



2019-2020



Allen College  
UnityPoint Health

ALLEN COLLEGE ASSESSMENT PLAN (CAP)

# Report of College Goals Achievement

## Table of Contents

|                             |            |
|-----------------------------|------------|
| <b>College Goal 1</b> ..... | <b>1</b>   |
| <b>College Goal 2</b> ..... | <b>89</b>  |
| <b>College Goal 3</b> ..... | <b>132</b> |
| <b>College Goal 4</b> ..... | <b>172</b> |
| <b>College Goal 5</b> ..... | <b>203</b> |

### Allen College Goals 2020-2024

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.

# Allen College Goals Achievement Report

2019-2020 Reporting Year



## College Goals 2020-2024

College Goal 1 - Allen College is committed to preparing outstanding healthcare practitioners who are committed to lifelong learning.

### Admin - Administration

#### AU Outcome: Admin 4.0

Allen College has appropriate technology for facilities, resources, and education services.

**Outcome Status:** Active

| Measures  | Results   | Actions  |
|---|---|--|
| <p><b>AD: Report - Internal</b> - Number of FTEs allocated for instructional technology, media services, and, instructional, designer.<br/> <b>Target:</b> College provides at least 2.0 FTEs to support faculty technology needs.<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> DOBAS</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     The college currently has 3.0 full time equivalents (FTEs) to support the college technology needs which meets the target of 2 FTEs. Two are specifically instructional technology, one is an instructional designer and the other an AV specialist, and both are supervised by the Provost. There is one SIS coordinator that writes scripts for our student information system, CAMS who is supervised by the Executive Director of Business &amp; Finance. The SIS Coordinator also assists with behind the scenes scripts as needed for Blackboard. In 2018-19 total FTEs were 3.0. For 2019-20, the Provost completed the action recommended in the 2018-2019 plan of reviewing the instructional design and AV work volume and did not have sufficient need to request additional personnel for the upcoming 2021 calendar year. The Executive Director of Business &amp; Finance concurs with this assessment of sufficient college technology personnel given the workload of the SIS Coordinator as well. (11/11/2020)</p> | <p><b>Action:</b> Monitor work load of current technology staff and review prior to budget cycle 2022 and budget additional staff for calendar year 2022 if deemed necessary. (11/11/2020)</p> |
| <p><b>AD: Report - Internal</b> - Number of major requests by Allen College for hardware-software<br/> <b>Target:</b> 50% of requests approved<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> DOBAS</p>   | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     21/21 hardware/software request forms were approved for the 2019-20 academic year. This is 100%. When compared to the number of hardware/software requests for 2017-18, this is a 10.5% increase, which is consistent with prior year requests given the low volume. The results when compared to 2017-18 remained the same at 100%. Both years are still over the</p>  | <p><b>Action:</b> Centralize hardware/software ticket entry through the SIS Coordinator, and review college IT compliance committee work and how it relates to this measure. (11/11/2020)</p>  |

College Goal 1 - Allen College is committed to preparing outstanding healthcare practitioners who are committed to lifelong learning.

## Admin - Administration

### AU Outcome: Admin 4.0

| Measures | Results                           | Actions |
|----------|-----------------------------------|---------|
|          | 50% approval target. (11/11/2020) |         |

## 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   |
|--|--|---|
| <p><b>SL: Survey</b> - 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.</p> <p><b>Target:</b> 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.</p> <p><b>Timeframe:</b> Health Sciences courses based on evaluation cycle. Nursing courses based on curriculum course review schedule.</p> <p><b>Responsible Parties:</b> TLC Chair and Committee Members</p> <p><b>Related Documents:</b><br/> <a href="#">Allen College Course Evaluation Criteria.pdf</a></p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> <p><b>Target Met:</b> No</p> <p>100% (9/9) of Graduate Nursing courses reviewed achieved a 3.0 or above, compared to 2018-2019 when 100% (10/10) of courses reviewed achieved a 3.0 or above. This demonstrates no change, but at the top performance.</p> <p>96% (24/25) of Undergraduate Nursing courses reviewed achieved a 3.0 or above, compared to 2016-2017 when 100% (4/4) of courses reviewed achieved a 3.0 or above. This demonstrates a decline from the previous performance</p> <p>98% (63/64) of Health Science Graduate Courses Reviewed achieved a 3.0 or above compared to 2018-2019 when 94% (29/31) of courses reviewed had achieved a 3.0 or above. This demonstrated improvement.</p> <p>EdD 100% (4/4)<br/>           OT 95% (20/21)<br/>           PH 100% (11/11)<br/>           MLS 100% (11/11)<br/>           ASR 100% (17/17)</p> <p>98% of the Allen College courses reviewed during this cycle achieved a 3.0 or above on the eight-item course evaluation tool.</p> <p>Results demonstrate the need to continue to evaluate the effectiveness of the courses in meeting the standards. Goal has not been met. Refer to action plan.</p> <p>As promised in the 2018-2019 action plan for this measure, during the 2019-2020 academic</p> | <p><b>Action:</b> As usual, the results of the 2019-2020 assessment of this measure will be shared with Deans of School of Nursing and Health Sciences. During the 2020-2021 academic year, TLC will additionally review the future of Quality Matters (QM) integration into the curriculum for all programs. Faculty will be surveyed to determine if QM is perceived as a beneficial quality standard. TLC will continue to identify a plan to incorporate QM into all programs. (10/19/2020)</p> |

College Goal 1 - Allen College is committed to preparing outstanding healthcare practitioners who are committed to lifelong learning.

**Admin - Teaching & Learning Committee**

**AU Outcome: TLC 1.0**

| <i>Measures</i> | <i>Results</i>   | <i>Actions</i> |
|-----------------|--|----------------|
|                 | <p>year, TLC kept its CAP on meeting agendas under current business to address progress towards CAP data collection and CAP completion during each meeting. Additionally, TLC gathered evaluations at the end of the academic year, prior to the beginning of the next (i.e., prior to instructor end-of-contract). This allowed for gathering the data sooner and evaluation of the data, which did not have any impact on the addressing the goal, but did allow for quicker turn around of evaluation of the data. TLC shared the assessment results with the Dean of Nursing and Dean of Health Sciences, it is unknown what their action was with this information. This action plan did assure that the data was able to be collected and distributed to the Deans; however, the action plan did not affect the course evaluations. (10/19/2020)</p> |                |

**AU Outcome: TLC 3.0**

Graduates will demonstrate commitment to lifelong learning

**Outcome Status:** Active

| <i>Measures</i>  | <i>Results</i>   | <i>Actions</i>  |
|--|--|---|
| <p><b>AD: Survey</b> - Alumni survey lifelong learning item: Which of the following activities have you been involved in since graduating from Allen College? Select all that apply.<br/> <b>Target:</b> 100% of alumni will report at least one lifelong learning activity since graduating from Allen College.<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> Evaluation and Study Committee/TLC Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> No<br/>                     Of the 2018-2019 alumni surveys that included some type of item to assess lifelong learning activities, 13/33 (33.3%) reported one or more lifelong learning activities. This is a new measure, and previous data collected to assess the previous measure of lifelong learning is not comparable.<br/><br/>                     Per the 2018-2019 action plan for the previous measure of lifelong learning in the Teaching &amp; Learning Committee assessment plan, a new multiple-response lifelong learning item was to be included on future alumni surveys. The item was to have been created based on the narrative descriptions of lifelong learning activities that have been provided by past respondents. The item was created and distributed to program directors for inclusion on their alumni surveys instead of the previous open-ended question that was used to assess lifelong learning activities, but due to the timing of the distribution of the new item, not all surveys included it. Furthermore, alumni in some programs were either not surveyed or the survey did not include any items to measure lifelong learning. (02/02/2021)<br/> <b>Related Documents:</b></p> | <p><b>Action:</b> Measurement of lifelong learning and reporting the data is a regular item on Evaluation and Study Committee agendas and reports to College Faculty Organization. The importance of including the lifelong learning item on alumni surveys will continue to be reinforced in this way during the 2020-2021 academic year. However, simply reporting the data will not instill the value of lifelong learning in Allen College students and ensure that the value is carried forward into students' lives. This goal will be further discussed in TLC to evaluate which committee</p> |

**Admin - Teaching & Learning Committee**

**AU Outcome: TLC 3.0**

| <i>Measures</i> | <i>Results</i>  | <i>Actions</i>                               |
|-----------------|---|--|
|                 | <a href="#">Alumni Lifelong Learning Activities Report 2018-2019 Graduates.docx</a> | should be responsible for this. (02/02/2021) |

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

**AU Outcome: ASR 1.1**

Students will practice proper radiation protection

**Outcome Status:** Active

| <i>Measures</i>   | <i>Results</i>   | <i>Actions</i>  |
|---|--|---|
| <p><b>SL: Clinical evaluation tool - RA:</b> 135 Competency Testing/CCE Part II, numbers 5, 7, 9, 15, 17</p> <p><b>Target:</b> Average score of <math>\geq 3</math> (0-4 pt. scale)</p> <p><b>Timeframe:</b> Level 1-Fall Semester</p> <p><b>Responsible Parties:</b> Lab Instructor/ Program Faculty/ Health Sciences(HS) Faculty Org. Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> <p><b>Target Met:</b> Yes</p> <p>2019 = 3.91 (n=19)</p> <p>Previous data:</p> <p>2018 = 3.90 (n=13)</p> <p>2017=3.97(n=14)</p> <p>2016 = 3.89 (n=13)</p> <p>2015 = 3.95 (n=16)</p> <p>2014 = 3.97 (n=17)</p> <p>The action plan from the 2018-2019 was effective for 2019-2020 as the instructors continued to have students practice radiation protection in each lab and in the clinical settings with each new cohort. A slight increase of .01 in 2019 from 2018 results. Students demonstrate clinical competence by applying proper radiation protection. A variety of radiation protection practices and principles are emphasized throughout the curriculum and students continue to evidence the application of this knowledge in the clinical setting. (07/21/2020)</p> | <p><b>Action:</b> 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. (07/21/2020)</p> |
| <p><b>SL: Clinical evaluation tool - RA:</b> 275 Final Clinical Competency Testing/ CCE Part II, numbers 5,7,9,15,17</p> <p><b>Target:</b> Average score of <math>\geq 3</math> (0-4 pt. scale)</p>   | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> <p><b>Target Met:</b> NA</p> <p>2020 no data to assess, this program requirement was waived for this cohort due to COVID-19.</p> <p>Previous data:</p> <p>2019 = 4 (n=12)</p>   | <p><b>Action:</b> Assessment of this measure tool will resume for the Sp21 cohort. (07/21/2020)</p>   |

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

**AU Outcome: ASR 1.1**

| <i>Measures</i>  | <i>Results</i>   | <i>Actions</i> |
|--|--|----------------|
| <b>Timeframe:</b> Level II-Spring Semester<br><b>Responsible Parties:</b> Clinical Instructors/Program Faculty/HS Curriculum Committee | 2018 = 3.96 (n=12)<br>2017 = 3.96 (n=15)<br>2016=3.96 (n=17)<br>2015=3.96 (n=15)<br>(07/21/2020) |                |

**AU Outcome: ASR 1.2**

Students will apply correct positioning skills

**Outcome Status:** Active

| <i>Measures</i>  | <i>Results</i>  | <i>Actions</i>  |
|--|---|---|
| <b>SL: Didactic - RA:</b> 145 Certification Testing/<br>Part I, numbers 3,12,14,15<br><br><b>Target:</b> Average score of >= 3. (0-4 pt. scale)<br><b>Timeframe:</b> Level I-Spring Semester<br><b>Responsible Parties:</b> Clinical Instructors/ Program Faculty/ HS Curriculum Committee | <b>Reporting Year:</b> 2019 - 2020 (Year 2)<br><b>Target Met:</b> Yes<br>2020 = 3.92 (n=16)<br>2019 = 3.88 (n=13)<br>2018 = 3.86 (n=14)<br>2017 = 4 (n=12)<br>2016 = 3.96 (n=16)<br>2015=3.79 (n=17)<br>2014=3.86 (n=15)<br><br>The action plan from the 2018-2019 for 2019-2020 was successful to use the assessment of certification testing at various clinical sites and with different clinical instructors. A slight increase of .04 in 2019 from 2018 results. Students continue to exceed target. The one item that received some point deductions was line 15. This item refers to the student performing the exam without assistance from the instructor and only one exam performed by one student received a 2 "below average" on this item. Overall, the students overwhelming demonstrated the ability to apply correct positioning skills and apply knowledge of positioning in relation to their in the program. (08/26/2020) | <b>Action:</b> Course instructors recommend continuing to assess this item since certification testing is completed at various clinical sites and with different clinical instructors. To continue to meet or exceed this target/benchmark for this measure during the 2020-2021 academic year, the clinical instructors/preceptors and faculty will provide the students the instruction and supervision to apply correct positioning skills. (08/26/2020) |
| <b>SL: Didactic - RA:</b> 265 Certification Testing/Part I, numbers 3,12,14,15<br><br><b>Target:</b> Average score of >= 3. (0-4 pt. scale)  | <b>Reporting Year:</b> 2019 - 2020 (Year 2)<br><b>Target Met:</b> Yes<br>2019 = 3.9 (n= 10)<br>Previous data:<br>2018=3.95 (n=12)   | <b>Action:</b> To continue to exceed this target for the 2020-2021 year, the faculty will communicate to the clinical instructors to select from  |

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

**AU Outcome: ASR 1.2**

| <i>Measures</i>   | <i>Results</i>  | <i>Actions</i>   |
|---|---|--|
| <p><b>Timeframe:</b> Level II-Fall Semester<br/> <b>Responsible Parties:</b> Clinical Instructors/ Program Faculty/ HS Curriculum Committee</p> | <p>2017=3.90 (n=12)<br/>                     2016=3.97 (n=15)<br/>                     2015=3.99 (n=17)<br/>                     2014= 3.96 (n=15)</p> <p>The action plan for the 2018-2019 was effective as the instructors continued to assess the students' positioning skills on more advanced procedures appropriate to their level in the program. The target of 3.0 was exceeded to achieve a 3.9. This is the second cohort that excluded some basic level 1 exams and encouraged the clinical instructors to select from more advanced and challenging exams. The procedural exam difficulty correlates with the student's level in the program and students continue to demonstrate clinical competence by applying correct positioning skills on these more advanced procedures. Students are well prepared in the classroom and lab which permits success in the clinical setting. (07/21/2020)</p> | <p>more advanced and challenging exams to correlate with the student's level in the program. Faculty will continue to provide effective instruction in the classroom and lab which permits success in the clinical setting. (07/21/2020)</p> |

**AU Outcome: ASR 2.1**

Students will demonstrate effective communication skills in the clinical setting

**Outcome Status:** Active

| <i>Measures</i>  | <i>Results</i>  | <i>Actions</i>   |
|--|---|--|
| <p><b>SL: Clinical evaluation tool - RA:135</b><br/>                     Clinical Instructor/ Preceptor Evaluations/<br/>                     Numbers 3, 6, 10,11</p> <p><b>Target:</b> Average score &gt;= 3.5 (0-4 pt. scale)<br/> <b>Timeframe:</b> Level I-Fall Semester<br/> <b>Responsible Parties:</b> Clinical Instructors/ Program Faculty/ HS Curriculum Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     2019 3.47 (n=19)<br/>                     Previous data:<br/>                     2018 3.67 (n=13)<br/>                     2017 3.68 (n=14)<br/>                     2016 3.56 (n=13)<br/>                     2015 3.81 (n=16)</p> <p>The action plan from the 2018-2019 was effective for the 2019-2020 as the student evaluations are completed on Trajecsyst by the clinical instructors. This allowed the students to have immediate access to the completed evaluations on Trajecsyst. The students' average scores decreased in all areas of the performance criteria; patient care, interpersonal relationships, multicultural diversity and age appropriate care. Some of the comments on the evaluations were; there is room for improvement when it comes to communication with</p> | <p><b>Action:</b> To continue to meet or exceed the target/benchmark for this measure during the 2020-2021 academic year, the clinical instructors/preceptors will deliver prompt feedback to students when issues arise concerning patient care and interpersonal relationships. Faculty continue to discuss and review the correct way to communicate with the patient and fellow students, technologists and radiologists. (07/21/2020)</p> |

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

**AU Outcome: ASR 2.1**

| <i>Measures</i>   | <i>Results</i>   | <i>Actions</i>  |
|---|--|---|
|   | patient and assessing the patient’s condition, student has difficulty working with patients of varying ages.<br>(07/21/2020)   |   |
| <p><b>SL: Clinical evaluation tool - RA:275</b><br/>                     Clinical Instructor/ Preceptor Evaluations/Numbers 3, 6,10,11</p> <p><b>Target:</b> Average score &gt;= 3 (0-4 pt. scale)</p> <p><b>Timeframe:</b> Level II -Spring Semester</p> <p><b>Responsible Parties:</b> Clinical Instructors/ Program Faculty/ HS Curriculum Committee</p>         | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> <p><b>Target Met:</b> Yes</p> <p>2019-2020 3.86 (n=10)</p> <p>Previous data:</p> <p>2018-2019 3.9 (n=12)</p> <p>2017-2018 3.78 (n=12)</p> <p>2016-2017 3.95 (n=15)</p> <p>2015-2016 3.97 (n=17)</p> <p>The action plan from the 2018-2019 was successful for 2019-2020 as the clinical instructors/preceptors in the clinical setting provided excellent instruction and supervision of students to assess their communication skills. The target of 3.0 was exceeded to achieve a 3.86.This result is a slight decrease in the overall score compared to the last year The student scores were higher than the previous year in areas of; interpersonal relationships, multicultural diversity and age appropriate care. There was a slight decrease in the area of patient care. (07/21/2020)</p> | <p><b>Action:</b> To continue to meet or exceed the target for this measure during the 2020-2021 academic year, clinical instructors/preceptors will continue to instruct students by exhibiting effective communication in the clinical environment.<br/>                     (07/21/2020)</p> |
| <p><b>SL: Clinical evaluation tool - RA:135</b><br/>                     Clinical Competency Evaluation/ Part I – Number 4 Part III- Numbers 1,3,6-8</p> <p><b>Target:</b> Average score &gt;= 3 (0-4 pt. scale)</p> <p><b>Timeframe:</b> Level I-Fall Semester</p> <p><b>Responsible Parties:</b> Clinical Instructor/Program Faculty/ HS Curriculum Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> <p><b>Target Met:</b> Yes</p> <p>2019 = 3.94 (n=19)</p> <p>Previous data:</p> <p>2018 = 3.95 (n=13)</p> <p>2017=3.98 (n=14)</p> <p>2016=3.92 (n=13)</p> <p>2015=3.99 (n=16)</p> <p>2014=3.98 (n=17)</p> <p>The action plan from the 2018-2019 was effective for 2019-2020 as the clinical instructors provided effective instruction, supervision and feedback to the students in the clinical settings. The target of 3.0 was exceeded to achieve a 3.94. The students are demonstrating communication skills reflective of their level in the program.<br/>                     (07/22/2020)</p>  | <p><b>Action:</b> To continue to exceed the target for this measure during the 2020-2021 academic year, clinical instructors will continue to deliver instruction, supervision, and feedback to the students in the clinical environment. (07/22/2020)</p>                                      |

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

**AU Outcome: ASR 2.1**

| <i>Measures</i>   | <i>Results</i>  | <i>Actions</i>  |
|---|---|---|
| <p><b>SL: Clinical evaluation tool</b> - RA:275<br/>Final Clinical Competency Evaluation/<br/>Part I – Number 4<br/>Part III- Numbers 1,3,6-8</p> <p><b>Target:</b> Average score &gt;= 3.5 (0-4 pt. scale)<br/><b>Timeframe:</b> Level II- Spring Semester<br/><b>Responsible Parties:</b> Clinical Instructor/ Program Faculty/ HS Curriculum Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/><b>Target Met:</b> NA<br/>2020 no data to assess. This program requirement was waived for this cohort due to COVID-19.<br/>Previous cohort data:<br/>2019 = 4 (n=12)<br/>2018=3.98 (n= 12)<br/>2017=4 (n=15)<br/>2016=4 (n=17)<br/>2015=3.99 (n=15)<br/>(07/22/2020)</p> | <p><b>Action:</b> Assessment of this item will resume for the Sp21 cohort. (07/22/2020)</p> |

**AU Outcome: ASR 2.2**

Students will practice written communication skills

**Outcome Status:** Active

| <i>Measures</i>  | <i>Results</i>   | <i>Actions</i>  |
|--|--|---|
| <p><b>SL: Didactic</b> - RA: 115 Patient Care Presentation<br/><b>Target:</b> Average score of &gt;= 85%<br/><b>Timeframe:</b> Level I-Fall Semester<br/><b>Responsible Parties:</b> RA: 115 Course Instructor/HS Faculty Org. Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/><b>Target Met:</b> Yes<br/>2019=98% (n=19)<br/>Previous data:<br/>2018=98% (n=13)<br/>2017=98% (n=14)<br/>2016=97% (n=13)<br/>2015=98.01% (n=16)<br/>The action plan from the 2018-2019 was successful for 2019-2020. The course instructor continued to communicate the paper requirements on the first day of the semester. The instructor instructed the students to the Allen College website and displayed to all students where the academic resources page is located and the APA resource information for APA review. The target continued to be exceeded. The results remained the same from the previous year at 98%. Three of the nineteen students had deductions due to not double spacing on the title page. Ten of the nineteen students had deductions on the reference</p> | <p><b>Action:</b> 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 throughout the semester. Email the student’s resources information that includes a link to the academic resources page on the Allen College website. On the resources page is an APA link that provides information to assist students to practice written communication skills. (07/22/2020)</p> |

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

**AU Outcome: ASR 2.2**

| <i>Measures</i>   | <i>Results</i>   | <i>Actions</i>   |
|---|--|--|
|   | page; no hanging indents and the spacing of references. (07/22/2020)   |  |
| <p><b>SL: Didactic</b> - RA:258 Pathology Systems Presentation<br/> <b>Target:</b> Average score of &gt;= 85%<br/> <b>Timeframe:</b> Level II-Fall Semester<br/> <b>Responsible Parties:</b> RA: 258 Course Instructor/ HS Faculty Org. Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     2019=98% (n=10)<br/>                     2018=96% (n=12)<br/>                     2017=96% (n=12)<br/>                     2016=97% (n=15)<br/>                     2015=98.01% (n=16)</p> <p>The action plan from the 2018-2019 was effective for 2019-2020. The instructor reviewed the APA format and reminded students that the APA resources information is located on the Allen College website. An increase of 2% in 2019 from 2018 results. Each student completes two papers during the course. Eight of the papers had deductions on the title page due to spacing and incorrect font size. Eight of the papers had deductions on the reference page; no hanging indents, spacing of references, and proper titling of the reference page.<br/>                     (07/27/2020)</p> | <p><b>Action:</b> 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 throughout the semester. Email the student's resources information that includes a link to the academic resources page on the Allen College website. On the resources page is an APA link that provides information to assist students to practice written communication skills.<br/>                     (07/27/2020)</p> |

**AU Outcome: ASR 2.3**

Students will demonstrate oral communication skills

**Outcome Status:** Active

| <i>Measures</i>   | <i>Results</i>  | <i>Actions</i>  |
|---|---|---|
| <p><b>SL: Didactic</b> - RA:258 Pathology Systems Presentation<br/> <b>Target:</b> Average score of &gt;= 85%<br/> <b>Timeframe:</b> Level II-Fall Semester<br/> <b>Responsible Parties:</b> RA: 258 Course Instructor/ HS Faculty Org. Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     2019=99% (n=10)<br/>                     2018=99% (n=12)<br/>                     2017=97% (n=12)<br/>                     2016=95% (n=15)<br/>                     2015=98.82% (n=17)</p> <p>The action plan from the 2018-2019 was successful for 2019-2020. The course instructor continued to communicate the paper requirements the first day of class to this cohort. The results remained the same from the previous year at 99%. Each student completes two</p> | <p><b>Action:</b> 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.</p> |

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

**AU Outcome: ASR 2.3**

| <i>Measures</i>   | <i>Results</i>  | <i>Actions</i>  |
|---|---|---|
|   | papers during the course. One student had deductions in their oral presentation due to their oral presentation did not meet the time length. (07/27/2020)   | (07/27/2020)  |
| <p><b>SL: Didactic</b> - RA: 115 Patient Care Presentation<br/> <b>Target:</b> Average score of &gt;= 85%<br/> <b>Timeframe:</b> Level I-Fall Semester<br/> <b>Responsible Parties:</b> RA: 115 Course Instructor/HS Faculty Org. Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     2019=98% (n=19)<br/>                     2018=99% (n=13)<br/>                     2017 =99% (n=14)<br/>                     2016=99% (n=13)<br/>                     2015=94.53% (n=16)</p> <p>The action plan from the 2018-2019 was effective for 2019-2020. The course instructor explained the paper requirements the first day of class. The target of &gt;=85% was exceeded to achieve a 98%. Four students had deductions in their oral presentation portion due to voice level and words not stated correctly during the presentation. (12/01/2020)</p> | <p><b>Action:</b> To meet or exceed the benchmark 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. (12/01/2020)</p> |

**AU Outcome: ASR 3.1**

Students will appropriately critique radiographic images

**Outcome Status:** Active

| <i>Measures</i>   | <i>Results</i>   | <i>Actions</i>  |
|---|--|---|
| <p><b>SL: Didactic</b> - RA: 255 Radiographic image analysis worksheets<br/> <b>Target:</b> Average score of &gt;= 80%<br/> <b>Timeframe:</b> Level II-Summer Semester<br/> <b>Responsible Parties:</b> RA: 255 Course Instructors/ Program Faculty/HS Faculty Org. Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     2019 = 92.72% (n=11)<br/>                     2018 = 93.75% (n=12)<br/>                     2017=87.75% (n=12)<br/>                     2016: 90.19% (n=16)<br/>                     2015: 89.88% (n=17)</p> <p>The action plan from the 2018-2019 was effective for 2019-2020. The course instructor continued the extension of the due date for the shoulder chapter. This allowed two additional weeks for this more difficult chapter. Students demonstrated the ability to apply critical thinking skills while correctly analyzing radiographic images. (07/27/2020)</p> | <p><b>Action:</b> The textbook for this assignment will use the new 5th edition for the 2020 cohort. No changes recommended. Continue to assess this item. (07/27/2020)</p> |
| <p><b>SL: Didactic</b> - RA: 265 Radiographic</p>   | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p>   | <p><b>Action:</b> Next year's cohort will</p>   |

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

**AU Outcome: ASR 3.1**

| <i>Measures</i>   | <i>Results</i>  | <i>Actions</i>  |
|---|---|---|
| image analysis worksheets<br><br><b>Target:</b> Average score of >= 80%<br><b>Timeframe:</b> Level II- Fall Semester<br><br><b>Responsible Parties:</b> RA: 265 Course Instructors/ Program Faculty/HS Faculty Org. Committee | <b>Target Met:</b> Yes<br>2019 = 88.8% (n = 10)<br>Previous data:<br>2018 = 93.33% (n=12)<br>2017 = 88.83% (n=12)<br>2016 = 91.66% (n=15)<br>2015= 90.71% (n=17)<br>The action plan from the 2018-2019 was successful for 2019-2020. The course instructor provided the appropriate radiographs to critique and effective feedback. This year’s smaller cohort demonstrated similar results when compared to the 2017 cohort. Students continue to exceed target. Students continue to demonstrate the ability to critique and critically analyze radiographic images. (07/27/2020) | utilize the 5th edition textbook for this assessment item. No changes recommended. Continue to assess this item. (07/27/2020) |

**AU Outcome: ASR 3.2**

Students will demonstrate ability to practice critical thinking

**Outcome Status:** Active

| <i>Measures</i>  | <i>Results</i>  | <i>Actions</i>  |
|--|---|---|
| <b>SL: Didactic - RA:145 Scientific Exhibit Evaluation</b><br><b>Target:</b> Average score of >= 80%<br><b>Timeframe:</b> Level I- Spring Semester<br><b>Responsible Parties:</b> RA: 145 Program Faculty/ HS Curriculum Committee | <b>Reporting Year:</b> 2019 - 2020 (Year 2)<br><b>Target Met:</b> Yes<br>2020 = 91.90 (n = 11 posters, 16 students)<br>2019 = 87% N = 9 posters (13 students)<br>2018 = 91.5% N= 8 posters (14 students)<br>2017 = 92.14% N= 7 posters (12 students)<br>2016 = 92.6% N= 10 posters (16 students)<br>The action plan from the 2018-2019 was effective for 2019-2020. The course instructors continued to provide effective feedback to the students on their exhibits. Scores for 2020 continue to demonstrate the students’ ability to practice critical thinking skills when developing their scientific exhibits. Many reductions occurred in line item #2 for quality of visuals and charts. Multiple students only used a few or did not support the visuals well. Item #5 also received quite a few reductions since many posters lacked in-depth research. Average scores continue to exceed the target. (07/27/2020) | <b>Action:</b> The course instructors have decided to move this assessment item to RA275 beginning in the Spring of 2022 to better coincide with the student educator seminar where the posters are entered in a competition. This measurement tool will be replaced with RA154 CT Topic Presentation as the new measurement tool starting in the 2020-2021 academic year. (07/27/2020) |

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

**AU Outcome: ASR 3.2**

| <i>Measures</i>  | <i>Results</i>   | <i>Actions</i>   |
|--|--|--|
| <p><b>SL: Exam/Quiz - Standardized - RA:</b> 203B Corectec exams<br/> <b>Target:</b> &gt; 80% of the students will achieve a score of 70 or greater on one of the four exams.<br/> <b>Timeframe:</b> Level II- Spring Semester<br/> <b>Responsible Parties:</b> RA: 203B Course Instructor/HS Curriculum Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     2020 = 90% (n=10)<br/>                     Previous data:<br/>                     2019 = 100% (n=12)<br/>                     2018 = 100% (n=12)<br/>                     2017 = 93% (n=15)<br/>                     2016 = 100% (n=17)<br/>                     2015 = 93% (n=15)</p> <p>The action plan from the 2018-2019 was effective for 2019-2020. The instructor reduced the % reduction to 1% and was reevaluated in 2020 with no additional changes. 9 out of 10 students achieved a 70 or greater on one of the four Corectec exams. There was a total course grade reduction applied for 2 of the 10 students as a result of their below 70 overall average Corectec scores. This grade reduction policy was implemented to encourage students to put forth their best effort on each of the 4 Corectec exams. (07/27/2020)</p> | <p><b>Action:</b> Overall, the ASR Program curriculum continues to prepare the students for mock board exams. Overall, students continue to demonstrate the ability to practice critical thinking. Will update the target to remove the word "passing" from future year's assessment plans. (07/27/2020)</p> |

**AU Outcome: ASR 3.3**

Students will be able to critically think in the clinical setting

**Outcome Status:** Active

| <i>Measures</i>   | <i>Results</i>   | <i>Actions</i>  |
|---|--|---|
| <p><b>SL: Clinical evaluation tool - RA:</b>145 Clinical Instructor/ Preceptor Evaluations/Numbers 2,4,7,8<br/> <b>Target:</b> Average score &gt;= 3. (0-4 pt. scale)<br/> <b>Timeframe:</b> Level I-Spring Semester<br/> <b>Responsible Parties:</b> RA: 145 Course Instructor/HS Faculty Org. Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     2019-2020 3.6 (N=16)<br/>                     2018-2019 3.36 (N=13)<br/>                     2017-2018 3.53 (N=14)<br/>                     2016-2017 3.63 (N=12)<br/>                     2015-2016 3.63 (N=16)</p> <p>The action plan from the 2018-2019 was successful for 2019-2020. The clinical instructors/preceptors in the clinical setting continued to provide excellent instruction and supervision of students to assess their critical thinking skills. This result is an increase compared to the previous year. The student scores were higher than the previous year in all</p> | <p><b>Action:</b> To continue to meet or exceed the target for this measure during the 2020-2021 academic year, the clinical instructors/preceptors will continue to provide the needed instruction and supervision of the students to evaluate their critical thinking skills in the clinical setting.<br/><br/>(07/27/2020)</p> |

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

**AU Outcome: ASR 3.3**

| <i>Measures</i>  | <i>Results</i>   | <i>Actions</i>   |
|--|--|--|
|  | areas; which are application of knowledge, ability to follow directions, self-image for level in the ASR program, and composure and adaptability. (07/27/2020)   |  |
| <p><b>SL: Clinical evaluation tool</b> - RA:265 Clinical Instructor/ Preceptor Evaluations/Numbers 2,4,7,8</p> <p><b>Target:</b> Average score &gt;= 3. (0-4 pt. scale)</p> <p><b>Timeframe:</b> Level II- Fall Semester</p> <p><b>Responsible Parties:</b> RA: 265 Course Instructors/HS Curriculum Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> <p><b>Target Met:</b> Yes</p> <p>2019 3.86 (n=11)</p> <p>2018 3.81 (n=12)</p> <p>2017 3.79 (n=12)</p> <p>2016 3.86 (n=15)</p> <p>2015 3.81 (n=17)</p> <p>The action plan from the 2018-2019 was effective for 2019-2020. All student evaluations were completed on Trajecsys by the clinical instructors. Students had immediate access and feedback to their evaluations on their critical thinking. The students' scores increased in three performance criteria areas; application of knowledge, ability to follow directions, and composure and adaptability. The area of self image for the level in the ASR program average score remained the same. (07/27/2020)</p> | <p><b>Action:</b> To continue to meet or exceed the target for this measure during the 2020-2021 academic year, clinical instructors/preceptors continue to demonstrate and explain to students how to practice critical thinking skills in the clinical environment. (07/27/2020)</p> |

**AU Outcome: ASR 4.1**

Students will integrate leadership skills and construct professional practices

**Outcome Status:** Active

| <i>Measures</i>  | <i>Results</i>   | <i>Actions</i>  |
|--|--|---|
| <p><b>SL: Service</b> - RA:135 Community Service/Service Learning Evaluation</p> <p><b>Target:</b> Average score of &gt;= 80%</p> <p><b>Timeframe:</b> Level I-Fall Semester</p> <p><b>Responsible Parties:</b> RA: 135 Course Instructors/HS Curriculum Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> <p><b>Target Met:</b> Yes</p> <p>2019 = 87.71% (n=19)</p> <p>2018: 83.69% (n=13)</p> <p>2017: 94.78 (n=14)</p> <p>2016: 72% (n=13)</p> <p>2015: 92.56% (n=16)</p> <p>The action plan from the 2018-2019 was effective for 2019-2020. The course instructors made a few editorial changes to the assignment instructions for emphasis and clarification based on last year's recommendations. The overall average score increased slightly when compared to last year. Again, the majority of point deductions occurred in the overall writing</p> | <p><b>Action:</b> To continue to achieve the target for this measure during the 2020-2021 academic year, ASR faculty will assess their rubric that are contributing to exceed the target on service-learning and make modifications accordingly. Will continue to assess this measure. (07/27/2020)</p> |

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

**AU Outcome: ASR 4.1**

| <i>Measures</i>  | <i>Results</i>   | <i>Actions</i>  |
|--|--|---|
|  | and the research categories of the assessment rubric. Some students did not research the organization as directed. All students performed service learning through a variety of organizations. Students demonstrated leadership skills and professionalism through their involvement in service learning activities. (07/27/2020)  |   |
| <p><b>SL: Service</b> - RA: 265 Community Service/Service Learning Evaluation<br/> <b>Target:</b> Average score of &gt;= 80%<br/> <b>Timeframe:</b> Level II-Fall Semester<br/> <b>Responsible Parties:</b> RA: 265 Course Instructors/HS Curriculum Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     2019 = 85.6% (n = 10)<br/>                     2018: 76.75% (n=12)<br/>                     2017: 93.33% (n=12)<br/>                     2016: 93.4% (n=15)<br/>                     2015: 82.47% (n=17)</p> <p>The action plan from the 2018-2019 was successful for 2019-2020. The course instructors made a few editorial changes to the assignment instructions to better emphasize and clarify the expectations for the assignment. Improved average scores this year may be the result of implementing the 2018 recommended changes.<br/>                     (07/27/2020)</p> | <p><b>Action:</b> To continue to achieve the target for this measure during the 2020-2021 academic year, the course instructors will continue to assess the assignment instructions and make modifications accordingly. Continue to assess this measure. (07/27/2020)</p> |

**AU Outcome: ASR 4.2**

Students will practice professionalism

**Outcome Status:** Active

| <i>Measures</i>  | <i>Results</i>  | <i>Actions</i>  |
|--|---|---|
| <p><b>SL: Clinical evaluation tool</b> - RA:135 Clinical Instructor/Preceptor Evaluations Numbers 1,5,9,12,13<br/> <b>Target:</b> Average score &gt;= 3 (0-4 pt. scale)<br/> <b>Timeframe:</b> Level I- Fall Semester<br/> <b>Responsible Parties:</b> Clinical Instructors/ Program Faculty/HS Curriculum Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     2019 3.51 (n=19)<br/>                     2018 3.68 (n=13)<br/>                     2017 3.68 (n=14)<br/>                     2016 3.6 (n=13)<br/>                     2015 3.83 (n=16)</p> <p>The action plan from the 2018-2019 was effective for 2019-2020. All student evaluations were completed on Trajecsyst by the clinical instructors. Students had immediate access and feedback to the completed evaluations. Clinical instructors continued to provide effective and timely feedback to students. The students' average scores decreased in all areas of the</p> | <p><b>Action:</b> To continue to meet or exceed the target for this measure during the 2020-2021 academic year, the clinical instructors/preceptors will continue to deliver prompt feedback to students when issues arise concerning initiative and professionalism. Faculty continue to discuss the importance of initiative and professionalism in the</p> |

College Goal 1 - Allen College is committed to preparing outstanding healthcare practitioners who are committed to lifelong learning.

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

**AU Outcome: ASR 4.2**

| <i>Measures</i>  | <i>Results</i>   | <i>Actions</i>  |
|--|--|---|
|  | performance criteria, organization of assignments, initiative, appearance, policies and procedures, ethical and professional behaviors. Some of the comments on the evaluations were; student lacks initiative to be involved in the exams, there were a lot of exams that the student was not involved in-this student has no initiative, needs to work on professionalism with patients and technologists. (07/27/2020)  | clinical setting. (07/27/2020)  |
| <p><b>SL: Clinical evaluation tool</b> - RA:275<br/>Clinical Instructor/Preceptor<br/>Evaluations Numbers 1,5,9,12,13</p> <p><b>Target:</b> Average score &gt;= 3 (0-4 pt. scale)</p> <p><b>Timeframe:</b> Level II-Spring Semester</p> <p><b>Responsible Parties:</b> Clinical Instructors/ Program Faculty/HS Curriculum Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> <p><b>Target Met:</b> Yes</p> <p>2019-2020 3.88 n=10</p> <p>2018-2019 3.83 (n=12)</p> <p>2017-2018 3.76 (n=12)</p> <p>2016-2017 3.96 (n=15)</p> <p>2015-2016 3.98 (n=17)</p> <p>The action plan from the 2018-2019 was successful for 2019-2020. The clinical instructors/preceptors in the clinical setting provided excellent instruction and supervision of students to assess their professionalism. This result is an increase compared to the previous year. The student scores were higher in areas of organization of assignments, initiative, appearance, and ethical and professional behaviors. The scores were lower in only one area which was policies and procedures. (07/27/2020)</p> | <p><b>Action:</b> To continue to meet or exceed the target for this measure during the 2020-2021 academic year, clinical instructors/preceptors will continue to be positive role models for students by practicing professionalism in the clinical setting. (07/27/2020)</p> |

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

**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.

**Outcome Status:** Active

| <i>Measures</i>  | <i>Results</i>  | <i>Actions</i>  |
|--|---|---|
| <p><b>SL: Didactic</b> - EdD 710: Leading a Health Sciences Learning Organization – Case Study: Making Changes in Higher Education</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> <p><b>Target Met:</b> Yes</p> <p>One student earned above 85%, with a course average of 95%.</p> | <p><b>Action:</b> This target will be maintained for the next time the course is taught. Faculty will</p> |

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

**AU Outcome: EdD 1.2**

| <i>Measures</i>   | <i>Results</i>  | <i>Actions</i>  |
|---|---|---|
| <p><b>Target:</b> 100% of students will receive a score of &gt;=85%</p> <p><b>Timeframe:</b> When course is taught (e.g., 2015, 2018, etc.)</p> <p><b>Responsible Parties:</b> Program Chair/ HS Grad Curriculum Committee</p>  | <p>2018 = 92% (average – 6 students)<br/>2015 = 91.8% (average – 7 students)</p> <p>This assignment was offered during a module on Shared Governance. This course was last taught during the 2017-2018 academic year. The action plan at that time indicated no changes would be made for the next course offering, so the current structure helped support students to be successful on this measure. (07/31/2020)</p>   | <p>continue to facilitate student work on this assignment and provide necessary feedback. No changes will be made as it is difficult to make any judgments based on one student. (07/31/2020)</p>   |
| <p><b>SL: Didactic - EdD 730: Professional, Ethical and Legal Issues and Trends in Health Professions Education – Literature Review</b></p> <p><b>Target:</b> Each student will receive an average score of &gt;80%</p> <p><b>Timeframe:</b> When course is taught</p> <p><b>Responsible Parties:</b> Program Chair/ HS Grad Curriculum Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> <p><b>Target Met:</b> Yes</p> <p>Fall 2019 – 2 students</p> <p>100% of students received a score of &gt; 80%</p> <p>Overall average score = 95% (sum of students’ scores equal 285 out of a cumulative 300 points).</p> <p>For the Fall 2016 semester, 87.5% of students (n=7 out of 8) received an average score of &gt;80% on the literature review.</p> <p>The action plan from the 2016-2017 CAP indicated students would be informed of the writing resources available to them both before and during the class. This plan has been incorporated into the entire program since the last time the course was taught, and helped the students be successful on this measure.</p> <p>This assignment was the comprehensive project from the course that required the students to apply their knowledge obtained through previous course activities. For this course, the students were required to frame their learning through the lens of someone with legal or ethical expertise. Specifically, this activity relates to the stated assessment outcome of assuming leadership roles in interprofessional collaboration because of the complexities of legal situations in higher education that require working closely with the institution’s legal representatives. This assessment activity also relates to Goal #1 because it is preparing the EdD students to adapt to situations that may arise across a variety of educational settings. (07/31/2020)</p> | <p><b>Action:</b> Even though his assignment exceeded the stated target of individual scores being &gt;80%, some changes will be incorporated for the next time the course is offered. A component of the literature review is the addition of a literature map. The literature map was a separate assignment due in the 10th week of the course. This limited the amount of time students had to revise the literature map prior to incorporating it into the literature review. It is recommended to move the due date of the literature map to no later than 8 weeks in the course (out of 16 weeks). (07/31/2020)</p> |

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

**AU Outcome: EdD 1.2**

| <i>Measures</i>   | <i>Results</i>  | <i>Actions</i> |
|---|---|----------------|
| <p><b>SL: Service</b> - EdD 740: Today's Health Sciences Student: Trends, Issues and Challenges – Service Learning Project<br/> <b>Target:</b> 100% of students will receive a score of &gt;= 85%<br/> <b>Timeframe:</b> When course is taught (e.g., Fall 2016)<br/> <b>Responsible Parties:</b> Program Chair/ HS Grad Curriculum Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> NA<br/>                     Course not offered. (07/31/2020)</p> |                |

**AU Outcome: EdD 2.1**

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

**Outcome Status:** Active

| <i>Measures</i>   | <i>Results</i>   | <i>Actions</i>  |
|---|--|---|
| <p><b>SL: Didactic</b> - EdD 750: Curriculum Theory and Design in the Health Professions – Final Project<br/> <b>Target:</b> 100% of students will receive an average score of &gt;=85%<br/> <b>Timeframe:</b> When course is taught<br/> <b>Responsible Parties:</b> Program Chair/HS Graduate APG Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     Fall 2019 – 1 student<br/> <br/>                     100% of students received a score of &gt;85%<br/> <br/>                     Overall average score = 100% (100/100)<br/> <br/>                     This project required students to assemble a portfolio to showcase development of a unit of instruction that aligned with topics associated with curriculum development. (07/31/2020)</p> | <p><b>Action:</b> This assignment will be included the next time this course is taught with no revisions. Students will assemble a portfolio that showcases their ability to developed a unit of instruction. Faculty will support student work by providing feedback on assignments that feed into the final project. Subsequent sections will be assessed on this measurement tool to ensure the target continues to be met. (07/31/2020)</p> |
| <p><b>SL: Didactic</b> - EdD 760: Pedagogy in Health Professions Education – Teaching Evaluation<br/> <b>Target:</b> 100% of students will receive</p>  | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     Spring 2020 – 3 students</p>   | <p><b>Action:</b> Students will complete a peer review with their evaluation. A rubric helped guide students on completing this assignment, and</p>   |

College Goal 1 - Allen College is committed to preparing outstanding healthcare practitioners who are committed to lifelong learning.

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

**AU Outcome: EdD 2.1**

| <i>Measures</i>   | <i>Results</i>  | <i>Actions</i>   |
|---|---|--|
| <p>a score of &gt;=85%</p> <p><b>Timeframe:</b> When course is taught (e.g., 2014, 2017, etc.)</p> <p><b>Responsible Parties:</b> Program Chair/HS Graduate Curriculum Committee</p>  | <p>100% of students received a score of &gt;85%</p> <p>Overall average score = 100% (50/50)</p> <p>New measurement tool and target.</p> <p>Within each module, students evaluated an existing teaching evaluation tool against the learning theories covered in that module. By the end of the course, each student had created a unique teaching evaluation to use for a peer review. Due to COVID-19, students were not able to complete peer reviews, so a reflection on creating the document was added as a substitute. (07/31/2020)</p> | <p>that will continue to be used. Subsequent sections will be assessed on this item to ensure the target continues to be met. (07/31/2020)</p> |
| <p><b>SL: Didactic - EdD 790:</b> Practicum in Health Professions Education – Project Conferences</p> <p><b>Target:</b> Students will receive an average score of &gt;80%</p> <p><b>Timeframe:</b> When course is taught (e.g., Spring 2017)</p> <p><b>Responsible Parties:</b> Program Chair/HS Graduate APG Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> <p><b>Target Met:</b> NA</p> <p>Course not offered. (07/31/2020)</p>   |  |

**AU Outcome: EdD 4.1**

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

**Outcome Status:** Active

| <i>Measures</i>   | <i>Results</i>  | <i>Actions</i>  |
|---|---|---|
| <p><b>SL: Didactic - EdD 760:</b> Pedagogy in Health Professions Education – Personal Statement of Teaching Philosophy</p> <p><b>Target:</b> 100% of students will receive an average score of &gt;=85%</p> <p><b>Timeframe:</b> When course taught (e.</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> <p><b>Target Met:</b> Yes</p> <p>Spring 2020 – 3 students</p> <p>100% of students received a score of &gt;85%</p> <p>Overall average score = 97.6% (48.8/50)</p> | <p><b>Action:</b> A guidance document with assignment expectations provides information to students, and that will continue to be used. Subsequent sections will be assessed on this measurement tool to ensure the target continues to</p> |

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

**AU Outcome: EdD 4.1**

| <i>Measures</i>  | <i>Results</i>  | <i>Actions</i>              |
|--|---|-----------------------------|
| <p>g., spring, Year 1)<br/> <b>Responsible Parties:</b> Program Chair/HS Graduate APG Committee</p>  | <p>New measurement tool and target.</p> <p>Within each module, students completed a journal entry to help capture information about their teaching style to use in the final assignment. Students were allowed flexibility in the format of their submission, and one turned in an art form while the others completed essays. (07/31/2020)</p> | <p>be met. (07/31/2020)</p> |
| <p><b>SL: Didactic -</b> EdD 800: Evidence Based Practice in the Health Professions – Final Written Report<br/> <b>Target:</b> 100% of students will receive a score of &gt;=85%<br/> <b>Timeframe:</b> When course is taught (e.g., 2015, 2018, etc.)<br/> <b>Responsible Parties:</b> Program Chair/ HS Grad Curriculum Committee</p>          | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     Course not offered. (07/31/2020)</p>  |                             |
| <p><b>SL: Didactic -</b> EdD 810: Methods of Inquiry – Collaborative Group Activity: Mock Qualitative Research Project<br/> <b>Target:</b> 100% of students will receive a score of &gt;= 85%<br/> <b>Timeframe:</b> When course is taught (e.g., 2021, 2024, etc.)<br/> <b>Responsible Parties:</b> Program Chair/HS Graduate APG Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     Course not offered. (07/31/2020)</p>  |                             |
| <p><b>SL: Didactic -</b> EdD 820: Methods of Inquiry - Quantitative Research – Research Proposal<br/> <b>Target:</b> Students will receive an average score of at least 80%<br/> <b>Timeframe:</b> When course is taught</p>   | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> NA<br/>                     Course not offered. (11/19/2020)</p>   |                             |

College Goal 1 - Allen College is committed to preparing outstanding healthcare practitioners who are committed to lifelong learning.

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

**AU Outcome: EdD 4.1**

| <i>Measures</i>  | <i>Results</i>   | <i>Actions</i>  |
|--|--|---|
| (e.g., 2016, 2019, etc.)<br><b>Responsible Parties:</b> Program Chair/HS Graduate APG Committee  |  |   |
| <b>SL: Didactic</b> - EdD 830: Dissertation Seminar – Prospectus<br><b>Target:</b> Students will receive an average score of >80%<br><b>Timeframe:</b> When course is taught (e.g., summer 2016, summer 2017)<br><b>Responsible Parties:</b> Program Chair/HS Graduate APG Committee | <b>Reporting Year:</b> 2019 - 2020 (Year 2)<br><b>Target Met:</b> Yes<br>Summer 2019 – 2 students<br><br>100% of students received a score of >85%<br><br>Overall average score = 100% (20/20)<br><br>Overall Averages<br>2016 – 100%<br>2017 – 100%<br>2018 – 100%<br><br>This course was set to be retired, but a planned curriculum revision is pending, so students who entered the program under the original curriculum plan were allowed to take this course. There was no action plan created at that time, so the course was not altered from the previous offering.<br><br>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 structure of this course supported the students in their work contributing to progress on a dissertation, so this helped them to be successful on this measure. (07/31/2020) | <b>Action:</b> Under the curriculum revision plan that is pending but planned for fall 2021, this course will no longer be offered. This measurement tool will be retired. (07/31/2020) |

**AU Outcome: EdD 5.1**

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

**Outcome Status:** Active

| <i>Measures</i> | <i>Results</i> | <i>Actions</i> |
|-----------------|----------------|----------------|
|-----------------|----------------|----------------|

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

**AU Outcome: EdD 5.1**

| <i>Measures</i>  | <i>Results</i>  | <i>Actions</i> |
|--|---|----------------|
| <p><b>SL: Didactic</b> - EdD 780: Integrating Evolving Technology in Health Professions Education –Tech Topic Assignment<br/> <b>Target:</b> 100% of students will receive a score of &gt;= 85%<br/> <b>Timeframe:</b> When course is taught (e.g., 2015, 2018, etc.)<br/> <b>Responsible Parties:</b> Program Chair/ HS Grad Curriculum Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> NA<br/>                     Course not offered. (07/31/2020)</p> |                |
| <p><b>SL: Didactic</b> - EdD 790: Practicum in Health Professions Education – Course Discussions<br/> <b>Target:</b> Students will receive an average score of &gt;80%<br/> <b>Timeframe:</b> When course is taught (e.g., spring 2017)<br/> <b>Responsible Parties:</b> Program Chair/HS Graduate APG Committee</p>                                   | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> NA<br/>                     Course not offered. (07/31/2020)</p> |                |

**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.

| <i>Measures</i>   | <i>Results</i>   | <i>Actions</i>   |
|---|--|--|
| <p><b>SL: Didactic</b> - OT 602 – OT School System Practice Case Report Assignment<br/> <b>Target:</b> Minimum of 80% on case report assignment<br/> <b>Timeframe:</b> When course taught</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> No<br/>                     19/23 (83%) students attained a minimum of 80% on the case report assignment in the Fall of 2019 compared to 18/22 (82%) in Fall of 2018 demonstrating an increase in student success in this outcome. Fall of 2017 and 2016 the students who scored a minimum of 80% were 16/19 (84%) and 14/14 (100%) respectively.</p> | <p><b>Action:</b> Additional resources to allow for increased experiences with clinical reasoning, case analysis, problem-solving, and decision-making will be used by faculty to address case study</p> |

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

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

| <i>Measures</i>  | <i>Results</i>   | <i>Actions</i>   |
|--|--|--|
| (year 2 of program, e.g., Fall 2016)<br><b>Responsible Parties:</b> OT 602<br>Instructor/ Program Faculty/ HS<br>Grad Curriculum Committee | Per the 2018-2019 action plan, more case studies that involved writing up an evaluation report were done in class to better prepare students to do this individual assignment. The fact that 19/23 students scored at least 80% demonstrates an increase in student success with the outcome measure. However, due to the change in assessment of this measure caused by COVID-19, the contribution of the 2018-2019 action plan cannot be accurately assessed. (08/28/2020) | critical reasoning skills. The assignment instructions and template will also be reviewed and revised as needed to ensure clear expectations. Due to newly revised 2018 ACOTE accreditation standards, this measurement tool and its placement in the coursework/curriculum will be reviewed by faculty and revised as appropriate to meet the new standards. The shift from 2011 to 2018 ACOTE standards went into effect July 2020 and so were in process during the 2019-2020 CAP data collection period (08/28/2020) |

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

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

| <i>Measures</i>   | <i>Results</i>  | <i>Actions</i>  |
|---|---|---|
| <b>SL: Didactic</b> - OT 611 – Written final: Initial evaluation note and intervention plan<br><b>Target:</b> All students will achieve a minimum score of 80% on initial evaluation note and intervention plan<br><b>Timeframe:</b> When course taught (Year 2 of program, e.g., Spring 2017)<br><b>Responsible Parties:</b> OT 611<br>Instructor/ Program Faculty/HS Grad | <b>Reporting Year:</b> 2019 - 2020 (Year 2)<br><b>Target Met:</b> No<br>Due to complications from COVID-19 this outcome was split into 2 separate graded tasks for the students.<br><br>Initial Evaluation Note: 24/24 students attained 80% on the final initial evaluation which was completed online through Simucase due to COVID -19; this does indicate meeting the evaluation part of this goal. This is consistent with 22/22 achieving 80% in the spring of 2019 and continues to be up from the two years prior with 18/19 and 13/14 meeting this goal. Per the 2018-2019 action plan, faculty continued to provide opportunities to plan interventions for a variety of clients to promote student success with the development of therapeutic interventions, which appears to have facilitated an increase in student success in 2019-2020. | <b>Action:</b> This measurement tool was modified due to COVID-19 to include the use of an online platform for the evaluation and a written component for the intervention plan. We will continue to integrate online simulations into the curriculum as well as in-class opportunities for students to develop critical reasoning skills for successful completion of intervention plans. Due to newly |

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

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

| <i>Measures</i>      | <i>Results</i>  | <i>Actions</i>  |
|----------------------|---|---|
| Curriculum Committee | <p>Intervention Plan: 23/24 attained 80% on the intervention plan written portion of the final. The student who did not achieve 80% scored 79% on the assignment. The intervention plan of this measure was not met. The two parts were not separated in the past to have a comparison for this section independent of the evaluation.</p> <p>Per the 2018-2019 action plan, it was determined that no program changes were needed to facilitate achievement of the target. Faculty continued to provide opportunities to plan interventions for a variety of clients to promote student success with the development of therapeutic interventions; however, changes to the assessment of this measure due to COVID-19 prevent assessment of the effectiveness of the 2018-2019 action plan. (09/22/2020)</p> | revised 2018 ACOTE accreditation standards, this measurement tool and its placement in the coursework/curriculum will be reviewed by faculty and revised as appropriate to meet the new standards. The shift from 2011 to 2018 ACOTE standards went into effect July 2020 and so were in process during the 2019-2020 CAP data collection period (09/22/2020) |

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

**AU Outcome: MI 1.1**

Students will demonstrate appropriate patient preparation for imaging procedures.

