the students have about pieces of the paper assignment.

## **AU Outcome: MSN 8.0**

Measures	Results	Actions
		The measure and target remain appropriate for this MSN graduate outcome. (07/22/2019)
AD: Survey - MSN Alumni Survey How well MSN graduates perceive that their MSN education prepared them to integrate patient-centered and culturally responsive strategies into the delivery of clinical prevention, health promotion, and population-focused services (very poorly, poorly, well, very well). Target: 75% of respondents will report feeling well or very well prepared to integrate patient- centered and culturally responsive strategies into the delivery of clinical prevention, health promotion, and population-focused services. Timeframe: Annually Responsible Parties: Evaluation & Study Committee	<b>Reporting Year:</b> 2018 - 2019 (Year 1) <b>Target Met:</b> Yes  > 75% of 2017-2018 alumni survey respondents (n = 14) reported their MSN education prepared them well (42.86%) or very well (42.86%) to integrate patient-centered and culturally responsive strategies into the delivery of clinical prevention, health promotion, and population-focused services.  >90% of 2016-2017 alumni survey respondents (n = 23) reported their MSN education prepared them well (56.52%) or very well (39.13%) to apply quality principles to promote patient safety and positive individual and systems outcomes.  These results are similar to the results of the survey of 2016-2017 MSN program graduates. Target has been consistently met or exceeded. (03/04/2020)	Action: Survey 2018-2019 alumni during 2020. Compare responses and monitor for favorable and unfavorable trends. (03/04/2020)
AD: Survey - MSN Alumni Survey How often MSN graduates integrate patient-centered and culturally responsive strategies into the delivery of clinical prevention, health promotion, and population-focused services (not at all, rarely, some of the time, most of the time). Target: 75% of respondents will report integrating patient-centered and culturally responsive strategies	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  >75% of 2017-2018 alumni survey respondents (n = 14) reported that some of the time (28.57%) or most of the time (71.43%) they perform this outcome in their current professional practice.  100% of 2016-2017 alumni survey respondents who answered this question (n = 22) reported that some of the time (4.55%) or most of the time (95.45%) they perform this outcome in their current professional practice.  Survey results demonstrate graduate perceptions consistently achieve or exceed of target.	Action: Survey 2018-2019 alumni during 2020. Compare responses and monitor for favorable and unfavorable trends. (03/04/2020)

#### **AU Outcome: MSN 8.0**

Measures	Results	Actions
into the delivery of clinical prevention, health promotion, and population-focused services some or most of the time.  Timeframe: Annually Responsible Parties: Evaluation & Study Committee	(03/04/2020)	
AD: Survey - MSN Alumni Employer SurveyHow well employers perceive that MSN graduates integrate patient-centered and culturally responsive strategies into the delivery of clinical prevention, health promotion, and population-focused services (very poorly, poorly, well, very well).  Target: 75% of respondents will report that MSN graduates integrate patient-centered and culturally responsive strategies into the delivery of clinical prevention, health promotion, and population-focused services well or very well.  Timeframe: Annually Responsible Parties: Evaluation & Study Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  100% of employers who responded to the survey (n = 5) reported the MSN program graduate performs this outcome well (20%) or very well (80%).  100% of employers who answered this item on the survey of 2015-2016 and 2016-2017 MSN graduate employers (n = 6) reported the graduate performs this outcome very well in current professional practice.  These results and the results of previous employer surveys indicate employers' perceptions of the Allen College MSN graduate consistently meet or exceed the target. (03/05/2020)	Action: Survey employers of 2018-2019 graduates during 2020. Compare responses and monitor for favorable and unfavorable trends. (03/05/2020)
AD: Survey - MSN Alumni Employer SurveyHow often employers perceive that MSN graduates integrate patient-centered and culturally responsive strategies into the delivery of clinical prevention, health promotion, and population- focused services (not at all, rarely,	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  >75% of employers who responded to the survey (n = 5) reported the MSN program graduate performs this outcome some (40%) or most of the time (60%). This result is consistent with previous alumni surveys.  100% of employers who answered this item on the survey of 2015-2016 and 2016-2017 MSN graduate employers (n = 7) reported the graduate performs this outcome most of the time in	Action: Survey employers of 2018-2019 graduates during 2020. Compare responses and monitor for favorable and unfavorable trends. (03/05/2020)

College Goal 1 - Prepare outstanding healthcare practitioners who are committed to lifelong learning.

# Program (Nursing) - Master of Science in Nursing (MSN)

#### **AU Outcome: MSN 8.0**

Measures	Results	Actions
some of the time, most of the time). Target: 75% of respondents will report that MSN graduates integrate patient-centered and culturally responsive strategies into the delivery of clinical prevention, health promotion, and population-focused services some or most of the time. Timeframe: Annually Responsible Parties: Evaluation & Study Committee	current professional practice.  These results and the results of previous employer surveys indicate employers' perceptions of how often the Allen College MSN graduate performs the outcome in current professional practice consistently meet or exceed the target. (03/05/2020)	

College Goal 2 - Develop and implement accessible academic programs of excellence that are responsive to the workforce needs of Iowa and the nation.

## **Admin - Teaching & Learning Committee**

**AU Outcome: TLC 1.0** 

Allen College courses will reflect Quality Matters standards.

Outcome Status: Active Start Date: 07/01/2015

Measures	Results	Actions
SL: Survey - Mean rating of all 8 items on course evaluation tool completed by students (1.0 = strongly disagree, 2.0 = disagree, 3.0 = agree, 4.0 = strongly agree). The mean rating of each item will be averaged for an overall mean rating for each course.  Target: 100% of courses will have a mean rating for all 8 items of at least a 3.0 (agree) on a 4.0 (strongly agree) scale.  Timeframe: Health Sciences courses based on evaluation cycle. Nursing courses based on curriculum course review schedule.  Responsible Parties: TLC Chair and Committee Members  Related Documents: Allen College Course Evaluation  Criteria.pdf	Reporting Year: 2018 - 2019 (Year 1) Target Met: No 98 % of the Allen College courses reviewed during this cycle achieved a 3.0 or above on the eight-item course evaluation tool.  100% 10/10 of Graduate Nursing courses reviewed achieved a 3.0 or above, compared to 2017-2018 where 86% (6/7) of courses reviewed had achieved a 3.0 or above. This demonstrates improvement.  100% (43/43) of Health Science Undergraduate courses reviewed achieved a 3.0 or above compared to 2017-2018 where 96% (44/46) of courses reviewed had achieved a 3.0 or above. This demonstrates improvement.  2018-2019 DMS 100% (14/14) MLS 100% (11/11) ASR 100% (7/7) PH 100% (11/11)  94% (29/31) of Graduate Health Science courses reviewed achieved a 3.0 or above compared to 2017-2018 where 94% (30/32) of courses reviewed had achieved a 3.0 or above. This demonstrates no improvement, but no decline in performance.  2018-2019 OT 96% (22/23) EdD 88% (7/8)  Teaching and Learning Committee coordinated with Curriculum Committee to identify course review schedule. (04/14/2020) Related Documents:  TLC CAP data 1.0 2018-2019.xlsx	Action: TLC will keep CAP on agenda under current business to address progress towards CAP data collection and CAP completion during each meeting. Additionally, TLC will work to gather evaluations at the end of the academic year, prior to the beginning of the next (prior to instructor end of contract).TLC will share results of evaluation with Dean of Nursing and Dean of Health Science.

College Goal 2 - Develop and implement accessible academic programs of excellence that are responsive to the workforce needs of Iowa and the nation.

## **Admin - Teaching & Learning Committee**

#### **AU Outcome: TLC 2.0**

Allen College courses will reflect Chickering and Gamson's 7 principles of good teaching/education practice.

Outcome Status: Inactive Start Date: 05/08/2017

Measures	Results	Actions
SL: Survey - Mean rating of 7 items on instructor evaluation tool (1.0 = strongly disagree, 2.0 = disagree, 3.0 = agree, 4.0 = strongly agree). The mean rating of each item will be averaged for an overall mean rating for each course.  Target: 100% of courses will have an overall mean rating at least 3.0.  Timeframe: Health Sciences courses based on evaluation cycle.  Nursing courses based on curriculum course review schedule.  Responsible Parties: TLC Chair and Committee Members  Related Documents:  Allen College Instructor Evaluation Criteria.pdf	Reporting Year: 2018 - 2019 (Year 1)  Target Met: No  95% of the Allen College courses reviewed during this cycle achieved a 3.0 or above on the seven-item instructor evaluation tool.  100% 10/10 of Graduate Nursing courses reviewed achieved a 3.0 or above, compared to 2017-2018 where 100% (7/7) of courses reviewed had achieved a 3.0 or above. This demonstrates no decline.  95% (41/43) of Health Science Undergraduate courses reviewed achieved a 3.0 or above compared to 2017-2018 where 96% (44/46) of courses reviewed had achieved a 3.0 or above. This demonstrates slight decline in performance.  2018-2019  DMS 93% (13/14)  MLS 100% (11/11)  ASR 100% (7/7)  PH 91% (10/11)  94% (29/31) of Graduate Health Science courses reviewed achieved a 3.0 or above compared to 2017-2018 where 81% (26/32) of courses reviewed had achieved a 3.0 or above. This demonstrates improvement.  2018-2019  OT 96% (22/23)  EdD 88% (7/8)  Teaching and Learning Committee coordinated with Curriculum Committee to identify course review schedule.  Data was shared with Deans of Nursing and Health Science for review. (04/14/2020)  Related Documents:  TLC CAP data 2.0 2018-2019.xlsx	Action: No action was proposed for the 2019-2020 academic year. TLC will keep CAP on agenda under current business to address progress towards CAP data collection and CAP completion during each meeting. Additionally, TLC will work to gather evaluations at the end of the academic year, prior to the beginning of the next (prior to instructor end of contract).  TLC will share results of evaluation with Dean of Nursing and Dean of Health Science. (04/14/2020) (04/14/2020)  Follow-Up: The Teaching & Learning Committee voted in spring of 2020 to omit this measure. No rationale was documented in the committee's minutes. In the past, there have been concerns expressed by faculty when they are asked to share the results of their evaluations so that this assessment item can be measured. (10/06/2020)

College Goal 2 - Develop and implement accessible academic programs of excellence that are responsive to the workforce needs of Iowa and the nation.

## **Admin - Teaching & Learning Committee**

**AU Outcome: TLC 2.0** 

## Program (HS) - Associate of Science in Radiography (ASR)

**AU Outcome: ASR 1.1** 

Students will practice proper radiation protection

Measures	Results	Actions
SL: Clinical evaluation tool - RA: 135 Competency Testing/CCE Part II, numbers 5, 7, 9, 15, 17 Target: Average score of >= 3 (0-4 pt. scale) Timeframe: Level 1-Fall Semester Responsible Parties: Lab Instructor/ Program Faculty/ Health Sciences(HS) Faculty Org. Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  2018 = 3.90 (N=13) Benchmark met  Previous years  2017=3.97(n=14)  2016 = 3.89 (n=13)  2015 = 3.95 (n=16)  2014 = 3.97 (n=17)  Students continue to exceed benchmark. The importance of collimation, exposure factors and radiation protection are emphasized and practiced in each lab. Students are practicing radiation protection and demonstrating clinical competence. (07/02/2019)	Action: To continue to exceed the target/ benchmark instructors will continue to have student practice radiation protection in each lab and in the clinical settings. The program will continue to assess for trends with each new cohort. (07/02/2019)
SL: Clinical evaluation tool - RA: 275 Final Clinical Competency Testing/ CCE Part II, numbers 5,7,9,15,17  Target: Average score of >= 3 (0-4 pt. scale) Timeframe: Level II-Spring Semester Responsible Parties: Clinical Instructors/Program Faculty/HS Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  2019 = 4 (n=12)  Benchmark met  Previous data:  2018 = 3.96 (n=12)  2017 = 3.96 (n=15)  2016=3.96 (n=17)  2015=3.96 (n=15)  2014=3.99 (n=17)	Action: To continue to exceed the target/benchmark the instructors will provide various methods of radiation protection and reinforce this throughout the program.  Students will continue to have access to an appropriate exam volume in a variety of settings to prepare them for their final competencies. (07/02/2019)
	This year's cohort received an average score of 4 on every line item assessed. Students continue to exceed the benchmark. The various methods of radiation protection are emphasized and reinforced throughout the program. Students also have access to an appropriate exam volume in a variety of settings which helps prepare them for their final	Action: This year's cohort received an average score of 4 on every line item assessed. Students continue to exceed the benchmark. The

## Program (HS) - Associate of Science in Radiography (ASR)

### **AU Outcome: ASR 1.1**

Measures	Results	Actions
	competencies. No changes recommended (07/02/2019)	various methods of radiation protection are emphasized and reinforced throughout the program. Students also have access to an appropriate exam volume in a variety of settings which helps prepare them for their final competencies. No changes recommended (07/02/2019)

**AU Outcome: ASR 1.2** 

Students will apply correct positioning skills

Measures	Results	Actions
SL: Didactic - RA: 145 Certification Testing/ Part I, numbers 3,12,14,15  Target: Average score of >= 3. (0-4 pt. scale) Timeframe: Level I-Spring Semester Responsible Parties: Clinical Instructors/ Program Faculty/ HS Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  2019 = 3.88 (n=13)  Benchmark/Target met  Previous data:  2018 = 3.86 (n=14)  2017 = 4 (n=12)  2016 = 3.96 (n=16)  2015=3.79 (n=17)  2014=3.86 (n=15)  Students continue to exceed benchmark. The students demonstrated the ability to apply correct positioning skills. The students demonstrated knowledge of positioning in relation to their level of placement in the program. (07/03/2019)	Action: Course instructors recommend continuing to assess this item since certification testing is completed at various clinical sites and with different clinical instructors. (07/03/2019)
SL: Didactic - RA: 265 Certification Testing/Part I, numbers 3,12,14,15	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes 2018=3.95(n=12)	Action: The instructors will continue to assess the students' positioning skills on more advanced

# Program (HS) - Associate of Science in Radiography (ASR)

### **AU Outcome: ASR 1.2**

Measures	Results	Actions
Target: Average score of >= 3. (0-4 pt. scale) Timeframe: Level II-Fall Semester Responsible Parties: Clinical Instructors/ Program Faculty/ HS Curriculum Committee	Benchmark/Target met. Previous data: 2017=3.90(n=12) 2016=3.97(n=15) 2015=3.99 (n=17) 2014= 3.96 (n=15) Average scores exceed benchmark. Students demonstrated clinical competence by applying correct positioning skills. This is the final semester that certifications are completed in the program. This was the second cohort to exclude ankle, finger, foot, hand, and wrist procedures. The program made this change to ensure the procedural exam difficulty correlated with the student's level in the program. (07/03/2019)	procedures appropriate to their level in the program. (07/03/2019)

## **AU Outcome: ASR 2.1**

Students will demonstrate effective communication skills in the clinical setting

Measures	Results	Actions
SL: Clinical evaluation tool - RA:135 Clinical Instructor/ Preceptor Evaluations/ Numbers 3, 6, 10,11  Target: Average score >= 3.5 (0-4 pt. scale) Timeframe: Level I-Fall Semester Responsible Parties: Clinical Instructors/ Program Faculty/ HS Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes 2018 3.67 (n=13)  Benchmark/Target met.  Previous data: 2017 3.68 (n=14) 2016 3.56 (n=13) 2015 3.81 (n=16) 2014 3.8 (n=17)  The students' average scores had slight increases in two areas of the performance criteria; patient care and multicultural diversity and decreases in two areas; interpersonal relationships and age appropriate care. All student evaluations are completed on Trajecsys by the clinical instructors. Students have immediate access to the completed evaluations on Trajecsys. Students continue to exhibit effective communication skills in the clinical environment. (07/03/2019)	Action: To continue to provide immediate access and feedback to students these evaluations will be completed on Trajecsys by the clinical instructors. (07/03/2019)

# Program (HS) - Associate of Science in Radiography (ASR)

### **AU Outcome: ASR 2.1**

Measures	Results	Actions
SL: Clinical evaluation tool - RA:275 Clinical Instructor/ Preceptor Evaluations/Numbers 3, 6,10,11  Target: Average score >= 3 (0-4 pt. scale) Timeframe: Level II -Spring Semester Responsible Parties: Clinical Instructors/ Program Faculty/ HS Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  2018-2019-3.9 (n=12)  Target/benchmark met.  Previous data:  2017-2018- 3.78 (n=12)  2016-2017 - 3.95 (n=15)  2015-2016 - 3.97 (n=17)  2014-2015 - 3.95 (n=15)  This result is an increase compared to the previous year. The student scores were higher than the previous year in areas of; patient care, interpersonal relationships, multicultural diversity and age appropriate care. (07/03/2019)	Action: To continue to exceed the target/benchmark for this measure the clinical instructors/preceptors in the clinical setting will continue to provide excellent instruction and supervision of students to assess their communication skills. (07/03/2019)
SL: Clinical evaluation tool - RA:135 Clinical Competency Evaluation/ Part I – Number 4 Part III- Numbers 1,3,6-8  Target: Average score >= 3 (0-4 pt. scale) Timeframe: Level I-Fall Semester Responsible Parties: Clinical Instructor/Program Faculty/ HS Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  2018 = 3.95 (n=13)  Benchmark/Target met.  Previous data:  2017=3.98 (n=14)  2016=3.92 (n=13)  2015=3.99 (n=16)  2014=3.98 (n=17)  Students continue to exceed the benchmark. The students are demonstrating communication skills reflective of their level in the program. (07/03/2019)	Action: To continue to exceed this measure the clinical instructors will continue to provide effective instruction, supervision and feedback to the students in their clinical settings. (07/03/2019)
SL: Clinical evaluation tool - RA:275 Final Clinical Competency Evaluation/ Part I – Number 4 Part III- Numbers 1,3,6-8  Target: Average score >= 3.5 (0-4 pt. scale)	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes 2019 = 4 (n=12)  Benchmark/Target met.  Previous data: 2018=3.98 (n= 12) 2017=4 (n=15) 2016=4 (n=17)	Action: The program will continue to provide students with access to an appropriate exam volume in a variety of settings to prepare them for their final competencies. (07/03/2019)

## Program (HS) - Associate of Science in Radiography (ASR)

### **AU Outcome: ASR 2.1**

Measures	Results	Actions
Timeframe: Level II- Spring Semester Responsible Parties: Clinical Instructor/ Program Faculty/ HS Curriculum Committee	2015=3.99 (n=15) 2014=3.99 (n=17) This year's cohort received an average score of 4 on every line item assessed. Students continue to exceed the benchmark. Students have access to an appropriate exam volume in a variety of settings which helps prepare them for their final competencies. (07/03/2019)	

**AU Outcome: ASR 2.2** 

Students will practice written communication skills

Measures	Results	Actions
SL: Didactic - RA: 115 Patient Care Presentation Target: Average score of >= 85% Timeframe: Level I-Fall Semester Responsible Parties: RA: 115 Course Instructor/HS Faculty Org. Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  Results for fall 2018 98% (n=13)  Benchmark/Target met:  Previous data:  2017 98% (n=14)  2016 97% (n=13)  2015 98.01% (n=16)  2014 98.2% (n=17)  Students continue to demonstrate effective written communication skills. Two of the thirteen students had deductions on the title page; not double spacing and bolding of the title of the paper. Five of the thirteen students had deductions on the reference page. These deductions included: no hanging indent, not having correct spacing in the paper, not having correct margins, bullets when listing the references, and formatting of the reference page. Under the formatting portion of the paper evaluation; the deductions were; not including a running head, no page numbers, and not indenting when beginning a new paragraph. The course instructor communicates the paper requirements on the first day of the semester. On the first day of class, the instructor goes onto the Allen College website and displays to all students where the academic resources page is located and the APA resources information for APA review. One student met with the course instructor to clarify formatting questions concerning the reference page. (07/03/2019)	Action: The course instructor will continue to communicate the paper requirements on the first day of the semester. The instructor will instruct students to the Allen College website and display to all students where the academic resources page is located and the APA resource information for APA review. (07/03/2019)

## Program (HS) - Associate of Science in Radiography (ASR)

### **AU Outcome: ASR 2.2**

Measures	Results	Actions
SL: Didactic - RA:258 Pathology Systems Presentation Target: Average score of >= 85% Timeframe: Level II-Fall Semester Responsible Parties: RA: 258 Course Instructor/ HS Faculty Org. Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes Results for fall 2018: 96% (n=12) Benchmark/Target met: Previous data 2017: 96% (n=12) 2016: 97% (n=15) 2015: 98.01% (n=16) 2014: 98.2% (n=17) Students continue to exhibit effective communication skills through written communication. Three of the twenty-four papers had deductions on the title page and seventeen had deductions on the reference page. Two papers had deductions in the accuracy and substance portion of the evaluation, not meeting the depth of the paper requirement by adequately covering the subject. Seven papers had deductions in the format portion of the paper, five papers didn't have correct margins, one paper had spelling errors and one paper was not double-spaced. Two of the students made the same errors on both of their papers. The course instructor discusses the paper requirements on the first day of class. The instructor reviewed the APA format and reminded students that the APA resources information is located on the Allen College website. Two students asked questions prior to their first paper presentation. They had questions about the structure of their paper and how to properly incorporate the radiographs into their presentation. The same two students reviewed their first paper with the instructor after their presentation to receive feedback and they were the only students that received 100% on both of their papers. (07/03/2019)	Action: The instructor will instruct students to the Allen College website and display to all students where the academic resources page is located and the APA resource information for APA review. (07/03/2019)

**AU Outcome: ASR 2.3** 

Students will demonstrate oral communication skills

Measures	Results	Actions
SL: Didactic - RA:258 Pathology Systems Presentation Target: Average score of >= 85%	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes Results for fall 2018: 99% (n=12)	Action: The course instructor will continue to communicate the paper requirements the first day of

## Program (HS) - Associate of Science in Radiography (ASR)

### **AU Outcome: ASR 2.3**

Measures	Results	Actions
Timeframe: Level II-Fall Semester Responsible Parties: RA: 258 Course Instructor/ HS Faculty Org. Committee	Benchmark/Target met Pervious data: 2017: 97% (n=12) 2016= 95% (n=15) 2015: 98.82% (n=17) 2014: 99.13% (n=15) Students continue to demonstrate effective oral communication skills. Five papers received deductions in the oral presentation portion of the evaluation. Four of the papers did not include information discussing the exposure factors/exposure to ionizing radiation for the exam and two papers had deductions for not explaining why they selected the pathology for their paper. Two papers are required for this course. The paper requirements are discussed the first day of class. (07/03/2019)	class. This measure will be continued to be assessed with each new cohort. (07/03/2019)
SL: Didactic - RA: 115 Patient Care Presentation Target: Average score of >= 85% Timeframe: Level I-Fall Semester Responsible Parties: RA: 115 Course Instructor/HS Faculty Org. Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  2019=98% (n=19)  2018=99% (n=13)  2017 =99% (n=14)  2016=99% (n=13)  2015=94.53% (n=16)  Four students had deductions in their oral presentation portion due to voice level and words not stated correctly during the presentation. (07/27/2020)	Action: To meet or exceed the target for this measure during the 2020-2021 academic year, the course instructor will continue to discuss the paper requirements with the students. Also, encourage students to practice reading their papers before the due date to assist them in demonstrating effective oral communication skills. (07/27/2020)
	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes Results for fall 2018: 99% (n=13) Benchmark met Previous data: 2017: 99% (n=14) 2016: 99% (n=13) 2015: 94.53% (n=16)	Action: The course instructor will continue to explain the paper requirements the first day of class. This measure will be continued to be assessed with each new cohort. (07/03/2019)

## Program (HS) - Associate of Science in Radiography (ASR)

### **AU Outcome: ASR 2.3**

Measures	Results	Actions
	2014: 100% (n=17) Two students had deductions in the area of voice level was easily heard, due to using a soft voice and reading the paper very quickly. One student had a deduction in words were stated correctly area of the evaluation. The course instructor explains the paper requirements the first day of class. Students continue to demonstrate effective communication skills. (07/03/2019)	

**AU Outcome: ASR 3.1** 

Students will appropriately critique radiographic images

Measures	Results	Actions
SL: Didactic - RA: 255 Radiographic image analysis worksheets Target: Average score of >= 80% Timeframe: Level II-Summer Semester  Responsible Parties: RA: 255 Course Instructors/ Program Faculty/HS Faculty Org. Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  2018 = 93.75% (n=12)  Benchmark/Target met.  Previous data:  2017=87.75% (n=12)  2016: 90.19% (n=16)  2015: 89.88% (n=17)  2014: 89.13% (n= 15)  This cohort achieved the highest-class average since 2014. One student in this cohort chose to submit low scores for the first and last worksheets. These worksheets are open book, open note, and are not timed. The worksheets allow two attempts with the scores averaged. It appears this particular student did not choose to take the time to read and carefully answer each question for two of the five chapters. This student was counseled after the first submission of a low grade. The only change made to this assessment item for 2018 was an extension of the due date for the shoulder chapter. This allowed two weeks for this more difficult chapter compared to one week in prior years. Overall, students continue to demonstrate an ability to critique radiographic images. (07/03/2019)	Action: The course instructor will continue the extension of the due date for the shoulder chapter. This will allow two additional weeks for this more difficult chapter. (07/03/2019)
SL: Didactic - RA: 265 Radiographic image analysis worksheets	Reporting Year: 2018 - 2019 (Year 1)	Action: To continue to exceed the

## Program (HS) - Associate of Science in Radiography (ASR)

### **AU Outcome: ASR 3.1**

Measures	Results	Actions
Target: Average score of >= 80% Timeframe: Level II- Fall Semester  Responsible Parties: RA: 265 Course Instructors/ Program Faculty/HS Faculty Org. Committee	Target Met: Yes 2018 = 93.33% (n=12) Benchmark/Target met. Previous data: 2017 = 88.83% (n=12) 2016 = 91.66% (n=15) 2015= 90.71% (n=17) 2014= 93.13% (n=15) This year's cohort performed exceptionally well in completing this assignment. Students continue to demonstrate the ability to appropriately critique radiographic images. (07/03/2019)	benchmark/target for this measure the course instructor will provide the appropriate radiographs to critique and effective feedback. (07/03/2019)

**AU Outcome: ASR 3.2** 

Students will demonstrate ability to practice critical thinking

Measures	Results	Actions
SL: Didactic - RA:145 Scientific Exhibit Evaluation Target: Average score of >= 80% Timeframe: Level I- Spring Semester Responsible Parties: RA: 145 Program Faculty/ HS Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  2019 = 87% N = 9 posters (13 students)  Benchmark/Target met  Previous data:  2018 = 91.5% N= 8 posters (14 students)  2017 = 92.14% N= 7 posters (12 students)  2016 = 92.6% N= 10 posters (16 students)  2015 = 96.5%, N= 11 posters (17 students)  2014= 94%, N = 11 posters (15 students)  Scores for 2019 continue to demonstrate the student's ability to practice critical thinking skills when developing their scientific exhibits. Most grade reductions occurred in line item #8 "grammar, spelling, and punctuation" and # 6 the visually attractive category on the evaluation form. Some also received deductions for #7 "easily understood in a maximum of three minutes" since there was too much text. Average scores continue to exceed the	Action: To continue to exceed the benchmark for this measure the course instructors will provide the effective feedback to the students on their exhibits. (07/03/2019)

## Program (HS) - Associate of Science in Radiography (ASR)

### **AU Outcome: ASR 3.2**

Measures	Results	Actions
	benchmark. (07/03/2019)	
SL: Exam/Quiz - Standardized - RA: 203B Corectec exams Target: > 80% of the students will achieve a score of 70 or greater on one of the four exams. Timeframe: Level II- Spring Semester Responsible Parties: RA: 203B Course Instructor/HS Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  2019 = 100% (n=12)  Benchmark/Target met.  Previous data:  2018 = 100% (n=12)  2017 = 93% (n=15)  2016 = 100% (n=17)  2015 = 93% (n=15)  2014 = 76% (n=17)  This was the second cohort for implementation of the 2% reduction in the overall course grade for each percentage point below 70 on the four Corectec exam average score, an action plan from 2016-2017. This may have provided additional incentive for the students to put forth their best effort on every exam attempt. The ASR Program curriculum continues to prepare the students for mock board exams. Students continue to demonstrate the ability to practice critical thinking. (07/03/2019)	Action: Upon further review of this grade reduction policy, the instructor reduced the % reduction to 1% and will reevaluate in 2020. (07/03/2019)

**AU Outcome: ASR 3.3** 

Students will be able to critically think in the clinical setting

Measures	Results	Actions
SL: Clinical evaluation tool - RA:145 Clinical Instructor/ Preceptor Evaluations/Numbers 2,4,7,8  Target: Average score >= 3. (0-4 pt. scale) Timeframe: Level I-Spring Semester Responsible Parties: RA: 145 Course Instructor/HS Faculty Org.	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes 2019 3.36 (n=13)  Target/benchmark met.  Previous data: 2018 - 3.53 (n=14) 2017 - 3.63 (n=12) 2016 - 3.63 (n-16) 2015 - 3.67 (n=17)	Action: To continue to meet or exceed the target/benchmark for this measure during the 2019-2020 academic year, clinical instructors/preceptors in the clinical setting will continue to provide excellent instruction and supervision of students to assess

## Program (HS) - Associate of Science in Radiography (ASR)

### **AU Outcome: ASR 3.3**

Measures	Results	Actions
Committee	This result is a decline compared to previous years reported. The student scores were lower than the previous year in areas of; application of knowledge, ability to follow directions, self-image for level in the ASR program, and composure and adaptability (07/03/2019)	their critical thinking skills. (07/03/2019)
SL: Clinical evaluation tool - RA:265 Clinical Instructor/ Preceptor Evaluations/Numbers 2,4,7,8  Target: Average score >= 3. (0-4 pt. scale) Timeframe: Level II- Fall Semester Responsible Parties: RA: 265 Course Instructors/HS Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes 2018 3.81 (n=12) Target/benchmark met Previous data: 2017 3.79 (n=12) 2016 3.86 (n=15) 2015 3.81 (n=17) 2014 3.75 (n=15) The student's average scores increased in three performance criteria areas; application of knowledge, ability to follow directions, and self-image for level in the ASR program. There was a slight decrease in the area of composure and adaptability. All student evaluations are completed on Trajecsys by the clinical instructors. Students have immediate access to their evaluations on Trajecsys. Students continue to be able to critically think in the clinical setting. (07/03/2019)	Action: To continue to meet or exceed the target/benchmark for this measure during the 2019-2020 academic year, clinical instructors/preceptors in the clinical setting will continue to provide excellent instruction and supervision of students to assess their critical thinking skills. (07/03/2019)

#### **AU Outcome: ASR 4.1**

Students will integrate leadership skills and construct professional practices

Measures	Results	Actions
SL: Service - RA:135 Community Service/Service Learning Evaluation Target: Average score of >= 80% Timeframe: Level I-Fall Semester Responsible Parties: RA: 135 Course Instructors/HS Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes 2018: 83.69% (n=13)  Benchmark met  Previous data: 2017: 94.78 (n=14) 2016: 72% (n=13)	Action: The course instructors will make a few editorial changes to the assignment instructions for emphasis and clarification. (07/03/2019)

## Program (HS) - Associate of Science in Radiography (ASR)

### **AU Outcome: ASR 4.1**

Measures	Results	Actions
	2015: 92.56% (n=16) 2014: 97.94% (n=17) The majority of point deductions occurred in the overall writing and the research categories of the assessment rubric. Some students did not answer all questions or did not provide any citations in their paper to evidence that they researched the organization. All students performed service learning through a variety of organizations. Students demonstrated leadership skills and professionalism through their involvement in service learning activities. (07/03/2019)	
SL: Service - RA: 265 Community Service/Service Learning Evaluation Target: Average score of >= 80% Timeframe: Level II-Fall Semester Responsible Parties: RA: 265 Course Instructors/HS Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: No 2018: 76.75% (n=12) Benchmark not met.  Previous data: 2017: 93.33% (n=12) 2016: 93.4% (n=15) 2015: 82.47% (n=17) 2014: 99.13% (n=15)  Two students in this cohort attempted to submit hours that were not performed during the offering of this course. These students received half of the possible points. The assignment instructions did state that all service hours must be completed during the offering of this course. Some students provided limited and below average reflection statements resulting in point deductions in the research and writing categories of the assessment rubric. One student did not follow the instructions to provide evidence of participation as part of their paper resulting in a 10% total grade reduction. (07/03/2019)	Action: The course instructors will make a few editorial and organizational changes to the assignment instructions in an attempt to better emphasize and clarify the expectations for the assignment. (07/03/2019)

**AU Outcome: ASR 4.2** 

Students will practice professionalism

Measures	Results	Actions
SL: Clinical evaluation tool - RA:135		

## Program (HS) - Associate of Science in Radiography (ASR)

### **AU Outcome: ASR 4.2**

Measures	Results	Actions
Clinical Instructor/Preceptor Evaluations Numbers 1,5,9,12,13  Target: Average score >= 3 (0-4 pt. scale) Timeframe: Level I- Fall Semester Responsible Parties: Clinical Instructors/ Program Faculty/HS Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes 2018 - 3.68(n=13) Benchmark met.  Previous data: 2017 - 3.68(n=14) 2016 - 3.6 (n=13) 2015 - 3.83(n=16) 2014 - 3.80(n=17)  The students' average scores had a slight increase in two areas; appearance and ethical and professional behaviors. The students' initiative score remained the same and a slight decrease in organization of assignments and policies and procedures. All student evaluations are completed on Trajecsys by the clinical instructors. Students have immediate access to the completed evaluations on Trajecsys. Students continue to practice professionalism in the clinical environment. (07/03/2019)	Action: Clinical instructors will continue to provide effective and timely feedback to students. (07/03/2019)
SL: Clinical evaluation tool - RA:275 Clinical Instructor/Preceptor Evaluations Numbers 1,5,9,12,13  Target: Average score >= 3 (0-4 pt. scale) Timeframe: Level II-Spring Semester Responsible Parties: Clinical Instructors/ Program Faculty/HS Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes 2018-2019- 3.83 (n=12)  Target/benchmark met.  Previous data: 2017-2018 3.76 (n=12) 2016-2017 3.96 (n=15) 2015-2016 3.98 (n=17) 2014-2015 3.91 (n=15)  This result is an increase compared to the previous year. The student scores were lower in only one area which was organization of assignments and higher in areas of initiative,	Action: To continue to meet or exceed the target/benchmark for this measure during the 2019-2020 academic year, clinical instructors/preceptors in the clinical setting will continue to provide excellent instruction and supervision of students to access their professionalism. (07/03/2019)

# Program (HS) - Diagnostic Medical Sonography (DMS)

**AU Outcome: DMS 1.1** 

# Program (HS) - Diagnostic Medical Sonography (DMS)

### **AU Outcome: DMS 1.1**

Students will show knowledge of ultrasound transducers

Measures	Results	Actions
SL: Didactic - Ultrasound Transducer Exam  Target: Students will receive an average score of >= 80% Timeframe: Annually  Responsible Parties: Program Chair HS Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  Spring 2019 100% of students received score = 80% (n=6) (scores: 91.3%-98%) Scores were consistent with results of prior cohorts.  Spring 2018 scores 100% of students received score = 80%.  Spring 2017 scores 100% of students received score = 80%.  Score Ave:  Fall 2015 = 93.5(n=5)  Fall 2014-=90%(6),59%(1)  Fall 2013- 104.6%(n=7)  Fall 2012-92%(n=8)  Fall 2011-83.4%(n=5)  Fall 2010-100% (n=6)  (07/30/2019)	Action: Students achieved high scores. Faculty provided in class lecture and group tutoring session. Faculty will continue to provide additional learning experiences. To determine consistency of trend, no change in measurement tool for another cycle of data (07/30/2019)  Follow-Up: Tutoring sessions provided more time for topic review, opportunity for students/ faculty to ask/ answer questions (05/06/2020)
SL: Didactic - Students will construct transducer model  Target: Each student will receive a score of >= 80% Timeframe: Annually  Responsible Parties: Program Chair HS Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes Spring 2019 !00% of students scored >= 80% ( with all students scoring > 96%). These results are consistent with student's scores of previous year.  Spring 2018 100% of students scored >= 80% 2017 87% of students scored > 80% (07/30/2019)	Action: Students were required to construct a model of an ultrasound. Rubric was provided and students' scores based upon accuracy of information, creativity and craftsmanship. This course will continue to include topic lecture/discussion, graded homework assignments, and offer tutoring. This will continue to be course assignment. To determine consistency of trend, no change in measurement tool for another cycle of data (07/30/2019)  Follow-Up: The action plan

## Program (HS) - Diagnostic Medical Sonography (DMS)

### **AU Outcome: DMS 1.1**

Measures	Results	Actions
		identified course components that helped to improved student's knowledge level. (05/06/2020)

**AU Outcome: DMS 1.2** 

Students will apply correct scanning skills

Measures	Results	Actions
SL: Lab - Final Lab Practical  Target: Students will achieve an average score of >= 80%.  Timeframe: Didactic Level - Fall Semester  Responsible Parties: Program Faculty/ HS Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  Fall 2018 100% = 80% (range 87-92%) Scores are high. Results are consistent with scores of previous cohort.  Due to experiences of previous cohorts, faculty required students spend additional practice time in lab under faculty supervision. This activity is a good reflection of the students initiative and developing skill sets  Fall 2017 8/8 = 80% ( range 87%-96%)  Fall 2016 7/8 = 80%; 1/8 < 80%  Fall 2015 3/5 = 81.6 % 2/5 < 80% (N=5)  Fall 2014: 81.8%(N=6)  Fall 2013: 80% (N=6). Fall 2012: 92%(N=8)  Fall 2011: 83.4%.(N-5)  (07/30/2019)	Action: Faculty members will continue to provide instruction in areas of basic anatomy, sonographic anatomy, imaging techniques and instrumentation and protocols though demonstration, verbal and written instruction, individual and group image and technique review. Faulty will continue to require scanning sessions as well as offer additional scanning sessions supervised by various instructors Student outcomes will be assessed with the same target. (07/30/2019) Follow-Up: The action plan identified course components that helped to improved student's knowledge level. (05/06/2020)
SL: Lab - Practical Testing in Laboratory on Thyroid: Exam	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes	<b>Action:</b> This is an essential skill set thus will continue to be assessed.

## Program (HS) - Diagnostic Medical Sonography (DMS)

### **AU Outcome: DMS 1.2**

Measures	Results	Actions
Protocol Target: >=90% of students will pass lab practical on 1st attempt	Spring 2019 100% (9/9) All students achieved target. This is consistent with the results of the last four years. The action plan identified several options (additional scanning periods and review of images with each student) that were later implemented to assist the student in the	Action plan: DMS faculty will continue to provide feedback on scanning quality and techniques to
<b>Timeframe:</b> Didactic Level - Spring Semester	learning process. The students benefitted from additional sessions with faculty that included review of images, scanning techniques, and adherence to protocol.	the students as well as be available for extra scanning sessions beyond regular class time.
Responsible Parties: Program Faculty/HS Curriculum Committee	Spring 2018 100% (9/9) Spring 2017 100% (8/8) Spring 2016 100% (5/5) Spring 2015-83% (5/6) Spring 2014 83%(5/6)- Spring 2013-50% Spring 2012- 72% (07/30/2019)	To determine consistency of trend, no change in measurement tool for another cycle of data (07/30/2019)

### **AU Outcome: DMS 2.1**

Students will demonstrate effective communication skills in the imaging lab setting

Measures	Results	Actions
SL: Clinical evaluation tool - DMS:408 Clinical Instructor/Preceptor Evaluations 2, 3, 10, 11,17 Target: On a scale from 1-5, 5 being the highest rating, the average of all the responses >=4 Timeframe: Didactic Level-Fall Semester  Responsible Parties: Clinical Instructors/ Program Faculty/HS Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes Fall 2018 avg score 4.9 (n=9). Results remain consistent with previous years. The action plan identifies that faculty will obtain and assess feedback from clinical instructors at each site on a continuous basis.  Fall 2017 semester, avg score is 4.78 (n=7) Fall 2016 semester, avg score 4.80 (n=5) Fall 2015 semester avg score is 4.89 (n=5) Fall 2014- avg score 3.6 (n=8) Fall 2013- avg score-3.81 (n=8). (07/30/2019)	Action: Faculty will continue to obtain and assess feedback from clinical instructors. At each site visit, the program faculty will review evaluations with clinical instructors and the student. Any areas of concern will be identified and if necessary, a recommendation/plan of action for student improvement will be developed. To determine consistency of trend, no change in measurement tool for another cycle of data. (07/30/2019)
SL: Clinical evaluation tool - DMS:	Reporting Year: 2018 - 2019 (Year 1)	Action: Faculty will continue to

## Program (HS) - Diagnostic Medical Sonography (DMS)

### **AU Outcome: DMS 2.1**

Measures	Results	Actions
409 Clinical Instructor/Preceptor	Target Met: Yes	obtain and assess feedback from
Evaluations 2, 3, 10, 11, 17	Spring 2019 student's average score is 4.92 (n=7).	clinical instructors. At each site
	Scores remain high and are consistent with previous cohorts. The action plan identifies that	visit, the program faculty will
<b>Target:</b> On a scale from 1-5, 5 being	faculty will obtain and assess feedback from clinical instructors at each site on a continuous	review evaluations with clinical
the highest rating, the average of all	basis.	instructors and the student. Any
the responses >=4		areas of concern will be identified
Timeframe: Didactic Level - Spring	Sp2018 avg score 4.94 (n=7). Sp 2017 average score 4.78 (n=4). Sp 2016 avg score 4.96	and if necessary, a
Semester	(n=5). (07/30/2019)	recommendation/plan of action for
Beeneneihle Benties, Climical		student improvement will be
Responsible Parties: Clinical Instructors/ Program Faculty/HS		developed. To determine
Curriculum Committee		consistency of trend, no change in
Curriculum Committee		measurement tool for another
		cycle of data (07/30/2019)

#### **AU Outcome: DMS 2.2**

Students will successfully obtain patient history

Measures	Results	Actions
SL: Clinical evaluation tool - DMS:408 Clinical Instructor/Preceptor Evaluations Number 1 Target: On a scale from 1-5, 5 being the highest rating, the average of all the responses >=4 Timeframe: Didactic Level - Fall Semester  Responsible Parties: DMS:408 Course Instructor/Program Faculty/HS Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  Avg. 4.62 All students scored above 4 (n=9) Trend is consistent with previous years.  Students continue to demonstrate ability to communicate effectively with patient. The action plan identified continuity in assessing this area during clinicals at this time.  Fall 2017 avg 4.94  Fall 2016 avg 4.71  Fall 2015 avg 4.47 (07/30/2019)	Action: Faculty obtained and assessed feedback from clinical instructors. Faculty reviewed evaluations with clinical instructors and student at each site visit and identified /make recommendations for student improvement. Note: Previous action plan proposed that a new outcome or assessment tool would be considered. However, due to the additions of new student clinical sites, faculty wanted to continue this assessment item for

# Program (HS) - Diagnostic Medical Sonography (DMS)

### **AU Outcome: DMS 2.2**

Measures	Results	Actions
		one more year. Proposal for next year is to consider new outcome or assessment tool. (07/30/2019)

#### **AU Outcome: DMS 3.1**

Students will successfully analyze sonographic images

Measures	Results	Actions
SL: Didactic - Ultrasound Imaging Imaging Portfolio  Target: Each student will receive score >= 80%  Timeframe: Didactic Level - Fall Semester  Responsible Parties: Course Instructor/ Program Faculty/ HS Faculty Org. Committee	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes Fall 2018 6 of 6 (100%) met target scores:81-91% The score remains high and is consistent with previous years scores. (09/18/2019)	Action: This assignment was opportunity for faculty and students to identify what factors contribute to make an exam "diagnostic".  No change in measurement tool for another cycle to determine consistency of trend. (09/18/2019)
SL: Didactic - ABD II Thyroid Image Assessment Target: Each student will receive score >= 80% Timeframe: Annually-Spring semester Responsible Parties: ABD II Course Instructor	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes Spring 2019 100% (6/6) scored =80% Scores remain high and is consistent with scores of previous year Spring 2018 100% (8/8) scored =80% First year for measure; no previous action plan.  (09/18/2019)	Action: To continue to meet or exceed the target/benchmark for this measure during the 2019-2020 academic year, course will continue to included didactic content and labs to enhance student knowledge and skills for successful images assessment. As this is 2nd year using this tool, no change in measurement tool to determine consistency of trend

# Program (HS) - Diagnostic Medical Sonography (DMS)

### **AU Outcome: DMS 3.1**

Measures	Results	Actions
		(09/18/2019)

**AU Outcome: DMS 3.2** 

Students will be able to critically reflect on their performance in the clinical lab

Measures	Results	Actions
SL: Clinical evaluation tool - DMS:408 Student Self Evaluation  Target: On a scale from 0-4, 4 being the highest rating, the average of all the responses >= 3 Timeframe: Didactic Level - Fall Semester  Responsible Parties: Clinical Instructor/Program Faculty/HS Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes Fall 2018 Avg. 3.56 (n=9) Fall 2017:avg 3.2 9 (n=7)  This score is consistent with previous years. Students are able to effectively reflect on their performance in the clinical setting sufficiently for clinical staff. Results meet target, the results show a slight increase from previous year. Previous action plan proposes to continue to assess this item to assess if trend remain high (09/18/2019)	Action: Faculty will obtain and assess self-evaluation from students and compare with evaluation from clinical instructors. Faculty will review evaluations with student at each site visit and identity areas of concern and make recommendations/plan for student improvement. To determine consistency of trend, no change in measurement tool for another cycle of data (09/18/2019)  Follow-Up: The action plan identified course components that helped to improved student's knowledge and skill level in the clinical setting. (05/06/2020)
SL: Clinical evaluation tool - DMS:409 Student Self evaluation  Target: On a scale from 0-4, 4 being the highest rating, the average of all the responses >= 3 Timeframe: Didactic Level Spring	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes Spring 2019 Avg. 3.68(9) Compared to previous reporting years, scores remain high; target is consistently met Action plan proposed to continue with as an assessment tool. Spring 2108 avg 3.42 (n=7)	Action: Students evaluate themselves and submit written comments monthly. The students are putting forth the effort of critically evaluating themselves. This information is

# Program (HS) - Diagnostic Medical Sonography (DMS)

### **AU Outcome: DMS 3.2**

Measures	Results	Actions
Semester  Responsible Parties: Program Faculty/HS Curriculum Committee	. (09/18/2019)	compared to feedback from CI's to help the students learn and grow. To determine consistency of trend, no change in measurement tool for another cycle of data (09/18/2019)

**AU Outcome: DMS 4.1** 

Students will demonstrate professional growth or learning

Measures	Results	Actions
SL: Didactic - Innovations in Sonography - Presentation Target: Each student will receive score >= 90% Timeframe: Annually Responsible Parties: Program Faculty/HS Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  Spring 2019 100% of students receive score = 90% (5/5) All > 97% Scores increased from previous year.  Faculty will continue to require students to develop and give presentation on sonography issues/ topics.  Student outcomes will be assessed with the same target.  Spring 2018 89%% (8/9) received score = 90%;1 received score of 87%  (09/20/2019)	Action: Faculty will continue to require students to develop and give presentation on sonography issues/ topics. Faculty and student feedback will be helpful in assessing professional growth. Student outcomes will be assessed with the same target. (09/20/2019)
SL: Didactic - B- Sonography webinar Target: Each student will receive score >= 90% Timeframe: Annually Responsible Parties: Program Faculty/HS Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  Sp 2019 100% (6/6) received score = 90% Increase in number of students scoring >=90% in comparison to prior year. This is a useful activity to promote professional growth or learning. Faculty will continue to require students to view webinar as a course requirement. Student outcomes will be assessed with the same target.  Sp 2018 75% of students (6/8) received score = 90%	Action: Course requirement :Students were required to view webinar/PP OB topic. While watching the webinar, students were required to complete and worksheet that followed the webinar; then submit for grade. Activity assisted in remember key

## Program (HS) - Diagnostic Medical Sonography (DMS)

### **AU Outcome: DMS 4.1**

Measures	Results	Actions
	(09/20/2019)	points which promoted professional growth or learning. Faculty will continue to require students to view webinar as a course requirement. Student outcomes will be assessed with the same target.  (09/20/2019)
		Follow-Up: The action plan identified course components that helped to improved student's knowledge level and professional growth and/or learning. (05/06/2020)

**AU Outcome: DMS 4.2** 

Students will practice professionalism in the clinical lab setting

Measures	Results	Actions
SL: Clinical evaluation tool - DMS:408 Clinical Instructor/ Preceptor Evaluations Numbers 1,2,10-13,15-19	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  Fall 2018- student's avg score is 4.92 (n=9) Score remain consistently high as compared to previous cohort score.	Action: Faculty will obtain and assess feedback from clinical instructors. At each site visit, program faculty will review evaluations with clinical instructors
Target: On a scale from 1-5, 5 being the highest rating, the average of all the responses >=4 Timeframe: Didactic Level - Fall Semester Responsible Parties: DMS 408 Instructor/ Program Faculty/HS	Fall 2017- student's avg score is 4.8 (n=7)  Will follow the previous year's action plan to keep as a CAP measurement tool as it provides valuable information of student's clinical progress by semester and by cohort (09/20/2019)	and the student. Areas of concern will be identified and recommendation/plan of action for student improvement will be developed. To determine consistency of trend, no change in

## Program (HS) - Diagnostic Medical Sonography (DMS)

### **AU Outcome: DMS 4.2**

Measures	Results	Actions
Curriculum Committee		measurement tool for another cycle of data. (09/20/2019)
		Follow-Up: The action plan provided areas that helped to improve student performance in the clinical setting. (05/06/2020)
SL: Clinical evaluation tool - DMS:409 Clinical Instructor/ Preceptor Evaluations Numbers 1,2,10-13,15-19  Target: On a scale from 1-5, 5 being the highest rating, the average of all the responses >=4 Timeframe: Didactic Level - Spring Semester  Responsible Parties: DMS 408 Instructor/ Program Faculty/HS	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes Sp 2019 Avg. 4.93 (9) Score remain consistently high as compared to previous cohort score. Spring 2018 avg score is 4 Spring 2017 avg 4.83 (n=4) Will follow the previous year's action plan to keep as a CAP measurement tool as it provides valuable information of student's clinical progress by semester and by cohort (09/20/2019)	Action: Faculty will obtain and assess feedback from clinical instructors. At each site visit, program faculty will review evaluations with clinical instructors and the student. Areas of concern will be identified and recommendation/plan of action for student improvement will be developed. To determine consistency of trend, no change in measurement tool for another cycle of data. (09/20/2019)
Curriculum Committee		Follow-Up: The action plan provided areas that helped to improve student performance in the clinical setting. (05/06/2020)

## Program (HS) - Doctor of Education (Ed.D.)

#### **AU Outcome: EdD 1.1**

Students will demonstrate advanced educator competencies to enact increasingly complex faculty and leadership roles.

## Program (HS) - Doctor of Education (Ed.D.)

### **AU Outcome: EdD 1.1**

Measures	Results	Actions
SL: Didactic - EdD 720: Finance and Fiscal Management — Budget Assignment Target: Each student will receive an average score of >80% Timeframe: When course is taught (e.g. Spring 2017) Responsible Parties: Program Chair/ HS Grad Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1) Target Met: NA Course not offered. (07/26/2019)	
SL: Didactic - EdD 740: Today's Health Sciences Student: Trends, Issues and Challenges – Final Paper Target: 100% of students will receive a score of >= 85% Timeframe: When course is taught (e.g., Fall 2016) Responsible Parties: Program Chair/ HS Grad Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  100% of students received a score of >85%  Overall average score = 98.2% (55/56)  Target met. The purpose of this paper was for students to speak to the course objectives which included addressing trends within, the culture of, and solutions/adaptations for health sciences educational environments. This assignment was graded using a rubric based on the writing rubric developed for the EdD program. The single student was near completion of the EdD program and had good command of her writing skills.  This same assignment was used in 2016-2017 with students meeting target. No suggestions for an action plan were noted at that time. (08/01/2019)  Related Documents:  EdD 740 Final Paper Overview.pdf	Action: This assignment will be included the next time this course is taught with no revisions. Since this assignment is graded using a rubric, ensuring students understand the components for a successful submission should be discussed throughout the course as students prepare to write the paper. Subsequent sections will be assessed on this measurement tool to ensure the target continues to be met. (08/01/2019)
SL: Didactic - EdD 780: Integrating Evolving Technology in Health Professions EducationTechnology Transcendence Final Project Target: 100% of students will receive a score of >= 85% Timeframe: When course is taught	Reporting Year: 2018 - 2019 (Year 1)  Target Met: No 75% of students received a score of >85%  Overall average score = 86.5% (86.5/100)  New assessment item.	Action: Each section of the final project should be incorporated into the appropriate module in which the information is covered to ensure students fully understand the requirements. A series of formative assessment for feedback

## Program (HS) - Doctor of Education (Ed.D.)

### **AU Outcome: EdD 1.1**

Measures	Results	Actions
(e.g., Fall 2015, Fall 2018, etc.)  Responsible Parties: Program Chair/ HS Grad Curriculum Committee	This assignment was the terminal project for the course, encompassing all topics covered in the course. Students determined the professional goal they wanted to achieve by the end of the course using the T3 framework for technology incorporation as a guide. The student who had difficulty with this assignment lacked development with all sections of the rubric. (07/26/2019)	would aid in the development and fulfillment of this project. The measurement tool should be assessed again with a revised plan for this project and course. (07/26/2019)
SL: Didactic - EdD 790: Practicum in Health Professions Education – Let's Get Creative Assignment Target: Students will receive an average score of >80% Timeframe: When course is taught (e.g., Spring 2017) Responsible Parties: Program Chair/HS Grad Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1) Target Met: NA Course not offered. (07/26/2019)	
SL: Didactic - EdD 795: Practicum in Health Professions Education – Let's Get Creative Assignment Target: 100% of students will receive a score of >= 85% Timeframe: When course is taught Responsible Parties: Program Chair/HS Grad Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1) Target Met: NA Course not offered. (07/26/2019)	
SL: Didactic - EdD 700: Organizational Development and Change in Education – Final Paper Target: 100% of students will receive an average score of >=85% Timeframe: When course is taught (e.g., Fall 2017) Responsible Parties: Program Chair/HS Grad Curriculum	Reporting Year: 2018 - 2019 (Year 1) Target Met: NA Course not offered. (07/26/2019)	

## Program (HS) - Doctor of Education (Ed.D.)

### **AU Outcome: EdD 1.1**

Measures	Results	Actions
Committee		

### **AU Outcome: EdD 2.1**

Students will facilitate curriculum design, development, and evaluation of program and learner outcomes using evidence-based strategies.

Measures	Results	Actions
SL: Didactic - EdD 790: Practicum in Health Professions Education — Project Conferences Target: Students will receive an average score of >80% Timeframe: When course is taught (e.g., Spring 2017) Responsible Parties: Program Chair/HS Graduate APG Committee	Reporting Year: 2018 - 2019 (Year 1) Target Met: NA Course not offered. (08/01/2019)	
SL: Didactic - EdD 750: Curriculum Theory and Design in the Health Professions – Progressive Project Target: 100% of students will receive an average score of >=85% Timeframe: When course is taught Responsible Parties: Program Chair/HS Graduate APG Committee	Reporting Year: 2018 - 2019 (Year 1) Target Met: NA Course not offered. (08/01/2019)	
SL: Didactic - EdD 760: Pedagogy in Health Professions Education — Student Choice Activities Target: 100% of students will receive an average score of at least 90% across the three student choice activities Timeframe: When course is taught	Reporting Year: 2018 - 2019 (Year 1) Target Met: NA Course not offered. (08/01/2019)	

## Program (HS) - Doctor of Education (Ed.D.)

### **AU Outcome: EdD 2.1**

Measures	Results	Actions
(e.g., 2014, 2017, etc.)  Responsible Parties: Program  Chair/HS Graduate Curriculum  Committee		

### Program (HS) - Masters in Occupational Therapy (MS in OT)

## AU Outcome: MS in OT 2.1 Models of practice/frames of reference

Students will demonstrate accurate application of models of practice/frames of reference in clinical decision-making.

Measures	Results	Actions
SL: Didactic - OT 601 –Care Plan Assignment  Target: Minimum of 80% on care plan assignment Timeframe: When course taught (2nd Year, e.g., Fall 2016) Responsible Parties: Instructor/ OT Faculty /HS Grad Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1) Target Met: No 18/22 students did achieve at least a minimum of 80% on the care plan assignment in OT 601. The average score was 26.33 out of 30 points, which is equivalent to 87.76%. This is lower than last years 13/19 students who received an 80% or higher on the assignment. (03/16/2020)	Action: Students will be provided with more in-class practice opportunities focusing on writing a pediatric care plan based on a case study to better prepare them to complete this assignment individually. (03/16/2020)

## **AU Outcome: MS in OT 2.2 Collaborative Approaches**

Students will demonstrate collaborative approaches to decision-making with patients/clients/consumers/families.