**Outcome Status:** Active

| <i>Measures</i>   | <i>Results</i>   | <i>Actions</i>  |
|---|--|---|
| <p><b>SL: Didactic</b> - MI: 460 Competency Evaluation/CCE Part I, numbers 4, 5, 6, 7 and CCE Part II, numbers 1, 2</p> <p><b>Target:</b> Average score of &gt;= 3. (0-4 pt. scale)</p> <p><b>Timeframe:</b> Spring Semester</p> <p><b>Responsible Parties:</b> Clinical Instructors/ Program Faculty/ Health Sciences(HS) Curriculum Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> <p><b>Target Met:</b> Yes</p> <p>In spring 2020, the MI 460 Competency Evaluation/CCE Part 1, numbers 4, 5, 6, 7 and CCE Part II, numbers 1, 2 average score is 3.88. The spring 2019 average score was slightly higher at 3.96. Although this year's average score was lower, the average score was still significantly high when compared to the target benchmark. As proposed in the 2018-2019 action plan, this measure has been continued because it is considered beneficial to student learning and growth in the clinical environment. The students 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 students were evaluated on coincide with the procedures being taught in other courses this semester. The students have the opportunity to gain effective feedback on patient preparation during the evaluation process. Clinical competence was demonstrated.</p> | <p><b>Action:</b> Clinical instructors will continue to educate the students on the importance of patient preparation and safety as it relates to MRI in the clinical environment. Clinical instructors will continue to guide students through the process of patient preparation while providing direct patient care in the clinical setting. The instructor will continue to use the competency evaluation forms as it proves to be beneficial to student learning and</p> |

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

**AU Outcome: MI 1.1**

| <i>Measures</i>   | <i>Results</i>  | <i>Actions</i>  |
|---|---|---|
|   | 2020 = 3.88 (n=3)<br>2019 = 3.96 (n=1) (09/04/2020)   | growth within the clinical environment. (09/04/2020)  |
| <p><b>SL: Didactic</b> - MI: 445 Competency Evaluation/CCE Part I, numbers 4, 5, 6 and CCE Part II, numbers 1, 2</p> <p><b>Target:</b> Average score of &gt;= 3 (0-4 pt. scale).</p> <p><b>Timeframe:</b> Spring Semester</p> <p><b>Responsible Parties:</b> Clinical Instructors/ Program Faculty/ HS Curriculum Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> <p><b>Target Met:</b> NA</p> <p>No current data available.</p> <p>The CT student that is currently in the program is following the part-time track. That student will complete the MI 445 course in the next academic year. As proposed in the 2018-2019 action plan, this measure has been continued because it is considered beneficial to student learning and growth in the clinical environment.</p> <p>2020 (n=0)<br/>2019 = 3.81 (n=1) (09/04/2020)</p> | <p><b>Action:</b> Clinical instructors will continue to educate the students on the importance of patient preparation and safety as it relates to CT in the clinical environment. Clinical instructors will continue to guide students through the process of patient preparation while providing direct patient care in the clinical setting. The instructor will continue to use the competency evaluation forms as it proves to be beneficial to student learning and growth within the clinical environment. (09/04/2020)</p> |

**AU Outcome: MI 1.2**

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

**Outcome Status:** Active

| <i>Measures</i>  | <i>Results</i>   | <i>Actions</i>  |
|--|--|---|
| <p><b>SL: Didactic</b> - MI: 460 Competency Evaluation/CCE Part II, numbers 3, 4, 5</p> <p><b>Target:</b> Average score of &gt;= 3 (0-4 pt. scale).</p> <p><b>Timeframe:</b> Spring Semester</p> <p><b>Responsible Parties:</b> Clinical</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> <p><b>Target Met:</b> Yes</p> <p>In spring 2020, the MI 460 Competency Evaluation/CCE Part II, numbers 3, 4, 5 average score is 3.88. The spring 2019 average score was slightly higher at 3.98. Although this year's average score was lower, the average score was still significantly high when compared to the target benchmark. As proposed in the 2018-2019 action plan, this measure has been continued because it is considered beneficial to student learning and growth within the clinical environment. The students demonstrated the ability to select appropriate protocols,</p> | <p><b>Action:</b> The clinical instructors will continue to work with the students in the clinical environment. Clinical instructors, along with their preceptors, will continue to educate students on proper protocol, coil, and scan parameters selections while they provide direct</p> |

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

**AU Outcome: MI 1.2**

| <i>Measures</i>   | <i>Results</i>  | <i>Actions</i>  |
|---|---|---|
| Instructors/ Program Faculty/ HS Curriculum Committee   | coils, and scan parameters when working directly with patients in the clinical environment. The students have the opportunity to gain effective feedback on appropriate protocol and parameter selections during the evaluation process. Clinical competence was demonstrated<br><br>2020 = 3.88 (n=3)<br>2019 = 3.98 (n=1) (09/08/2020)  | patient care. The instructor will continue to use the competency evaluation forms as it proves to be beneficial to student learning and growth within the clinical environment. (09/08/2020)  |
| <b>SL: Didactic</b> - MI: 445 Competency Evaluation/CCE Part II, numbers 3, 4<br><b>Target:</b> Average score of >= 3. (0-4 pt. scale)<br><br><b>Timeframe:</b> Spring Semester<br><b>Responsible Parties:</b> Clinical Instructors/ Program Faculty/ HS Curriculum Committee | <b>Reporting Year:</b> 2019 - 2020 (Year 2)<br><b>Target Met:</b> NA<br>No current data available.<br>The CT student that is currently in the program is following the part-time track. That student will complete the MI 445 course in the next academic year. As proposed in the 2018-2019 action plan, this measure has been continued because it is considered beneficial to student learning and growth in the clinical environment.<br><br>2020 (n=0)<br>2019=3.82 (n=1) (09/08/2020) | <b>Action:</b> The clinical instructors will continue to work with the students in the clinical environment. Clinical instructors, along with their preceptors, will continue to educate students on proper protocol and scan parameter selections while they provide direct patient care. The instructor will continue to use the competency evaluation forms as it proves to be beneficial to student learning and growth within the clinical environment. (09/08/2020) |

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

**AU Outcome: MLS 1.1**

Students will apply theory and principles related to laboratory testing

**Outcome Status:** Active

| <i>Measures</i>   | <i>Results</i>   | <i>Actions</i>  |
|---|--|---|
| <b>SL: Didactic</b> - Exam scores – MLS 440: Clinical Hematology and Hemostasis | <b>Reporting Year:</b> 2019 - 2020 (Year 2)<br><b>Target Met:</b> No<br>Fall 2019 – 7 students | <b>Action:</b> A new edition of the textbook will be incorporated for Fall 2020 and new exams will be |

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

**AU Outcome: MLS 1.1**

| <i>Measures</i>   | <i>Results</i>   | <i>Actions</i>   |
|---|--|--|
| <p><b>Target:</b> 75% of students will receive an average score of &gt;= 80%<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> Program Chair/HS Curriculum Committee</p>   | <p>28.6% (2/7) earned an average score of &gt;80%.<br/>                     Overall average score = 71.2%<br/>                     Fall 2018 = 69.2%   Fall 2017 = 88.3%   Fall 2015 = 91.3%</p> <p>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, hematology cases, was incorporated into the course this year to help students review. This plan from the 2018-2019 CAP was not successful in helping students achieve the target. An optional 50 question practice final exam was offered to students, 5 out of 7 students utilized this. (07/31/2020)</p>   | <p>written. The course will continue to have 4 proctored exams. Microsoft Teams will be utilized to offer synchronous sessions with students to help aid in learning course material. (07/31/2020)</p>   |
| <p><b>SL: Didactic</b> - Clinical Microbiology Exam Scores (formerly Exam Scores – MLS 460: Clinical Microbiology)<br/> <b>Target:</b> 75% of students will receive an average score of &gt;= 80%<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> Program Chair/HS APG Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> No</p> <p>Spring 2020<br/>                     33.3% (2/6) of students earned average scores of &gt;80% on five exams.<br/>                     Overall average score = 80.5%, 200.5 out of 249 points</p> <p>Spring 2019<br/>                     100% (14/14)<br/>                     Overall average score = 88.1%</p> <p>Spring 2018<br/>                     55.5% (5/9)<br/>                     Overall average score = 81.6%</p> <p>This course helps students to apply theory and principles related to microbiology. Five exams were given in this course (three proctored, two unproctored). Together, the multiple-choice exams and the hands-on competency exam help prepare students for clinical rotations, where theory and principles of microbiology are applied. This measurement tool is the same as the previous year, but the target was changed from 100% to 75% of students in 2019, to align with the benchmarks set forth by the MLS program accreditor. This plan from the 2018-2019 CAP was not successful in helping students achieve the target. A portion of all exam questions were updated in 2020 after discovering exam questions from the textbook were available online. Overall, this cohort scored lower compared to the previous cohort.</p> | <p><b>Action:</b> This course will continue to include four exams (two proctored, 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. (07/31/2020)</p> |

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

**AU Outcome: MLS 1.1**

| <i>Measures</i> | <i>Results</i> | <i>Actions</i> |
|-----------------|----------------|----------------|
|                 | (07/31/2020)   |                |

**AU Outcome: MLS 1.2**

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

**Outcome Status:** Active

| <i>Measures</i>  | <i>Results</i>  | <i>Actions</i>   |
|--|---|--|
| <p><b>SL: Didactic</b> - Case study discussions – MLS 460: Clinical Microbiology<br/> <b>Target:</b> 75% of students will receive an average score of &gt;= 80%<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> Program Chair/HS Curriculum Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     Spring 2020<br/>                     100% (6/6) students earned average score of &gt;80% on case study assignments.<br/>                     Overall average score = 100%, out of 40 points<br/>                     Spring 2019 – 95.4% (overall average score)<br/>                     Spring 2018 – 97.2% (overall average score)</p> <p>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 2018. This measurement tool is the same as the previous two years, but the target was changed from 100% to 75% of students in 2019, to align with the benchmarks set forth by the MLS program accreditor. This plan from the 2018-2019 CAP was successful in helping students achieve the target. All students completed the assignment in 2020, and no scores of zero were assigned for missing or late work. (07/31/2020)</p> | <p><b>Action:</b> This assignment will continue to be offered within this course with no changes to delivery or format for the next academic year to help student master microorganism identification. The same target will be used.<br/>                     (07/31/2020)</p> |
| <p><b>SL: Exam/Quiz - Standardized</b> - MediaLab Exam Simulator Scores – MLS 465: Clinical Management and Review<br/> <b>Target:</b> 75% of students will achieve a CAT difficulty of 5.0</p>   | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> No<br/>                     Spring 2020 – 6 students<br/>                     16.7% (1/6) of students achieved a CAT difficulty level of 5.0 on proctored CAT exams (n=2)<br/>                     Average level of difficulty = 4.5</p>   | <p><b>Action:</b> Next academic year, we will continue to require some of the CAT attempts to be proctored and we will include additional remediation activities for students who do not meet benchmarks for</p>   |

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

**AU Outcome: MLS 1.2**

| <i>Measures</i>   | <i>Results</i>   | <i>Actions</i>  |
|---|--|---|
| <p><b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> Program Chair/HS APG Committee</p> | <p>83.3% (5/6) of students achieved a CAT difficulty level of 5.0 on non-proctored CAT exams (n=3)<br/>                     Average level of difficulty = 5.8</p> <p>2018 – 90%; 5.3<br/>                     2019 – 83.3%; 5.9</p> <p>Exam Simulator (ES) is a preparatory resource we purchase for students to help them prepare for the BOC exam. Students took 5 CAT exams (3 non-proctored; 2 proctored) during the last 8 weeks of the semester. Performance on the proctored CATs correlated with performance on the program final. Due to COVID-19, we were unable to perform additional face-to-face remediation activities indicated in the 2018-2019 CAP action plan for this measurement tool, and this led to students not being successful on this measure. (07/31/2020)</p> | <p>each CAT attempt. The curriculum revision that goes into effect for the 2020-2021 academic year includes a separate review course, so we will continue to monitor this item. An additional proctored CAT exam will be included in the course. (07/31/2020)</p> |

**AU Outcome: MLS 2.2**

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

**Outcome Status:** Active

| <i>Measures</i>  | <i>Results</i>   | <i>Actions</i>  |
|--|--|---|
| <p><b>SL: Clinical</b> - MLS 440: Clinical Hematology and Hemostasis - Case Simulator Assignments<br/> <b>Target:</b> 75% of students will complete all assignments<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> Program Chair/HS Curriculum Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     Fall 2019 – 7 students<br/>                     100% (7/7) of students completed all assignments<br/>                     New item this year.</p> <p>A new resource was used to offer Hematology case studies and differential practice. Students were allowed to repeat work on cases and appeared to use this resource to help support their learning. Points were awarded upon completion of the assigned cases and some cases were completed together in lab as a group. Evidence shows students used this resource without any technical issues. (07/31/2020)</p> | <p><b>Action:</b> Continue to use this resource to support Hematology and differential topics. Create a new assignment to grades students' accuracy and correctness of cases, not just completion points. Create a new CAP measurement tool with a target of 75% of students will receive a score of &gt;80% to assess during the 2020-2021 academic year. (07/31/2020)</p> |
| <p><b>SL: Didactic</b> - MLS 465: Clinical Management and Review - Final</p>   | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> No</p>  | <p><b>Action:</b> At least 50% of the final exam will be updated for next</p>   |

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

**AU Outcome: MLS 2.2**

| <i>Measures</i>   | <i>Results</i>   | <i>Actions</i>  |
|---|--|---|
| <p>Exam<br/> <b>Target:</b> 75% of students will receive an average score of &gt;=80%<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> Program Chair/HS Faculty Org Committee</p> | <p>Spring 2020 – 6 students<br/>                     0% of students (0/6) received a score of &gt;80%<br/>                     Overall average score = 51.2/100 points; 51.2%<br/>                     New item this year.<br/>                     The final exam was rewritten for this year due to finding previous versions of the exam online. This cohort of students struggled with exams throughout the entire program. Additionally, COVID-19 occurred during the final semester of this cohort’s program, and likely had an effect on the scores. (07/31/2020)</p> | <p>academic year. This exam will be offered within a new course for the 2020-2021 academic year. We will consider lowering this target but will evaluate the next cohort prior to making that decision.<br/>                     (07/31/2020)</p> |

**AU Outcome: MLS 3.1**

Students will maintain competency in the laboratory field of study

**Outcome Status:** Active

| <i>Measures</i>  | <i>Results</i>  | <i>Actions</i>  |
|--|---|---|
| <p><b>SL: Didactic</b> - Annotated Bibliographies – MLS 426: Evidence-Based Laboratory Medicine<br/> <b>Target:</b> 75% of students will receive an average score of &gt;80%<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> Program Chair/HS APG Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     Fall 2019 – 6 students<br/>                     100% (6/6) earned an average score of &gt;85%.<br/>                     Overall average score = 91.7%<br/>                     2018-2019 = 91.1% (overall average) – target not met<br/>                     2017-2018 = 88.4% (overall average)<br/>                     2016-2017 = 96.2% (overall average)<br/>                     2015-2016 = 90.9% (overall average)<br/>                     The action plan from last academic year stated additional explanation about the assignment requirements would be included for this cycle. Sections titled What I want to see were added</p> | <p><b>Action:</b> This assignment will be included the next time this course is taught. An additional resource will be provided to students to help support their preparation of the final project submission. Subsequent sections will be assessed on this measurement tool to ensure the target continues to be met. (07/31/2020)</p> |

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

**AU Outcome: MLS 3.1**

| <i>Measures</i> | <i>Results</i>   | <i>Actions</i> |
|-----------------|--|----------------|
|                 | to the outline for the final project to clarify what needed to be included in each section of the final project submission. The What I want to see sections complemented the expectations for each section and related back to material taught earlier in the course. (07/31/2020) |                |

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

**AU Outcome: PH 1.1**

Student will be able to identify determinants of health and illness

**Outcome Status:** Active

| <i>Measures</i>  | <i>Results</i>   | <i>Actions</i>  |
|--|--|---|
| <p><b>SL: Exam/Quiz - Teacher-made - PH:</b> 430 Final exam<br/> <b>Target:</b> Average score of &gt;80%<br/> <b>Timeframe:</b> Fall Semester<br/> <b>Responsible Parties:</b> Program faculty / HS APG committee</p>  | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> No<br/>                     In Fall 2019, two students took the course and earned an average of 79.3% on the final exam. In Fall 2018, seven students took the course and received an average of 81.3% on the final exam. This was the second year for a new curriculum and while results were worse, this may be attributable to a smaller cohort. Last year's action plan of putting more emphasis on biostatistics does not seem to have been effective. (02/04/2020)</p>  | <p><b>Action:</b> Based on these results, more emphasis will be put on using Excel and online calculators rather than hand-computing math problems. Additionally, the program director who currently teaches this course will consider bringing in an adjunct or other expert help for this course in Fall 2020. (02/04/2020)</p>       |
| <p><b>SL: Didactic -</b> Community needs assessment as part of mid-term project.<br/> <b>Target:</b> Average score of &gt;80%<br/> <b>Timeframe:</b> Spring semester<br/> <b>Responsible Parties:</b> Program faculty / Health Science (HS) Curriculum committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     In Spring 2020, students (n=3) scored an average of 91% with all students scoring above the 80% student. In Spring 2019, 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.<br/><br/>                     Per the 2018-2019 action plan, students were required to gather reputable health data sources in an assignment prior to the midterm project to ensure that they had good</p> | <p><b>Action:</b> This measurement will remain in the assessment plan since it is valuable for the students to find data relevant to their community and then make an action plan based on the information they find. By focusing on relevant data sources prior to the assignment it improved the paper by honing in on community-</p> |

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

**AU Outcome: PH 1.1**

| <i>Measures</i> | <i>Results</i>  | <i>Actions</i>  |
|-----------------|---|---|
|                 | information to write their community assessments. A grading rubric was made available to students when they started the project to inform them of how the project would be evaluated. Students have consistently scored > 80% on the assignment, suggesting the action plan is effective in facilitating target achievement. (05/18/2020) | level data. However, the assignment may move to a new course due to a plan to bring on an adjunct to teach this course in Spring 2021. (09/15/2020) |

**AU Outcome: PH 1.2**

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

**Outcome Status:** Active

| <i>Measures</i>  | <i>Results</i>  | <i>Actions</i>  |
|--|---|---|
| <p><b>SL: Didactic</b> - Community needs assessment as part of mid-term project.</p> <p><b>Target:</b> Successful completion of report Average score of &gt;80%</p> <p><b>Timeframe:</b> Spring semester</p> <p><b>Responsible Parties:</b> Program faculty / Health Science (HS) Curriculum committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> <p><b>Target Met:</b> Yes</p> <p>In Spring 2020, students (n=3) scored an average of 91% with all students scoring above the 80% student. In Spring 2019, 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.</p> <p>In line with last year's action plan, students gathered 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 was made available to students when they start the project. (09/15/2020)</p> | <p><b>Action:</b> This measurement will remain in the assessment plan since it is valuable for the students to find data relevant to their community and then make an action plan based on the information they find. Students have found the use of a rubric and having their sources reviewed prior to the assignment improves the process. However, the assignment may move to a new course due to a plan to bring on an adjunct to teach this course in Spring 2021. (09/15/2020)</p> |

**AU Outcome: PH 2.1**

Student will be able to gather information on policy

**Outcome Status:** Active

| <i>Measures</i> | <i>Results</i> | <i>Actions</i> |
|-----------------|----------------|----------------|
|                 |                |                |

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

**AU Outcome: PH 2.1**

| <i>Measures</i>   | <i>Results</i>   | <i>Actions</i>  |
|---|--|---|
| <p><b>SL: Exam/Quiz - Teacher-made - PH 495 Final Exam</b><br/> <b>Target:</b> Average score &gt;= 80%<br/> <b>Timeframe:</b> Summer semester<br/> <b>Responsible Parties:</b> PH 495 Course Instructor/HS Curriculum Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     In Summer 2019, 12 students took the final exam and received an average of 83.41%. This is the first time the course was offered. (09/03/2019)</p> | <p><b>Action:</b> Next year students will be allowed to take the exam twice. While they will not have the correct answers the second time, they will be able to take notes over items they are uncertain about and reattempt the exam. (09/03/2019)</p> |

**AU Outcome: PH 2.2**

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

**Outcome Status:** Active

| <i>Measures</i>   | <i>Results</i>   | <i>Actions</i>  |
|---|--|---|
| <p><b>SL: Exam/Quiz - Teacher-made - PH 480 Final Exam. (Public Health Research and Evaluation)</b><br/> <b>Target:</b> Average score &gt; 80%<br/> <b>Timeframe:</b> Spring semester<br/> <b>Responsible Parties:</b> Program faculty / Health Science (HS) Curriculum committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     In Spring 2020, eight students took the final exam and scored an average of 83.3%. 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%. While the standard was met in Spring 2020, this was with the advantage of being able to take the test twice, per the 2018-2019 action plan. The standard was only met this time since students were offered a second chance to take the final exam. The four students who opted to do so raised their scores an average of 7.25 points, or 10%. (05/18/2020)</p> | <p><b>Action:</b> It is planned that a new instructor will be brought on to teach the course in Spring 2021, resulting in all new course materials including the exam. (09/15/2020)</p> |

**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

| <i>Measures</i>   | <i>Results</i>   | <i>Actions</i>   |
|---|--|--|
| <p><b>SL: Exam/Quiz - Teacher-made - PH: 410 Final exam</b><br/> <b>Target:</b> Average score of &gt;80%<br/> <b>Timeframe:</b> Fall semester</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> No<br/>                     In Fall 2019, seven students earned an average of 74.4% on the final exam. In Fall 2018, eleven students received an average of 82.6% on the final exam. There is a significant drop in</p> | <p><b>Action:</b> Despite test questions being reviewed for fairness as stated in the 2018-2019, scores decreased rather than increased.</p> |

College Goal 1 - Allen College is committed to preparing outstanding healthcare practitioners who are committed to lifelong learning.

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

**AU Outcome: PH 3.2**

| <i>Measures</i>  | <i>Results</i>  | <i>Actions</i>   |
|--|---|--|
| <p><b>Responsible Parties:</b> Program faculty / HS Faculty Org. committee</p> | <p>scores, likely due to a change in curriculum including a more difficult textbook. (02/04/2020)</p> | <p>The plan to allow students to take the exam twice was paused in hope that the question review process would be adequate to raise scores above the target without making the course too easy. Allowing a retake will be considered for the 2020-2021 academic year. (02/04/2020)</p> |

**AU Outcome: PH 4.1**

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

**Outcome Status:** Active

| <i>Measures</i>   | <i>Results</i>  | <i>Actions</i>   |
|---|---|--|
| <p><b>SL: Exam/Quiz - Teacher-made - PH:</b> 400 Identify prominent events in the history of public health Midterm Exam and assignments<br/><b>Target:</b> Average score of &gt;80%<br/><b>Timeframe:</b> Fall semester<br/><b>Responsible Parties:</b> Program faculty / HS Curriculum committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/><b>Target Met:</b> No<br/>In Fall 2019, three students earned an average of 77.1% on the midterm exam. In Fall 2018, seven students earned an average of 91.8% on the midterm exam.<br/><br/>Per the 2018-2019 action plan, the 2019-2020 results for this measure represent a third year of data to guide future decisions about this measure. However, this action plan could not reasonably be expected to facilitate student success on the assignment. (02/04/2020)</p> | <p><b>Action:</b> In Fall 2020, students will be allowed to take the final exam twice to study concepts they may have otherwise missed during test preparation. (02/04/2020)</p> |
| <p><b>SL: Exam/Quiz - Teacher-made - PH:</b> 430 Final exam<br/><b>Target:</b> Average score of &gt;80%<br/><b>Timeframe:</b> Fall semester<br/><b>Responsible Parties:</b> Program faculty / HS Faculty Org. committee</p>   | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/><b>Target Met:</b> No<br/>In Fall 2019, two students took the course and earned an average of 79.3% on the final exam. In Fall 2018, seven students took the course and received an average of 81.3% on the final exam. (02/04/2020)</p>   | <p><b>Action:</b> Based on these results, more emphasis will be put on using Excel and online calculators rather than hand-computing math problems. (02/04/2020)</p>             |

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

**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

| <i>Measures</i>   | <i>Results</i>   | <i>Actions</i>   |
|---|--|--|
| <p><b>SL: Didactic - NU 251 &amp; NU 252</b><br/>Nursing Leadership Reflection<br/><b>Target:</b> 100% of students achieve at least 73% on nursing leadership reflection paper.<br/><b>Timeframe:</b> Annually<br/><b>Responsible Parties:</b> BSN Curriculum Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/><b>Target Met:</b> No<br/>This is a new measure for 2019-2020. NU251- Fall 2019, 81% (26/32) and Spring 2020, 87% (27/31) of the students achieved at least 75% on the Nursing Leadership Reflection paper. NU252-Summer 2019, 90% (36/40) and Fall, 2019, 95% (36/38) of the students achieved at least 75% on the Nursing Leadership Reflection paper. (11/23/2020)<br/><b>Related Documents:</b><br/><a href="#">Outcome 1 NU 251 &amp; 252 Nursing Leadership Reflection.docx</a></p> | <p><b>Action:</b> Faculty will focus on clarifying written assignment criteria in class. (11/23/2020)</p>  |
| <p><b>SL: Didactic - NU 460 Change Proposal Team Assignment</b><br/><b>Target:</b> 100% of students achieve at least 73% on change proposal team assignment.<br/><br/><b>Timeframe:</b> Annually<br/><br/><b>Responsible Parties:</b> BSN Curriculum Committee</p>          | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/><b>Target Met:</b> Yes<br/>Summer 2020, H: 100% (5/5), A: (20/20), Fall 2019 (49/49), Spring 2020 (48/48) . 100% of students achieved a 100% in all cohorts. The assignment was changed to a team assignment and worksheet as indicated on the course plan from 2019. (11/23/2020)<br/><b>Related Documents:</b><br/><a href="#">Outcome 1 NU 460 Change Proposal Worksheet Rubric.docx</a></p>   | <p><b>Action:</b> In order to continue to meet this outcome, faculty will talk about this assignment the first day of class. After students complete the change module, faculty will review in detail the worksheet and give them specific examples to assist in their understanding of these concepts. (11/23/2020)</p> |
| <p><b>SL: Didactic - RN NU 462 Change Proposal Paper</b><br/><b>Target:</b> 100% of students achieve at least 73% on change proposal paper.<br/><b>Timeframe:</b> Annually<br/><b>Responsible Parties:</b> BSN Curriculum Committee</p>                                     | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/><b>Target Met:</b> Yes<br/>Fall 2019 100 % of students that finished the course achieved at least 73% on the change proposal paper. We will be changing this assignment to reduce the redundancy in the RN-BSN program related to Quality Improvement assignments. (11/23/2020)<br/><b>Related Documents:</b><br/><a href="#">Outcome 1 NU 462RN Change Proposal Rubric (1)(3)(1).docx</a></p>  | <p><b>Action:</b> This paper will be changed to eliminate redundant content in the RN-BSN program. The Cause and Effect - Root Cause Analysis assignment will be used for this measure. The target will be that 100% of students achieve at least 80% on this assignment. (11/23/2020)</p>                               |
| <p><b>AD: Survey - Alumni Survey Item:</b><br/>How well BSN education prepared</p>  | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/><b>Target Met:</b> Yes</p>  | <p><b>Action:</b> Survey 2019-2020</p>   |

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

**AU Outcome: BSN 1.0 Lead**

| <i>Measures</i>   | <i>Results</i>  | <i>Actions</i>  |
|---|---|---|
| <p>you to provide basic organizational and systems leadership (1= very poorly, 2 = poorly, 3 = well, 4 = very well).</p> <p><b>Target:</b> 75% of respondents will report that their BSN education prepared them well or very well to provide basic organizational and systems leadership.</p> <p><b>Timeframe:</b> Annually</p> <p><b>Responsible Parties:</b> CIRE, Evaluation &amp; Study Committee</p>  | <p>100% of 2018-2019 alumni survey respondents (n = 24) reported their BSN Education prepared them well (37.5%) or very well (62.5%) 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.</p> <p>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.</p> <p>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.</p> <p>Previous action plan to survey 2018-2019 alumni during 2020, compare responses, and monitor for favorable and unfavorable trends was appropriate. (11/16/2020)</p> <p><b>Related Documents:</b><br/> <a href="#">Report 2018-2019 BSN Alumni Survey.pdf</a></p>  | <p>graduates during 2021 and evaluate results for continuation of positive trend in alumni responses. (11/16/2020)</p>  |
| <p><b>AD: Survey</b> - 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).</p> <p><b>Target:</b> 75% of respondents will report that the BSN graduate provides basic organizational and systems leadership well or very well.</p> <p><b>Timeframe:</b> Annually</p> <p><b>Responsible Parties:</b> CIRE, Evaluation &amp; Study Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> <p><b>Target Met:</b> Yes</p> <p>&gt;80% of employers of 2018-2019 alumni (n = 12) reported BSN graduate demonstrated the outcome well (50%) or very well (33.33% of the time). Results are consistent with previous employer surveys. The target of 75% favorable responses (well or very well) has been consistently met or exceeded.</p> <p>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.</p> <p>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%])</p> <p>Previous action plan to survey CIRE employers of 2018-2019 graduates during 2020, compare responses, and monitor for favorable and unfavorable trends was appropriate. (11/16/2020)</p> <p><b>Related Documents:</b><br/> <a href="#">Report Employers of 2018-2019 BSN Alumni.pdf</a></p> | <p><b>Action:</b> Survey employers of 2019-2020 graduates during 2021 and evaluate results for continuation of positive trend in alumni responses. (11/16/2020)</p> |
| <p><b>SL: Didactic</b> - NU 460 Change Proposal Paper</p> <p><b>Target:</b> 100% of students will achieve at least 75% on change</p>  | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> <p><b>Target Met:</b> Yes</p> <p>Summer 2020, H: 100% (5/5), A: (20/20), Fall 2019 (49/49), Spring 2020 (48/48) . 100% of students achieved a 100% in all cohorts. The assignment was changed to a team assignment</p>   | <p><b>Action:</b> In order to continue to meet this outcome, faculty will talk about this assignment the first day</p>  |

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

**AU Outcome: BSN 1.0 Lead**

| <i>Measures</i>   | <i>Results</i>   | <i>Actions</i>  |
|---|--|---|
| proposal paper.<br><b>Timeframe:</b> Year 3<br><b>Responsible Parties:</b> BSN Curriculum Committee | and worksheet as indicated on the course plan from 2019. (11/14/2020)<br><b>Related Documents:</b><br><a href="#">Outcome 1 NU 460 Change Proposal Rubric.docx</a> | of class. After students complete the change module, faculty will review in detail the worksheet and give them specific examples to assist in their understanding of these concepts. (11/14/2020) |

**AU Outcome: BSN 2.0 EBP**

Integrate evidence-based practice in nursing care.

**Outcome Status:** Active

**Start Date:** 08/01/2014

| <i>Measures</i>   | <i>Results</i>  | <i>Actions</i>   |
|---|---|--|
| <b>SL: Didactic</b> - RN-NU 380 Research Analysis Paper<br><b>Target:</b> 100% of students will achieve at least 73% on the Research Analysis Paper.<br><b>Timeframe:</b> Annually (starting with 2019-2020 reporting year; year 4 prior to 2019-2020).<br><b>Responsible Parties:</b> BSN Curriculum Committee | <b>Reporting Year:</b> 2019 - 2020 (Year 2)<br><b>Target Met:</b> No<br>Fall 2019, 4/5 of students (80%) achieved at least 73% on the Research Analysis Paper. Although the target was not met this academic year, it has been met in previous years. Students used a Research Analysis Worksheet to assist in preparation for writing the paper. The student who did not achieve at least 73% on the paper received a 8/10 on the worksheet. (11/23/2020)<br><b>Related Documents:</b><br><a href="#">Outcome 2 NU 380 Rubric Research Analysis Paper.docx</a> | <b>Action:</b> The Research Analysis Worksheet was eliminated from the assignment preparation. To assist in students achieving this outcome, a folder with APA resources was created and specific announcements were made to the class regarding importance and use of citations in text. Students will also be assigned articles to use for the paper which may assist in their understanding of the content. To better evaluate this outcome, this target will be changed to the Evidence Appraisal assignment. The measure will be that 100% of students will achieve at least 73% on the Evidence Appraisal assignment. (11/23/2020) |

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

**AU Outcome: BSN 2.0 EBP**

| <i>Measures</i>  | <i>Results</i>   | <i>Actions</i>   |
|--|--|--|
| <p><b>SL: Didactic</b> - NU 380 Research Analysis Worksheet<br/> <b>Target:</b> 100% of students achieve at least 73% on research analysis worksheet.<br/> <b>Timeframe:</b> Annually</p> <p><b>Responsible Parties:</b> BSN Curriculum Committee</p>  | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     This is a new measure for 2019-2020. Fall 2019, 100% 45/45, Spring 2020 100% 55/55 (11/23/2020)<br/> <b>Related Documents:</b><br/> <a href="#">Outcome 2 NU 380 Research Analysis Worksheet.docx</a></p>  | <p><b>Action:</b> In order for students to continue to meet this outcome, faculty will review the worksheet and provide student feedback on this submission before the students revise and submit the information in a formal paper. To better evaluate this outcome, this target will be changed to the Evidence Appraisal assignment. The measure will be that 100% of students will achieve at least 73% on the Evidence Appraisal assignment. (11/23/2020)</p> |
| <p><b>AD: Survey</b> - 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).<br/> <b>Target:</b> 75% of respondents will report that their BSN education prepared them well or very well to integrate evidence-based practice in nursing care.<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> CIRE, Evaluation &amp; Study Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     100% of 2018-2019 alumni survey respondents (n = 24) reported their BSN education prepared them well (45.83%) or very well (54.17%) 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.<br/>                     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.<br/>                     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.<br/>                     Previous action plan to survey 2018-2019 alumni during 2020, compare responses, and monitor for favorable and unfavorable trends was appropriate. (11/16/2020)<br/> <b>Related Documents:</b><br/> <a href="#">Report 2018-2019 BSN Alumni Survey.pdf</a></p> | <p><b>Action:</b> Survey 2019-2020 graduates during 2021 and evaluate results for continuation of positive trend in alumni responses. (11/16/2020)</p>   |
| <p><b>AD: Survey</b> - Employer Survey item: How well BSN graduate integrates evidence-based practice in nursing care (1= very poorly, 2 = poorly, 3 =</p>   | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     100% of employers of 2018-2019 alumni (n = 12) reported BSN graduate demonstrated the outcome well (50%) or very well (50%).</p>   | <p><b>Action:</b> Survey employers of 2019-2020 graduates during 2021 and evaluate results for continuation of positive trend in alumni responses.</p>   |

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

**AU Outcome: BSN 2.0 EBP**

| <i>Measures</i>   | <i>Results</i>  | <i>Actions</i>      |
|---|---|---------------------|
| <p>well, 4 = very well, NA = not applicable, e.g., does not perform outcome, or outcome not applicable to current role).</p> <p><b>Target:</b> 75% of respondents will report that BSN graduate integrates evidence-based practice in nursing care well or very well.</p> <p><b>Timeframe:</b> Annually</p> <p><b>Responsible Parties:</b> CIRE, Evaluation &amp; Study Committee</p> | <p>Results are consistent with previous employer surveys. The target of 75% favorable responses (well or very well) has been consistently met or exceeded.</p> <p>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.</p> <p>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%)</p> <p>Previous action plan to survey employers of 2018-2019 graduates during 2020, compare responses, and monitor for favorable and unfavorable trends was appropriate. (11/16/2020)</p> <p><b>Related Documents:</b><br/> <a href="#">Report Employers of 2018-2019 BSN Alumni.pdf</a></p> | <p>(11/16/2020)</p> |

**AU Outcome: BSN 3.0 Informatics**

Manage healthcare data, information, knowledge, and technology.

**Outcome Status:** Active

**Start Date:** 08/01/2015

| <i>Measures</i>  | <i>Results</i>  | <i>Actions</i>   |
|--|---|--|
| <p><b>SL: Clinical evaluation tool - NU335</b><br/>                     Clinical Evaluation tool</p> <p><b>Target:</b> 100% of students will achieve rating of "S" in Informatics Competencies on the Clinical Evaluation tool.</p> <p><b>Timeframe:</b> Annually (as of 2019-2020 reporting year; assessed in Year 1 prior to 2019-2020 reporting year)</p> <p><b>Responsible Parties:</b> BSN Curriculum Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> <p><b>Target Met:</b> Yes</p> <p>Fall 2019: 100% (33/33)</p> <p>Spring 2020: 100% (31/31)</p> <p>Focusing on the Spring 2020 semester, the clinical experience was terminated at mid-term due to COVID-19. Each student completed EPIC/Omnicell training, but practice of both of these data recording systems was decreased due to the unprecedented time. (11/14/2020)</p> <p><b>Related Documents:</b><br/> <a href="#">Outcome 3 NU 335 Level I and II Clinical Evaluation Tool.docx</a></p> | <p><b>Action:</b> In order for students to continue to meet this outcome, students will be assigned to complete EPIC and Omnicell modules in NetLearning in preparation for their clinical experiences as well as review this information in a "live" format. Additionally, EHR Tutor will be used in the laboratory and simulation settings for additional practice using informatics. (11/14/2020)</p> |
| <p><b>SL: Didactic - RN-NU447B</b></p>   | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p>  | <p><b>Action:</b> In order for students to</p>   |

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

**AU Outcome: BSN 3.0 Informatics**

| <i>Measures</i>  | <i>Results</i>   | <i>Actions</i>   |
|--|--|--|
| <p>informatics competencies paper<br/> <b>Target:</b> 100% of students will achieve at least 73% on informatics competencies paper<br/> <b>Timeframe:</b> Annually (starting 2019-2020; assessed Year 4 prior to 2019-2020)<br/> <b>Responsible Parties:</b> BSN Curriculum Committee</p>  | <p><b>Target Met:</b> Yes<br/>                     In Summer 2019: 28/28 (100%) of students completed this assignment with a 73% or greater. Will continue to use this assignment as an outcome marker as it reflects each piece of the BSN program outcome #3. (11/14/2020)<br/> <b>Related Documents:</b><br/> <a href="#">Outcome 3 NU 447B Quality Measures and Informatics Competencies Assignment.docx</a></p>   | <p>continue to meet this outcome, faculty will use a rubric to guide the students in examining the competencies and completing this assignment. Faculty will provide the rubric to students well in advance of the assignment deadline. (11/14/2020)</p> |
| <p><b>SL: Didactic - NU 460 ATI</b><br/>                     Informatics and Technology Module<br/> <b>Target:</b> 100% of students will achieve at least 75% on the ATI informatics and technology module.<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> BSN Curriculum Committee</p>  | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     This is a new measure for 2019-2020. SU 19A, 100% 20/20, SU 19AH 100% 5/5, FA19 100% 50/50, SP20 100% 48/48 (11/23/2020)</p>   | <p><b>Action:</b> In order for students to continue to meet this outcome, faculty will assign these modules as part of the course and monitor for completion, providing adequate time for completion during the semester. (11/23/2020)</p>               |
| <p><b>AD: Survey - Alumni Survey Item:</b><br/>                     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).<br/> <b>Target:</b> 75% of respondents will report that their BSN education prepared them well or very well to manage healthcare data, information, knowledge, and technology.<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> CIRE, Evaluation &amp; Study Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     100% of 2018-2019 alumni survey respondents (n = 24) reported their BSN education prepared them well (37.5%) or very well (62.5%) 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.<br/>                     &gt;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.<br/>                     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.<br/>                     Previous action plan to survey 2018-2019 alumni during 2020, compare responses, and monitor for favorable and unfavorable trends was appropriate. (11/16/2020)<br/> <b>Related Documents:</b><br/> <a href="#">Report 2018-2019 BSN Alumni Survey.pdf</a></p> | <p><b>Action:</b> Survey 2019-2020 graduates during 2021 and evaluate results for continuation of positive trend in alumni responses. (11/16/2020)</p>   |
| <p><b>AD: Survey - Employer Survey Item:</b><br/>                     How well BSN graduate manages</p>  | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p>   | <p><b>Action:</b> Survey employers of 2019-</p>  |

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

**AU Outcome: BSN 3.0 Informatics**

| <i>Measures</i>   | <i>Results</i>   | <i>Actions</i>  |
|---|--|---|
| <p>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).</p> <p><b>Target:</b> 75% of respondents will report that BSN graduate manages healthcare data, information, knowledge, and technology well or very well.</p> <p><b>Timeframe:</b> Annually</p> <p><b>Responsible Parties:</b> CIRE, Evaluation &amp; Study Committee</p> | <p><b>Target Met:</b> Yes</p> <p>100% of employers of 2018-2019 alumni (n = 12) reported BSN graduate demonstrated the outcome well (58.33%) or very well (41.67%) of the time.</p> <p>Results are consistent with previous employer surveys. The target of 75% favorable responses (well or very well) has been consistently met or exceeded.</p> <p>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.</p> <p>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%).</p> <p>Previous action plan to survey employers of 2018-2019 graduates during 2020, compare responses, and monitor for favorable and unfavorable trends was appropriate. (11/16/2020)</p> <p><b>Related Documents:</b></p> <p><a href="#">Report Employers of 2018-2019 BSN Alumni.pdf</a></p> | <p>2020 graduates during 2021 and evaluate results for continuation of positive trend in alumni responses. (11/16/2020)</p> |

**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

| <i>Measures</i>   | <i>Results</i>  | <i>Actions</i>  |
|---|---|---|
| <p><b>SL: Didactic</b> - NU 251 &amp; NU 252 Health Care Policy and Finance Quiz</p> <p><b>Target:</b> 100% of students will achieve at least 75% on the health care policy and finance quiz.</p> <p><b>Timeframe:</b> Annually</p> <p><b>Responsible Parties:</b> BSN Curriculum Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> <p><b>Target Met:</b> No</p> <p>This is a new measure for 2019-2020. In NU251 -Fall, 2019 81% (26/32) and Spring, 2020 84% (26/31) of the students achieved at least 75% on the Health Care Policy and finance quiz. In NU252- Summer, 2019 83% (33/40) and Fall, 2019 97% (37/38) achieved at least 75% on the Health Care Policy and Finance quiz. (11/23/2020)</p> <p><b>Related Documents:</b></p> <p><a href="#">Outcome 4 NU251 &amp; 252. Health Care Finance assignment.docx</a></p> | <p><b>Action:</b> In order for students to meet this outcome in the future, faculty will develop a study guide/worksheet to complete in class in preparation to take the quiz. (11/23/2020)</p> |
| <p><b>SL: Didactic</b> - NU 415 &amp; NU 425 Health Care Issues Presentation</p>  | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> <p><b>Target Met:</b> Yes</p>  | <p><b>Action:</b> Will reevaluate the</p>   |

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

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

| <i>Measures</i>   | <i>Results</i>  | <i>Actions</i>  |
|---|---|---|
| <p><b>Target:</b> 100% of students will achieve at least 75% on the Health Care Issues Presentation<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> BSN Curriculum Committee</p>   | <p>This is a new measure for 2019-2020. For NU 415: In Fall 2019, 100% (49/49) of the students and in the Spring of 2020, 100% (24/24) of the students achieved at least 75% on the Health Care Issues Assignment. For NU 425: 425A SU19- 27/27, 425A SP20- 29/29, and 425AH SP20- 8/8.<br/>                     (11/23/2020)<br/> <b>Related Documents:</b><br/> <a href="#">Outcome 4 NU415 Health Issues Assignment.docx</a><br/> <a href="#">Outcome 4 NU 425 Infographic Presentation Directions.docx</a></p>  | <p>assignment to establish the effectiveness of the project. Will continue review the instructions of the assignment and the Panopto instructions to ensure they are clear and concise. Will continue to remind students of the due dates for the project. (11/23/2020)</p> |
| <p><b>SL: Didactic - RN-NU 421 Health Care Delivery and Finance Paper</b><br/> <b>Target:</b> 100% of the students will achieve at least 73% on the NU 421 Health Care Delivery and Finance Paper<br/> <b>Timeframe:</b> Annual<br/> <b>Responsible Parties:</b> BSN Curriculum Committee</p>   | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     In the Spring 2020, 100% (7/7) of the students achieved at least 75% on the Healthcare Delivery and Finance Paper. Reviewed the assignment details and questions related to the paper. Continued to give detailed instructions about the assignment and the due dates. Encouraged students to email instructor with any questions. (11/14/2020)<br/> <b>Related Documents:</b><br/> <a href="#">Outcome 4 RN NU 421 Health Care Delivery and Finance Paper.pdf</a></p>  | <p><b>Action:</b> 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. Continue to send students reminders of due dates. (11/14/2020)</p>        |
| <p><b>AD: Survey - Alumni Survey Item:</b> 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).<br/> <b>Target:</b> 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.</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     &gt;95% of 2018-2019 alumni survey respondents (n = 24) reported their BSN education prepared them well (45/83%) or very well (50.0%) 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.<br/>                     &gt;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.<br/>                     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.<br/>                     Previous action plan to survey 2018-2019 alumni during 2020, compare responses, and monitor for favorable and unfavorable trends was appropriate. (11/16/2020)<br/> <b>Related Documents:</b><br/> <a href="#">Report 2018-2019 BSN Alumni Survey.pdf</a></p> | <p><b>Action:</b> Survey 2019-2020 graduates during 2021 and evaluate results for continuation of positive trend in alumni responses. (11/16/2020)</p>  |

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

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

| <i>Measures</i>   | <i>Results</i>   | <i>Actions</i>  |
|---|--|---|
| <p><b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> CIRE, Evaluation &amp; Study Committee</p>   |  |   |
| <p><b>AD: Survey</b> - 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).<br/> <b>Target:</b> 75% of respondents will report that BSN graduate demonstrates understanding of healthcare policy, finance, and regulatory environments well or very well.<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> CIRE, Evaluation &amp; Study Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     &gt;80% of employers of 2018-2019 alumni (n = 12) reported BSN graduate demonstrated the outcome well (50%) or very well (33.33%).<br/>                     Results are consistent with previous employer surveys. The target of 75% favorable responses (some or most of the time) has been consistently met or exceeded.<br/>                     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.<br/>                     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%).<br/>                     Previous action plan to survey employers of 2018-2019 graduates during 2020, compare responses, and monitor for favorable and unfavorable trends was appropriate. (11/16/2020)<br/> <b>Related Documents:</b><br/> <a href="#">Report Employers of 2018-2019 BSN Alumni.pdf</a></p> | <p><b>Action:</b> Survey employers of 2019-2020 graduates during 2021 and evaluate results for continuation of positive trend in alumni responses. (11/16/2020)</p> |

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

Facilitate inter-professional communication and collaboration in healthcare teams.

**Outcome Status:** Active

**Start Date:** 08/01/2014

| <i>Measures</i>  | <i>Results</i>  | <i>Actions</i>  |
|--|---|---|
| <p><b>AD: Report - Internal</b> - BSN Simulation Summary Report<br/> <b>Target:</b> 100% of students completing simulation will achieve at least 73% on the simulation rubric.<br/> <b>Timeframe:</b> Annual</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     100% of students completing simulation during the 2019-2020 academic year achieved at least 73% on the simulation rubric. (11/23/2020)<br/> <b>Related Documents:</b></p> | <p><b>Action:</b> In order to continue to meet this target, students will be provided an orientation to the simulation lab before completing their simulation experience and will</p> |

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

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

| <i>Measures</i>  | <i>Results</i>  | <i>Actions</i>   |
|--|---|--|
| <p><b>Responsible Parties:</b> BSN curriculum Committee</p>  | <p><a href="#">BSN CAP Simulation Summary 2019-2020.docx</a></p>  | <p>be provided with adequate resources to prepare before the simulation so that they may complete the simulation successfully. (11/23/2020)</p>  |
| <p><b>SL: Didactic - RN-NU 497 EBP Summary</b><br/> <b>Target:</b> 100% of students will achieve at least 76% on EBP Summary.<br/> <b>Timeframe:</b> Annually (starting 2019-2020; assessed Year 4 prior to 2019-2020)<br/> <b>Responsible Parties:</b> BSN Curriculum Committee</p>   | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     In Spring 2020 75% (3/4) of the students achieved at least 75% on the EBP summary project. Use of sequential assignments that are directly related to each step of the IOWA Model with instructor feedback allowed students to be successful with each step of the EBP model. This led to them being successful in completing the required EBP summary paper. All assignments had a rubric developed during the 2019-2020 academic year to clearly indicate to the student the required components and grading criteria. One student fell below the target achievement and directly relate their work had been affected by the COVID-19 pandemic and was granted a grade of "credit" for the course. (11/14/2020)<br/> <b>Related Documents:</b><br/> <a href="#">Outcome 5 RN NU 497 EBP Project Summary.doc</a></p>   | <p><b>Action:</b> Will continue to use assignments in each module that are directly related to each step of the IOWA Model. Instructor feedback from each assignment will allow the students to revise and or correct any errors or missteps before they complete the EBP project and write the summary for instructor grading. Additional video recordings will be developed specific to the EBP summary to offer more detailed information and instructor expectations. (11/14/2020)</p> |
| <p><b>AD: Survey - Alumni Survey Item:</b> 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).<br/> <b>Target:</b> 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.</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     &gt;95% of 2018-2019 alumni survey respondents (n = 24) reported their BSN education prepared them well (41.67%) or very well (54.17%) 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.<br/>                     &gt;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.<br/>                     &gt;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.<br/>                     Previous action plan to survey 2018-2019 alumni during 2020, compare responses, and monitor for favorable and unfavorable trends was appropriate. (11/16/2020)</p> | <p><b>Action:</b> Survey 2019-2020 graduates during 2021 and evaluate results for continuation of positive trend in alumni responses. (11/16/2020)</p>   |

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

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

| <i>Measures</i>   | <i>Results</i>   | <i>Actions</i>  |
|---|--|---|
| <p><b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> CIRE, Evaluation &amp; Study Committee</p>   | <p><b>Related Documents:</b><br/> <a href="#">Report 2018-2019 BSN Alumni Survey.pdf</a></p>   |   |
| <p><b>AD: Survey</b> - 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 applicable, e.g., does not perform outcome, or outcome not applicable to current role).<br/> <b>Target:</b> 75% of respondents will report that BSN graduate facilitates inter-professional communication and collaboration in healthcare teams well or very well.<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> CIRE, Evaluation &amp; Study Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     &gt;80% of employers of 2018-2019 alumni (n = 12) reported BSN graduate demonstrated the outcome well (33.3%) or very well (50%).<br/>                     Results are consistent with previous employer surveys. The target of 75% favorable responses (some or most of the time) has been consistently met or exceeded.<br/>                     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.<br/>                     Survey of employers of 2016-2017 BSN graduates: 89% of employers who responded to the survey (n = 9) reported the BSN program graduate performs this outcome well (44.44%) or very well (44.44%). (poorly = 1, 11.11%).<br/>                     Previous action plan to survey employers of 2018-2019 graduates during 2020, compare responses, and monitor for favorable and unfavorable trends was appropriate. (11/16/2020)<br/> <b>Related Documents:</b><br/> <a href="#">Report Employers of 2018-2019 BSN Alumni.pdf</a></p> | <p><b>Action:</b> Survey employers of 2019-2020 graduates during 2021 and evaluate results for continuation of positive trend in alumni responses. (11/16/2020)</p> |

**AU Outcome: BSN 8.0 QI**

Use data to monitor outcomes and improve care.

**Outcome Status:** Active

**Start Date:** 08/01/2014

| <i>Measures</i>  | <i>Results</i>  | <i>Actions</i>   |
|--|---|--|
| <p><b>SL: Didactic</b> - NU320 Nursing Safety Assignment<br/> <b>Target:</b> 100% of students will achieve at least 73% on Nursing Safety Assignment<br/> <b>Timeframe:</b> Annually (starting 2019-2020; assessed Year 1 prior to 2019-</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     In the fall 2019 and spring 2020 100% (146/146) achieved a 73% or higher on the medication safety assignment. Students tend to do well on this assignment, it is a group assignment and groups are determined by course faculty. Spring 2020 was the first time that students made specific comments about this assignment; comments were positive and indicated that this is</p> | <p><b>Action:</b> This assignment will continue in it's current form, but the addition of a required article titled "Human Factors and medication errors: a case study" will be implemented and students</p> |

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

**AU Outcome: BSN 8.0 QI**

| <i>Measures</i>  | <i>Results</i>   | <i>Actions</i>  |
|--|--|---|
| <p>2020)<br/> <b>Responsible Parties:</b> BSN Curriculum Committee</p>   | <p>a beneficial assignment that required the students to apply patient data to determine the root cause of a medication error. This target has consistently been met since it's implementation. (11/14/2020)<br/> <b>Related Documents:</b><br/> <a href="#">Outcome 8 NU 320 Patient Safety Assignment.docx</a></p>   | <p>will be asked 2-3 exam questions based on this reading related to medication errors and human factors. (11/14/2020)</p>  |
| <p><b>SL: Didactic -</b> RN NU 441 Quality Improvement Project Plan<br/> <b>Target:</b> 100% of students will achieve at least 75% on the quality improvement project plan.<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> BSN Curriculum Committee</p>  | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> No<br/>                     This is a new measure for 2019-2020. In Fall 2019, 89% of students achieved 75% on quality improvement plan . (11/23/2020)<br/> <b>Related Documents:</b><br/> <a href="#">Outcome 8 NU441 Quality improvement Project plan FA19.docx</a></p>   | <p><b>Action:</b> In order to meet this outcome in the future, faculty will continue to follow up with students on a regular basis - assisting them in identifying a quality improvement project, looking at a rough draft of the project, and assisting with preparation of their project presentation. (11/23/2020)</p> |
| <p><b>SL: Didactic -</b> NU 460 IHI Quality Improvement Modules<br/> <b>Target:</b> 100% of students will complete the IHI Quality Improvement modules.<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> BSN Curriculum Committee</p>  | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     This is a new measure for 2019-2020. SU19A 100% 20/20, SU19H 100% 5/5, FA19 100% 50/50, SP20 100% 48/48. (11/23/2020)</p>  | <p><b>Action:</b> Will continue to assign IHI QI Modules 101-105. Students also complete the IHI 5 Why's Root Cause Analysis related to quality. Students must complete the modules and submit certificates as proof of completion. (11/23/2020)</p>  |
| <p><b>AD: Survey -</b> Alumni Survey Item: How well BSN education prepared you to use data to monitor outcomes and improve care.<br/> <b>Target:</b> 75% of respondents will report that their BSN education prepared them well or very well to use data to monitor outcomes and improve care (1= very poorly, 2 = poorly, 3 = well, 4 = very well).</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     100% of 2018-2019 alumni survey respondents (n = 24) reported their BSN education prepared them well (50%) or very well (50%) 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.<br/>                     &gt;95% of 2017-2018 alumni survey respondents (n = 38) reported their BSN education prepared them well (42.11%) or very well (55.26%) to perform this outcome.<br/>                     94% of 2016-2017 alumni survey respondents (n = 56) reported their BSN education prepared them well (51.79%) or very well (42.86%) to perform this outcome.</p> | <p><b>Action:</b> Survey 2019-2020 graduates during 2021 and evaluate results for continuation of positive trend in alumni responses. (11/16/2020)</p>  |

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

**AU Outcome: BSN 8.0 QI**

| <i>Measures</i>   | <i>Results</i>  | <i>Actions</i>  |
|---|---|---|
| <p><b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> CIRE, Evaluation &amp; Study Committee</p>   | <p>Previous action plan to survey 2018-2019 alumni during 2020, compare responses, and monitor for favorable and unfavorable trends was appropriate. (11/16/2020)<br/> <b>Related Documents:</b><br/> <a href="#">Report 2018-2019 BSN Alumni Survey.pdf</a></p>  |   |
| <p><b>AD: Survey</b> - Employer Survey Item: How well BSN graduate uses data to monitor outcomes and improve care.<br/> <b>Target:</b> 75% of respondents will 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).<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> CIRE, Evaluation &amp; Study Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     &gt;90% of employers of 2018-2019 alumni (n = 11) reported BSN graduate demonstrated the outcome well (36.36%) or very well (54.55%).<br/>                     Results are consistent with previous employer surveys. The target of 75% favorable responses (some or most of the time) has been consistently met or exceeded.<br/>                     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.<br/>                     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 (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%).<br/>                     Previous action plan to survey employers of 2018-2019 graduates during 2020, compare responses, and monitor for favorable and unfavorable trends was appropriate. (11/16/2020)<br/> <b>Related Documents:</b><br/> <a href="#">Report Employers of 2018-2019 BSN Alumni.pdf</a></p> | <p><b>Action:</b> Survey employers of 2019-2020 graduates during 2021 and evaluate results for continuation of positive trend in alumni responses. (11/16/2020)</p> |

**AU Outcome: BSN 9.0 Safe Care**

Deliver safe care through system effectiveness and individual performance.