Measures	Results	Actions
SL: Clinical - OT 602 - Treatment Note Target: Minimum of 80% on documentation note	Reporting Year: 2018 - 2019 (Year 1) Target Met: No 18 out of 22 students received at a minimum of 80% on this assignment, with a class average for this assignment of 26.7/30 or 89%. Four students out of the 22 did not achieve a score of 80% or higher. These results are down from last year with 21/23 students last year receiving	Action: The program plans to include more practice case studies, specifically, case studies that involve writing up a report as this

## Program (HS) - Masters in Occupational Therapy (MS in OT)

### **AU Outcome: MS in OT 2.2 Collaborative Approaches**

Measures	Results	Actions
Timeframe: When course taught (2nd Year, e.g., Fall 2016) Responsible Parties: Instructor/ OT Faculty /HS Grad Curriculum Committee	80% or higher. (03/16/2020)	assignment requires, be done in class to better prepare students to do this individual assignment. This practice should include a focus on collaboration with children/teens/families/team members in plan/intervention development using the Occupational Therapy Practice Framework's Occupational Profile. (03/16/2020)

### AU Outcome: MS in OT 4.1 Apply adaptive equipment

Students will demonstrate the ability to select and apply appropriate adaptive equipment/technology in treatment.

Measures	Results	Actions
SL: Didactic - OT 522 – Final Exam Video Case Target: Minimum score of 80% on final exam video case Timeframe: When course taught (1st Year, e.g., Fall 2016) Responsible Parties: Instructor/ OT Faculty /HS Grad Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1) Target Met: No 10/23 students achieved a minimum score of 80% or better. This is a change from last year when 17/19 students were successful at a level of 80% or better. (03/16/2020)	Action: Faculty will add additional opportunities in class to review cases that support practice in decision-making in the selection and application of adaptive equipment and technology. Faculty will also review the assignment and make appropriate changes to capture student learning for this topic. (03/16/2020)

## **AU Outcome: MS in OT 4.2 Modify Environments**

Students demonstrate the ability to modify environments to support best outcomes in care.

Measures Results	Actions
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## Program (HS) - Masters in Occupational Therapy (MS in OT)

### **AU Outcome: MS in OT 4.2 Modify Environments**

Measures	Results	Actions
SL: Didactic - OT 523 – Case Study Assignment  Target: Minimum score of 80% on case study assignment Timeframe: When course taught (1st Year, e.g., Summer 2016) Responsible Parties: Instructor/ OT Faculty /HS Grad Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes 22/22 students achieved a minimum score of 80% or greater on this assignment. This is an improvement to meet the goal from the last time the course was taught were 17/19 students achieved the minimum score of 80% or greater (03/16/2020)	Action: The faculty feels that the measure may no longer be the best measure of this goal and requests that this goal is measured using OT 612 OT Modalities & Modifications assignment titled Modifications Project. (03/16/2020)

## Program (HS) - Medical Imaging (MI)

### **AU Outcome: MI 2.1**

Students will demonstrate effective communication skills in the clinical setting.

Measures	Results	Actions
AD: Report - Internal - MI: 480 Clinical Instructor Evaluations Numbers 3, 6,10,11  Target: Average score >= 3 (0-4 pt. scale) Timeframe: Summer Semester Responsible Parties: Clinical Instructors/ Program Faculty/HS Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1) Target Met: NA No data available. (10/01/2019)	Action: No data available. (10/01/2019)
AD: Report - Internal - MI: 465 Clinical Instructor Evaluations Numbers 3, 6,10,11	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  2019 = 4 (n=1)	Action: The instructor will continue to use this measurement tool as it demonstrated that it is beneficial in

# Program (HS) - Medical Imaging (MI)

### **AU Outcome: MI 2.1**

Measures	Results	Actions
Target: Average score >= 3 (0-4 pt. scale) Timeframe: Summer Semester Responsible Parties: Clinical Instructors/ Program Faculty/ HS Curriculum Committee	No prior data available for comparison.  The student showed effective communication skills in all four performance criteria areas: patient care, interpersonal relationships, multicultural diversity, and age appropriate care. All clinical instructor evaluations are completed using the paper/pencil format. The clinical instructor discussed and reviewed the evaluation with the student during the last week of the course. (10/01/2019)	measuring effective communication skills within the clinical environment. (10/01/2019)

**AU Outcome: MI 2.2** 

Students will practice written communication skills.

Measures	Results	Actions
MI: 410 Research PowerPoint Presentation (MRI)  Target: Average score of >= 80%  Timeframe: Fall Semester  Responsible Parties: MI: 410 Course Instructor/HS Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  2018 = 97% (n=1)  No prior data available for comparison.  The student received reduced points on accurate information and APA format. All of the information provided in the presentation was relatable to MRI, but a few slides included information that did not pertain to the specific topic that was being presented. The student did not follow proper APA format for in-text citations on the individual slides. A detailed rubric was available to the student when the presentation was assigned that included information on how they would be graded for accurate information and APA format. (10/01/2019)	Action: Next year the instructor will provide specific instructions on how the students can locate APA format information. No other changes will be made at this time. (10/01/2019)
MI: 435 CT Procedures I Reflection Paper Target: Average score of >= 80% Timeframe: Spring Semester Responsible Parties: MI: 435 Course Instructor/ HS Curriculum	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes 2019 = 100% (n=3)  No prior data available for comparison.  Each student exceeded benchmark demonstrating effective written communication skills.	Action: Next year the instructor will provide a detailed rubric to each student when the paper is assigned. No other changes will be made at this time. (10/01/2019)

## Program (HS) - Medical Imaging (MI)

### **AU Outcome: MI 2.2**

Measures	Results	Actions
Committee	Each student incorporated proper APA formatting, adequate page length, and offered descriptive and informative content. The instructor provided assignment requirements in paragraph form but a rubric was not supplied to the students. A rubric could help improve grading consistency moving forward. (10/01/2019)	

## **Program (HS) - Medical Laboratory Science (MLS)**

**AU Outcome: MLS 2.1** 

Students will demonstrate technical competency in the delivery of quality laboratory service

Measures	Results	Actions
SL: Clinical - Affective evaluation— MLS 455: Immunohematology Target: 75% of students will receive an average score of >= 80% Timeframe: Annually Responsible Parties: Program Chair/HS Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes Spring 2019 – 13 students  100% (13/13) students earned an average score of >80%  Overall average score = 24.8/25 points; 99.2%  2018 – 90% 2016 – 91.4%	Action: We will continue to promote professional behaviors that are assessed by the affective evaluation throughout the program for the next academic year. We will evaluate subsequent cohorts of students on this measurement item with the same target. (08/02/2019)
	2015 – 95.4% 2014 – 95.8% 2013 – 97% 2012 – 100% 2011 – 97%  This is final semester for students and the third or fourth rotation as they progress through the program, so students should be learning and retaining behaviors needed to be successful in a workplace setting. Students are assessed on interest in learning, initiative,	

## **Program (HS) - Medical Laboratory Science (MLS)**

### **AU Outcome: MLS 2.1**

Measures	Results	Actions
	communication skills, acceptance of constructive criticism, and safety. (08/02/2019)	
SL: Clinical evaluation tool - MLS 428: Cell Morphology-Virtual Microscope Assignments Target: 100% of students will received average score of >= 80% Timeframe: Annually  Responsible Parties: Program Chair/HS Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes Summer 2018 – 16 students  92.8% (13/14) of students received an average score of >80%  Overall average = 97.2% (87.5/90)  The virtual microscope assignments are used to introduce students to differentials on normal patients to provide a basis for the skills necessary to achieve technical competency on abnormal cases later in the program. A total of six differentials are completed in this assignment category, and they are graded using a rubric. Continue to monitor. (08/02/2019) Related Documents:  428 and 440 - Differential Grading Rubric.pdf	Action: The virtual microscope program is proprietary software that requires a subscription. The next time the course is taught, this item will be changed to measure a different assignment since we will no longer purchase access to the virtual microscope. (08/02/2019)

### **AU Outcome: MLS 4.2**

Students will communicate effectively in an online environment

Measures	Results	Actions
SL: Didactic - Management Section Discussion Board posts – MLS 465: Clinical Management and Review Target: 75% of students will receive an average score of >= 80% Timeframe: Annually Responsible Parties: Program Chair/HS APG Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  Spring 2019 – 12 students 100% (12/12) students earned an average score of >80%  The lowest earned score was 98%.  New assessment item for this year.  Target met. Students discuss laboratory-based cases each week that are related to the course	Action: Faculty will continue to teach management and review content, provide discussion assignments for students to apply the content, and facilitate discussion of the content. The review section of the course will be updated for 2019-2020 with the addition of an assignment that will

## **Program (HS) - Medical Laboratory Science (MLS)**

### **AU Outcome: MLS 4.2**

Measures	Results	Actions
	objectives. As the cases presented in the discussions mimic real world examples, students tend to be engaged and interested in the discussions. Faculty facilitate the discussions and provide real-life examples related to each case with examples of solutions to the cases while pushing students to critically think through the cases each week. (08/02/2019)	mirror the discussion. Students will create a project that showcases how a clinical laboratory is managed. We will continue to assess student outcomes. (08/02/2019)
SL: Didactic - MLS 460: Clinical Microbiology - Journal entries Target: 75% of students will receive an average score of >= 80% Timeframe: Annually Responsible Parties: Program Chair/HS APG Committee	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes Spring 2019 100% (14/14) students earned average score of >80% on journal entries.  Overall average: 2019: 98.6%  Target met. Students were required to complete four journal entries during clinical rotation time. Prompts were provided to help structure their entries. Journal entries help provide a sense of community and help the instructor gauge how the rotation is progressing for each student, in addition to reflecting on what has been learned. This measurement tool is the same as the previous year, but the target was changed from 100% to 75% of students for 2018-2019, which aligns with the benchmarks set forth by the MLS program accreditor. (08/02/2019)	Action: Faculty will continue to observe perceptions of student rotation experiences through the journal assignment. Student outcomes will continue to be assessed with the same target for the next academic year; however, we will move this measurement tool to a different spring course. (08/02/2019)

# Program (HS) - Public Health (PH)

**AU Outcome: PH 1.1** 

Student will be able to identify determinants of health and illness

Measures	Results	Actions

## Program (HS) - Public Health (PH)

### **AU Outcome: PH 1.1**

Measures	Results	Actions
SL: Exam/Quiz - Teacher-made - PH: 430 Final exam Target: Average score of >80% Timeframe: Fall Semester Responsible Parties: Program faculty / HS APG committee	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes In Fall 2018, seven students took the course and received an average of 81.3% on the final exam. In Fall 2017, two students took the course and earned an average of 90% on the final exam. The lower score is likely due to a change in curriculum that included new textbooks and a new exam. The changes included a dedicated epidemiology textbook as a method to focus more on the topic, changing the course from more biostatistics focused to a more even split between epidemiology and statistics. (05/23/2019)	Action: More time of course will be spent on biostatistic fundamentals and some of the epidemiology concepts will be truncated. (05/23/2019)
SL: Didactic - Community needs assessment as part of mid-term project. Target: Average score of >80% Timeframe: Spring semester Responsible Parties: Program faculty / Health Science (HS) Curriculum committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  All (n=7) students scored above 80%, with an average score of 93.33%. In Spring 2018, four students had an average score of 92.25%. Student achievement on this project appears to be consistent year-over-year due to a detailed outline for the project. Additional, an assignment prior to the midterm project requires students to gather reputable health data sources prior to the assignment, which ensures they will have good information to synthesize prior to working on the midterm project. (05/23/2019)	Action: Students will gather reputable health data sources in an assignment prior to the midterm project, ensuring they have good information to write their community assessments. A grading rubric will be available to students when they start the project. (05/23/2019)

### **AU Outcome: PH 1.2**

Student will be able to identify sources of public health data and information

Measures	Results	Actions
SL: Didactic - Community needs assessment as part of mid-term project.  Target: Successful completion of report Average score of >80%  Timeframe: Spring semester  Responsible Parties: Program faculty / Health Science (HS) Curriculum	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes All (n=7) students scored above 80%, with an average score of 93.33%. In Spring 2018, four students had an average score of 92.25%. Student achievement on this project appears to be consistent year-over-year due to a detailed outline for the project and a prior assignment that requires them to gather reputable health data sources prior to undertaking the project. This data gathering assignment requires students to find a variety of data sources on the demographics and health status of residents of Black Hawk County. (05/23/2019)	Action: Students will gather reputable health data sources in an assignment prior to the midterm project, ensuring they have good information to write their community assessments. A grading rubric will be available to students when they start the project.

## Program (HS) - Public Health (PH)

### **AU Outcome: PH 1.2**

Measures	Results	Actions
committee		(05/23/2019)

**AU Outcome: PH 1.3** 

Student will be able to analyze data

Outcome Status: Active

Measures	Results	Actions
SL: Exam/Quiz - Teacher-made - PH: 430 Final exam Target: Average score of >80% Timeframe: Fall semester Responsible Parties: Program faculty / HS Faculty Org. committee	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes In Fall 2018, seven students took the course and received an average of 81.3% on the final exam. In Fall 2017, two students took the course and earned an average of 90% on the final exam. The lower score is likely due to a change in curriculum that included new textbooks and a new exam. The changes included a dedicated epidemiology textbook as a method to focus more on the topic, changing the course from more biostatistics focused to a more even split between epidemiology and statistics. (05/23/2019)	Action: Based on these results, more time of course will be spent on biostatistic fundamentals and some of the epidemiology concepts will be truncated. (05/23/2019)

#### **AU Outcome: PH 2.2**

Student will be able to identify mechanism to evaluate programs for their quality and effectiveness

Outcome Status: Active

Measures	Results	Actions
SL: Exam/Quiz - Teacher-made - PH 480 Final Exam. (Public Health Research and Evaluation) Target: Average score > 80% Timeframe: Spring semester Responsible Parties: Program faculty / Health Science (HS) Curriculum committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  Eleven students took the course with an average score of 88.1% on the final exam. The previous year, two students took the course with an average score of 83.33%. There was significant improvement despite no changes being made to the curriculum or exam. This is likely to a larger, "more true" sample. (05/23/2019)	Action: The instructor will give students two attempts at this exam in Spring 2020, with the goal of students improving their learning by studying items they may have missed the first time through. (05/23/2019)

**AU Outcome: PH 3.1** 

## Program (HS) - Public Health (PH)

### **AU Outcome: PH 3.1**

Student will be able to recognizes the role of cultural factors in the delivery of public health services

Outcome Status: Active

Measures	Results	Actions
SL: Didactic - PH: 420 Final report Target: Average score of >80% Timeframe: Fall semester Responsible Parties: Program faculty / HS Curriculum committee	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes In Summer 2018, three students taking the course received average of 83.33% on their final report. In Fall 2016, two students taking the course received average of 81%. To achieve the target for this measure during 2017-2018, no specific action plan was proposed. The plan was to continue the measure and compare the results to previous years because the drop in final report scores "was likely do to a change in instructor and course materials" and "the small number of students in the course make it difficult to gauge the quality of the results."  (08/23/2018)	Action: While students continue to meet the standard, there is a clear need to improve. There is a wide variation in student achievement on this assignment. The instructor will create an improved rubric to see if that improves student scores. (08/23/2018)

## **AU Outcome: PH 4.1**

Student should be able to describe the scientific foundation of the field of public health

Measures	Results	Actions
SL: Exam/Quiz - Teacher-made - PH: 400 Identify prominent events in the history of public health Midterm Exam and assignments Target: Average score of >80% Timeframe: Fall semester Responsible Parties: Program faculty / HS Curriculum committee	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes Seven students earned an average of 91.8% on the midterm exam. In Fall 2017, four students earned an average of 83.5% on the midterm exam. There was a significant year-over-year increase despite no changes to the curriculum. It is believed that this is due to a larger sample size and this is closer to the "true mean." (05/23/2019)	Action: The action plan from 2017-2018, "This measure will be kept and compared to a larger cohort," had no impact on the achievement of the target. A third year of data will assist in making future decisions about this measure. (05/23/2019)
SL: Exam/Quiz - Teacher-made - PH: 430 Final exam Target: Average score of >80% Timeframe: Fall semester Responsible Parties: Program faculty / HS Faculty Org. committee	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes In Fall 2018, seven students took the course and received an average of 81.3% on the final exam. In Fall 2017, two students took the course and earned an average of 90% on the final exam. The lower score is likely due to a change in curriculum that included new textbooks and a new exam. The changes included a dedicated epidemiology textbook as a method to	Action: Based on these results, more time of course will be spent on biostatistic fundamentals and some of the epidemiology concepts will be truncated. (09/03/2019)

## Program (HS) - Public Health (PH)

### **AU Outcome: PH 4.1**

Measures	Results	Actions
	focus more on the topic, changing the course from more biostatistics focused to a more even split between epidemiology and statistics. (09/03/2019)	

College Goal 3 - Recruit and retain students, faculty, and staff who represent diverse populations and who embrace diversity, cultural and global awareness, and the inclusion of all its members.

# **Admin - Diversity and Inclusion Services**

#### **AU Outcome: DIS 1.1**

Recruit and retain a diverse student body [ODS Goal 1: Representational Diversity--Recruit, retain, advance, recognize, and promote ...]

Measures	Results	Actions
AD: Report - Internal - Ethnic Diversity Assessment [Report of, based on ethnic diversity data obtained from Student Services and compared to most recent lowa figures.] Target: Ethnicity of student body reflects the diversity of the state of lowa (e.g., if 5.5% of the lowa population is comprised of Hispanics or Latinos, then the AC Hispanic- Latino Target for the student body would be 5.5%) Timeframe: Year 1, Year 3 Responsible Parties: DIS Coordinator Related Documents: Dashboards 2018-2019.doc	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes During the 2018-19 academic year, Allen College had 51/661 ethnic minority students, or 7.7% This exceeds the goal of 5.5% This is similar to results from the 2016-17 academic year.  It is likely that Allen College is in the beginning stages of reaping benefits from the pipeline programs, such as nurse camp and career day. (11/18/2019)	Action: During the 19-20 academic year, the Admissions team is planning a new strategy for Day in the Life/Career Day for junior high students. (11/18/2019)
AD: Report - Internal - Student Gender Diversity Assessment [Report based on gender diversity data obtained from Student Services and compared to most recent figures for each profession] Target: Gender diversity of student body reflects that of the professions represented by Allen College academic programs (e.g., if males represent 8% of the nursing profession, then males will represent 8% of the student composition of	Reporting Year: 2018 - 2019 (Year 1) Target Met: No There were 66/661 male students (9.9%) This percentage is down slightly from last year, where 10.65% of the student body were male. The continuation of pipeline programs is not helping or hurting the male recruitment. (03/24/2020)	Action: Continue efforts on pipeline programs. Ask the Diversity and Inclusion committee to brainstorm new ways to recruit and support male students. (03/25/2020)

## **Admin - Diversity and Inclusion Services**

#### **AU Outcome: DIS 1.1**

Measures	Results	Actions
the nursing program) Timeframe: Year 1; Year 3 Responsible Parties: DIS Coordinator		
AD: Report - Internal - Student Recruitment Assessment [Report of efforts to recruit students who represent traditionally under- represented groups, e.g., males, Hispanics, African Americans, etc.] Target: There will be evidence of regular activities designed to recruit students who represent under- represented groups (e.g., student recruiters attend or host 6 recruitment events annually in settings where contact with underrepresented groups is possible). Timeframe: Annually Responsible Parties: Admissions Counselors	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes The following recruitment activities were hosted or attended by the admissions office: Eleven campus visit days on campus A Day in the Life (2) Meskwaki Higher Education and Career Fair Iowa College Access Network College Planning Night - Waterloo West High School Iowa College Access Network College Planning Night - Waterloo East High School UNI Athletics Career Fair Marshalltown Community College College Fair Muscatine Community College College Fair Hawkeye Community College Fall Fest Hawkeye Community College Transfer Fair Latino Expo Gear Up Informational Session - Marshalltown I'll Make Me a World in Iowa  Although one activity was dropped from last year (UNI's student athlete fair), two additional events were attended; Gear Up and I'll Make Me World. Last year's action plan included the continuation of quarterly meetings with the Diversity & Inclusion Office (although there is not a person in that position now, so the admissions team stepped in). This meeting focuses on events that target under-represented groups, so having these meetings is essential and contributes to the success. The goal is to host or attend at least six events during 18-19 year. (03/25/2020)	Action: Quarterly meetings will continue for recruitment. There is currently not a Diversity & Inclusion Coordinator for the 19-20 academic year, but recruitment will be discussed at the Diversity & Inclusion meetings. (03/25/2020)
AD: Report - Internal - Pipeline Program Development Report [Report of ODS efforts to recruit students who represent traditionally under-represented groups, e.g.,	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  There were 4 events Career Fair/Day in the Life events with a total of 465 total students in attendance. Although there were fewer events than last year, the number of students reached increased by over 200%.	Action: The Day in the Life event for 8th graders has been targeted to Carver specifically, regardless of the student's interest in a health care career. During the 19-20

## **Admin - Diversity and Inclusion Services**

#### **AU Outcome: DIS 1.1**

Measures	Results	Actions
males, Hispanics, African Americans, etc.]  Target: There will be evidence of regular activities designed to recruit students who represent underrepresented groups (e.g., at least 6 career days for surrounding communities annually; annual summer nurse camp for at least 25 students).  Timeframe: Annually Responsible Parties: DIS Coordinator	Last year's action plan included merging together Career Day and Day in the Life was a big part of the success of this programming. The two individuals who took charge of the events had complementary skills, which made for excellent attendance.  (03/26/2020)	academic year, the admissions team will look at inviting all Waterloo 8th graders who have an interest in health care. This will allow us to target students who have potential for choosing a path in high school that will direct them to make choices the correlate to a position in health care. (03/26/2020)

### **AU Outcome: DIS 1.2**

Recruit and retain a diverse faculty, staff, and administration [ODS Goal 1: Representational Diversity--Recruit, retain, advance, recognize, and promote ...]

Measures	Results	Actions
AD: Report - Internal - Associate	<b>Reporting Year:</b> 2018 - 2019 (Year 1)	
Ethnic Diversity Assessment [Report	Target Met: NA	
of faculty ethnic diversity data	This is a Year 2 measurement. (04/07/2020)	
obtained from administration and		
compared to most recent lowa		
figures]		
Target: Diversity of Allen College		
associates will reflect the ethnic and		
cultural diversity of the state of lowa		
[e.g., if 5.5% of the lowa population		
is comprised of Hispanics or Latinos,		
then the AC Hispanic-Latino Target		
for associates would be 5.5%)		
Timeframe: Year 2		
Responsible Parties: DIS Coordinator		

## **Admin - Diversity and Inclusion Services**

### **AU Outcome: DIS 1.2**

Measures	Results	Actions
AD: Report - Internal - Faculty Gender Diversity Assessment [Report of gender diversity data obtained from administration and compared to most recent figures for each professional program.] Target: Gender diversity of faculty reflects that of the professions represented by Allen College academic programs (e.g., if males represent 8% of the nursing profession, then males will represent 8% of the faculty composition in nursing programs) Timeframe: Year 2 Responsible Parties: DIS Coordinator	Reporting Year: 2018 - 2019 (Year 1) Target Met: NA Assessment not required for this measure. It is scheduled for year 2 and will be assessed during the 2019-2020 academic year. (03/14/2020)	
AD: Report - Internal - Associate Recruitment Assessment [Report of efforts to recruit associates who represent under-represented groups for open positions and success of those efforts; e.g., number of newly hired associates who represent underrepresented groups].  Target: There will be evidence of regular activities designed to recruit associates who represent underrepresented groups to fill open positions (e.g., advertisements in male nurse journals to recruit male faculty; advertisements in African American publications to recruit	Reporting Year: 2018 - 2019 (Year 1) Target Met: No Allen College hired 22 new employees in the 2018-2019 academic year of which 1.36% were ethnically diverse. All open college positions were posted on the HR website and all qualified applicants were interviewed which is standard HR practice. Physical therapy faculty positions were advertised on regional and national physical therapy association websites. Newly hired employees accounted for a diverse percentage of 1.36% which is significantly less than the diversity percentage (approximately) 13% in the State of Iowa. The number of diverse hires in 2018-2019 (1.36%) is lower than the percentage from the 2017-2018 academic year (7.95%). Currently all new positions at Allen College and the descriptions can be accessed by both internal and outside candidates. The College does not have a standard policy to advertise in specialized journals except for a position that is hard to fill with local talent or if diverse applicants are consistently not in the applicant pool. Allen College has advertised in specialty sources as noted above and is not hesitant to do in the future if our current diverse applicant pool shrinks or positions are difficult to fill. (04/10/2020)	Action: While a specific reason for the decline in diversity among hires is difficult to pinpoint, Allen College recognizes the need to continue to reach out to diverse applicants. Allen College will have a new Coordinator for the Diversity and Inclusion Committee and she will review the advertising and recruiting practices to identify any possible gaps or changes that need to occur. Allen College continues to work to create inclusive environments that are welcoming to all Allen College faculty, staff, students, visitors, and

## **Admin - Diversity and Inclusion Services**

#### **AU Outcome: DIS 1.2**

Measures	Results	Actions
Black faculty and staff)		administration. (04/10/2020)
Timeframe: Annually		
Responsible Parties: Provost		

## **Admin - Enrollment Management**

**AU Outcome: EM 1.0** 

**Retain Students** 

Measures	Results	Actions
AD: Report - Internal - Admissions Reports; Dashboard Statistics Target: Diverse population at Allen College has increased by 1% since last college census date.  Timeframe: Annually Responsible Parties: Dean of Enrollment Management	Reporting Year: 2018 - 2019 (Year 1)  Target Met: No September 15, 2017 – Diverse population (ethnically diverse or male) = 6.75% September 15, 2018 - Diverse population (ethnically diverse or male) = 7.7%  The increase was .95%  This is a new item for the 2018-19 academic year, so there is no previous action plan. (10/01/2019)	Action: During the 2019-20 academic year, the Office of Diversity and Inclusion is in a state of flux. The previous coordinator has left the position and the committee of Diversity and Inclusion is without a chair. This year will be one of exploration of new ideas coming from a group of individuals and will include a search for a new leader of this group. (10/01/2019)
AD: Report - Internal - Program Completion Rates (Graduation Rates Spreadsheet)  Target: 70% of graduate students complete their program	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  See pages 28 - 29 of the Dashboard Report for each program's specific results.  Completion rates for all graduate programs was 79%  Last year's result was below the 70% benchmark.	Action: A cohort model will be considered for students enrolled in the MSN program, BSN-DNP program, and the DNP Program. (10/01/2019)

## **Admin - Enrollment Management**

### **AU Outcome: EM 1.0**

Measures	Results	Actions
<b>Timeframe:</b> Annually <b>Responsible Parties:</b> Dean of Enrollment Management	During the 2018-19 academic year, the Graduate APG committees approved a change for graduation rates from 150% of program length to 200% program length due to the number of students who progress at a part-time rate vs. a full-time rate.  Last year's action plan included the development stages of a cohort model in the MSN and BSN-DNP programs instead of an individualized plan of study model. The cohort model should help both retention and completion rates as students will build a peer support system that has not been in place previously.  (10/01/2019)  Related Documents:  Dashboards 2018-2019.pdf	
AD: Report - Internal - Graduation Rates within 150%  Target: 70% of undergraduate students complete their program within 150% of the program completion time.  Timeframe: Annually  Responsible Parties: Dean of Enrollment Management	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes See page 27-28 of the 2018-19 Dashboard Report for specific program graduation rates.  The comparison between the 2018-19 academic year and the 2017-18 academic year is as follows: School of Health Sciences The ASR graduation rate went from 100% to 94% The DMS graduation rate went from 71% to 67% The MLS graduation rate went from 78% to 86% The NMT graduation rate stayed at 100% The Public Health graduation rate went from 100% to 83%  School of Nursing The Accelerated Nursing program graduation rate went from 97% to 93% The Upper Division program graduation rate went from 84% to 71% The Upper Division program graduation rate went from 100% to 86%  Last year's action plan included reviewing admissions policies were determine if changes	Action: In the nursing program, the progression policy has been updated in the last several years to include a required test average to pass the course. This change will continue to be monitored, but will likely not positively impact graduation rates but instead positively impact NCLEX pass-rates. (10/01/2019)