**Outcome Status:** Active

**Start Date:** 08/01/2014

| <i>Measures</i>   | <i>Results</i>   | <i>Actions</i>  |
|---|--|---|
| <p><b>SL: Didactic</b> - NU 320 Nursing Safety Assignment<br/> <b>Target:</b> 100% of students will achieve at least 73% on Nursing Safety Assignment</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> No<br/>                     This is a new measure for 2019-2020. In the fall 2019 62.5% (45/72) students achieved a 75% or higher on the first safety check; and 63.8% (46/72) achieved a 75% or higher on the second safety check. In the spring 2020 82.6% (62/75) achieved a 75% or higher on the first safety</p> | <p><b>Action:</b> The number of safety checks will increase from 2 to 4 based on feedback from students. Students comment in course</p> |

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

**AU Outcome: BSN 9.0 Safe Care**

| <i>Measures</i>   | <i>Results</i>   | <i>Actions</i>  |
|---|--|---|
| <p><b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> BSN Curriculum Committee</p>   | <p>check; 85.3% (64/75) achieved a 75% or higher on the second safety check. The spring students performed much better on the safety checks, this was likely due to the assignments moving to an online format in Blackboard (due to COVID-19) and course faculty allowing students to use their notes/books to help them answer the safety assignment questions. The fall students struggled with these assignments, they are application based assignments that require students to answer questions based on a patient scenario. (11/23/2020)</p> <p><b>Related Documents:</b><br/> <a href="#">Outcome 9 NU 320 Safety Check #1 FA19 &amp; SP 20.docx</a><br/> <a href="#">Outcome 9 NU 320 Safety Check #2 FA 19 &amp; SP 20.docx</a></p> | <p>evaluations indicate they would like more course points to assist with improving their overall grade. The safety check assignments will move from a classroom assignment to an online format (Blackboard assignment) and students will be allowed to utilize notes/books on these assignments. As these assignments are application based, students may not have enough actual clinical experience to be able to answer the questions without the assistance of their notes/resource books. (11/23/2020)</p> |
| <p><b>SL: Clinical</b> - NU405 Safety assessment activity<br/> <b>Target:</b> 100% of students will achieve at least 80% on safety assessment activity<br/> <b>Timeframe:</b> Annually (starting 2019-2020; assessed Year 3 prior to 2019-2020)<br/> <b>Responsible Parties:</b> BSN Curriculum Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     For Summer 2019, 19/19 students met target; For fall 2019, 28/28 students met target; for spring this assignment was not completed as service learning project was discontinued prior to spring break due to restrictions visiting older adults. Assignment was moved to the theory portion of class and completed on student's own environment for the accelerated students. This worked well and will be continued. (11/14/2020)</p> <p><b>Related Documents:</b><br/> <a href="#">Outcome 9 NU 405 safety assessment tool.xlsx</a></p>  | <p><b>Action:</b> Beginning fall, 2020, traditional students will transition from service learning assignment to theory assignment to match points for accelerated students. (11/14/2020)</p>   |
| <p><b>SL: Clinical evaluation tool</b> - RN-NU450 Safety clinical competencies on clinical evaluation tool<br/><br/> <b>Target:</b> 100% of students will receive "S" rating for Safety clinical competencies on clinical evaluation</p>  | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     This course was taught in the Spring 2020 semester. Only 1/2 of the students completed this course during the term due to the COVID-19 pandemic. Of the students who completed the course, 100% received "S" rating for Safety clinical competencies on the clinical evaluation tool. Students are consistently meeting this target. (11/14/2020)</p> <p><b>Related Documents:</b></p>   | <p><b>Action:</b> In order to continue to meet this outcome, students will be oriented to the expectations for the completion of the clinical component of this course. (11/14/2020)</p>  |

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

**AU Outcome: BSN 9.0 Safe Care**

| <i>Measures</i>   | <i>Results</i>   | <i>Actions</i>   |
|---|--|--|
| tool.<br><b>Timeframe:</b> Annually (starting 2019-2020; assessed Year 4 prior to 2019-2020)<br><b>Responsible Parties:</b> BSN Curriculum Committee  | <a href="#">Outcome 9 RN NU 450 Clinical Evaluation Tool.docx</a>  |  |
| <b>AD: Survey</b> - 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).<br><b>Target:</b> 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.<br><b>Timeframe:</b> Annually<br><b>Responsible Parties:</b> CIRE, Evaluation & Study Committee | <b>Reporting Year:</b> 2019 - 2020 (Year 2)<br><b>Target Met:</b> Yes<br>100% of 2018-2019 alumni survey respondents (n = 24) reported their BSN education prepared them well (41.67%) or very well (58.33%) 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.<br>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.<br>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.<br>Previous action plan to survey 2018-2019 alumni during 2020, compare responses, and monitor for favorable and unfavorable trends was appropriate. (11/16/2020)<br><b>Related Documents:</b><br><a href="#">Report 2018-2019 BSN Alumni Survey.pdf</a> | <b>Action:</b> Survey 2019-2020 graduates during 2021 and evaluate results for continuation of positive trend in alumni responses. (11/16/2020)              |
| <b>AD: Survey</b> - Employer Survey Item: 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).<br><b>Target:</b> 75% of respondents will report that BSN graduate delivers safe care through system effectiveness and individual performance well or very well.                                      | <b>Reporting Year:</b> 2019 - 2020 (Year 2)<br><b>Target Met:</b> Yes<br>>90% of employers of 2018-2019 alumni (n = 11) reported BSN graduate demonstrated the outcome well (18.18%) or very well (72.73%).<br>Results are consistent with previous employer surveys. The target of 75% favorable responses (some or most of the time) has been consistently met or exceeded.<br>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.<br>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%).<br>Previous action plan to survey employers of 2018-2019 graduates during 2020, compare responses, and monitor for favorable and unfavorable trends was appropriate. (11/16/2020)                           | <b>Action:</b> Survey employers of 2019-2020 graduates during 2021 and evaluate results for continuation of positive trend in alumni responses. (11/16/2020) |

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

**AU Outcome: BSN 9.0 Safe Care**

| <i>Measures</i>   | <i>Results</i>   | <i>Actions</i>  |
|---|--|---|
| <p><b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> CIRE, Evaluation &amp; Study Committee</p>   | <p><b>Related Documents:</b><br/> <a href="#">Report Employers of 2018-2019 BSN Alumni.pdf</a></p>   |   |
| <p><b>SL: Didactic -</b> NU400 home safety assessment assignment<br/> <b>Target:</b> 100% of students will achieve a 80% of home safety assessment assignment<br/> <b>Timeframe:</b> Year 3<br/> <b>Responsible Parties:</b> BSN Curriculum Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     In Fall 2019, 24/24, 100% of students achieved 100% on the safety evaluation. Fall 2019 was the last semester for NU 400. Theory instructor was again used to grade project so no new action plan was implemented. (11/14/2020)<br/> <b>Related Documents:</b><br/> <a href="#">Outcome 9 NU 400 Safety Evaluation Checklist.pdf</a></p> | <p><b>Action:</b> This measure will be discontinued as this course will no longer be taught. (11/14/2020)</p> |

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

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

**Outcome Status:** Active

**Start Date:** 08/01/2014

| <i>Measures</i>  | <i>Results</i>   | <i>Actions</i>  |
|--|--|---|
| <p><b>AD: Report - Internal -</b> ATI Summary Report<br/> <b>Target:</b> 100% of Allen College BSN cohorts will exceed the norming data set by ATI on the ATI Content Mastery proctored assessments.<br/> <b>Timeframe:</b> Annual<br/> <b>Responsible Parties:</b> BSN Curriculum Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     100% of Allen College BSN cohorts exceeded the ATI norming data on the ATI Content Mastery proctored assessments. (11/14/2020)<br/> <b>Related Documents:</b><br/> <a href="#">Outcome 10 ATI Summary Report 2019-2020.docx</a></p>  | <p><b>Action:</b> In order to continue to meet this target, faculty will continue to evaluate the effectiveness of the current ATI policy where 5% of the course grade is awarded to students who meet the benchmark on the ATI Content Mastery Proctored Assessments. (11/14/2020)</p> |
| <p><b>SL: Didactic -</b> RN-NU 497 EBP Project<br/> <b>Target:</b> 100% of students will achieve at least 73% on EBP project<br/> <b>Timeframe:</b> Annually (starting 2019-2020; assessed Year 4 prior to 2019-</p>   | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> No<br/>                     In Spring 2020 75% (3/4) of the students achieved at least 73% on the EBP summary paper. Sequential assignments that followed the steps of the IOWA Model were utilized in each module. This allowed students to receive feedback and make any necessary corrections or</p> | <p><b>Action:</b> Continued sequenced assignments will be utilized along with instructor feedback to walk students through the application of the IOWA Model to a clinical</p>  |

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

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

| <i>Measures</i>  | <i>Results</i>   | <i>Actions</i>  |
|--|--|---|
| <p>2020)<br/> <b>Responsible Parties:</b> BSN Curriculum Committee</p>   | <p>adjustments to the EBP project prior to submitting their final graded report which continued to achieve the target goal. (11/14/2020)<br/> <b>Related Documents:</b><br/> <a href="#">Outcome 10 RN NU 497 EBP Project Summary.doc</a></p>  | <p>practice question. The addition of video recordings specific to the EBP project and written summary will be used to enhance students understanding of the paper requirements and instructor grading expectations. (11/14/2020)</p> |
| <p><b>AD: Survey</b> - Alumni Survey Item:<br/>                     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).<br/><br/> <b>Target:</b> 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.<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> CIRE, Evaluation &amp; Study Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     100% of 2018-2019 alumni survey respondents (n = 24) reported their BSN education prepared them well (41.67%) or very well (58.33%) 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.<br/>                     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.<br/>                     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.<br/>                     Previous action plan to survey 2018-2019 alumni during 2020, compare responses, and monitor for favorable and unfavorable trends was appropriate. (11/16/2020)<br/> <b>Related Documents:</b><br/> <a href="#">Report 2018-2019 BSN Alumni Survey.pdf</a></p> | <p><b>Action:</b> Survey 2019-2020 graduates during 2021 and evaluate results for continuation of positive trend in alumni responses. (11/16/2020)</p>  |
| <p><b>AD: Survey</b> - Employer Survey Item:<br/>                     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 well, NA = not applicable, e.g., does not perform outcome, or outcome</p>  | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     &gt;90% of employers of 2018-2019 alumni (n = 11) reported BSN graduate demonstrated the outcome well (18.18%) or very well (72.73%) .<br/>                     Results are consistent with previous employer surveys. The target of 75% favorable responses (some or most of the time) has been consistently met or exceeded.<br/>                     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.</p>   | <p><b>Action:</b> Survey employers of 2019-2020 graduates during 2021 and evaluate results for continuation of positive trend in alumni responses. (11/16/2020)</p>   |

College Goal 1 - Allen College is committed to preparing outstanding healthcare practitioners who are committed to lifelong learning.

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

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

| <i>Measures</i>   | <i>Results</i>  | <i>Actions</i> |
|---|---|----------------|
| <p>not applicable to current role).</p> <p><b>Target:</b> 75% of respondents will report that BSN graduate synthesizes knowledge from liberal and baccalaureate nursing education to guide generalist practice well or very well.</p> <p><b>Timeframe:</b> Annually</p> <p><b>Responsible Parties:</b> CIRE, Evaluation &amp; Study Committee</p> | <p>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%).</p> <p>Previous action plan to survey employers of 2018-2019 graduates during 2020, compare responses, and monitor for favorable and unfavorable trends was appropriate. (11/16/2020)</p> <p><b>Related Documents:</b><br/> <a href="#">Report Employers of 2018-2019 BSN Alumni.pdf</a></p> |                |

**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

| <i>Measures</i>  | <i>Results</i>  | <i>Actions</i>  |
|--|---|---|
| <p><b>SL: Summative Evaluation</b> - Practice at the highest level of nursing through integration and application of nursing science in clinical practice, management, and education</p> <p><b>Target:</b> 100% of students achieve an acceptable level (1) on a scale of 0-2</p> <p><b>Timeframe:</b> Annually upon program completion</p> <p><b>Responsible Parties:</b> Assistant Dean, Graduate Nursing /Graduate Curriculum Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> <p><b>Target Met:</b> NA</p> <p>Students did not graduate during this reporting year. (09/22/2020)</p> | <p><b>Action:</b> Evaluate results as students complete program. (09/22/2020)</p> |

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

**AU Outcome: DNP 1.0**

| <i>Measures</i>  | <i>Results</i>   | <i>Actions</i>   |
|--|--|--|
| <p><b>SL: Didactic</b> - NU805 Educational Concepts for Advanced Nursing Practice Patient Educational Materials Critique Part II assignment<br/> <b>Target:</b> 100% of students will achieve 73% or higher on the Patient Educational Materials Critique Part II assignment<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> Graduate Curriculum Committee, Course Faculty</p>  | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> NA<br/>                     This course not offered during the reporting year 2019-2020. (09/22/2020)</p>   | <p><b>Action:</b> Evaluate results at next course offering. (09/24/2020)</p>   |
| <p><b>AD: Survey</b> - 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).<br/> <b>Target:</b> 75% of respondents will report that 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 well or very well.<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> Evaluation &amp; Study Committee/CIRE</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     Survey of 2018-2019 DNP Alumni: Two alumni responded to the survey and reported they performed this outcome well (50%) and very well (50%). Results are consistent with previous DNP alumni surveys:<br/>                     Survey of 2017-2018 DNP Alumni: One of two graduates responding to survey reported performing outcome very well.<br/>                     Survey of 2015-2016 and 2016-2017 DNP Alumni: Three of three respondents reported performing outcome very well.<br/><br/>                     The 2018-2019 action plan was to survey 2018-2019 DNP graduates during 2020 and monitor trends in response to this measure, which is appropriate for this measure. (09/24/2020)<br/> <b>Related Documents:</b><br/> <a href="#">Report 2018-2019 DNP Alumni Survey.pdf</a></p> | <p><b>Action:</b> Survey of 2019-2020 DNP graduates spring/summer of 2021. Assess for continuation of positive trend in alumni perceptions. (11/12/2020)</p> |
| <p><b>AD: Survey</b> - DNP Alumni Employer Survey: Employer perceptions of</p>   | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes</p>   | <p><b>Action:</b> Survey employers of 2019-2020 DNP graduates during 2021</p>  |

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

**AU Outcome: DNP 1.0**

| <i>Measures</i>   | <i>Results</i>  | <i>Actions</i>  |
|---|---|---|
| <p>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).<br/> <b>Target:</b> 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.<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> Evaluation &amp; Study Committee/CIRE</p> | <p>Survey of 2018-2019 DNP Alumni Employers: 100% (2/2) employers reported graduates performed outcome very well (100%). Results are consistent with previous DNP alumni surveys:<br/>                     No employer responses to the survey of employers of 2017-2018 DNP graduates.<br/>                     Survey of employers of August 2016, May 2017, and August 2017 graduates: Nine of nine employers reported DNP graduate performed program outcome very well.<br/>                     2018-2019 action plan to survey employers of 2018-2019 DNP graduates during 2020 and monitor for continuation of positive response trends was appropriate. (09/24/2020)<br/> <b>Related Documents:</b><br/> <a href="#">Report Employers of 2018-2019 DNP Alumni.pdf</a></p> | <p>and monitor for continuation of positive response trends. (11/12/2020)</p> |

**AU Outcome: DNP 2.0**

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

**Outcome Status:** Active

| <i>Measures</i>   | <i>Results</i>  | <i>Actions</i>  |
|---|---|---|
| <p><b>SL: Summative Evaluation -</b><br/>                     Demonstrate organizational and systems leadership to advance quality improvement and systems change<br/> <b>Target:</b> 100% of students achieve an acceptable level (1) on a scale of 0-2<br/> <b>Timeframe:</b> Annually upon program completion<br/> <b>Responsible Parties:</b> Assistant Dean, Graduate Nursing /Graduate Curriculum Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> NA<br/>                     Students did not graduate during this reporting year. (09/24/2020)</p> | <p><b>Action:</b> Evaluate results as students complete program. (09/24/2020)</p> |

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

**AU Outcome: DNP 2.0**

| <i>Measures</i>   | <i>Results</i>   | <i>Actions</i>   |
|---|--|--|
| <p><b>SL: Didactic</b> - NU720 Quality Outcomes for Organizations and Systems CQI Analysis Paper<br/> <b>Target:</b> 100% of students will achieve 73% or higher on CQI Analysis Paper<br/> <b>Timeframe:</b> Each time course is offered<br/> <b>Responsible Parties:</b> Graduate Curriculum Committee</p>  | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> NA<br/>                     Unable to measure due to assignment being eliminated. A new measure was not identified by course faculty. Therefore it cannot be compared to previous year's data. (09/24/2020)</p>   | <p><b>Action:</b> Follow up with course faculty to identify a target to measure this outcome for the 2020-2021 academic year. (09/24/2020)</p>       |
| <p><b>AD: Survey</b> - DNP Alumni Survey: 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).<br/> <b>Target:</b> 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<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> Evaluation &amp; Study Committee/CIRE</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     Survey of 2018-2019 DNP Alumni: Two of five respondents reported performing outcome well (50%) or very well (50%). Results are consistent with previous DNP Alumni Surveys:<br/>                     Survey of 2017-2018 DNP Alumni: One of two respondents reported performing outcome very well.<br/>                     Survey of 2015-2016 and 2016-2017 DNP Alumni: Three of three respondents reported performing this outcome well (33.33%) or very well (66.67%).<br/>                     The 2018-2019 action plan to survey 2018-2019 DNP graduates during 2020 and monitor trends in responses to this measure was appropriate. (09/24/2020)<br/> <b>Related Documents:</b><br/> <a href="#">Report 2018-2019 DNP Alumni Survey.pdf</a></p> | <p><b>Action:</b> Survey 2019-2020 DNP graduates during 2021 and monitor for continuation of positive response trends. (11/12/2020)</p>              |
| <p><b>AD: Survey</b> - DNP Alumni Employer Survey: Employer perceptions of how well DNP graduates demonstrate organizational and systems leadership to advance quality improvement and systems</p>  | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     Survey of 2018-2019 DNP Alumni Employers: 100% (2/2) employers reported graduates performed outcome very well (100%). Results are consistent with previous DNP alumni surveys:<br/>                     No responses to the survey of employers of 2017-2018 DNP graduates.</p>  | <p><b>Action:</b> Survey employers of 2019-2020 DNP graduates during 2021 and monitor for continuation of positive response trends. (11/12/2020)</p> |

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

**AU Outcome: DNP 2.0**

| <i>Measures</i>  | <i>Results</i>  | <i>Actions</i> |
|--|---|----------------|
| change (very poorly, poorly, well, very well).<br><b>Target:</b> 75% of respondents will report that DNP graduates demonstrate organizational and systems leadership to advance quality improvement and systems change well or very well.<br><b>Timeframe:</b> Annually<br><b>Responsible Parties:</b> Evaluation & Study Committee/CIRE | Survey of employers of August 2016, May 2017, and August 2017 graduates: 9/9 employers reported DNP graduate performed program outcome very well.<br>2018-2019 action plan to survey employers of 2018-2019 DNP graduates during 2020 and monitor for continuation of positive response trends was appropriate. (09/24/2020)<br><b>Related Documents:</b><br><a href="#">Report Employers of 2018-2019 DNP Alumni.pdf</a> |                |

**AU Outcome: DNP 3.0**

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

**Outcome Status:** Active

| <i>Measures</i>   | <i>Results</i>  | <i>Actions</i>   |
|---|---|--|
| <b>SL: Summative Evaluation</b> - Apply analytical methods and research to develop best practices and practice guidelines<br><b>Target:</b> 100% of students achieve an acceptable level (1) on a scale of 0-2<br><b>Timeframe:</b> Annually upon program completion<br><br><b>Responsible Parties:</b> Assistant Dean, Graduate Nursing /Graduate Curriculum Committee | <b>Reporting Year:</b> 2019 - 2020 (Year 2)<br><b>Target Met:</b> NA<br>Students did not graduate during this reporting year. (09/24/2020)  | <b>Action:</b> Evaluate results as students complete program. (09/24/2020)   |
| <b>SL: Didactic</b> - NU741 Analytic Methods for Evidence-Based Practice I Literature Synthesis Table<br><b>Target:</b> 100% of students will achieve 83% or higher on the  | <b>Reporting Year:</b> 2019 - 2020 (Year 2)<br><b>Target Met:</b> Yes<br>86% (6/7) of DNP students achieved 83% or higher on the Synthesis of Literature Review Table. This was a new measure for the reporting year, so no direct comparison to last year's data is possible. (09/24/2020) | <b>Action:</b> In order to meet the target with all students at the next course offering, course faculty will add a Panopto recording to provide |

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

**AU Outcome: DNP 3.0**

| <i>Measures</i>  | <i>Results</i>   | <i>Actions</i>   |
|--|--|--|
| <p>Literature Synthesis Table Assignment.<br/> <b>Timeframe:</b> Each time course is offered<br/> <b>Responsible Parties:</b> Graduate Curriculum Committee</p>  |  | <p>additional information on concepts needed to complete the Synthesis of Literature Review Table.<br/>                     (09/24/2020)</p>         |
| <p><b>AD: Survey - DNP Alumni Survey:</b> 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).<br/> <b>Target:</b> 75% of respondents will report that their DNP education prepared them to apply analytical methods and research to develop best practices and practice guidelines well or very well.<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> Evaluation &amp; Study Committee/CIRE</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     Survey of 2018-2019 DNP Alumni: Two alumni responded to the survey and reported they performed this outcome very well. Results are consistent with previous DNP alumni surveys:<br/>                     Survey of 2017-2018 DNP Alumni: One of two respondents reported performing outcome very well.<br/>                     Survey of 2015-2016 and 2016-2017 DNP Alumni: Three of three respondents reported performing outcome well (66.67%) or very well (33.33%).<br/>                     2018-2019 action plan to survey 2018-2019 DNP graduates during 2020 and monitor for continuation of positive response trends was appropriate. (09/24/2020)<br/> <b>Related Documents:</b><br/> <a href="#">Report 2018-2019 DNP Alumni Survey.pdf</a></p> | <p><b>Action:</b> Survey 2019-2020 DNP graduates during 2021 and monitor for continuation of positive response trends. (11/12/2020)</p>              |
| <p><b>AD: Survey - DNP Alumni Employer Survey:</b> 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).<br/> <b>Target:</b> 75% of respondents will report that DNP graduates apply analytical methods and research to develop best practices and practice guidelines well or very well.</p>   | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     Survey of 2018-2019 DNP Alumni Employers: 100% (2/2) employers reported DNP graduates performed outcome very well (100%). Results are consistent with previous DNP alumni surveys:<br/>                     No responses to the survey of employers of 2017-2018 DNP graduates: 9/9 employers reported DNP graduate performed program outcome well (22.22%) or very well (77.78%).<br/>                     2018-2019 action plan to survey employers of 2018-2019 DNP graduates during 2020 and monitor for continuation of positive response trends was appropriate. (09/24/2020)<br/> <b>Related Documents:</b><br/> <a href="#">Report Employers of 2018-2019 DNP Alumni.pdf</a></p>   | <p><b>Action:</b> Survey employers of 2019-2020 DNP graduates during 2021 and monitor for continuation of positive response trends. (11/12/2020)</p> |

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

**AU Outcome: DNP 3.0**

| <i>Measures</i>   | <i>Results</i> | <i>Actions</i> |
|---|----------------|----------------|
| <b>Timeframe:</b> Annually<br><b>Responsible Parties:</b> Evaluation & Study Committee/CIRE |                |                |

**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

**Outcome Status:** Active

| <i>Measures</i>   | <i>Results</i>  | <i>Actions</i>  |
|---|---|---|
| <b>SL: Summative Evaluation</b> - 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<br><b>Target:</b> 100% of students achieve an acceptable level (1) on a scale of 0-2<br><b>Timeframe:</b> Annually upon program completion<br><b>Responsible Parties:</b> Assistant Dean, Graduate Nursing /Graduate Curriculum Committee | <b>Reporting Year:</b> 2019 - 2020 (Year 2)<br><b>Target Met:</b> NA<br>Students did not graduate during this reporting year. (09/24/2020)  | <b>Action:</b> Evaluate results as students complete program. (09/24/2020)  |
| <b>SL: Didactic</b> - NU541 Health Care Informatics Annotated Bibliography and Critical Response assignment<br><b>Target:</b> 100% of students will achieve 85% or higher on the Annotated Bibliography and Critical Response assignment.<br><b>Timeframe:</b> Each time course is offered<br><b>Responsible Parties:</b> Graduate  | <b>Reporting Year:</b> 2019 - 2020 (Year 2)<br><b>Target Met:</b> Yes<br>100% (3/3) Students achieved 85% or higher on the Annotated Bibliography and Critical Response assignment. This was a new measure during the 2019-2020 academic year so there is no previous data to compare. (09/24/2020) | <b>Action:</b> To meet this target with all groups next year, course faculty will provide a thorough explanation of the assignment instructions. The assignment instructions will be review for clarity. (09/24/2020) |

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

**AU Outcome: DNP 4.0**

| <i>Measures</i>  | <i>Results</i>   | <i>Actions</i>   |
|--|--|--|
| <p>Curriculum Committee</p> <p><b>AD: Survey</b> - 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 and populations (very poorly, poorly, well, very well).<br/> <b>Target:</b> 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.<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> Evaluation &amp; Study Committee/CIRE</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     Survey of 2018-2019 DNP Alumni: Two alumni responded to the survey and reported they performed this outcome very well. Results are consistent with previous DNP alumni surveys:<br/>                     Survey of 2017-2018 DNP Alumni: One of two respondents reported performing outcome very well.<br/>                     Survey of 2015-2016 and 2016-2017 DNP Alumni: Three of three respondents reported performing outcome well (66.67%) or very well (33.33%).<br/>                     2018-2019 action plan to survey 2018-2019 DNP graduates during 2020 and monitor for continuation of positive response trends was appropriate. (09/24/2020)<br/> <b>Related Documents:</b><br/> <a href="#">Report 2018-2019 DNP Alumni Survey.pdf</a></p> | <p><b>Action:</b> Survey 2019-2020 DNP graduates during 2021 and monitor for continuation of positive response trends. (11/12/2020)</p>              |
| <p><b>AD: Survey</b> - 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).</p>  | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     Survey of 2018-2019 DNP Alumni Employers: 100% (2/2) employers reported DNP graduates performed outcome very well (100%). Results are consistent with previous DNP alumni surveys:<br/>                     No responses to the survey of employers of 2017-2018 DNP graduates.<br/>                     Survey of employers of August 2016, May 2017, and August 2017 graduates: 9/9 employers reported DNP graduate performed program outcome well (11.11%) or very well (88.89%).<br/>                     2018-2019 action plan to survey employers of 2018-2019 DNP graduates during 2020 and monitor for continuation of positive response trends was appropriate. (09/24/2020)</p>  | <p><b>Action:</b> Survey employers of 2019-2020 DNP graduates during 2021 and monitor for continuation of positive response trends. (11/12/2020)</p> |

College Goal 1 - Allen College is committed to preparing outstanding healthcare practitioners who are committed to lifelong learning.

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

**AU Outcome: DNP 4.0**

| <i>Measures</i>   | <i>Results</i>   | <i>Actions</i> |
|---|--|----------------|
| <p><b>Target:</b> 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.</p> <p><b>Timeframe:</b> Annually</p> <p><b>Responsible Parties:</b> Evaluation &amp; Study Committee/CIRE</p> | <p><b>Related Documents:</b></p> <p><a href="#">Report Employers of 2018-2019 DNP Alumni.pdf</a></p> |                |

**AU Outcome: DNP 5.0**

Advocate for healthcare change through policy development and evaluation.

**Outcome Status:** Active

| <i>Measures</i>  | <i>Results</i>  | <i>Actions</i>  |
|--|---|---|
| <p><b>SL: Summative Evaluation -</b><br/>Advocate for healthcare change through policy development and evaluation.</p> <p><b>Target:</b> 100% of students achieve an acceptable level (1) on a scale of 0-2</p> <p><b>Timeframe:</b> Annually upon program completion</p> <p><b>Responsible Parties:</b> Assistant Dean, Graduate Nursing /Graduate Curriculum Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> <p><b>Target Met:</b> Yes</p> <p>Students did not graduate during this reporting year. (09/24/2020)</p>  | <p><b>Action:</b> Evaluate results as students complete program. (09/24/2020)</p>   |
| <p><b>SL: Didactic -</b> NU520 Policy, Organization, and Financing of Health Care Paper III: Health Care Policy Brief</p> <p><b>Target:</b> 100% of students will</p>  | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> <p><b>Target Met:</b> Yes</p> <p>100% (1/1) achieved 83% or higher on Paper III: Health Care Policy Brief. This is a new measure for the 2019-2020 academic year so there is no previous data to compare. (09/24/2020)</p> | <p><b>Action:</b> In order to meet this target with all groups next year, course faculty will continue to use the Issue Brief template and rubric. In</p> |

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

**AU Outcome: DNP 5.0**

| <i>Measures</i>   | <i>Results</i>   | <i>Actions</i>   |
|---|--|--|
| achieve 83% or higher on Paper III: Health Care Policy Brief<br><b>Timeframe:</b> Annually<br><b>Responsible Parties:</b> Graduate Curriculum Committee   |  | addition, Panopto recordings will be consistently used to clarify assignment expectations and faculty will consider placement of information on written assignments earlier in the semester to facilitate earlier student choice of topics. (09/24/2020) |
| <b>AD: Survey - DNP Alumni Survey:</b> 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).<br><b>Target:</b> 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.<br><b>Timeframe:</b> Annually<br><b>Responsible Parties:</b> Evaluation & Study Committee/CIRE | <b>Reporting Year:</b> 2019 - 2020 (Year 2)<br><b>Target Met:</b> Yes<br>Survey of 2018-2019 DNP Alumni: Two of two respondents reported performing outcome very well. Results are consistent with previous DNP alumni surveys:<br>Survey of 2017-2018 DNP Alumni: One of two respondents reported performing outcome very well.<br>Survey of 2015-2016 and 2016-2017 DNP Alumni: Three of three respondents reported performing outcome well (66.67%) or very well (33.33%).<br>2018-2019 action plan to survey 2018-2019 DNP graduates during 2020 and monitor for continuation of positive response trends was appropriate. (09/24/2020)<br><b>Related Documents:</b><br><a href="#">Report 2018-2019 DNP Alumni Survey.pdf</a> | <b>Action:</b> Survey 2019-2020 DNP graduates during 2021 and monitor for continuation of positive response trends. (11/12/2020)   |
| <b>AD: Survey - DNP Alumni Employer Survey:</b> Employer perceptions of how well DNP graduates advocate for healthcare change through policy development and evaluation (very poorly, poorly, well, very well).<br><b>Target:</b> 75% of respondents will report that DNP graduates advocate for healthcare change through policy   | <b>Reporting Year:</b> 2019 - 2020 (Year 2)<br><b>Target Met:</b> Yes<br>Survey of 2018-2019 DNP Alumni Employers: 100% (2/2) employers reported graduates performed this outcome very well (100%). Results are consistent with previous DNP alumni surveys:<br>No responses to the survey of employers of 2017-2018 DNP graduates.<br>Survey of employers of August 2016, May 2017, and August 2017 graduates: 9/9 employers reported that the DNP graduate performed program outcome well (33.33%) or very well (66.67%).  | <b>Action:</b> Survey employers of 2019-2020 DNP graduates during 2021 and monitor for continuation of positive response trends. (11/12/2020)  |

College Goal 1 - Allen College is committed to preparing outstanding healthcare practitioners who are committed to lifelong learning.

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

**AU Outcome: DNP 5.0**

| <i>Measures</i>  | <i>Results</i>   | <i>Actions</i> |
|--|--|----------------|
| development and evaluation well or very well.<br><b>Timeframe:</b> Annually<br><b>Responsible Parties:</b> Evaluation & Study Committee/CIRE | 2018-2019 action plan to survey employers of 2018-2019 DNP graduates during 2020 and monitor for continuation of positive response trends was appropriate. (09/24/2020)<br><b>Related Documents:</b><br><a href="#">Report Employers of 2018-2019 DNP Alumni.pdf</a> |                |

**AU Outcome: DNP 6.0**

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

**Outcome Status:** Active

| <i>Measures</i>   | <i>Results</i>  | <i>Actions</i>  |
|---|---|---|
| <b>SL: Summative Evaluation</b> - Assume leadership roles in interprofessional collaboration to improve the health outcomes of individuals, families, and populations<br><br><b>Target:</b> 100% of students achieve an acceptable level (1) on a scale of 0-2<br><b>Timeframe:</b> Annually upon program completion<br><b>Responsible Parties:</b> Assistant Dean, Graduate Nursing /Graduate Curriculum Committee | <b>Reporting Year:</b> 2019 - 2020 (Year 2)<br><b>Target Met:</b> NA<br>Students did not graduate during this reporting year. (09/24/2020)  | <b>Action:</b> Evaluate results as students complete program. (09/25/2020)  |
| <b>SL: Didactic</b> - NU750 Leadership and Collaboration Service-Learning Project assignment<br><b>Target:</b> 100% of students will achieve 80% or higher on the Service-Learning Project assignment<br><b>Timeframe:</b> Each time course is offered<br><b>Responsible Parties:</b> Graduate Curriculum Committee   | <b>Reporting Year:</b> 2019 - 2020 (Year 2)<br><b>Target Met:</b> Yes<br>100% (4/4) students achieved 80% or higher on the Service Learning project assignment. Results are consistent with 2018-2019 academic year when 3 of 3 students (100%) achieved 80% or higher on the Service-Learning project assignment. Faculty included announcements detailing Service Learning project based as a result of the recommendation from the previous academic year (2018-2019) to offer 1-2 synchronous class offerings to discuss course content or course assignments. (09/25/2020) | <b>Action:</b> In order to continue to meet the target, course faculty will add Panopto and lectures to meet students' needs. Group assignments will be added to facilitate collaboration and learning for the next academic year (2020-2021). (09/25/2020) |

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

**AU Outcome: DNP 6.0**

| <i>Measures</i>  | <i>Results</i>   | <i>Actions</i>   |
|--|--|--|
| <p><b>AD: Survey</b> - 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).<br/> <b>Target:</b> 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.<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> Evaluation &amp; Study Committee/CIRE</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     Survey of 2018-2019 DNP Alumni: 100% (2/2) respondents reported performing outcome very well (100%). Results are consistent with previous DNP alumni surveys:<br/>                     Survey of 2017-2018 DNP Alumni: One of two respondents reported performing outcome very well.<br/>                     Survey of 2015-2016 and 2016-2017 DNP Alumni: Three of three respondents reported performing outcome very well (100%).<br/>                     2018-2019 action plan to survey 2018-2019 DNP graduates during 2020 and monitor for continuation of positive response trends was appropriate. (09/24/2020)<br/> <b>Related Documents:</b><br/> <a href="#">Report 2018-2019 DNP Alumni Survey.pdf</a></p>  | <p><b>Action:</b> Survey 2019-2020 DNP graduates during 2021 and monitor for continuation of positive response trends. (11/12/2020)</p>              |
| <p><b>AD: Survey</b> - 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).<br/> <b>Target:</b> 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.<br/> <b>Timeframe:</b> Annually</p>   | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     Survey of 2018-2019 DNP Alumni Employers: 100% (2/2) employers reported DNP graduates performed outcome very well (100%). Results are consistent with previous DNP alumni surveys:<br/>                     No responses to the survey of employers of 2017-2018 DNP graduates.<br/>                     Survey of employers of August 2016, May 2017, and August 2017 graduates: 9/9 employers reported DNP graduate performed program outcome well (11.11%) or very well (88.89%).<br/>                     2018-2019 action plan to survey employers of 2018-2019 DNP graduates during 2020 and monitor for continuation of positive response trends was appropriate. (09/24/2020)<br/> <b>Related Documents:</b><br/> <a href="#">Report Employers of 2018-2019 DNP Alumni.pdf</a></p> | <p><b>Action:</b> Survey employers of 2019-2020 DNP graduates during 2021 and monitor for continuation of positive response trends. (11/12/2020)</p> |

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

**AU Outcome: DNP 6.0**

| <i>Measures</i>   | <i>Results</i> | <i>Actions</i> |
|---|----------------|----------------|
| <b>Responsible Parties:</b> Evaluation & Study Committee/CIRE |                |                |

**AU Outcome: DNP 7.0**

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

**Outcome Status:** Active

| <i>Measures</i>  | <i>Results</i>   | <i>Actions</i>   |
|--|--|--|
| <p><b>SL: Summative Evaluation -</b><br/>Incorporate a firm conceptual foundation for clinical prevention and population health.<br/><b>Target:</b> 100% of students achieve an acceptable level (1) on a scale of 0-2</p> <p><b>Timeframe:</b> Annually upon program completion<br/><b>Responsible Parties:</b> Assistant Dean, Graduate Nursing /Graduate Curriculum Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/><b>Target Met:</b> NA<br/>Students did not graduate during this reporting year. (09/24/2020)</p>  | <p><b>Action:</b> Evaluate results as students complete program. (09/24/2020)</p>  |
| <p><b>SL: Didactic - NU731 Epidemiology and Biostatistics Epidemiology Application Brief written assignment #2</b></p> <p><b>Target:</b> 100% of students will achieve 73% or higher on Epidemiology Application Brief written assignment.<br/><b>Timeframe:</b> Each time course is offered<br/><b>Responsible Parties:</b> Graduate Curriculum Committee</p>                       | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/><b>Target Met:</b> Yes<br/>100% (8/8) of students achieved 73% or higher on the Epidemiology Application Brief written assignment. This was the first time the course was taught, so there is no previous data to compare. (09/24/2020)</p> | <p><b>Action:</b> To continue to meet this target with the next course offering, course faculty will add Panoptos to provide explanations for module assignments and differentiate between Brief written assignment 1 and 2 expectations to provide increased student interest in the assignment. (09/24/2020)</p> |

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

**AU Outcome: DNP 7.0**

| <i>Measures</i>  | <i>Results</i>   | <i>Actions</i>   |
|--|--|--|
| <p><b>AD: Survey</b> - 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).<br/> <b>Target:</b> 75% of respondents will report that their DNP education prepared them to incorporate a firm conceptual foundation for clinical prevention and population health well or very well.<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> Evaluation &amp; Study Committee/CIRE</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     Survey of 2018-2019 DNP Alumni: Two of two respondents reported performing outcome well (50%) and very well (50%). Results are consistent with previous DNP alumni surveys:<br/>                     Survey of 2017-2018 DNP Alumni: One of two respondents reported performing outcome very well.<br/>                     Survey of 2015-2016 and 2016-2017 DNP Alumni: Three of three respondents reported performing outcome well (33.33%) or very well (66.67%).<br/>                     2018-2019 action plan to survey 2018-2019 DNP graduates during 2020 and monitor for continuation of positive response trends was appropriate. (09/24/2020)<br/> <b>Related Documents:</b><br/> <a href="#">Report 2018-2019 DNP Alumni Survey.pdf</a></p>                                   | <p><b>Action:</b> Survey 2019-2020 DNP graduates during 2021 and monitor for continuation of positive response trends. (11/12/2020)</p>              |
| <p><b>AD: Survey</b> - 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).<br/> <b>Target:</b> 75% of respondents will report that DNP graduates incorporate a firm conceptual foundation for clinical prevention and population health well or very well.<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> Evaluation &amp; Study Committee/CIRE</p>                                      | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     Survey of 2018-2019 DNP Alumni Employers: 100% (2/2) employers reported DNP graduates performed outcome very well (100%). Results are consistent with previous DNP alumni surveys:<br/>                     No responses to the survey of employers of 2017-2018 DNP graduates.<br/>                     Survey of employers of August 2016, May 2017, and August 2017 graduates: 9/9 employers reported DNP graduate performed program outcome well (22.22%) or very well (77.78%).<br/>                     2018-2019 action plan to survey employers of 2018-2019 DNP graduates during 2020 and monitor for continuation of positive response trends was appropriate. (09/24/2020)<br/> <b>Related Documents:</b><br/> <a href="#">Report Employers of 2018-2019 DNP Alumni.pdf</a></p> | <p><b>Action:</b> Survey employers of 2019-2020 DNP graduates during 2021 and monitor for continuation of positive response trends. (11/12/2020)</p> |

**AU Outcome: DNP 8.0**

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

**AU Outcome: DNP 8.0**

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

**Outcome Status:** Active

| <i>Measures</i>   | <i>Results</i>  | <i>Actions</i>   |
|---|---|--|
| <p><b>SL: Summative Evaluation -</b><br/>Synthesize advanced practice nursing knowledge and competencies into the practice role.<br/><b>Target:</b> 100% of students achieve an acceptable level (1) on a scale of 0-2<br/><b>Timeframe:</b> Annually upon program completion<br/><b>Responsible Parties:</b> Assistant Dean, Graduate Nursing /Graduate Curriculum Committee</p>   | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/><b>Target Met:</b> NA<br/>Students did not graduate during this reporting year. (09/24/2020)</p>   | <p><b>Action:</b> Evaluate results as students complete program. (09/24/2020)</p>  |
| <p><b>AD: Survey - DNP Alumni Survey:</b><br/>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).<br/><b>Target:</b> 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.<br/><b>Timeframe:</b> Annually<br/><b>Responsible Parties:</b> Evaluation &amp; Study Committee/CIRE</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/><b>Target Met:</b> Yes<br/>Survey of 2018-2019 DNP Alumni: Two of two respondents reported performing outcome well (50%) and very well (50%). Results are consistent with previous DNP alumni surveys:<br/>Survey of 2017-2018 DNP Alumni: One of two respondents reported performing outcome very well.<br/>Survey of 2015-2016 and 2016-2017 DNP Alumni: Three of three respondents reported that performing outcome very well (100%).<br/>2018-2019 action plan to survey 2018-2019 DNP graduates during 2020 and monitor for continuation of positive response trends was appropriate. (09/24/2020)<br/><b>Related Documents:</b><br/><a href="#">Report 2018-2019 DNP Alumni Survey.pdf</a></p> | <p><b>Action:</b> Survey 2019-2020 DNP graduates during 2021 and monitor for continuation of positive response trends. (11/12/2020)</p>              |
| <p><b>AD: Survey - DNP Alumni Employer Survey:</b> Employer perceptions of how well DNP graduates synthesize advanced practice nursing knowledge and competencies into</p>  | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/><b>Target Met:</b> Yes<br/>Survey of 2018-2019 DNP Alumni Employers: 100% (2/2) employers responded to the survey and reported graduates performed this outcome very well (100%). Results are consistent with previous DNP alumni employer surveys:</p>  | <p><b>Action:</b> Survey employers of 2019-2020 DNP graduates during 2021 and monitor for continuation of positive response trends. (11/12/2020)</p> |

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

**AU Outcome: DNP 8.0**

| <i>Measures</i>   | <i>Results</i>  | <i>Actions</i> |
|---|---|----------------|
| <p>the practice role (very poorly, poorly, well, very well).<br/> <b>Target:</b> 75% of respondents will report that DNP graduates synthesize advanced practice nursing knowledge and competencies into the practice role well or very well.</p> <p><b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> Evaluation &amp; Study Committee/CIRE</p> | <p>No responses to the survey of employers of 2017-2018 DNP graduates.<br/>                     Survey of employers of August 2016, May 2017, and August 2017 graduate: Nine of nine respondents reported that the DNP graduate performs the program outcome well (11.11%) or very well (88.89%).<br/>                     2018-2019 action plan to survey employers of 2018-2019 DNP graduates during 2020 and monitor for continuation of positive response trends was appropriate. (09/24/2020)</p> <p><b>Related Documents:</b><br/> <a href="#">Report Employers of 2018-2019 DNP Alumni.pdf</a></p> |                |

**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.

**Outcome Status:** Active

| <i>Measures</i>  | <i>Results</i>  | <i>Actions</i>  |
|--|---|---|
| <p><b>SL: Clinical evaluation tool</b> - Clinical Evaluations-Critical thinking" criterion<br/> <b>Target:</b> 95% of students achieve an acceptable level (1) on all criteria on "Critical thinking" criterion on the faculty clinical evaluation tool.<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> MSN Clinical Coordinator / Graduate Curriculum Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     Target met with all but NU 605C Fall 2019 (12 of 13, 92%)<br/>                     See attached report - 2019-2020 CAP Summary MSN Outcomes 1,3,7,8</p> <p>Reflection on results and action plan from previous year:<br/>                     Results are consistent with previous reporting year (2018-2019).<br/>                     Measure reviewed with Graduate Curriculum committee and will continue to use. (09/14/2020)</p> <p><b>Related Documents:</b><br/> <a href="#">2019-2020 CAP Summary MSN Outcomes 1,3,7,8.pdf</a></p> | <p><b>Action:</b> Will review with Curriculum committee October 2020.<br/>                     Course faculty will review preceptor evaluations and/or assess student performance with OSCE simulation experiences.<br/>                     Contact with preceptors and students will be maintained throughout the course to evaluate progress toward outcomes. (09/14/2020)</p> |
| <p><b>SL: Didactic</b> - NU696 Graduate Seminar II Paper 3</p>   | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p>  | <p><b>Action:</b> Faculty will continue to</p>  |

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

**AU Outcome: MSN 1.0**

| Measures  | Results   | Actions  |
|---|---|--|
| <p><b>Target:</b> 95% of students achieve 73% or higher on Paper 3 (Draft of MSN Graduate Project Proposal).<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> Graduate Curriculum Committee</p>   | <p><b>Target Met:</b> Yes<br/>                     Summer 19: 100% (16 of 16) achieved at least 73%<br/>                     Fall 19: 96% (22 of 23) achieved at least 73%<br/>                     Spring 2020: 100% (24 of 24) achieved at least 73%</p> <p>Reflection on results and action plan from previous year:<br/>                     Results are consistent with previous reporting year (2018-2019).<br/>                     The timeline for return of graded assignments was emphasized to faculty, and a 1:5 faculty mentor-to-student ratio was maintained. In addition, assignment instructions and rubrics were all reviewed and revised. (07/27/2020)</p>  | <p>focus on regular review and revision of assignment instructions and rubrics to assure they are clear, concise, and in alignment with most recent grad project proposal processes. In addition, the timely student feedback will be emphasized so students have time to use feedback in written assignments. Finally, will work to maintain mentor-to-student ratio of 1:5 or less. (07/27/2020)</p> |
| <p><b>AD: Survey - MSN Alumni Survey--</b> 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).<br/><br/> <b>Target:</b> 75% of respondents will 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.<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> Evaluation &amp; Study Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     16/16 2018-2019 graduates reported their MSN education prepared them well (5; 31.25%) or very well (11; 68.75%) to synthesize knowledge from nursing science and related disciplines in order to develop a foundation to guide practice. These results are consistent with previous reporting years.<br/>                     2017-2018 alumni survey respondents (n = 14): &gt;90% reported MSN education prepared them well (57.14%) or very well (35.71%) to perform outcome.<br/>                     2016-2017 alumni survey respondents (n = 23): 100% reported MSN education prepared them well (60.87%) or very well (39.13%) to perform outcome.<br/>                     2018-2019 action plan to survey 2018-2019 alumni during 2020, compare responses, and monitor for favorable and unfavorable trends was appropriate. (11/14/2020)<br/> <b>Related Documents:</b><br/> <a href="#">Report 2018-2019 MSN Alumni Survey.pdf</a></p> | <p><b>Action:</b> Survey 2019-2020 MSN graduates during 2021 and monitor for continuation of positive response trends. (11/14/2020)</p>  |
| <p><b>AD: Survey - MSN Graduate Employer Survey--</b>How well employers perceive that MSN</p>   | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     Employers of 2018-2019 graduates: 100% of employers who responded to the survey (n =</p>  | <p><b>Action:</b> Survey employers of 2019-2020 MSN graduates during 2021 and monitor for continuation of</p>  |

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

**AU Outcome: MSN 1.0**

| <i>Measures</i>  | <i>Results</i>  | <i>Actions</i>                                |
|--|---|---|
| <p>graduates synthesize knowledge from nursing science and related disciplines in order to develop a foundation to guide practice (very poorly, poorly, well, very well).<br/> <b>Target:</b> 75% of employers will report that MSN graduates provide organizational and systems leadership in practice, service, and scholarship well or very well.<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> Evaluation &amp; Study Committee, CIRE</p> | <p>10) reported the MSN program graduate performs this outcome well (10%) or very well (90%). This result is consistent with previous employer surveys.<br/>                     Employers of 2016-2017 and 2015-2016 graduates: 100% (n=6) reported the graduate performed the outcome well (16.67%) or very well (83.33%) in current professional practice.<br/>                     2018-2019 action plan to survey employers of 2018-2019 MSN graduates during 2020 and monitor for continuation of positive response trends was appropriate. (11/14/2020)<br/> <b>Related Documents:</b><br/> <a href="#">Report Employers of 2018-2019 MSN Alumni.pdf</a></p> | <p>positive response trends. (11/14/2020)</p> |
| <p><b>SL: Didactic - NU536 EBP II Paper</b><br/> <b>Target:</b> 95% of students achieve 73% or higher on Paper II<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> Course Faculty, MSN Program Director</p>  | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     Summer 19 : N/A -Course not taught<br/>                     Fall 19: N/A - Course not taught<br/>                     Spring 20: 100% (5 of 5) achieved an 80%<br/>                     This is the first year course was taught, so there are no results from a previous reporting year to compare and no action plan to evaluate. (12/14/2020)</p>  |   |

**AU Outcome: MSN 2.0**

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

**Outcome Status:** Active

| <i>Measures</i>  | <i>Results</i>  | <i>Actions</i>   |
|--|---|--|
| <p><b>SL: Didactic - NU505 Nursing Leadership for Advanced Practice Leadership Development paper</b><br/> <b>Target:</b> 95% of students will achieve 80% or better on Leadership Development paper. (Target increased from 73% to 80% for 2020-</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     Summer 19- N/A Course not taught<br/>                     Fall 19 - 100% (30 of 30) achieved at least 73% on Leadership Development Paper<br/>                     Spring 2020- 100% (18 of 18) achieved at least a 73% on Leadership Development Paper<br/>                     Target was met and continues to be met we did not change the measure but we made changes to the requirements of the paper (08/04/2020)</p> | <p><b>Action:</b> To meet this target with all groups next year, course faculty will plan to modify the leadership development paper in the fall of 2020. (08/04/2020)</p> |

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

**AU Outcome: MSN 2.0**

| <i>Measures</i>   | <i>Results</i>   | <i>Actions</i>  |
|---|--|---|
| 2021)<br><b>Timeframe:</b> Annually<br><b>Responsible Parties:</b> Graduate Curriculum Committee  |  |   |
| <b>AD: Survey - MSN Alumni Survey--</b><br>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).<br><b>Target:</b> 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.<br><b>Timeframe:</b> Annually<br><b>Responsible Parties:</b> Evaluation & Study Committee | <b>Reporting Year:</b> 2019 - 2020 (Year 2)<br><b>Target Met:</b> Yes<br>2018-2019 alumni survey respondents (n = 16): 100% reported MSN program prepared them well (50%) or very well (50%) to provide organizational and systems leadership in practice, service and scholarship. These results are consistent with previous reporting years.<br>2017-2018 alumni survey respondents (n = 14): > 90% 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.<br>2016-2017 alumni survey respondents (n = 23): 100% 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.<br>2018-2019 action plan to survey 2018-2019 alumni during 2020, compare responses, and monitor for favorable and unfavorable trends was appropriate. (11/14/2020)<br><b>Related Documents:</b><br><a href="#">Report 2018-2019 MSN Alumni Survey.pdf</a> | <b>Action:</b> Survey 2019-2020 MSN graduates during 2021 and monitor for continuation of positive response trends. (11/14/2020)              |
| <b>AD: Survey - MSN Employer Survey--</b><br>How well employers perceive that MSN graduates provide organizational and systems leadership in practice, service and scholarship (very poorly, poorly, well, very well).<br><b>Target:</b> 75% of employers will report that MSN graduates provide organizational and systems leadership in practice, service and scholarship well or very well.<br><b>Timeframe:</b> Annually<br><b>Responsible Parties:</b> Evaluation &  | <b>Reporting Year:</b> 2019 - 2020 (Year 2)<br><b>Target Met:</b> Yes<br>Employers of 2018-2019 graduates (n = 10): 100% reported the MSN program graduate performs this outcome well (20%) or very well (80%). This result demonstrates continued positive trend in employer survey responses.<br>Employers of 2017-2018 graduates: 100% of employers who responded to the survey (n = 5) reported the MSN program graduate performs this outcome well (60%) or very well (40%).<br>Employers of 2015-2016 graduates: 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.<br>2018-2019 action plan to survey employers of 2018-2019 MSN graduates during 2020 and monitor for continuation of positive response trends was appropriate. (11/14/2020)<br><b>Related Documents:</b>  | <b>Action:</b> Survey employers of 2019-2020 MSN graduates during 2021 and monitor for continuation of positive response trends. (11/14/2020) |

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

**AU Outcome: MSN 2.0**

| <i>Measures</i> | <i>Results</i>   | <i>Actions</i> |
|-----------------|--|----------------|
| Study Committee | <a href="#">Report Employers of 2018-2019 MSN Alumni.pdf</a> |                |

**AU Outcome: MSN 3.0**

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

**Outcome Status:** Active

| <i>Measures</i>  | <i>Results</i>  | <i>Actions</i>  |
|--|---|---|
| <p><b>SL: Clinical evaluation tool</b> - Clinical Evaluations-"Safety/Outcomes" criterion<br/> <b>Target:</b> 95% of students achieve an acceptable level (1) on "Safety/Outcomes" criterion on Faculty Clinical Evaluation Tool<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> MSN Clinical Coordinator / Graduate Curriculum Committee</p>   | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     Target met with all but NU 605C Fall 2019 (12 of 13, 92%)<br/>                     See attached report - 2019-2020 CAP Summary MSN Outcomes 1,3,7,8</p> <p>Reflection on results and action plan from previous year:<br/>                     Results are consistent with previous reporting year (2018-2019).<br/>                     Measure reviewed with Graduate Curriculum committee and will continue to use. (09/14/2020)<br/> <b>Related Documents:</b><br/> <a href="#">2019-2020 CAP Summary MSN Outcomes 1,3,7,8.pdf</a></p> | <p><b>Action:</b> Will review with Curriculum committee October 2020. Course faculty will review preceptor evaluations and/or assess student performance with OSCE simulation experiences. Contact with preceptors and students will be maintained throughout the course to evaluate progress toward outcomes. (09/14/2020)</p>   |
| <p><b>AD: Report - Internal</b> - Graduate Project Evaluation Form - Item #3<br/>                     Apply quality principles to promote patient safety and positive outcomes<br/> <b>Target:</b> 100% of students achieve an acceptable level (1) on both paper and presentation<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> Assistant Dean, Graduate Nursing / Graduate Curriculum Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     49 of 49 (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. (12/08/2020)</p>  | <p><b>Action:</b> 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 project proposals. 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</p> |

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

**AU Outcome: MSN 3.0**

| Measures   | Results   | Actions  |
|--|---|--|
|  |   | target. (12/08/2020)   |
| <p><b>AD: Survey</b> - 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).<br/> <b>Target:</b> 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.<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> Evaluation &amp; Study Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     2018-2020 alumni survey respondents (n =16): &gt;90% reported their MSN education prepared them well (5; 31.5%) or very well (11; 68.75%) to apply quality principles to promote patient safety and positive individual and systems outcomes. These results are consistent with previous reporting years.<br/>                     2017-2018 alumni survey respondents (n = 14): &gt; 90% 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.<br/>                     2016-2017 alumni survey respondents (n = 23): 100% 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.<br/>                     2018-2019 action plan to survey 2018-2019 alumni during 2020, compare responses, and monitor for favorable and unfavorable trends was appropriate. (11/14/2020)<br/> <b>Related Documents:</b><br/> <a href="#">Report 2018-2019 MSN Alumni Survey.pdf</a></p> | <p><b>Action:</b> Survey 2019-2020 MSN graduates during 2021 and monitor for continuation of positive response trends. (11/14/2020)</p>              |
| <p><b>AD: Survey</b> - MSN Alumni Employer Survey--How well MSN graduates apply quality principles to promote patient safety and positive individual and systems outcomes (very poorly, poorly, well, very well).<br/> <b>Target:</b> 75% of respondents will report MSN graduates apply quality principles to promote patient safety and positive individual and systems outcomes well or very well.<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> Evaluation &amp; Study Committee</p>  | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     Employers of 2018-2019 graduates: 100% of employers (n = 10) reported MSN graduates performed this outcome well (10%) or very well (90%). This result is consistent with previous alumni surveys.<br/>                     100% of employers of 2017-2018, 2016-2017, and 2015-2016 graduates reported the MSN program graduates perform this outcome well or very well.<br/>                     2018-2019 action plan to survey employers of 2018-2019 MSN graduates during 2020 and monitor for continuation of positive response trends was appropriate. (11/14/2020)<br/> <b>Related Documents:</b><br/> <a href="#">Report Employers of 2018-2019 MSN Alumni.pdf</a></p>  | <p><b>Action:</b> Survey employers of 2019-2020 MSN graduates during 2021 and monitor for continuation of positive response trends. (11/14/2020)</p> |

**AU Outcome: MSN 4.0**

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

**AU Outcome: MSN 4.0**

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

**Outcome Status:** Active

| <i>Measures</i>  | <i>Results</i>   | <i>Actions</i>  |
|--|--|---|
| <p><b>SL: Didactic</b> - NU535: Evidence-Based Practice I: Finding and Appraising Evidence, Evidence Synthesis Assignment<br/> <b>Target:</b> At least 95% of student will achieve a score of 80% or higher on the Evidence Synthesis Assignment. (Target increased from 73% to 80% for 2020-2021)<br/> <b>Timeframe:</b> Annual<br/> <b>Responsible Parties:</b> NU535 Course Instructor, Graduate Curriculum Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     Summer 19: NA-course was not taught.<br/>                     Fall 19: 92.3% (12 of 13) achieved at least 73%.<br/>                     Spring 20: 100% (21 of 21) achieved at least 73%.<br/>                     This is the first academic year this course was taught, so there's no previous action plan or results on which to reflect. (05/20/2020)</p> | <p><b>Action:</b> To continue to meet this target with all groups during the 2020-2021 academic year, course faculty will</p> <ol style="list-style-type: none"> <li>1. Refine lecture about the types of sources that provide each level of evidence.</li> <li>2. Omit the Evidence Determination Worksheet (EDW) because students are relying on it to determine what type of source they are working with rather than learning the characteristics of different types of evidence.</li> <li>3. Provide a lecture about common statistical tests. (05/20/2020)</li> </ol> |
| <p><b>SL: Didactic</b> - NU536: Evidence-Based Practice II: Applying Evidence for Practice Change<br/> <b>Target:</b> 95% of students will achieve 80% or better on Paper 3: First Draft of MSN Grad Project Proposal.<br/> <b>Timeframe:</b> Annual<br/> <b>Responsible Parties:</b> NU536 Course Instructor, Graduate Curriculum Committee</p>   | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     Summer 19 : N/A -Course not taught<br/>                     Fall 19: N/A - Course not taught<br/>                     Spring 20: 100% (5 of 5) achieved an 80%<br/>                     This is the first year course was taught, so there are no results from a previous reporting year to compare and no action plan to evaluate. (07/27/2020)</p>           | <p><b>Action:</b> Faculty will keep the same general course structure. However, based on student feedback, will consider individual or group meeting by midterm to assure each student is on track with their practice change ideas. Also provide Panopto overview of graduate project process, course expectations, and expectations for graduate project proposal. (07/27/2020)</p>   |
| <p><b>SL: Didactic</b> - NU540 Preliminary</p>   | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p>   | <p><b>Action:</b> Faculty will offer</p>  |