## **Admin - Enrollment Management**

### **AU Outcome: EM 1.0**

Measures	Results				Actions	
	were necessa	ry. Very few change				
	Since admissions policies were reviewed in the last 1-2 years, they did not have an impact on the classes that were admitted prior to 2017 as are reported above. It is difficult to identify cause and effect when policy changes occur and when they begin to make an impact on the graduation rates of a program. (10/01/2019)  Related Documents:  Dashboards 2018-2019.pdf					
AD: Report - Internal - Retention	Reporting Ye	<b>ar:</b> 2018 - 2019 (Yea	r 1)			Action: The Student Success
Plan	Target Met: \	'es				Coordinator will collaborate with
<b>Target:</b> 100% of tutees achieve a C	Three studen	ts used NetTutor for	Pharm, Patho, or	Funds during the 2018-2	019 Academic	the undergraduate nursing APG
or higher in tutored courses	Year. All thre	e received a passing	grade. Tutoring	or subjects other than w	riting remains	committee regarding tutoring
	underused.					options for Pharmacology, Patho,
Timeframe: Annually						and Funds. (03/27/2020)
	Subject	Program Sessi	ons Final Grade			
Responsible Parties: Student	Pharm	MSN	1	С		
Success Coordinator	Patho	BSN	4	B-		
	Patho	BSN	1	A-		
	Goal was attained again this year: All students who used NetTutor for these three subjects were successful in the class for which tutoring was sought.					
	Last year's results: 100% of students who used NetTutor for Patho and Pharm tutoring received a grade of B- or higher. This is the first year using NetTutor for tutoring nursing					
				eports indicate this resou		
	heavily used. The recommendation from last year was to remove this measure, but that was					
not done. Although very few students use NetTutor, we will continue to use track this					e track this	
	information since NetTutor has introduced nursing-specific tutoring.					
	Last year's action plan: The Student Success Coordinator will continue to evaluate the					
	outcomes of	the students who us	e the tutoring ser	vices of the Pharmacolog	у,	
	Pathophysiol	ogy, and Fundament	als tutors on Net7	utor. In addition, comple	eted post-	

## **Admin - Enrollment Management**

### **AU Outcome: EM 1.0**

Measures	Results	Actions
	tutoring evaluations will also be tracked for student satisfaction and concerns.  Only six students who used NetTutor completed the survey that opens when they leave a tutoring session. In responding to the statement My tutor was helpful and knowledgeable, responses were Disagree (3), Neither agree nor disagree (1), and Agree (1), and Stongly Agree (1). However, in regard to having a positive experience and recommending NetTutor to other students, responses were either Strongly Agree (1, 1) Agree (2, 3), or Neither Agree nor Disagree (3, 2). (10/01/2019)	
AD: Report - Internal - Retention rates  Target: 90% of first year students retained in all programs.  Timeframe: Annually  Responsible Parties: Dean of Enrollment Management	Reporting Year: 2018 - 2019 (Year 1) Target Met: No Last year's results: 161/182 (88%) students were retained (either enrolled, graduated, or on an approved leave of absence) This year's results: 147/166 (89%) students were retained (either enrolled, graduates, or on an approved leave of absence)  Last year's action plan was to determine which program(s) had the largest attrition rate(s) and develop a plan for the student success office. The programs that had attrition rates of 10% or higher included ASR, MSN, and MLS. The Student Success Office has not yet had an opportunity to determine an action plan for these groups of students. (10/01/2019)	Action: During the 2019-20 academic year, the Student Success Coordinator and the Dean of Students will determine the reasons for attrition in the three programs. The Student Success Coordinator will meet with the faculty of high attrition programs to discuss this information and determine if there are services that may be helpful to the barriers found in retaining students. (10/01/2019)

**AU Outcome: EM 2.0** 

Offer a variety of student activities

Measures	Results	Actions
AD: Report - Internal - Allen College Student Opinion SurveySatisfaction	Reporting Year: 2018 - 2019 (Year 1) Target Met: No	Action: Set up an event planning meeting with the Ambassador

# **Admin - Enrollment Management**

#### **AU Outcome: EM 2.0**

Measures	Results	Actions
with College sponsored social activities  Target: 80% of students report satisfied or very satisfied Timeframe: Annually Responsible Parties: Associate Director of Admissions	45% of students reported being satisfied with student activities. 2% of students reported being dissatisfied. Last year, 31.28% of students reported being satisfied or very satisfied with student activities. This year's results were considerably higher than last year.  Last year's action plan included the Ambassador program is taking on social activities for the campus. In addition, a survey will be sent to students in the fall 2018 to request topics of interest for lunch & learn events.  Allowing the Ambassador program to take over social activities has made an impact in student attendance.  A Student Wellness Survey was sent to students during the fall 2018 to determine what areas of health and wellness were most interesting to students. A student wellness challenge was presented to students during the spring 2019. (10/01/2019)  Related Documents:  Student Satisfaction Survey for CAP.pdf 2018 Wellness Interest Survey RESULTS.pdf	chairs and determine what an appropriate budget is for the activities. (10/01/2019)

**AU Outcome: EM 3.0** 

Admissions policies and processes are fair and timely

Measures	Results	Actions
AD: Report - Internal - Allen College Student Opinion SurveySatisfaction with new student orientation  Target: 80% of students report being satisfied or very satisfied with new student orientation.	During the 2018-19 year, 77% of students reported they were satisfied with orientation. This is the same as the previous year (76.59% of students reported being satisfied or very satisfied	Action: The plan for next year we will continue to focus on the culture of Allen College and preparing students for success. We will report scores from our orientation evaluations in addition to the student satisfaction survey results. We feel the orientation

# **Admin - Enrollment Management**

### **AU Outcome: EM 3.0**

Measures	Results	Actions
Timeframe: Annually Responsible Parties: Associate Director of Admissions	opportunity to have more content completed online or through NetLearning prior to coming to campus.  We are disappointed that this years' results do not show the improvements that were made based on prior feedback. (10/01/2019)  Related Documents:  Student Satisfaction Survey for CAP.pdf	evaluations will provide more accurate feedback since they are completed immediately following orientation. (10/01/2019)
AD: Report - Internal - Allen College Student Opinion SurveySatisfaction with admissions process  Target: 80% of students report they are satisfied or very satisfied with the admissions process.	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes 83% of students reported being satisfied with the admissions process. Only 6% reported being dissatisfied. Last year, the same percentage of students reported being satisfied with the admissions process.  Last year's action plan: The admissions office will continue to work with the school	Action: Holistic admissions will be reviewed by the APG committees during the 2019-20 academic year. (10/01/2019)
Timeframe: Annually Responsible Parties: Associate Director of Admissions	admissions, progression, and graduation committees to find additional models that will expedite admission decisions. Based on the flat percentages between years, working with APG committees did not lead to improvements in the admissions process.  (10/01/2019)  Related Documents:  Student Satisfaction Survey for CAP.pdf	

**AU Outcome: EM 5.0** 

Registration policies and processes are fair and timely

Measures	Results	Actions
AD: Report - Internal - Allen College Student Opinion Surveysatisfaction with automated registration process	, ,	Action: Since there are so few students dissatisfied with this process, the current automatic

# **Admin - Enrollment Management**

#### **AU Outcome: EM 5.0**

Measures	Results	Actions
Target: 80% of students report satisfied or very satisfied with the automated registration process.  Timeframe: Annually	students indicated dissatisfaction with the current process. Last year, 87.93% of students reported being satisfied or very satisfied with the automated registration process. This percentage is slightly lower than during the 2013-14 academic year. Very few changes have been made to automatic registration during this time.  Last year's action plan: The registration process will continue to be based on plans of study and students will be automatically registered. The continuation of the automatic registration	registration process will continue. (10/01/2019)
Responsible Parties: Registrar	process is working, and since there is only 1% of students dissatisfied, the process will continue.	
	(10/01/2019)	
	Related Documents: Student Satisfaction Survey for CAP.pdf	
AD: Report - Internal - Allen College	Reporting Year: 2018 - 2019 (Year 1)	Action: The registrar's office will
Student Opinion Surveysatisfaction with academic calendar	<b>Target Met:</b> Yes 86% of students reported being satisfied with the academic calendar, which is identical to last year's satisfaction.	email the link to the academic calendar when the schedule book
Target: 80% of students report they		information is released each semester. (10/01/2019)
are satisfied or very satisfied with the academic calendar.	Last year's action plan: The registrar's office publishes the academic calendar timely and will continue to post important dates as soon as possible after the information is available. Since there was no difference between the two years, there was no additional impact on the	
Timeframe: Annually	timeliness of the published academic calendar.	
Responsible Parties: Registrar	(10/01/2019) Related Documents:	
	Student Satisfaction Survey for CAP.pdf	

**AU Outcome: EM 6.0** 

Allen College students are treated with respect

## **Admin - Enrollment Management**

#### **AU Outcome: EM 6.0**

Measures	Results	Actions
AD: Report - Internal - Allen College Student Opinion Survey Opportunity for student involvement in college committees  Target: 80% of students report satisfied or very satisfied Timeframe: Annually  Responsible Parties: Associate Director of Admissions	Reporting Year: 2018 - 2019 (Year 1)  Target Met: No  54% of students reported to be satisfied with the opportunities to be involved in college committees. Only 2% were dissatisfied. This leaves a large group of students were are unaware of the ability to be a part of college committees.  During the 17-18 academic year, 77 students, or 33.19%, indicated they were unaware of the opportunity for committee involvement. Of those aware, 54.31 were either satisfied or very satisfied with the opportunity for involvement in college committees. Although the same percentage of students indicated that they are aware of the opportunity for committee involvement, a smaller percentage is satisfied with the opportunities available.  The two years are almost identical.  Last year's action plan included continued education for students and further encouragement for students in the ambassador program to be involved in committees. The percentage of students aware of the opportunity for college committee involvement remains virtually the same since 2013-14. (10/01/2019)  Related Documents:  Student Satisfaction Survey for CAP.pdf	Action: Due to the high percentage of students who are unaware of this opportunity, this goal will be brought to the student Ambassadors for assistance in educating their peers. (10/01/2019)
AD: Report - Internal - Allen College Student Opinion SurveyPolicies related to student conduct  Target: 80% of students report satisfied or very satisfied  Timeframe: Annually  Responsible Parties: Dean of Enrollment Management	Reporting Year: 2018 - 2019 (Year 1)  Target Met: No 69% of students reported they are satisfied with policies related to student conduct. Only 2% reported they are dissatisfied.  During the 2017-18 academic year, 159 of 232 students (68.53%) were satisfied or very satisfied with the policies related to student conduct. 18.97% were neutral, and only 1.72% were dissatisfied with the policies. While there are fewer students satisfied with the policies, there is a high percentage of students who are neutral and only a small percentage of students who are dissatisfied. The results from last year to this year remained unchanged.	Action: Enrollment Management will review comments in the Student Satisfaction Survey to determine if there are any concerns mentioned in the written responses related to the student conduct policies. (10/01/2019)
	Last year's action plan: In 2018, a policy library will be added to the college's website in an	

## **Admin - Enrollment Management**

### **AU Outcome: EM 6.0**

Measures	Results	Actions
	attempt to be more transparent with all polices. In addition, email notifications regarding the location of the policy library will be sent to all registered students each semester. The addition of the policy library did not seem to have an impact on the satisfaction of students. (10/01/2019)  Related Documents:  Student Satisfaction Survey for CAP.pdf	
AD: Report - Internal - Allen College Student Opinion SurveyStaff attitude towards students Target: 80% of students report satisfied or very satisfied	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  During the 2018-19 academic year, 86% of students reported being satisfied with the staff's attitude towards students. Only 6% are dissatisfied. This is almost identical to the 2017-18 academic year (86.21%).	Action: Continued Heart of a Leader Training will be offered during the 2019-20 academic year. (10/01/2019)
Timeframe: Annually	Last year's action plan: Staff will continue to treat students with respect. The student services staff continues to use the 10/5 rule and is training professional staff and ambassadors in the Heart of a Leader program.	
Responsible Parties: Dean of Enrollment Management	It is unfortunate that we did not see an increase from 2017-18 to 2018-19 since one additional professional staff and two additional groups of Ambassadors have gone through the Heart of a Leader Training. (10/01/2019)  Related Documents:  Student Satisfaction Survey for CAP.pdf	
AD: Report - Internal - Allen College Student Opinion Survey item Inclusiveness and acceptance of diversity  Target: 80% of students report satisfied or very satisfied	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  81% of students are satisfied and 3% are dissatisfied with the inclusiveness and acceptance of diversity on campus. There is very little difference between what students reported this year than what they reported in the 2017-18 survey (81.04%)	Action: During the 19-20 academic year, Enrollment Management staff will engage with the Diversity and Inclusion Committee and solicit students to join in an effort to provide services and activities that
Timeframe: Annually  Responsible Parties: Dean of	Last year's action plan: The admissions office works closely with the office of diversity services to provide admission events such as career day and a day in the life.  It appears that there has been no change with regards to student's satisfaction with the	are student-driven. (03/27/2020)

## **Admin - Enrollment Management**

#### **AU Outcome: EM 6.0**

Measures	Results	Actions
Enrollment Management	inclusiveness and acceptance of diversity on campus. There has been a lack in change in action over the last few years which may lead to to immobile numbers. (10/01/2019)	

#### **AU Outcome: EM 7.0**

Qualified students are admitted to college programs

Measures	Results	Actions
AD: Report - Internal - Program Enrollment (Admissions Report; Correspondence Spreadsheet; Dashboard Statistics)	Reporting Year: 2018 - 2019 (Year 1)  Target Met: No During the 2018-19 academic year, programs were filled to capacity as follows: School of Health Sciences – 77% School of Nursing – 82%	Action: During the 2019-20 academic year, admissions has scheduled marketing meetings with all college programs to solicit new ideas that may come from faculty
Target: Fill programs with qualified students as follows: School of Health Sciences—100% Accelerated BSN—100% Upper Division BSN—100%	During the 2016-17 academic year, programs were filled as follows: School of Health Sciences - 78% School of Nursing - 89%	or other staff members. (10/01/2019)
Timeframe: Annually Responsible Parties: Dean of Enrollment Management	The two academic years reported above are fairly comparable to one another. The school of nursing enrollment has decreased in the last couple of years.	
	Last year's action plan: The admissions team meets with under-enrolled program directors and deans each semester to determine the barriers related to filling programs with qualified students. Once the barriers are determined, the team determines what barriers can be acted on and brings those ideas to committees. This process began during the 2017-18 academic year and will continue in 2018-19.	
	Although meetings with under-enrolled program directors and deans each semester has occurred this past year and barriers have been identified, some of the barriers are not possible to overcome. For example, "value of degree" cannot be solved by Allen College. Also, if there is not a job market in Iowa, the programs suffer. (10/01/2019)	

## **Admin - Enrollment Management**

#### **AU Outcome: EM 7.0**

Measures	Results	Actions
AD: Report - Internal - Enrollment	<b>Reporting Year:</b> 2018 - 2019 (Year 1)	Action: The Director of Admissions
increases in under enrolled	Target Met: No	will complete Environmental Scans
programs (Admissions Report;	Program increase/decrease between fall 2017 to fall 2018:	on each under-enrolled program
Correspondence Spreadsheet;	Public Health - 133% increase from last year	and develop a "market tool" for use
Dashboard Statistics)	RN-BSN - 48% decrease from last year	in all programs. (10/01/2019)
	MSN-Ed - 14% decrease from last year	
Target: Admit students to	MSN-CPH (includes dual enrollment with an NP track) - no change from last year	
underenrolled programs at the	MSN-Lead - 44% increase from last year	
graduate level. Increase enrollment	DNP - 20% decrease from last year	
by 25% in the following programs:	EdD – 29% decrease from last year (added this year)	
NMT, RN-BSN/MSN, MSN-Edu, MSN-		
CPH, MSN-Lead and DNP.	Program increase/decrease between fall 2016 fall 2017:	
	Public Health - 57% increase from last year	
Timeframe: Annually	RN-BSN - 49% decrease from last year	
Responsible Parties: Dean of	MSN-Ed - 14% decrease from last year	
Enrollment Management	MSN-CPH (includes dual enrollment with an NP track) - no change from last year	
	MSN-Lead - 44% increase from last year	
	DNP - 20% decrease from last year	
	Both Public Health and MSN-Lead have seen consistent increases. Other programs have	
	either remained the same or decreased enrollment.	
	Targeting marketing will continue for under-enrolled programs, including recruitment	
	meetings with directors of these programs. Barriers will be identified and efforts will be	
	made to remove barriers as we are able to do so.	
	Targeted marketing efforts do not seem to be working or the barriers discovered during the	
	targeted marketing meetings are outside of our control. (10/01/2019)	
AD: Report - Internal - Google	<b>Reporting Year:</b> 2018 - 2019 (Year 1)	Action: HubSpot and RaiseMe were
Website Analytics Report	Target Met: Yes	purchased on on-boarded during
Target: An average of 9000 unique	The average of unique users from Jan 1 – Dec 31, 2018 was 8531. The average from	the summer 2019. During the 2019-
hits per month between January 1 -	September - December, 2017 was 9706. (Some data was lost during 2017, so an entire year	20 academic year, the admissions

## **Admin - Enrollment Management**

#### **AU Outcome: EM 7.0**

Measures	Results	Actions
December 31.  Timeframe: Annually Responsible Parties: Dean of Enrollment Management	was not available). This was a decrease from the partial 2017 year.  The evaluation of a new marketing strategy was completed and it was determined that the new strategy cannot be directly correlated to the increase of web hits. There are too many variables and not enough data released by the ad agency used.  Last year's action plan: In 2018-19, we will work on moving the marketing efforts back to Allen College from Allen Hospital. This includes creative and media buying.  During the 2018-19 academic year, marketing efforts focused on reviewing new software products to replace standard advertising. Although our website hits went down, the future software we have purchased should give us better data to act on for the future. (10/01/2019)	office will determine how to best use the new software and how to appropriately report its use. (10/01/2019)

#### **AU Outcome: EM 8.0**

Increase the number of underrepresented students enrolled at Allen College.

Measures	Results	Actions
AD: Report - Internal - Retention of ethnic minority and male students (Recruitment Plan; Retention Plan; Graduation Rates; Dashboard Statistics)  Target: Retention rates of ethnic minority and male students are equal to or greater than the entire Allen College population.  Timeframe: Annually Responsible Parties: Dean of	Reporting Year: 2018 - 2019 (Year 1) Target Met: No 100/108 (93%) The retention rate of the entire student body was 95%. This retention rate is identical to the retention rate of last year.  Last year's action plan: The Student Success Coordinator continues to reach out to male and ethnic minority students. In addition, the Office of Diversity Services hosts "Lunch and Learn" opportunities for male and ethnic minority students.  While the impact of retention is unknown, the 2017-18 withdrawal records indicate that academics was more likely to be the reason for attrition among ethnic minority and male students than white females. (10/01/2019)	Action: During the next academic year, the strategic recruitment and retention committee will look at mentoring programs for males, coffee hours with Bob, Jared, Tyler Jensen, Jeff Guse, Jeremy Whitaker, etc. (10/01/2019)

# **Admin - Enrollment Management**

### **AU Outcome: EM 8.0**

Measures	Results	Actions
Enrollment Management		
AD: Report - Internal - Student awareness of services provided by retention services (Retention Plan) Target: 80% of students report being satisfied or very satisfied with the orientation materials for student success	Reporting Year: 2018 - 2019 (Year 1) Target Met: NA New measure for 2019-2020. (03/14/2020)	
Timeframe: Bi-Annually		
Responsible Parties: Student Success Coordinator		
AD: Report - Internal - Student awareness of services provided by retention services (Retention Plan)  Target: 90% of students identified as	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  All students who attend orientation will have received information about the Student Success  Office and college resources. There are weekly reminders to students in the Tips of the Week	Action: This item will be retired and replaced with a measure directed toward student satisfaction with the orientation materials for
ethnic minority or male are aware of services provided from retention services.	to contact me if they have concerns or questions. This is the same as the last academic year.  The ability to maintain a 100% awareness of information is due to diligence of making the information available in multiple ways; orientation, the student success course, and the	student success. (10/01/2019)
Timeframe: Bi-Annually	online CMS.	
Responsible Parties: Student Success Coordinator	Last year's action plan: All students are introduced to the Student Success office and other academic resources at Orientation, and Success Tips are presented weekly in the Student Services Course in the online CMS.	
	Last year's action plan helped with this year's success because students must complete the NetLearning module that introduces the Student Success services to avoid being placed on hold, all incoming students, including ethnic minorities and males, are made aware of these services (10/01/2019)	
AD: Report - Internal - Use of		

## **Admin - Enrollment Management**

#### **AU Outcome: EM 8.0**

Measures	Results	Actions
services provided by the retention office (Retention Plan)  Target: 25% of students identified as ethnic minority or male attend services provided from retention services.  Timeframe: Annually Responsible Parties: Student Success Coordinator	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  During the 2018-19 academic year: Sixty-four students identified as belonging to an ethnic minority. Of these 64, 11 individuals were male. Sixty-nine additional males who did not belong to an ethnic minority were enrolled during this academic year, for a total of 134 students who did not identify their race as Unknown or White or were male (54 females and 80 males). Contact was made with 37.3% of these students (24 of the females [44.4%] and 26 of the males [32.5%]). Six of the contacted males identified as belonging to an ethnic minority.  During the 2017-18 academic year: 100 students were identified as male or of ethnic minority, including 66 males and 34 females whose Race was not classified as either Unknown or White. Of these students, contact was initiated by referral with 16 of the males and 14 of the females (30%). Meetings were held with seven of the males and nine of the females. This percentage has remained in the 30's over the past several years.  The percentage of students identifying as belonging to an ethnic minority or male who were contacted by the Student Success Office improved by 7.3%.  Last year's action plan: The Student Success Office will continue to reach out to ethnic minority and male students and encourage their participation in the services offered. Last year's action plan indicated that the student success office would continue to reach out to ethnic minority and male students and encourage participation in success activities. This continues to occur, but does not seem to have the same impact on students this year when compared to last year. (10/01/2019)	Action: The Student Success Office will continue to individually reach out to all ethnic minority and male students who are struggling and are self- or faculty-referred. (10/01/2019)

# Program (HS) - Associate of Science in Radiography (ASR)

**AU Outcome: ASR 2.1** 

Students will demonstrate effective communication skills in the clinical setting

## Program (HS) - Associate of Science in Radiography (ASR)

#### **AU Outcome: ASR 2.1**

Measures	Results	Actions
SL: Clinical evaluation tool - RA:135 Clinical Instructor/ Preceptor Evaluations/ Numbers 3, 6, 10,11  Target: Average score >= 3.5 (0-4 pt. scale) Timeframe: Level I-Fall Semester Responsible Parties: Clinical Instructors/ Program Faculty/ HS Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes 2018 3.67 (n=13)  Benchmark/Target met.  Previous data: 2017 3.68 (n=14) 2016 3.56 (n=13) 2015 3.81 (n=16) 2014 3.8 (n=17)  The students' average scores had slight increases in two areas of the performance criteria; patient care and multicultural diversity and decreases in two areas; interpersonal relationships and age appropriate care. All student evaluations are completed on Trajecsys by the clinical instructors. Students have immediate access to the completed evaluations on Trajecsys. Students continue to exhibit effective communication skills in the clinical environment. (07/03/2019)	Action: To continue to provide immediate access and feedback to students these evaluations will be completed on Trajecsys by the clinical instructors. (07/03/2019)
SL: Clinical evaluation tool - RA:275 Clinical Instructor/ Preceptor Evaluations/Numbers 3, 6,10,11  Target: Average score >= 3 (0-4 pt. scale) Timeframe: Level II -Spring Semester Responsible Parties: Clinical Instructors/ Program Faculty/ HS Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes 2018-2019-3.9 (n=12)  Target/benchmark met.  Previous data: 2017-2018- 3.78 (n=12) 2016-2017 - 3.95 (n=15) 2015-2016 - 3.97 (n=17) 2014-2015 - 3.95 (n=15)  This result is an increase compared to the previous year. The student scores were higher than the previous year in areas of; patient care, interpersonal relationships, multicultural diversity and age appropriate care. (07/03/2019)	Action: To continue to exceed the target/benchmark for this measure the clinical instructors/preceptors in the clinical setting will continue to provide excellent instruction and supervision of students to assess their communication skills. (07/03/2019)
SL: Clinical evaluation tool - RA:135 Clinical Competency Evaluation/ Part I – Number 4 Part III- Numbers 1,3,6-8	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes 2018 = 3.95 (n=13) Benchmark/Target met. Previous data:	Action: To continue to exceed this measure the clinical instructors will continue to provide effective instruction, supervision and

## Program (HS) - Associate of Science in Radiography (ASR)

## **AU Outcome: ASR 2.1**

Measures	Results	Actions
Target: Average score >= 3 (0-4 pt. scale) Timeframe: Level I-Fall Semester Responsible Parties: Clinical Instructor/Program Faculty/ HS Curriculum Committee	2017=3.98 (n=14) 2016=3.92 (n=13) 2015=3.99 (n=16) 2014=3.98 (n=17) Students continue to exceed the benchmark. The students are demonstrating communication skills reflective of their level in the program. (07/03/2019)	feedback to the students in their clinical settings. (07/03/2019)
SL: Clinical evaluation tool - RA:275 Final Clinical Competency Evaluation/ Part I – Number 4 Part III- Numbers 1,3,6-8	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes 2019 = 4 (n=12) Benchmark/Target met. Previous data: 2018=3.98 (n= 12)	Action: The program will continue to provide students with access to an appropriate exam volume in a variety of settings to prepare them for their final competencies.
Target: Average score >= 3.5 (0-4 pt. scale) Timeframe: Level II- Spring Semester Responsible Parties: Clinical Instructor/ Program Faculty/ HS Curriculum Committee	2017=4 (n=15) 2016=4 (n=17) 2015=3.99 (n=15) 2014=3.99 (n=17) This year's cohort received an average score of 4 on every line item assessed. Students continue to exceed the benchmark. Students have access to an appropriate exam volume in a variety of settings which helps prepare them for their final competencies. (07/03/2019)	(07/03/2019)

#### **AU Outcome: ASR 2.2**

Students will practice written communication skills

Measures	Results	Actions
SL: Didactic - RA: 115 Patient Care Presentation Target: Average score of >= 85% Timeframe: Level I-Fall Semester Responsible Parties: RA: 115 Course Instructor/HS Faculty Org.	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes Results for fall 2018 98% (n=13) Benchmark/Target met: Previous data: 2017 98% (n=14)	Action: The course instructor will continue to communicate the paper requirements on the first day of the semester. The instructor will instruct students to the Allen College website and display to all

## Program (HS) - Associate of Science in Radiography (ASR)

#### **AU Outcome: ASR 2.2**

Measures	Results	Actions
Committee	2016 97% (n=13) 2015 98.01% (n=16) 2014 98.2% (n=17) Students continue to demonstrate effective written communication skills. Two of the thirteen students had deductions on the title page; not double spacing and bolding of the title of the paper. Five of the thirteen students had deductions on the reference page. These deductions included: no hanging indent, not having correct spacing in the paper, not having correct margins, bullets when listing the references, and formatting of the reference page. Under the formatting portion of the paper evaluation; the deductions were; not including a running head, no page numbers, and not indenting when beginning a new paragraph. The course instructor communicates the paper requirements on the first day of the semester. On the first day of class, the instructor goes onto the Allen College website and displays to all students where the academic resources page is located and the APA resources information for APA review. One student met with the course instructor to clarify formatting questions concerning the reference page. (07/03/2019)	students where the academic resources page is located and the APA resource information for APA review. (07/03/2019)
SL: Didactic - RA:258 Pathology Systems Presentation Target: Average score of >= 85% Timeframe: Level II-Fall Semester Responsible Parties: RA: 258 Course Instructor/ HS Faculty Org. Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  Results for fall 2018: 96% (n=12)  Benchmark/Target met:  Previous data  2017: 96% (n=12)  2016: 97% (n=15)  2015: 98.01% (n=16)  2014: 98.2% (n=17)  Students continue to exhibit effective communication skills through written communication.  Three of the twenty-four papers had deductions on the title page and seventeen had deductions on the reference page. Two papers had deductions in the accuracy and substance portion of the evaluation, not meeting the depth of the paper requirement by adequately covering the subject. Seven papers had deductions in the format portion of the paper, five papers didn't have correct margins, one paper had spelling errors and one paper was not double-spaced. Two of the students made the same errors on both of their papers. The course instructor discusses the paper requirements on the first day of class. The instructor	Action: The instructor will instruct students to the Allen College website and display to all students where the academic resources page is located and the APA resource information for APA review. (07/03/2019)

## Program (HS) - Associate of Science in Radiography (ASR)

#### **AU Outcome: ASR 2.2**

Measures	Results	Actions
	reviewed the APA format and reminded students that the APA resources information is located on the Allen College website. Two students asked questions prior to their first paper presentation. They had questions about the structure of their paper and how to properly incorporate the radiographs into their presentation. The same two students reviewed their first paper with the instructor after their presentation to receive feedback and they were the only students that received 100% on both of their papers. (07/03/2019)	