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

**AU Outcome: MSN 4.0**

| <i>Measures</i>  | <i>Results</i>   | <i>Actions</i>   |
|--|--|--|
| <p>Literature Review assignment<br/> <b>Target:</b> 95% of students achieve 73% or better on Preliminary Literature Review assignment<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> Graduate Curriculum Committee</p>   | <p><b>Target Met:</b> Yes<br/>                     Summer 2019 - N/A Course not offered<br/>                     Fall 2019 - 100% (14 of 14) achieved at least 73%<br/>                     Spring 2020 - 100% (11 out 11) achieved at least 73%</p> <p>Reflection on previous year results and action plan:<br/>                     Results are consistent with previous year.<br/>                     The action plan from last year (offering the assignments in written and oral format) was appropriate as indicated by student success. (07/16/2020)</p>   | <p>assignments in written format with updated rubrics that are streamlined with all other assignments. (07/16/2020)</p>                              |
| <p><b>AD: Survey - MSN Alumni Survey--</b> How well MSN graduates perceive that their MSN education prepared them to use scholarly inquiry and evidence to advance the practice of nursing (very poorly, poorly, well, very well).<br/> <b>Target:</b> 75% of respondents will report feeling well or very well prepared to use scholarly inquiry and evidence to advance the practice of nursing.<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> Evaluation &amp; Study Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     2018-2019 alumni survey respondents (n = 16): &gt;90% reported their MSN education prepared them well (3; 18.75%) or very well (12; 75%) to use scholarly inquiry and evidence to advance the practice of nursing; 1 respondent reported "poorly." These results are consistent with previous reporting years.<br/>                     2017-2018 alumni survey respondents (n = 14): &gt;90% reported their MSN education prepared them well (28.57) or very well (64.29%) to use scholarly inquiry and evidence to advance the practice of nursing.<br/>                     2016-2017 alumni survey respondents (n = 23): 100% 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.<br/>                     2018-2019 action plan to survey 2018-2019 alumni during 2020, compare responses, and monitor for favorable and unfavorable trends was appropriate. (11/14/2020)<br/> <b>Related Documents:</b><br/> <a href="#">Report 2018-2019 MSN Alumni Survey.pdf</a></p> | <p><b>Action:</b> Survey 2019-2020 MSN graduates during 2021 and monitor for continuation of positive response trends. (11/14/2020)</p>              |
| <p><b>AD: Survey - MSN Alumni Employer Survey--</b>How well employers perceive that MSN graduates use scholarly inquiry and evidence to advance the practice of nursing (very poorly, poorly, well, very well).<br/> <b>Target:</b> 75% of respondents will report that MSN graduates use</p>  | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     Employers of 2018-2019 graduates: 100% of employers (n = 10) reported MSN graduates performed this outcome well (10%) or very well (90%). This result is consistent with previous alumni surveys.<br/>                     100% of employers of 2015-2016, 2016-2017, and 2017-2018 graduates reported graduates performed this outcome well or very well.</p>   | <p><b>Action:</b> Survey employers of 2019-2020 MSN graduates during 2021 and monitor for continuation of positive response trends. (11/14/2020)</p> |

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

**AU Outcome: MSN 4.0**

| <i>Measures</i>   | <i>Results</i>  | <i>Actions</i> |
|---|---|----------------|
| <p>scholarly inquiry and evidence to advance the practice of nursing well or very well.<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> Evaluation &amp; Study Committee</p> | <p>2018-2019 action plan to survey employers of 2018-2019 MSN graduates during 2020 and monitor for continuation of positive response trends was appropriate. (11/14/2020)<br/> <b>Related Documents:</b><br/> <a href="#">Report Employers of 2018-2019 MSN Alumni.pdf</a></p> |                |

**AU Outcome: MSN 5.0**

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

**Outcome Status:** Active

| <i>Measures</i>   | <i>Results</i>  | <i>Actions</i>   |
|---|---|--|
| <p><b>SL: Didactic</b> - NU541 Health Care Informatics Annotated Bibliography and Critical Response assignment<br/> <b>Target:</b> 95% of students will achieve an average of 80% or higher on the Annotated Bibliography and Critical Response assignment. (Target increased from 73% to 80% for 2020-2021)<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> Graduate Curriculum Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     Summer 19- N/A Course was not taught<br/>                     Fall 19 - 100% (16 of 16) achieved at least 73%<br/>                     Spring 2020 - 97.4% (38 of 39) achieved at least a 73%<br/><br/>                     This is the first reporting year for the measure so there are no previous results to compare and not previous action plan to evaluate. (07/15/2020)</p>   | <p><b>Action:</b> To meet this target with all groups next year, course faculty will provide a thorough explanation of the assignment instructions. The assignment instructions will be reviewed for clarity. (07/15/2020)</p> |
| <p><b>AD: Survey</b> - 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).<br/> <b>Target:</b> 75% of respondents will report feeling well or very well</p>   | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     2018-2019 alumni survey respondents (n = 16): 100% reported their MSN education prepared them well (43.75%) or very well (56.25%) to use informatics and healthcare technologies to enhance patient care and to improve healthcare systems. These results are consistent with previous reporting years.<br/>                     2017-2018 alumni survey respondents (n = 14): 75% 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.</p> | <p><b>Action:</b> Survey 2019-2020 MSN graduates during 2021 and monitor for continuation of positive response trends. (11/14/2020)</p>  |

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

**AU Outcome: MSN 5.0**

| <i>Measures</i>  | <i>Results</i>   | <i>Actions</i>   |
|--|--|--|
| <p>prepared to use informatics and healthcare technologies to enhance patient care and to improve healthcare systems.<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> Evaluation &amp; Study Committee</p>  | <p>2016-2017 alumni survey respondents (n = 23): &gt;88% 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.<br/>                     2018-2019 action plan to survey 2018-2019 alumni during 2020, compare responses, and monitor for favorable and unfavorable trends was appropriate. (11/14/2020)<br/> <b>Related Documents:</b><br/> <a href="#">Report 2018-2019 MSN Alumni Survey.pdf</a></p>  |  |
| <p><b>AD: Survey</b> - MSN Alumni Employer Survey--How 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).<br/> <b>Target:</b> 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.<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> Evaluation &amp; Study Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     Employers of 2018-2019 graduates: 100% of employers (n = 10) reported the graduate performs this outcome well (20%) or very well (80%).<br/>                     These results and the results of previous employer surveys indicate employers' perceptions of the Allen College MSN graduate consistently meet or exceed the target.<br/>                     Employers of 2017-2018 graduates: 100% of employers (n = 5) reported the graduate performs this outcome well (40%) or very well (60%).<br/>                     Employers of 2015-2016 and 2016-2017 graduates: 83% of 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.<br/>                     2018-2019 action plan to survey employers of 2018-2019 MSN graduates during 2020 and monitor for continuation of positive response trends was appropriate. (11/14/2020)<br/> <b>Related Documents:</b><br/> <a href="#">Report Employers of 2018-2019 MSN Alumni.pdf</a></p> | <p><b>Action:</b> Survey employers of 2019-2020 MSN graduates during 2021 and monitor for continuation of positive response trends. (11/14/2020)</p> |

**AU Outcome: MSN 6.0**

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

**Outcome Status:** Active

| <i>Measures</i>   | <i>Results</i>   | <i>Actions</i>  |
|---|--|---|
| <p><b>SL: Didactic</b> - NU520 Policy, Organization, and Financing of Health Care Paper III: Health Care Policy Brief</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     Summer 19: 95% (19 of 20) achieved at least 73%<br/>                     Fall 19: 97% (35 of 36) achieved at least 73%</p> | <p><b>Action:</b> Faculty will continue to use the Issue Brief template and rubric. In addition, Panopto recording will be consistently used to clarify</p> |

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

**AU Outcome: MSN 6.0**

| <i>Measures</i>  | <i>Results</i>   | <i>Actions</i>   |
|--|--|--|
| <p><b>Target:</b> 95% of students achieve 80% or higher on Paper III: Health Care Policy Brief. (Target increased from 73% to 80% for 2020-2021)<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> Graduate Curriculum Committee</p>  | <p>Spring 20: 100% (16 of 16) achieved at 73%</p> <p>Reflection on previous year results and action plan:<br/>                     Results similar to previous year. Overall 97.2% of students met the established target. Faculty used the newly developed Issue Brief (Paper III) template and rubric, which students found helpful. Students also commented on helpfulness of feedback on written assignments.<br/>                     (07/27/2020)</p>  | <p>assignment expectations, and faculty will consider placement of info on written assignments earlier in the semester to facilitate earlier student choice of topics.<br/>                     (07/27/2020)</p> |
| <p><b>AD: Survey - MSN Alumni Survey--</b> 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).<br/> <b>Target:</b> 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.<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> Evaluation &amp; Study Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     2018-2019 alumni survey respondents (n = 16): 87.5% reported their MSN education prepared them well (37.5%) or very well (50%) to employ advocacy strategies to influence health policy and to improve outcomes of care. 2 reported "poorly." These results are consistent with previous reporting years.<br/>                     2017-2018 alumni survey respondents (n = 14): &gt;88% 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.<br/>                     2016-2017 alumni survey respondents (n = 23): &gt;90% 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.<br/>                     2018-2019 action plan to survey 2018-2019 alumni during 2020, compare responses, and monitor for favorable and unfavorable trends was appropriate. (11/14/2020)<br/> <b>Related Documents:</b><br/> <a href="#">Report 2018-2019 MSN Alumni Survey.pdf</a></p> | <p><b>Action:</b> Survey 2019-2020 MSN graduates during 2021 and monitor for continuation of positive response trends. (11/14/2020)</p>  |
| <p><b>AD: Survey - MSN Alumni Employer Survey--</b>How 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).<br/> <b>Target:</b> 75% of respondents will that MSN graduates employ advocacy strategies to influence health policy</p>   | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     Employers of 2018-2019 graduates (n = 10): 100% reported graduates perform outcome well (10%) or very well (90%).<br/>                     These results and the results of previous employer surveys indicate employers' perceptions of the Allen College MSN graduate consistently meet or exceed the target.<br/>                     Employers of 2015-2016, 2016-2017, and 2017-2018 graduates: 100% of employers reported the MSN program graduate performs this outcome well or very well .<br/>                     2018-2019 action plan to survey employers of 2018-2019 MSN graduates during 2020 and monitor for continuation of positive response trends was appropriate. (11/14/2020)</p>  | <p><b>Action:</b> Survey employers of 2019-2020 MSN graduates during 2021 and monitor for continuation of positive response trends. (11/14/2020)</p>   |

College Goal 1 - Allen College is committed to preparing outstanding healthcare practitioners who are committed to lifelong learning.

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

**AU Outcome: MSN 6.0**

| <i>Measures</i>  | <i>Results</i>  | <i>Actions</i> |
|--|---|----------------|
| and to improve outcomes of care well or very well.<br><b>Timeframe:</b> Annually<br><b>Responsible Parties:</b> Evaluation & Study Committee | <b>Related Documents:</b><br><a href="#">Report Employers of 2018-2019 MSN Alumni.pdf</a> |                |

**AU Outcome: MSNO 7.0**

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

**Outcome Status:** Active

| <i>Measures</i>  | <i>Results</i>   | <i>Actions</i>   |
|--|--|--|
| <b>SL: Clinical evaluation tool</b> - Clinical Evaluations-Collaboration Criterion<br><b>Target:</b> 95% of students achieve an acceptable level (1) on "Collaboration" criterion on Faculty Clinical Evaluation tool.<br><b>Timeframe:</b> Annually<br><b>Responsible Parties:</b> MSN Clinical Coordinator / Graduate Curriculum Committee | <b>Reporting Year:</b> 2019 - 2020 (Year 2)<br><b>Target Met:</b> Yes<br>Target met with all but NU 605C Fall 2019 (12 of 13, 92%)<br>See attached report - 2019-2020 CAP Summary MSN Outcomes 1,3,7,8<br><br>Reflection on results and action plan from previous year:<br>Results are consistent with previous reporting year (2018-2019).<br>Measure reviewed with Graduate Curriculum committee and will continue to use. (09/14/2020)<br><b>Related Documents:</b><br><a href="#">2019-2020 CAP Summary MSN Outcomes 1,3,7,8.pdf</a> | <b>Action:</b> Will review with Curriculum committee October 2020. Course faculty will review preceptor evaluations and/or assess student performance with OSCE simulation experiences. Contact with preceptors and students will be maintained throughout the course to evaluate progress toward outcomes. (09/14/2020)           |
| <b>AD: Report - Internal</b> - Graduate Project Evaluation Form - Item #7<br>Collaborate within interprofessional teams.<br><br><b>Target:</b> 100% of students achieve an acceptable level (1) on both paper and presentation<br><b>Timeframe:</b> Annually<br><b>Responsible Parties:</b> Assistant Dean, Graduate Nursing / Graduate      | <b>Reporting Year:</b> 2019 - 2020 (Year 2)<br><b>Target Met:</b> Yes<br>49 of 49 (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. (12/08/2020)   | <b>Action:</b> 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 project proposals. This should ensure a high-quality presentation and summary paper |

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

**AU Outcome: MSNO 7.0**

| Measures   | Results  | Actions  |
|--|--|--|
| Curriculum Committee   |  | 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. (12/08/2020) |
| <p><b>AD: Survey</b> - MSN Alumni Survey-- How well MSN graduates perceive that their MSN education prepared them to collaborate within inter-professional teams to manage and improve health care services for individuals, families and populations (very poorly, poorly, well, very well).<br/> <b>Target:</b> 75% of respondents will report feeling well or very well prepared to collaborate within inter-professional teams to manage and improve health care services for individuals, families and populations.<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> Evaluation &amp; Study Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     2017-2018 alumni survey respondents (n = 16): &gt; 90% reported their MSN education prepared them well (25%) or very well (28.57%) to collaborate within inter-professional teams to manage and improve health care services for individuals, families and populations. 1 reported "poorly." Results are consistent with previous reporting years.<br/>                     2017-2018 alumni survey respondents (n = 14): &gt; 85% reported their MSN education prepared them well (57.14%) or very well (68.75%) to collaborate within inter-professional teams to manage and improve health care services for individuals, families and populations.<br/>                     2016-2017 alumni survey respondents (n = 23): &gt;90% 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.<br/>                     2018-2019 action plan to survey 2018-2019 alumni during 2020, compare responses, and monitor for favorable and unfavorable trends was appropriate. (11/14/2020)<br/> <b>Related Documents:</b><br/> <a href="#">Report 2018-2019 MSN Alumni Survey.pdf</a></p> | <p><b>Action:</b> Survey 2019-2020 MSN graduates during 2021 and monitor for continuation of positive response trends. (11/14/2020)</p>                      |
| <p><b>AD: Survey</b> - MSN Alumni Employer Survey--How 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).<br/> <b>Target:</b> 75% of respondents will report that MSN graduates collaborate within inter-professional</p>   | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     Employers of 2018-2019 graduates (n = 10): 100% reported graduates perform outcome well (10%) or very well (90%).<br/>                     These results and the results of previous employer surveys indicate employers' perceptions of the Allen College MSN graduate consistently meet or exceed the target.<br/>                     Employers of 2015-2016, 2016-2017, and 2017-2018 graduates: 100% of employers reported the MSN program graduate performs this outcome well or very well .<br/>                     2018-2019 action plan to survey employers of 2018-2019 MSN graduates during 2020 and monitor for continuation of positive response trends was appropriate. (11/14/2020)<br/> <b>Related Documents:</b></p>   | <p><b>Action:</b> Survey employers of 2019-2020 MSN graduates during 2021 and monitor for continuation of positive response trends. (11/14/2020)</p>         |

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

**AU Outcome: MSNO 7.0**

| <i>Measures</i>   | <i>Results</i>   | <i>Actions</i> |
|---|--|----------------|
| teams to manage and improve health care services for individuals, families and populations well or very well.<br><b>Timeframe:</b> Annually<br><b>Responsible Parties:</b> Evaluation & Study Committee | <a href="#">Report Employers of 2018-2019 MSN Alumni.pdf</a> |                |

**AU Outcome: MSN 8.0**

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

**Outcome Status:** Active

| <i>Measures</i>  | <i>Results</i>   | <i>Actions</i>  |
|--|--|---|
| <b>SL: Clinical evaluation tool</b> - Clinical Evaluations-"Clinical Interventions" criterion<br><b>Target:</b> 95% of students achieve an acceptable level (1) on "Clinical Interventions" criterion on Faculty Clinical Evaluation tool.<br><b>Timeframe:</b> Annually<br><b>Responsible Parties:</b> MSN Clinical Coordinator / Graduate Curriculum Committee | <b>Reporting Year:</b> 2019 - 2020 (Year 2)<br><b>Target Met:</b> Yes<br>Target met with all but NU 605C Fall 2019 (12 of 13, 92%)<br>See attached report- 2019-2020 CAP Summary MSN Outcomes 1, 3, 7, 8<br><br>Reflection on results and action plan from previous year:<br>Results are consistent with previous reporting year (2018-2019).<br>Measure reviewed with Graduate Curriculum committee and will continue to use. (09/14/2020)<br><b>Related Documents:</b><br><a href="#">2019-2020 CAP Summary MSN Outcomes 1,3,7,8.pdf</a> | <b>Action:</b> Reviewed with curriculum 9/2020. Criterion will change to Patient-Centered Care for 2020-2021<br>Course faculty will review preceptor evaluations and/or assess student performance with OSCE simulation experiences. Contact with preceptors and students will be maintained throughout the course to evaluate progress toward outcomes. (09/14/2020) |
| <b>SL: Didactic</b> - NU530 Population Health Issues Paper<br><b>Target:</b> 95% of students will achieve 80% or better on Population Health Issues Paper. (Target increased from 73% to 80% for 2020-2021)<br><b>Timeframe:</b> Annually  | <b>Reporting Year:</b> 2019 - 2020 (Year 2)<br><b>Target Met:</b> Yes<br>Summer '19: 97% (38/39) achieved at least 73% (No PGC students this semester).<br>Fall '19: 94% (15/16) achieved at least 73% (4 PGC students not counted).<br>Spring '20: 100% (31/31) achieved at least 73% (No PGC students this semester).<br><br>These results are consistent with achievement during the 2018-2019 academic year, when  | <b>Action:</b> To meet this target during 2020-2021, faculty will continue thoroughly explaining the assignment instructions and expectations throughout the semester and providing prompt  |

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

**AU Outcome: MSN 8.0**

| <i>Measures</i>  | <i>Results</i>   | <i>Actions</i>   |
|--|--|--|
| <p><b>Responsible Parties:</b> Graduate Curriculum Committee</p>   | <p>100% (40/40) and 89% (16/18) achieved at least 73% fall '18 and spring '19, respectively (course not taught summer '18).</p> <p>To facilitate achievement of the target during 2019-2020, faculty provided instruction and explanations of paper expectations throughout the semester and responded promptly to questions about the assignment in the "Ask the Professor" discussion forum. Consistent achievement of the target the past 3 semesters indicates this action plan was appropriate. (06/24/2020)</p>  | <p>responses to questions about the assignment in the "Ask the Professor" discussion forum. Faculty will also use student comments from the course evaluations to make adjustments intended to assist students in achieving at least 73%. The paper instructions will be reviewed for clarity and an example of a table will be provided. (06/24/2020)</p> |
| <p><b>AD: Survey - MSN Alumni Survey--</b> 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).<br/> <b>Target:</b> 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.<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> Evaluation &amp; Study Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                 2018-2019 alumni survey respondents (n = 16): 100% reported their MSN education prepared them well (37.5%) or very well (62.5%) to integrate patient-centered and culturally responsive strategies into the delivery of clinical prevention, health promotion, and population-focused services. These results are consistent with previous reporting years.<br/>                 2017-2018 alumni survey respondents (n = 14): &gt; 75% 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.<br/>                 2016-2017 alumni survey respondents (n = 23): &gt;90% 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.<br/>                 2018-2019 action plan to survey 2018-2019 alumni during 2020, compare responses, and monitor for favorable and unfavorable trends was appropriate. (11/14/2020)<br/> <b>Related Documents:</b><br/> <a href="#">Report 2018-2019 MSN Alumni Survey.pdf</a></p> | <p><b>Action:</b> Survey 2019-2020 MSN graduates during 2021 and monitor for continuation of positive response trends. (11/14/2020)</p>  |
| <p><b>AD: Survey - MSN Alumni Employer Survey--</b>How well employers</p>  | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p>   | <p><b>Action:</b> Survey employers of 2019-</p>  |

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

**AU Outcome: MSN 8.0**

| <i>Measures</i>   | <i>Results</i>  | <i>Actions</i>   |
|---|---|--|
| <p>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).<br/> <b>Target:</b> 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.<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> Evaluation &amp; Study Committee</p> | <p><b>Target Met:</b> Yes<br/>                     Employers of 2018-2019 graduates (n = 10): 100% reported graduates perform outcome well (20%) or very well (80%).<br/>                     These results and the results of previous employer surveys indicate employers' perceptions of the Allen College MSN graduate consistently meet or exceed the target.<br/>                     Employers of 2015-2016, 2016-2017, and 2017-2018 graduates: 100% of employers reported the MSN program graduate performs this outcome well or very well .<br/>                     2018-2019 action plan to survey employers of 2018-2019 MSN graduates during 2020 and monitor for continuation of positive response trends was appropriate. (11/14/2020)<br/> <b>Related Documents:</b><br/> <a href="#">Report Employers of 2018-2019 MSN Alumni.pdf</a></p> | <p>2020 MSN graduates during 2021 and monitor for continuation of positive response trends. (11/14/2020)</p> |

**Program (Nursing) - Post-Graduate Certificate APRN**

**AU Outcome: PGC 1.0**

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

**Outcome Status:** Active

| <i>Measures</i>   | <i>Results</i>  | <i>Actions</i>  |
|---|---|---|
| <p><b>SL: Clinical</b> - Clinical evaluation tool<br/>                     Clinical Evaluations-“Critical Thinking” criterion<br/> <b>Target:</b> 95% of students achieve an acceptable level on all criteria on “Critical thinking” criterion on the Faculty Clinical Evaluation Tool.<br/> <b>Timeframe:</b> Annually</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     This is the first academic year for the measure. No previous results to compare or action plan to evaluate.<br/>                     Target met - See attached report- 2019-2020 CAP Summary PGC Outcomes 1,2,3,4 (09/14/2020)<br/> <b>Related Documents:</b></p> | <p><b>Action:</b> New measure - Will review with Curriculum committee October 2020.<br/>                     Course faculty will review preceptor evaluations and/or assess student performance with OSCE simulation experiences.</p> |

**Program (Nursing) - Post-Graduate Certificate APRN**

**AU Outcome: PGC 1.0**

| <i>Measures</i>  | <i>Results</i>  | <i>Actions</i>  |
|--|---|---|
| <p><b>Responsible Parties:</b> Director MSN Program / Graduate Curriculum Committee</p>  | <p><a href="#">2019-2020 CAP Summary PGC Outcomes 1,2 3, 4.pdf</a></p>  | <p>Contact with preceptors and students will be maintained throughout the course to evaluate progress toward outcomes. (09/14/2020)</p> |
| <p><b>AD: Survey</b> - 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).<br/> <b>Target:</b> 75% of respondents will 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.<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> Evaluation &amp; Study Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     2018-2019 graduates: 100% of graduates reported their MSN education prepared them well (50%) or very well (50%) to demonstrate this outcome.<br/>                     There are no previous results to compare. There is no previous action plan to evaluate. (11/15/2020)<br/> <b>Related Documents:</b><br/> <a href="#">Report 2018-2019 PGC Alumni Survey.pdf</a></p> | <p><b>Action:</b> Survey employers of 2019-2020 MSN-PGC graduates during 2021 and monitor for response trends. (11/15/2020)</p>         |
| <p><b>AD: Survey</b> - MSN Graduate Employer Survey--How 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).</p>   | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     Survey of employers of 2018-2019 graduates: 100% of employers reported the MSN-PGC graduate performs this outcome well.<br/>                     There are no previous results to compare. There is no previous action plan to evaluate. (11/15/2020)<br/> <b>Related Documents:</b><br/> <a href="#">Report Employers of 2018-2019 PGC Alumni.pdf</a></p>                | <p><b>Action:</b> Survey employers of 2019-2020 MSN-PGC graduates during 2021 and monitor for response trends. (11/15/2020)</p>         |

**Program (Nursing) - Post-Graduate Certificate APRN**

**AU Outcome: PGC 1.0**

| <i>Measures</i>  | <i>Results</i> | <i>Actions</i> |
|--|----------------|----------------|
| <p><b>Target:</b> 75% of employers will report that MSN graduates provide organizational and systems leadership in practice, service, and scholarship well or very well.</p> <p><b>Timeframe:</b> Annually</p> <p><b>Responsible Parties:</b> Evaluation &amp; Study Committee, CIRE</p> |                |                |

**AU Outcome: PGC 2.0**

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

**Outcome Status:** Active

| <i>Measures</i>   | <i>Results</i>  | <i>Actions</i>   |
|---|---|--|
| <p><b>SL: Clinical evaluation tool</b> - Clinical evaluation tool Clinical Evaluations- "Safety Outcomes" criterion</p> <p><b>Target:</b> 95% of students achieve an acceptable level on "Safety/Outcomes" criterion on Faculty Clinical Evaluation Tool.</p> <p><b>Timeframe:</b> Annually</p> <p><b>Responsible Parties:</b> Director MSN Program / Graduate Curriculum Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> <p><b>Target Met:</b> Yes</p> <p>This is the first academic year for the measure. No previous results to compare or action plan to evaluate.</p> <p>Target met - See attached report- 2019-2020 CAP Summary PGC Outcomes 1, 2, 3, 4 (09/21/2020)</p> <p><b>Related Documents:</b></p> <p><a href="#">2019-2020 CAP Summary PGC Outcomes 1,2 3, 4.pdf</a></p> | <p><b>Action:</b> New measure - Will review with Curriculum committee October 2020.</p> <p>Course faculty will review preceptor evaluations and/or assess student performance with OSCE simulation experiences. Contact with preceptors and students will be maintained throughout the course to evaluate progress toward outcomes. (09/21/2020)</p> |
| <p><b>AD: Survey</b> - 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,</p>  | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> <p><b>Target Met:</b> Yes</p> <p>2018-2019 graduates: 100% of graduates reported their MSN education prepared them very well to demonstrate this outcome.</p> <p>There are no previous results to compare. There is no previous action plan to evaluate. (11/15/2020)</p> <p><b>Related Documents:</b></p>   | <p><b>Action:</b> Survey employers of 2019-2020 MSN-PGC graduates during 2021 and monitor for response trends. (11/15/2020)</p>  |

College Goal 1 - Allen College is committed to preparing outstanding healthcare practitioners who are committed to lifelong learning.

**Program (Nursing) - Post-Graduate Certificate APRN**

**AU Outcome: PGC 2.0**

| <i>Measures</i>   | <i>Results</i>  | <i>Actions</i>  |
|---|---|---|
| <p>very well).<br/> <b>Target:</b> 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.<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> Evaluation &amp; Study Committee</p>  | <p><a href="#">Report 2018-2019 PGC Alumni Survey.pdf</a></p>   |   |
| <p><b>AD: Survey</b> - MSN Alumni Employer Survey--How well MSN graduates apply quality principles to promote patient safety and positive individual and systems outcomes (very poorly, poorly, well, very well).<br/> <b>Target:</b> 75% of respondents will report MSN graduates apply quality principles to promote patient safety and positive individual and systems outcomes well or very well.<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> Evaluation &amp; Study Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     Survey of employers of 2018-2019 graduates: 100% of employers reported the MSN-PGC graduate performs this outcome well.<br/>                     There are no previous results to compare. There is no previous action plan to evaluate.<br/>                     (11/15/2020)<br/> <b>Related Documents:</b><br/> <a href="#">Report Employers of 2018-2019 PGC Alumni.pdf</a></p> | <p><b>Action:</b> Survey employers of 2019-2020 MSN-PGC graduates during 2021 and monitor for response trends. (11/15/2020)</p> |

**AU Outcome: PGC 3.0**

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

**Outcome Status:** Active

| <i>Measures</i>   | <i>Results</i>                                     | <i>Actions</i>                                  |
|---|--|---|
| <p><b>SL: Clinical evaluation tool</b> - Clinical evaluation tool Clinical Evaluations-</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> | <p><b>Action:</b> New measure - Will review</p> |

**Program (Nursing) - Post-Graduate Certificate APRN**

**AU Outcome: PGC 3.0**

| <i>Measures</i>  | <i>Results</i>  | <i>Actions</i>  |
|--|---|---|
| <p>“Collaboration” criterion<br/> <b>Target:</b> 95% of students achieve an acceptable level on “Collaboration” criterion on Faculty Clinical Evaluation Tool.<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> Director MSN Program / Graduate Curriculum Committee</p>   | <p><b>Target Met:</b> Yes<br/>                     This is the first academic year for the measure. No previous results to compare or action plan to evaluate.<br/>                     Target met - See 2019-2020 CAP Summary PGC Outcomes 1, 2, 3, 4 (09/21/2020)<br/> <b>Related Documents:</b><br/> <a href="#">2019-2020 CAP Summary PGC Outcomes 1,2 3, 4.pdf</a></p>   | <p>with Curriculum committee October 2020.<br/>                     Course faculty will review preceptor evaluations and/or assess student performance with OSCE simulation experiences. Contact with preceptors and students will be maintained throughout the course to evaluate progress toward outcomes. (09/21/2020)</p> |
| <p><b>AD: Survey - MSN Alumni Survey--</b> How well MSN graduates perceive that their MSN education prepared them to collaborate within inter-professional teams to manage and improve health care services for individuals, families and populations (very poorly, poorly, well, very well).<br/> <b>Target:</b> 75% of respondents will report feeling well or very well prepared to collaborate within inter-professional teams to manage and improve health care services for individuals, families and populations.<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> Evaluation &amp; Study Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     2018-2019 graduates. 100% of graduates reported their MSN education prepared them very well to demonstrate this outcome.<br/>                     There are no previous results to compare. There is no previous action plan to evaluate. (11/15/2020)<br/> <b>Related Documents:</b><br/> <a href="#">Report 2018-2019 PGC Alumni Survey.pdf</a></p> | <p><b>Action:</b> Survey employers of 2019-2020 MSN-PGC graduates during 2021 and monitor for response trends. (11/15/2020)</p>   |
| <p><b>AD: Survey - MSN Alumni Employer Survey--</b>How well employers perceive that MSN graduates collaborate within interprofessional teams to manage and improve</p>   | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     Survey of employers of 2018-2019 graduates: 100% of employers reported the MSN-PGC graduate performs this outcome very well.<br/>                     There are no previous results to compare. There is no previous action plan to evaluate.</p>   | <p><b>Action:</b> Survey employers of 2019-2020 MSN-PGC graduates during 2021 and monitor for response trends. (11/15/2020)</p>   |

**Program (Nursing) - Post-Graduate Certificate APRN**

**AU Outcome: PGC 3.0**

| <i>Measures</i>  | <i>Results</i>  | <i>Actions</i> |
|--|---|----------------|
| health care services for individuals, families and populations (very poorly, poorly, well, very well).<br><b>Target:</b> 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.<br><b>Timeframe:</b> Annually<br><b>Responsible Parties:</b> Evaluation & Study Committee | (11/15/2020)<br><b>Related Documents:</b><br><a href="#">Report Employers of 2018-2019 PGC Alumni.pdf</a> |                |

**AU Outcome: PGC 4.0**

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

**Outcome Status:** Active

| <i>Measures</i>  | <i>Results</i>  | <i>Actions</i>  |
|--|---|---|
| <b>SL: Clinical evaluation tool</b> - Clinical evaluation tool Clinical Evaluations- "Clinical interventions" criterion<br><b>Target:</b> 95% of students achieve an acceptable level on all criteria on "Clinical interventions" criterion on the Faculty Clinical Evaluation Tool.<br><b>Timeframe:</b> Annually<br><b>Responsible Parties:</b> Director MSN Program / Graduate Curriculum Committee | <b>Reporting Year:</b> 2019 - 2020 (Year 2)<br><b>Target Met:</b> Yes<br>This is the first academic year for the measure. No previous results to compare or action plan to evaluate.<br>Target Met - See 2019-2020 CAP Summary PGC Outcomes 1, 2, 3, 4 (09/21/2020)<br><b>Related Documents:</b><br><a href="#">2019-2020 CAP Summary PGC Outcomes 1,2 3, 4.pdf</a> | <b>Action:</b> New measure - Will review with Curriculum committee October 2020.<br>Course faculty will review preceptor evaluations and/or assess student performance with OSCE simulation experiences. Contact with preceptors and students will be maintained throughout the course to evaluate progress toward outcomes. (09/21/2020) |
| <b>AD: Survey</b> - MSN Alumni Survey--  | <b>Reporting Year:</b> 2019 - 2020 (Year 2)   | <b>Action:</b> Survey employers of 2019-  |

**Program (Nursing) - Post-Graduate Certificate APRN**

**AU Outcome: PGC 4.0**

| <i>Measures</i>   | <i>Results</i>   | <i>Actions</i>  |
|---|--|---|
| <p>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)<br/> <b>Target:</b> 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.<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> Evaluation &amp; Study Committee</p> | <p><b>Target Met:</b> Yes<br/>                     2018-2019 graduates:100% of graduates reported their MSN education prepared them very well to demonstrate this outcome.<br/>                     There are no previous results to compare. There is no previous action plan to evaluate.<br/>                     (11/15/2020)<br/> <b>Related Documents:</b><br/> <a href="#">Report 2018-2019 PGC Alumni Survey.pdf</a></p>   | <p>2020 MSN-PGC graduates during 2021 and monitor for response trends. (11/15/2020)</p>   |
| <p><b>AD: Survey - MSN Alumni Employer Survey</b>--How 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).<br/> <b>Target:</b> 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.</p>  | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     Survey of employers of 2018-2019 graduates: 100% of employers reported the MSN-PGC graduate performs this outcome very well.<br/>                     There are no previous results to compare. There is no previous action plan to evaluate.<br/>                     (11/15/2020)<br/> <b>Related Documents:</b><br/> <a href="#">Report Employers of 2018-2019 PGC Alumni.pdf</a></p> | <p><b>Action:</b> Survey employers of 2019-2020 MSN-PGC graduates during 2021 and monitor for response trends. (11/15/2020)</p> |

College Goal 1 - Allen College is committed to preparing outstanding healthcare practitioners who are committed to lifelong learning.

**Program (Nursing) - Post-Graduate Certificate APRN**

---

**AU Outcome: PGC 4.0**

| <i>Measures</i>  | <i>Results</i> | <i>Actions</i> |
|--|----------------|----------------|
| <b>Timeframe:</b> Annually<br><b>Responsible Parties:</b> Evaluation & Study Committee |                |                |

College Goal 2 - Allen College is committed to developing and implementing accessible academic programs of excellence that are responsive to the workforce needs of Iowa and the nation.

## Admin - Administration

### AU Outcome: Admin 4.0

Allen College has appropriate technology for facilities, resources, and education services.

**Outcome Status:** Active

| <i>Measures</i>   | <i>Results</i>  | <i>Actions</i>   |
|---|---|--|
| <p><b>AD: Report - Internal</b> - Number of FTEs allocated for instructional technology, media services, and, instructional, designer.<br/> <b>Target:</b> College provides at least 2.0 FTEs to support faculty technology needs.<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> DOBAS</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     The college currently has 3.0 full time equivalents (FTEs) to support the college technology needs which meets the target of 2 FTEs. Two are specifically instructional technology, one is an instructional designer and the other an AV specialist, and both are supervised by the Provost. There is one SIS coordinator that writes scripts for our student information system, CAMS who is supervised by the Executive Director of Business &amp; Finance. The SIS Coordinator also assists with behind the scenes scripts as needed for Blackboard. In 2018-19 total FTEs were 3.0. For 2019-20, the Provost completed the action recommended in the 2018-2019 plan of reviewing the instructional design and AV work volume and did not have sufficient need to request additional personnel for the upcoming 2021 calendar year. The Executive Director of Business &amp; Finance concurs with this assessment of sufficient college technology personnel given the workload of the SIS Coordinator as well. (11/11/2020)</p> | <p><b>Action:</b> Monitor work load of current technology staff and review prior to budget cycle 2022 and budget additional staff for calendar year 2022 if deemed necessary. (11/11/2020)</p> |
| <p><b>AD: Report - Internal</b> - Number of major requests by Allen College for hardware-software<br/> <b>Target:</b> 50% of requests approved<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> DOBAS</p>   | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     21/21 hardware/software request forms were approved for the 2019-20 academic year. This is 100%. When compared to the number of hardware/software requests for 2017-18, this is a 10.5% increase, which is consistent with prior year requests given the low volume. The results when compared to 2017-18 remained the same at 100%. Both years are still over the 50% approval target. (11/11/2020)</p>  | <p><b>Action:</b> Centralize hardware/software ticket entry through the SIS Coordinator, and review college IT compliance committee work and how it relates to this measure. (11/11/2020)</p>  |

### AU Outcome: Admin 5.0

Classroom and Lab facilities are available for students

**Outcome Status:** Active

| <i>Measures</i>   | <i>Results</i>   | <i>Actions</i>   |
|---|--|--|
| <p><b>AD: Survey</b> - Allen College Student Opinion Survey--Classrooms</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes</p> | <p><b>Action:</b> Continue to monitor and maintain classroom furniture and</p> |

College Goal 2 - Allen College is committed to developing and implementing accessible academic programs of excellence that are responsive to the workforce needs of Iowa and the nation.

## Admin - Administration

### AU Outcome: Admin 5.0

| Measures  | Results   | Actions   |
|---|---|---|
| <p><b>Target:</b> 80% of students report satisfied or very satisfied<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> Buildings &amp; Grounds</p>   | <p>Results from the Spring 2020 student opinion survey indicate 127/145 (87.59%) survey respondents indicated they were very satisfied or satisfied with the classrooms here at Allen College. This is an increase of 6.99% from 80.6% to 87.59% when compared to the spring 2018 student opinion survey. This indicates that the action plan proposed in 2018-2019 of continuing to monitor as we add new programs is effective. New classroom space is under construction for the DPT program at the time this report was submitted and those classrooms will be available for use in the 2020-2021 academic year (spring 2021 target). Other classrooms on campus are being evaluated for furniture and technology maintenance regularly to ensure they meet the needs of our students. (09/25/2020)</p> | <p>technology to ensure classrooms meet the needs of our students. (09/25/2020)</p>   |
| <p><b>AD: Survey - Allen College Student Opinion Survey--Laboratories</b><br/> <b>Target:</b> 80% of students report satisfied or very satisfied<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> Buildings &amp; Grounds</p>       | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/> Results from the Spring 2020 student opinion survey indicate 124/145 (85.52%) survey respondents indicated they were very satisfied or satisfied with the laboratories here at Allen College. When compared to the spring 2018 student opinion survey this is an increase of 10.52% from 75% to 85.52%. The Barrett Forum nursing skills lab was updated in 2019-20; a wall was removed, the flooring replaced, and new bedside tables and shades were installed. This indicates that the action plan for 2018-2019 of continuing to monitor and update labs and equipment as needed is effective. (09/25/2020)</p>   | <p><b>Action:</b> We will continue to monitor and update labs and equipment as needed. (09/25/2020)</p>   |
| <p><b>AD: Survey - Allen College Student Opinion Survey--Parking Facilities</b><br/> <b>Target:</b> 80% of students report satisfied or very satisfied<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> Buildings &amp; Grounds</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> NA<br/> This question was not asked on the Spring 2020 student survey. (09/25/2020)</p>  |   |
| <p><b>AD: Survey - Allen College Student Opinion Survey--Study Areas</b><br/> <b>Target:</b> 80% of students report satisfied or very satisfied<br/> <b>Timeframe:</b> Annually</p>   | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> No<br/> Results from Spring 2020 Student Opinion Survey indicate 105/145 (72.41%) survey respondents were aware of/had used the study areas were satisfied (73) or very satisfied (32) with the study areas provided on the Allen College campus. This is a decrease in satisfaction</p>   | <p><b>Action:</b> Although we identified private spaces on campus that the students can reserve and/or use on a first come first served basis for studying or projects, the student's</p> |

College Goal 2 - Allen College is committed to developing and implementing accessible academic programs of excellence that are responsive to the workforce needs of Iowa and the nation.

## Admin - Administration

### AU Outcome: Admin 5.0

| <i>Measures</i>  | <i>Results</i>  | <i>Actions</i>  |
|--|---|---|
| <p><b>Responsible Parties:</b> Buildings &amp; Grounds</p> | <p>since the spring 2019 student opinion survey (96%) the spring 2018 student opinion survey (84%) and the previous survey in 2013-2014 (87%). The negative trend in satisfaction occurred despite offering students private study spaces that can be reserved for single or group use. Because the satisfaction scores decreased from the previous year, but new private spaces are being offered to students, this measure will be monitored closely in 2020-2021 to determine the effectiveness of the changes compare to the previous years. (09/25/2020)</p> | <p>satisfaction went down. This plan was initiated during the Fall 2019 term and continued through the Spring 2020 term. We will need to evaluate with the 2020-21 academic year what improvements or changes need to be made. (09/25/2020)</p> |

## 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

| <i>Measures</i>   | <i>Results</i>  | <i>Actions</i>   |
|---|---|--|
| <p><b>SL: Survey</b> - 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.<br/> <b>Target:</b> 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.<br/> <b>Timeframe:</b> Health Sciences courses</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> No<br/>           100% (9/9) of Graduate Nursing courses reviewed achieved a 3.0 or above, compared to 2018-2019 when 100% (10/10) of courses reviewed achieved a 3.0 or above. This demonstrates no change, but at the top performance.<br/>           96% (24/25) of Undergraduate Nursing courses reviewed achieved a 3.0 or above, compared to 2016-2017 when 100% (4/4/) of courses reviewed achieved a 3.0 or above. This demonstrates a decline from the previous performance<br/>           98% (63/64) of Health Science Graduate Courses Reviewed achieved a 3.0 or above compared to 2018-2019 when 94% (29/31) of courses reviewed had achieved a 3.0 or above. This demonstrated improvement.<br/>           EdD 100% (4/4)<br/>           OT 95% (20/21)</p> | <p><b>Action:</b> As usual, the results of the 2019-2020 assessment of this measure will be shared with Deans of School of Nursing and Health Sciences. During the 2020-2021 academic year, TLC will additionally review the future of Quality Matters (QM) integration into the curriculum for all programs. Faculty will be surveyed to determine if QM is perceived as a beneficial quality standard. TLC will continue</p> |

College Goal 2 - Allen College is committed to developing and implementing 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

| <i>Measures</i>  | <i>Results</i>  | <i>Actions</i>  |
|--|---|---|
| <p>based on evaluation cycle.<br/>Nursing courses based on curriculum course review schedule.</p> <p><b>Responsible Parties:</b> TLC Chair and Committee Members</p> <p><b>Related Documents:</b><br/><a href="#">Allen College Course Evaluation Criteria.pdf</a></p> | <p>PH 100% (11/11)<br/>MLS 100% (11/11)<br/>ASR 100% (17/17)</p> <p>98% of the Allen College courses reviewed during this cycle achieved a 3.0 or above on the eight-item course evaluation tool.</p> <p>Results demonstrate the need to continue to evaluate the effectiveness of the courses in meeting the standards. Goal has not been met. Refer to action plan.</p> <p>As promised in the 2018-2019 action plan for this measure, during the 2019-2020 academic year, TLC kept its CAP on meeting agendas under current business to address progress towards CAP data collection and CAP completion during each meeting. Additionally, TLC gathered evaluations at the end of the academic year, prior to the beginning of the next (i.e., prior to instructor end-of-contract). This allowed for gathering the data sooner and evaluation of the data, which did not have any impact on the addressing the goal, but did allow for quicker turn around of evaluation of the data. TLC shared the assessment results with the Dean of Nursing and Dean of Health Sciences, it is unknown what their action was with this information. This action plan did assure that the data was able to be collected and distributed to the Deans; however, the action plan did not affect the course evaluations.<br/>(10/19/2020)</p> | <p>to identify a plan to incorporate QM into all programs.<br/>(10/19/2020)</p> |

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

### AU Outcome: ASR 1.1

Students will practice proper radiation protection

**Outcome Status:** Active

| <i>Measures</i>  | <i>Results</i>   | <i>Actions</i>   |
|--|--|--|
| <p><b>SL: Clinical evaluation tool</b> - RA: 135 Competency Testing/CCE Part II, numbers 5, 7, 9, 15, 17</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/><b>Target Met:</b> Yes<br/>2019 = 3.91 (n=19)</p> | <p><b>Action:</b> To continue to exceed the target/ benchmark instructors will continue to have student practice</p> |

College Goal 2 - Allen College is committed to developing and implementing accessible academic programs of excellence that are responsive to the workforce needs of Iowa and the nation.

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

**AU Outcome: ASR 1.1**

| <i>Measures</i>  | <i>Results</i>  | <i>Actions</i>  |
|--|---|---|
| <p><b>Target:</b> Average score of <math>\geq 3</math> (0-4 pt. scale)<br/> <b>Timeframe:</b> Level 1-Fall Semester<br/> <b>Responsible Parties:</b> Lab Instructor/ Program Faculty/ Health Sciences(HS) Faculty Org. Committee</p>   | <p>Previous data:<br/>           2018 = 3.90 (n=13)<br/>           2017=3.97(n=14)<br/>           2016 = 3.89 (n=13)<br/>           2015 = 3.95 (n=16)<br/>           2014 = 3.97 (n=17)<br/>           The action plan from the 2018-2019 was effective for 2019-2020 as the instructors continued to have students practice radiation protection in each lab and in the clinical settings with each new cohort. A slight increase of .01 in 2019 from 2018 results. Students demonstrate clinical competence by applying proper radiation protection. A variety of radiation protection practices and principles are emphasized throughout the curriculum and students continue to evidence the application of this knowledge in the clinical setting. (07/21/2020)</p> | <p>radiation protection in each lab and in the clinical settings. The program will continue to assess for trends with each new cohort. (07/21/2020)</p> |
| <p><b>SL: Clinical evaluation tool - RA: 275</b><br/>           Final Clinical Competency Testing/ CCE Part II, numbers 5,7,9,15,17<br/> <b>Target:</b> Average score of <math>\geq 3</math> (0-4 pt. scale)<br/> <b>Timeframe:</b> Level II-Spring Semester<br/> <b>Responsible Parties:</b> Clinical Instructors/Program Faculty/HS Curriculum Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> NA<br/>           2020 no data to assess, this program requirement was waived for this cohort due to COVID-19.<br/>           Previous data:<br/>           2019 = 4 (n=12)<br/>           2018 = 3.96 (n=12)<br/>           2017 = 3.96 (n=15)<br/>           2016=3.96 (n=17)<br/>           2015=3.96 (n=15)<br/>           (07/21/2020)</p>  | <p><b>Action:</b> Assessment of this measure tool will resume for the Sp21 cohort. (07/21/2020)</p>   |

**AU Outcome: ASR 1.2**

Students will apply correct positioning skills

**Outcome Status:** Active

| <i>Measures</i>                                    | <i>Results</i>                                     | <i>Actions</i>                           |
|--|--|--|
| <p><b>SL: Didactic - RA: 145 Certification</b></p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> | <p><b>Action:</b> Course instructors</p> |

College Goal 2 - Allen College is committed to developing and implementing accessible academic programs of excellence that are responsive to the workforce needs of Iowa and the nation.

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

**AU Outcome: ASR 1.2**

| <i>Measures</i>   | <i>Results</i>  | <i>Actions</i>   |
|---|---|--|
| <p>Testing/<br/>Part I, numbers 3,12,14,15</p> <p><b>Target:</b> Average score of &gt;= 3. (0-4 pt. scale)</p> <p><b>Timeframe:</b> Level I-Spring Semester</p> <p><b>Responsible Parties:</b> Clinical Instructors/ Program Faculty/ HS Curriculum Committee</p>                                       | <p><b>Target Met:</b> Yes</p> <p>2020 = 3.92 (n=16)</p> <p>2019 = 3.88 (n=13)</p> <p>2018 = 3.86 (n=14)</p> <p>2017 = 4 (n=12)</p> <p>2016 = 3.96 (n=16)</p> <p>2015=3.79 (n=17)</p> <p>2014=3.86 (n=15)</p> <p>The action plan from the 2018-2019 for 2019-2020 was successful to use the assessment of certification testing at various clinical sites and with different clinical instructors. A slight increase of .04 in 2019 from 2018 results. Students continue to exceed target. The one item that received some point deductions was line 15. This item refers to the student performing the exam without assistance from the instructor and only one exam performed by one student received a 2 “below average” on this item. Overall, the students overwhelming demonstrated the ability to apply correct positioning skills and apply knowledge of positioning in relation to their in the program. (08/26/2020)</p> | <p>recommend continuing to assess this item since certification testing is completed at various clinical sites and with different clinical instructors. To continue to meet or exceed this target/benchmark for this measure during the 2020-2021 academic year, the clinical instructors/preceptors and faculty will provide the students the instruction and supervision to apply correct positioning skills. (08/26/2020)</p> |
| <p><b>SL: Didactic - RA:</b> 265 Certification Testing/Part I, numbers 3,12,14,15</p> <p><b>Target:</b> Average score of &gt;= 3. (0-4 pt. scale)</p> <p><b>Timeframe:</b> Level II-Fall Semester</p> <p><b>Responsible Parties:</b> Clinical Instructors/ Program Faculty/ HS Curriculum Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> <p><b>Target Met:</b> Yes</p> <p>2019 = 3.9 (n= 10)</p> <p>Previous data:</p> <p>2018=3.95 (n=12)</p> <p>2017=3.90 (n=12)</p> <p>2016=3.97 (n=15)</p> <p>2015=3.99 (n=17)</p> <p>2014= 3.96 (n=15)</p> <p>The action plan for the 2018-2019 was effective as the instructors continued to assess the students’ positioning skills on more advanced procedures appropriate to their level in the program. The target of 3.0 was exceeded to achieve a 3.9. This is the second cohort that excluded some basic level 1 exams and encouraged the clinical instructors to select from more advanced and challenging exams. The procedural exam difficulty correlates with the student’s level in the program and students continue to demonstrate clinical competence by</p>   | <p><b>Action:</b> To continue to exceed this target for the 2020-2021 year, the faculty will communicate to the clinical instructors to select from more advanced and challenging exams to correlate with the student’s level in the program. Faculty will continue to provide effective instruction in the classroom and lab which permits success in the clinical setting. (07/21/2020)</p>                                    |

College Goal 2 - Allen College is committed to developing and implementing accessible academic programs of excellence that are responsive to the workforce needs of Iowa and the nation.

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

**AU Outcome: ASR 1.2**

| <i>Measures</i> | <i>Results</i>   | <i>Actions</i> |
|-----------------|--|----------------|
|                 | applying correct positioning skills on these more advanced procedures. Students are well prepared in the classroom and lab which permits success in the clinical setting. (07/21/2020) |                |

**AU Outcome: ASR 2.1**

Students will demonstrate effective communication skills in the clinical setting

**Outcome Status:** Active

| <i>Measures</i>  | <i>Results</i>   | <i>Actions</i>   |
|--|--|--|
| <p><b>SL: Clinical evaluation tool - RA:135</b><br/>Clinical Instructor/ Preceptor Evaluations/<br/>Numbers 3, 6, 10,11</p> <p><b>Target:</b> Average score &gt;= 3.5 (0-4 pt. scale)<br/><b>Timeframe:</b> Level I-Fall Semester<br/><b>Responsible Parties:</b> Clinical Instructors/ Program Faculty/ HS Curriculum Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/><b>Target Met:</b> Yes<br/>2019 3.47 (n=19)<br/>Previous data:<br/>2018 3.67 (n=13)<br/>2017 3.68 (n=14)<br/>2016 3.56 (n=13)<br/>2015 3.81 (n=16)</p> <p>The action plan from the 2018-2019 was effective for the 2019-2020 as the student evaluations are completed on Trajecsyst by the clinical instructors. This allowed the students to have immediate access to the completed evaluations on Trajecsyst. The students' average scores decreased in all areas of the performance criteria; patient care, interpersonal relationships, multicultural diversity and age appropriate care. Some of the comments on the evaluations were; there is room for improvement when it comes to communication with patient and assessing the patient's condition, student has difficulty working with patients of varying ages.<br/>(07/21/2020)</p> | <p><b>Action:</b> To continue to meet or exceed the target/benchmark for this measure during the 2020-2021 academic year, the clinical instructors/preceptors will deliver prompt feedback to students when issues arise concerning patient care and interpersonal relationships. Faculty continue to discuss and review the correct way to communicate with the patient and fellow students, technologists and radiologists. (07/21/2020)</p> |
| <p><b>SL: Clinical evaluation tool - RA:275</b><br/>Clinical Instructor/ Preceptor Evaluations/Numbers 3, 6,10,11</p> <p><b>Target:</b> Average score &gt;= 3 (0-4 pt.</p>   | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/><b>Target Met:</b> Yes<br/>2019-2020 3.86 (n=10)<br/>Previous data:</p>   | <p><b>Action:</b> To continue to meet or exceed the target for this measure during the 2020-2021 academic year, clinical instructors/preceptors</p>  |

College Goal 2 - Allen College is committed to developing and implementing accessible academic programs of excellence that are responsive to the workforce needs of Iowa and the nation.

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

**AU Outcome: ASR 2.1**

| <i>Measures</i>   | <i>Results</i>   | <i>Actions</i>   |
|---|--|--|
| <p>scale)<br/> <b>Timeframe:</b> Level II -Spring Semester<br/> <b>Responsible Parties:</b> Clinical Instructors/ Program Faculty/ HS Curriculum Committee</p>  | <p>2018-2019 3.9 (n=12)<br/>           2017-2018 3.78 (n=12)<br/>           2016-2017 3.95 (n=15)<br/>           2015-2016 3.97 (n=17)<br/>           The action plan from the 2018-2019 was successful for 2019-2020 as the clinical instructors/preceptors in the clinical setting provided excellent instruction and supervision of students to assess their communication skills. The target of 3.0 was exceeded to achieve a 3.86. This result is a slight decrease in the overall score compared to the last year. The student scores were higher than the previous year in areas of; interpersonal relationships, multicultural diversity and age appropriate care. There was a slight decrease in the area of patient care. (07/21/2020)</p> | <p>will continue to instruct students by exhibiting effective communication in the clinical environment. (07/21/2020)</p>  |
| <p><b>SL: Clinical evaluation tool - RA:135</b><br/>           Clinical Competency Evaluation/ Part I – Number 4 Part III- Numbers 1,3,6-8<br/> <b>Target:</b> Average score &gt;= 3 (0-4 pt. scale)<br/> <b>Timeframe:</b> Level I-Fall Semester<br/> <b>Responsible Parties:</b> Clinical Instructor/Program Faculty/ HS Curriculum Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>           2019 = 3.94 (n=19)<br/>           Previous data:<br/>           2018 = 3.95 (n=13)<br/>           2017=3.98 (n=14)<br/>           2016=3.92 (n=13)<br/>           2015=3.99 (n=16)<br/>           2014=3.98 (n=17)<br/>           The action plan from the 2018-2019 was effective for 2019-2020 as the clinical instructors provided effective instruction, supervision and feedback to the students in the clinical settings. The target of 3.0 was exceeded to achieve a 3.94. The students are demonstrating communication skills reflective of their level in the program. (07/22/2020)</p>   | <p><b>Action:</b> To continue to exceed the target for this measure during the 2020-2021 academic year, clinical instructors will continue to deliver instruction, supervision, and feedback to the students in the clinical environment. (07/22/2020)</p> |
| <p><b>SL: Clinical evaluation tool - RA:275</b><br/>           Final Clinical Competency Evaluation/<br/>           Part I – Number 4<br/>           Part III- Numbers 1,3,6-8</p>  | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> NA<br/>           2020 no data to assess. This program requirement was waived for this cohort due to COVID-19.<br/>           Previous cohort data:</p>   | <p><b>Action:</b> Assessment of this item will resume for the Sp21 cohort. (07/22/2020)</p>  |

College Goal 2 - Allen College is committed to developing and implementing accessible academic programs of excellence that are responsive to the workforce needs of Iowa and the nation.

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

#### AU Outcome: ASR 2.1

| <i>Measures</i>   | <i>Results</i>   | <i>Actions</i> |
|---|--|----------------|
| <b>Target:</b> Average score $\geq$ 3.5 (0-4 pt. scale)<br><b>Timeframe:</b> Level II- Spring Semester<br><b>Responsible Parties:</b> Clinical Instructor/ Program Faculty/ HS Curriculum Committee | 2019 = 4 (n=12)<br>2018=3.98 (n= 12)<br>2017=4 (n=15)<br>2016=4 (n=17)<br>2015=3.99 (n=15)<br>(07/22/2020) |                |

#### AU Outcome: ASR 2.2

Students will practice written communication skills

**Outcome Status:** Active

| <i>Measures</i>   | <i>Results</i>   | <i>Actions</i>   |
|---|--|--|
| <b>SL: Didactic - RA: 115 Patient Care Presentation</b><br><b>Target:</b> Average score of $\geq$ 85%<br><b>Timeframe:</b> Level I-Fall Semester<br><b>Responsible Parties:</b> RA: 115 Course Instructor/HS Faculty Org. Committee | <b>Reporting Year:</b> 2019 - 2020 (Year 2)<br><b>Target Met:</b> Yes<br>2019=98% (n=19)<br>Previous data:<br>2018=98% (n=13)<br>2017=98% (n=14)<br>2016=97% (n=13)<br>2015=98.01% (n=16)<br>The action plan from the 2018-2019 was successful for 2019-2020. The course instructor continued to communicate the paper requirements on the first day of the semester. The instructor instructed the students to the Allen College website and displayed to all students where the academic resources page is located and the APA resource information for APA review. The target continued to be exceeded. The results remained the same from the previous year at 98%. Three of the nineteen students had deductions due to not double spacing on the title page. Ten of the nineteen students had deductions on the reference page; no hanging indents and the spacing of references. (07/22/2020) | <b>Action:</b> 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 throughout the semester. Email the student's resources information that includes a link to the academic resources page on the Allen College website. On the resources page is an APA link that provides information to assist students to practice written communication skills. (07/22/2020) |
| <b>SL: Didactic - RA:258 Pathology Systems Presentation</b>   | <b>Reporting Year:</b> 2019 - 2020 (Year 2)<br><b>Target Met:</b> Yes  | <b>Action:</b> To meet or exceed the target for this measure during the  |

College Goal 2 - Allen College is committed to developing and implementing accessible academic programs of excellence that are responsive to the workforce needs of Iowa and the nation.