**AU Outcome: ASR 2.3** 

Students will demonstrate oral communication skills

Measures	Results	Actions
SL: Didactic - RA:258 Pathology Systems Presentation Target: Average score of >= 85% Timeframe: Level II-Fall Semester Responsible Parties: RA: 258 Course Instructor/ HS Faculty Org. Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  Results for fall 2018: 99% (n=12)  Benchmark/Target met  Pervious data:  2017: 97% (n=12)  2016= 95% (n=15)  2015: 98.82% (n=17)  2014: 99.13% (n=15)  Students continue to demonstrate effective oral communication skills. Five papers received deductions in the oral presentation portion of the evaluation. Four of the papers did not include information discussing the exposure factors/exposure to ionizing radiation for the exam and two papers had deductions for not explaining why they selected the pathology for their paper. Two papers are required for this course. The paper requirements are discussed the first day of class. (07/03/2019)	Action: The course instructor will continue to communicate the paper requirements the first day of class. This measure will be continued to be assessed with each new cohort. (07/03/2019)
SL: Didactic - RA: 115 Patient Care Presentation Target: Average score of >= 85% Timeframe: Level I-Fall Semester Responsible Parties: RA: 115 Course	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  2019=98% (n=19)  2018=99% (n=13)  2017 =99% (n=14)	Action: To meet or exceed the target for this measure during the 2020-2021 academic year, the course instructor will continue to

## Program (HS) - Associate of Science in Radiography (ASR)

#### **AU Outcome: ASR 2.3**

Measures	Results	Actions
Instructor/HS Faculty Org. Committee	2016=99% (n=13) 2015=94.53% (n=16) Four students had deductions in their oral presentation portion due to voice level and words not stated correctly during the presentation. (07/27/2020)	discuss the paper requirements with the students. Also, encourage students to practice reading their papers before the due date to assist them in demonstrating effective oral communication skills. (07/27/2020)
	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes Results for fall 2018: 99% (n=13) Benchmark met Previous data: 2017: 99% (n=14) 2016: 99% (n=13) 2015: 94.53% (n=16) 2014: 100% (n=17)  Two students had deductions in the area of voice level was easily heard, due to using a soft voice and reading the paper very quickly. One student had a deduction in words were stated correctly area of the evaluation. The course instructor explains the paper requirements the first day of class. Students continue to demonstrate effective communication skills. (07/03/2019)	Action: The course instructor will continue to explain the paper requirements the first day of class. This measure will be continued to be assessed with each new cohort. (07/03/2019)

#### **AU Outcome: ASR 3.2**

Students will demonstrate ability to practice critical thinking

Measures	Results	Actions
SL: Didactic - RA:145 Scientific Exhibit Evaluation Target: Average score of >= 80% Timeframe: Level I- Spring Semester Responsible Parties: RA: 145	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  2019 = 87% N = 9 posters (13 students)  Benchmark/Target met  Previous data:	Action: To continue to exceed the benchmark for this measure the course instructors will provide the effective feedback to the students

## Program (HS) - Associate of Science in Radiography (ASR)

#### **AU Outcome: ASR 3.2**

Measures	Results	Actions
Program Faculty/ HS Curriculum Committee	2018 = 91.5% N= 8 posters (14 students) 2017 = 92.14% N= 7 posters (12 students) 2016 = 92.6% N= 10 posters (16 students) 2015 = 96.5%, N= 11 posters (17 students) 2014= 94%, N = 11 posters (15 students) Scores for 2019 continue to demonstrate the student's ability to practice critical thinking skills when developing their scientific exhibits. Most grade reductions occurred in line item #8 "grammar, spelling, and punctuation" and # 6 the visually attractive category on the evaluation form. Some also received deductions for #7 "easily understood in a maximum of three minutes" since there was too much text. Average scores continue to exceed the benchmark. (07/03/2019)	on their exhibits. (07/03/2019)
SL: Exam/Quiz - Standardized - RA: 203B Corectec exams Target: > 80% of the students will achieve a score of 70 or greater on one of the four exams. Timeframe: Level II- Spring Semester Responsible Parties: RA: 203B Course Instructor/HS Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes 2019 = 100% (n=12)  Benchmark/Target met.  Previous data: 2018 = 100% (n=12) 2017 = 93% (n=15) 2016 = 100% (n=17) 2015 = 93% (n=15) 2014 = 76% (n=17)  This was the second cohort for implementation of the 2% reduction in the overall course grade for each percentage point below 70 on the four Corectec exam average score, an action plan from 2016-2017. This may have provided additional incentive for the students to put forth their best effort on every exam attempt. The ASR Program curriculum continues to prepare the students for mock board exams. Students continue to demonstrate the ability to practice critical thinking. (07/03/2019)	Action: Upon further review of this grade reduction policy, the instructor reduced the % reduction to 1% and will reevaluate in 2020. (07/03/2019)

**AU Outcome: ASR 3.3** 

Students will be able to critically think in the clinical setting

## Program (HS) - Associate of Science in Radiography (ASR)

## **AU Outcome: ASR 3.3**

Measures	Results	Actions
SL: Clinical evaluation tool - RA:145 Clinical Instructor/ Preceptor Evaluations/Numbers 2,4,7,8  Target: Average score >= 3. (0-4 pt. scale) Timeframe: Level I-Spring Semester Responsible Parties: RA: 145 Course Instructor/HS Faculty Org. Committee	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes 2019 3.36 (n=13) Target/benchmark met. Previous data: 2018 - 3.53 (n=14) 2017 - 3.63 (n=12) 2016 - 3.63 (n-16) 2015 - 3.67 (n=17) This result is a decline compared to previous years reported. The student scores were lower than the previous year in areas of; application of knowledge, ability to follow directions, self-image for level in the ASR program, and composure and adaptability (07/03/2019)	Action: To continue to meet or exceed the target/benchmark for this measure during the 2019-2020 academic year, clinical instructors/preceptors in the clinical setting will continue to provide excellent instruction and supervision of students to assess their critical thinking skills. (07/03/2019)
SL: Clinical evaluation tool - RA:265 Clinical Instructor/ Preceptor Evaluations/Numbers 2,4,7,8  Target: Average score >= 3. (0-4 pt. scale) Timeframe: Level II- Fall Semester Responsible Parties: RA: 265 Course Instructors/HS Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes 2018 3.81 (n=12) Target/benchmark met Previous data: 2017 3.79 (n=12) 2016 3.86 (n=15) 2015 3.81 (n=17) 2014 3.75 (n=15) The student's average scores increased in three performance criteria areas; application of knowledge, ability to follow directions, and self-image for level in the ASR program. There was a slight decrease in the area of composure and adaptability. All student evaluations are completed on Trajecsys by the clinical instructors. Students have immediate access to their evaluations on Trajecsys. Students continue to be able to critically think in the clinical setting. (07/03/2019)	Action: To continue to meet or exceed the target/benchmark for this measure during the 2019-2020 academic year, clinical instructors/preceptors in the clinical setting will continue to provide excellent instruction and supervision of students to assess their critical thinking skills. (07/03/2019)

**AU Outcome: ASR 4.1** 

Students will integrate leadership skills and construct professional practices

## Program (HS) - Associate of Science in Radiography (ASR)

#### **AU Outcome: ASR 4.1**

Measures	Results	Actions
SL: Service - RA:135 Community Service/Service Learning Evaluation Target: Average score of >= 80% Timeframe: Level I-Fall Semester Responsible Parties: RA: 135 Course Instructors/HS Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes 2018: 83.69% (n=13) Benchmark met Previous data: 2017: 94.78 (n=14) 2016: 72% (n=13) 2015: 92.56% (n=16) 2014: 97.94% (n=17) The majority of point deductions occurred in the overall writing and the research categories of the assessment rubric. Some students did not answer all questions or did not provide any citations in their paper to evidence that they researched the organization. All students performed service learning through a variety of organizations. Students demonstrated leadership skills and professionalism through their involvement in service learning activities. (07/03/2019)	Action: The course instructors will make a few editorial changes to the assignment instructions for emphasis and clarification. (07/03/2019)
SL: Service - RA: 265 Community Service/Service Learning Evaluation Target: Average score of >= 80% Timeframe: Level II-Fall Semester Responsible Parties: RA: 265 Course Instructors/HS Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: No 2018: 76.75% (n=12) Benchmark not met.  Previous data: 2017: 93.33% (n=12) 2016: 93.4% (n=15) 2015: 82.47% (n=17) 2014: 99.13% (n=15)  Two students in this cohort attempted to submit hours that were not performed during the offering of this course. These students received half of the possible points. The assignment instructions did state that all service hours must be completed during the offering of this course. Some students provided limited and below average reflection statements resulting in point deductions in the research and writing categories of the assessment rubric. One student did not follow the instructions to provide evidence of participation as part of their paper resulting in a 10% total grade reduction. (07/03/2019)	Action: The course instructors will make a few editorial and organizational changes to the assignment instructions in an attempt to better emphasize and clarify the expectations for the assignment. (07/03/2019)

## Program (HS) - Associate of Science in Radiography (ASR)

**AU Outcome: ASR 4.2** 

Students will practice professionalism

Outcome Status: Active

Measures	Results	Actions
SL: Clinical evaluation tool - RA:135 Clinical Instructor/Preceptor Evaluations Numbers 1,5,9,12,13  Target: Average score >= 3 (0-4 pt. scale) Timeframe: Level I- Fall Semester Responsible Parties: Clinical Instructors/ Program Faculty/HS Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes 2018 - 3.68(n=13) Benchmark met.  Previous data: 2017 - 3.68(n=14) 2016 - 3.6 (n=13) 2015 - 3.83(n=16) 2014 - 3.80(n=17)  The students' average scores had a slight increase in two areas; appearance and ethical and professional behaviors. The students' initiative score remained the same and a slight decrease in organization of assignments and policies and procedures. All student evaluations are completed on Trajecsys by the clinical instructors. Students have immediate access to the completed evaluations on Trajecsys. Students continue to practice professionalism in the clinical environment. (07/03/2019)	Action: Clinical instructors will continue to provide effective and timely feedback to students. (07/03/2019)
SL: Clinical evaluation tool - RA:275 Clinical Instructor/Preceptor Evaluations Numbers 1,5,9,12,13  Target: Average score >= 3 (0-4 pt. scale) Timeframe: Level II-Spring Semester Responsible Parties: Clinical Instructors/ Program Faculty/HS Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes 2018-2019- 3.83 (n=12)  Target/benchmark met.  Previous data: 2017-2018 3.76 (n=12) 2016-2017 3.96 (n=15) 2015-2016 3.98 (n=17) 2014-2015 3.91 (n=15)  This result is an increase compared to the previous year. The student scores were lower in only one area which was organization of assignments and higher in areas of initiative, appearance, policies and procedures, and ethical and professional behaviors. (07/03/2019)	Action: To continue to meet or exceed the target/benchmark for this measure during the 2019-2020 academic year, clinical instructors/preceptors in the clinical setting will continue to provide excellent instruction and supervision of students to access their professionalism. (07/03/2019)

# Program (HS) - Doctor of Education (Ed.D.)

## Program (HS) - Doctor of Education (Ed.D.)

#### **AU Outcome: EdD 5.2**

Students will evaluate, synthesize, utilize and disseminate the scholarship related to discovery, integration, application, and teaching to further knowledge and competencies of the health science and nursing education professions.

Outcome Status: Active

Measures	Results	Actions
SL: Didactic - EdD 770: Assessment and Evaluation in Health Sciences Education – Assessment Process Assignment Target: Students will receive an average score at least 80% Timeframe: When course is taught (e.g., 2016, 2019, etc.) Responsible Parties: Program Chair/HS Graduate APG Committee	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes 100% of students received a score of >85%  Overall average score = 100% (135/135)  2016 - 98.7%  Students were provided with an overview of the project at the beginning of the course and had the opportunity to received ungraded feedback on this assignment within each module. Work completed within the modules supported work on this assignment. Discussion boards were set up that allowed students to ask questions that pertained to each section of the paper. (08/01/2019)	Action: This assignment will be included the next time this course is taught with no revisions.  Students will be provided with an overview of the project at the beginning of the course and will have the opportunity to receive ungraded feedback on this assignment within each module. Work within each module will support work on this assignment. Discussion boards will be included for students to ask questions that pertain to each section of the paper. Subsequent sections will be assessed on this measurement tool to ensure the target continues to be met. (08/01/2019)

## Program (HS) - Masters in Occupational Therapy (MS in OT)

### AU Outcome: MS in OT 6.1 Collaborate to develop case study

Students will collaborate with other practices to develop a comprehensive case study.

Measures	Results	Actions
SL: Didactic - OT 613 – Multidisciplinary Collaborative Case Assignment	Reporting Year: 2018 - 2019 (Year 1) Target Met: No	Action: The program plans to enhance the students' opportunity

## Program (HS) - Masters in Occupational Therapy (MS in OT)

#### AU Outcome: MS in OT 6.1 Collaborate to develop case study

Measures	Results	Actions
Target: Minimum score of 80% on the assignment Timeframe: When course taught (2nd Year, e.g., Spring 2017) Responsible Parties: Instructor/ OT Faculty /HS Grad Curriculum Committee	The assignment for this goal was moved to the OT 611 class and 5/22 student did not meet the minimum score of 80% on the assignment. Last year 18/19 students met the minimum percentage. (03/23/2020)	to build skills in working on multidisciplinary teams by providing more opportunities to work on cases with students in other programs at the college and with UNI/other institutions, such as SLPs, nursing and physical therapy when that program is fully developed. (03/23/2020)

#### AU Outcome: MS in OT 6.2 Research Presentation

Students develop a research presentation to be presented at the state OT association conference.

Measures	Results	Actions
SL: Didactic - OT 618 – Research Poster Target: Minimum score of 80% on the assignment Timeframe: When course taught (2nd Year, e.g., Spring 2017) Responsible Parties: Instructor/ OT Faculty /HS Grad Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  All students in cohort 3 received full credit for the research posters. All four posters were accepted and presented at the Iowa Occupational Therapy Association 2019 conference and one groups poster was accepted for presentation at the national conference.  All students in cohort 2 received full credit (100%) for their posters and were accepted for presentation at the state conference in October of 2018. Several posters have also been submitted for the national conference in April of 2019. Each year students are achieving high scores on this measure and are even being accepted by the state and national organizations to present. (03/16/2020)	Action: OT faculty will continue to support student development of quality, presentable professional posters for the dissemination of knowledge to the profession. (03/16/2020)

## Program (HS) - Medical Imaging (MI)

**AU Outcome: MI 3.1** 

Students will demonstrate critical thinking skills in the clinical environment.

## Program (HS) - Medical Imaging (MI)

#### **AU Outcome: MI 3.1**

Measures	Results	Actions
MI: 480 Clinical Instructor Evaluations Numbers 2, 4, 7, 8  Target: Average score >= 3 (0-4 pt.	Reporting Year: 2018 - 2019 (Year 1) Target Met: NA No data available. (10/01/2019)	Action: No data available. (10/01/2019)
scale) Timeframe: Summer Semester Responsible Parties: Clinical Instructors/ Program Faculty/ HS Curriculum Committee		
MI: 465 Clinical Instructor Evaluations Numbers 2, 4, 7, 8	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes 2019 = 4 (n=1)	Action: The instructor will continue to use this measurement tool as it demonstrated that it is beneficial to
Target: Average score >= 3 (0-4 pt. scale)	No prior data available for comparison.	student growth and development
Timeframe: Summer Semester Responsible Parties: Clinical Instructors/ Program Faculty/ HS Curriculum Committee	The student showed the ability to use critical thinking skills in all four performance criteria areas: application of knowledge, ability to follow directions, self image, and composure and adaptability. All clinical instructor evaluations are completed using the paper/pencil format. The clinical instructor discussed and reviewed the evaluation with the student during the last week of the course. (10/01/2019)	of critical thinking skills within the clinical environment. (10/01/2019)

#### **AU Outcome: MI 3.2**

Students will demonstrate the ability to practice critical thinking skills.

Measures	Results	Actions
MI: 480 Board Review Exam (MRI)  Target: >= 80% of the students will achieve a passing score of 75 or greater on one of the three exams.  Timeframe: Summer Semester Responsible Parties: MI: 480 Course Instructor/HS Curriculum Committee		Action: No data available. (10/01/2019)

## Program (HS) - Medical Imaging (MI)

#### **AU Outcome: MI 3.2**

Measures	Results	Actions
MI: 465 Board Review Exam (CT)  Target: >= 80% of the students will achieve a passing score of 75 or greater on one of the three exams.  Timeframe: Summer Semester Responsible Parties: MI: 465 Course Instructor/HS Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  2019 (n=1) 100% of the students achieved a passing score of 75 or greater.  No prior data available for comparison.  This student achieved scores of 99%, 100%, and 99% on the three mock board exams that were completed during this course. These exams are designed to mimic a true ARRT board exam with questions from the following categories: patient care, safety, procedures, image production, and physics and instrumentation. These exams were given over a 6 week period with the last two exams being proctored. The student demonstrated the ability to practice critical thinking skills. (10/01/2019)	Action: The instructor will continue to use this measurement tool as it demonstrated that it is beneficial in measuring the student's ability to practice critical thinking skills. (10/01/2019)

## **Program (HS) - Medical Laboratory Science (MLS)**

#### **AU Outcome: MLS 3.2**

Students will integrate team-building skills into professional practice

Measures	Results	Actions
SL: Service - Service Learning Project Target: 75% of students will receive an average score of >80% Timeframe: Annually Responsible Parties: Program Chair/HS APG Committee	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes Fall 2018 - 14 students  100% (14/14) earned an average score of >85%.  Overall average score = 98.9%  Overall Averages	Action: This assignment will be included the next time this course is taught with no revisions. It will be presented as separate weekly modules during the course with the goal of completing a group project. Students will complete module discussions to help them collect information needed for their final

## **Program (HS) - Medical Laboratory Science (MLS)**

#### **AU Outcome: MLS 3.2**

Measures	Results	Actions
	2018 = 94.3%	presentation. Additionally,
	2017 = 95.5%	students will complete weekly
	2016 = 90.0%	journal entries to keep the course
	2015 = 92.5%	instructor updated on the progress
	2014 = 95.6%	of their projects. Subsequent
	2013 = 95.7%	sections will be assessed on this
	2012 = 97.3%	measurement tool to ensure the
		target continues to be met.
	The Service Learning project was presented as separate weekly modules during the course	(08/02/2019)
	with the goal of completing a group project. Students developed activities for a STEM fair	
	developed in conjunction with the recruiting department. This year's activities had a zombie	
	theme and included testing on simulated samples. Students completed module discussions	
	that helped them collect information needed for their final presentation. Additionally,	
	students had to complete weekly journal entries to keep the course instructor updated on	
	the progress of their projects. Students were engaged with this project and enjoyed sharing	
	information about the lab profession with students that attended the STEM fair.	
	(08/02/2019)	
	Related Documents:	
	Service Learning Final Project Description_2018.pdf	
	SL Final Project Scoring Rubric 2017.pdf	
	SETTIME PROJECT SCOTTING NUMBER 2017. PULL	

## Program (HS) - Public Health (PH)

**AU Outcome: PH 3.1** 

Student will be able to recognizes the role of cultural factors in the delivery of public health services

Measures	Results	Actions
SL: Didactic - PH: 420 Final report Target: Average score of >80% Timeframe: Fall semester	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes In Summer 2018, three students taking the course received average of 83.33% on their final	<b>Action:</b> While students continue to meet the standard, there is a clear

## Program (HS) - Public Health (PH)

### **AU Outcome: PH 3.1**

Measures	Results	Actions
Responsible Parties: Program faculty / HS Curriculum committee	report. In Fall 2016, two students taking the course received average of 81%. To achieve the target for this measure during 2017-2018, no specific action plan was proposed. The plan was to continue the measure and compare the results to previous years because the drop in final report scores "was likely do to a change in instructor and course materials" and "the small number of students in the course make it difficult to gauge the quality of the results." (08/23/2018)	need to improve. There is a wide variation in student achievement on this assignment. The instructor will create an improved rubric to see if that improves student scores. (08/23/2018)

# Program (Nursing) - Bachelor of Science in Nursing (BSN)

#### **AU Outcome: BSN 6.0 Patient-Centered Care**

Use patient-centered strategies when delivering care to diverse individuals and populations.

Outcome Status: Active Start Date: 08/01/2014

Measures	Results	Actions
SL: Exam/Quiz - Standardized - Proctored ATI Fundamentals exam Target: Group score of at least 75% in the QSEN Category of Patient- Centered Care on proctored ATI Fundamentals exam Timeframe: Annually (starting 2019- 2020; assessed Year 2 prior to 2019- 2020) Responsible Parties: BSN Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: No  Fall 2018 UD: Group score - 65.2%  Fall 2018 Accel: Group score - 68.1%  Fall 2018 AH: Group score - 77.3%  Spring 2019 UD: Group score - 68.7%  Spring 2019 Accel: Group score - 72%  Despite implementation of active learning activities in the course, improvements were not seen. (11/26/2019)	Action: In order to meet this target in the future, faculty will implement more NCLEX practice questions focused on Patient-Centered Care and continue to implement active learning strategies in the classroom. (11/26/2019)
AD: Survey - Alumni Survey Item: How well BSN education prepared you to use patient-centered strategies when delivering care to diverse individuals and populations	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  100% of 2017-2018 alumni survey respondents (n = 38) reported their BSN education prepared them well (42.11%) or very well (57.89%) to perform this outcome.  100% of 2016-2017 alumni survey respondents (n = 56) reported their BSN education	Action: Survey 2018-2019 alumni during 2020. Compare responses and monitor for favorable and unfavorable trends. (03/09/2020)

## **Program (Nursing) - Bachelor of Science in Nursing (BSN)**

#### **AU Outcome: BSN 6.0 Patient-Centered Care**

Measures	Results	Actions
(1= very poorly, 2 = poorly, 3 = well, 4 = very well)  Target: 75% of respondents will report that their BSN education prepared them well or very well to use patient-centered strategies when delivering care to diverse individuals and populations.  Timeframe: Annually Responsible Parties: CIRE, Evaluation & Study Committee	prepared them well (55.36%) or very well (44.64%) to perform this outcome.  Results are consistent with previous alumni surveys. the target of 75% favorable responses (well or very well) has been consistently met or exceeded. (03/09/2020)	
AD: Survey - Employer Survey Item: How well BSN graduate uses patient-centered strategies when delivering care to diverse individuals and populations (1= very poorly, 2 = poorly, 3 = well, 4 = very well, NA = not applicable, e.g., does not perform outcome, or outcome not applicable to current role). Target: 75% of respondents will report that BSN graduate uses patient-centered strategies when delivering care to diverse individuals and populations well or very well. Timeframe: Annually Responsible Parties: CIRE, Evaluation & Study Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  Survey of employers of 2017-2018 BSN graduates: 100% of employers who responded to the survey (n = 6) reported the BSN program graduate performs this outcome very well.  Survey of employers of 2016-2017 BSN graduates: 100% of employers who responded to the survey (n = 9) reported the 2016-2017 BSN program graduate performs this outcome well (44.44%) or very well (55.56%).  The target for this measure as been consistently achieved or exceeded. (03/09/2020)	Action: Survey employers of 2018-2019 graduates during 2020. Compare responses and monitor for favorable and unfavorable trends. (03/09/2020)
AD: Survey - Alumni Survey Item: How often in current professional nursing practice you use patient- centered strategies when delivering care to diverse individuals and	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  >95% of 2017-2018 alumni survey respondents who answered this item (n = 37) reported perform this outcome some (5.41%) or most (91.89%) of the time in their current	Action: Survey 2018-2019 alumni during 2020. Compare responses and monitor for favorable and unfavorable trends. (03/09/2020)

# Program (Nursing) - Bachelor of Science in Nursing (BSN)

#### **AU Outcome: BSN 6.0 Patient-Centered Care**

Measures	Results	Actions
populations (1= not at all, 2 = rarely, 3 = some of the time, 4 = most of the time, NA = not applicable, e.g., not working in a BSN nursing role, or outcome not applicable to current role).  Target: 75% of respondents will report they use patient-centered strategies when delivering care to diverse individuals and populations some or most of the time in current professional nursing practice.  Timeframe: Annually Responsible Parties: CIRE, Evaluation & Study Committee	professional practice.  100% of 2016-2017 alumni survey respondents who answered this item (n = 51) reported they perform this outcome some (11.76%) or most (88.24%) of the time in their current professional practice.  Results are consistent with previous alumni surveys. (03/09/2020)	
AD: Survey - Employer Survey Item: How often BSN graduate uses patient-centered strategies when delivering care to diverse individuals and populations (1= not at all, 2 = rarely, 3 = some of the time, 4 = most of the time, NA = not applicable, e.g., not working in a BSN nursing role, or outcome not applicable to current role). Target: 75% of respondents will report that BSN graduate uses patient-centered strategies when delivering care to diverse individuals and populations some or most of the time in current professional nursing practice. Timeframe: Annually	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  Survey of employers of 2017-2018 BSN grads: 100% of employers who responded to the survey (n = 6) reported the BSN program graduate performs this outcome most of the time in current professional practice. This result exceeds those of previous alumni surveys.  Survey of employers of 2016-2017 BSN grads: 83% of employers who responded to the survey (n = 12) reported the BSN program graduate performs this outcome some (8.33%) or most (75%) of the time in current professional practice.  The target for this measure has been consistently met or exceeded. (03/09/2020)	Action: Survey employers of 2018-2019 graduates during 2020. Compare responses and monitor for favorable and unfavorable trends. (03/09/2020)

## **Program (Nursing) - Bachelor of Science in Nursing (BSN)**

#### **AU Outcome: BSN 6.0 Patient-Centered Care**

Measures	Results	Actions
<b>Responsible Parties:</b> CIRE, Evaluation & Study Committee		

College Goal 4 - Promote a commitment by all members of the Allen College community to lives of service to others.

## Admin - Center for Engagement, Learning, and Leadership

#### **AU Outcome: CELL 1.1**

Allen College culture supports and sustains community service and service-learning

Outcome Status: Active

Measures	Results	Actions
AD: Report - Internal - Service- Learning Faculty Scholars Assessment Target: 100% of Allen College programs incorporate service and/or learning activities into their curricula. Timeframe: Years 2 and 4 Responsible Parties: Center for Engagement, Learning, and Leadership Committee/CELL coordinator	Reporting Year: 2018 - 2019 (Year 1) Target Met: NA No results for 2018-2019 because measure not due to be assessed. (06/26/2019)	Action: The CELL committee will discuss offering the Faculty Scholars Program again during the 2019-2020 academic year. An In-Service could be planned for May 2019 to reintroduce the program and encourage faculty to apply for the 2019-2020 year. (04/09/2020)
AD: Survey - Exit survey question "Do you intend to volunteer in your community in the future?" (yes, no) Target: 90% of exiting students report that they intend to volunteer in their communities in the future. Timeframe: Annually Responsible Parties: Center for Engagement, Learning, and Leadership Committee/CELL coordinator	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  All programs combined, 97% of exiting students reported that they intended to volunteer in their communities in the future. Within individual programs and cohorts within those programs, the results for this measure on 10 of12 exit interviews indicated the target of 90% was achieved. This was an increase of 7.18% from the 2017-2018 exit results indicating an appropriate action plan. See attached report for program specific results. (04/13/2020)  Related Documents:  2018-2019 Exit Survey Report for Volunteer Item.docx	Action: To continue to meet the goal of 90% of students intending to volunteer in the future, the CELL committee will offer a variety of opportunities for volunteering. These opportunities allow students a better insight into options within communities where they can volunteer. The CELL will promote and support volunteer opportunities of all programs at the college. (04/13/2020)

### **AU Outcome: CELL 2.1**

Alumni will demonstrate community service

	Measures	Results	Actions

## Admin - Center for Engagement, Learning, and Leadership

#### **AU Outcome: CELL 2.1**

Measures	Results	Actions
AD: Survey - Alumni survey item: To what extent did your educational experience influence your desire to provide service to your community? Target: 50% of alumni reported that their educational experience influenced their desire to provide service to their communities at least "some" (i.e., 0= not at all, 1 = very little, 2 = some, 3 = quite a bit, 4 = very much). Timeframe: Annually Responsible Parties: Center for Engagement, Learning, and Leadership Committee/CELL coordinator	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  The target (50% of alumni will report that their education at Allen College influenced their desire to provide service to their communities at least some) was met.  Overall, 71% pf 2017-2018 alumni responding to alumni surveys for their respective programs have reported that their desire to serve their communities was influenced at least "some" by their education at Allen College. This result is a decrease of 8.97% from the 2016-2017 graduates. (04/13/2020)	Action: To increase the number of alumni who meet this target, the CELL will implement several strategies during the 2018-2019 academic year to improve the transparency of service at Allen College. This will include service testimonials using social media, keeping the CELL bulletin board up to date, and attempting to be more transparent in all academic programs about how service is part of the mission at Allen College. (04/13/2020)
AD: Survey - Alumni survey item: How many hours of community service have you been involved in during the past 12 months? (0, 1-4, 5-9, 10-14, 15-19, 20-24, 25 or more) Target: 60% of alumni responding to the survey report performing at least 5-9 hours of service during the past 12 months. Timeframe: Annually Responsible Parties: Center for Engagement, Learning, and Leadership Committee/CELL coordinator	Reporting Year: 2018 - 2019 (Year 1)  Target Met: No  22/63 (35%) of 2017-2018 alumni who answered this question reported performing at least 5-9 service hours during the previous 12 months (see attached report). Based on alumni survey data for 2016-2017 graduates, 41% of graduates who responded to this item reported doing at least 5-9 hours of community services in the previous 12 months, which is a 14.63% decrease. The result from the survey of 2017-2018 grads is also lower than results for the 2015-2016 (56%) and 2014-2015 graduates (48%). the target has not been met for several consecutive reporting years. (04/13/2020)	Action: The CELL will post service and volunteer stories of students and alumni on social media to let the community know how Allen College continues to support the mission of service. The CELL will continue to discuss how it can reach out to alumni to encourage service within their community. (04/13/2020)

**AU Outcome: CELL 2.2** 

Promote leadership development through community service

# Admin - Center for Engagement, Learning, and Leadership

## **AU Outcome: CELL 2.2**

Measures	Results	Actions
SL: Survey - Exit Survey: Participation in on- and off-campus committees, organizations, or projects.  Target: 60% of the respondents report participation in either on- or off-campus committees, organizations, or projects.  Timeframe: Annually Responsible Parties: Center for Engagement, Learning, and Leadership Committee/CELL coordinator	Reporting Year: 2018 - 2019 (Year 1) Target Met: No Overall, 57% of exit interview respondents reported having participated in extra-activities (volunteer, service, campus committees, organizations) while attending Allen College, indicating a 7.34% increase from the 2017-2018 reporting year. See attached report for program-specific participation rates as reported by students completing exit surveys. (04/13/2020) Related Documents: 2018-2019 Exit Survey Report for Participation Item.docx	Action: Activities will continue to be offered with new sites added as available. Service opportunities will be offered on a variety of days and times to attempt to accommodate the various schedules of the programs. Additionally, the CELL coordinator will meet with the Deans to seek a better understanding of why the numbers are increasing and decreasing for the accelerated and upper division cohorts. The CELL coordinator will also consult with the Deans to discuss the differences between the nursing and health sciences program exit survey items used to collect data needed to complete this measure. (04/13/2020)
AD: Survey - Honors Program and Service Learning course rosters  Target: 35% of each cohort in the upper division prelicensure BSN program enrolls in the service honors program or a service-learning elective.  Timeframe: Annually Responsible Parties: Center for Engagement, Learning, and Leadership Committee/CELL coordinator	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  47.5% (29/62) upper division pre-licensure BSN students enrolled in service honors or a service-learning elective.  • Fall 2017 cohort – 57% (16/28) enrolled in service honors program or service-learning elective  • Spring 2018 cohort – 38% (13/34) enrolled in service honors program or service-learning elective  • Other cohorts have yet to all enroll in their nursing elective.  The percent participating 2018-2019 is an increase of 13% from 2017-2018. The action plan helped to achieve this increased percentage. (04/13/2020)	Action: Action Plan: Continue to offer a variety of service-learning options for electives for the upper division nursing students. Different travel destinations such as Europe and different U.S. locations are being considered as options for an elective. (04/13/2020)
<b>SL: Survey -</b> Exit Survey: Managing or leading an organization.	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes	<b>Action:</b> The results from 2018-2019 are higher than the 15% which was

## Admin - Center for Engagement, Learning, and Leadership

#### **AU Outcome: CELL 2.2**

Measures	Results	Actions
Target: 15% of respondents report managing or leading an organization. Timeframe: Annually Responsible Parties: Center for Engagement, Learning, and Leadership Committee/CELL coordinator	45% of students reported managing or leading an organization. The 45% result is well above the 15% target and an increase of 55.17% from the 2017-2018 year. See the attached report. (04/13/2020)  Related Documents: 2018-2019 Exit Survey Report for Lead Item.docx	the new target set after the 2016-2017 report. This new target of 15% remains reasonable and will be used another year to see if the reporting remains at this level.  Allen College will continue to provide leadership opportunities throughout the curriculum, especially in the leadership course.  AC 316 Service Honors will continue to challenge students through course service projects to take leadership roles in the community and on-campus. The CELL will consider gathering information from student groups on campus to compile leadership opportunities offered through their membership. This may be used to provide important information so all students can see where they can gain leadership experience while in their particular program at the college. (04/13/2020)

**AU Outcome: CELL 3.1** 

Collaborate with partners in the community

Measures	Results	Actions
AD: Report - Internal - Sign up sheets from service days Target: 15% of students attend	Reporting Year: 2018 - 2019 (Year 1) Target Met: No 7% (44/649 students participated in the college-wide community service events this	<b>Action:</b> The CELL committee will continue discussion on options for campus-wide service and

## Admin - Center for Engagement, Learning, and Leadership

#### **AU Outcome: CELL 3.1**

Measures	Results	Actions
college-wide community service events yearly.  Timeframe: Annually Responsible Parties: Center for Engagement, Learning, and Leadership Committee/CELL coordinator	academic year. This percentage is lower than the 18.2% from 2017-2018. It was noted that the action plan called for multiple opportunities through a variety of options in times and days, fewer students signed up for volunteering. The action plan was executed but further discussion is indicated to determine a revised plan to increase participation. (04/13/2020)	volunteering opportunities. Consideration will be given to fewer high count days and look towards more single event opportunities that might have greater appeal and make even more times available than in previous years. (04/13/2020)
SL: Service - Services stories posted on social media Target: Featured service stories on social media will reach 1,500 people and have 15 "likes". Timeframe: Annually Responsible Parties: Center for Engagement, Learning, and Leadership Committee/CELL coordinator	Reporting Year: 2018 - 2019 (Year 1) Target Met: No Data not available at the time of this report. See the action plan. (04/13/2020)	Action: In order to meet this target in the future, the CELL will continue to publicize service events and activities that are happening on the campus. The goal will be to increase the number of events that are publicized which may help to continue to meet this target in the future. CELL members will be asked to follow-up with organizations and courses that offer service so that a post can be made to social media. (04/13/2020)

# **Admin - Enrollment Management**

**AU Outcome: EM 9.0** 

Students are represented on college committees

Measures	Results	Actions
AD: Report - Internal - Allen College	<b>Reporting Year:</b> 2018 - 2019 (Year 1)	Action: Due to the high percentage

# **Admin - Enrollment Management**

#### **AU Outcome: EM 9.0**

Measures	Results	Actions
Student Opinion Survey Opportunity for student involvement in college committees  Target: 80% of students report satisfied or very satisfied Timeframe: Year 4  Responsible Parties: Dean of Enrollment Management	Target Met: No 54% of students reported to be satisfied with the opportunities to be involved in college committees. Only 2% were dissatisfied. This leaves a large group of students were are unaware of the ability to be a part of college committees.  During the 17-18 academic year, 77 students, or 33.19%, indicated they were unaware of the opportunity for committee involvement. Of those aware, 54.31 were either satisfied or very satisfied with the opportunity for involvement in college committees. Although the same percentage of students indicated that they are aware of the opportunity for committee involvement, a smaller percentage is satisfied with the opportunities available.  The two years are almost identical.  Last year's action plan included continued education for students and further encouragement for students in the ambassador program to be involved in committees. The percentage of students aware of the opportunity for college committee involvement remains virtually the same since 2013-14. (10/01/2019)	of students who are unaware of this opportunity, this goal will be brought to the student Ambassadors for assistance in educating their peers. (10/01/2019)
	Related Documents: Student Satisfaction Survey for CAP.pdf	

#### **AU Outcome: EM10.0**

Recognize Student Scholarship

Measures	Results	Actions
AD: Report - Internal - GPA criteria recorded in CAMS  Target: All students who meet honor criteria are recognized  Timeframe: Each semester	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  During the 2018-19 academic year, 67% of students graduating from and undergraduate program received academic honors.  During the 2018-19 academic year (using fall/spring only), 51% of undergraduate students were eligible for the Dean's List and all were recognized.	Action: Determine a different way to measure recognizing student scholarship. Following policy does not contribute to the success or lack of success. (10/01/2019)

## **Admin - Enrollment Management**

#### **AU Outcome: EM10.0**

Measures	Results	Actions
Responsible Parties: Registrar	During the 2017-18 academic year, 64% of students graduating from and undergraduate program received academic honors. This is the first year tracking the percentages. 63.17% of undergraduate students were eligible for the Dean's list during the 17-18 academic year and all were recognized.	
	Academic honors had a slight increase from 2017-18 to 2018-19. The number of students on the Dean's List appears to be quite lower than last year. However, after further review for reasonableness, 2017-18 numbers were recalculated and should have been reported as 49%. Again, there was a slight increase in Dean's List recipients between the two years.	
	Last year's action plan: Continue to monitor the honors policies and recognize students per policy Continuing to follow the policy will not contribute to the success or lack of success. (10/01/2019)	

# Program (HS) - Associate of Science in Radiography (ASR)

#### **AU Outcome: ASR 4.1**

Students will integrate leadership skills and construct professional practices

Measures	Results	Actions
SL: Service - RA:135 Community Service/Service Learning Evaluation Target: Average score of >= 80% Timeframe: Level I-Fall Semester Responsible Parties: RA: 135 Course Instructors/HS Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes 2018: 83.69% (n=13)  Benchmark met  Previous data: 2017: 94.78 (n=14) 2016: 72% (n=13) 2015: 92.56% (n=16) 2014: 97.94% (n=17)	Action: The course instructors will make a few editorial changes to the assignment instructions for emphasis and clarification. (07/03/2019)

## Program (HS) - Associate of Science in Radiography (ASR)

#### **AU Outcome: ASR 4.1**

Measures	Results	Actions
	The majority of point deductions occurred in the overall writing and the research categories of the assessment rubric. Some students did not answer all questions or did not provide any citations in their paper to evidence that they researched the organization. All students performed service learning through a variety of organizations. Students demonstrated leadership skills and professionalism through their involvement in service learning activities. (07/03/2019)	
SL: Service - RA: 265 Community Service/Service Learning Evaluation Target: Average score of >= 80% Timeframe: Level II-Fall Semester Responsible Parties: RA: 265 Course Instructors/HS Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: No 2018: 76.75% (n=12) Benchmark not met.  Previous data: 2017: 93.33% (n=12) 2016: 93.4% (n=15) 2015: 82.47% (n=17) 2014: 99.13% (n=15)  Two students in this cohort attempted to submit hours that were not performed during the offering of this course. These students received half of the possible points. The assignment instructions did state that all service hours must be completed during the offering of this course. Some students provided limited and below average reflection statements resulting in point deductions in the research and writing categories of the assessment rubric. One student did not follow the instructions to provide evidence of participation as part of their paper resulting in a 10% total grade reduction. (07/03/2019)	Action: The course instructors will make a few editorial and organizational changes to the assignment instructions in an attempt to better emphasize and clarify the expectations for the assignment. (07/03/2019)

**AU Outcome: ASR 4.2** 

Students will practice professionalism

Measures	Results	Actions
SL: Clinical evaluation tool - RA:135 Clinical Instructor/Preceptor Evaluations Numbers 1,5,9,12,13	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes 2018 - 3.68(n=13) Benchmark met.	Action: Clinical instructors will continue to provide effective and timely feedback to students. (07/03/2019)

## Program (HS) - Associate of Science in Radiography (ASR)

#### **AU Outcome: ASR 4.2**

Measures	Results	Actions
Target: Average score >= 3 (0-4 pt. scale) Timeframe: Level I- Fall Semester Responsible Parties: Clinical Instructors/ Program Faculty/HS Curriculum Committee	Previous data: 2017 - 3.68(n=14) 2016 - 3.6 (n=13) 2015 - 3.83(n=16) 2014 - 3.80(n=17) The students' average scores had a slight increase in two areas; appearance and ethical and professional behaviors. The students' initiative score remained the same and a slight decrease in organization of assignments and policies and procedures. All student evaluations are completed on Trajecsys by the clinical instructors. Students have immediate access to the completed evaluations on Trajecsys. Students continue to practice professionalism in the clinical environment. (07/03/2019)	
SL: Clinical evaluation tool - RA:275 Clinical Instructor/Preceptor Evaluations Numbers 1,5,9,12,13  Target: Average score >= 3 (0-4 pt. scale) Timeframe: Level II-Spring Semester Responsible Parties: Clinical Instructors/ Program Faculty/HS Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes 2018-2019- 3.83 (n=12)  Target/benchmark met.  Previous data: 2017-2018 3.76 (n=12) 2016-2017 3.96 (n=15) 2015-2016 3.98 (n=17) 2014-2015 3.91 (n=15)  This result is an increase compared to the previous year. The student scores were lower in only one area which was organization of assignments and higher in areas of initiative, appearance, policies and procedures, and ethical and professional behaviors. (07/03/2019)	Action: To continue to meet or exceed the target/benchmark for this measure during the 2019-2020 academic year, clinical instructors/preceptors in the clinical setting will continue to provide excellent instruction and supervision of students to access their professionalism. (07/03/2019)

### Program (HS) - Diagnostic Medical Sonography (DMS)

**AU Outcome: DMS 2.2** 

Students will successfully obtain patient history

Measures	Results	Actions
SL: Clinical evaluation tool - DMS:		

# Program (HS) - Diagnostic Medical Sonography (DMS)

#### **AU Outcome: DMS 2.2**

Measures	Results	Actions
408 Clinical Instructor/Preceptor Evaluations Number 1  Target: On a scale from 1-5, 5 being the highest rating, the average of all the responses >=4 Timeframe: Didactic Level - Fall Semester  Responsible Parties: DMS:408 Course Instructor/Program Faculty/HS Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  Avg. 4.62 All students scored above 4 (n=9) Trend is consistent with previous years.  Students continue to demonstrate ability to communicate effectively with patient. The action plan identified continuity in assessing this area during clinicals at this time.  Fall 2017 avg 4.94  Fall 2016 avg 4.71  Fall 2015 avg 4.47 (07/30/2019)	Action: Faculty obtained and assessed feedback from clinical instructors. Faculty reviewed evaluations with clinical instructors and student at each site visit and identified /make recommendations for student improvement. Note: Previous action plan proposed that a new outcome or assessment tool would be considered. However, due to the additions of new student clinical sites, faculty wanted to continue this assessment item for one more year. Proposal for next year is to consider new outcome or assessment tool. (07/30/2019)

**AU Outcome: DMS 4.2** 

Students will practice professionalism in the clinical lab setting

Measures	Results	Actions
SL: Clinical evaluation tool - DMS:408 Clinical Instructor/ Preceptor Evaluations Numbers 1,2,10-13,15-19  Target: On a scale from 1-5, 5 being the highest rating, the average of all	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes Fall 2018- student's avg score is 4.92 (n=9) Score remain consistently high as compared to previous cohort score.  Fall 2017- student's avg score is 4.8 (n=7)	Action: Faculty will obtain and assess feedback from clinical instructors. At each site visit, program faculty will review evaluations with clinical instructors and the student. Areas of concern
the responses >=4 Timeframe: Didactic Level - Fall Semester Responsible Parties: DMS 408	Will follow the previous year's action plan to keep as a CAP measurement tool as it provides valuable information of student's clinical progress by semester and by cohort (09/20/2019)	will be identified and recommendation/plan of action for student improvement will be developed. To determine consistency of trend, no change in

## Program (HS) - Diagnostic Medical Sonography (DMS)

#### **AU Outcome: DMS 4.2**

Measures	Results	Actions
Instructor/ Program Faculty/HS Curriculum Committee		measurement tool for another cycle of data. (09/20/2019)  Follow-Up: The action plan provided areas that helped to improve student performance in the clinical setting. (05/06/2020)
SL: Clinical evaluation tool - DMS:409 Clinical Instructor/ Preceptor Evaluations Numbers 1,2,10-13,15-19  Target: On a scale from 1-5, 5 being the highest rating, the average of all the responses >=4 Timeframe: Didactic Level - Spring Semester  Responsible Parties: DMS 408 Instructor/ Program Faculty/HS Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes Sp 2019 Avg. 4.93 (9) Score remain consistently high as compared to previous cohort score. Spring 2018 avg score is 4 Spring 2017 avg 4.83 (n=4) Will follow the previous year's action plan to keep as a CAP measurement tool as it provides valuable information of student's clinical progress by semester and by cohort (09/20/2019)	Action: Faculty will obtain and assess feedback from clinical instructors. At each site visit, program faculty will review evaluations with clinical instructors and the student. Areas of concern will be identified and recommendation/plan of action for student improvement will be developed. To determine consistency of trend, no change in measurement tool for another cycle of data. (09/20/2019)  Follow-Up: The action plan provided areas that helped to improve student performance in the clinical setting. (05/06/2020)

# Program (HS) - Doctor of Education (Ed.D.)

**AU Outcome: EdD 3.1** 

Students will demonstrate organizational and systems leadership to advance quality improvement and systems change.

## Program (HS) - Doctor of Education (Ed.D.)

#### **AU Outcome: EdD 3.1**

Measures	Results	Actions
SL: Didactic - EdD 700: Organizational Development and Change in Education – Discussions Target: Students will receive an average score of >90% for all discussions within the course Timeframe: When course is taught Responsible Parties: Program Chair/HS Graduate APG Committee	Reporting Year: 2018 - 2019 (Year 1) Target Met: NA Course not offered. (08/01/2019)	
SL: Didactic - EdD 710: Leading a Health Sciences Learning Organization — Strategic Planning Project Target: 100% of students will receive a score of >=85% Timeframe: When course is taught (e.g., 2015, 2018, etc.) Responsible Parties: Program Chair/ HS Grad Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1) Target Met: NA Course not offered. (08/01/2019)	

## Program (HS) - Masters in Occupational Therapy (MS in OT)

# AU Outcome: MS in OT 3.1 Required formats to document

Students will use required formats to accurately document intervention.

Measures	Results	Actions
SL: Clinical - OT 601 - Treatment Note  Target: Minimum of 80% on documentation note Timeframe: When course taught (2nd Year, e.g., Fall 2016)	Reporting Year: 2018 - 2019 (Year 1)  Target Met: No  19/22 students received a minimum of 80% or higher on this assignment with the average on the assignment being 27.08. The average grade was lower than the reported average last year. (03/16/2020)	Action: The faculty will develop additional opportunities for students to practice writing treatment notes using required formats to ensure learning of this task. (03/16/2020)

## Program (HS) - Masters in Occupational Therapy (MS in OT)

### AU Outcome: MS in OT 3.1 Required formats to document

Measures	Results	Actions
Responsible Parties: Instructor/ OT Faculty /HS Grad Curriculum Committee		

#### **AU Outcome: MS in OT 3.2 Ethical Principles**

Students will demonstrate the ability to apply ethical principles in decision-making.

Measures	Results	Actions
SL: Exam/Quiz - Teacher-made - OT 509 - Ethics Quiz Target: When course taught (1st Year, e.g., Fall 2016) Timeframe: Minimum score of 80% on quiz Responsible Parties: Instructor/ OT Faculty /HS Grad Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes 24/24 students met the minimum score of 80% on the quiz. The average score was 43.625 or 87.25%. This is an improvement from not met to met this year compared to last year. It was decided last year, 2017-2018, that the information taught to meet this measure was covered more thoroughly in OT 501. However, this is change was not represented here, though the change was completed in the coursework for 2018-2019. (03/16/2020)	Action: The faculty will review this data and decide where this information is most strongly measured for the next CAP reporting year to gather the most representative information. (03/16/2020)

# Program (HS) - Medical Imaging (MI)

#### **AU Outcome: MI 4.1**

Students will integrate leadership skills and construct professional practices.

Measures	Results	Actions
MI: 460 Service Learning Project (MRI)  Target: Average score of >= 80%  Timeframe: Spring Semester  Responsible Parties: MI: 460 Course Instructors/HS Curriculum  Committee	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes 2019 = 94% (n=1) No prior data available for comparison.  This student demonstrated leadership skills and professionalism throughout her involvement in this service learning activity. A detailed rubric with specific content requirements was	Action: The instructor will continue to use this measurement tool as it demonstrated that it is beneficial to students as they establish and develop professionalism.  (10/01/2019)

# Program (HS) - Medical Imaging (MI)

#### AU Outcome: MI 4.1

Measures	Results	Actions
	given to the student at the beginning of the semester to ensure that the organization she selected would coincide with the assignment requirements. (10/01/2019)	
MI: 445 Service Learning Project (CT) Target: Average score of >= 80%. Timeframe: Spring Semester Responsible Parties: MI: 445 Course Instructors/HS Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes 2019 = 99% (n=1) No prior data available for comparison.  This student demonstrated leadership skills and professionalism throughout her involvement in this service learning activity. A detailed rubric with specific content requirements was given to the student at the beginning of the semester to ensure that the organization she selected would coincide with the assignment requirements. (10/01/2019)	Action: The instructor will continue to use this measurement tool as it demonstrated that it is beneficial to students as they establish and develop professionalism.  (10/01/2019)

#### **AU Outcome: MI 4.2**

Students will practice professionalism.

Measures	Results	Actions
MI: 480 Clinical Instructor Evaluations Numbers 1,5,9,12,13 Target: Average score >= 3 (0-4 pt. scale) Timeframe: Summer Semester Responsible Parties: Clinical Instructors/ Program Faculty/HS Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1) Target Met: NA No data available. (10/01/2019)	Action: No data available. (10/01/2019)
SL: Clinical evaluation tool - MI: 465 Clinical Instructor Evaluations Numbers 1,5,9,12,13 Target: Average score >= 3 (0-4 pt. scale) Timeframe: Summer Semester Responsible Parties: Clinical Instructors/ Program Faculty/HS	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes 2019 = 4 (n=1)  No prior data available for comparison.  The student showed professionalism in all five performance criteria areas: organization of assignments, initiative, appearance, policies and procedures, and ethical and professional behaviors. All clinical instructor evaluations are completed using the paper/pencil format.	Action: The instructor will continue to use this measurement tool as it demonstrated that it is beneficial in measuring student professionalism within the clinical environment. (10/01/2019)

## Program (HS) - Medical Imaging (MI)

#### **AU Outcome: MI 4.2**

Measures	Results	Actions
Curriculum Committee	The clinical instructor discussed and reviewed the evaluation with the student during the last week of the course. (10/01/2019)	

## **Program (HS) - Medical Laboratory Science (MLS)**

**AU Outcome: MLS 3.1** 

Students will maintain competency in the laboratory field of study

Measures	Results	Actions
SL: Didactic - Annotated	Reporting Year: 2018 - 2019 (Year 1)	Action: This assignment will be
Bibliographies – MLS 426: Evidence-	Target Met: Yes	included the next time this course
Based Laboratory Medicine	Fall 2018 – 14 students	is taught. Additional explanation
Target: 75% of students will receive	70.50( /44 /44)	about the assignment
an average score of >80%	78.6% (11/14) earned an average score of >85%.	requirements, for example, in a
Timeframe: Annually	Overall average score = 91.1%	narrated presentation, would
,	Overall average score = 51.170	benefit all students. Subsequent sections will be assessed on this
Responsible Parties: Program	2017-2018 = 88.4% (overall average)	measurement tool to ensure the
Chair/HS APG Committee	2016-2017 = 96.2% (overall average)	target continues to be met.
	2015-2016 = 90.9% (overall average)	Continue to monitor. (08/02/2019)
	Students were required to use the evidence-based practice (EBP) process to complete annotated bibliographies on two pieces of evidence that related to a student-selected topic. Skills learned throughout the course culminated in a final project that encompassed the entire EBP process. Students were provided with a list of expectations along with a breakdown of how points were earned to help guide project development. This course was developed to meet the needs of learners with varying backgrounds in research to show how the EBP process is used in the laboratory setting. Students who did not do well lost points for missing required elements. (08/02/2019)  Related Documents:  426 Annotated Bibliography and Grading.pdf	Continue to monitor. (06/02/2019)

### **Program (HS) - Medical Laboratory Science (MLS)**

**AU Outcome: MLS 3.1** 

### Program (HS) - Public Health (PH)

**AU Outcome: PH 3.1** 

Student will be able to recognizes the role of cultural factors in the delivery of public health services

Outcome Status: Active

Measures	Results	Actions
SL: Didactic - PH: 420 Final report Target: Average score of >80% Timeframe: Fall semester Responsible Parties: Program faculty / HS Curriculum committee	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes In Summer 2018, three students taking the course received average of 83.33% on their final report. In Fall 2016, two students taking the course received average of 81%. To achieve the target for this measure during 2017-2018, no specific action plan was proposed. The plan was to continue the measure and compare the results to previous years because the drop in final report scores "was likely do to a change in instructor and course materials" and "the small number of students in the course make it difficult to gauge the quality of the results."  (08/23/2018)	Action: While students continue to meet the standard, there is a clear need to improve. There is a wide variation in student achievement on this assignment. The instructor will create an improved rubric to see if that improves student scores. (08/23/2018)

#### **AU Outcome: PH 3.2**

Student should be able to describes the role of governmental and non-governmental organizations in the delivery of community health services

Measures	Results	Actions
SL: Exam/Quiz - Teacher-made - PH: 410 Final exam Target: Average score of >80% Timeframe: Fall semester Responsible Parties: Program faculty / HS Faculty Org. committee	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes Eleven students received an average of 82.6% on the final exam. In Fall 2017, three students earned an average of 91.7%. (05/23/2019)	Action: This measure will remain but test questions missed by five or more students will be edited or removed. The instructor will also consider allowing students to take the exam twice in order to study material that might have been missed the first time through. (05/23/2019)

## Program (Nursing) - Bachelor of Science in Nursing (BSN)

## **Program (Nursing) - Bachelor of Science in Nursing (BSN)**

#### **AU Outcome: BSN 7.0 Professional Role**

Model the professional role. **Outcome Status:** Active **Start Date:** 08/01/2014

Measures	Results	Actions
AD: Survey - Alumni Survey Item: How well BSN education prepared you to model the professional role (1= very poorly, 2 = poorly, 3 = well, 4 = very well). Target: 75% of respondents will report that their BSN education prepared them well or very well to model the professional role. Timeframe: Annually Responsible Parties: CIRE, Evaluation & Study Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  100% of 2017-2018 alumni survey respondents (n = 38) reported their BSN education prepared them well (34.20%) or very well (65.79%) to perform this outcome. Results are consistent with previous alumni surveys.  100% of 2016-2017 alumni survey respondents (n = 56) reported their BSN education prepared them well (35.71%) or very well (64.29%) to perform this outcome.  Results are consistent with previous alumni surveys. the target of 75% favorable responses (well or very well) has been consistently met or exceeded. (03/09/2020)	Action: Survey 2018-2019 alumni during 2020. Compare responses and monitor for favorable and unfavorable trends. (03/09/2020)
AD: Survey - Employer Survey Item: How well BSN graduate models the professional role (1= very poorly, 2 = poorly, 3 = well, 4 = very well, NA = not applicable (e.g., does not perform outcome, or outcome not applicable to current role). Target: 75% of respondents will report that BSN graduate models the professional role well or very well. Timeframe: Annually Responsible Parties: CIRE, Evaluation & Study Committee	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes Survey of employers of 2017-2018 BSN graduates: 100% of employers who responded to the survey (n = 6) reported the BSN program graduate performs this outcome very well. This result exceeds those of previous alumni surveys. Survey of employers of 2016-2017 BSN graduates: 89% of employers who responded to the survey (n = 9) reported the 2016-2017 BSN program graduate performs this outcome well (44.44%) or very well (44.44%). The target for this measure as been consistently achieved or exceeded. (03/09/2020)	Action: Survey employers of 2018-2019 graduates during 2020. Compare responses and monitor for favorable and unfavorable trends. (03/09/2020)
SL: Didactic - NU 270 Nursing Philosophy Paper Target: 100% of students will	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  Summer, 2018 – 100% (25/25) met the target. Fall 2018- 97% (61/63) met the target.	Action: This measure will no longer be used for this outcome as this course is no longer being offered.