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

**AU Outcome: ASR 2.2**

| <i>Measures</i>  | <i>Results</i>   | <i>Actions</i>  |
|--|--|---|
| <p><b>Target:</b> Average score of &gt;= 85%</p> <p><b>Timeframe:</b> Level II-Fall Semester</p> <p><b>Responsible Parties:</b> RA: 258 Course Instructor/ HS Faculty Org. Committee</p> | <p>2019=98% (n=10)</p> <p>2018=96% (n=12)</p> <p>2017=96% (n=12)</p> <p>2016=97% (n=15)</p> <p>2015=98.01% (n=16)</p> <p>The action plan from the 2018-2019 was effective for 2019-2020. The instructor reviewed the APA format and reminded students that the APA resources information is located on the Allen College website. An increase of 2% in 2019 from 2018 results. Each student completes two papers during the course. Eight of the papers had deductions on the title page due to spacing and incorrect font size. Eight of the papers had deductions on the reference page; no hanging indents, spacing of references, and proper titling of the reference page. (07/27/2020)</p> | <p>2020-2021 academic year, the course instructor will continue to discuss the paper requirements with the students throughout the semester. Email the student's resources information that includes a link to the academic resources page on the Allen College website. On the resources page is an APA link that provides information to assist students to practice written communication skills. (07/27/2020)</p> |

**AU Outcome: ASR 2.3**

Students will demonstrate oral communication skills

**Outcome Status:** Active

| <i>Measures</i>   | <i>Results</i>  | <i>Actions</i>   |
|---|---|--|
| <p><b>SL: Didactic - RA:258 Pathology Systems Presentation</b></p> <p><b>Target:</b> Average score of &gt;= 85%</p> <p><b>Timeframe:</b> Level II-Fall Semester</p> <p><b>Responsible Parties:</b> RA: 258 Course Instructor/ HS Faculty Org. Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> <p><b>Target Met:</b> Yes</p> <p>2019=99% (n=10)</p> <p>2018=99% (n=12)</p> <p>2017=97% (n=12)</p> <p>2016=95% (n=15)</p> <p>2015=98.82% (n=17)</p> <p>The action plan from the 2018-2019 was successful for 2019-2020. The course instructor continued to communicate the paper requirements the first day of class to this cohort. The results remained the same from the previous year at 99%. Each student completes two papers during the course. One student had deductions in their oral presentation due to their oral presentation did not meet the time length. (07/27/2020)</p> | <p><b>Action:</b> 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)</p> |

College Goal 2 - Allen College is committed to developing and implementing accessible academic programs of excellence that are responsive to the workforce needs of Iowa and the nation.

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

#### AU Outcome: ASR 2.3

| Measures   | Results  | Actions   |
|--|--|---|
| <p><b>SL: Didactic</b> - RA: 115 Patient Care Presentation<br/> <b>Target:</b> Average score of <math>\geq 85\%</math><br/> <b>Timeframe:</b> Level I-Fall Semester<br/> <b>Responsible Parties:</b> RA: 115 Course Instructor/HS Faculty Org. Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     2019=98% (n=19)<br/>                     2018=99% (n=13)<br/>                     2017=99% (n=14)<br/>                     2016=99% (n=13)<br/>                     2015=94.53% (n=16)</p> <p>The action plan from the 2018-2019 was effective for 2019-2020. The course instructor explained the paper requirements the first day of class. The target of <math>\geq 85\%</math> was exceeded to achieve a 98%. Four students had deductions in their oral presentation portion due to voice level and words not stated correctly during the presentation. (12/01/2020)</p> | <p><b>Action:</b> To meet or exceed the benchmark 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. (12/01/2020)</p> |

#### AU Outcome: ASR 3.1

Students will appropriately critique radiographic images

**Outcome Status:** Active

| Measures   | Results  | Actions   |
|--|--|---|
| <p><b>SL: Didactic</b> - RA: 255 Radiographic image analysis worksheets<br/> <b>Target:</b> Average score of <math>\geq 80\%</math><br/> <b>Timeframe:</b> Level II-Summer Semester<br/> <b>Responsible Parties:</b> RA: 255 Course Instructors/ Program Faculty/HS Faculty Org. Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     2019 = 92.72% (n=11)<br/>                     2018 = 93.75% (n=12)<br/>                     2017=87.75% (n=12)<br/>                     2016: 90.19% (n=16)<br/>                     2015: 89.88% (n=17)</p> <p>The action plan from the 2018-2019 was effective for 2019-2020. The course instructor continued the extension of the due date for the shoulder chapter. This allowed two additional weeks for this more difficult chapter. Students demonstrated the ability to apply critical thinking skills while correctly analyzing radiographic images. (07/27/2020)</p> | <p><b>Action:</b> The textbook for this assignment will use the new 5th edition for the 2020 cohort. No changes recommended. Continue to assess this item. (07/27/2020)</p> |
| <p><b>SL: Didactic</b> - RA: 265 Radiographic</p>  | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p>   | <p><b>Action:</b> Next year's cohort will</p>   |

College Goal 2 - Allen College is committed to developing and implementing accessible academic programs of excellence that are responsive to the workforce needs of Iowa and the nation.

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

**AU Outcome: ASR 3.1**

| <i>Measures</i>   | <i>Results</i>   | <i>Actions</i>   |
|---|--|--|
| <p>image analysis worksheets</p> <p><b>Target:</b> Average score of &gt;= 80%</p> <p><b>Timeframe:</b> Level II- Fall Semester</p> <p><b>Responsible Parties:</b> RA: 265 Course Instructors/ Program Faculty/HS Faculty Org. Committee</p> | <p><b>Target Met:</b> Yes</p> <p>2019 = 88.8% (n = 10)</p> <p>Previous data:</p> <p>2018 = 93.33% (n=12)</p> <p>2017 = 88.83% (n=12)</p> <p>2016 = 91.66% (n=15)</p> <p>2015= 90.71% (n=17)</p> <p>The action plan from the 2018-2019 was successful for 2019-2020. The course instructor provided the appropriate radiographs to critique and effective feedback. This year's smaller cohort demonstrated similar results when compared to the 2017 cohort. Students continue to exceed target. Students continue to demonstrate the ability to critique and critically analyze radiographic images. (07/27/2020)</p> | <p>utilize the 5th edition textbook for this assessment item. No changes recommended. Continue to assess this item. (07/27/2020)</p> |

**AU Outcome: ASR 3.2**

Students will demonstrate ability to practice critical thinking

**Outcome Status:** Active

| <i>Measures</i>  | <i>Results</i>  | <i>Actions</i>   |
|--|---|--|
| <p><b>SL: Didactic</b> - RA:145 Scientific Exhibit Evaluation</p> <p><b>Target:</b> Average score of &gt;= 80%</p> <p><b>Timeframe:</b> Level I- Spring Semester</p> <p><b>Responsible Parties:</b> RA: 145 Program Faculty/ HS Curriculum Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> <p><b>Target Met:</b> Yes</p> <p>2020 = 91.90 (n = 11 posters, 16 students)</p> <p>2019 = 87% N = 9 posters (13 students)</p> <p>2018 = 91.5% N= 8 posters (14 students)</p> <p>2017 = 92.14% N= 7 posters (12 students)</p> <p>2016 = 92.6% N= 10 posters (16 students)</p> <p>The action plan from the 2018-2019 was effective for 2019-2020. The course instructors continued to provide effective feedback to the students on their exhibits. Scores for 2020 continue to demonstrate the students' ability to practice critical thinking skills when developing their scientific exhibits. Many reductions occurred in line item #2 for quality of visuals and charts. Multiple students only used a few or did not support the visuals well. Item #5 also received quite a few reductions since many posters lacked in-depth research. Average</p> | <p><b>Action:</b> The course instructors have decided to move this assessment item to RA275 beginning in the Spring of 2022 to better coincide with the student educator seminar where the posters are entered in a competition. This measurement tool will be replaced with RA154 CT Topic Presentation as the new measurement tool starting in the 2020-2021 academic year. (07/27/2020)</p> |

College Goal 2 - Allen College is committed to developing and implementing accessible academic programs of excellence that are responsive to the workforce needs of Iowa and the nation.

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

**AU Outcome: ASR 3.2**

| <i>Measures</i>  | <i>Results</i>   | <i>Actions</i>   |
|--|--|--|
|  | scores continue to exceed the target.<br>(07/27/2020)  |  |
| <p><b>SL: Exam/Quiz - Standardized - RA:</b> 203B Corectec exams<br/> <b>Target:</b> &gt; 80% of the students will achieve a score of 70 or greater on one of the four exams.<br/> <b>Timeframe:</b> Level II- Spring Semester<br/> <b>Responsible Parties:</b> RA: 203B Course Instructor/HS Curriculum Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>           2020 = 90% (n=10)<br/>           Previous data:<br/>           2019 = 100% (n=12)<br/>           2018 = 100% (n=12)<br/>           2017 = 93% (n=15)<br/>           2016 = 100% (n=17)<br/>           2015 = 93% (n=15)</p> <p>The action plan from the 2018-2019 was effective for 2019-2020. The instructor reduced the % reduction to 1% and was reevaluated in 2020 with no additional changes. 9 out of 10 students achieved a 70 or greater on one of the four Corectec exams. There was a total course grade reduction applied for 2 of the 10 students as a result of their below 70 overall average Corectec scores. This grade reduction policy was implemented to encourage students to put forth their best effort on each of the 4 Corectec exams. (07/27/2020)</p> | <p><b>Action:</b> Overall, the ASR Program curriculum continues to prepare the students for mock board exams. Overall, students continue to demonstrate the ability to practice critical thinking. Will update the target to remove the word “passing” from future year’s assessment plans. (07/27/2020)</p> |

**AU Outcome: ASR 3.3**

Students will be able to critically think in the clinical setting

**Outcome Status:** Active

| <i>Measures</i>  | <i>Results</i>  | <i>Actions</i>  |
|--|---|---|
| <p><b>SL: Clinical evaluation tool - RA:</b>145 Clinical Instructor/ Preceptor Evaluations/Numbers 2,4,7,8<br/> <b>Target:</b> Average score &gt;= 3. (0-4 pt. scale)<br/> <b>Timeframe:</b> Level I-Spring Semester</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>           2019-2020 3.6 (N=16)<br/>           2018-2019 3.36 (N=13)<br/>           2017-2018 3.53 (N=14)<br/>           2016-2017 3.63 (N=12)</p> | <p><b>Action:</b> To continue to meet or exceed the target for this measure during the 2020-2021 academic year, the clinical instructors/preceptors will continue to provide the needed</p> |

College Goal 2 - Allen College is committed to developing and implementing accessible academic programs of excellence that are responsive to the workforce needs of Iowa and the nation.

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

#### AU Outcome: ASR 3.3

| Measures   | Results   | Actions  |
|--|---|--|
| <p><b>Responsible Parties:</b> RA: 145 Course Instructor/HS Faculty Org. Committee</p>   | <p>2015-2016 3.63 (N-16)<br/>The action plan from the 2018-2019 was successful for 2019-2020. The clinical instructors/preceptors in the clinical setting continued to provide excellent instruction and supervision of students to assess their critical thinking skills. This result is an increase compared to the previous year. The student scores were higher than the previous year in all areas; which are application of knowledge, ability to follow directions, self-image for level in the ASR program, and composure and adaptability. (07/27/2020)</p>  | <p>instruction and supervision of the students to evaluate their critical thinking skills in the clinical setting.<br/><br/>(07/27/2020)</p>   |
| <p><b>SL: Clinical evaluation tool</b> - RA:265 Clinical Instructor/ Preceptor Evaluations/Numbers 2,4,7,8<br/><br/><b>Target:</b> Average score &gt;= 3. (0-4 pt. scale)<br/><b>Timeframe:</b> Level II- Fall Semester<br/><b>Responsible Parties:</b> RA: 265 Course Instructors/HS Curriculum Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/><b>Target Met:</b> Yes<br/>2019 3.86 (n=11)<br/>2018 3.81 (n=12)<br/>2017 3.79 (n=12)<br/>2016 3.86 (n=15)<br/>2015 3.81 (n=17)<br/><br/>The action plan from the 2018-2019 was effective for 2019-2020. All student evaluations were completed on Trajecsyst by the clinical instructors. Students had immediate access and feedback to their evaluations on their critical thinking. The students' scores increased in three performance criteria areas; application of knowledge, ability to follow directions, and composure and adaptability. The area of self image for the level in the ASR program average score remained the same. (07/27/2020)</p> | <p><b>Action:</b> To continue to meet or exceed the target for this measure during the 2020-2021 academic year, clinical instructors/preceptors continue to demonstrate and explain to students how to practice critical thinking skills in the clinical environment. (07/27/2020)</p> |

#### AU Outcome: ASR 4.1

Students will integrate leadership skills and construct professional practices

**Outcome Status:** Active

| Measures   | Results  | Actions  |
|--|--|--|
| <p><b>SL: Service</b> - RA:135 Community Service/Service Learning Evaluation<br/><b>Target:</b> Average score of &gt;= 80%</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/><b>Target Met:</b> Yes<br/>2019 = 87.71% (n=19)</p> | <p><b>Action:</b> To continue to achieve the target for this measure during the 2020-2021 academic year, ASR</p> |

College Goal 2 - Allen College is committed to developing and implementing accessible academic programs of excellence that are responsive to the workforce needs of Iowa and the nation.

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

**AU Outcome: ASR 4.1**

| <i>Measures</i>  | <i>Results</i>  | <i>Actions</i>  |
|--|---|---|
| <p><b>Timeframe:</b> Level I-Fall Semester<br/> <b>Responsible Parties:</b> RA: 135 Course Instructors/HS Curriculum Committee</p>   | <p>2018: 83.69% (n=13)<br/>                     2017: 94.78 (n=14)<br/>                     2016: 72% (n=13)<br/>                     2015: 92.56% (n=16)</p> <p>The action plan from the 2018-2019 was effective for 2019-2020. The course instructors made a few editorial changes to the assignment instructions for emphasis and clarification based on last year’s recommendations. The overall average score increased slightly when compared to last year. Again, the majority of point deductions occurred in the overall writing and the research categories of the assessment rubric. Some students did not research the organization as directed. All students performed service learning through a variety of organizations. Students demonstrated leadership skills and professionalism through their involvement in service learning activities. (07/27/2020)</p> | <p>faculty will assess their rubric that are contributing to exceed the target on service-learning and make modifications accordingly. Will continue to assess this measure. (07/27/2020)</p>   |
| <p><b>SL: Service - RA:</b> 265 Community Service/Service Learning Evaluation<br/> <b>Target:</b> Average score of &gt;= 80%<br/> <b>Timeframe:</b> Level II-Fall Semester<br/> <b>Responsible Parties:</b> RA: 265 Course Instructors/HS Curriculum Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     2019 = 85.6% (n = 10)<br/>                     2018: 76.75% (n=12)<br/>                     2017: 93.33% (n=12)<br/>                     2016: 93.4% (n=15)<br/>                     2015: 82.47% (n=17)</p> <p>The action plan from the 2018-2019 was successful for 2019-2020. The course instructors made a few editorial changes to the assignment instructions to better emphasize and clarify the expectations for the assignment. Improved average scores this year may be the result of implementing the 2018 recommended changes. (07/27/2020)</p>   | <p><b>Action:</b> To continue to achieve the target for this measure during the 2020-2021 academic year, the course instructors will continue to assess the assignment instructions and make modifications accordingly. Continue to assess this measure. (07/27/2020)</p> |

**AU Outcome: ASR 4.2**

Students will practice professionalism

**Outcome Status:** Active

| <i>Measures</i> | <i>Results</i> | <i>Actions</i> |
|-----------------|----------------|----------------|
|                 |                |                |

College Goal 2 - Allen College is committed to developing and implementing accessible academic programs of excellence that are responsive to the workforce needs of Iowa and the nation.

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

**AU Outcome: ASR 4.2**

| <i>Measures</i>  | <i>Results</i>  | <i>Actions</i>   |
|--|---|--|
| <p><b>SL: Clinical evaluation tool - RA:135</b><br/>Clinical Instructor/Preceptor<br/>Evaluations Numbers 1,5,9,12,13</p> <p><b>Target:</b> Average score &gt;= 3 (0-4 pt. scale)</p> <p><b>Timeframe:</b> Level I- Fall Semester</p> <p><b>Responsible Parties:</b> Clinical Instructors/ Program Faculty/HS Curriculum Committee</p>   | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> <p><b>Target Met:</b> Yes</p> <p>2019 3.51 (n=19)</p> <p>2018 3.68 (n=13)</p> <p>2017 3.68 (n=14)</p> <p>2016 3.6 (n=13)</p> <p>2015 3.83 (n=16)</p> <p>The action plan from the 2018-2019 was effective for 2019-2020. All student evaluations were completed on Trajecsyst by the clinical instructors. Students had immediate access and feedback to the completed evaluations. Clinical instructors continued to provide effective and timely feedback to students. The students' average scores decreased in all areas of the performance criteria, organization of assignments, initiative, appearance, policies and procedures, ethical and professional behaviors. Some of the comments on the evaluations were; student lacks initiative to be involved in the exams, there were a lot of exams that the student was not involved in-this student has no initiative, needs to work on professionalism with patients and technologists. (07/27/2020)</p> | <p><b>Action:</b> To continue to meet or exceed the target for this measure during the 2020-2021 academic year, the clinical instructors/preceptors will continue to deliver prompt feedback to students when issues arise concerning initiative and professionalism. Faculty continue to discuss the importance of initiative and professionalism in the clinical setting. (07/27/2020)</p> |
| <p><b>SL: Clinical evaluation tool - RA:275</b><br/>Clinical Instructor/Preceptor<br/>Evaluations Numbers 1,5,9,12,13</p> <p><b>Target:</b> Average score &gt;= 3 (0-4 pt. scale)</p> <p><b>Timeframe:</b> Level II-Spring Semester</p> <p><b>Responsible Parties:</b> Clinical Instructors/ Program Faculty/HS Curriculum Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> <p><b>Target Met:</b> Yes</p> <p>2019-2020 3.88 n=10)</p> <p>2018-2019 3.83 (n=12)</p> <p>2017-2018 3.76 (n=12)</p> <p>2016-2017 3.96 (n=15)</p> <p>2015-2016 3.98 (n=17)</p> <p>The action plan from the 2018-2019 was successful for 2019-2020. The clinical instructors/preceptors in the clinical setting provided excellent instruction and supervision of students to assess their professionalism. This result is an increase compared to the previous year. The student scores were higher in areas of organization of assignments, initiative, appearance, and ethical and professional behaviors. The scores were lower in only one area which was policies and procedures. (07/27/2020)</p>   | <p><b>Action:</b> To continue to meet or exceed the target for this measure during the 2020-2021 academic year, clinical instructors/preceptors will continue to be positive role models for students by practicing professionalism in the clinical setting. (07/27/2020)</p>  |

College Goal 2 - Allen College is committed to developing and implementing accessible academic programs of excellence that are responsive to the workforce needs of Iowa and the nation.

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

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

**AU Outcome: DMS 1.1**

Students will show knowledge of ultrasound transducers

**Outcome Status:** Active

| <i>Measures</i>  | <i>Results</i>  | <i>Actions</i>   |
|--|---|--|
| <p><b>SL: Didactic</b> - Ultrasound Transducer Exam</p> <p><b>Target:</b> Students will receive an average score of <math>\geq 80\%</math></p> <p><b>Timeframe:</b> Annually</p> <p><b>Responsible Parties:</b> Program Chair<br/>HS Curriculum Committee</p>          | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> <p><b>Target Met:</b> No</p> <p>Fall 2019-Spring 2020: There was a decline in performance from previous 2 years. 85.7 % (6 out of 7) students scored at least 80%.</p> <p>Spring 2019: 100% of students scored at least 80% (n=6) (scores: 91.3%-98%)</p> <p>Spring 2018: 100% of students scored at least 80%.</p> <p>Spring 2017: 100% of students scored at least 80%.</p> <p>Per the 2018-2019 action plan, faculty provided additional learning experiences to facilitate student performance on this assignment and offered tutoring sessions to provide more time for topic review and an opportunity for students/faculty to ask/answer questions, but one student scored <math>&lt;80\%</math>. The student consistently had lower scores in this physics class and was just below the 80% target. However, 100% of students have scored at least 80% on the assignment in the pervious 3 reporting years. (06/24/2020)</p> | <p><b>Action:</b> To facilitate student achievement of at least 80% on this exam during 2020-2021, faculty will continue to use a variety of instructional methods, including lecture and assignments designed to reinforce concepts covered in this exam. Faculty will also identify students who are at risk for poor performance on the exam and refer them to the Student Success Coordinator for assistance. (06/24/2020)</p> |
| <p><b>SL: Didactic</b> - Students will construct transducer model</p> <p><b>Target:</b> Each student will receive a score of <math>\geq 80\%</math></p> <p><b>Timeframe:</b> Annually</p> <p><b>Responsible Parties:</b> Program Chair<br/>HS Curriculum Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> <p><b>Target Met:</b> Yes</p> <p>Scores remain high, which is consistent with results of previous years.</p> <p>Fall 2019: 100% of students scored above 80% (n=7). All students scored 96% or higher.</p> <p>Spring 2018: 100% of students scored above 80%.</p> <p>2017: 87% of student scored above 80%.</p> <p>Per the 2018-2019 action plan, a rubric was provided and students' scores were based on accuracy of information, creativity, and craftsmanship. This course included topic lecture/ discussion, graded homework assignments, and offered tutoring. This action plan appears to have been effective in helping students be successful on the assignment. (06/24/2020)</p>  | <p><b>Action:</b> To facilitate student success on this assignment and achievement of the target during 2020-2021, faculty will ensure that students understand the components of the grading rubric for a successful submission through discussion throughout the course as students prepare to construct the transducer model. (06/24/2020)</p>  |

College Goal 2 - Allen College is committed to developing and implementing accessible academic programs of excellence that are responsive to the workforce needs of Iowa and the nation.

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

### AU Outcome: DMS 1.2

Students will apply correct scanning skills

**Outcome Status:** Active

| Measures   | Results   | Actions  |
|--|---|--|
| <p><b>SL: Lab</b> - Final Lab Practical</p> <p><b>Target:</b> Students will achieve an average score of <math>\geq 80\%</math>.</p> <p><b>Timeframe:</b> Didactic Level - Fall Semester</p> <p><b>Responsible Parties:</b> Program Faculty/ HS Curriculum Committee</p>                | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> <p><b>Target Met:</b> Yes</p> <p>Fall 2019: 100% of students (7/7) scored at least 80% (87-93%). Scores remain high and consistent with scores of previous cohorts.</p> <p>Fall 2018: 100% of students scored at least 80% (87-92%).</p> <p>Fall 2017: 100% of students (8/8) scored at least 80% (87%-96%).</p> <p>Fall 2016: 87.5% of students (7/8) scored at least 80% (N = 8)</p> <p>Fall 2015: 60% of students (3/5) scored 81.6%; 2/5 scored <math>&lt; 80\%</math>.</p> <p>Fall 2014: 83% of students (5/6) scored 81.8%; 1 scored <math>&lt; 80\%</math>.</p> <p>Fall 2013: 100% of students (6/6) scored at least 80%.</p> <p>Fall 2012: 100% of students (8/8) scored 92%.</p> <p>Fall 2011: 100% of students (5/5) scored 83.4%.</p> <p>Per the 2018-2019 action plan, faculty members provided instruction in areas of basic anatomy, sonographic anatomy, imaging techniques and instrumentation, and protocols through demonstration, verbal and written instruction, and individual and group image and technique review. Faculty required scanning sessions and offered additional scanning sessions supervised by various instructors. This action plan appears to have been effective in helping students be successful on the assignment. (09/23/2020)</p> | <p><b>Action:</b> To ensure that students are successful on this assignment and achieve the target during 2020-2021, faculty will continue to provide instruction in areas of basic and sonographic anatomy, imaging techniques and instrumentation, and protocols through demonstration, verbal and written instruction, and individual and group image and technique review, and will also continue to require scanning sessions. (09/23/2020)</p> |
| <p><b>SL: Lab</b> - Practical Testing in Laboratory on Thyroid: Exam Protocol</p> <p><b>Target:</b> <math>\geq 90\%</math> of students will pass lab practical on 1st attempt</p> <p><b>Timeframe:</b> Didactic Level - Spring Semester</p> <p><b>Responsible Parties:</b> Program</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> <p><b>Target Met:</b> Yes</p> <p>Spring 2020 100% (7/7) All students achieved target. This is consistent with the results of the last five years.</p> <p>Spring 2019-100% (9/9)</p> <p>Spring 2018 100% (9/9)</p> <p>Spring 2017 100% (8/8)</p> <p>Spring 2016 100% (5/5)</p>  | <p><b>Action:</b> The action plan recommended that DMS faculty provide feedback on scanning quality and techniques to the students as well as provide time for extra scanning sessions beyond the regular class time. To continue to meet or exceed the target/benchmark for this measure</p>  |

College Goal 2 - Allen College is committed to developing and implementing accessible academic programs of excellence that are responsive to the workforce needs of Iowa and the nation.

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

#### AU Outcome: DMS 1.2

| <i>Measures</i>                 | <i>Results</i>   | <i>Actions</i>   |
|---------------------------------|--|--|
| Faculty/HS Curriculum Committee | <p>Spring 2015- 83% (5/6)<br/>           Spring 2014-83% (5/6)<br/>           Spring 2013-50%<br/>           Spring 2012- 72%</p> <p>Per the 2018-2019 action plan, DMS faculty provide feedback on scanning quality and techniques to the students as well as provide time for extra scanning sessions beyond the regular class time. This action plan appears to have been effective in helping students be successful on the assignment. To continue to meet or exceed the target/benchmark for this measure during the 2020-21 academic year, the faculty will continue to provide feedback and additional scanning options.<br/>           (09/23/2020)</p> | during the 2020-21 academic year, will continue to use these options. Student outcomes will be assessed with the same target. (09/23/2020) |

#### AU Outcome: DMS 2.1

Students will demonstrate effective communication skills in the imaging lab setting

**Outcome Status:** Active

| <i>Measures</i>   | <i>Results</i>   | <i>Actions</i>  |
|---|--|---|
| <p><b>SL: Clinical evaluation tool -</b><br/>           DMS:408 Clinical<br/>           Instructor/Preceptor Evaluations 2, 3, 10, 11,17<br/> <b>Target:</b> On a scale from 1-5, 5 being the highest rating, the average of all the responses &gt;=4<br/> <b>Timeframe:</b> Didactic Level-Fall Semester<br/> <b>Responsible Parties:</b> Clinical Instructors/ Program Faculty/HS</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>           Fall 2019: Avg rating = 4.68 (n=6). Although slightly lower than the past 4 years, the average ratings remain consistently above the target of 4.0.<br/>           Fall 2018: Avg rating = 4.90 (n=9)<br/>           Fall 2017: Avg rating = 4.78 (n=7)<br/>           Fall 2016: Avg rating = 4.80 ( n=5)<br/>           Fall 2015: Avg rating = 4.89 (n=5)<br/>           Fall 2014: Avg rating = 3.60 (n=8)<br/>           Fall 2013: Avg rating = 3.81 (n=8)</p> <p>Per the 2018-2019 action plan, faculty continued to obtain and assess feedback from clinical</p> | <p><b>Action:</b> Faculty will continue to obtain and assess feedback from clinical instructors for any areas of concern that needs to be identified and a recommendation/plan of action for student improvement will be developed, if necessary.</p> <p>It is also recommended that a change be made to this measure due to a change in the rating scale on the evaluation tool.</p> |

College Goal 2 - Allen College is committed to developing and implementing accessible academic programs of excellence that are responsive to the workforce needs of Iowa and the nation.

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

**AU Outcome: DMS 2.1**

| <i>Measures</i>   | <i>Results</i>  | <i>Actions</i>  |
|---|---|---|
| Curriculum Committee  | instructors. At each site visit, the program faculty reviewed evaluations with clinical instructors and the student. Any areas of concern were identified and if necessary, a recommendation/plan of action for student improvement developed. This action plan appears to have been effective in helping students be successful in the clinical setting. (09/23/2020)  | (09/23/2020)  |
| <p><b>SL: Clinical evaluation tool -</b><br/>DMS:409 Clinical<br/>Instructor/Preceptor Evaluations 2, 3, 10, 11, 17<br/><b>Target:</b> On a scale from 1-5, 5 being the highest rating, the average of all the responses &gt;=4<br/><b>Timeframe:</b> Didactic Level - Spring Semester<br/><br/><b>Responsible Parties:</b> Clinical Instructors/ Program Faculty/HS Curriculum Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/><b>Target Met:</b> Yes<br/>Spring 2019: average score is 4.92 on a scale of 1-5 (N=7). Results are consistent with previous years. Target has consistently been exceeded.<br/><br/>Sp 2018: avg score = 4.94 (N=7).<br/>Sp 2017: avg score = 4.78 (N=4).<br/>Sp 2016: avg score = 4.96 (n=5).<br/><br/>Likert scale: 0-4<br/>Sp 2015: avg score = 3.72 (N=5)<br/>Sp 2014: avg score = 3.46 (N=8)<br/><br/>Per the 2018-2019 action plan, faculty continued to obtain and assess feedback from clinical instructors. At each site visit, the program faculty reviewed evaluations with clinical instructors and the student. Any areas of concern were identified and if necessary, a recommendation/plan of action for student improvement was developed. This action plan appears to have been effective in helping students be successful in the clinical setting and achieve the target. (09/23/2020)</p> | <p><b>Action:</b> To continue to meet or exceed the target during 2020-2021, instructors will continue to review evaluations and recommend action plans when necessary to enhance student success in the clinical setting.<br/><br/>Also, for 2020-2021 it is recommended that the measurement tool be changed due to a change in the rating scale on the evaluation tool.<br/>(09/23/2020)</p> |

**AU Outcome: DMS 2.2**

Students will successfully obtain patient history

**Outcome Status:** Active

| <i>Measures</i> | <i>Results</i> | <i>Actions</i> |
|-----------------|----------------|----------------|
|                 |                |                |

College Goal 2 - Allen College is committed to developing and implementing accessible academic programs of excellence that are responsive to the workforce needs of Iowa and the nation.

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

**AU Outcome: DMS 2.2**

| <i>Measures</i>   | <i>Results</i>   | <i>Actions</i>  |
|---|--|---|
| <p><b>SL: Clinical evaluation tool -</b><br/>DMS:408 Clinical<br/>Instructor/Preceptor Evaluations<br/>Number 1<br/><b>Target:</b> On a scale from 1-5, 5 being the highest rating, the average of all the responses &gt;=4<br/><b>Timeframe:</b> Didactic Level - Fall Semester</p> <p><b>Responsible Parties:</b> DMS:408<br/>Course Instructor/Program<br/>Faculty/HS Curriculum Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/><b>Target Met:</b> Yes<br/>Fall 2019 avg rating of 4.72 on a scale of 1-5. All students were rated 4 (n=6), which is consistent with previous years.<br/>Fall 2018 avg rating 4.62<br/>Fall 2017 avg rating 4.94<br/>Fall 2016 avg rating 4.71<br/>Fall 2015 avg rating 4.47</p> <p>Scale 0-4<br/>Fall 2014 avg rating 3.40<br/>Fall 2013 avg rating 3.45<br/>Fall 2012 avg. rating 3.6</p> <p>Per the 2018-2019 action plan, faculty obtained and assessed feedback from clinical instructors. Faculty reviewed evaluations with clinical instructors and student at each site visit and identified/made recommendations for student improvement. This action plan appears to have been effective in helping students be successful in the clinical setting and in achieving the target for this measure. The 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. (09/23/2020)</p> | <p><b>Action:</b> This outcome or measure will be deactivated and replaced with a new measure for the 2020-2021 academic year. (09/23/2020)</p> |

**AU Outcome: DMS 3.1**

Students will successfully analyze sonographic images

**Outcome Status:** Active

| <i>Measures</i>  | <i>Results</i>   | <i>Actions</i>   |
|--|--|--|
| <p><b>SL: Didactic -</b> Ultrasound Imaging<br/>Imaging Portfolio<br/><b>Target:</b> Each student will receive</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/><b>Target Met:</b> Yes<br/>Spring 2020 : 100% (7/7) scored 90%. All students scored above 90%. This is consistent with previous year.</p> | <p><b>Action:</b> To continue to meet or exceed the target for this measure during the 2020-2021 academic year, faculty will continue to</p> |

College Goal 2 - Allen College is committed to developing and implementing accessible academic programs of excellence that are responsive to the workforce needs of Iowa and the nation.

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

**AU Outcome: DMS 3.1**

| <i>Measures</i>  | <i>Results</i>   | <i>Actions</i>   |
|--|--|--|
| <p>score &gt;= 80%</p> <p><b>Timeframe:</b> Didactic Level - Fall Semester</p> <p><b>Responsible Parties:</b> Course Instructor/ Program Faculty/ HS Faculty Org. Committee</p>  | <p>Spring 2019: 100% (5/5) scored 90%.</p> <p>Per the 2018-2019 action plan, the assignment was considered an opportunity for faculty and students to identify what factors contributed to make an exam “diagnostic.” It was determined that there would be no change in the measurement tool for another cycle to permit identification of a consistent trend in target achievement. The opportunity for faculty and students to identify what factors contributed to make an exam “diagnostic” appears to have been effective in helping students be successful on the assignment and achieve the target. (09/23/2020)</p> | <p>require the image portfolio with expectations that students demonstrate the necessary skills to acquire quality diagnostic images, which in turn requires that students can successfully analyze those sonographic images for instrumentation factors and diagnostic quality. (09/23/2020)</p>  |
| <p><b>SL: Didactic</b> - ABD II Thyroid Image Assessment</p> <p><b>Target:</b> Each student will receive score &gt;= 80%</p> <p><b>Timeframe:</b> Annually-Spring semester</p> <p><b>Responsible Parties:</b> ABD II Course Instructor</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> <p><b>Target Met:</b> NA</p> <p>Spring 2020: Measure could not be assessed because of change in course format due to COVID-19 (limited labs/on-line format).</p> <p>Spring 2019: 100% (6/6) scored at least 80%</p> <p>Spring 2018: 100% (8/8) scored at least 80%</p> <p>(09/23/2020)</p>  | <p><b>Action:</b> To continue to meet or exceed the target for this measure during the 2020-2021 academic year, faculty will continue to distribute an image assessment rubric and will also demonstrate the image assessment process prior to submission of the image assessment assignment (04/13/2021)</p> <p><b>Action:</b> This course will continue to include both didactic and labs sessions to enhance the student's knowledge and skills level to evaluate images successfully. Student outcomes will be assessed with the same target. (09/23/2020)</p> |

**AU Outcome: DMS 3.2**

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

**Outcome Status:** Active

College Goal 2 - Allen College is committed to developing and implementing accessible academic programs of excellence that are responsive to the workforce needs of Iowa and the nation.

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

**AU Outcome: DMS 3.2**

| <i>Measures</i>   | <i>Results</i>   | <i>Actions</i>  |
|---|--|---|
| <p><b>SL: Clinical evaluation tool -</b><br/>DMS:408 Student Self Evaluation</p> <p><b>Target:</b> On a scale from 0-4, 4 being the highest rating, the average of all the responses <math>\geq 3</math></p> <p><b>Timeframe:</b> Didactic Level - Fall Semester</p> <p><b>Responsible Parties:</b> Clinical Instructor/Program Faculty/HS Curriculum Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> <p><b>Target Met:</b> Yes</p> <p>Fall 2019: avg 4.72. Results exceed target with a slight increase from previous year. Students are able to effectively reflect on their performance in the clinical setting sufficiently for clinical staff.</p> <p>Fall 2018: avg 4.62<br/>Fall 2017: avg 4.94</p> <p>Per the 2018-2019 action plan, faculty obtained and assessed self-evaluation from students and compared with evaluation from clinical instructors. Faculty reviewed evaluations with students at each site visit, identified areas of concern, and made recommendations/plan for student improvement. This action plan appears to have contributed to improvement in student's progress in clinical coursework and to have been effective in helping students be successful in the clinical setting. (09/23/2020)</p> | <p><b>Action:</b> Faculty will continue to obtain and assess self-evaluations from students and compare them to the evaluations from clinical instructors. Faculty will continue to review evaluations with students at each site visit, and identify areas of concern, and make recommendations/plan for student improvement. Additionally, the evaluation form will be changed to reflect a change in rating scale. (09/23/2020)</p>                                  |
| <p><b>SL: Clinical evaluation tool -</b><br/>DMS:409 Student Self evaluation</p> <p><b>Target:</b> On a scale from 0-4, 4 being the highest rating, the average of all the responses <math>\geq 3</math></p> <p><b>Timeframe:</b> Didactic Level Spring Semester</p> <p><b>Responsible Parties:</b> Program Faculty/HS Curriculum Committee</p>                     | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> <p><b>Target Met:</b> Yes</p> <p>Spring 2019 Avg. 3.68 (n=9) This score is consistent with previous years. The results exceed target and show an increase from previous year. Students are able to effectively reflect on their performance in the clinical setting sufficiently for clinical staff.</p> <p>Spring 2108 avg 3.42(n=7)<br/>Spring 2017 avg 3.57 (n=4)<br/>Spring 2016 avg 3.68 (n=5)<br/>Spring 2015 avg.- 3.64 (n=5)<br/>Spring 2014 avg- 3.7 (n= 8)<br/>Spring 2013 avg - 3.8 (n=4)<br/>Spring 2012 avg -3.79(n=6)</p> <p>Per the 2018-2019 action plan, students will continue to evaluate themselves and submit written comments monthly. The student's evaluations and comments will continue to be</p>   | <p><b>Action:</b> Faculty will continue to obtain/assess students' self-evaluations and compare them to clinical instructor evaluations. Faculty will review evaluations with students at each site visit, identify concerns, and make recommendations for student improvement.</p> <p>The student Self Evaluation will continue to be used as a measurement tool but it will be changed to reflect discontinuation current rating scale in 2020-2021. (09/23/2020)</p> |

College Goal 2 - Allen College is committed to developing and implementing accessible academic programs of excellence that are responsive to the workforce needs of Iowa and the nation.

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

#### AU Outcome: DMS 3.2

| Measures | Results  | Actions |
|----------|--|---------|
|          | compared to feedback from Cl's which help the students learn and grow. This action plan appears to have been effective in helping students be successful in the clinical setting. (09/23/2020) |         |

#### AU Outcome: DMS 4.1

Students will demonstrate professional growth or learning

**Outcome Status:** Active

| Measures   | Results   | Actions   |
|--|---|---|
| <p><b>SL: Didactic -</b> Innovations in Sonography - Presentation<br/> <b>Target:</b> Each student will receive score &gt;= 90%<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> Program Faculty/HS Curriculum Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>           Spring 2020: 100% of students scored at least 90% (7/7). The target has been met consistently the past two years.<br/>           Spring 2019: 100% of students scored &gt;97% (5/5).<br/>           Spring 2018 89% (8/9) scored at least 90%;1 scored 87%.</p> <p>Per the 2018-2019 action plan, faculty required students to develop and give a presentation on sonography issues or topics. Faculty and students continued to provide feedback regarding presentations, which contributes to students' professional growth. This action plan appears to have been effective in helping students be successful on the assignment and achieve the target. (09/24/2020)</p> | <p><b>Action:</b> To continue to meet or exceed the target/benchmark for this measure during the 2020-2021 academic year, faculty will continue to provide feedback and tips on development of presentations. (09/24/2020)</p>  |
| <p><b>SL: Didactic - B-</b> Sonography webinar<br/> <b>Target:</b> Each student will receive score &gt;= 90%<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> Program Faculty/HS Curriculum Committee</p>                    | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>           Sp 2020 100% (7/7) received score = 90% All students achieved target. This is consistent with the results of the last two years.<br/>           Sp 2019 100% (6/6) received score = 90%<br/>           Sp 2018 75% of students (6/8) received score = 90%</p> <p>Per the 2018-2019 action plan, faculty required students view a sonography webinar and complete worksheet that followed with webinar which assisted the students in remembering</p>  | <p><b>Action:</b> To continue to meet or exceed the target/benchmark for this measure during the 2020-2021 academic year, faculty will continue to require students to view webinar and complete a worksheet as a course requirement. Student outcomes will be assessed with the same target (09/24/2020)</p> |

College Goal 2 - Allen College is committed to developing and implementing accessible academic programs of excellence that are responsive to the workforce needs of Iowa and the nation.

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

#### AU Outcome: DMS 4.1

| Measures | Results   | Actions |
|----------|---|---------|
|          | key points. This action plan appears to have been effective in helping students be successful on the assignment. (09/24/2020) |         |

#### AU Outcome: DMS 4.2

Students will practice professionalism in the clinical lab setting

**Outcome Status:** Active

| Measures  | Results  | Actions  |
|---|--|--|
| <p><b>SL: Clinical evaluation tool -</b><br/>DMS:408 Clinical Instructor/<br/>Preceptor Evaluations Numbers<br/>1,2,10-13,15-19</p> <p><b>Target:</b> On a scale from 1-5, 5 being the highest rating, the average of all the responses &gt;=4</p> <p><b>Timeframe:</b> Didactic Level - Fall Semester</p> <p><b>Responsible Parties:</b> DMS 408 Instructor/ Program Faculty/HS Curriculum Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> <p><b>Target Met:</b> Yes</p> <p>Spring 2020: Average rating = 4.92 (n=7). Ratings remain high and consistent with previous years.</p> <p>Sp 2019: avg rating = 4.92 (n=9).</p> <p>Sp 2018: avg rating = 4.94 (n=7).</p> <p>Sp 2017: avg rating = 4.78 (n=4).</p> <p>Sp 2016: avg rating = 4.96 (n=5).</p> <p>Per the 2018-2019 action plan, faculty continued to review evaluations from the clinical instructors to identify areas of concern and made recommendations/plan for student improvement. The action plan appears to have been effective in helping students be successful in the clinical setting. (09/24/2020)</p> | <p><b>Action:</b> This measure will be changed due to a change in evaluation forms (discontinuation of rating scale). (09/24/2020)</p> |
| <p><b>SL: Clinical evaluation tool -</b><br/>DMS:409 Clinical Instructor/<br/>Preceptor Evaluations Numbers<br/>1,2,10-13,15-19</p> <p><b>Target:</b> On a scale from 1-5, 5 being the highest rating, the average of all the responses &gt;=4</p> <p><b>Timeframe:</b> Didactic Level - Spring</p>   | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> <p><b>Target Met:</b> Yes</p> <p>Spring 2020 students average score 4.95(n=6) Scores remain high with slight increase over last year.</p> <p>Spring 2019 Avg. 4.93 (n=9)</p> <p>Spring 2018 avg score is 4 (n=7)</p> <p>Spring 2017 avg 4.83 (n=4)</p>  | <p><b>Action:</b> This measure will be changed due to a change in rating scale on the evaluation form. (09/24/2020)</p>                |

College Goal 2 - Allen College is committed to developing and implementing accessible academic programs of excellence that are responsive to the workforce needs of Iowa and the nation.

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

#### AU Outcome: DMS 4.2

| <i>Measures</i>   | <i>Results</i>   | <i>Actions</i> |
|---|--|----------------|
| Semester<br><br><b>Responsible Parties:</b> DMS 408 Instructor/ Program Faculty/HS Curriculum Committee | Likert scale:0-4<br>Results:<br>Spring 2015 (N=5) avg is 3.72<br><br>Per the 2018-2019 action plan, faculty evaluated feedback from clinical instructors. At each site visit, faculty reviewed evaluations with clinical instructors and the student. Areas of concern were identified and recommendations for student improvement were developed. This action plan appears to have been effective in helping students be successful in the clinical setting. (09/24/2020) |                |

### 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.

**Outcome Status:** Active

| <i>Measures</i>  | <i>Results</i>   | <i>Actions</i> |
|--|--|----------------|
| <b>SL: Didactic</b> - EdD 720: Finance and Fiscal Management – Budget Assignment<br><b>Target:</b> Each student will receive an average score of >80%<br><b>Timeframe:</b> When course is taught (e.g. Spring 2017)<br><b>Responsible Parties:</b> Program Chair/ HS Grad Curriculum Committee | <b>Reporting Year:</b> 2019 - 2020 (Year 2)<br><b>Target Met:</b> NA<br>Course not offered. (07/31/2020) |                |
| <b>SL: Didactic</b> - EdD 740: Today's Health Sciences Student: Trends, Issues and Challenges – Final Paper<br><b>Target:</b> 100% of students will receive  | <b>Reporting Year:</b> 2019 - 2020 (Year 2)<br><b>Target Met:</b> NA<br>Course not offered. (07/31/2020) |                |

College Goal 2 - Allen College is committed to developing and implementing accessible academic programs of excellence that are responsive to the workforce needs of Iowa and the nation.

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

**AU Outcome: EdD 1.1**

| <i>Measures</i>  | <i>Results</i>  | <i>Actions</i> |
|--|---|----------------|
| <p>a score of &gt;= 85%<br/> <b>Timeframe:</b> When course is taught (e.g., Fall 2016)<br/> <b>Responsible Parties:</b> Program Chair/ HS Grad Curriculum Committee</p>  |   |                |
| <p><b>SL: Didactic - EdD 780:</b> Integrating Evolving Technology in Health Professions Education --Technology Transcendence Final Project<br/> <b>Target:</b> 100% of students will receive a score of &gt;= 85%<br/> <b>Timeframe:</b> When course is taught (e.g., Fall 2015, Fall 2018, etc.)<br/> <b>Responsible Parties:</b> Program Chair/ HS Grad Curriculum Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> NA<br/>           Course not offered. (07/31/2020)</p> |                |
| <p><b>SL: Didactic - EdD 790:</b> Practicum in Health Professions Education – Let’s Get Creative Assignment<br/> <b>Target:</b> Students will receive an average score of &gt;80%<br/> <b>Timeframe:</b> When course is taught (e.g., Spring 2017)<br/> <b>Responsible Parties:</b> Program Chair/ HS Grad Curriculum Committee</p>  | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> NA<br/>           Course not offered. (07/31/2020)</p> |                |
| <p><b>SL: Didactic - EdD 795:</b> Practicum in Health Professions Education – Let’s Get Creative Assignment<br/> <b>Target:</b> 100% of students will receive a score of &gt;= 85%<br/> <b>Timeframe:</b> When course is taught<br/> <b>Responsible Parties:</b> Program Chair/</p>  | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> NA<br/>           Course not offered. (07/31/2020)</p> |                |

College Goal 2 - Allen College is committed to developing and implementing accessible academic programs of excellence that are responsive to the workforce needs of Iowa and the nation.

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

**AU Outcome: EdD 1.1**

| <i>Measures</i>   | <i>Results</i>  | <i>Actions</i>  |
|---|---|---|
| <p>HS Grad Curriculum Committee</p> <p><b>SL: Didactic - EdD 700:</b><br/>Organizational Development and Change in Education – Final Paper<br/><b>Target:</b> 100% of students will receive an average score of &gt;=85%<br/><b>Timeframe:</b> When course is taught (e.g., Fall 2017)<br/><b>Responsible Parties:</b> Program Chair/HS Grad Curriculum Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/><b>Target Met:</b> Yes<br/>Fall 2019 – 2 students</p> <p>100% of students received a score of &gt;85%</p> <p>Overall average score = 98.3% (55.05/56)</p> <p>Fall 2014 – 98.7% (average)<br/>Fall 2017 – 86.2% (average)</p> <p>The final paper in this course was a culmination of several smaller assignments that required students to create a change proposal and apply concepts covered in the course. Students placed themselves in the role of the change agent and developed a change proposal applicable to their educational settings. The action plan from the 2017-2018 CAP (course was not taught in 2018-2019) indicated framing feedback according to the rubric used to grade the final paper would be helpful for students to improve their writing. Feedback given on the smaller assignments was framed according to the rubric used to assess the final project to help students make revisions and this helped students achieve the target on this measure. (07/31/2020)</p> | <p><b>Action:</b> This assignment will be included the next time this course is taught with no revisions. Feedback given on the smaller assignments that feed into the final paper will be framed according to the rubric used for grading to help students be successful. Subsequent sections will be assessed on this measurement tool to ensure the target continues to be met. (07/31/2020)</p> |

**AU Outcome: EdD 2.1**

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

**Outcome Status:** Active

| <i>Measures</i>   | <i>Results</i>  | <i>Actions</i>  |
|---|---|---|
| <p><b>SL: Didactic - EdD 750:</b> Curriculum Theory and Design in the Health Professions – Final Project<br/><b>Target:</b> 100% of students will receive</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/><b>Target Met:</b> Yes<br/>Fall 2019 – 1 student</p> | <p><b>Action:</b> This assignment will be included the next time this course is taught with no revisions.</p> |

College Goal 2 - Allen College is committed to developing and implementing accessible academic programs of excellence that are responsive to the workforce needs of Iowa and the nation.

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

**AU Outcome: EdD 2.1**

| <i>Measures</i>  | <i>Results</i>   | <i>Actions</i>   |
|--|--|--|
| <p>an average score of &gt;=85%<br/> <b>Timeframe:</b> When course is taught<br/> <b>Responsible Parties:</b> Program Chair/HS Graduate APG Committee</p>  | <p>100% of students received a score of &gt;85%</p> <p>Overall average score = 100% (100/100)</p> <p>This project required students to assemble a portfolio to showcase development of a unit of instruction that aligned with topics associated with curriculum development. (07/31/2020)</p>   | <p>Students will assemble a portfolio that showcases their ability to developed a unit of instruction. Faculty will support student work by providing feedback on assignments that feed into the final project. Subsequent sections will be assessed on this measurement tool to ensure the target continues to be met. (07/31/2020)</p> |
| <p><b>SL: Didactic - EdD 760: Pedagogy in Health Professions Education – Teaching Evaluation</b><br/> <b>Target:</b> 100% of students will receive a score of &gt;=85%<br/> <b>Timeframe:</b> When course is taught (e.g., 2014, 2017, etc.)<br/> <b>Responsible Parties:</b> Program Chair/HS Graduate Curriculum Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>           Spring 2020 – 3 students</p> <p>100% of students received a score of &gt;85%</p> <p>Overall average score = 100% (50/50)</p> <p>New measurement tool and target.</p> <p>Within each module, students evaluated an existing teaching evaluation tool against the learning theories covered in that module. By the end of the course, each student had created a unique teaching evaluation to use for a peer review. Due to COVID-19, students were not able to complete peer reviews, so a reflection on creating the document was added as a substitute. (07/31/2020)</p> | <p><b>Action:</b> Students will complete a peer review with their evaluation. A rubric helped guide students on completing this assignment, and that will continue to be used. Subsequent sections will be assessed on this item to ensure the target continues to be met. (07/31/2020)</p>  |
| <p><b>SL: Didactic - EdD 790: Practicum in Health Professions Education – Project Conferences</b><br/> <b>Target:</b> Students will receive an average score of &gt;80%</p>  | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> NA<br/>           Course not offered. (07/31/2020)</p>  |  |

College Goal 2 - Allen College is committed to developing and implementing accessible academic programs of excellence that are responsive to the workforce needs of Iowa and the nation.

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

**AU Outcome: EdD 2.1**

| <i>Measures</i>   | <i>Results</i> | <i>Actions</i> |
|---|----------------|----------------|
| <p><b>Timeframe:</b> When course is taught (e.g., Spring 2017)<br/> <b>Responsible Parties:</b> Program Chair/HS Graduate APG Committee</p> |                |                |

**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.

| <i>Measures</i>  | <i>Results</i>  | <i>Actions</i>   |
|--|---|--|
| <p><b>SL: Didactic - OT 601 –Care Plan Assignment</b></p> <p><b>Target:</b> Minimum of 80% on care plan assignment<br/> <b>Timeframe:</b> When course taught (2nd Year, e.g., Fall 2016)<br/> <b>Responsible Parties:</b> Instructor/ OT Faculty /HS Grad Curriculum Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> No<br/>           19/24 students did achieve at least a minimum of 80% on the care plan assignment in OT 601 and the average score was 26.6 out of 30 (89%). Although this result is slightly down from the previous year, it is significantly improved from the year before when 18 of 22 students received at least 80% on this assignment and the class average was 26.7/30 (89%).</p> <p>Per the 2018-2019 action plan students were 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. However, the action plan does not appear to have improved scores from the previous year. (09/25/2020)</p> | <p><b>Action:</b> The care plan assignment has been revised to offer students with additional clarification with regards to expectations of specific sections of the assignment. Due to newly revised 2018 ACOTE accreditation standards, this measurement tool and its placement in the coursework/curriculum will be reviewed by faculty and revised as appropriate to meet the new standards. The shift from 2011 to 2018 ACOTE standards went into effect July 2020 and so were in process during the 2019-2020 CAP data collection period. (09/25/2020)</p> |

College Goal 2 - Allen College is committed to developing and implementing accessible academic programs of excellence that are responsive to the workforce needs of Iowa and the nation.

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

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

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

| <i>Measures</i>   | <i>Results</i>   | <i>Actions</i>  |
|---|--|---|
| <p><b>SL: Clinical</b> - OT 602 - Treatment Note</p> <p><b>Target:</b> Minimum of 80% on documentation note</p> <p><b>Timeframe:</b> When course taught (2nd Year, e.g., Fall 2016)</p> <p><b>Responsible Parties:</b> Instructor/ OT Faculty /HS Grad Curriculum Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> <p><b>Target Met:</b> No</p> <p>22 of 24 students received at least 80% on this assignment, with a class average of 93%. These results demonstrate an improvement in student performance from last two years with 18/22 and 21/23 students receiving 80% or higher 2018-2019 and 2017-2018, respectively. Per the 2018-2019 action plan, more practice case studies, specifically case studies that involve writing up a report, were done in class, Additionally, practice focused on collaboration with children/teens/families/team members to develop an intervention plan using the Occupational Therapy Practice Framework's Occupational Profile. This plan was somewhat effective in promoting the success of most students on the assignment. (09/25/2020)</p> | <p><b>Action:</b> The program plans to include more practice video case studies and online simulation opportunities for students, specifically, case studies and activities that involve writing up a report as this 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. Due to newly revised 2018 ACOTE accreditation standards, this measurement tool and its placement in the coursework/curriculum will be reviewed by faculty and revised as appropriate to meet the new standards. The shift from 2011 to 2018 ACOTE standards went into effect July 2020 and so were in process during the 2019-2020 CAP data collection period (09/25/2020)</p> |

**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.

College Goal 2 - Allen College is committed to developing and implementing accessible academic programs of excellence that are responsive to the workforce needs of Iowa and the nation.

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

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

| <i>Measures</i>   | <i>Results</i>  | <i>Actions</i>   |
|---|---|--|
| <p><b>SL: Didactic</b> - OT 522 – Final Exam Video Case<br/> <b>Target:</b> Minimum score of 80% on final exam video case<br/> <b>Timeframe:</b> When course taught (1st Year, e.g., Fall 2016)<br/> <b>Responsible Parties:</b> Instructor/ OT Faculty /HS Grad Curriculum Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> No<br/>                     22/24 attained 80% on the final exam which is an improvement from the previous downward trend the past three years 10/23, 17/19 and 14/14.</p> <p>Per the 2018-2019 action plan, faculty added more opportunities in class to review cases that support practice in decision-making in the selection and application of adaptive equipment and technology. Faculty also reviewed the assignment and made appropriate changes to capture student learning for this topic. It appears that the action plan did result in improved student performance the past assessment period. (09/22/2020)</p> | <p><b>Action:</b> The final exam will be revised and alternative case study videos will be examined. Students will be provided with multiple opportunities throughout the semester for clinical reasoning related to assistive technology intervention. Clear expectations of the outcome measure will be reviewed with the students. Due to newly revised 2018 ACOTE accreditation standards, this measurement tool and its placement in the coursework/curriculum will be reviewed by faculty and revised as appropriate to meet the new standards. The shift from 2011 to 2018 ACOTE standards went into effect July 2020 and so were in process during the 2019-2020 CAP data collection period (09/22/2020)</p> |

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

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

| <i>Measures</i>   | <i>Results</i>   | <i>Actions</i>  |
|---|--|---|
| <p><b>SL: Didactic</b> - OT 523 – Case Study Assignment<br/> <b>Target:</b> Minimum score of 80% on</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     24/24 students achieved a minimum score of 80% or greater on this assignment. This was</p> | <p><b>Action:</b> To facilitate student success on this assignment during 2020-2021, faculty will continue to</p> |

College Goal 2 - Allen College is committed to developing and implementing accessible academic programs of excellence that are responsive to the workforce needs of Iowa and the nation.

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

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

| <i>Measures</i>  | <i>Results</i>   | <i>Actions</i>   |
|--|--|--|
| <p>case study assignment<br/> <b>Timeframe:</b> When course taught (1st Year, e.g., Summer 2016)<br/> <b>Responsible Parties:</b> Instructor/ OT Faculty /HS Grad Curriculum Committee</p> | <p>consistent with the last time the course was taught where 22/22 students achieved the minimum score of 80% or greater. This goal has been met 3/4 of the last reporting years. The action plan has provided support to continue to have all students meet the expected goal.</p> <p>Per the 2018-2019 action plan, this measure was reviewed by faculty and a decision was made to retain it in OT 523 for the 2019-2020 reporting year. To facilitate student success on this assignment, faculty provided opportunities for students to modify environments with varied clients. (09/22/2020)</p> | <p>develop opportunities for students to modify environments throughout the program's coursework to support students in learning the skills. Reassess outcome measures relating to this objective. Due to newly revised 2018 ACOTE accreditation standards, this measurement tool and its placement in the coursework/curriculum will be reviewed by faculty and revised as appropriate to meet the new standards. The shift from 2011 to 2018 ACOTE standards went into effect July 2020 and so were in process during the 2019-2020 CAP data collection period. (09/22/2020)</p> |

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

#### AU Outcome: MI 2.1

Students will demonstrate effective communication skills in the clinical setting.

**Outcome Status:** Active

| <i>Measures</i>  | <i>Results</i>   | <i>Actions</i>   |
|--|--|--|
| <p><b>AD: Report - Internal</b> - MI: 480 Clinical Instructor Evaluations Numbers 3, 6,10,11</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     There is no previous data available for comparison. The MI 480 Clinical Instructor</p> | <p><b>Action:</b> The clinical instructors will continue to work with each</p> |

College Goal 2 - Allen College is committed to developing and implementing accessible academic programs of excellence that are responsive to the workforce needs of Iowa and the nation.