# Program (Nursing) - Bachelor of Science in Nursing (BSN)

### **AU Outcome: BSN 7.0 Professional Role**

Measures	Results	Actions
achieve at least 75% on the Nursing Philosophy Paper. <b>Timeframe:</b> Year 1 <b>Responsible Parties:</b> BSN Curriculum Committee	Students discussed their shadowing experiences during one of the last class periods focusing on leadership qualities observed in the nurse they shadowed. (11/26/2019)  Related Documents:  Outcome 7 NU 270 Nursing Philosophy Shadowing  Paper.docx	(11/26/2019)
AD: Survey - Alumni Survey Item: How often in current professional nursing practice you model the professional role (1= not at all, 2 = rarely, 3 = some of the time, 4 = most of the time, NA = not applicable, e.g., not working in a BSN nursing role, or outcome not applicable to current role). Target: 75% of respondents will report that they model the professional role some or most of the time in current professional nursing practice . Timeframe: Annually Responsible Parties: CIRE, Evaluation & Study Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  100% of 2017-2018 alumni survey respondents who answered this item (n = 37) reported perform this outcome some (2.70%) or most (97.30%) of the time in their current professional practice.  100% of 2016-2017 alumni survey respondents who answered this item (n = 51) reported they perform this outcome some (1.96%) or most (96.08%) of the time in their current professional practice.  Results are consistent with previous alumni surveys. (03/09/2020)	Action: Survey 2018-2019 alumni during 2020. Compare responses and monitor for favorable and unfavorable trends. (03/09/2020)
AD: Survey - Employer Survey Item: How often BSN graduate models the professional role (1= not at all, 2 = rarely, 3 = some of the time, 4 = most of the time, NA = not applicable, e.g., not working in a BSN nursing role, or outcome not applicable to current role).  Target: 75% of respondents will report that BSN graduate models the	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  Survey of employers of 2017-2018 BSN grads: 100% of employers who responded to the survey (n = 6) reported the BSN program graduate performs this outcome most of the time in current professional practice. This result exceeds those of previous alumni surveys.  Survey of employers of 2016-2017 BSN grads: 100% of employers who responded to the survey (n = 12) reported the BSN program graduate performs this outcome some (25%) or most (75%) of the time in current professional practice.  The target for this measure has been consistently met or exceeded. (03/09/2020)	Action: Survey employers of 2018-2019 graduates during 2020. Compare responses and monitor for favorable and unfavorable trends. (03/09/2020)

## Program (Nursing) - Bachelor of Science in Nursing (BSN)

#### **AU Outcome: BSN 7.0 Professional Role**

Measures	Results	Actions
professional role some or most of		
the time in current professional		
nursing practice.		
Timeframe: Annually		
Responsible Parties: CIRE,		
Evaluation & Study Committee		

## **Program (Nursing) - Doctor of Nursing Practice (DNP)**

#### **AU Outcome: DNP 6.0**

Assume leadership roles in interprofessional collaboration to improve the health outcomes of individuals, families, and populations

Measures	Results	Actions
SL: Summative Evaluation - Assume leadership roles in interprofessional collaboration to improve the health outcomes of individuals, families, and populations  Target: 100% of students achieve an acceptable level (1) on a scale of 0-2 Timeframe: Annually upon program completion  Responsible Parties: Assistant Dean, Graduate Nursing /Graduate Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  100% (5 of 5) students achieved an acceptable level or above on this criterion of the DNP  Summative Evaluation. This is consistent with 2017-2018 results when 3 of 3 students (100%) achieved acceptable or above ratings on this criterion of the DNP Summative Evaluation.  Considering that the summative evaluation is completed upon program completion, it is to be expected that all students would demonstrate achievement of program outcomes as reflected in summative evaluation tool. (07/22/2019)	Action: Will continue to monitor this target since the number of DNP graduates remains low and it is essential to assure graduates have documented achievement of program outcomes. (07/22/2019)
SL: Didactic - NU750 Leadership and Collaboration Service-Learning Project assignment Target: 100% of students will achieve 80% or higher on the	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes 3 of 3 (100%) of students achieved 80% or higher on the Service-Learning Project assignment.  This was consistent with the previous time this measure was reported (summer 2016), also 100% (6 of 6 students). (07/22/2019)	Action: In order to meet this target with all groups next year, course faculty will encourage completion of the assignment with peers to promote collaboration. The

# **Program (Nursing) - Doctor of Nursing Practice (DNP)**

### **AU Outcome: DNP 6.0**

Measures	Results	Actions
Service-Learning Project assignment Timeframe: Each time course is offered Responsible Parties: Graduate Curriculum Committee		Panopto video that was added provided additional guidance to students for this assignment. Suggest providing this level of support to students in the future. Encourage students to complete this project with peers in the course. (07/22/2019)
AD: Survey - DNP Alumni Survey: Graduate perceptions of how well their DNP education prepared them to assume leadership roles in interprofessional collaboration to improve the health outcomes of individuals, families, and populations (very poorly, poorly, well, very well). Target: 75% of respondents will report that their DNP education prepared them to assume leadership roles in interprofessional collaboration to improve the health outcomes of individuals, families, and populations well or very well. Timeframe: Annually Responsible Parties: Evaluation & Study Committee/CIRE	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  Survey of 2017-2018 DNP Alumni: One of two graduates responded to the survey. The graduate reported that they perform this outcome very well.  Survey of 2015-2016 and 2016-2017 DNP Alumni: Three graduates responded to the survey. The graduates reported that they perform this outcome very well (100%).  Results are consistent with previous DNP alumni surveys. (03/10/2020)	Action: Survey 2018-2019 DNP graduates during 2020. Monitor trends in response to this measure. (03/10/2020)
AD: Survey - DNP Alumni Employer Survey: Employer perceptions of how well DNP graduates assume leadership roles in interprofessional collaboration to improve the health outcomes of individuals, families, and populations (very poorly,	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  There were no responses to the survey of employers of 2017-2018 DNP graduates.  Survey of employers of August 2016, May 2017, and August 2017 graduates had 9 responses: 100% reported that the DNP graduate performs the program outcome well (11.11%) or very well (88.89%).  Findings are consistent with previous employer surveys. (03/10/2020)	Action: Survey 2018-2019 employers of DNP graduates during 2020. Monitor trends in response to this measure. (03/10/2020)

# Program (Nursing) - Doctor of Nursing Practice (DNP)

### **AU Outcome: DNP 6.0**

Measures	Results	Actions
poorly, well, very well).  Target: 75% of respondents will report that DNP graduates assume leadership roles in interprofessional collaboration to improve the health outcomes of individuals, families, and populations well or very well.  Timeframe: Annually Responsible Parties: Evaluation & Study Committee/CIRE  AD: Survey - DNP Alumni Survey: Graduates perceptions of how often they assume leadership roles in interprofessional collaboration to improve the health outcomes of individuals, families, and populations (not at all, rarely, some of the time, most of the time).  Target: 75% of respondents will report that they assume leadership roles in interprofessional collaboration to improve the health outcomes of individuals, families, and populations some or most of the time.  Timeframe: Annually Responsible Parties: Evaluation & Study Committee/CIRE	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  Survey of 2017-2018 DNP Alumni: One of two graduates responded to the survey reporting that they perform this outcome most of the time.  Survey of 2015-2016 and 2016-2017 DNP graduates: Three graduates responded to the survey. They reported that they perform this outcome some (0%) or most of the time (66.67%). One reported NA (33.33%)  Except for survey of 2015-2016 and 2016-2017 DNP graduates, results are consistent with previous DNP alumni surveys. (03/10/2020)	Action: Survey 2018-2019 DNP graduates during 2020. Monitor trends in response to this measure. (03/10/2020)
AD: Survey - DNP Alumni Employer Survey: Employer perceptions of how often DNP graduates assume leadership roles in interprofessional collaboration to improve the health outcomes of individuals, families,	Reporting Year: 2018 - 2019 (Year 1) Target Met: SPE Task Not Completed There were no responses to the survey of employers of 2017-2018 DNP graduates. Survey of employers of August 2016, May 2017, and August 2017 graduates had 9 responses: 100% reported that the DNP graduate performs the program outcomes some (11.11%) or most of the time (88.89%).	Action: Survey 2018-2019 employers of DNP graduates during 2020. Monitor trends in response to this measure. (03/10/2020)

## **Program (Nursing) - Doctor of Nursing Practice (DNP)**

#### **AU Outcome: DNP 6.0**

Measures	Results	Actions
and populations (not at all, rarely,	Findings are consistent with previous employer surveys. (03/10/2020)	
some of the time, most of the time). <b>Target:</b> 75% of respondents will		
report that graduates assume		
leadership roles in interprofessional		
collaboration to improve the health		
outcomes of individuals, families, and populations some or most of the		
time.		
Timeframe: Annually		
Responsible Parties: Evaluation &		
Study Committee/CIRE		

# Program (Nursing) - Master of Science in Nursing (MSN)

**AU Outcome: MSN 3.0** 

Apply quality principles to promote patient safety and positive individual and systems outcomes.

Measures	Results	Actions
SL: Clinical evaluation tool - Clinical Evaluations-"Safety/Outcomes" criterion Target: 95% of students achieve an acceptable level (1) on "Safety/Outcomes" criterion on Faculty Clinical Evaluation Tool Timeframe: Annually Responsible Parties: MSN Clinical Coordinator / Graduate Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes See attached report - CAP Summary MSN Outcomes 1, 3, 7, and 8 (09/26/2019) Related Documents: 2018-2019 CAP Summary MSN Outcomes 1, 3, 8, & 8.pdf	Action: This is the first year this measure has been used. Review usefulness of this measure with Graduate Curriculum Committee to determine future of this measure. (09/26/2019)
AD: Report - Internal - Graduate Project Evaluation Form - Item #3	Reporting Year: 2018 - 2019 (Year 1)	Action: In order to continue to

# Program (Nursing) - Master of Science in Nursing (MSN)

### **AU Outcome: MSN 3.0**

Measures	Results	Actions
Apply quality principles to promote patient safety and positive outcomes Target: 100% of students achieve an acceptable level (1) on both paper and presentation Timeframe: Annually Responsible Parties: Assistant Dean, Graduate Nursing / Graduate Curriculum Committee	Target Met: Yes 59 of 59 (100%) of students achieved an acceptable level (1) on both paper and presentation. This is consistent with outcomes from all previous academic years and as expected for an end-of-program project that is guided by a faculty mentor and approved prior to the final presentation. (07/16/2019)	meet this target for all students, graduate project faculty advisers will maintain close working relationships with students as they plan their evidence-based practice/quality improvement projects. This should ensure a high-quality presentation and summary paper at the end of the process. This is still perceived to be a valuable measure of student attainment of this outcome; maintain measure and target. (07/16/2019)
AD: Survey - MSN Alumni Survey How well MSN graduates perceive that their MSN education prepared them to apply quality principles to promote patient safety and positive individual and systems outcomes (very poorly, poorly, well, very well). Target: 75% of respondents will report feeling well or very well prepared to apply quality principles to promote patient safety and positive individual and systems outcomes. Timeframe: Annually Responsible Parties: Evaluation & Study Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  > 90% of 2017-2018 alumni survey respondents (n = 14) reported their MSN education prepared them well (50.00%) or very well (42.86%) to apply quality principles to promote patient safety and positive individual and systems outcomes.  100% of 2016-2017 alumni survey respondents (n = 23) reported their MSN education prepared them well (65.22%) or very well (34.78%) to apply quality principles to promote patient safety and positive individual and systems outcomes.  These results are similar to the results of the survey of 2016-2017 MSN program graduates. Target consistently met or exceeded. (03/04/2020)	Action: Survey 2018-2019 alumni during 2020. Compare responses and monitor for favorable and unfavorable trends. (03/04/2020)
AD: Survey - MSN Alumni Survey How often MSN graduates apply quality principles to promote patient	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  >75% of 2017-2018 alumni survey respondents (n = 14) reported that some of the time	Action: Survey 2018-2019 alumni during 2020. Compare responses and monitor for favorable and

# Program (Nursing) - Master of Science in Nursing (MSN)

### **AU Outcome: MSN 3.0**

Measures	Results	Actions
safety and positive individual and systems outcomes (not at all, rarely, some of the time, most of the time).  Target: 75% of respondents will report applying quality principles to promote patient safety and positive individual and systems outcomes some or most of the time.  Timeframe: Annually  Responsible Parties: Evaluation & Study Committee	(21.43%) or most of the time (78.57%) they perform this outcome in their current professional practice.  100% of 2016-2017 alumni survey respondents who answered this question (n = 22) reported that most of the time they perform this outcome in their current professional practice.  Results are consistent with previous alumni surveys.  (03/04/2020)	unfavorable trends. (03/04/2020)
AD: Survey - MSN Alumni Employer SurveyHow well MSN graduates apply quality principles to promote patient safety and positive individual and systems outcomes (very poorly, poorly, well, very well).  Target: 75% of respondents will report MSN graduates apply quality principles to promote patient safety and positive individual and systems outcomes well or very well.  Timeframe: Annually Responsible Parties: Evaluation & Study Committee	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes 100% of employers who responded to the survey (n = 5) reported the MSN program graduate performs this outcome well (20%) or very well (80%). This result is consistent with previous alumni surveys.  100% of employers who answered this item on the survey of 2015-2016 and 2016-2017 MSN graduate employers (n = 6) reported the graduate performed the outcome well (16.67%) or very well (83.33%) in current professional practice.  These results and the results of previous employer surveys indicate employers' perceptions of the Allen College MSN graduate consistently meet or exceed the target. (03/05/2020)	Action: Survey employers of 2018-2019 graduates during 2020. Compare responses and monitor for favorable and unfavorable trends. (03/05/2020)
AD: Survey - MSN Alumni Employer SurveyHow often MSN graduates apply quality principles to promote patient safety and positive individual and systems outcomes (not at all, rarely, some of the time, most of the time).  Target: 75% of respondents will report that MSN graduates apply	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  100% of employers who responded to the survey (n = 5) reported the MSN program graduate performs this outcome most of the time. This result is consistent with previous alumni surveys.  86% of employers who answered this item on the survey of 2015-2016 and 2016-2017 MSN graduate employers (n = 7) reported the graduate performs this outcome some of the time (0%) or most of the time (85.71%) in current professional practice. One respondent reported	Action: Survey employers of 2018-2019 graduates during 2020. Compare responses and monitor for favorable and unfavorable trends. (03/05/2020)

## Program (Nursing) - Master of Science in Nursing (MSN)

#### **AU Outcome: MSN 3.0**

Measures	Results	Actions
quality principles to promote patient safety and positive individual and	the outcome was not applicable (14.29%),	
systems outcomes some or most of the time. Timeframe: Annually Responsible Parties: Evaluation & Study Committee	These results and the results of previous employer surveys indicate employers' perceptions of how often the Allen College MSN graduate performs the outcome in current professional practice consistently meet or exceed the target. (03/05/2020)	

**AU Outcome: MSNO 7.0** 

Collaborate within inter-professional teams to manage and improve health care services for individuals, families and populations.

Measures	Results	Actions
SL: Clinical evaluation tool - Clinical Evaluations-Collaboration Criterion Target: 95% of students achieve an acceptable level (1) on "Collaboration" criterion on Faculty Clinical Evaluation tool Timeframe: Annually Responsible Parties: MSN Clinical Coordinator / Graduate Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes Ser attached report - CAP Summary MSN Outcomes 1, 3, 7, and 8 (09/26/2019) Related Documents: 2018-2019 CAP Summary MSN Outcomes 1, 3, 8, & 8.pdf	Action: This is the first year this measure has been used. Review usefulness of this measure with Graduate Curriculum Committee to determine future of this measure. (09/26/2019)
AD: Report - Internal - Graduate Project Evaluation Form - Item #7 Collaborate within interprofessional teams.  Target: 100% of students achieve an acceptable level (1) on both paper and presentation Timeframe: Annually Responsible Parties: Assistant Dean, Graduate Nursing / Graduate	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes 59 of 59 (100%) of students achieved an acceptable level (1) on both paper and presentation. This is consistent with outcomes from all previous academic years and as expected for an end-of-program project that is guided by a faculty preceptor and approved prior to the final presentation. (07/22/2019)	Action: In order to continue to meet this target for all students, graduate project faculty advisers will maintain close working relationships with students as they plan and develop their evidence-based practice/quality improvement projects. This should ensure a high-quality presentation and summary paper at the end of

# Program (Nursing) - Master of Science in Nursing (MSN)

### **AU Outcome: MSNO 7.0**

Measures	Results	Actions
Curriculum Committee		the process. This is still perceived to be a valuable measure of student attainment of this outcome; maintain measure and target. (07/22/2019)
AD: Survey - MSN Alumni Survey-How well MSN graduates perceive that their MSN education prepared them to collaborate within interprofessional teams to manage and improve health care services for individuals, families and populations (very poorly, poorly, well, very well). Target: 75% of respondents will report feeling well or very well prepared to collaborate within interprofessional teams to manage and improve health care services for individuals, families and populations. Timeframe: Annually Responsible Parties: Evaluation & Study Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  >85% of 2017-2018 alumni survey respondents (n = 14) reported their MSN education prepared them well (57.14%) or very well (28.57%) to collaborate within inter-professional teams to manage and improve health care services for individuals, families and populations. These results are similar to the results of the survey of 2016-2017 MSN program graduates.  >90% of 2016-2017 alumni survey respondents (n = 23) reported their MSN education prepared them well (52.17%) or very well (39.13%) to apply quality principles to promote patient safety and positive individual and systems outcomes.  These results are similar to the results of the survey of 2016-2017 MSN program graduates. Target has been consistently met or exceeded. (03/04/2020)	Action: Survey 2018-2019 alumni during 2020. Compare responses and monitor for favorable and unfavorable trends. (03/04/2020)
AD: Survey - MSN Alumni Survey-How often MSN graduates collaborate within inter-professional teams to manage and improve health care services for individuals, families and populations (not at all, rarely, some of the time, most of the time).  Target: 75% of respondents will report collaborating within interprofessional teams to manage and	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  >75% of 2017-2018 alumni survey respondents (n = 14) reported that some of the time (21.43%) or most of the time (78.57%) they perform this outcome in their current professional practice.  100% of 2016-2017 alumni survey respondents who answered this question (n = 22) reported that some of the time (13.64%) or most of the time (86.36%) they perform this outcome in their current professional practice.  Survey results demonstrate graduate perceptions consistently achieve or exceed of target.	Action: Survey 2018-2019 alumni employers during 2020. Compare responses and monitor for favorable and unfavorable trends. (03/04/2020)

# Program (Nursing) - Master of Science in Nursing (MSN)

### **AU Outcome: MSNO 7.0**

Measures	Results	Actions
improve health care services for individuals, families and populations some or most of the time.  Timeframe: Annually  Responsible Parties: Evaluation &  Study Committee	(03/04/2020)	
AD: Survey - MSN Alumni Employer SurveyHow well employers perceive that MSN graduates collaborate within inter-professional teams to manage and improve health care services for individuals, families and populations (very poorly, poorly, well, very well).  Target: 75% of respondents will report that MSN graduates collaborate within inter-professional teams to manage and improve health care services for individuals, families and populations well or very well.  Timeframe: Annually Responsible Parties: Evaluation & Study Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  100% of employers who responded to the survey (n = 5) reported the MSN program graduate performs this outcome very well.  100% of employers who answered this item on the survey of 2015-2016 and 2016-2017 MSN graduate employers (n = 6) reported the graduate performs this outcome very well in current professional practice.  These results and the results of previous employer surveys indicate employers' perceptions of the Allen College MSN graduate consistently meet or exceed the target. (03/05/2020)	Action: Survey employers of 2018-2019 graduates during 2020. Compare responses and monitor for favorable and unfavorable trends. (03/05/2020)
AD: Survey - MSN Alumni Employer SurveyHow often employers perceive that MSN graduates collaborate within inter-professional teams to manage and improve health care services for individuals, families and populations (not at all, rarely, some of the time, most of the time).  Target: 75% of respondents will	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  100% of employers who responded to the survey (n = 5) reported the MSN program graduate performs this outcome most of the time.  100% of employers who answered this item on the survey of 2015-2016 and 2016-2017 MSN graduate employers (n = 7) reported the graduate performs this outcome most of the time in current professional practice.  These results and the results of previous employer surveys indicate employers' perceptions of	Action: Survey employers of 2018-2019 graduates during 2020. Compare responses and monitor for favorable and unfavorable trends. (03/05/2020)

# Program (Nursing) - Master of Science in Nursing (MSN)

#### **AU Outcome: MSNO 7.0**

Measures	Results	Actions
report that MSN graduates collaborate within inter-professional teams to manage and improve health care services for individuals, families and populations some or most of the time. Timeframe: Annually Responsible Parties: Evaluation & Study Committee	how often the Allen College MSN graduate performs the outcome in current professional practice consistently meet or exceed the target. (03/05/2020)	

## **Admin - Diversity and Inclusion Services**

#### **AU Outcome: DIS 3.0**

Diverse representation in all college materials and buildings (ODS Goal 3: Welcoming and inclusive campus climate--Events, messages, symbols, and values of the campus make it a welcoming and inclusive environment for all students, faculty, staff, and members of the broader community.)

Outcome Status: Active

Measures	Results	Actions
AD: Report - Internal - Inclusivity Assessment (i.e., Report of advertising, marketing materials, website, pamphlets, etc. to ensure they promote inclusivity) Target: 50% of materials (e.g., advertising, marketing material, website, and images) promote inclusivity. Timeframe: Year 3 Responsible Parties: DIS Coordinator	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes The Enrollment Management team meets quarterly to discuss initiatives regarding inclusivity on campus. In addition, the Admissions team works closely with administration to ensure we represent the college's diverse background on the website and in other materials. This practice has not changed since it was first measured last year. (11/18/2019)	Action: During the 2019-20 academic year, a new strategic plan will focus on inclusivity. In addition, new events will be held to take the place of "Chew and Chat" that was held in the past. (11/18/2019)

#### **AU Outcome: DIS 4.0**

Offer programs and activities that promote academic success, retention, and graduation of underrepresented students. (ODS Goal 4: Support diverse students . . .)

Measures	Results	Actions
AD: Report - Internal - Academic Enrichment Assessment (i.e., report of enrichment offerings such as student success seminars, one-to- one mentoring, peer to peer mentoring) Target: Offer at least 6 success activities per academic year (e.g., Chew and Chat, Success Seminars). Timeframe: Year 2 Responsible Parties: DIS Coordinator	Reporting Year: 2018 - 2019 (Year 1)  Target Met: No  During the 2018-19 academic year, 88% of minority students, and 95% of male students were retained from the previous year. In comparison, 95% of all Allen College students were retained during the same time frame. No retention data was presented in the previous review year, so a comparison cannot be made.  The previous action plan included the continuation of Chew and Chats. The events have been low in attendance even after moving to an off campus location. This event does not appear to contribute to the retention rate.  Tutoring for nursing students in Pathophysiology, Pharmacology, and Fundamentals of	Action: The Diversity and Inclusion Committee will be kept informed of attrition for minority and male students. In addition, students will be encouraged to join the D & I committee and activities will focus around different cultures during the semester. (11/18/2019)

# **Admin - Diversity and Inclusion Services**

### **AU Outcome: DIS 4.0**

Measures	Results	Actions
	Nursing have moved from a peer-tutoring model to an online model. The online model is more flexible than the peer-tutoring model and students are asked to complete a survey at the end of their tutoring session, which very few complete. Based on the lack of data, It is not clear that tutoring contributes specifically to the retention rate of minority or male students. (11/18/2019)	
AD: Report - Internal - Retention and graduation rates of underrepresented students [Report of retention and graduation rates of diverse students for all programs]  Target: Retention and graduation rates are equal to those of the College.  Timeframe: Year 1 and Year 3  Responsible Parties: DIS Coordinator	Reporting Year: 2018 - 2019 (Year 1) Target Met: No These numbers represent the latest available data. Summer Accelerated Of the 3 minority students admitted in the summer 2015 cohort, all three students graduated. (100%) Of the 4 male accelerated students in the summer 2015 cohort, all 4 students graduated (100%) Of the 40 accelerated students in the summer 2015 cohort, 37 students graduated. (93%) The graduation rate is greater than overall graduation rate for both minority and male students. This is consistent with last year.  Fall Accelerated Of the 2 minority students admitted in the fall 2015 cohort, one student graduated. (50%) Of the 4 male accelerated students in the fall 2015 cohort, all 4 students graduated (100%) Of the 40 accelerated students in the summer 2015 cohort, 37 students graduated (93%) The graduation rate for minority students is significantly lower than the graduation rate for all students.  Spring Traditional Of the 8 minority upper division students in the spring 2014 cohort, 4 students graduated (50%) Of the 7 male upper division students in the spring 2014 cohort, 3 students graduated (43%) Of the 55 upper division students in the spring 2014 cohort, 40 students graduated (73%) The graduation rate of minority students cannot be compared to last year, as there were no minority students admitted to the spring 2013 cohort. The male student graduation rate is significantly lower than last year (75%). The overall graduation rate of this cohort is 73%, which is also significantly lower than last year (84%)	Action: Since there is not a current Diversity and Inclusion coordinator, this information will go to the Diversity and Inclusion for review and thought for the 2020-21 academic year.  (03/26/2020)

## **Admin - Diversity and Inclusion Services**

#### **AU Outcome: DIS 4.0**

Measures	Results	Actions
	Fall Traditional Of the 1 minority upper division students in the fall 2014 cohort, 0 student graduated (0%) Of the 1 male upper division students in the fall 2014 cohort, 1 students graduated (100%) Of the 14 upper division students in the fall 2014 cohort, 13 students graduated (93%) The graduation rate of minority students cannot be compared to last year, as there were no minority students admitted to the fall 2013 cohort. This year, the graduation rate was 0%, based on one student. The male student graduated, which is consistent with last year (100%), and is greater than the overall fall 2014 cohort.	
	30/32 minority students were retained from 2016 to 2017 for a total retention rate of 94% The retention rate from fall 16 to fall 17 was significantly higher than from fall 15 to fall 16 (84%).	
	62/66 male students were retained from 2016 to 2017 for a total retention rate of 94% The retention rate for males from fall 16 to fall 17 increased slightly during the previous year (92%)	
	568/618 students were retained from 2016 to 2017 for a total retention rate of 95%. This is the same percentage as last year. When comparing all information, minority and male retention rates are very similar to overall retention. However, graduation rates are significantly lower for minority students, and slightly lower for male students.	
	It is unknown if the pipeline programs in place to recruit ethnic minority and male students had an impact on these results. Many of our pipeline programs are for students who are in 8-12 grade. It is too early to determine whether the programs have had an impact. (03/26/2020)	

# **Program (HS) - Associate of Science in Radiography (ASR)**

**AU Outcome: ASR 1.1** 

Students will practice proper radiation protection

# Program (HS) - Associate of Science in Radiography (ASR)

### **AU Outcome: ASR 1.1**

Measures	Results	Actions
SL: Clinical evaluation tool - RA: 135 Competency Testing/CCE Part II, numbers 5, 7, 9, 15, 17 Target: Average score of >= 3 (0-4 pt. scale) Timeframe: Level 1-Fall Semester Responsible Parties: Lab Instructor/ Program Faculty/ Health Sciences(HS) Faculty Org. Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  2018 = 3.90 (N=13) Benchmark met  Previous years  2017=3.97(n=14)  2016 = 3.89 (n=13)  2015 = 3.95 (n=16)  2014 = 3.97 (n=17)  Students continue to exceed benchmark. The importance of collimation, exposure factors and radiation protection are emphasized and practiced in each lab. Students are practicing radiation protection and demonstrating clinical competence. (07/02/2019)	Action: To continue to exceed the target/ benchmark instructors will continue to have student practice radiation protection in each lab and in the clinical settings. The program will continue to assess for trends with each new cohort. (07/02/2019)
SL: Clinical evaluation tool - RA: 275 Final Clinical Competency Testing/ CCE Part II, numbers 5,7,9,15,17  Target: Average score of >= 3 (0-4 pt. scale) Timeframe: Level II-Spring Semester Responsible Parties: Clinical Instructors/Program Faculty/HS Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes 2019 = 4 (n=12)  Benchmark met  Previous data: 2018 = 3.96 (n=12) 2017 = 3.96 (n=15) 2016=3.96 (n=17) 2015=3.96 (n=15) 2014=3.99 (n=17)	Action: To continue to exceed the target/benchmark the instructors will provide various methods of radiation protection and reinforce this throughout the program.  Students will continue to have access to an appropriate exam volume in a variety of settings to prepare them for their final competencies. (07/02/2019)
	This year's cohort received an average score of 4 on every line item assessed. Students continue to exceed the benchmark. The various methods of radiation protection are emphasized and reinforced throughout the program. Students also have access to an appropriate exam volume in a variety of settings which helps prepare them for their final competencies. No changes recommended (07/02/2019)	Action: This year's cohort received an average score of 4 on every line item assessed. Students continue to exceed the benchmark. The various methods of radiation protection are emphasized and reinforced throughout the program. Students also have access to an appropriate exam volume in a variety of settings which helps prepare them for their final competencies. No changes

## Program (HS) - Associate of Science in Radiography (ASR)

#### **AU Outcome: ASR 1.1**

Measures	Results	Actions
		recommended (07/02/2019)