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

**AU Outcome: MI 2.1**

| <i>Measures</i>   | <i>Results</i>  | <i>Actions</i>  |
|---|---|---|
| <p><b>Target:</b> Average score &gt;= 3 (0-4 pt. scale)<br/> <b>Timeframe:</b> Summer Semester<br/> <b>Responsible Parties:</b> Clinical Instructors/ Program Faculty/HS Curriculum Committee</p>   | <p>Evaluations, numbers 3, 6, 10, 11 average score is 3.75. The students showed effective communication skills in all four performance criteria areas: patient care, interpersonal relationships, multicultural diversity, and age appropriate care. When the clinical instructor completes the student’s evaluation during the last two weeks of the semester/program, the evaluation is then reviewed and discussed with each student. All three students received high praise from their clinical instructor in all four performance criteria areas.</p> <p>2020 = 3.75 (n=3)<br/>                 2019 (n=0) (09/11/2020)</p> | <p>individual student in the clinical environment. While providing direct patient care, the clinical instructor will continue to work with each student to ensure they are learning how to communicate effectively with all patients. The clinical instructor will also continue to guide students as they build upon their interpersonal relationships in the clinical environment. The instructor will continue to use this measurement tool as it demonstrated that it is beneficial in measuring effective communication skills within the clinical environment. (09/11/2020)</p> |
| <p><b>AD: Report - Internal - MI:</b> 465 Clinical Instructor Evaluations Numbers 3, 6,10,11<br/> <b>Target:</b> Average score &gt;= 3 (0-4 pt. scale)<br/> <b>Timeframe:</b> Summer Semester<br/> <b>Responsible Parties:</b> Clinical Instructors/ Program Faculty/ HS Curriculum Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> NA<br/>                 No current data available. The CT student that is currently in the program is following the part-time track. The student will complete the MI 445 course in the next academic year. As proposed in the 2018-2019 action plan, this measure has been continued because it is considered beneficial in measuring effective communication skills within the clinical environment.</p> <p>2020 (n=0)<br/>                 2019 = 4 (n=1) (09/11/2020)</p>  | <p><b>Action:</b> The clinical instructors will continue to work with each individual student in the clinical environment. While providing direct patient care, the clinical instructor will continue to work with each student to ensure they are learning how to communicate effectively with all patients. The clinical instructor will also continue to guide students as they build upon their interpersonal relationships in the clinical environment. The instructor will</p>  |

College Goal 2 - Allen College is committed to developing and implementing accessible academic programs of excellence that are responsive to the workforce needs of Iowa and the nation.

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

**AU Outcome: MI 2.1**

| <i>Measures</i> | <i>Results</i> | <i>Actions</i>   |
|-----------------|----------------|--|
|                 |                | continue to use this measurement tool as it demonstrated that it is beneficial in measuring effective communication skills within the clinical environment. (09/11/2020) |

**AU Outcome: MI 2.2**

Students will practice written communication skills.

**Outcome Status:** Active

| <i>Measures</i>  | <i>Results</i>   | <i>Actions</i>  |
|--|--|---|
| <p>MI: 410 Research PowerPoint Presentation (MRI)<br/> <b>Target:</b> Average score of &gt;= 80%<br/> <b>Timeframe:</b> Fall Semester</p> <p><b>Responsible Parties:</b> MI: 410 Course Instructor/HS Curriculum Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes</p> <p>In fall 2019, the MI 410 Research PowerPoint Presentation average score is 94%. The fall 2018 average score was slightly higher at 97%. Although this year's average score was lower, the average score was still significantly high when compared to the target benchmark. The students received reduced points on content and APA format. Some of the content provided did not sound "professional" with regards to the level of education that the student has. Two students struggled with proper APA formatting throughout their PowerPoint Presentation. A rubric is provided to the students before they begin their research, so they are aware of what is required. The student last year also struggled with APA formatting. As proposed in the 2018-2019 action plan, a direct APA link was provided to them within their Blackboard module for easy access this year. Providing a link within Blackboard so the students could locate specific APA format information was beneficial with regards to accessibility, but the students still didn't seem to fully understand how to properly cite their references in a PowerPoint presentation. Each student was required to submit a portion of their presentation part way through the semester for feedback. The instructor provided detailed feedback regarding APA formatting to each student at that time.</p> <p>2019 = 94% (n=3)<br/>                 2018 = 97% (n=1) (09/11/2020)</p> | <p><b>Action:</b> The instructor will break down the rubric to make it more specific with regards to APA formatting and content for the next cohort. The instructor will create a PowerPoint Presentation example that will include proper APA formatting for the students to use as a reference. The APA link will remain in their Blackboard course for easy access throughout the course. (09/11/2020)</p> |

College Goal 2 - Allen College is committed to developing and implementing accessible academic programs of excellence that are responsive to the workforce needs of Iowa and the nation.

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

#### AU Outcome: MI 2.2

| Measures  | Results  | Actions  |
|---|--|--|
| <p>MI: 435 CT Procedures I Reflection Paper<br/> <b>Target:</b> Average score of &gt;= 80%<br/> <b>Timeframe:</b> Spring Semester<br/> <b>Responsible Parties:</b> MI: 435 Course Instructor/ HS Curriculum Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> NA<br/>                     No current data available.<br/>                     The CT student that is currently in the program is following the part-time track. That student will complete the MI 435 course in the next academic year.</p> <p>2020 (n=0)<br/>                     2019 = 100% (n=3) (09/11/2020)</p> | <p><b>Action:</b> To help with grading consistency moving forward, the instructor will provide a detailed rubric to each student when the paper is assigned. No other action will be taken at this time.<br/>                     (09/11/2020)</p> |

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

#### AU Outcome: MLS 2.1

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

**Outcome Status:** Active

| Measures  | Results   | Actions  |
|---|---|--|
| <p><b>SL: Clinical evaluation tool - MLS 428:</b> Cell Morphology - Case Simulator Assignments<br/> <b>Target:</b> 75% of students will receive an average score of &gt;80% (formerly 75% of students will complete all assignments)<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> Program Chair/HS Curriculum Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     Summer 2019 – 9 students</p> <p>100% (9/9) of students completed all assignments</p> <p>New item this year.</p> <p>A new resource was used to offer cell morphology case studies and differential practice. Students were allowed to repeat work on cases and appeared to use this resource to help support their learning. Evidence shows students used this resource without any technical issues. (07/31/2020)</p> | <p><b>Action:</b> Continue to use this resource to support cell morphology and differential topics. Create a new assignment for the last week of the course to assess differential competency. Create a new CAP measurement tool with a target of 75% of students will receive a score of &gt;80% to assess during the 2020-2021 academic year. (07/31/2020)</p> |
| <p><b>SL: Clinical - Affective evaluation–</b></p>  |   |  |

College Goal 2 - Allen College is committed to developing and implementing accessible academic programs of excellence that are responsive to the workforce needs of Iowa and the nation.

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

#### AU Outcome: MLS 2.1

| <i>Measures</i>  | <i>Results</i>  | <i>Actions</i>  |
|--|---|---|
| <p>MLS 455: Immunohematology<br/> <b>Target:</b> 75% of students will receive an average score of &gt;= 80%<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> Program Chair/HS Curriculum Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>           Spring 2020 – 5 students</p> <p>100% (5/5) students earned an average score of &gt;80%</p> <p>Overall average score = 23.4/25 points; 93.6%</p> <p>2019 – 99.2%<br/>           2018 – 90%<br/>           2016 – 91.4%<br/>           2015 – 95.4%<br/>           2014 – 95.8%<br/>           2013 – 97%<br/>           2012 – 100%<br/>           2011 – 97%</p> <p>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, communication skills, acceptance of constructive criticism, and safety. The plan from the 2018-2019 CAP to continue to promote professional behaviors throughout the program was successful in helping students achieve the target for this item. For 2020, clinical rotations were completed virtually due to COVID-19, but an adapted affective evaluation was used to assess behaviors related to rotation activities. (07/31/2020)</p> | <p><b>Action:</b> 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. In addition, students will receive a didactic affective evaluation at midterm and the end of the course.<br/>           (07/31/2020)</p> |

#### AU Outcome: MLS 4.2

Students will communicate effectively in an online environment

**Outcome Status:** Active

| <i>Measures</i> | <i>Results</i> | <i>Actions</i> |
|-----------------|----------------|----------------|
|                 |                |                |

College Goal 2 - Allen College is committed to developing and implementing accessible academic programs of excellence that are responsive to the workforce needs of Iowa and the nation.

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

### AU Outcome: MLS 4.2

| <i>Measures</i>   | <i>Results</i>   | <i>Actions</i>   |
|---|--|--|
| <p><b>SL: Didactic</b> - MLS 455: Immunohematology - Video Journal Entries<br/> <b>Target:</b> 75% of students will receive an average score of <math>\geq</math> 80%<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> Program Chair/HS APG Committee</p>                                   | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> NA<br/>                     Not assessed</p> <p>New item this year.</p> <p>Due to COVID-19, clinical rotations were completed virtually, and students met with the instructor for three weekly synchronous sessions. The video journals were not used. (08/01/2020)</p>   | <p><b>Action:</b> Video journals will be used for the 2020-2021 academic year and assessed against the target. (08/01/2020)</p>  |
| <p><b>SL: Didactic</b> - Management Section Discussion Board posts – MLS 465: Clinical Management and Review<br/> <b>Target:</b> 75% of students will receive an average score of <math>\geq</math> 80%<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> Program Chair/HS APG Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     Spring 2020 – 6 students 100% (6/6) students earned an average score of <math>&gt;</math>80%<br/>                     The average score earned is 96.6%<br/>                     Spring 2019 – 98%</p> <p>Students discuss laboratory-based cases each week that are related to the course 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. This plan from the 2018-2019 CAP indicated a project relating to clinical laboratory management would be incorporated into the course, but faculty was unable to meet this plan and so it had no bearing on the success of this students achieving this target. (07/31/2020)</p> | <p><b>Action:</b> 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 course will be updated with the addition of an assignment that will mirror the discussion in 2021. Students will create a project that showcases how a clinical laboratory is managed This course will also be split into two courses with the review modules being removed to better align with the curriculum. We will continue to assess student outcomes. (07/31/2020)</p> |

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

### AU Outcome: PH 1.1

College Goal 2 - Allen College is committed to developing and implementing accessible academic programs of excellence that are responsive to the workforce needs of Iowa and the nation.

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

### AU Outcome: PH 1.1

Student will be able to identify determinants of health and illness

**Outcome Status:** Active

| <i>Measures</i>  | <i>Results</i>  | <i>Actions</i>   |
|--|---|--|
| <p><b>SL: Exam/Quiz - Teacher-made - PH:</b> 430 Final exam<br/> <b>Target:</b> Average score of &gt;80%<br/> <b>Timeframe:</b> Fall Semester<br/> <b>Responsible Parties:</b> Program faculty / HS APG committee</p>  | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> No<br/>                     In Fall 2019, two students took the course and earned an average of 79.3% on the final exam. In Fall 2018, seven students took the course and received an average of 81.3% on the final exam. This was the second year for a new curriculum and while results were worse, this may be attributable to a smaller cohort. Last year's action plan of putting more emphasis on biostatistics does not seem to have been effective. (02/04/2020)</p>   | <p><b>Action:</b> Based on these results, more emphasis will be put on using Excel and online calculators rather than hand-computing math problems. Additionally, the program director who currently teaches this course will consider bringing in an adjunct or other expert help for this course in Fall 2020. (02/04/2020)</p>  |
| <p><b>SL: Didactic -</b> Community needs assessment as part of mid-term project.<br/> <b>Target:</b> Average score of &gt;80%<br/> <b>Timeframe:</b> Spring semester<br/> <b>Responsible Parties:</b> Program faculty / Health Science (HS) Curriculum committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     In Spring 2020, students (n=3) scored an average of 91% with all students scoring above the 80% student. In Spring 2019, 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.<br/><br/>                     Per the 2018-2019 action plan, students were required to gather reputable health data sources in an assignment prior to the midterm project to ensure that they had good information to write their community assessments. A grading rubric was made available to students when they started the project to inform them of how the project would be evaluated. Students have consistently scored &gt; 80% on the assignment, suggesting the action plan is effective in facilitating target achievement. (05/18/2020)</p> | <p><b>Action:</b> This measurement will remain in the assessment plan since it is valuable for the students to find data relevant to their community and then make an action plan based on the information they find. By focusing on relevant data sources prior to the assignment it improved the paper by honing in on community-level data. However, the assignment may move to a new course due to a plan to bring on an adjunct to teach this course in Spring 2021. (09/15/2020)</p> |

### AU Outcome: PH 1.2

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

College Goal 2 - Allen College is committed to developing and implementing accessible academic programs of excellence that are responsive to the workforce needs of Iowa and the nation.

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

### AU Outcome: PH 1.2

**Outcome Status:** Active

| <i>Measures</i>  | <i>Results</i>  | <i>Actions</i>   |
|--|---|--|
| <p><b>SL: Didactic</b> - Community needs assessment as part of mid-term project.<br/> <b>Target:</b> Successful completion of report Average score of &gt;80%<br/> <b>Timeframe:</b> Spring semester<br/> <b>Responsible Parties:</b> Program faculty / Health Science (HS) Curriculum committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     In Spring 2020, students (n=3) scored an average of 91% with all students scoring above the 80% student. In Spring 2019, 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.<br/><br/>                     In line with last year's action plan, students gathered 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 was made available to students when they start the project.<br/>                     (09/15/2020)</p> | <p><b>Action:</b> This measurement will remain in the assessment plan since it is valuable for the students to find data relevant to their community and then make an action plan based on the information they find. Students have found the use of a rubric and having their sources reviewed prior to the assignment improves the process. However, the assignment may move to a new course due to a plan to bring on an adjunct to teach this course in Spring 2021.<br/>                     (09/15/2020)</p> |

### AU Outcome: PH 1.3

Student will be able to analyze data

**Outcome Status:** Active

| <i>Measures</i>  | <i>Results</i>  | <i>Actions</i>   |
|--|---|--|
| <p><b>SL: Exam/Quiz - Teacher-made</b> - PH: 430 Final exam<br/> <b>Target:</b> Average score of &gt;80%<br/> <b>Timeframe:</b> Fall semester<br/> <b>Responsible Parties:</b> Program faculty / HS Faculty Org. committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> No<br/>                     In Fall 2019, two students took the course and earned an average of 79.3% on the final exam. In Fall 2018, seven students took the course and received an average of 81.3% on the final exam. This was the second year for a new curriculum and while results were worse, this may be attributable to a smaller cohort. Last year's action plan of putting more emphasis on biostatistics does not seem to have been effective. (02/04/2020)</p> | <p><b>Action:</b> Based on these results, more emphasis will be put on using Excel and online calculators rather than hand-computing math problems. Additionally, the program director who currently teaches this course will consider bringing in an adjunct or other</p> |

College Goal 2 - Allen College is committed to developing and implementing accessible academic programs of excellence that are responsive to the workforce needs of Iowa and the nation.

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

### AU Outcome: PH 1.3

| Measures | Results | Actions  |
|----------|---------|--|
|          |         | expert help for this course in Fall 2020. (02/04/2020) |

### 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   |
|---|--|---|
| <p><b>SL: Exam/Quiz - Teacher-made - PH</b> 480 Final Exam. (Public Health Research and Evaluation)<br/> <b>Target:</b> Average score &gt; 80%<br/> <b>Timeframe:</b> Spring semester<br/> <b>Responsible Parties:</b> Program faculty / Health Science (HS) Curriculum committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     In Spring 2020, eight students took the final exam and scored an average of 83.3%. 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%. While the standard was met in Spring 2020, this was with the advantage of being able to take the test twice, per the 2018-2019 action plan. The standard was only met this time since students were offered a second chance to take the final exam. The four students who opted to do so raised their scores an average of 7.25 points, or 10%. (05/18/2020)</p> | <p><b>Action:</b> It is planned that a new instructor will be brought on to teach the course in Spring 2021, resulting in all new course materials including the exam. (09/15/2020)</p> |

### 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   |
|--|---|---|
| <p><b>SL: Didactic - PH:</b> 420 Final report<br/> <b>Target:</b> Average score of &gt;80%<br/> <b>Timeframe:</b> Fall semester<br/> <b>Responsible Parties:</b> Program faculty / HS Curriculum committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     In Summer 2019, seven students taking the course received average of 91.3% on their final report. In Summer 2018, three students took the course and received an average of 81.3%. The measure appears to be improving in part due to a more rigid rubric being used for this assignment along with more time dedicated to the final report as part of the changes planned in the 2018-2019 action plan. (09/03/2019)</p> | <p><b>Action:</b> There will be minor changes to the final project due to a new edition of the book being used and a second textbook being removed due to aging out of relevance. This will result in minor changes to the assignment since</p> |

College Goal 2 - Allen College is committed to developing and implementing accessible academic programs of excellence that are responsive to the workforce needs of Iowa and the nation.

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

#### AU Outcome: PH 3.1

| Measures | Results | Actions  |
|----------|---------|--|
|          |         | they relied on the use of both books and web-based materials. (09/03/2019) |

#### 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  |
|--|---|--|
| <p><b>SL: Exam/Quiz - Teacher-made - PH:</b> 410 Final exam<br/> <b>Target:</b> Average score of &gt;80%<br/> <b>Timeframe:</b> Fall semester<br/> <b>Responsible Parties:</b> Program faculty / HS Faculty Org. committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> No<br/>                     In Fall 2019, seven students earned an average of 74.4% on the final exam. In Fall 2018, eleven students received an average of 82.6% on the final exam. There is a significant drop in scores, likely due to a change in curriculum including a more difficult textbook. (02/04/2020)</p> | <p><b>Action:</b> Despite test questions being reviewed for fairness as stated in the 2018-2019, scores decreased rather than increased. The plan to allow students to take the exam twice was paused in hope that the question review process would be adequate to raise scores above the target without making the course too easy. Allowing a retake will be considered for the 2020-2021 academic year. (02/04/2020)</p> |

#### AU Outcome: PH 4.1

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

**Outcome Status:** Active

| Measures  | Results  | Actions   |
|---|--|---|
| <p><b>SL: Exam/Quiz - Teacher-made - PH:</b> 400 Identify prominent events in the</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> | <p><b>Action:</b> In Fall 2020, students will</p> |

College Goal 2 - Allen College is committed to developing and implementing accessible academic programs of excellence that are responsive to the workforce needs of Iowa and the nation.

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

**AU Outcome: PH 4.1**

| <i>Measures</i>   | <i>Results</i>   | <i>Actions</i>   |
|---|--|--|
| <p>history of public health Midterm Exam and assignments<br/> <b>Target:</b> Average score of &gt;80%<br/> <b>Timeframe:</b> Fall semester<br/> <b>Responsible Parties:</b> Program faculty / HS Curriculum committee</p>                     | <p><b>Target Met:</b> No<br/>           In Fall 2019, three students earned an average of 77.1% on the midterm exam. In Fall 2018, seven students earned an average of 91.8% on the midterm exam.<br/> <br/>           Per the 2018-2019 action plan, the 2019-2020 results for this measure represent a third year of data to guide future decisions about this measure. However, this action plan could not reasonably be expected to facilitate student success on the assignment. (02/04/2020)</p> | <p>be allowed to take the final exam twice to study concepts they may have otherwise missed during test preparation. (02/04/2020)</p>                                |
| <p><b>SL: Exam/Quiz - Teacher-made - PH:</b><br/>           430 Final exam<br/> <b>Target:</b> Average score of &gt;80%<br/> <b>Timeframe:</b> Fall semester<br/> <b>Responsible Parties:</b> Program faculty / HS Faculty Org. committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> No<br/>           In Fall 2019, two students took the course and earned an average of 79.3% on the final exam. In Fall 2018, seven students took the course and received an average of 81.3% on the final exam. (02/04/2020)</p>  | <p><b>Action:</b> Based on these results, more emphasis will be put on using Excel and online calculators rather than hand-computing math problems. (02/04/2020)</p> |

College Goal 3 - Allen College is committed to recruiting and retaining 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.

## Admin - Administration

### AU Outcome: Admin 2.0

Environment encourages Allen College employees to maximize their performance

**Outcome Status:** Active

| <i>Measures</i>   | <i>Results</i>   | <i>Actions</i>  |
|---|--|---|
| <p><b>AD: Report - External</b> - Salary comparison tools (e.g., IAICU, etc.)<br/> <b>Target:</b> Faculty salaries will be at the average comparable salary for rank at peer institutions.<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> DOBAS</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>           Allen College compared all data as indicated in our action plan for comparison data which resulted in no market adjustments being needed. Most recent data available was 2018-19. Allen College is at or above 2018-19 average salaries for all ranks when compared to Iowa colleges with nursing pre-licensure programs. Iowa private colleges (IAICU) was used and for the pre-licensure colleges that reported, Allen salaries met or exceeded the average in all ranks. These results are comparable to those of the previous reporting year, during which the target was also met. Staff salary comparisons were completed in 2020 for all positions using CUPA-HR reports. The 2019-2020 results were influenced by the 2018-2019 action plan by conducting the annual salary audit using all available sources of information and presenting the findings to the Allen College President who made the final determinations of appropriate adjustments. (09/09/2020)<br/> <b>Related Documents:</b><br/> <a href="#">UPH Allen College 20-21 Faculty Salary Range Review BOT.pdf</a></p> | <p><b>Action:</b> Continue to compare annually faculty and staff salaries with state, regional and national data if available. Make salary market adjustments as necessary based on data and trends. (09/09/2020)</p> |
| <p><b>AD: Report - Internal</b> - Annual report of Faculty Goal Achievement-short term teaching goals<br/> <b>Target:</b> 85% of faculty completely meet short-term teaching goals<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> Provost</p>       | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>           87.8% (43/49) met the short-term teaching goals. Six faculty members partially met their teaching goals. There were no faculty members who did not achieve some their short-term teaching goals. These results compare less favorably than 2018-2019 where 97.3% (36/37) faculty met the short-term teaching goals (no information was provided related to any faculty partially meeting their goals in 2018-2019). As described in the 2018-2019 action plan, the academic leadership, including both academic Deans, communicated the information to faculty during the fall semester; however, the results in 2019-2020 were not as high in 2018-2019, even though the target was still exceeded. (10/07/2020)</p>  | <p><b>Action:</b> Continue to use of conversations during evaluations and emphasize the importance of achieving the entirety of their goals. (10/07/2020)</p>   |
| <p><b>AD: Report - Internal</b> - Annual report of Faculty Goal Achievement-</p>  | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes</p>   | <p><b>Action:</b> Evaluate if there are unmet needs to pursue scholarly work.</p>   |

College Goal 3 - Allen College is committed to recruiting and retaining 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.

## Admin - Administration

### AU Outcome: Admin 2.0

| Measures   | Results   | Actions   |
|--|---|---|
| <p>progress on scholarly enrichment<br/> <b>Target:</b> 85% of faculty demonstrate progress on scholarly enrichment plans.<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> Provost</p>  | <p>85.7% (42/49) of faculty demonstrated progress on scholarly enrichment plans. Seven faculty did not demonstrate progress. These results compare favorably to 2018-2019 where 78.4% (29/37) faculty made progress on plans. The increased percentage of progress made on faculty scholarly enrichment plans was aided by the academic Deans coaching faculty to take advantage of workload release and coaching on developing achievable goals. (10/07/2020)</p>  | <p>(10/07/2020)</p>   |
| <p><b>AD: Report - Internal</b> - Summary of Expenditures for Faculty and Staff Professional Development [e.g., total dollars spent for meetings, travel, and educational expenses].<br/> <b>Target:</b> College provided financial support to college faculty and staff to attend educational and/or professional development activities<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> DOBAS</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>           In 2019 we budgeted for our education and travel expenses and were successful as \$47,261 was spent on tuition assistance for faculty and staff and \$65,314 was spent on conference and meeting travel totaling \$112,575 for faculty and staff. For 2020 there is \$274,711 budgeted for education and travel. These results met target but have decreased when compared with prior year due to less educational assistance requested and mitigation efforts reduced travel compared to prior year. As mentioned in the 2018 action plan, the College appropriately budgets for professional development opportunities. In the event of revenue shortfalls, the executive leaders determine if and how much savings can be mitigated from the professional development/travel budgets. (09/09/2020)</p>                                   | <p><b>Action:</b> Continue to budget education and travel expenses annually for faculty and staff professional development. (09/09/2020)</p>  |
| <p><b>AD: Report - Internal</b> - Professional Development and Welfare (PDW) committee annual scholarly recognition report.<br/> <b>Target:</b> 55% of faculty and staff are recognized for their service and scholarly accomplishments<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> PDW Committee Chair</p>   | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> No<br/>           33.3% (down 14% from the previous year) of faculty and staff were recognized for a scholarly achievement and 22.8% were recognized for a service award. For the 2018-2019 academic year, 47% of faculty and staff were recognized for a scholarly award.<br/>           The action plan for last year included extending the deadline for scholarly achievement submission into January to promote submissions; monthly reminders continued to be sent to all eligible faculty and staff. This did not improve the results as there were 14% fewer faculty and staff recognized for the 2019-2020 academic year. (05/11/2020)<br/> <b>Related Documents:</b><br/> <a href="#">Criteria for Scholarly Accomplishments 1.16.20.doc</a><br/> <a href="#">Program - 2019 Faculty and Staff Service and Scholarly Recognition Program.pdf</a></p> | <p><b>Action:</b> Faculty and staff will be asked to submit scholarly achievements on a monthly basis (a google doc will be sent every month from the PDW chair), instead of at the end of the calendar year, to encourage faculty and staff to submit scholarly achievements. The PDW chair will continue to encourage faculty and staff to submit scholarly accomplishments at CFO meetings. (05/11/2020)</p> |

College Goal 3 - Allen College is committed to recruiting and retaining 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.

## Admin - Administration

### AU Outcome: Admin 3.0

College receives external monetary contributions in the form of grants, scholarships, and gifts

**Outcome Status:** Active

| <i>Measures</i>  | <i>Results</i>   | <i>Actions</i>  |
|--|--|---|
| <p><b>AD: Report - Internal</b> - Internal Total Donations to College for Year<br/> <b>Target:</b> Amount of monetary donations increase.<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> President</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> No<br/>                     The total contributions for 2019-2020 fell short of 2018-2019 by \$2,431.90 (\$728,44.27 in 2019 vs. \$730,876.17 in 2018) mainly due to the successful closure of a major capital campaign. The For Allen For You Campaign included the Gerard Hall campaign to raise funds for office renovations.</p> <p>June 1, 2019 – May 31, 2020: Allen College received the following gifts:<br/>                     Cash: \$313,726.42<br/>                     Gift-in-Kind: \$4,065.08<br/>                     Pledges: \$410,181.82<br/>                     Stock/Property: \$470.95<br/>                     Other:<br/>                     Total: \$728,444.27</p> <p>The 2018 action plan identified the foundation and College President to continue to work towards successfully meeting this goal. Even with the conclusion of the For Allen For You Campaign, 2019-2020 was a successful year in terms of monetary donations to the College.<br/>                     (09/15/2020)</p> | <p><b>Action:</b> For 2020-2021, the Foundation staff and College President will need to identify alternative ways to reach donors. The SARS-CoV-2 pandemic has significantly affected how donors are handled. Even though totals for the year were just under totals for the prior year, significant concerns exist about securing donor funds. One new program being launched which will require donor funds is the Allen Legacy Program.<br/>                     (09/15/2020)</p> |

## 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 ...]

**Outcome Status:** Active

| <i>Measures</i>                               | <i>Results</i>                                     | <i>Actions</i>                               |
|---|--|--|
| <p><b>AD: Report - Internal</b> - Student</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> | <p><b>Action:</b> Re-establish quarterly</p> |

College Goal 3 - Allen College is committed to recruiting and retaining 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.

## Admin - Diversity and Inclusion Services

### AU Outcome: DIS 1.1

| Measures  | Results  | Actions   |
|---|--|---|
| <p>Recruitment Assessment [Report of efforts to recruit students who represent traditionally under-represented groups, e.g., males, Hispanics, African Americans, etc.]</p> <p><b>Target:</b> 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).</p> <p><b>Timeframe:</b> Annually</p> <p><b>Responsible Parties:</b> Admissions Counselors</p> | <p><b>Target Met:</b> Yes</p> <p>Due to COVID19, many traditional recruitment activities were either cancelled or done virtually. Allen College hosted ten College Visit Days, those in the spring of 2020 were virtual.</p> <p>The Admissions Office hosted A Day in the Life events two times in the fall of 2019. COVID19 required spring of 2020 events to be cancelled.</p> <p>The Admissions Office attended career fairs at Hawkeye Community College and Marshalltown Community College either in person or virtually. Both colleges are located in communities with a higher percentage of traditionally under-represented groups.</p> <p>The 2019-2020 year looked very different than 2018-2019. While the fall 2019 and early spring 2020 career fairs were in person, the end of the academic year consisted of many cancellations. Admissions offices and employers had to develop different infrastructures for which to offer events. Most of those changes occurred after the 2019-2020 academic year ended.</p> <p>Last year's action plan did not contribute to the success of the 2019-2020 academic year. Quarterly meetings were not held as there was not a D &amp; I Coordinator in place at that time. There was little discussion of recruitment of under-represented groups at the D &amp; I Committee meetings. This year was a year of transition. (01/26/2021)</p> | <p>meetings with the new Diversity and Inclusion Coordinator. Offer Day in the Life either in-person or virtually during the 2020-2021 academic year. (01/26/2021)</p>  |
| <p><b>AD: Report - Internal</b> - Pipeline Program Development Report [Report of ODS efforts to recruit students who represent traditionally under-represented groups, e.g., males, Hispanics, African Americans, etc.]</p> <p><b>Target:</b> There will be evidence of regular activities designed to recruit students who represent under-</p>  | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> <p><b>Target Met:</b> No</p> <p>There was one Day in the Life events hosting a total of 118 students. The number of students reached Decreased significantly from last year. The middle school date was cancelled by Carver, and both spring 2020 dates were cancelled due to COVID19.</p> <p>Summer Camp was canceled due to COVID19.</p> <p>Last year's action plan included reviewing the junior high Day in the Life model to include any 8th grade student in the Waterloo area instead of only Carver students. In addition, the new</p>  | <p><b>Action:</b> The action plan for 2020-2021 is similar to the plan for this academic year. The Day in the Life events will use the new model for junior high students. We plan to conduct a search for a platform that allows virtual events, such as Day in the life. (01/26/2021)</p> |

College Goal 3 - Allen College is committed to recruiting and retaining 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.

## Admin - Diversity and Inclusion Services

### AU Outcome: DIS 1.1

| Measures  | Results   | Actions |
|---|---|---------|
| <p>represented groups (e.g., at least 6 career days for surrounding communities annually; annual summer nurse camp for at least 25 students).</p> <p><b>Timeframe:</b> Annually<br/><b>Responsible Parties:</b> DIS Coordinator</p> | <p>model would require the student have an interest in health care. Unfortunately, due to COVID19, the new model could not be implemented. (01/26/2021)</p> |         |

### 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 ...]

**Outcome Status:** Active

| Measures   | Results  | Actions   |
|--|--|---|
| <p><b>AD: Report - Internal</b> - Associate Ethnic Diversity Assessment [Report of faculty ethnic diversity data obtained from administration and compared to most recent Iowa figures]</p> <p><b>Target:</b> Diversity of Allen College associates will reflect the ethnic and cultural diversity of the state of Iowa [e.g., if 5.5% of the Iowa population is comprised of Hispanics or Latinos, then the AC Hispanic-Latino Target for associates would be 5.5%]</p> <p><b>Timeframe:</b> Year 2<br/><b>Responsible Parties:</b> DIS Coordinator</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/><b>Target Met:</b> Yes</p> <p>The spring 2020 dashboard report to the Board of Trustees indicated total ethnic diversity among faculty and staff at Allen College at 9.7%. This compares slightly unfavorably to 2019 (10.2%) but favorably to 2018 (7.95%) and 2017 (6.89%). The total number of diverse faculty and staff did not change in 2020 compared to 2019, but more faculty/staff were hired who were not minorities which lowered our percentage. As of the most recent data, Allen College is meeting the target for this metric. More detailed information is provided below. The action plan from 2018-2019 was followed with support from Human Resources to ensure our open positions are fairly and equitably communicated to all stakeholders. The societal unrest which occurred in the spring/summer 2020 reaffirms Allen College's commitment to providing a work environment that is open and inclusive for all team members and students.</p> <p>Total faculty/staff: 92<br/>Ethnicity:<br/>White, non-Hispanic: 83 (67 full-time and 16 part time)<br/>Black, non-Hispanic: 3 (full-time)<br/>Hispanic: 3 (full-time)</p> | <p><b>Action:</b> Allen College is committed to increasing diversity among faculty and staff. Open positions will continued to be advertised and communicated for all qualified applicants. Allen College's Diversity and Inclusion Committee will work with UnityPoint Health's new system diversity coordinator to develop additional employment strategies to recruit highly qualified candidates who represent minority and diverse backgrounds. (01/27/2021)</p> |

College Goal 3 - Allen College is committed to recruiting and retaining 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.

## Admin - Diversity and Inclusion Services

### AU Outcome: DIS 1.2

| Measures   | Results  | Actions  |
|--|--|--|
|  | <p>White/Asian: 3 (full-time)</p> <p>Gender:<br/>           Female: 80 (64 full-time and 16 part-time)<br/>           Male: 12 (full-time)</p> <p>Breakdown by faculty and staff:<br/>           Faculty: 58<br/>           Ethnicity:<br/>           White, non-Hispanic: 55 (42 full-time and 13 part-time)<br/>           Hispanic: 2 (full-time)<br/>           White/Asian: 1 (full-time)<br/>           Gender:<br/>           Female: 53 (40 full-time and 13 part-time)<br/>           Male: 5 (full-time)</p> <p>Staff: 34<br/>           Ethnicity:<br/>           White, non-Hispanic: 28 (25 full-time and 3 part-time)<br/>           Black, non-Hispanic: 3 (full-time)<br/>           Hispanic: 1 (full-time)<br/>           White/Asian: 2 (full-time)<br/>           Gender:<br/>           Female: 27 (24 full-time and 3 part-time)<br/>           Male: 7 (full-time) (01/27/2021)</p> |  |
| <p><b>AD: Report - Internal</b> - Faculty Gender Diversity Assessment<br/>           [Report of gender diversity data obtained from administration and compared to most recent figures for each professional program.]<br/> <b>Target:</b> Gender diversity of faculty</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>           The spring 2020 dashboard report to the Board of Trustees indicated total gender diversity among faculty and staff at Allen College with 12.0% male faculty. This compares slightly favorably to 2019 (10.2%) and 2018 (12.5%) and slightly unfavorably to 2017 (13.79%). Due to the number of hires made for the Doctor of Physical Therapy program, the amount of gender diversity will increase in the coming years. As of the most recent data, Allen College is</p>   | <p><b>Action:</b> Allen College and the Human Resources team will continue to monitor the gender diversity on campus. The data indicate a favorable trend of ensuring gender diversity on campus and it is recommended not</p> |

College Goal 3 - Allen College is committed to recruiting and retaining 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.

## Admin - Diversity and Inclusion Services

### AU Outcome: DIS 1.2

| Measures   | Results   | Actions   |
|--|---|---|
| <p>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)</p> <p><b>Timeframe:</b> Year 2</p> <p><b>Responsible Parties:</b> DIS Coordinator</p> | <p>meeting the target for this metric. More detailed information is provided below. The action plan from 2018-2019 was followed with support from Human Resources to ensure our open positions are fairly and equitably communicated to all stakeholders and the trends being observed indicated more male applicants, somewhat due in part to the positions posted in the Doctor of Physical Therapy Program.</p> <p>Total faculty/staff: 92</p> <p>Ethnicity:</p> <ul style="list-style-type: none"> <li>White, non-Hispanic: 83 (67 full-time and 16 part time)</li> <li>Black, non-Hispanic: 3 (full-time)</li> <li>Hispanic: 3 (full-time)</li> <li>White/Asian: 3 (full-time)</li> </ul> <p>Gender:</p> <ul style="list-style-type: none"> <li>Female: 80 (64 full-time and 16 part-time)</li> <li>Male: 12 (full-time)</li> </ul> <p>Breakdown by faculty and staff:</p> <p>Faculty: 58</p> <p>Ethnicity:</p> <ul style="list-style-type: none"> <li>White, non-Hispanic: 55 (42 full-time and 13 part-time)</li> <li>Hispanic: 2 (full-time)</li> <li>White/Asian: 1 (full-time)</li> </ul> <p>Gender:</p> <ul style="list-style-type: none"> <li>Female: 53 (40 full-time and 13 part-time)</li> <li>Male: 5 (full-time)</li> </ul> <p>Staff: 34</p> <p>Ethnicity:</p> <ul style="list-style-type: none"> <li>White, non-Hispanic: 28 (25 full-time and 3 part-time)</li> <li>Black, non-Hispanic: 3 (full-time)</li> <li>Hispanic: 1 (full-time)</li> <li>White/Asian: 2 (full-time)</li> </ul> | <p>to make any changes to the recruitment and hiring process at this time. (01/27/2021)</p> |

College Goal 3 - Allen College is committed to recruiting and retaining 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.

## Admin - Diversity and Inclusion Services

### AU Outcome: DIS 1.2

| Measures  | Results   | Actions  |
|---|---|--|
| <p><b>AD: Report - Internal</b> - Staff Gender Diversity Assessment [Report of gender diversity data obtained from administration and compared to most recent figures for each professional program]<br/> <b>Target:</b> Gender diversity of staff reflects diversity of the state of Iowa<br/> <b>Timeframe:</b> Year 2<br/> <b>Responsible Parties:</b> DIS Coordinator</p> | <p>Gender:<br/>           Female: 27 (24 full-time and 3 part-time)<br/>           Male: 7 (full-time) (01/27/2021)</p> <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>           The spring 2020 dashboard report to the Board of Trustees indicated total gender diversity among staff at Allen College with 16.0% male staff. This compares unfavorably to 2019 (20%). It is anticipated that this number will decrease in the short term due to the departure of several male staff members (EVS and Library) who were replaced with females. As of the most recent data, Allen College is meeting the target for this metric. More detailed information is provided below. The action plan from 2018-2019 was followed with support from Human Resources to ensure our open positions are fairly and equitably communicated to all stakeholders.</p> <p>Total faculty/staff: 92<br/>           Ethnicity:<br/>               White, non-Hispanic: 83 (67 full-time and 16 part time)<br/>               Black, non-Hispanic: 3 (full-time)<br/>               Hispanic: 3 (full-time)<br/>               White/Asian: 3 (full-time)</p> <p>Gender:<br/>           Female: 80 (64 full-time and 16 part-time)<br/>           Male: 12 (full-time)</p> <p>Breakdown by faculty and staff:<br/>           Faculty: 58<br/>           Ethnicity:<br/>               White, non-Hispanic: 55 (42 full-time and 13 part-time)<br/>               Hispanic: 2 (full-time)<br/>               White/Asian: 1 (full-time)</p> | <p><b>Action:</b> Even though the target for this metric is currently met and historically has been met, it is recommended that the College's leaders and human resources continue to closely monitor the hiring trends for the Allen College staff. Departures of male staff in 2020 could have a negative impact on this value moving forward and it is recommended to monitor to ensure the target is still being met. (01/27/2021)</p> |

College Goal 3 - Allen College is committed to recruiting and retaining 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.

## Admin - Diversity and Inclusion Services

### AU Outcome: DIS 1.2

| Measures  | Results  | Actions   |
|---|--|---|
|   | <p>Gender:<br/> Female: 53 (40 full-time and 13 part-time)<br/> Male: 5 (full-time)</p> <p>Staff: 34</p> <p>Ethnicity:<br/> White, non-Hispanic: 28 (25 full-time and 3 part-time)<br/> Black, non-Hispanic: 3 (full-time)<br/> Hispanic: 1 (full-time)<br/> White/Asian: 2 (full-time)</p> <p>Gender:<br/> Female: 27 (24 full-time and 3 part-time)<br/> Male: 7 (full-time) (01/27/2021)</p>  |   |
| <p><b>AD: Report - Internal</b> - 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].</p> <p><b>Target:</b> There will be evidence of regular activities designed to recruit associates who represent under-represented groups to fill open positions (e.g., advertisements in male nurse journals to recruit male faculty; advertisements in African American publications to recruit Black faculty and staff)</p> <p><b>Timeframe:</b> Annually</p> <p><b>Responsible Parties:</b> Provost</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> <p><b>Target Met:</b> Yes</p> <p>In 2019-2020, Allen College hired 10 new faculty/staff positions, all 10 were white/non-Hispanic. The College also hired 17 new adjunct faculty with 13% (n=2) being ethnically diverse. These number compare unfavorably to 2018-2019 where 1 new full-time faculty/staff hire was ethnically diverse. The target for this metric is being met because regular evidence does exist that human resources is engaging in activities to recruit under-represented groups for open positions. Even though the target is met, the continued difficulty to recruit ethnically diverse people to work at Allen College is concerning. Here are additional statistics about the 2019-2020 hiring:</p> <p>Faculty and Staff:<br/> 10 New Hires.<br/> All are White, non-Hispanic. 7 Female, 2 Male</p> <p>Adjunct Faculty:<br/> 17 New Hires Total<br/> 6 New Hires FA19:<br/> 8 New Hires SP20:</p> | <p><b>Action:</b> Allen College will continue to engage in activities designed to recruit associates (team members) who represent ethnically diverse backgrounds. The Office of Diversity and Inclusion will engage with UnityPoint Health's new diversity and inclusion coordinator to evaluate our hiring processes and seek recommendations for increasing the number of diverse hires. (01/27/2021)</p> |

College Goal 3 - Allen College is committed to recruiting and retaining 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.

## Admin - Diversity and Inclusion Services

### AU Outcome: DIS 1.2

| Measures | Results   | Actions |
|----------|---|---------|
|          | <p>3 New Hires SU20:<br/>                     15 are White, non-Hispanic, 2 are Black, Non-Hispanic<br/>                     All are Female<br/>                     (01/27/2021)</p> |         |

## Admin - Enrollment Management

### AU Outcome: EM 1.0

Retain Students

**Outcome Status:** Active

| Measures  | Results  | Actions   |
|---|--|---|
| <p><b>AD: Report - Internal</b> - Admissions Reports; Dashboard Statistics<br/> <b>Target:</b> Diverse population at Allen College has increased by 1% since last college census date.</p> <p><b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> Dean of Enrollment Management</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> No<br/>                     September 15, 2018 - Diverse population (ethnically diverse) = 7.7%<br/>                     September 15, 2019 - Diverse population (ethnically diverse) = 7.4%</p> <p>The number of ethnically diverse students decreased slightly between fall census in September 2018 and fall census in September 2019.</p> <p>Last year's action plan indicated the loss of the Diversity and Inclusion Office chair and that the academic year 2019-20 would focus on exploring new ideas and finding a new leader. Although there were a few activities focused on cultural awareness (including coffee hour, where a different culture was celebrated with food and activities at each meeting), there was not an increase of ethnic diversity. The year's ethnically diverse population did not increase during the year, and it may be due to the need for refocus while searching for a new Diversity and Inclusion chair. (07/17/2020)<br/> <b>Related Documents:</b><br/> <a href="#">Dashboards 2019-2020.doc</a></p> | <p><b>Action:</b> Maintain a 7% - 8% ethnic minority by hosting two events during the 2020-21 that promotes inclusiveness. (07/21/2020)</p> |

College Goal 3 - Allen College is committed to recruiting and retaining 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.

## Admin - Enrollment Management

### AU Outcome: EM 1.0

| Measures   | Results  | Actions  |
|--|--|--|
| <p><b>AD: Report - Internal</b> - Program Completion Rates (Graduation Rates Spreadsheet)</p> <p><b>Target:</b> 70% of graduate students complete their program</p> <p><b>Timeframe:</b> Annually</p> <p><b>Responsible Parties:</b> Dean of Enrollment Management</p>                       | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> <p><b>Target Met:</b> Yes</p> <p>Graduate program completion rates as reported in the 2019-20 Dashboard Statistics are 78%. Last year's completion rates were 79%. There is little difference between 2018-19 and 2019-20 completion rates.</p> <p>As noted in last year's action plan, a cohort model for MSN students was investigated and implemented. Although it will be several years before we see if the cohort model impacts completion rates, we should see data from first-year retention in the next year. (07/17/2020)</p> <p><b>Related Documents:</b><br/> <a href="#">Dashboards 2019-2020.doc</a></p>  | <p><b>Action:</b> Review first-year retention rates of MSN students to see if there is an improvement from 2018 to 2019 and 2019 to 2020. (07/17/2020)</p>     |
| <p><b>AD: Report - Internal</b> - Graduation Rates within 150%</p> <p><b>Target:</b> 70% of undergraduate students complete their program within 150% of the program completion time.</p> <p><b>Timeframe:</b> Annually</p> <p><b>Responsible Parties:</b> Dean of Enrollment Management</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> <p><b>Target Met:</b> Yes</p> <p>See pages 29-30 of the 2019-20 Dashboard Report for specific program graduation rates.</p> <p>The comparison between the 2019-20 academic year and the 2018-19 academic year are as follows:</p> <p>School of Health Sciences<br/>           The ASR graduation rate went from 94% to 75%<br/>           The DMS graduation rate from 67% to 100%<br/>           The MLS graduation rate went from 86% to 80%<br/>           The NMT graduation rate stayed at 100%<br/>           The Public Health Graduation rate went from 83% to 100%</p> <p>School of Nursing<br/>           The Accelerated Nursing program graduation rate went from 93% to 92%<br/>           The Traditional Nursing program graduation rate went from 75% to 83%</p> <p>Last year's action plan included adjusting the required testing average for undergraduate</p> | <p><b>Action:</b> Graduation rates will be presented at fall undergraduate APG meetings for review. Further action may come from this review. (07/17/2020)</p> |

College Goal 3 - Allen College is committed to recruiting and retaining 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.

## Admin - Enrollment Management

### AU Outcome: EM 1.0

| Measures  | Results  | Actions   |
|---|--|---|
|   | <p>nursing students. That change was predicted to decrease the graduation rate, but have a positive impact on NCLEX pass-rates. The graduation rate has actually increased. This may be due to the inclusion of the required testing average, as if students are held to a higher standard, it is possible the students will reach that higher standard. We will continue to monitor the graduation rates.</p> <p>All programs had above 70% graduation rates. (07/17/2020)</p> <p><b>Related Documents:</b><br/> <a href="#">Dashboards 2019-2020.doc</a></p>   |   |
| <p><b>AD: Report - Internal - Retention Plan</b><br/> <b>Target:</b> 100% of tutees achieve a C or higher in tutored courses</p> <p><b>Timeframe:</b> Annually</p> <p><b>Responsible Parties:</b> Student Success Coordinator</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>           Summer 2019 (5/27/19 - 8/15/19)</p> <p>No use by students in these courses.</p> <p>Fall 2019 (8/26/19 - 12/20/19) - two students submitted a question:</p> <p>Patho Drop-Off Question—One student submitted a questions A-<br/>           Patho Live Tutoring Session—One student met with a tutor B</p> <p>Spring 2020 (1/13/20 - 5/8/20) - three students submitted an additional question:</p> <p>In an effort to acquaint students with online tutoring early in the semester, the Patho instructors required all student (40) in NU 290 to submit a question to NetTutor. Of these 40 students, three students (7.5%) used the Drop-Off Question format again during the semester. Those three students' final grades were: A, B, C+</p> <p>Last year's action plan included the Student Success Coordinator collaborate with the undergraduate nursing APG committee. The decision from that committee require that all Patho students use NetTutor for their Patho course. Even though all 40 students were</p> | <p><b>Action:</b> Continue to introduce NetTutor to all students during orientation, provide email communication whenever a student has failed a test or is referred by their instructor. Use additional media to promote, such as the electronic screens. (07/21/2020)</p> |

College Goal 3 - Allen College is committed to recruiting and retaining 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.

## Admin - Enrollment Management

### AU Outcome: EM 1.0

| Measures  | Results  | Actions   |
|---|--|---|
|   | <p>introduced to the Patho section of NetTutor, only three proceeded with additional use of NetTutor. Since the number of students using NetTutor in these three courses was six during the 2018-19 academic year, and this year's number of students is five, the new requirement of introducing Patho students to NetTutor did not impact further use. However, all five students passed their course, which meets the goal. (07/21/2020)</p>  |   |
| <p><b>AD: Report - Internal - Retention rates</b></p> <p><b>Target:</b> 90% of first year students retained in all programs.</p> <p><b>Timeframe:</b> Annually</p> <p><b>Responsible Parties:</b> Dean of Enrollment Management</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> <p><b>Target Met:</b> No</p> <p>This year, all first time students who began an Allen College program in 2018 and were still enrolled, or graduated by fall of 2019 was 86%</p> <p>During the 2017-2018 academic year, 89% were still enrolled, graduated, or on an approved Leave of Absence.</p> <p>Last year's action plan was that the Student Success Coordinator and the Dean of Enrollment Management 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.</p> <p>There was a minimal difference between the retention of the two years. The progression policy for the nursing program has recently changed and students may not fail more than one course. This may have contributed to the retention between fall 2018 and fall 2019. In addition, tuition assistance was cut at many hospitals, which may have impacted retention. Finally, there were an unusual number of MSN students who were admitted and either did not matriculate, or dropped their courses within the first two weeks of their first semester. (05/28/2020)</p> | <p><b>Action:</b> Develop a retention-oriented webinar for graduate students in the nursing program for students to attend after admission. The goal of the webinar is to detail course delivery, explain clinical expectations, give preceptor information, and answer questions. This may be replicated for other high attrition programs during the year. The Dean of Enrollment Management will review the data from last year compared with fall 2020 to determine any differences. (05/28/2020)</p> |

### AU Outcome: EM 2.0

Offer a variety of student activities

**Outcome Status:** Active

College Goal 3 - Allen College is committed to recruiting and retaining 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.

## Admin - Enrollment Management

### AU Outcome: EM 2.0

| <i>Measures</i>  | <i>Results</i>   | <i>Actions</i>   |
|--|--|--|
| <p><b>AD: Report - Internal</b> - Allen College Student Opinion Survey--Satisfaction with College sponsored social activities</p> <p><b>Target:</b> 80% of students report satisfied or very satisfied</p> <p><b>Timeframe:</b> Annually</p> <p><b>Responsible Parties:</b> Associate Director of Admissions</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> <p><b>Target Met:</b> No</p> <p>45% of students reported being satisfied with student activities, while 2% of students reported dissatisfaction. This mimics the results of the student satisfaction survey from 2018-19 survey. Almost 38% of students are either unaware or have not participated in student activities.</p> <p>Allowing Ambassadors to develop activities increased the satisfaction rate of student activities significantly. In last year's action plan, we included the development of an event planning committee in the Ambassador Program structure. The committee was formed, and it did not have an impact on student satisfaction. (07/17/2020)</p> | <p><b>Action:</b> In the 2020-21 academic year, we will develop opportunities for virtual activities. (07/17/2020)</p> |

### AU Outcome: EM 3.0

Admissions policies and processes are fair and timely

**Outcome Status:** Active

| <i>Measures</i>  | <i>Results</i>   | <i>Actions</i>  |
|--|--|---|
| <p><b>AD: Report - Internal</b> - Allen College Student Opinion Survey--Satisfaction with new student orientation</p> <p><b>Target:</b> 80% of students report being satisfied or very satisfied with new student orientation.</p> <p><b>Timeframe:</b> Annually</p> <p><b>Responsible Parties:</b> Associate Director of Admissions</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> <p><b>Target Met:</b> Yes</p> <p>88% of students were satisfied with student orientation. In 2018-19, only 71% of students were satisfied with orientation. This is a significant positive change.</p> <p>The focus on the Allen College culture was included in last year's action plan. We moved much of the rules and regulatory information either online or to NetLearning, so the focus of orientation was aimed towards information about their program. (07/20/2020)</p> <p><b>Related Documents:</b><br/> <a href="#">Report Allen College Student Opinion Survey 05-04-20.pdf</a></p> | <p><b>Action:</b> Since COVID19 has pushed orientation online during the 2020-21 academic year, our focus will be to add motivation and energy to everything that is done virtually. In addition, we will use the tools from a virtual orientation and apply them to the an on-ground orientation. (07/20/2020)</p> |
| <p><b>AD: Report - Internal</b> - Allen College</p>  | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p>   | <p><b>Action:</b> The action plan for the</p>   |

College Goal 3 - Allen College is committed to recruiting and retaining 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.

## Admin - Enrollment Management

### AU Outcome: EM 3.0

| Measures  | Results   | Actions  |
|---|---|--|
| <p>Student Opinion Survey--Satisfaction with admissions process</p> <p><b>Target:</b> 80% of students report they are satisfied or very satisfied with the admissions process.</p> <p><b>Timeframe:</b> Annually<br/><b>Responsible Parties:</b> Associate Director of Admissions</p> | <p><b>Target Met:</b> Yes<br/>94% of students reported satisfaction with the admissions process. This percentage has raised since 19-20, where 83% of students were satisfied.</p> <p>Last year's action plan was to review the holistic admissions policy at the four APG committees. Each committee reviewed their admissions policy(ies) and two programs decided to move away from holistic admissions. The review of the holistic admission process did not have an impact on increased satisfaction. (07/20/2020)</p> <p><b>Related Documents:</b><br/><a href="#">Report Allen College Student Opinion Survey 05-04-20.pdf</a></p> | <p>2020-21 academic year includes using new communication tools to communicate with students during the admissions process. The new tools include HubSpot, RaiseMe, and Castlebranch. (07/20/2020)</p> |

### AU Outcome: EM 5.0

Registration policies and processes are fair and timely

**Outcome Status:** Active

| Measures   | Results   | Actions  |
|--|---|--|
| <p><b>AD: Report - Internal</b> - Allen College Student Opinion Survey--satisfaction with automated registration process</p> <p><b>Target:</b> 80% of students report satisfied or very satisfied with the automated registration process.</p> <p><b>Timeframe:</b> Annually<br/><b>Responsible Parties:</b> Registrar</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/><b>Target Met:</b> Yes<br/>93% of students reported being satisfied with the automatic registration process. Only 2% of students indicated dissatisfaction with the current process. Last year, 88% of students reported being satisfied or very satisfied with the automated registration process. This percentage is slightly higher than during the 2018-2019 academic year. Very few changes have been made to automatic registration during this time.</p> <p>Last year's action plan did not include any changes to the current automated registration process. There is no evidence the lack of change impacted this year's results. (05/29/2020)</p> | <p><b>Action:</b> Since there are so few students dissatisfied with this process, the current automatic registration process will continue. (05/29/2020)</p> |
| <p><b>AD: Report - Internal</b> - Allen College Student Opinion Survey--satisfaction</p>   | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/><b>Target Met:</b> Yes</p>   | <p><b>Action:</b> Due to substantial changes during the 2019-20 academic year,</p>   |

College Goal 3 - Allen College is committed to recruiting and retaining 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.

## Admin - Enrollment Management

### AU Outcome: EM 5.0

| <i>Measures</i>   | <i>Results</i>  | <i>Actions</i>   |
|---|---|--|
| <p>with academic calendar</p> <p><b>Target:</b> 80% of students report they are satisfied or very satisfied with the academic calendar.</p> <p><b>Timeframe:</b> Annually<br/><b>Responsible Parties:</b> Registrar</p> | <p>94% of students reported to be satisfied with the academic calendar. There was a large increase of satisfaction from the 86% satisfaction rate in 2018-19.</p> <p>Last year's action plan may have helped increase the satisfaction, as during registration, the link to the calendar was included in the student's email.</p> <p>In addition to the action plan, an additional six semesters were added to the website. In the past, there were three semesters available, now there are nine semesters. (05/29/2020)</p> | <p>the Registrar's Office will monitor any requests from students regarding questions on the academic calendar and continue providing nine future semesters and links to the calendar in registration emails. (05/29/2020)</p> |

### AU Outcome: EM 6.0

Allen College students are treated with respect

**Outcome Status:** Active

| <i>Measures</i>  | <i>Results</i>  | <i>Actions</i>   |
|--|---|--|
| <p><b>AD: Report - Internal</b> - Allen College Student Opinion Survey-- Opportunity for student involvement in college committees</p> <p><b>Target:</b> 80% of students report satisfied or very satisfied<br/><b>Timeframe:</b> Annually</p> <p><b>Responsible Parties:</b> Associate Director of Admissions</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/><b>Target Met:</b> No</p> <p>65% of students reported satisfaction with the opportunity to be involved in campus committees. 9% were dissatisfied, and 27% were unaware of the opportunity. Last year, 54% of students reported satisfaction with the opportunity to be involved in campus committees, but only 2% were dissatisfied. This leaves 44% of students unaware of this opportunity.</p> <p>The increase in satisfaction likely came from education to the Student Ambassador Program. Several Ambassadors were involved in committees this year. The increase of students who were unaware of this opportunity was significantly lower. Again, the education to the ambassador population was likely the cause of awareness. (07/20/2020)</p> <p><b>Related Documents:</b><br/><a href="#">Report Allen College Student Opinion Survey 05-04-20.pdf</a></p> | <p><b>Action:</b> During the 2020-21 academic year, communication with students will focus on how committee work is a way to make students' voices heard. (07/20/2020)</p> |
| <p><b>AD: Report - Internal</b> - Allen College Student Opinion Survey--Policies</p>   | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/><b>Target Met:</b> Yes</p>   | <p><b>Action:</b> For the 2020-21 academic</p>   |

College Goal 3 - Allen College is committed to recruiting and retaining 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.

## Admin - Enrollment Management

### AU Outcome: EM 6.0

| Measures  | Results   | Actions   |
|---|---|---|
| <p>related to student conduct</p> <p><b>Target:</b> 80% of students report satisfied or very satisfied</p> <p><b>Timeframe:</b> Annually</p> <p><b>Responsible Parties:</b> Dean of Enrollment Management</p>   | <p>82% of students reported satisfaction with student conduct policies. 6% were dissatisfied. Last year, 69% were satisfied and 2% were dissatisfied.</p> <p>Last year's action plan indicated that specific comments reported in the student satisfaction survey would be reviewed to determine if there were indications of student's satisfaction or dissatisfaction regarding policies related to student conduct. While there were no comments that directly expressed satisfaction or dissatisfaction with policies regarding student conduct, there were a few comments indicating that student behavior was evaluated as a high expectation but that faculty and staff were not held to the same standard.</p> <p>(07/17/2020)</p> <p><b>Related Documents:</b><br/> <a href="#">Report Allen College Student Opinion Survey 05-04-20.pdf</a></p> | <p>year, we will continue to review comments made by students on the student satisfaction survey to detect concerns. (07/20/2020)</p>   |
| <p><b>AD: Report - Internal</b> - Allen College Student Opinion Survey--Staff attitude towards students</p> <p><b>Target:</b> 80% of students report satisfied or very satisfied</p> <p><b>Timeframe:</b> Annually</p> <p><b>Responsible Parties:</b> Dean of Enrollment Management</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> <p><b>Target Met:</b> Yes</p> <p>86% of students are satisfied with staff attitudes towards students. 13% are dissatisfied. This year is very similar to last year. Last year's action plan included sending additional Enrollment Management Staff to Heart of a Leader. The training may have a positive impact on those who have attended, however, there is not an impact on all staff. (07/17/2020)</p> <p><b>Related Documents:</b><br/> <a href="#">Report Allen College Student Opinion Survey 05-04-20.pdf</a></p>  | <p><b>Action:</b> The Dean of Enrollment Management will lead a "Student's First" campaign during the 2020-21 academic year. (07/17/2020)</p>   |
| <p><b>AD: Report - Internal</b> - Allen College Student Opinion Survey item-- Inclusiveness and acceptance of diversity</p> <p><b>Target:</b> 80% of students report satisfied or very satisfied</p>  | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> <p><b>Target Met:</b> Yes</p> <p>Of students who did not report being "unaware of/have not use" for the student opinion survey item, "Inclusiveness and acceptance of diversity (e.g., inclusiveness and acceptance of persons of varied socioeconomic backgrounds, disabilities, religions, gender, age, ethnicity, race, sexual orientation)" (N = 145), nearly 95% were satisfied: 58 (40%) reported being very satisfied, and 79 ( 54.5%) reported being satisfied. If students who reported being "unaware</p>  | <p><b>Action:</b> As the Diversity and Inclusion Committee transitions to a new chair, the Enrollment Management Staff will work closely with the D &amp; I to brainstorm new ideas. (03/31/2021)</p> |

College Goal 3 - Allen College is committed to recruiting and retaining 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.

## Admin - Enrollment Management

### AU Outcome: EM 6.0

| Measures   | Results  | Actions |
|--|--|---------|
| <p><b>Timeframe:</b> Annually</p> <p><b>Responsible Parties:</b> Dean of Enrollment Management</p> | <p>of/have not used" for this item on the student opinion survey are included in the denominator, then 36.94% (58/157) and 50.32% (79/157) were very satisfied or satisfied, respectively, still exceeding the target of 80% satisfaction. There were 8 students who reported being dissatisfied (n = 6) or very dissatisfied (n = 2) with inclusivity and acceptance of diversity.</p> <p>These results demonstrate improvement compared to previous reporting years:<br/>2018-2019: 81% of students reported being satisfied and 3% were dissatisfied with the inclusiveness and acceptance of diversity on campus.<br/>2017-2018: 81.04% of students reported being satisfied with inclusiveness and acceptance on campus.</p> <p>Per the 2018-2019 action plan, during the 2019-2020 academic year, Enrollment Management staff engaged with the Diversity and Inclusion Committee and solicited students to join in an effort to provide services and activities that are student-driven. This action plan appears to have been effective in facilitating achievement of the target. (03/31/2021)</p> |         |

### AU Outcome: EM 7.0

Qualified students are admitted to college programs

**Outcome Status:** Active

| Measures   | Results  | Actions  |
|--|--|--|
| <p><b>AD: Report - Internal</b> - Program Enrollment (Admissions Report; Correspondence Spreadsheet; Dashboard Statistics)</p> <p><b>Target:</b> Fill programs with qualified students as follows: School of Health Sciences—100% Accelerated BSN—</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> <p><b>Target Met:</b> No</p> <p>During the 2019-20 academic year, programs were filled as follows:<br/>School of Health Sciences - 72%<br/>School of Nursing - 79%</p> <p>Last year, the School of Health Sciences was filled to 77% and the School of Nursing was filled to 82%.</p> | <p><b>Action:</b> In addition to meeting with program directors during the year, the admissions office will explore the use of software to create virtual events. (07/28/2020)</p> |

College Goal 3 - Allen College is committed to recruiting and retaining 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.

## Admin - Enrollment Management

### AU Outcome: EM 7.0

| Measures   | Results  | Actions   |
|--|--|---|
| <p>100% Upper Division BSN—100%</p> <p><b>Timeframe:</b> Annually<br/><b>Responsible Parties:</b> Dean of Enrollment Management</p>  | <p>Both schools have seen a decrease in students over the last couple of years.</p> <p>As the action plan for this year indicated, marketing meetings were scheduled with all under-enrolled programs. In addition, marketing meetings were scheduled for programs that are not under-enrolled to generate further suggestions on recruitment sources.</p> <p>This action plan has been continuous for the last several years. Each year, barriers to program enrollment are identified each year, and at least 75% of the barriers are addressed for each under-enrolled program. While the meetings do not seem to have an impact on filling programs, it is essential that we continue to meet with program directors to stay current in where that particular program's potential students are. (07/28/2020)</p> <p><b>Related Documents:</b><br/><a href="#">Program Capacity - 2019.xlsx</a></p> |   |
| <p><b>AD: Report - Internal</b> - Enrollment increases in under enrolled programs (Admissions Report; Correspondence Spreadsheet; Dashboard Statistics)</p> <p><b>Target:</b> Admit students to underenrolled programs at the graduate level. Increase enrollment by 25% in the following programs: NMT, RN-BSN/MSN, MSN-Edu, MSN-CPH, MSN-Lead and DNP.</p> <p><b>Timeframe:</b> Annually<br/><b>Responsible Parties:</b> Dean of Enrollment Management</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/><b>Target Met:</b> No</p> <p>Enrollment changes in under-enrolled programs between 2018 and 2019 are as follows:<br/>Public Health - 57.14% decrease<br/>RN-BSN - 40% decrease<br/>MSN - Edu - 150% increase<br/>MSN - CPH - (including dual tracks) 33.33% decrease<br/>MSN - Lead - 46.15% decrease<br/>DNP - 125% increase<br/>EdD - 20% decrease<br/>Overall -<br/>*2 programs increased enrollment, 5 programs decreased</p> <p>Enrollment changes in under-enrolled programs between 2017 and 2018 are as follows:<br/>Public Health - 133% increase from last year<br/>RN-BSN - 48% decrease from last year<br/>MSN-Ed - 14% decrease from last year<br/>MSN-CPH (includes dual enrollment with an NP track) - no change from last year</p>  | <p><b>Action:</b> Due to the pandemic and the lack of career fairs and college fairs, the Admissions office will engage outside assistance to work on new ways to connect with students. (03/31/2021)</p> |

College Goal 3 - Allen College is committed to recruiting and retaining 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.

## Admin - Enrollment Management

### AU Outcome: EM 7.0

| Measures | Results   | Actions |
|----------|---|---------|
|          | <p>MSN-Lead - 44% increase from last year<br/>                     DNP - 20% decrease from last year<br/>                     EdD – 29% decrease from last year (added this year)</p> <p>(07/28/2020)</p> |         |

### AU Outcome: EM 8.0

Increase the number of underrepresented students enrolled at Allen College.

**Outcome Status:** Active

| Measures  | Results  | Actions  |
|---|--|--|
| <p><b>AD: Report - Internal</b> - Retention of ethnic minority and male students (Recruitment Plan; Retention Plan; Graduation Rates; Dashboard Statistics)</p> <p><b>Target:</b> Retention rates of ethnic minority and male students are equal to or greater than the entire Allen College population.</p> <p><b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> Dean of Enrollment Management</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> No<br/>                     The retention rate of ethnic minority and male students from 2018 to 2019 was 91%. This is slightly lower than last year (93% retention). 94% of all Allen College students were retained from 2018 to 2019.</p> <p>Last year's action plan indicated that a male mentoring program would be explored. This was not acted on. (07/17/2020)<br/> <b>Related Documents:</b><br/> <a href="#">Dashboards 2019-2020.doc</a></p> | <p><b>Action:</b> Develop a policy or guidelines for student led organizations. (07/21/2020)</p>   |
| <p><b>AD: Report - Internal</b> - Student awareness of services provided by retention services (Retention Plan)<br/> <b>Target:</b> 80% of students report being</p>  | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     98% of students in attendance at New Student Orientation reported being satisfied with the presentation given by the Student Success Coordinator. 2% were neutral, and no one was</p>  | <p><b>Action:</b> Continue current format for New Student Orientation that includes presentation given by Student Success Coordinator.</p> |

College Goal 3 - Allen College is committed to recruiting and retaining 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.

## Admin - Enrollment Management

### AU Outcome: EM 8.0

| Measures   | Results   | Actions  |
|--|---|--|
| <p>satisfied or very satisfied with the orientation materials for student success</p> <p><b>Timeframe:</b> Bi-Annually</p> <p><b>Responsible Parties:</b> Student Success Coordinator</p>  | <p>dissatisfied with presentation. (07/21/2020)</p>   | <p>(07/21/2020)</p>  |
| <p><b>AD: Report - Internal</b> - Use of services provided by the retention office (Retention Plan)</p> <p><b>Target:</b> 25% of students identified as ethnic minority or male attend services provided from retention services.</p> <p><b>Timeframe:</b> Annually</p> <p><b>Responsible Parties:</b> Student Success Coordinator</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> <p><b>Target Met:</b> Yes</p> <p>2019-20 Report</p> <p>During the 2019-2020 academic year, 49 students identified as belonging to an ethnic minority—11 males and 38 females. Fifty-one additional males who did not belong to an ethnic minority were enrolled during this academic year, for a total of 100 students who did not identify their race as Unknown or White or who were male (62 males and 38 females). I initiated contact by referral with 44 [44%] of these students (16 of the females [42.1%] and 28 of the males [45.2%]); six of the contacted males identified as belonging to an ethnic minority. I had meetings with nine of the females and nine of the males whom I contacted, 56% and 32% respectively.</p> <p>During the 2018-19 academic year, 64 students identified as belonging to an ethnic minority—11 males and 53 females—and an additional 69 males who did not identify as an ethnic minority, for a total of 133 students. I initiated contact with 37.3% of these students—44.4% of the females and 32.5% of the males. Six of the contacted males belonged to an ethnic minority.</p> <p>The percentage of students identifying as belonging to an ethnic minority or male and who were contacted by the Student Success Office improved by 6.7%. The increase from 2017-18 to 2018-19 was 7.3%.</p> <p>Last year’s action plan: The Student Success Office will continue to reach out to ethnic</p> | <p><b>Action:</b> The Student Success Office will continue to reach out to ethnic minority and male students and encourage their participation in the services offered. To increase awareness of the services provided by the Student Success Office and increase their use, the Student Success Office will make multiple efforts to contact students if they do not respond to the initial emails following referral. (07/21/2020)</p> |

College Goal 3 - Allen College is committed to recruiting and retaining 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.

## Admin - Enrollment Management

### AU Outcome: EM 8.0

| <i>Measures</i> | <i>Results</i>   | <i>Actions</i> |
|-----------------|--|----------------|
|                 | <p>minority and male students and encourage their participation in the services offered. To increase awareness of the services provided by the Student Success Office and increase their use, the Student Success Office will make multiple efforts to contact students if they do not respond to the initial emails following referral. This may have contributed to the rise in awareness of the Student Success Office.</p> <p>(07/21/2020)</p> |                |

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

### AU Outcome: ASR 2.1

Students will demonstrate effective communication skills in the clinical setting

**Outcome Status:** Active

| <i>Measures</i>  | <i>Results</i>   | <i>Actions</i>   |
|--|--|--|
| <p><b>SL: Clinical evaluation tool</b> - RA:135<br/>Clinical Instructor/ Preceptor Evaluations/<br/>Numbers 3, 6, 10,11</p> <p><b>Target:</b> Average score <math>\geq</math> 3.5 (0-4 pt. scale)</p> <p><b>Timeframe:</b> Level I-Fall Semester</p> <p><b>Responsible Parties:</b> Clinical Instructors/ Program Faculty/ HS Curriculum Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> <p><b>Target Met:</b> Yes</p> <p>2019 3.47 (n=19)</p> <p>Previous data:</p> <p>2018 3.67 (n=13)</p> <p>2017 3.68 (n=14)</p> <p>2016 3.56 (n=13)</p> <p>2015 3.81 (n=16)</p> <p>The action plan from the 2018-2019 was effective for the 2019-2020 as the student evaluations are completed on Trajecsyst by the clinical instructors. This allowed the students to have immediate access to the completed evaluations on Trajecsyst. The students' average scores decreased in all areas of the performance criteria; patient care, interpersonal relationships, multicultural diversity and age appropriate care. Some of the comments on the evaluations were; there is room for improvement when it comes to communication with patient and assessing the patient's condition, student has difficulty working with patients of</p> | <p><b>Action:</b> To continue to meet or exceed the target/benchmark for this measure during the 2020-2021 academic year, the clinical instructors/preceptors will deliver prompt feedback to students when issues arise concerning patient care and interpersonal relationships. Faculty continue to discuss and review the correct way to communicate with the patient and fellow students, technologists and radiologists. (07/21/2020)</p> |

College Goal 3 - Allen College is committed to recruiting and retaining 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.

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

**AU Outcome: ASR 2.1**

| <i>Measures</i>  | <i>Results</i>   | <i>Actions</i>   |
|--|--|--|
|  | <p>varying ages.<br/>(07/21/2020)</p>  |  |
| <p><b>SL: Clinical evaluation tool - RA:275</b><br/>Clinical Instructor/ Preceptor Evaluations/Numbers 3, 6,10,11</p> <p><b>Target:</b> Average score &gt;= 3 (0-4 pt. scale)</p> <p><b>Timeframe:</b> Level II -Spring Semester</p> <p><b>Responsible Parties:</b> Clinical Instructors/ Program Faculty/ HS Curriculum Committee</p>         | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> <p><b>Target Met:</b> Yes</p> <p>2019-2020 3.86 (n=10)</p> <p>Previous data:</p> <p>2018-2019 3.9 (n=12)</p> <p>2017-2018 3.78 (n=12)</p> <p>2016-2017 3.95 (n=15)</p> <p>2015-2016 3.97 (n=17)</p> <p>The action plan from the 2018-2019 was successful for 2019-2020 as the clinical instructors/preceptors in the clinical setting provided excellent instruction and supervision of students to assess their communication skills. The target of 3.0 was exceeded to achieve a 3.86.This result is a slight decrease in the overall score compared to the last year The student scores were higher than the previous year in areas of; interpersonal relationships, multicultural diversity and age appropriate care. There was a slight decrease in the area of patient care. (07/21/2020)</p> | <p><b>Action:</b> To continue to meet or exceed the target for this measure during the 2020-2021 academic year, clinical instructors/preceptors will continue to instruct students by exhibiting effective communication in the clinical environment. (07/21/2020)</p> |
| <p><b>SL: Clinical evaluation tool - RA:135</b><br/>Clinical Competency Evaluation/ Part I – Number 4 Part III- Numbers 1,3,6-8</p> <p><b>Target:</b> Average score &gt;= 3 (0-4 pt. scale)</p> <p><b>Timeframe:</b> Level I-Fall Semester</p> <p><b>Responsible Parties:</b> Clinical Instructor/Program Faculty/ HS Curriculum Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> <p><b>Target Met:</b> Yes</p> <p>2019 = 3.94 (n=19)</p> <p>Previous data:</p> <p>2018 = 3.95 (n=13)</p> <p>2017=3.98 (n=14)</p> <p>2016=3.92 (n=13)</p> <p>2015=3.99 (n=16)</p> <p>2014=3.98 (n=17)</p> <p>The action plan from the 2018-2019 was effective for 2019-2020 as the clinical instructors provided effective instruction, supervision and feedback to the students in the clinical settings. The target of 3.0 was exceeded to achieve a 3.94. The students are demonstrating communication skills reflective of their level in the program. (07/22/2020)</p>   | <p><b>Action:</b> To continue to exceed the target for this measure during the 2020-2021 academic year, clinical instructors will continue to deliver instruction, supervision, and feedback to the students in the clinical environment. (07/22/2020)</p>             |

College Goal 3 - Allen College is committed to recruiting and retaining 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.

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

#### AU Outcome: ASR 2.1

| <i>Measures</i>   | <i>Results</i>  | <i>Actions</i>  |
|---|---|---|
| <p><b>SL: Clinical evaluation tool</b> - RA:275<br/>Final Clinical Competency Evaluation/<br/>Part I – Number 4<br/>Part III- Numbers 1,3,6-8</p> <p><b>Target:</b> Average score <math>\geq</math> 3.5 (0-4 pt. scale)<br/><b>Timeframe:</b> Level II- Spring Semester<br/><b>Responsible Parties:</b> Clinical Instructor/ Program Faculty/ HS Curriculum Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/><b>Target Met:</b> NA<br/>2020 no data to assess. This program requirement was waived for this cohort due to COVID-19.<br/>Previous cohort data:<br/>2019 = 4 (n=12)<br/>2018=3.98 (n= 12)<br/>2017=4 (n=15)<br/>2016=4 (n=17)<br/>2015=3.99 (n=15)<br/>(07/22/2020)</p> | <p><b>Action:</b> Assessment of this item will resume for the Sp21 cohort.<br/>(07/22/2020)</p> |

#### AU Outcome: ASR 2.2

Students will practice written communication skills

**Outcome Status:** Active

| <i>Measures</i>  | <i>Results</i>   | <i>Actions</i>   |
|--|--|--|
| <p><b>SL: Didactic</b> - RA: 115 Patient Care Presentation<br/><b>Target:</b> Average score of <math>\geq</math> 85%<br/><b>Timeframe:</b> Level I-Fall Semester<br/><b>Responsible Parties:</b> RA: 115 Course Instructor/HS Faculty Org. Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/><b>Target Met:</b> Yes<br/>2019=98% (n=19)<br/>Previous data:<br/>2018=98% (n=13)<br/>2017=98% (n=14)<br/>2016=97% (n=13)<br/>2015=98.01% (n=16)<br/>The action plan from the 2018-2019 was successful for 2019-2020. The course instructor continued to communicate the paper requirements on the first day of the semester. The instructor instructed the students to the Allen College website and displayed to all students where the academic resources page is located and the APA resource information for APA</p> | <p><b>Action:</b> 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 throughout the semester. Email the student's resources information that includes a link to the academic resources page on the Allen College website. On the resources page is an APA link that provides information to</p> |

College Goal 3 - Allen College is committed to recruiting and retaining 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.

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

**AU Outcome: ASR 2.2**

| <i>Measures</i>   | <i>Results</i>  | <i>Actions</i>  |
|---|---|---|
|   | review. The target continued to be exceeded. The results remained the same from the previous year at 98%. Three of the nineteen students had deductions due to not double spacing on the title page. Ten of the nineteen students had deductions on the reference page; no hanging indents and the spacing of references. (07/22/2020)  | assist students to practice written communication skills. (07/22/2020)  |
| <p><b>SL: Didactic</b> - RA:258 Pathology Systems Presentation<br/> <b>Target:</b> Average score of &gt;= 85%<br/> <b>Timeframe:</b> Level II-Fall Semester<br/> <b>Responsible Parties:</b> RA: 258 Course Instructor/ HS Faculty Org. Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>           2019=98% (n=10)<br/>           2018=96% (n=12)<br/>           2017=96% (n=12)<br/>           2016=97% (n=15)<br/>           2015=98.01% (n=16)</p> <p>The action plan from the 2018-2019 was effective for 2019-2020. The instructor reviewed the APA format and reminded students that the APA resources information is located on the Allen College website. An increase of 2% in 2019 from 2018 results. Each student completes two papers during the course. Eight of the papers had deductions on the title page due to spacing and incorrect font size. Eight of the papers had deductions on the reference page; no hanging indents, spacing of references, and proper titling of the reference page. (07/27/2020)</p> | <p><b>Action:</b> 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 throughout the semester. Email the student's resources information that includes a link to the academic resources page on the Allen College website. On the resources page is an APA link that provides information to assist students to practice written communication skills. (07/27/2020)</p> |

**AU Outcome: ASR 2.3**

Students will demonstrate oral communication skills

**Outcome Status:** Active

| <i>Measures</i>   | <i>Results</i>  | <i>Actions</i>  |
|---|---|---|
| <p><b>SL: Didactic</b> - RA:258 Pathology Systems Presentation<br/> <b>Target:</b> Average score of &gt;= 85%<br/> <b>Timeframe:</b> Level II-Fall Semester<br/> <b>Responsible Parties:</b> RA: 258 Course</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>           2019=99% (n=10)<br/>           2018=99% (n=12)<br/>           2017=97% (n=12)</p> | <p><b>Action:</b> 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</p> |

College Goal 3 - Allen College is committed to recruiting and retaining 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.

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

#### AU Outcome: ASR 2.3

| Measures  | Results   | Actions  |
|---|---|--|
| Instructor/ HS Faculty Org. Committee   | 2016=95% (n=15)<br>2015=98.82% (n=17)<br>The action plan from the 2018-2019 was successful for 2019-2020. The course instructor continued to communicate the paper requirements the first day of class to this cohort. The results remained the same from the previous year at 99%. Each student completes two papers during the course. One student had deductions in their oral presentation due to their oral presentation did not meet the time length. (07/27/2020)  | 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)   |
| <b>SL: Didactic</b> - RA: 115 Patient Care Presentation<br><b>Target:</b> Average score of >= 85%<br><b>Timeframe:</b> Level I-Fall Semester<br><b>Responsible Parties:</b> RA: 115 Course Instructor/HS Faculty Org. Committee | <b>Reporting Year:</b> 2019 - 2020 (Year 2)<br><b>Target Met:</b> Yes<br>2019=98% (n=19)<br>2018=99% (n=13)<br>2017 =99% (n=14)<br>2016=99% (n=13)<br>2015=94.53% (n=16)<br><br>The action plan from the 2018-2019 was effective for 2019-2020. The course instructor explained the paper requirements the first day of class. The target of >=85% was exceeded to achieve a 98%. Four students had deductions in their oral presentation portion due to voice level and words not stated correctly during the presentation. (12/01/2020) | <b>Action:</b> To meet or exceed the benchmark 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. (12/01/2020) |

#### AU Outcome: ASR 3.2

Students will demonstrate ability to practice critical thinking

**Outcome Status:** Active

| Measures  | Results  | Actions   |
|---|--|---|
| <b>SL: Didactic</b> - RA:145 Scientific Exhibit Evaluation<br><b>Target:</b> Average score of >= 80%<br><b>Timeframe:</b> Level I- Spring Semester<br><b>Responsible Parties:</b> RA: 145 | <b>Reporting Year:</b> 2019 - 2020 (Year 2)<br><b>Target Met:</b> Yes<br>2020 = 91.90 (n = 11 posters, 16 students)<br>2019 = 87% N = 9 posters (13 students)<br>2018 = 91.5% N= 8 posters (14 students) | <b>Action:</b> The course instructors have decided to move this assessment item to RA275 beginning in the Spring of 2022 to better coincide with the student educator seminar |

College Goal 3 - Allen College is committed to recruiting and retaining 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.

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

**AU Outcome: ASR 3.2**

| <i>Measures</i>   | <i>Results</i>   | <i>Actions</i>   |
|---|--|--|
| <p>Program Faculty/ HS Curriculum Committee</p>   | <p>2017 = 92.14% N= 7 posters (12 students)<br/>                     2016 = 92.6% N= 10 posters (16 students)<br/>                     The action plan from the 2018-2019 was effective for 2019-2020. The course instructors continued to provide effective feedback to the students on their exhibits. Scores for 2020 continue to demonstrate the students' ability to practice critical thinking skills when developing their scientific exhibits. Many reductions occurred in line item #2 for quality of visuals and charts. Multiple students only used a few or did not support the visuals well. Item #5 also received quite a few reductions since many posters lacked in-depth research. Average scores continue to exceed the target.<br/>                     (07/27/2020)</p>  | <p>where the posters are entered in a competition. This measurement tool will be replaced with RA154 CT Topic Presentation as the new measurement tool starting in the 2020-2021 academic year.<br/>                     (07/27/2020)</p>  |
| <p><b>SL: Exam/Quiz - Standardized - RA:</b><br/>                     203B Corectec exams<br/> <b>Target:</b> &gt; 80% of the students will achieve a score of 70 or greater on one of the four exams.<br/> <b>Timeframe:</b> Level II- Spring Semester<br/> <b>Responsible Parties:</b> RA: 203B Course Instructor/HS Curriculum Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     2020 = 90% (n=10)<br/>                     Previous data:<br/>                     2019 = 100% (n=12)<br/>                     2018 = 100% (n=12)<br/>                     2017 = 93% (n=15)<br/>                     2016 = 100% (n=17)<br/>                     2015 = 93% (n=15)<br/>                     The action plan from the 2018-2019 was effective for 2019-2020. The instructor reduced the % reduction to 1% and was reevaluated in 2020 with no additional changes. 9 out of 10 students achieved a 70 or greater on one of the four Corectec exams. There was a total course grade reduction applied for 2 of the 10 students as a result of their below 70 overall average Corectec scores. This grade reduction policy was implemented to encourage students to put forth their best effort on each of the 4 Corectec exams. (07/27/2020)</p> | <p><b>Action:</b> Overall, the ASR Program curriculum continues to prepare the students for mock board exams. Overall, students continue to demonstrate the ability to practice critical thinking. Will update the target to remove the word "passing" from future year's assessment plans. (07/27/2020)</p> |

**AU Outcome: ASR 3.3**

Students will be able to critically think in the clinical setting

**Outcome Status:** Active

College Goal 3 - Allen College is committed to recruiting and retaining 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.

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

**AU Outcome: ASR 3.3**

| <i>Measures</i>   | <i>Results</i>  | <i>Actions</i>  |
|---|---|---|
| <p><b>SL: Clinical evaluation tool - RA:145</b><br/>Clinical Instructor/ Preceptor Evaluations/Numbers 2,4,7,8</p> <p><b>Target:</b> Average score &gt;= 3. (0-4 pt. scale)</p> <p><b>Timeframe:</b> Level I-Spring Semester</p> <p><b>Responsible Parties:</b> RA: 145 Course Instructor/HS Faculty Org. Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> <p><b>Target Met:</b> Yes</p> <p>2019-2020 3.6 (N=16)</p> <p>2018-2019 3.36 (N=13)</p> <p>2017-2018 3.53 (N=14)</p> <p>2016-2017 3.63 (N=12)</p> <p>2015-2016 3.63 (N=16)</p> <p>The action plan from the 2018-2019 was successful for 2019-2020. The clinical instructors/preceptors in the clinical setting continued to provide excellent instruction and supervision of students to assess their critical thinking skills. This result is an increase compared to the previous year. The student scores were higher than the previous year in all areas; which are application of knowledge, ability to follow directions, self-image for level in the ASR program, and composure and adaptability. (07/27/2020)</p> | <p><b>Action:</b> To continue to meet or exceed the target for this measure during the 2020-2021 academic year, the clinical instructors/preceptors will continue to provide the needed instruction and supervision of the students to evaluate their critical thinking skills in the clinical setting.</p> <p>(07/27/2020)</p> |
| <p><b>SL: Clinical evaluation tool - RA:265</b><br/>Clinical Instructor/ Preceptor Evaluations/Numbers 2,4,7,8</p> <p><b>Target:</b> Average score &gt;= 3. (0-4 pt. scale)</p> <p><b>Timeframe:</b> Level II- Fall Semester</p> <p><b>Responsible Parties:</b> RA: 265 Course Instructors/HS Curriculum Committee</p>  | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> <p><b>Target Met:</b> Yes</p> <p>2019 3.86 (n=11)</p> <p>2018 3.81 (n=12)</p> <p>2017 3.79 (n=12)</p> <p>2016 3.86 (n=15)</p> <p>2015 3.81 (n=17)</p> <p>The action plan from the 2018-2019 was effective for 2019-2020. All student evaluations were completed on Trajecsys by the clinical instructors. Students had immediate access and feedback to their evaluations on their critical thinking. The students' scores increased in three performance criteria areas; application of knowledge, ability to follow directions, and composure and adaptability. The area of self image for the level in the ASR program average score remained the same. (07/27/2020)</p>  | <p><b>Action:</b> To continue to meet or exceed the target for this measure during the 2020-2021 academic year, clinical instructors/preceptors continue to demonstrate and explain to students how to practice critical thinking skills in the clinical environment. (07/27/2020)</p>  |

**AU Outcome: ASR 4.1**

Students will integrate leadership skills and construct professional practices

**Outcome Status:** Active

College Goal 3 - Allen College is committed to recruiting and retaining 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.

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

**AU Outcome: ASR 4.1**

| <i>Measures</i>  | <i>Results</i>   | <i>Actions</i>  |
|--|--|---|
| <p><b>SL: Service - RA:135 Community Service/Service Learning Evaluation</b><br/> <b>Target:</b> Average score of &gt;= 80%<br/> <b>Timeframe:</b> Level I-Fall Semester<br/> <b>Responsible Parties:</b> RA: 135 Course Instructors/HS Curriculum Committee</p>   | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>           2019 = 87.71% (n=19)<br/>           2018: 83.69% (n=13)<br/>           2017: 94.78 (n=14)<br/>           2016: 72% (n=13)<br/>           2015: 92.56% (n=16)<br/>           The action plan from the 2018-2019 was effective for 2019-2020. The course instructors made a few editorial changes to the assignment instructions for emphasis and clarification based on last year’s recommendations. The overall average score increased slightly when compared to last year. Again, the majority of point deductions occurred in the overall writing and the research categories of the assessment rubric. Some students did not research the organization as directed. All students performed service learning through a variety of organizations. Students demonstrated leadership skills and professionalism through their involvement in service learning activities. (07/27/2020)</p> | <p><b>Action:</b> To continue to achieve the target for this measure during the 2020-2021 academic year, ASR faculty will assess their rubric that are contributing to exceed the target on service-learning and make modifications accordingly. Will continue to assess this measure. (07/27/2020)</p> |
| <p><b>SL: Service - RA: 265 Community Service/Service Learning Evaluation</b><br/> <b>Target:</b> Average score of &gt;= 80%<br/> <b>Timeframe:</b> Level II-Fall Semester<br/> <b>Responsible Parties:</b> RA: 265 Course Instructors/HS Curriculum Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>           2019 = 85.6% (n = 10)<br/>           2018: 76.75% (n=12)<br/>           2017: 93.33% (n=12)<br/>           2016: 93.4% (n=15)<br/>           2015: 82.47% (n=17)<br/>           The action plan from the 2018-2019 was successful for 2019-2020. The course instructors made a few editorial changes to the assignment instructions to better emphasize and clarify the expectations for the assignment. Improved average scores this year may be the result of implementing the 2018 recommended changes. (07/27/2020)</p>  | <p><b>Action:</b> To continue to achieve the target for this measure during the 2020-2021 academic year, the course instructors will continue to assess the assignment instructions and make modifications accordingly. Continue to assess this measure. (07/27/2020)</p>                               |

**AU Outcome: ASR 4.2**

Students will practice professionalism  
**Outcome Status:** Active

College Goal 3 - Allen College is committed to recruiting and retaining 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.

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

**AU Outcome: ASR 4.2**

| <i>Measures</i>  | <i>Results</i>  | <i>Actions</i>   |
|--|---|--|
| <p><b>SL: Clinical evaluation tool - RA:135</b><br/>Clinical Instructor/Preceptor<br/>Evaluations Numbers 1,5,9,12,13</p> <p><b>Target:</b> Average score &gt;= 3 (0-4 pt. scale)</p> <p><b>Timeframe:</b> Level I- Fall Semester</p> <p><b>Responsible Parties:</b> Clinical Instructors/ Program Faculty/HS Curriculum Committee</p>   | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> <p><b>Target Met:</b> Yes</p> <p>2019 3.51 (n=19)</p> <p>2018 3.68 (n=13)</p> <p>2017 3.68 (n=14)</p> <p>2016 3.6 (n=13)</p> <p>2015 3.83 (n=16)</p> <p>The action plan from the 2018-2019 was effective for 2019-2020. All student evaluations were completed on Trajecsyst by the clinical instructors. Students had immediate access and feedback to the completed evaluations. Clinical instructors continued to provide effective and timely feedback to students. The students' average scores decreased in all areas of the performance criteria, organization of assignments, initiative, appearance, policies and procedures, ethical and professional behaviors. Some of the comments on the evaluations were; student lacks initiative to be involved in the exams, there were a lot of exams that the student was not involved in-this student has no initiative, needs to work on professionalism with patients and technologists. (07/27/2020)</p> | <p><b>Action:</b> To continue to meet or exceed the target for this measure during the 2020-2021 academic year, the clinical instructors/preceptors will continue to deliver prompt feedback to students when issues arise concerning initiative and professionalism. Faculty continue to discuss the importance of initiative and professionalism in the clinical setting. (07/27/2020)</p> |
| <p><b>SL: Clinical evaluation tool - RA:275</b><br/>Clinical Instructor/Preceptor<br/>Evaluations Numbers 1,5,9,12,13</p> <p><b>Target:</b> Average score &gt;= 3 (0-4 pt. scale)</p> <p><b>Timeframe:</b> Level II-Spring Semester</p> <p><b>Responsible Parties:</b> Clinical Instructors/ Program Faculty/HS Curriculum Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> <p><b>Target Met:</b> Yes</p> <p>2019-2020 3.88 n=10)</p> <p>2018-2019 3.83 (n=12)</p> <p>2017-2018 3.76 (n=12)</p> <p>2016-2017 3.96 (n=15)</p> <p>2015-2016 3.98 (n=17)</p> <p>The action plan from the 2018-2019 was successful for 2019-2020. The clinical instructors/preceptors in the clinical setting provided excellent instruction and supervision of students to assess their professionalism. This result is an increase compared to the previous year. The student scores were higher in areas of organization of assignments, initiative, appearance, and ethical and professional behaviors. The scores were lower in only one area which was policies and procedures. (07/27/2020)</p>   | <p><b>Action:</b> To continue to meet or exceed the target for this measure during the 2020-2021 academic year, clinical instructors/preceptors will continue to be positive role models for students by practicing professionalism in the clinical setting. (07/27/2020)</p>  |

College Goal 3 - Allen College is committed to recruiting and retaining 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.

**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

| <i>Measures</i>   | <i>Results</i>  | <i>Actions</i> |
|---|---|----------------|
| <p><b>SL: Didactic</b> - EdD 770: Assessment and Evaluation in Health Sciences Education – Assessment Process Assignment<br/> <b>Target:</b> Students will receive an average score at least 80%<br/> <b>Timeframe:</b> When course is taught (e.g., 2016, 2019, etc.)<br/> <b>Responsible Parties:</b> Program Chair/HS Graduate APG Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> NA<br/>                     Course not offered. (07/31/2020)</p> |                |

**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.

| <i>Measures</i>  | <i>Results</i>   | <i>Actions</i>  |
|--|--|---|
| <p><b>SL: Didactic</b> - OT 613 – Multidisciplinary Collaborative Case Assignment<br/> <b>Target:</b> Minimum score of 80% on the assignment<br/> <b>Timeframe:</b> When course taught (2nd Year, e.g., Spring 2017)<br/> <b>Responsible Parties:</b> Instructor/ OT</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     The minimum score on the collaborative case assignment was 100%. This target was not met the previous two years.<br/><br/>                     Per the 2018-2019 action plan to facilitate student success on this assignment during 2019-2020, the program enhanced the students' opportunities to build skills in working on</p> | <p><b>Action:</b> The program plans to reassess this measurement tool and benchmark to meet the goal. Due to newly revised 2018 ACOTE accreditation standards, this measurement tool and its placement in the</p> |

College Goal 3 - Allen College is committed to recruiting and retaining 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.

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

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

| <i>Measures</i>                       | <i>Results</i>   | <i>Actions</i>   |
|---------------------------------------|--|--|
| Faculty /HS Grad Curriculum Committee | 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, and the Allen College nursing Program. With this action plan students were able to be successful with this measure to met this goal. (09/22/2020) | coursework/curriculum will be reviewed by faculty and revised as appropriate to meet the new standards. The shift from 2011 to 2018 ACOTE standards went into effect July 2020 and so were in process during the 2019-2020 CAP data collection period (09/22/2020) |

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

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

| <i>Measures</i>  | <i>Results</i>   | <i>Actions</i>  |
|--|--|---|
| <p><b>SL: Didactic</b> - OT 618 – Research Poster</p> <p><b>Target:</b> Minimum score of 80% on the assignment</p> <p><b>Timeframe:</b> When course taught (2nd Year, e.g., Spring 2017)</p> <p><b>Responsible Parties:</b> Instructor/ OT Faculty /HS Grad Curriculum Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> <p><b>Target Met:</b> Yes</p> <p>All students in cohort 4 (spring 2020) received full credit for the research poster/presentations. This target has been met 4/4 reporting years.</p> <p>Per the 2018-2019 action plan, to facilitate student succes on this assignment, OT faculty supported student development of quality, presentable professional posters for the dissemination of knowledge to the profession. This action plan was effective in facilitating student success. (09/25/2020)</p> | <p><b>Action:</b> OT faculty will continue to support student development of quality, presentable professional posters for the dissemination of knowledge to the profession. Due to newly revised 2018 ACOTE accreditation standards, this measurement tool and its placement in the coursework/curriculum will be reviewed by faculty and revised as appropriate to meet the new standards. The shift from 2011 to 2018 ACOTE standards went into effect July 2020 and so were in process during the 2019-2020 CAP data collection period.</p> |

College Goal 3 - Allen College is committed to recruiting and retaining 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.

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

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

| <i>Measures</i> | <i>Results</i> | <i>Actions</i> |
|-----------------|----------------|----------------|
|                 |                | (09/25/2020)   |

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

**AU Outcome: MI 3.1**

Students will demonstrate critical thinking skills in the clinical environment.

**Outcome Status:** Active

| <i>Measures</i>  | <i>Results</i>  | <i>Actions</i>   |
|--|---|--|
| <p>MI: 480 Clinical Instructor Evaluations Numbers 2, 4, 7, 8</p> <p><b>Target:</b> Average score &gt;= 3 (0-4 pt. scale)</p> <p><b>Timeframe:</b> Summer Semester</p> <p><b>Responsible Parties:</b> Clinical Instructors/ Program Faculty/ HS Curriculum Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> <p><b>Target Met:</b> Yes</p> <p>The MI 480 Clinical Instructor Evaluations, numbers 2, 4, 7, 8 average score is 3.63. There is no previous data available for comparison. The students 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. When the clinical instructor completes the student’s evaluation during the last two weeks of the semester/program, the evaluation is then reviewed and discussed with each student. Two of the three students received high praise from their clinical instructor in all four performance criteria areas. One student received feedback from the clinical instructor stating, “make sure you are comfortable with the differences between various sequences.” This feedback is regarding the student’s ability to show professional competence as it relates to self-image. Professional competence to improve inadequate images is an area that can be focused on moving forward.</p> <p>2020 = 3.63 (n=3)<br/>2019 (n=0) (09/11/2020)</p> | <p><b>Action:</b> The clinical instructors will continue to work with each individual student in the clinical environment. The clinical instructor will continue to work with each student to ensure they are given the opportunity to use and demonstrate critical thinking while providing direct patient care. To help students apply their knowledge in the clinical environment, a worksheet will be created for the students to use while scanning a patient. This worksheet will help them focus on specific parameters and sequences to help improve professional competence, as well as improve their critical thinking. The instructor will continue to use this</p> |

College Goal 3 - Allen College is committed to recruiting and retaining 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.

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

#### AU Outcome: MI 3.1

| Measures   | Results  | Actions  |
|--|--|--|
|  |  | measurement tool as it demonstrated that it is beneficial to student growth and development of critical thinking skills within the clinical environment. (09/11/2020)  |
| <p>MI: 465 Clinical Instructor Evaluations Numbers 2, 4, 7, 8</p> <p><b>Target:</b> Average score <math>\geq</math> 3 (0-4 pt. scale)</p> <p><b>Timeframe:</b> Summer Semester</p> <p><b>Responsible Parties:</b> Clinical Instructors/ Program Faculty/ HS Curriculum Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> <p><b>Target Met:</b> NA</p> <p>No current data available. The CT student that is currently in the program is following the part-time track. That student will complete the MI 465 course in the next academic year. As proposed in the 2018-2019 action plan, this measure has been continued because it is considered beneficial to student growth and development of critical thinking skills within the clinical environment.</p> <p>2020 (n=0)<br/>2019 = 4 (n=1) (09/11/2020)</p> | <p><b>Action:</b> The clinical instructors will continue to work with each individual student in the clinical environment. The clinical instructor will continue to work with each student to ensure they are given the opportunity to use and demonstrate critical thinking while providing direct patient care. (09/11/2020)</p> |

#### AU Outcome: MI 3.2

Students will demonstrate the ability to practice critical thinking skills.

**Outcome Status:** Active

| Measures  | Results  | Actions   |
|---|--|---|
| <p>MI: 480 Board Review Exam (MRI)</p> <p><b>Target:</b> <math>\geq</math> 80% of the students will achieve a passing score of 75 or greater on one of the three exams.</p> <p><b>Timeframe:</b> Summer Semester</p> <p><b>Responsible Parties:</b> MI: 480 Course Instructor/HS Curriculum Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> <p><b>Target Met:</b> Yes</p> <p>100% of the students achieved a passing score of 75 or greater on one of the board review exams in MI 480. There is no previous data available for comparison. Each student subscribes to an online board registry review at the beginning of their summer semester. This registry review website provides them with dedicated board review questions in the following categories: safety, patient care, image production, and procedures. Benchmark was met with the student's excelling in questions related to safety and patient care. All three students struggled in the categories of image production and procedures. The lower scores</p> | <p><b>Action:</b> The instructor will begin the registry review assignments in the spring semester to allow each student 16 additional weeks of board preparation. Additional structured quizzes and exams in each of the four categories will be assigned to help each student</p> |

College Goal 3 - Allen College is committed to recruiting and retaining 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.

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

#### AU Outcome: MI 3.2

| <i>Measures</i>  | <i>Results</i>   | <i>Actions</i>  |
|--|--|---|
|  | <p>in image production and procedures were attributed to the students missing several weeks of clinical due to COVID-19. Even with the time missed in clinical, the students were able to demonstrate the ability to practice critical thinking skills.</p> <p>2020 = 100% (n=3)<br/>2019 (n=0) (09/11/2020)</p>   | <p>prepare for the three mock board exams that will occur in the summer semester. 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. (09/11/2020)</p>  |
| <p>MI: 465 Board Review Exam (CT)</p> <p><b>Target:</b> &gt;= 80% of the students will achieve a passing score of 75 or greater on one of the three exams.</p> <p><b>Timeframe:</b> Summer Semester</p> <p><b>Responsible Parties:</b> MI: 465 Course Instructor/HS Curriculum Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> <p><b>Target Met:</b> NA</p> <p>No current data available.</p> <p>The CT student that is currently in the program is following the part-time track. That student will complete the MI 465 course in the next academic year. As proposed in the 2018-2019 action plan, this measure has been continued because it is considered beneficial in measuring the student's ability to practice critical thinking skills.</p> <p>2020 (n=0)<br/>2019 = 100% (n=1) (09/11/2020)</p> | <p><b>Action:</b> The instructor will begin the registry review assignments in the spring semester to allow each student 16 additional weeks of board preparation. Additional structured quizzes and exams in each of the four categories will be assigned to help each student prepare for the three mock board exams that will occur in the summer semester. 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. (09/11/2020)</p> |

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

College Goal 3 - Allen College is committed to recruiting and retaining 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.

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

**AU Outcome: MLS 3.2**

Students will integrate team-building skills into professional practice

**Outcome Status:** Active

| <i>Measures</i>   | <i>Results</i>   | <i>Actions</i>  |
|---|--|---|
| <p><b>SL: Service</b> - Service Learning Project<br/> <b>Target:</b> 75% of students will receive an average score of &gt;80%<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> Program Chair/HS APG Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>           Fall 2019 – 14 students</p> <p>83.3% (5/6) of students earned an average score of &gt;80%.</p> <p>Overall average score = 98.9%</p> <p>Overall Averages<br/>           2018 = 98.9%<br/>           2017 = 95.5%<br/>           2016 = 90.0%<br/>           2015 = 92.5%<br/>           2014 = 95.6%<br/>           2013 = 95.7%<br/>           2012 = 97.3%</p> <p>The Service Learning project was presented as separate weekly modules during the course 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 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. The student who did not meet target struggle with understanding the requirements of the assignment despite the amount of feedback given on the assignments that feed into the final project. The action plan from the 2018-2019 CAP indicated no changes were necessary to this assignment, and the current approach was successful in helping students achieve the target. (07/31/2020)</p> | <p><b>Action:</b> This assignment will be included the next time this course is taught with no revisions. Faculty will continue to support students by assessing weekly assignments that feed into the Service Learning Project submission and providing feedback. Subsequent sections will be assessed on this measurement tool to ensure the target continues to be met. (07/31/2020)</p> |

College Goal 3 - Allen College is committed to recruiting and retaining 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.

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

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

#### AU Outcome: PH 3.1

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

**Outcome Status:** Active

| <i>Measures</i>  | <i>Results</i>  | <i>Actions</i>   |
|--|---|--|
| <p><b>SL: Didactic - PH:</b> 420 Final report<br/> <b>Target:</b> Average score of &gt;80%<br/> <b>Timeframe:</b> Fall semester<br/> <b>Responsible Parties:</b> Program faculty / HS Curriculum committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     In Summer 2019, seven students taking the course received average of 91.3% on their final report. In Summer 2018, three students took the course and received an average of 81.3%. The measure appears to be improving in part due to a more rigid rubric being used for this assignment along with more time dedicated to the final report as part of the changes planned in the 2018-2019 action plan. (09/03/2019)</p> | <p><b>Action:</b> There will be minor changes to the final project due to a new edition of the book being used and a second textbook being removed due to aging out of relevance. This will result in minor changes to the assignment since they relied on the use of both books and web-based materials. (09/03/2019)</p> |

## 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

| <i>Measures</i>  | <i>Results</i>   | <i>Actions</i>  |
|--|--|---|
| <p><b>SL: Exam/Quiz - Standardized -</b><br/>                     Proctored ATI Fundamentals exam<br/> <b>Target:</b> Group score of at least 75% in the QSEN Category of Patient-Centered Care on proctored ATI Fundamentals exam</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     Fall 2019: 83% (average of 9/9)<br/>                     Spring 2020: 82.9% (average 40/40)<br/>                     The target of 75% was achieved in the Fall 2019 and Spring 2020 cohorts. Could potentially raise this expectation to possibly 78% as a suggestion. (11/14/2020)</p> | <p><b>Action:</b> Continued implementation of application/analysis type learning activities, i.e. case studies, application/analysis practice questions, use of ATI practice exams over each body system.</p> |

College Goal 3 - Allen College is committed to recruiting and retaining 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.

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

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

| <i>Measures</i>   | <i>Results</i>  | <i>Actions</i>  |
|---|---|---|
| <p><b>Timeframe:</b> Annually (starting 2019-2020; assessed Year 2 prior to 2019-2020)<br/> <b>Responsible Parties:</b> BSN Curriculum Committee</p>  |   | (11/14/2020)  |
| <p><b>SL: Didactic - RN-NU 421 Ethical and Legal Case Study</b><br/> <b>Target:</b> 100 % of the students will achieve at least 73% on the Ethical and Legal Case Study.<br/> <b>Timeframe:</b> Annually (starting 2019-2020; assessed Year 4 prior to 2019-2020)<br/> <b>Responsible Parties:</b> BSN Curriculum Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>           In Spring 2020, 100% (7/7) of the students achieved at least 75% on the Ethical and Legal Case Study. Reviewed the assignment details and questions related to the paper. Took the Sigma Theta Tau Modules out of these modules and replaced them with a video regarding nursing and ethics. Provided new nursing journal articles regarding ethics, genetics, and legal issues. Provided a Power Point about documentation and legal issues surrounding documentation. Provided a new Panopto about legal issues that nurses may encounter in practice. Reviewed and made changes to the assignment that applied to the journal articles, Panopto, and Power Point that was provided in the module. Continued to give detailed instructions about the assignment and the due dates. (11/14/2020)<br/> <b>Related Documents:</b><br/> <a href="#">Outcome 6 RN NU 421 Ethical and Legal Case Study.docx</a></p> | <p><b>Action:</b> 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. Review and evaluate the new educational strategies and methods that were provided in the modules to see if they were effective. (11/14/2020)</p>  |
| <p><b>SL: Didactic - NU450 Community Assessment paper</b><br/> <b>Target:</b> 100% of students will achieve at least 75% on community assessment paper.<br/> <b>Timeframe:</b> Year 3<br/> <b>Responsible Parties:</b> BSN Curriculum Committee</p>   | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> No<br/>           In Fall 2019, 86% (38/44) of the students achieved at least 75% on the Community Assessment Paper. Spring 2020, 88% of students achieved at least 75% on the Community Assessment paper. The target of 75% was not met for either Fall or Spring semester. (11/14/2020)<br/> <b>Related Documents:</b><br/> <a href="#">Outcome 6 NU 450 Community Assessment Paper.docx</a></p>   | <p><b>Action:</b> Strategies to improve the student achievement will include the following: review of the assignment criteria a minimum of 2 times before the due date, review the assignment with the clinical instructors to ensure consistency between clinical groups, ask if students have questions during class time, and offer to preview a draft of their assignment to provide feedback. (11/14/2020)</p> |

College Goal 3 - Allen College is committed to recruiting and retaining 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.

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

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

| <i>Measures</i>  | <i>Results</i>   | <i>Actions</i>  |
|--|--|---|
| <p><b>AD: Survey</b> - Alumni Survey Item:<br/>How well BSN education prepared you to use patient-centered strategies when delivering care to diverse individuals and populations (1= very poorly, 2 = poorly, 3 = well, 4 = very well)..</p> <p><b>Target:</b> 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.</p> <p><b>Timeframe:</b> Annually</p> <p><b>Responsible Parties:</b> CIRE, Evaluation &amp; Study Committee</p>                          | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> <p><b>Target Met:</b> Yes</p> <p>100% of 2018-2019 alumni survey respondents (n = 24) reported their BSN education prepared them well (33.3%) or very well (66.7%) 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.</p> <p>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.</p> <p>100% of 2016-2017 alumni survey respondents (n = 56) reported their BSN education prepared them well (55.36%) or very well (44.64%) to perform this outcome.</p> <p>Previous action plan to survey 2018-2019 alumni during 2020, compare responses, and monitor for favorable and unfavorable trends was appropriate. (11/16/2020)</p> <p><b>Related Documents:</b><br/><a href="#">Report 2018-2019 BSN Alumni Survey.pdf</a></p>   | <p><b>Action:</b> Survey 2019-2020 graduates during 2021 and evaluate results for continuation of positive trend in alumni responses. (11/16/2020)</p>              |
| <p><b>AD: Survey</b> - Employer Survey Item:<br/>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).</p> <p><b>Target:</b> 75% of respondents will report that BSN graduate uses patient-centered strategies when delivering care to diverse individuals and populations well or very well.</p> <p><b>Timeframe:</b> Annually</p> <p><b>Responsible Parties:</b> CIRE,</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> <p><b>Target Met:</b> Yes</p> <p>&gt;90% of employers of 2018-2019 alumni (n = 11) reported BSN graduate demonstrated the outcome well (27.27%) or very well (63.64%). Results are consistent with previous employer surveys. The target of 75% favorable responses (some or most of the time) has been consistently met or exceeded.</p> <p>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.</p> <p>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%).</p> <p>Previous action plan to survey employers of 2018-2019 graduates during 2020, compare responses, and monitor for favorable and unfavorable trends was appropriate. (11/16/2020)</p> <p><b>Related Documents:</b><br/><a href="#">Report Employers of 2018-2019 BSN Alumni.pdf</a></p> | <p><b>Action:</b> Survey employers of 2019-2020 graduates during 2021 and evaluate results for continuation of positive trend in alumni responses. (11/16/2020)</p> |

College Goal 3 - Allen College is committed to recruiting and retaining 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.

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

---

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

| <i>Measures</i>              | <i>Results</i> | <i>Actions</i> |
|------------------------------|----------------|----------------|
| Evaluation & Study Committee |                |                |

College Goal 4 - Allen College is committed to promoting a commitment by all members of the Allen College community to lives of service.