**AU Outcome: ASR 1.2** 

Students will apply correct positioning skills

Measures	Results	Actions
SL: Didactic - RA: 145 Certification Testing/ Part I, numbers 3,12,14,15  Target: Average score of >= 3. (0-4 pt. scale) Timeframe: Level I-Spring Semester Responsible Parties: Clinical Instructors/ Program Faculty/ HS Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes 2019 = 3.88 (n=13) Benchmark/Target met Previous data: 2018 = 3.86 (n=14) 2017 = 4 (n=12) 2016 = 3.96 (n=16) 2015=3.79 (n=17) 2014=3.86 (n=15) Students continue to exceed benchmark. The students demonstrated the ability to apply correct positioning skills. The students demonstrated knowledge of positioning in relation to their level of placement in the program. (07/03/2019)	Action: Course instructors recommend continuing to assess this item since certification testing is completed at various clinical sites and with different clinical instructors. (07/03/2019)
SL: Didactic - RA: 265 Certification Testing/Part I, numbers 3,12,14,15  Target: Average score of >= 3. (0-4 pt. scale) Timeframe: Level II-Fall Semester Responsible Parties: Clinical Instructors/ Program Faculty/ HS Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes 2018=3.95(n=12) Benchmark/Target met. Previous data: 2017=3.90(n=12) 2016=3.97(n=15) 2015=3.99 (n=17) 2014= 3.96 (n=15) Average scores exceed benchmark. Students demonstrated clinical competence by applying correct positioning skills. This is the final semester that certifications are completed in the program. This was the second cohort to exclude ankle, finger, foot, hand, and wrist	Action: The instructors will continue to assess the students' positioning skills on more advanced procedures appropriate to their level in the program. (07/03/2019)

# Program (HS) - Associate of Science in Radiography (ASR)

#### **AU Outcome: ASR 1.2**

Measures	Results	Actions
	procedures. The program made this change to ensure the procedural exam difficulty correlated with the student's level in the program. (07/03/2019)	

**AU Outcome: ASR 2.1** 

Students will demonstrate effective communication skills in the clinical setting

Measures	Results	Actions
SL: Clinical evaluation tool - RA:135 Clinical Instructor/ Preceptor Evaluations/ Numbers 3, 6, 10,11  Target: Average score >= 3.5 (0-4 pt. scale) Timeframe: Level I-Fall Semester Responsible Parties: Clinical Instructors/ Program Faculty/ HS Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes 2018 3.67 (n=13) Benchmark/Target met.  Previous data: 2017 3.68 (n=14) 2016 3.56 (n=13) 2015 3.81 (n=16) 2014 3.8 (n=17)  The students' average scores had slight increases in two areas of the performance criteria; patient care and multicultural diversity and decreases in two areas; interpersonal relationships and age appropriate care. All student evaluations are completed on Trajecsys by the clinical instructors. Students have immediate access to the completed evaluations on Trajecsys. Students continue to exhibit effective communication skills in the clinical environment. (07/03/2019)	Action: To continue to provide immediate access and feedback to students these evaluations will be completed on Trajecsys by the clinical instructors. (07/03/2019)
SL: Clinical evaluation tool - RA:275 Clinical Instructor/ Preceptor Evaluations/Numbers 3, 6,10,11  Target: Average score >= 3 (0-4 pt. scale) Timeframe: Level II -Spring Semester Responsible Parties: Clinical Instructors/ Program Faculty/ HS Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes 2018-2019-3.9 (n=12)  Target/benchmark met.  Previous data: 2017-2018- 3.78 (n=12) 2016-2017 - 3.95 (n=15) 2015-2016 - 3.97 (n=17) 2014-2015 - 3.95 (n=15)  This result is an increase compared to the previous year. The student scores were higher than	Action: To continue to exceed the target/benchmark for this measure the clinical instructors/preceptors in the clinical setting will continue to provide excellent instruction and supervision of students to assess their communication skills. (07/03/2019)

## Program (HS) - Associate of Science in Radiography (ASR)

### **AU Outcome: ASR 2.1**

Measures	Results	Actions
	the previous year in areas of; patient care, interpersonal relationships, multicultural diversity and age appropriate care. (07/03/2019)	
SL: Clinical evaluation tool - RA:135 Clinical Competency Evaluation/ Part I – Number 4 Part III- Numbers 1,3,6-8  Target: Average score >= 3 (0-4 pt. scale) Timeframe: Level I-Fall Semester Responsible Parties: Clinical Instructor/Program Faculty/ HS Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  2018 = 3.95 (n=13)  Benchmark/Target met.  Previous data:  2017=3.98 (n=14)  2016=3.92 (n=13)  2015=3.99 (n=16)  2014=3.98 (n=17)  Students continue to exceed the benchmark. The students are demonstrating communication skills reflective of their level in the program. (07/03/2019)	Action: To continue to exceed this measure the clinical instructors will continue to provide effective instruction, supervision and feedback to the students in their clinical settings. (07/03/2019)
SL: Clinical evaluation tool - RA:275 Final Clinical Competency Evaluation/ Part I – Number 4 Part III- Numbers 1,3,6-8  Target: Average score >= 3.5 (0-4 pt. scale) Timeframe: Level II- Spring Semester Responsible Parties: Clinical Instructor/ Program Faculty/ HS Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  2019 = 4 (n=12)  Benchmark/Target met.  Previous data:  2018=3.98 (n= 12)  2017=4 (n=15)  2016=4 (n=17)  2015=3.99 (n=15)  2014=3.99 (n=17)  This year's cohort received an average score of 4 on every line item assessed. Students continue to exceed the benchmark. Students have access to an appropriate exam volume in a variety of settings which helps prepare them for their final competencies. (07/03/2019)	Action: The program will continue to provide students with access to an appropriate exam volume in a variety of settings to prepare them for their final competencies. (07/03/2019)

# **AU Outcome: ASR 2.2**

Students will practice written communication skills

Measures	Results	Actions

# Program (HS) - Associate of Science in Radiography (ASR)

### **AU Outcome: ASR 2.2**

Measures	Results	Actions
SL: Didactic - RA: 115 Patient Care Presentation Target: Average score of >= 85% Timeframe: Level I-Fall Semester Responsible Parties: RA: 115 Course Instructor/HS Faculty Org. Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  Results for fall 2018 98% (n=13)  Benchmark/Target met:  Previous data:  2017 98% (n=14)  2016 97% (n=13)  2015 98.01% (n=16)  2014 98.2% (n=17)  Students continue to demonstrate effective written communication skills. Two of the thirteen students had deductions on the title page; not double spacing and bolding of the title of the paper. Five of the thirteen students had deductions on the reference page. These deductions included: no hanging indent, not having correct spacing in the paper, not having correct margins, bullets when listing the references, and formatting of the reference page. Under the formatting portion of the paper evaluation; the deductions were; not including a running head, no page numbers, and not indenting when beginning a new paragraph. The course instructor communicates the paper requirements on the first day of the semester. On the first day of class, the instructor goes onto the Allen College website and displays to all students where the academic resources page is located and the APA resources information for APA review. One student met with the course instructor to clarify formatting questions concerning the reference page. (07/03/2019)	Action: The course instructor will continue to communicate the paper requirements on the first day of the semester. The instructor will instruct students to the Allen College website and display to all students where the academic resources page is located and the APA resource information for APA review. (07/03/2019)
SL: Didactic - RA:258 Pathology Systems Presentation Target: Average score of >= 85% Timeframe: Level II-Fall Semester Responsible Parties: RA: 258 Course Instructor/ HS Faculty Org. Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  Results for fall 2018: 96% (n=12)  Benchmark/Target met:  Previous data  2017: 96% (n=12)  2016: 97% (n=15)  2015: 98.01% (n=16)  2014: 98.2% (n=17)  Students continue to exhibit effective communication skills through written communication.  Three of the twenty-four papers had deductions on the title page and seventeen had deductions on the reference page. Two papers had deductions in the accuracy and substance portion of the evaluation, not meeting the depth of the paper requirement by adequately	Action: The instructor will instruct students to the Allen College website and display to all students where the academic resources page is located and the APA resource information for APA review. (07/03/2019)

# Program (HS) - Associate of Science in Radiography (ASR)

#### **AU Outcome: ASR 2.2**

Measures	Results	Actions
	covering the subject. Seven papers had deductions in the format portion of the paper, five papers didn't have correct margins, one paper had spelling errors and one paper was not double-spaced. Two of the students made the same errors on both of their papers. The course instructor discusses the paper requirements on the first day of class. The instructor reviewed the APA format and reminded students that the APA resources information is located on the Allen College website. Two students asked questions prior to their first paper presentation. They had questions about the structure of their paper and how to properly incorporate the radiographs into their presentation. The same two students reviewed their first paper with the instructor after their presentation to receive feedback and they were the only students that received 100% on both of their papers. (07/03/2019)	

**AU Outcome: ASR 2.3** 

Students will demonstrate oral communication skills

Measures	Results	Actions
SL: Didactic - RA:258 Pathology Systems Presentation Target: Average score of >= 85% Timeframe: Level II-Fall Semester Responsible Parties: RA: 258 Course Instructor/ HS Faculty Org. Committee	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes Results for fall 2018: 99% (n=12) Benchmark/Target met Pervious data: 2017: 97% (n=12) 2016= 95% (n=15) 2015: 98.82% (n=17) 2014: 99.13% (n=15) Students continue to demonstrate effective oral communication skills. Five papers received deductions in the oral presentation portion of the evaluation. Four of the papers did not include information discussing the exposure factors/exposure to ionizing radiation for the exam and two papers had deductions for not explaining why they selected the pathology for their paper. Two papers are required for this course. The paper requirements are discussed the first day of class. (07/03/2019)	Action: The course instructor will continue to communicate the paper requirements the first day of class. This measure will be continued to be assessed with each new cohort. (07/03/2019)
SL: Didactic - RA: 115 Patient Care Presentation	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes	Action: To meet or exceed the target for this measure during the

# Program (HS) - Associate of Science in Radiography (ASR)

#### **AU Outcome: ASR 2.3**

Measures	Results	Actions
Target: Average score of >= 85% Timeframe: Level I-Fall Semester Responsible Parties: RA: 115 Course Instructor/HS Faculty Org. Committee	2019=98% (n=19) 2018=99% (n=13) 2017 =99% (n=14) 2016=99% (n=13) 2015=94.53% (n=16) Four students had deductions in their oral presentation portion due to voice level and words not stated correctly during the presentation. (07/27/2020)	2020-2021 academic year, the course instructor will continue to discuss the paper requirements with the students. Also, encourage students to practice reading their papers before the due date to assist them in demonstrating effective oral communication skills. (07/27/2020)
	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes Results for fall 2018: 99% (n=13) Benchmark met Previous data: 2017: 99% (n=14) 2016: 99% (n=13) 2015: 94.53% (n=16) 2014: 100% (n=17) Two students had deductions in the area of voice level was easily heard, due to using a soft voice and reading the paper very quickly. One student had a deduction in words were stated correctly area of the evaluation. The course instructor explains the paper requirements the first day of class. Students continue to demonstrate effective communication skills. (07/03/2019)	Action: The course instructor will continue to explain the paper requirements the first day of class. This measure will be continued to be assessed with each new cohort. (07/03/2019)

#### **AU Outcome: ASR 3.1**

Students will appropriately critique radiographic images

Measures	Results	Actions
SL: Didactic - RA: 255 Radiographic image analysis worksheets Target: Average score of >= 80% Timeframe: Level II-Summer	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes 2018 = 93.75% (n=12) Benchmark/Target met.	Action: The course instructor will continue the extension of the due date for the shoulder chapter. This will allow two additional weeks for

## Program (HS) - Associate of Science in Radiography (ASR)

#### **AU Outcome: ASR 3.1**

Measures	Results	Actions
Semester  Responsible Parties: RA: 255 Course Instructors/ Program Faculty/HS Faculty Org. Committee	Previous data: 2017=87.75% (n=12) 2016: 90.19% (n=16) 2015: 89.88% (n=17) 2014: 89.13% (n= 15) This cohort achieved the highest-class average since 2014. One student in this cohort chose to submit low scores for the first and last worksheets. These worksheets are open book, open note, and are not timed. The worksheets allow two attempts with the scores averaged. It	this more difficult chapter. (07/03/2019)
	appears this particular student did not choose to take the time to read and carefully answer each question for two of the five chapters. This student was counseled after the first submission of a low grade. The only change made to this assessment item for 2018 was an extension of the due date for the shoulder chapter. This allowed two weeks for this more difficult chapter compared to one week in prior years. Overall, students continue to demonstrate an ability to critique radiographic images. (07/03/2019)	
<b>SL: Didactic</b> - RA: 265 Radiographic image analysis worksheets	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes	Action: To continue to exceed the benchmark/target for this measure
Target: Average score of >= 80% Timeframe: Level II- Fall Semester	2018 = 93.33% (n=12)  Benchmark/Target met.  Previous data: 2017 = 88.83% (n=12)	the course instructor will provide the appropriate radiographs to critique and effective feedback. (07/03/2019)
Responsible Parties: RA: 265 Course Instructors/ Program Faculty/HS	2016 = 91.66% (n=15) 2015= 90.71% (n=17)	(07/05/2019)
Faculty Org. Committee	2014= 93.13% (n=15) This year's cohort performed exceptionally well in completing this assignment. Students continue to demonstrate the ability to appropriately critique radiographic images. (07/03/2019)	

**AU Outcome: ASR 3.2** 

Students will demonstrate ability to practice critical thinking

Measures	Results	Actions
SL: Didactic - RA:145 Scientific	<b>Reporting Year:</b> 2018 - 2019 (Year 1)	

# Program (HS) - Associate of Science in Radiography (ASR)

#### **AU Outcome: ASR 3.2**

Measures	Results	Actions
Exhibit Evaluation  Target: Average score of >= 80%  Timeframe: Level I- Spring Semester Responsible Parties: RA: 145  Program Faculty/ HS Curriculum  Committee	Target Met: Yes  2019 = 87% N = 9 posters (13 students)  Benchmark/Target met  Previous data:  2018 = 91.5% N = 8 posters (14 students)  2017 = 92.14% N = 7 posters (12 students)  2016 = 92.6% N = 10 posters (16 students)  2015 = 96.5%, N = 11 posters (17 students)  2014 = 94%, N = 11 posters (15 students)  Scores for 2019 continue to demonstrate the student's ability to practice critical thinking skills when developing their scientific exhibits. Most grade reductions occurred in line item #8 "grammar, spelling, and punctuation" and # 6 the visually attractive category on the evaluation form. Some also received deductions for #7 "easily understood in a maximum of three minutes" since there was too much text. Average scores continue to exceed the benchmark. (07/03/2019)	Action: To continue to exceed the benchmark for this measure the course instructors will provide the effective feedback to the students on their exhibits. (07/03/2019)
SL: Exam/Quiz - Standardized - RA: 203B Corectec exams Target: > 80% of the students will achieve a score of 70 or greater on one of the four exams. Timeframe: Level II- Spring Semester Responsible Parties: RA: 203B Course Instructor/HS Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  2019 = 100% (n=12)  Benchmark/Target met.  Previous data:  2018 = 100% (n=12)  2017 = 93% (n=15)  2016 = 100% (n=17)  2015 = 93% (n=15)  2014 = 76% (n=17)  This was the second cohort for implementation of the 2% reduction in the overall course grade for each percentage point below 70 on the four Corectec exam average score, an action plan from 2016-2017. This may have provided additional incentive for the students to put forth their best effort on every exam attempt. The ASR Program curriculum continues to prepare the students for mock board exams. Students continue to demonstrate the ability to practice critical thinking. (07/03/2019)	Action: Upon further review of this grade reduction policy, the instructor reduced the % reduction to 1% and will reevaluate in 2020. (07/03/2019)

**AU Outcome: ASR 3.3** 

Students will be able to critically think in the clinical setting

## Program (HS) - Associate of Science in Radiography (ASR)

**AU Outcome: ASR 3.3** 

Outcome Status: Active

Measures	Results	Actions
SL: Clinical evaluation tool - RA:145 Clinical Instructor/ Preceptor Evaluations/Numbers 2,4,7,8  Target: Average score >= 3. (0-4 pt. scale) Timeframe: Level I-Spring Semester Responsible Parties: RA: 145 Course Instructor/HS Faculty Org. Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes 2019 3.36 (n=13)  Target/benchmark met.  Previous data: 2018 - 3.53 (n=14) 2017 - 3.63 (n=12) 2016 - 3.63 (n-16) 2015 - 3.67 (n=17)  This result is a decline compared to previous years reported. The student scores were lower than the previous year in areas of; application of knowledge, ability to follow directions, self-image for level in the ASR program, and composure and adaptability (07/03/2019)	Action: To continue to meet or exceed the target/benchmark for this measure during the 2019-2020 academic year, clinical instructors/preceptors in the clinical setting will continue to provide excellent instruction and supervision of students to assess their critical thinking skills. (07/03/2019)
SL: Clinical evaluation tool - RA:265 Clinical Instructor/ Preceptor Evaluations/Numbers 2,4,7,8  Target: Average score >= 3. (0-4 pt. scale) Timeframe: Level II- Fall Semester Responsible Parties: RA: 265 Course Instructors/HS Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes 2018 3.81 (n=12)  Target/benchmark met Previous data: 2017 3.79 (n=12) 2016 3.86 (n=15) 2015 3.81 (n=17) 2014 3.75 (n=15)  The student's average scores increased in three performance criteria areas; application of knowledge, ability to follow directions, and self-image for level in the ASR program. There was a slight decrease in the area of composure and adaptability. All student evaluations are completed on Trajecsys by the clinical instructors. Students have immediate access to their evaluations on Trajecsys. Students continue to be able to critically think in the clinical setting. (07/03/2019)	Action: To continue to meet or exceed the target/benchmark for this measure during the 2019-2020 academic year, clinical instructors/preceptors in the clinical setting will continue to provide excellent instruction and supervision of students to assess their critical thinking skills. (07/03/2019)

**AU Outcome: ASR 4.1** 

Students will integrate leadership skills and construct professional practices

# Program (HS) - Associate of Science in Radiography (ASR)

#### **AU Outcome: ASR 4.1**

Measures	Results	Actions
SL: Service - RA:135 Community Service/Service Learning Evaluation Target: Average score of >= 80% Timeframe: Level I-Fall Semester Responsible Parties: RA: 135 Course Instructors/HS Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes 2018: 83.69% (n=13) Benchmark met Previous data: 2017: 94.78 (n=14) 2016: 72% (n=13) 2015: 92.56% (n=16) 2014: 97.94% (n=17) The majority of point deductions occurred in the overall writing and the research categories of the assessment rubric. Some students did not answer all questions or did not provide any citations in their paper to evidence that they researched the organization. All students performed service learning through a variety of organizations. Students demonstrated leadership skills and professionalism through their involvement in service learning activities. (07/03/2019)	Action: The course instructors will make a few editorial changes to the assignment instructions for emphasis and clarification. (07/03/2019)
SL: Service - RA: 265 Community Service/Service Learning Evaluation Target: Average score of >= 80% Timeframe: Level II-Fall Semester Responsible Parties: RA: 265 Course Instructors/HS Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: No 2018: 76.75% (n=12) Benchmark not met.  Previous data: 2017: 93.33% (n=12) 2016: 93.4% (n=15) 2015: 82.47% (n=17) 2014: 99.13% (n=15)  Two students in this cohort attempted to submit hours that were not performed during the offering of this course. These students received half of the possible points. The assignment instructions did state that all service hours must be completed during the offering of this course. Some students provided limited and below average reflection statements resulting in point deductions in the research and writing categories of the assessment rubric. One student did not follow the instructions to provide evidence of participation as part of their paper resulting in a 10% total grade reduction. (07/03/2019)	Action: The course instructors will make a few editorial and organizational changes to the assignment instructions in an attempt to better emphasize and clarify the expectations for the assignment. (07/03/2019)

**AU Outcome: ASR 4.2** 

## Program (HS) - Associate of Science in Radiography (ASR)

**AU Outcome: ASR 4.2** 

Students will practice professionalism

Outcome Status: Active

Measures	Results	Actions
SL: Clinical evaluation tool - RA:135 Clinical Instructor/Preceptor Evaluations Numbers 1,5,9,12,13  Target: Average score >= 3 (0-4 pt. scale) Timeframe: Level I- Fall Semester Responsible Parties: Clinical Instructors/ Program Faculty/HS Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes 2018 - 3.68(n=13) Benchmark met.  Previous data: 2017 - 3.68(n=14) 2016 - 3.6 (n=13) 2015 - 3.83(n=16) 2014 - 3.80(n=17)  The students' average scores had a slight increase in two areas; appearance and ethical and professional behaviors. The students' initiative score remained the same and a slight decrease in organization of assignments and policies and procedures. All student evaluations are completed on Trajecsys by the clinical instructors. Students have immediate access to the completed evaluations on Trajecsys. Students continue to practice professionalism in the clinical environment. (07/03/2019)	Action: Clinical instructors will continue to provide effective and timely feedback to students. (07/03/2019)
SL: Clinical evaluation tool - RA:275 Clinical Instructor/Preceptor Evaluations Numbers 1,5,9,12,13  Target: Average score >= 3 (0-4 pt. scale) Timeframe: Level II-Spring Semester Responsible Parties: Clinical Instructors/ Program Faculty/HS Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes 2018-2019- 3.83 (n=12)  Target/benchmark met.  Previous data: 2017-2018 3.76 (n=12) 2016-2017 3.96 (n=15) 2015-2016 3.98 (n=17) 2014-2015 3.91 (n=15)  This result is an increase compared to the previous year. The student scores were lower in only one area which was organization of assignments and higher in areas of initiative, appearance, policies and procedures, and ethical and professional behaviors. (07/03/2019)	Action: To continue to meet or exceed the target/benchmark for this measure during the 2019-2020 academic year, clinical instructors/preceptors in the clinical setting will continue to provide excellent instruction and supervision of students to access their professionalism. (07/03/2019)

## **Program (HS) - Diagnostic Medical Sonography (DMS)**

**AU Outcome: DMS 2.2** 

## Program (HS) - Diagnostic Medical Sonography (DMS)

**AU Outcome: DMS 2.2** 

Students will successfully obtain patient history

Outcome Status: Active

Measures	Results	Actions
SL: Clinical evaluation tool - DMS:408 Clinical Instructor/Preceptor Evaluations Number 1 Target: On a scale from 1-5, 5 being the highest rating, the average of all the responses >=4 Timeframe: Didactic Level - Fall Semester  Responsible Parties: DMS:408 Course Instructor/Program Faculty/HS Curriculum Committee	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  Avg. 4.62 All students scored above 4 (n=9) Trend is consistent with previous years.  Students continue to demonstrate ability to communicate effectively with patient. The action plan identified continuity in assessing this area during clinicals at this time.  Fall 2017 avg 4.94  Fall 2016 avg 4.71  Fall 2015 avg 4.47 (07/30/2019)	Action: Faculty obtained and assessed feedback from clinical instructors. Faculty reviewed evaluations with clinical instructors and student at each site visit and identified /make recommendations for student improvement. Note: Previous action plan proposed that a new outcome or assessment tool would be considered. However, due to the additions of new student clinical sites, faculty wanted to continue this assessment item for one more year. Proposal for next year is to consider new outcome or assessment tool. (07/30/2019)

### Program (HS) - Doctor of Education (Ed.D.)

**AU Outcome: EdD 5.1** 

Students will advance the scholarship of education in a variety of health science and nursing professions.

Measures	Results	Actions
SL: Didactic - EdD 780: Integrating Evolving Technology in Health Professions Education – Tech Topic Assignment Target: 100% of students will receive a score of >= 85%	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  100% of students received a score of >85%  Overall average score = 100% (100/100)	Action: This assignment will be included the next time this course is taught with no revisions. Specific criteria will be used to assess each student's work and the criteria will be available to help students

## Program (HS) - Doctor of Education (Ed.D.)

#### **AU Outcome: EdD 5.1**

Measures	Results	Actions
Timeframe: When course is taught (e.g., 2015, 2018, etc.) Responsible Parties: Program Chair/ HS Grad Curriculum Committee	New assessment item.  Students were required to present on an assigned topic that covered emerging technology trends in health sciences educational settings. Specific criteria were used to assess each student's work. Students were allowed to present their topic using whatever methods best applied to their topic. (08/01/2019)	complete their submissions. Students will be allowed to present their topic using whatever methods best apply to their topic. Subsequent sections will be assessed on this measurement tool to ensure the target continues to be met. (08/01/2019)
SL: Didactic - EdD 790: Practicum in Health Professions Education — Course Discussions Target: Students will receive an average score of >80% Timeframe: When course is taught (e.g., spring 2017) Responsible Parties: Program Chair/HS Graduate APG Committee	Reporting Year: 2018 - 2019 (Year 1) Target Met: NA Course not offered. (08/01/2019)	

# Program (HS) - Masters in Occupational Therapy (MS in OT)

## **AU Outcome: MS in OT 5.1 Supervision Guidelines**

Students will demonstrate an understanding of the supervision guidelines for OT personnel.

Measures	Results	Actions
SL: Exam/Quiz - Teacher-made - OT 501 – Midterm Exam  Target: Minimum score of 80% on midterm exam Timeframe: When course taught (1st Year, e.g., Fall 2016) Responsible Parties: Instructor/ OT	Reporting Year: 2018 - 2019 (Year 1)  Target Met: No  17/24 students achieved above the minimum 80% score. The 24 students received an average score of 81.71%. The result last year indicated that all students were successful which represents a decrease in goal attainment. (03/16/2020)	Action: The course faculty will add additional cases/activities involving supervision guidelines for OT personnel, however, the score students received on this item may have resulted from difficulties in other areas of the exam for this

## Program (HS) - Masters in Occupational Therapy (MS in OT)

### **AU Outcome: MS in OT 5.1 Supervision Guidelines**

Measures	Results	Actions
Faculty /HS Grad Curriculum Committee		course so faculty will assess this as part of the preparation for the next time the course is taught. (03/16/2020)

#### AU Outcome: MS in OT 5.2 Develop program evaluation

Students will develop a comprehensive new program evaluation plan.

Measures	Results	Actions
SL: Didactic - OT 613 – Program Evaluation Assignment	Reporting Year: 2018 - 2019 (Year 1)  Target Met: Yes  All students achieved a minimum of 80% or better on this assignment. This is consistent with	Action: Faculty will continue to monitor this goal and are working on developing an increasingly
Target: Minimum score of 80% on the assignment Timeframe: When course taught (2nd Year, e.g., Spring 2017) Responsible Parties: Instructor/ OT Faculty /HS Grad Curriculum Committee	last year's performance. Efforts by faculty to provide additional practice opportunities and better examples for clarification have contributed to student success. (03/16/2020)	consistent format for teaching program evaluation in each of the practice classes to support students in learning the process.  (03/16/2020)

## Program (HS) - Public Health (PH)

**AU Outcome: PH 2.1** 

Student will be able to gather information on policy

Measures	Results	Actions
SL: Exam/Quiz - Teacher-made - PH	<b>Reporting Year:</b> 2018 - 2019 (Year 1)	
495 Final Exam	Target Met: NA	
<b>Target:</b> Average score >= 80%	Measure not assessed for 2018-2019 academic year. New measure for 2019-2020.	
Timeframe: Summer semester	(05/18/2020)	
Responsible Parties: PH 495 Course		

## Program (HS) - Public Health (PH)

#### **AU Outcome: PH 2.1**

Measures	Results	Actions
Instructor/HS Curriculum Committee		

#### **AU Outcome: PH 2.2**

Student will be able to identify mechanism to evaluate programs for their quality and effectiveness

Outcome Status: Active

Measures	Results	Actions
SL: Exam/Quiz - Teacher-made - PH 480 Final Exam. (Public Health Research and Evaluation) Target: Average score > 80% Timeframe: Spring semester Responsible Parties: Program faculty / Health Science (HS) Curriculum committee	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes Eleven students took the course with an average score of 88.1% on the final exam. The previous year, two students took the course with an average score of 83.33%. There was significant improvement despite no changes being made to the curriculum or exam. This is likely to a larger, "more true" sample. (05/23/2019)	Action: The instructor will give students two attempts at this exam in Spring 2020, with the goal of students improving their learning by studying items they may have missed the first time through. (05/23/2019)

#### **AU Outcome: PH 3.2**

Student should be able to describes the role of governmental and non-governmental organizations in the delivery of community health services

Measures	Results	Actions
SL: Exam/Quiz - Teacher-made - PH: 410 Final exam Target: Average score of >80% Timeframe: Fall semester Responsible Parties: Program faculty / HS Faculty Org. committee	Reporting Year: 2018 - 2019 (Year 1) Target Met: Yes Eleven students received an average of 82.6% on the final exam. In Fall 2017, three students earned an average of 91.7%. (05/23/2019)	Action: This measure will remain but test questions missed by five or more students will be edited or removed. The instructor will also consider allowing students to take the exam twice in order to study material that might have been missed the first time through. (05/23/2019)