**Admin - Administration**

**AU Outcome: Admin 2.0**

Environment encourages Allen College employees to maximize their performance

**Outcome Status:** Active

| <i>Measures</i>   | <i>Results</i>   | <i>Actions</i>  |
|---|--|---|
| <p><b>AD: Report - External</b> - Salary comparison tools (e.g., IAICU, etc.)<br/> <b>Target:</b> Faculty salaries will be at the average comparable salary for rank at peer institutions.<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> DOBAS</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     Allen College compared all data as indicated in our action plan for comparison data which resulted in no market adjustments being needed. Most recent data available was 2018-19. Allen College is at or above 2018-19 average salaries for all ranks when compared to Iowa colleges with nursing pre-licensure programs. Iowa private colleges (IAICU) was used and for the pre-licensure colleges that reported, Allen salaries met or exceeded the average in all ranks. These results are comparable to those of the previous reporting year, during which the target was also met. Staff salary comparisons were completed in 2020 for all positions using CUPA-HR reports. The 2019-2020 results were influenced by the 2018-2019 action plan by conducting the annual salary audit using all available sources of information and presenting the findings to the Allen College President who made the final determinations of appropriate adjustments. (09/09/2020)<br/> <b>Related Documents:</b><br/> <a href="#">UPH Allen College 20-21 Faculty Salary Range Review BOT.pdf</a></p> | <p><b>Action:</b> Continue to compare annually faculty and staff salaries with state, regional and national data if available. Make salary market adjustments as necessary based on data and trends. (09/09/2020)</p> |
| <p><b>AD: Report - Internal</b> - Annual report of Faculty Goal Achievement-short term teaching goals<br/> <b>Target:</b> 85% of faculty completely meet short-term teaching goals<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> Provost</p>       | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     87.8% (43/49) met the short-term teaching goals. Six faculty members partially met their teaching goals. There were no faculty members who did not achieve some their short-term teaching goals. These results compare less favorably than 2018-2019 where 97.3% (36/37) faculty met the short-term teaching goals (no information was provided related to any faculty partially meeting their goals in 2018-2019). As described in the 2018-2019 action plan, the academic leadership, including both academic Deans, communicated the information to faculty during the fall semester; however, the results in 2019-2020 were not as high in 2018-2019, even though the target was still exceeded. (10/07/2020)</p>  | <p><b>Action:</b> Continue to use of conversations during evaluations and emphasize the importance of achieving the entirety of their goals. (10/07/2020)</p>   |
| <p><b>AD: Report - Internal</b> - Annual report of Faculty Goal Achievement-progress on scholarly enrichment<br/> <b>Target:</b> 85% of faculty demonstrate progress on scholarly enrichment</p>  | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     85.7% (42/49) of faculty demonstrated progress on scholarly enrichment plans. Seven faculty did not demonstrate progress. These results compare favorably to 2018-2019 where 78.4%</p>   | <p><b>Action:</b> Evaluate if there are unmet needs to pursue scholarly work. (10/07/2020)</p>  |

**Admin - Administration**

**AU Outcome: Admin 2.0**

| Measures  | Results  | Actions  |
|---|--|--|
| plans.<br><b>Timeframe:</b> Annually<br><b>Responsible Parties:</b> Provost   | (29/37) faculty made progress on plans. The increased percentage of progress made on faculty scholarly enrichment plans was aided by the academic Deans coaching faculty to take advantage of workload release and coaching on developing achievable goals. (10/07/2020)   |  |
| <b>AD: Report - Internal</b> - Summary of Expenditures for Faculty and Staff Professional Development [e.g., total dollars spent for meetings, travel, and educational expenses].<br><b>Target:</b> College provided financial support to college faculty and staff to attend educational and/or professional development activities<br><b>Timeframe:</b> Annually<br><b>Responsible Parties:</b> DOBAS | <b>Reporting Year:</b> 2019 - 2020 (Year 2)<br><b>Target Met:</b> Yes<br>In 2019 we budgeted for our education and travel expenses and were successful as \$47,261 was spent on tuition assistance for faculty and staff and \$65,314 was spent on conference and meeting travel totaling \$112,575 for faculty and staff. For 2020 there is \$274,711 budgeted for education and travel. These results met target but have decreased when compared with prior year due to less educational assistance requested and mitigation efforts reduced travel compared to prior year. As mentioned in the 2018 action plan, the College appropriately budgets for professional development opportunities. In the event of revenue shortfalls, the executive leaders determine if and how much savings can be mitigated from the professional development/travel budgets. (09/09/2020)                 | <b>Action:</b> Continue to budget education and travel expenses annually for faculty and staff professional development. (09/09/2020)  |
| <b>AD: Report - Internal</b> - Professional Development and Welfare (PDW) committee annual scholarly recognition report.<br><b>Target:</b> 55% of faculty and staff are recognized for their service and scholarly accomplishments<br><b>Timeframe:</b> Annually<br><b>Responsible Parties:</b> PDW Committee Chair   | <b>Reporting Year:</b> 2019 - 2020 (Year 2)<br><b>Target Met:</b> No<br>33.3% (down 14% from the previous year) of faculty and staff were recognized for a scholarly achievement and 22.8% were recognized for a service award. For the 2018-2019 academic year, 47% of faculty and staff were recognized for a scholarly award.<br>The action plan for last year included extending the deadline for scholarly achievement submission into January to promote submissions; monthly reminders continued to be sent to all eligible faculty and staff. This did not improve the results as there were 14% fewer faculty and staff recognized for the 2019-2020 academic year. (05/11/2020)<br><b>Related Documents:</b><br><a href="#">Criteria for Scholarly Accomplishments 1.16.20.doc</a><br><a href="#">Program - 2019 Faculty and Staff Service and Scholarly Recognition Program.pdf</a> | <b>Action:</b> Faculty and staff will be asked to submit scholarly achievements on a monthly basis (a google doc will be sent every month from the PDW chair), instead of at the end of the calendar year, to encourage faculty and staff to submit scholarly achievements. The PDW chair will continue to encourage faculty and staff to submit scholarly accomplishments at CFO meetings. (05/11/2020) |

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

**AU Outcome: CELL 1.1**

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

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

**AU Outcome: CELL 1.1**

**Outcome Status:** Active

| <i>Measures</i>  | <i>Results</i>   | <i>Actions</i>  |
|--|--|---|
| <p><b>AD: Report - Internal - Service-Learning Faculty Scholars Assessment</b><br/> <b>Target:</b> 100% of Allen College programs incorporate service and/or learning activities into their curricula.<br/> <b>Timeframe:</b> Years 2 and 4<br/> <b>Responsible Parties:</b> Center for Engagement, Learning, and Leadership Committee/CELL coordinator</p>                              | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> No<br/>                     Programs that have formalized the use of service-learning teaching strategies through the completion of the Faculty Scholars Program are:<br/>                         BSN (Upper Division and Accelerated)<br/>                         MSN (NP tracks)<br/>                         MLS<br/>                         EdD</p> <p>The Faculty Scholars program was available for 2019-2020 which was included in the action plan for 2018-2019. Additionally, according to the action plan, Faculty Scholars was re-introduced to all faculty in May of 2019 through an in-service on how to incorporate service-learning into courses. Subsequent to that In-Service, one faculty member applied for and received the Faculty Scholars award. She then incorporated service-learning into her course. This addition of this course in the BSN program does not increase the number of programs that incorporate service learning activities into their curricula so the target is not met. This result indicates that the action plan needs to be revisited.<br/>                     (06/26/2020)</p> | <p><b>Action:</b> The CELL committee needs to discuss how to encourage more faculty to utilize the Faculty Scholars program and subsequently increase the number of courses and hopefully the number of programs who offer service learning.<br/>                     (06/26/2020)</p>  |
| <p><b>AD: Survey - Exit survey question "Do you intend to volunteer in your community in the future?" (yes, no)</b><br/> <b>Target:</b> 90% of exiting students report that they intend to volunteer in their communities in the future.<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> Center for Engagement, Learning, and Leadership Committee/CELL coordinator</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> No<br/>                     For programs that reported, 84.6% indicated that they intend to volunteer in their community in the future. This is less than the 90% target by 5.4% and 12.4% less than the previous reporting year. The action plan from 2018-2019 indicated that the CELL committee would offer a variety of opportunities for volunteering. These opportunities would allow students a better insight into options within communities where they can volunteer. Additionally, the CELL would promote and support volunteer opportunities of all programs at the college. These percentages indicate that a change and/or revision of the action plan is needed to affect a higher result for the next year. See attached report. (07/09/2020)<br/> <b>Related Documents:</b><br/> <a href="#">Exit Survey Service Items Report for 2019-2020 CAP Reportx.docx</a></p>   | <p><b>Action:</b> In order 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 and promote service and volunteer activities of all programs at the college. The CELL committee will seek to co-sponsor activities initiated by programs which highlights the mission of the CELL and the college. These opportunities allow students a better insight into options within</p> |

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

**AU Outcome: CELL 1.1**

| <i>Measures</i> | <i>Results</i> | <i>Actions</i>  |
|-----------------|----------------|---|
|                 |                | communities where they can volunteer. The CELL will promote and support volunteer opportunities of all programs at the college.<br>(07/09/2020) |

**AU Outcome: CELL 2.1**

Alumni will demonstrate community service

**Outcome Status:** Active

| <i>Measures</i>  | <i>Results</i>   | <i>Actions</i>   |
|--|--|--|
| <p><b>AD: Survey</b> - Alumni survey item: To what extent did your educational experience influence your desire to provide service to your community?<br/> <b>Target:</b> 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).<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> Center for Engagement, Learning, and Leadership Committee/CELL coordinator</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     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. Alumni survey data indicate that 73.4% of alumni reported their education at Allen College influenced their desire to provide service to their community at least "some" (some = 41%, quite a bit = 22%, very much = 11%). (No data provided for DMS, EdD, or PH.) 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 data indicates that there was a small increase from 2017-18 to 2018-19. According to the last CAP report, the action plan was to increase the number of alumni who meet this target. This plan indicated that the CELL would implement several strategies during the 2019-2020 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.<br/>                     (09/22/2020)<br/> <b>Related Documents:</b><br/> <a href="#">2018-2019 Grads Service Desire Report.docx</a></p> | <p><b>Action:</b> Continue to promote service learning opportunities for students, pandemic safety measures permitting. Continue to publish service testimonials on social media. (09/22/2020)</p> |
| <p><b>AD: Survey</b> - Alumni survey item:</p>   | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p>   | <p><b>Action:</b> The CELL may want to</p>   |

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

**AU Outcome: CELL 2.1**

| <i>Measures</i>  | <i>Results</i>   | <i>Actions</i>  |
|--|--|---|
| <p>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)<br/> <b>Target:</b> 60% of alumni responding to the survey report performing at least 5-9 hours of service during the past 12 months.<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> Center for Engagement, Learning, and Leadership Committee/CELL coordinator</p> | <p><b>Target Met:</b> No<br/>                     Overall, 29.7% (n = 19) of alumni (2018-2019 graduates) reported they have been involved in at least "5-9" hours of community service during the past 12 months (5-9 = 10.9%, 10-14 = 9.4%, 15-19 = 1.6%, 20-24 = 1.6%, 25 or more = 6.3%) . (No data provided for DMS, EdD, PH) .<br/>                     The results of the survey of 2018-2019 graduates indicate a decrease in alumni survey involvement compared to the previous reporting year (2018-2019), when the survey of 2017-2018 alumni indicated 34.9% of graduates (n = 22/63 survey respondents) reported at least 5-9 hours of service in the previous 12 months (5-9 = 16%, 10-14 = 5%, 15-19 = 2%, 20-24 = 3%, 25 or more = 10%).<br/><br/>                     The 2018-2019 action plan proposed to achieve the target during the 2019-2020 academic year was for the CELL to 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. Also, the CELL planned to continue to discuss how it can reach out to alumni to encourage service within their community. (09/22/2020)<br/> <b>Related Documents:</b><br/> <a href="#">2018-2019 Grads Service Hours Report.docx</a></p> | <p>consider whether the target of 60% is appropriate. The previous actions are probably still appropriate until the committee discusses any changes that may be indicated. (09/22/2020)</p> |

**AU Outcome: CELL 2.2**

Promote leadership development through community service

**Outcome Status:** Active

| <i>Measures</i>   | <i>Results</i>   | <i>Actions</i>   |
|---|--|--|
| <p><b>SL: Survey -</b> Exit Survey: Participation in on- and off-campus committees, organizations, or projects.<br/> <b>Target:</b> 60% of the respondents report participation in either on- or off-campus committees, organizations, or projects.<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> Center for Engagement, Learning, and Leadership Committee/CELL</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> No<br/>                     For the programs reporting, 57.54% indicated that they participated in either on -or off-campus committees, organizations, or projects. This is 2.46% below the target of 60% but .54% higher than the previous reporting year. This indicates that the action plan is probably appropriate. The action plan for 2018-2019 indicated that activities would continue to be offered with new sites added as available. Service opportunities would be offered on a variety of days and times to attempt to accommodate the various schedules of the programs. These actions were implemented. Additionally, the action plan indicated that the CELL coordinator would meet with the Deans to seek a better understanding of why the numbers</p> | <p><b>Action:</b> 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. (07/09/2020)</p> |

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

**AU Outcome: CELL 2.2**

| <i>Measures</i>   | <i>Results</i>  | <i>Actions</i>  |
|---|---|---|
| <p>coordinator</p>  | <p>are increasing and decreasing for the accelerated and upper division cohorts and would 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. There was discussion with only the Dean of Nursing. Since there was a very slight increase from the 2018-2019 results and was just below the target, the action plan is appropriate. See attached report for program-specific participation rates as reported by students completing exit surveys. (07/09/2020)</p> <p><b>Related Documents:</b><br/> <a href="#">Exit Survey Service Items Report for 2019-2020 CAP Reportx.docx</a></p>  |   |
| <p><b>AD: Survey</b> - Honors Program and Service Learning course rosters<br/> <b>Target:</b> 35% of each cohort in the upper division prelicensure BSN program enrolls in the service honors program or a service-learning elective.<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> Center for Engagement, Learning, and Leadership Committee/CELL coordinator</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> No<br/>                     1219T cohort had 12/24 (50%) participate in either service honors or a service-learning elective (Denver, CO-Spring '18, Dominican Republic-Spring '18 or New Orleans-Spring '19)<br/>                     The 0520 cohort had 14/47 (29.8%) participate in either service honors or a service-learning elective, traveling to New Orleans in Spring '19.<br/>                     Other cohorts have yet to all enroll in their nursing elective.<br/>                     The percent participating 2019-2020 is a decrease of 8.5% from 2018-2019. No travel courses were completed in this academic year which likely affected the overall participation percentage. The action plan for 2018-2019 indicated that a variety of service-learning options for electives would be offered for the upper division nursing students. Different travel destinations such as Europe and different U.S. locations would be considered as options for an elective. Some travel options were offered, but the student response was not sufficient to support any trips. The action plan was not successful in minimally maintaining the participation percentage. (07/07/2020)</p> | <p><b>Action:</b> Continue to offer a variety of service-learning options for electives for the upper division nursing students. Different travel destinations may be considered within the guidelines for travel related to the pandemic. (07/07/2020)</p>                             |
| <p><b>SL: Survey</b> - Exit Survey: Managing or leading an organization.<br/> <b>Target:</b> 15% of respondents report managing or leading an organization.<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> Center for Engagement, Learning, and Leadership Committee/CELL</p>   | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     For reporting programs, 40.9% of students reporting having participated in an on or off-campus activities indicated managing or leading an organization. The 40.9% result is well above the 15% target and a decrease of 4.1% from the previous year. The 2018-2019 action plan indicated that Allen College would continue to provide leadership opportunities throughout the curriculum, especially in the leadership courses. AC 316 Service Honors would continue to challenge students through course service projects to take leadership roles in the</p>   | <p><b>Action:</b> The results from 2019-2020 are higher than the 15% which was 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</p> |

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

**AU Outcome: CELL 2.2**

| <i>Measures</i> | <i>Results</i>  | <i>Actions</i>   |
|-----------------|---|--|
| coordinator     | <p>community and on-campus. These two actions were implemented. AC 316 students developed their own service learning project to assist deploying troops. The next part of that plan indicated that the CELL would consider gathering information from student groups on campus to compile leadership opportunities offered through their membership. This was not a committee discussion. This result indicates that part of the action plan was implemented and proved to support the target. The last part of the action plan where leadership opportunities are available is still a viable part and should be revisited for 2019-2020. See the attached report for specific program reporting.<br/>(07/09/2020)</p> <p><b>Related Documents:</b><br/> <a href="#">Exit Survey Service Items Report for 2019-2020 CAP Reportx.docx</a></p> | <p>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. (07/09/2020)</p> |

**AU Outcome: CELL 3.1**

Collaborate with partners in the community

**Outcome Status:** Active

| <i>Measures</i>   | <i>Results</i>   | <i>Actions</i>   |
|---|--|--|
| <p><b>AD: Report - Internal</b> - Sign up sheets from service days<br/> <b>Target:</b> 15% of students attend college-wide community service events yearly.<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> Center for Engagement, Learning, and Leadership Committee/CELL</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> No<br/>                     Not met. 40/624 (6.5%) students participated in college-wide community service events during the 2019-2020 academic year. This result is 0.5% lower than the previous year and 11.7% lower than the 2017-2018 year which was 18.2%. This is the third year in a row that the percentage of students attending college-wide service days has decreased.<br/>                     The action plan for 2018-2019 indicated that the CELL committee would continue discussion on options for campus-wide service and volunteering opportunities and consideration would be given to fewer high count days and look towards more single event opportunities that</p> | <p><b>Action:</b> Since the trend has continued downward for the number of students participating in college-wide service days, the CELL committee needs to re-structure how it presents and promotes service opportunities at the college. Before a change in the target, the CELL will determine how they want</p> |

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

**AU Outcome: CELL 3.1**

| <i>Measures</i>   | <i>Results</i>   | <i>Actions</i>   |
|---|--|--|
| coordinator   | might have greater appeal and make even more times available than in previous years. These actions were completed. However, the number of participants continues to decline indicating the action plan needs to be re-visited for the next year. (06/26/2020)  | to report service. (06/26/2020)  |
| <p><b>SL: Service</b> - Services stories posted on social media<br/> <b>Target:</b> Featured service stories on social media will reach 1,500 people and have 15 "likes".<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> Center for Engagement, Learning, and Leadership Committee/CELL coordinator</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> No<br/>                     Not met. Fifteen service stories were posted on social media during this reporting year. 5/15 (33%) reached at least 1500 people. 13/15 (87%) had at least 15 "likes". There was no data from the previous year for comparison. The action plan for 2018-2019 indicated that the CELL would continue to publicize service events and activities that were happening on the campus. The goal was to increase the number of events that are publicized. CELL members were to follow-up with organizations and courses that offer service so that a post can be made to social media. The CELL did publicize events but the number did not support the target. A small number of CELL members actively did follow-up with campus groups to encourage posting of events.<br/>                     The action plan should be revisited based on current reporting.<br/>                     (06/26/2020)</p> | <p><b>Action:</b> The CELL committee will work with college groups to increase awareness of posting service stories and seeking "likes" on social media. These postings will help to get the Allen College name into the committee and state of Iowa. (06/26/2020)</p> |

**Admin - Enrollment Management**

**AU Outcome: EM 9.0**

Students are represented on college committees

**Outcome Status:** Active

| <i>Measures</i>  | <i>Results</i>   | <i>Actions</i>  |
|--|--|---|
| <p><b>AD: Report - Internal</b> - Allen College Student Opinion Survey--<br/>                     Opportunity for student involvement in college committees<br/> <b>Target:</b> 80% of students report satisfied or very satisfied</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> No<br/>                     65% of students reported satisfaction with the opportunity to be involved in campus committees. 9% were dissatisfied, and 27% were unaware of the opportunity. Last year, 54% of students reported satisfaction with the opportunity to be involved in campus committees, but only 2% were dissatisfied. This leaves 44% of students unaware of this opportunity.</p> | <p><b>Action:</b> During the 2020-21 academic year, communication with students will focus on how committee work is a way to make students' voices heard.<br/>                     (07/20/2020)</p> |

**Admin - Enrollment Management**

**AU Outcome: EM 9.0**

| <i>Measures</i>  | <i>Results</i>   | <i>Actions</i> |
|--|--|----------------|
| <p><b>Timeframe:</b> Year 4</p> <p><b>Responsible Parties:</b> Dean of Enrollment Management</p> | <p>The increase in satisfaction likely came from education to the Student Ambassador Program. Several Ambassadors were involved in committees this year. The increase of students who were unaware of this opportunity was significantly lower. Again, the education to the ambassador population was likely the cause of awareness. (07/20/2020)</p> <p><b>Related Documents:</b><br/> <a href="#">Report Allen College Student Opinion Survey 05-04-20.pdf</a></p> |                |

**AU Outcome: EM10.0**

Recognize Student Scholarship

**Outcome Status:** Active

| <i>Measures</i>   | <i>Results</i>   | <i>Actions</i>  |
|---|--|---|
| <p><b>AD: Report - Internal</b> - GPA criteria recorded in CAMS</p> <p><b>Target:</b> All students who meet honor criteria are recognized</p> <p><b>Timeframe:</b> Each semester</p> <p><b>Responsible Parties:</b> Registrar</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> <p><b>Target Met:</b> Yes</p> <p>Students meeting honors criteria are now recognized on Facebook and on the college's website.</p> <p>Last year's action plan included finding new ways to measure recognizing students for scholarly achievements. The new measurement will include tracking engagements on Facebook.<br/>(05/29/2020)</p> | <p><b>Action:</b> The new way to measure the recognition of students is to review "people reached" and "engagements" on the posts regarding student scholarly achievements. Beginning in the 2020-21 academic year following will be measured on Facebook:</p> <ul style="list-style-type: none"> <li>- Graduation Posts honoring any type of graduates by semester</li> <li>- Graduation honors</li> <li>- Dean's List (05/29/2020)</li> </ul> |

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

**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**

**Outcome Status:** Active

| <i>Measures</i>  | <i>Results</i>   | <i>Actions</i>  |
|--|--|---|
| <p><b>SL: Service</b> - RA:135 Community Service/Service Learning Evaluation<br/> <b>Target:</b> Average score of &gt;= 80%<br/> <b>Timeframe:</b> Level I-Fall Semester<br/> <b>Responsible Parties:</b> RA: 135 Course Instructors/HS Curriculum Committee</p>   | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     2019 = 87.71% (n=19)<br/>                     2018: 83.69% (n=13)<br/>                     2017: 94.78 (n=14)<br/>                     2016: 72% (n=13)<br/>                     2015: 92.56% (n=16)<br/>                     The action plan from the 2018-2019 was effective for 2019-2020. The course instructors made a few editorial changes to the assignment instructions for emphasis and clarification based on last year's recommendations. The overall average score increased slightly when compared to last year. Again, the majority of point deductions occurred in the overall writing and the research categories of the assessment rubric. Some students did not research the organization as directed. All students performed service learning through a variety of organizations. Students demonstrated leadership skills and professionalism through their involvement in service learning activities. (07/27/2020)</p> | <p><b>Action:</b> To continue to achieve the target for this measure during the 2020-2021 academic year, ASR faculty will assess their rubric that are contributing to exceed the target on service-learning and make modifications accordingly. Will continue to assess this measure. (07/27/2020)</p> |
| <p><b>SL: Service</b> - RA: 265 Community Service/Service Learning Evaluation<br/> <b>Target:</b> Average score of &gt;= 80%<br/> <b>Timeframe:</b> Level II-Fall Semester<br/> <b>Responsible Parties:</b> RA: 265 Course Instructors/HS Curriculum Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     2019 = 85.6% (n = 10)<br/>                     2018: 76.75% (n=12)<br/>                     2017: 93.33% (n=12)<br/>                     2016: 93.4% (n=15)<br/>                     2015: 82.47% (n=17)<br/>                     The action plan from the 2018-2019 was successful for 2019-2020. The course instructors made a few editorial changes to the assignment instructions to better emphasize and clarify the expectations for the assignment. Improved average scores this year may be the result of implementing the 2018 recommended changes. (07/27/2020)</p>  | <p><b>Action:</b> To continue to achieve the target for this measure during the 2020-2021 academic year, the course instructors will continue to assess the assignment instructions and make modifications accordingly. Continue to assess this measure. (07/27/2020)</p>                               |

**AU Outcome: ASR 4.2**

Students will practice professionalism

**Outcome Status:** Active

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

**AU Outcome: ASR 4.2**

| <i>Measures</i>  | <i>Results</i>  | <i>Actions</i>   |
|--|---|--|
| <p><b>SL: Clinical evaluation tool - RA:135</b><br/>Clinical Instructor/Preceptor Evaluations Numbers 1,5,9,12,13</p> <p><b>Target:</b> Average score &gt;= 3 (0-4 pt. scale)</p> <p><b>Timeframe:</b> Level I- Fall Semester</p> <p><b>Responsible Parties:</b> Clinical Instructors/ Program Faculty/HS Curriculum Committee</p>   | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> <p><b>Target Met:</b> Yes</p> <p>2019 3.51 (n=19)</p> <p>2018 3.68 (n=13)</p> <p>2017 3.68 (n=14)</p> <p>2016 3.6 (n=13)</p> <p>2015 3.83 (n=16)</p> <p>The action plan from the 2018-2019 was effective for 2019-2020. All student evaluations were completed on Trajecsyst by the clinical instructors. Students had immediate access and feedback to the completed evaluations. Clinical instructors continued to provide effective and timely feedback to students. The students' average scores decreased in all areas of the performance criteria, organization of assignments, initiative, appearance, policies and procedures, ethical and professional behaviors. Some of the comments on the evaluations were; student lacks initiative to be involved in the exams, there were a lot of exams that the student was not involved in-this student has no initiative, needs to work on professionalism with patients and technologists. (07/27/2020)</p> | <p><b>Action:</b> To continue to meet or exceed the target for this measure during the 2020-2021 academic year, the clinical instructors/preceptors will continue to deliver prompt feedback to students when issues arise concerning initiative and professionalism. Faculty continue to discuss the importance of initiative and professionalism in the clinical setting. (07/27/2020)</p> |
| <p><b>SL: Clinical evaluation tool - RA:275</b><br/>Clinical Instructor/Preceptor Evaluations Numbers 1,5,9,12,13</p> <p><b>Target:</b> Average score &gt;= 3 (0-4 pt. scale)</p> <p><b>Timeframe:</b> Level II-Spring Semester</p> <p><b>Responsible Parties:</b> Clinical Instructors/ Program Faculty/HS Curriculum Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> <p><b>Target Met:</b> Yes</p> <p>2019-2020 3.88 n=10</p> <p>2018-2019 3.83 (n=12)</p> <p>2017-2018 3.76 (n=12)</p> <p>2016-2017 3.96 (n=15)</p> <p>2015-2016 3.98 (n=17)</p> <p>The action plan from the 2018-2019 was successful for 2019-2020. The clinical instructors/preceptors in the clinical setting provided excellent instruction and supervision of students to assess their professionalism. This result is an increase compared to the previous year. The student scores were higher in areas of organization of assignments, initiative, appearance, and ethical and professional behaviors. The scores were lower in only one area which was policies and procedures. (07/27/2020)</p>  | <p><b>Action:</b> To continue to meet or exceed the target for this measure during the 2020-2021 academic year, clinical instructors/preceptors will continue to be positive role models for students by practicing professionalism in the clinical setting. (07/27/2020)</p>  |

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

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

**AU Outcome: DMS 2.2**

Students will successfully obtain patient history

**Outcome Status:** Active

| <i>Measures</i>   | <i>Results</i>  | <i>Actions</i>  |
|---|---|---|
| <p><b>SL: Clinical evaluation tool -</b><br/>DMS:408 Clinical<br/>Instructor/Preceptor Evaluations<br/>Number 1<br/><b>Target:</b> On a scale from 1-5, 5 being the highest rating, the average of all the responses &gt;=4<br/><b>Timeframe:</b> Didactic Level - Fall Semester</p> <p><b>Responsible Parties:</b> DMS:408<br/>Course Instructor/Program<br/>Faculty/HS Curriculum Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/><b>Target Met:</b> Yes<br/>Fall 2019 avg rating of 4.72 on a scale of 1-5. All students were rated 4 (n=6), which is consistent with previous years.<br/>Fall 2018 avg rating 4.62<br/>Fall 2017 avg rating 4.94<br/>Fall 2016 avg rating 4.71<br/>Fall 2015 avg rating 4.47</p> <p>Scale 0-4<br/>Fall 2014 avg rating 3.40<br/>Fall 2013 avg rating 3.45<br/>Fall 2012 avg. rating 3.6</p> <p>Per the 2018-2019 action plan, faculty obtained and assessed feedback from clinical instructors. Faculty reviewed evaluations with clinical instructors and student at each site visit and identified /made recommendations for student improvement. This action plan appears to have been effective in helping students be successful in the clinical setting and in achieving the target for this measure. The 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. (09/23/2020)</p> | <p><b>Action:</b> This outcome or measure will be deactivated and replaced with a new measure for the 2020-2021 academic year. (09/23/2020)</p> |

**AU Outcome: DMS 4.2**

Students will practice professionalism in the clinical lab setting

**Outcome Status:** Active

| <i>Measures</i>   | <i>Results</i>  | <i>Actions</i>   |
|---|---|--|
| <p><b>SL: Clinical evaluation tool -</b><br/>DMS:408 Clinical Instructor/<br/>Preceptor Evaluations Numbers<br/>1,2,10-13,15-19</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/><b>Target Met:</b> Yes<br/>Spring 2020: Average rating = 4.92 (n=7). Ratings remain high and consistent with previous years.</p> | <p><b>Action:</b> This measure will be changed due to a change in evaluation forms (discontinuation of rating scale). (09/24/2020)</p> |

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

**AU Outcome: DMS 4.2**

| <i>Measures</i>   | <i>Results</i>   | <i>Actions</i>  |
|---|--|---|
| <p><b>Target:</b> On a scale from 1-5, 5 being the highest rating, the average of all the responses &gt;=4<br/> <b>Timeframe:</b> Didactic Level - Fall Semester<br/> <b>Responsible Parties:</b> DMS 408 Instructor/ Program Faculty/HS Curriculum Committee</p>   | <p>Sp 2019: avg rating = 4.92 (n=9).<br/>                     Sp 2018: avg rating = 4.94 (n=7).<br/>                     Sp 2017: avg rating = 4.78 (n=4).<br/>                     Sp 2016: avg rating = 4.96 (n=5).<br/><br/>                     Per the 2018-2019 action plan, faculty continued to review evaluations from the clinical instructors to identify areas of concern and made recommendations/plan for student improvement. The action plan appears to have been effective in helping students be successful in the clinical setting. (09/24/2020)</p>  |   |
| <p><b>SL: Clinical evaluation tool -</b><br/>                     DMS:409 Clinical Instructor/ Preceptor Evaluations Numbers 1,2,10-13,15-19<br/><br/> <b>Target:</b> On a scale from 1-5, 5 being the highest rating, the average of all the responses &gt;=4<br/> <b>Timeframe:</b> Didactic Level - Spring Semester<br/> <b>Responsible Parties:</b> DMS 408 Instructor/ Program Faculty/HS Curriculum Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     Spring 2020 students average score 4.95(n=6) Scores remain high with slight increase over last year.<br/><br/>                     Spring 2019 Avg. 4.93 (n=9)<br/>                     Spring 2018 avg score is 4 (n=7)<br/>                     Spring 2017 avg 4.83 (n=4)<br/><br/>                     Likert scale:0-4<br/>                     Results:<br/>                     Spring 2015 (N=5) avg is 3.72<br/><br/>                     Per the 2018-2019 action plan, faculty evaluated feedback from clinical instructors. At each site visit, faculty reviewed evaluations with clinical instructors and the student. Areas of concern were identified and recommendations for student improvement were developed. This action plan appears to have been effective in helping students be successful in the clinical setting. (09/24/2020)</p> | <p><b>Action:</b> This measure will be changed due to a change in rating scale on the evaluation form. (09/24/2020)</p> |

**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.

**Outcome Status:** Active

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

**AU Outcome: EdD 3.1**

| <i>Measures</i>   | <i>Results</i>  | <i>Actions</i>   |
|---|---|--|
| <p><b>SL: Didactic - EdD 700:</b><br/>Organizational Development and Change in Education – Discussions<br/><b>Target:</b> Students will receive an average score of &gt;90% for all discussions within the course<br/><b>Timeframe:</b> When course is taught<br/><b>Responsible Parties:</b> Program Chair/HS Graduate APG Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/><b>Target Met:</b> Yes<br/>Fall 2019 – 2 students<br/><br/>100% of students received a score of &gt;90%<br/><br/>Overall average score = 98.3% (55.05/56)<br/><br/>Fall 2014 – 100% (average)<br/>Fall 2017 – 100% (average)<br/><br/>Within each module, students discussed a variety of organization development and change topics as they related to educational environments. Discussion board posts are graded using a rubric. Some discussion board assignments were awarded points for completing posts as directed. Many of the discussions were designed to help students process and think on larger written paper assignments. Students were engaged and active in these discussions.<br/><br/>The action plan for 2017-2018 CAP indicated discussions will continue to be incorporated into this course. A verbal discussion activity will be added to maintain engagement and continue to help students meet the target. This helped students be successful in meeting the target for this item. (07/31/2020)</p> | <p><b>Action:</b> Students will complete discussion board assignments on topics that relate to larger written paper assignments within the course. Faculty will use a rubric to grade the assignments and provide feedback to students. Subsequent sections will be assessed on this item to ensure the target continues to be met. (07/31/2020)</p> |
| <p><b>SL: Didactic - EdD 710:</b> Leading a Health Sciences Learning Organization – Strategic Planning Project<br/><b>Target:</b> 100% of students will receive a score of &gt;=85%<br/><b>Timeframe:</b> When course is taught (e.g., 2015, 2018, etc.)<br/><b>Responsible Parties:</b> Program Chair/HS Grad Curriculum Committee</p>   | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/><b>Target Met:</b> Yes<br/>Spring 2020<br/>1 student earned 68 out of 70 points = 97.1%<br/><br/>2018 = 90.8% (average – 6 students)<br/>2015 = 92.8% (average – 7 students)<br/><br/>The 2017-2018 CAP action plan indicated this measure would be kept unchanged for the next course offering to allow more time to evaluate the assignment with a new group of students. The student in the Spring 2020 section successfully met the target. (07/31/2020)</p>   | <p><b>Action:</b> In this case study, students were provided with a detailed rubric which allowed them to create realistic and detailed plans for addressing the assignment. Because it is difficult to make any kind of judgments with one student, this measure will be kept unchanged for the next course offering. (07/31/2020)</p>              |

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

**AU Outcome: EdD 3.1**

| <i>Measures</i> | <i>Results</i> | <i>Actions</i> |
|-----------------|----------------|----------------|
|                 |                |                |

**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.

| <i>Measures</i>   | <i>Results</i>  | <i>Actions</i>   |
|---|---|--|
| <p><b>SL: Clinical</b> - OT 601 - Treatment Note</p> <p><b>Target:</b> Minimum of 80% on documentation note</p> <p><b>Timeframe:</b> When course taught (2nd Year, e.g., Fall 2016)</p> <p><b>Responsible Parties:</b> Instructor/ OT Faculty /HS Grad Curriculum Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> <p><b>Target Met:</b> No</p> <p>16/24 students received a minimum of 80% or higher on this assignment with the average on the assignment being 8/10. This is significantly lower student performance than the previous years with 19/22, 19/19, and 14/14 the prior three reporting years. This may be due to the change in outcome measure design. Per the 2018-2019 action plan, faculty developed additional opportunities for students to practice writing treatment notes using required formats to ensure learning of this task. However, the action plan did not contribute to increased student performance during this reporting year. (09/25/2020)</p> | <p><b>Action:</b> The assignment was revised for the 2020 reporting period to have students write a treatment note as a part of a midterm practical exam linked to their administration of a screening tool with a peer. The course faculty reviewed the instructions and made modifications to the wording for additional clarity and students will be provided with additional opportunities in class to practice treatment notes prior to testing. Due to newly revised 2018 ACOTE accreditation standards, this measurement tool and its placement in the coursework/curriculum will be reviewed by faculty and revised as appropriate to meet the new standards. The shift from 2011 to 2018 ACOTE standards went into effect July 2020 and so were in process during the 2019-2020 CAP data collection period (09/25/2020)</p> |

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

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

| <i>Measures</i> | <i>Results</i> | <i>Actions</i> |
|-----------------|----------------|----------------|
|                 |                |                |

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

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

| <i>Measures</i>  | <i>Results</i>  | <i>Actions</i>  |
|--|---|---|
| <p><b>SL: Exam/Quiz - Teacher-made</b> - OT 509 – Ethics Quiz<br/> <b>Target:</b> When course taught (1st Year, e.g., Fall 2016)<br/> <b>Timeframe:</b> Minimum score of 80% on quiz<br/> <b>Responsible Parties:</b> Instructor/ OT Faculty /HS Grad Curriculum Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     The Ethics Quiz was completed during OT 613 instead of OT509. All students received a score of &gt; 80% with an average score of 54/55 points. The target has been met 3 of the 4 previous reporting years.<br/>                     Per the 2018-2019 action plan, the faculty discussed the best placement of this measure and decided to place it in OT613, but the request to change the measure was inadvertently not submitted to the CIRE. Regardless, the action plan did not include any strategies that would facilitate student success on the quiz; therefore, achievement of the target cannot be attributed to the 2018-2019 action plan, but apparently ethics content that students are receiving has been sufficient to ensure success on the quiz. (09/24/2020)</p> | <p><b>Action:</b> Faculty will continue to teach ethics throughout the coursework in the program including in OT 613 using the American Occupational Therapy Association's Official Document titled 2020 Occupational Therapy Code of Ethics, through classroom/clinical learning activities including ethical case study analysis/discussion and ethical case simulation activities. Due to newly revised 2018 ACOTE accreditation standards, this measurement tool and its placement in the coursework/curriculum will be reviewed by faculty and revised as appropriate to meet the new standards. The shift from 2011 to 2018 ACOTE standards went into effect July 2020 and so were in process during the 2019-2020 CAP data collection period. (09/24/2020)</p> |

College Goal 4 - Allen College is committed to promoting a commitment by all members of the Allen College community to lives of service.

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

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

**AU Outcome: MI 4.1**

Students will integrate leadership skills and construct professional practices.

**Outcome Status:** Active

| <i>Measures</i>   | <i>Results</i>  | <i>Actions</i>  |
|---|---|---|
| MI: 460 Service Learning Project (MRI)<br><b>Target:</b> Average score of >= 80%<br><b>Timeframe:</b> Spring Semester<br><b>Responsible Parties:</b> MI: 460 Course Instructors/HS Curriculum Committee | <b>Reporting Year:</b> 2019 - 2020 (Year 2)<br><b>Target Met:</b> NA<br>No current data available. This measurement tool was altered for this cohort due to COVID-19. The students were unable to provide service directly. The assessment of this item will resume for the next cohort of students.<br><br>2020 (n=3)<br>2019 = 94% (n=1) (09/11/2020) | <b>Action:</b> The instructor will continue to provide the students with information on service learning opportunities. A rubric will be given to each student at the beginning of the course to ensure they understand the assignment requirements before they decide what service they would like to provide in the community. (09/11/2020) |
| MI: 445 Service Learning Project (CT)<br><b>Target:</b> Average score of >= 80%.<br><b>Timeframe:</b> Spring Semester<br><b>Responsible Parties:</b> MI: 445 Course Instructors/HS Curriculum Committee | <b>Reporting Year:</b> 2019 - 2020 (Year 2)<br><b>Target Met:</b> NA<br>No current data available.<br>The CT student that is currently in the program is following the part-time track. That student will complete the MI 445 course in the next academic year.<br><br>2020 (n=0)<br>2019 = 99% (n=1) (09/11/2020)                                      | <b>Action:</b> The instructor will continue to provide the students with information on service learning opportunities. A rubric will be given to each student at the beginning of the course to ensure they understand the assignment requirements before they decide what service they would like to provide in the community. (09/11/2020) |

**AU Outcome: MI 4.2**

Students will practice professionalism.

**Outcome Status:** Active

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

**AU Outcome: MI 4.2**

| <i>Measures</i>   | <i>Results</i>   | <i>Actions</i>  |
|---|--|---|
| <p>MI: 480 Clinical Instructor Evaluations Numbers 1,5,9,12,13<br/> <b>Target:</b> Average score &gt;= 3 (0-4 pt. scale)<br/> <b>Timeframe:</b> Summer Semester<br/> <b>Responsible Parties:</b> Clinical Instructors/ Program Faculty/HS Curriculum Committee</p>  | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     The MI 480 Clinical Instructor Evaluations, numbers 1, 5, 9, 12, 13 average score is 3.78. There is no previous data available for comparison. Prior to the beginning of their clinical rotation, the instructor meets with each student to discuss professionalism in the clinical environment. While in the clinical environment, the students showed professionalism in all five performance criteria areas: organization of assignments, initiative, appearance, policies and procedures, and ethical and professional behaviors. When the clinical instructor completes the student’s evaluation during the last two weeks of the semester/program, the evaluation is then reviewed and discussed with each student. All three students received high praise from their clinical instructor in all five performance criteria areas.</p> <p>2020 = 3.78 (n=3)<br/>                     2019 (n=0) (09/11/2020)</p> | <p><b>Action:</b> The instructor will continue to meet with each student before they begin their clinical rotations to discuss professionalism. The clinical instructors will continue to complete a non-graded evaluation at midterm so that the students have a chance to receive feedback that they can learn and grow from while still in the clinical environment. The instructor will continue to use this measurement tool as it demonstrated that it is beneficial in measuring student professionalism within the clinical environment. (09/11/2020)</p> |
| <p><b>SL: Clinical evaluation tool - MI: 465</b><br/>                     Clinical Instructor Evaluations Numbers 1,5,9,12,13<br/> <b>Target:</b> Average score &gt;= 3 (0-4 pt. scale)<br/> <b>Timeframe:</b> Summer Semester<br/> <b>Responsible Parties:</b> Clinical Instructors/ Program Faculty/HS Curriculum Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> NA<br/>                     No current data available.<br/>                     The CT student that is currently in the program is following the part-time track. That student will complete the MI 465 course in the next academic year. As proposed in the 2018-2019 action plan, this measure has been continued because it is considered beneficial in measuring student professionalism within the clinical environment.</p> <p>2020 (n=0)<br/>                     2019 = 4 (n=1) (09/11/2020)</p>  | <p><b>Action:</b> The instructor will continue to meet with each student before they begin their clinical rotations to discuss professionalism. The clinical instructors will continue to complete a non-graded evaluation at midterm so that the students have a chance to receive feedback that they can learn and grow from while still in the clinical environment. The instructor will continue to use this measurement tool as it demonstrated that it is beneficial in measuring student professionalism within the clinical environment. (09/11/2020)</p> |

College Goal 4 - Allen College is committed to promoting a commitment by all members of the Allen College community to lives of service.

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

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

**AU Outcome: MLS 3.1**

Students will maintain competency in the laboratory field of study

**Outcome Status:** Active

| <i>Measures</i>  | <i>Results</i>   | <i>Actions</i>  |
|--|--|---|
| <p><b>SL: Didactic</b> - Annotated Bibliographies – MLS 426: Evidence-Based Laboratory Medicine</p> <p><b>Target:</b> 75% of students will receive an average score of &gt;80%</p> <p><b>Timeframe:</b> Annually</p> <p><b>Responsible Parties:</b> Program Chair/HS APG Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> <p><b>Target Met:</b> Yes</p> <p>Fall 2019 – 6 students</p> <p>100% (6/6) earned an average score of &gt;85%.</p> <p>Overall average score = 91.7%</p> <p>2018-2019 = 91.1% (overall average) – target not met<br/>                     2017-2018 = 88.4% (overall average)<br/>                     2016-2017 = 96.2% (overall average)<br/>                     2015-2016 = 90.9% (overall average)</p> <p>The action plan from last academic year stated additional explanation about the assignment requirements would be included for this cycle. Sections titled What I want to see were added to the outline for the final project to clarify what needed to be included in each section of the final project submission. The What I want to see sections complemented the expectations for each section and related back to material taught earlier in the course. (07/31/2020)</p> | <p><b>Action:</b> This assignment will be included the next time this course is taught. An additional resource will be provided to students to help support their preparation of the final project submission. Subsequent sections will be assessed on this measurement tool to ensure the target continues to be met. (07/31/2020)</p> |

**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

| <i>Measures</i>  | <i>Results</i>                                     | <i>Actions</i>                            |
|--|--|---|
| <p><b>SL: Didactic</b> - PH: 420 Final report</p> <p><b>Target:</b> Average score of &gt;80%</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> | <p><b>Action:</b> There will be minor</p> |

College Goal 4 - Allen College is committed to promoting a commitment by all members of the Allen College community to lives of service.

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

**AU Outcome: PH 3.1**

| <i>Measures</i>   | <i>Results</i>   | <i>Actions</i>  |
|---|--|---|
| <p><b>Timeframe:</b> Fall semester<br/> <b>Responsible Parties:</b> Program faculty / HS Curriculum committee</p> | <p><b>Target Met:</b> Yes<br/>                     In Summer 2019, seven students taking the course received average of 91.3% on their final report. In Summer 2018, three students took the course and received an average of 81.3%. The measure appears to be improving in part due to a more rigid rubric being used for this assignment along with more time dedicated to the final report as part of the changes planned in the 2018-2019 action plan. (09/03/2019)</p> | <p>changes to the final project due to a new edition of the book being used and a second textbook being removed due to aging out of relevance. This will result in minor changes to the assignment since they relied on the use of both books and web-based materials. (09/03/2019)</p> |

**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

| <i>Measures</i>   | <i>Results</i>   | <i>Actions</i>  |
|---|--|---|
| <p><b>SL: Clinical evaluation tool - NU 335</b><br/>                     Clinical Evaluation Tool – Professional Behaviors<br/> <b>Target:</b> 100% of students will receive "S" rating for Professional Behavior clinical competencies on clinical evaluation tool.<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> Responsible Parties: BSN Curriculum Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     This is a new measure for 2019-2020. Summer 2019 - Accelerated - 100% (31/31); Summer 2019- Accelerated Hybrid-100% (9/9); Fall 2019 – Accelerated-100% (38/38); Fall 2019 - Traditional: 100% (33/33); Spring 2020: 100% (31/31). (11/23/2020)<br/> <b>Related Documents:</b><br/> <a href="#">Outcome 7 NU335 Final Clinical Evaluation Tool.pdf</a></p> | <p><b>Action:</b> In order for students to continue meet this outcomes, faculty will emphasize the importance of the FOCUS values during clinical orientation. Additionally, students will reminded to the emulate these qualities as well as a professional appearance during their clinical experiences. (11/23/2020)</p> |
| <p><b>SL: Didactic - RN NU 355 Personal Philosophy Paper</b><br/> <b>Target:</b> 100% of students will receive</p>  | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> No<br/>                     This is a new measure for 2019-2020. In Fall 2019, 75% (4/5) of the students achieved at</p>  | <p><b>Action:</b> Will clarify the assignment criteria with the students in order to assist with students meeting this</p>  |

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

**AU Outcome: BSN 7.0 Professional Role**

| <i>Measures</i>  | <i>Results</i>   | <i>Actions</i>  |
|--|--|---|
| at least 75% on personal philosophy paper.<br><b>Timeframe:</b> Annually<br><b>Responsible Parties:</b> Responsible Parties: BSN Curriculum Committee  | least 75% on the personal philosophy paper. (11/23/2020)<br><b>Related Documents:</b><br><a href="#">Outcome 7 NU355 Philosophy Paper.docx</a>   | target. (11/23/2020)  |
| <b>SL: Clinical evaluation tool - NU 491C &amp; NU 492 Clinical Evaluation Tool – Professional Behaviors</b><br><b>Target:</b> 100% of students will receive "S" rating for Professional Behavior clinical competencies on clinical evaluation tool.<br><b>Timeframe:</b> Annually<br><b>Responsible Parties:</b> Responsible Parties: BSN Curriculum Committee  | <b>Reporting Year:</b> 2019 - 2020 (Year 2)<br><b>Target Met:</b> Yes<br>This is a new measure for 2019-2020. Summer 2019: 100% (9/9) NU 491C students received an "S" rating on the clinical evaluation tool for professional behaviors; 100% (24/24) NU 492 students received an "S" rating on the clinical evaluation tool for professional behaviors. Fall 2019: 100% (26/26) NU 492 students received an "S" rating on the clinical evaluation tool for professional behaviors; 100% (15/15) NU 491C students received an "S" rating on the clinical evaluation tool for professional behaviors. Spring 2020: 100% (47/47) NU 491C students received an "S" rating on the clinical evaluation tool for professional behaviors. (11/23/2020)<br><b>Related Documents:</b><br><a href="#">Outcome 7 NU491C &amp; NU492 Final Clinical Evaluation Tool.docx</a>  | <b>Action:</b> To successfully meet the clinical requirements for NU491C and NU 492, students are required to obtain satisfactory ratings on all competencies/behaviors on the clinical evaluation tool. If a student does not receive a satisfactory rating, they will not successfully pass the course, so all students must meet this requirement to satisfy course requirements. Students are instructed each semester about the importance of professional behaviors. (11/23/2020) |
| <b>AD: Survey - Alumni Survey Item:</b><br>How well BSN education prepared you to model the professional role (1= very poorly, 2 = poorly, 3 = well, 4 = very well).<br><b>Target:</b> 75% of respondents will report that their BSN education prepared them well or very well to model the professional role.<br><b>Timeframe:</b> Annually<br><b>Responsible Parties:</b> CIRE, Evaluation & Study Committee | <b>Reporting Year:</b> 2019 - 2020 (Year 2)<br><b>Target Met:</b> Yes<br>100% of 2018-2019 alumni survey respondents (n = 24) reported their BSN education prepared them well (29.17%) or very well (71.83%) 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.<br>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.<br>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.<br>Previous action plan to survey 2018-2019 alumni during 2020, compare responses, and monitor for favorable and unfavorable trends was appropriate. (11/16/2020)<br><b>Related Documents:</b> | <b>Action:</b> Survey 2019-2020 graduates during 2021 and evaluate results for continuation of positive trend in alumni responses. (11/16/2020)   |

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

**AU Outcome: BSN 7.0 Professional Role**

| Measures  | Results   | Actions   |
|---|---|---|
|   | <a href="#">Report 2018-2019 BSN Alumni Survey.pdf</a>  |   |
| <p><b>AD: Survey</b> - 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).<br/> <b>Target:</b> 75% of respondents will report that BSN graduate models the professional role well or very well.<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> CIRE, Evaluation &amp; Study Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     100% of employers of 2018-2019 alumni (n = 11) reported BSN graduate demonstrated the outcome well (18.18%) or very well (81.82%).<br/>                     Results are consistent with previous employer surveys. The target of 75% favorable responses some or most of the time) has been consistently met or exceeded.<br/>                     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.<br/>                     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%).<br/>                     Previous action plan to survey employers of 2018-2019 graduates during 2020, compare responses, and monitor for favorable and unfavorable trends was appropriate. (11/16/2020)<br/> <b>Related Documents:</b><br/> <a href="#">Report Employers of 2018-2019 BSN Alumni.pdf</a></p> | <p><b>Action:</b> Survey employers of 2019-2020 graduates during 2021 and evaluate results for continuation of positive trend in alumni responses. (11/16/2020)</p> |

**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

**Outcome Status:** Active

| Measures  | Results   | Actions   |
|---|---|---|
| <p><b>SL: Summative Evaluation</b> - Assume leadership roles in interprofessional collaboration to improve the health outcomes of individuals, families, and populations<br/><br/> <b>Target:</b> 100% of students achieve an</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> NA<br/>                     Students did not graduate during this reporting year. (09/24/2020)</p> | <p><b>Action:</b> Evaluate results as students complete program. (09/25/2020)</p> |

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

**AU Outcome: DNP 6.0**

| <i>Measures</i>   | <i>Results</i>   | <i>Actions</i>  |
|---|--|---|
| acceptable level (1) on a scale of 0-2<br><b>Timeframe:</b> Annually upon program completion<br><b>Responsible Parties:</b> Assistant Dean, Graduate Nursing /Graduate Curriculum Committee   |  |   |
| <b>SL: Didactic</b> - NU750 Leadership and Collaboration Service-Learning Project assignment<br><b>Target:</b> 100% of students will achieve 80% or higher on the Service-Learning Project assignment<br><b>Timeframe:</b> Each time course is offered<br><b>Responsible Parties:</b> Graduate Curriculum Committee   | <b>Reporting Year:</b> 2019 - 2020 (Year 2)<br><b>Target Met:</b> Yes<br>100% (4/4) students achieved 80% or higher on the Service Learning project assignment. Results are consistent with 2018-2019 academic year when 3 of 3 students (100%) achieved 80% or higher on the Service-Learning project assignment. Faculty included announcements detailing Service Learning project based as a result of the recommendation from the previous academic year (2018-2019) to offer 1-2 synchronous class offerings to discuss course content or course assignments. (09/25/2020)  | <b>Action:</b> In order to continue to meet the target, course faculty will add Panopto and lectures to meet students' needs. Group assignments will be added to facilitate collaboration and learning for the next academic year (2020-2021). (09/25/2020) |
| <b>AD: Survey</b> - 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).<br><b>Target:</b> 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.<br><b>Timeframe:</b> Annually<br><b>Responsible Parties:</b> Evaluation & Study Committee/CIRE | <b>Reporting Year:</b> 2019 - 2020 (Year 2)<br><b>Target Met:</b> Yes<br>Survey of 2018-2019 DNP Alumni: 100% (2/2) respondents reported performing outcome very well (100%). Results are consistent with previous DNP alumni surveys:<br>Survey of 2017-2018 DNP Alumni: One of two respondents reported performing outcome very well.<br>Survey of 2015-2016 and 2016-2017 DNP Alumni: Three of three respondents reported performing outcome very well (100%).<br>2018-2019 action plan to survey 2018-2019 DNP graduates during 2020 and monitor for continuation of positive response trends was appropriate. (09/24/2020)<br><b>Related Documents:</b><br><a href="#">Report 2018-2019 DNP Alumni Survey.pdf</a> | <b>Action:</b> Survey 2019-2020 DNP graduates during 2021 and monitor for continuation of positive response trends. (11/12/2020)  |

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

**AU Outcome: DNP 6.0**

| <i>Measures</i>   | <i>Results</i>   | <i>Actions</i>   |
|---|--|--|
| <p><b>AD: Survey</b> - 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).<br/> <b>Target:</b> 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.<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> Evaluation &amp; Study Committee/CIRE</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     Survey of 2018-2019 DNP Alumni Employers: 100% (2/2) employers reported DNP graduates performed outcome very well (100%). Results are consistent with previous DNP alumni surveys:<br/>                     No responses to the survey of employers of 2017-2018 DNP graduates.<br/>                     Survey of employers of August 2016, May 2017, and August 2017 graduates: 9/9 employers reported DNP graduate performed program outcome well (11.11%) or very well (88.89%).<br/>                     2018-2019 action plan to survey employers of 2018-2019 DNP graduates during 2020 and monitor for continuation of positive response trends was appropriate. (09/24/2020)<br/> <b>Related Documents:</b><br/> <a href="#">Report Employers of 2018-2019 DNP Alumni.pdf</a></p> | <p><b>Action:</b> Survey employers of 2019-2020 DNP graduates during 2021 and monitor for continuation of positive response trends. (11/12/2020)</p> |

**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.

**Outcome Status:** Active

| <i>Measures</i>  | <i>Results</i>   | <i>Actions</i>   |
|--|--|--|
| <p><b>SL: Clinical evaluation tool</b> - Clinical Evaluations-"Safety/Outcomes" criterion<br/> <b>Target:</b> 95% of students achieve an acceptable level (1) on "Safety/Outcomes" criterion on Faculty Clinical Evaluation Tool<br/> <b>Timeframe:</b> Annually</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     Target met with all but NU 605C Fall 2019 (12 of 13, 92%)<br/>                     See attached report - 2019-2020 CAP Summary MSN Outcomes 1,3,7,8<br/><br/>                     Reflection on results and action plan from previous year:<br/>                     Results are consistent with previous reporting year (2018-2019).<br/>                     Measure reviewed with Graduate Curriculum committee and will continue to use.</p> | <p><b>Action:</b> Will review with Curriculum committee October 2020. Course faculty will review preceptor evaluations and/or assess student performance with OSCE simulation experiences. Contact with preceptors and</p> |

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

**AU Outcome: MSN 3.0**

| Measures   | Results   | Actions  |
|--|---|--|
| <p><b>Responsible Parties:</b> MSN Clinical Coordinator / Graduate Curriculum Committee</p>  | <p>(09/14/2020)<br/> <b>Related Documents:</b><br/> <a href="#">2019-2020 CAP Summary MSN Outcomes 1,3,7,8.pdf</a></p>  | <p>students will be maintained throughout the course to evaluate progress toward outcomes. (09/14/2020)</p>  |
| <p><b>AD: Report - Internal</b> - Graduate Project Evaluation Form - Item #3<br/>                     Apply quality principles to promote patient safety and positive outcomes<br/> <b>Target:</b> 100% of students achieve an acceptable level (1) on both paper and presentation<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> Assistant Dean, Graduate Nursing / Graduate Curriculum Committee</p>                                   | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     49 of 49 (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. (12/08/2020)</p>  | <p><b>Action:</b> 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 project proposals. 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. (12/08/2020)</p> |
| <p><b>AD: Survey</b> - 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).<br/> <b>Target:</b> 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.</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     2018-2020 alumni survey respondents (n =16): &gt;90% reported their MSN education prepared them well (5; 31.5%) or very well (11; 68.75%) to apply quality principles to promote patient safety and positive individual and systems outcomes. These results are consistent with previous reporting years.<br/>                     2017-2018 alumni survey respondents (n = 14): &gt; 90% 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.<br/>                     2016-2017 alumni survey respondents (n = 23): 100% 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.<br/>                     2018-2019 action plan to survey 2018-2019 alumni during 2020, compare responses, and</p> | <p><b>Action:</b> Survey 2019-2020 MSN graduates during 2021 and monitor for continuation of positive response trends. (11/14/2020)</p>  |

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

**AU Outcome: MSN 3.0**

| <i>Measures</i>   | <i>Results</i>   | <i>Actions</i>   |
|---|--|--|
| <p><b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> Evaluation &amp; Study Committee</p>   | <p>monitor for favorable and unfavorable trends was appropriate. (11/14/2020)<br/> <b>Related Documents:</b><br/> <a href="#">Report 2018-2019 MSN Alumni Survey.pdf</a></p>   |  |
| <p><b>AD: Survey - MSN Alumni Employer Survey--How well MSN graduates apply quality principles to promote patient safety and positive individual and systems outcomes (very poorly, poorly, well, very well).<br/> <b>Target:</b> 75% of respondents will report MSN graduates apply quality principles to promote patient safety and positive individual and systems outcomes well or very well.<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> Evaluation &amp; Study Committee</b></p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     Employers of 2018-2019 graduates: 100% of employers (n = 10) reported MSN graduates performed this outcome well (10%) or very well (90%). This result is consistent with previous alumni surveys.<br/>                     100% of employers of 2017-2018, 2016-2017, and 2015-2016 graduates reported the MSN program graduates perform this outcome well or very well.<br/>                     2018-2019 action plan to survey employers of 2018-2019 MSN graduates during 2020 and monitor for continuation of positive response trends was appropriate. (11/14/2020)<br/> <b>Related Documents:</b><br/> <a href="#">Report Employers of 2018-2019 MSN Alumni.pdf</a></p> | <p><b>Action:</b> Survey employers of 2019-2020 MSN graduates during 2021 and monitor for continuation of positive response trends. (11/14/2020)</p> |

**AU Outcome: MSNO 7.0**

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

**Outcome Status:** Active

| <i>Measures</i>   | <i>Results</i>   | <i>Actions</i>   |
|---|--|--|
| <p><b>SL: Clinical evaluation tool - Clinical Evaluations-Collaboration Criterion<br/> <b>Target:</b> 95% of students achieve an acceptable level (1) on "Collaboration" criterion on Faculty Clinical Evaluation tool.<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> MSN Clinical Coordinator / Graduate Curriculum Committee</b></p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     Target met with all but NU 605C Fall 2019 (12 of 13, 92%)<br/>                     See attached report - 2019-2020 CAP Summary MSN Outcomes 1,3,7,8<br/><br/>                     Reflection on results and action plan from previous year:<br/>                     Results are consistent with previous reporting year (2018-2019).<br/>                     Measure reviewed with Graduate Curriculum committee and will continue to use. (09/14/2020)<br/> <b>Related Documents:</b></p> | <p><b>Action:</b> Will review with Curriculum committee October 2020. Course faculty will review preceptor evaluations and/or assess student performance with OSCE simulation experiences. Contact with preceptors and students will be maintained throughout the course to evaluate progress toward outcomes.</p> |

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

**AU Outcome: MSNO 7.0**

| Measures   | Results  | Actions  |
|--|--|--|
|  | <a href="#">2019-2020 CAP Summary MSN Outcomes 1,3,7,8.pdf</a>   | (09/14/2020)   |
| <p><b>AD: Report - Internal</b> - Graduate Project Evaluation Form - Item #7 Collaborate within interprofessional teams.</p> <p><b>Target:</b> 100% of students achieve an acceptable level (1) on both paper and presentation</p> <p><b>Timeframe:</b> Annually</p> <p><b>Responsible Parties:</b> Assistant Dean, Graduate Nursing / Graduate Curriculum Committee</p>   | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> <p><b>Target Met:</b> Yes</p> <p>49 of 49 (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. (12/08/2020)</p>  | <p><b>Action:</b> 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 project proposals. 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. (12/08/2020)</p> |
| <p><b>AD: Survey</b> - MSN Alumni Survey-- How well MSN graduates perceive that their MSN education prepared them to collaborate within inter-professional teams to manage and improve health care services for individuals, families and populations (very poorly, poorly, well, very well).</p> <p><b>Target:</b> 75% of respondents will report feeling well or very well prepared to collaborate within inter-professional teams to manage and improve health care services for individuals, families and populations.</p> <p><b>Timeframe:</b> Annually</p> <p><b>Responsible Parties:</b> Evaluation &amp;</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> <p><b>Target Met:</b> Yes</p> <p>2017-2018 alumni survey respondents (n = 16): &gt; 90% reported their MSN education prepared them well (25%) or very well (28.57%) to collaborate within inter-professional teams to manage and improve health care services for individuals, families and populations. 1 reported "poorly." Results are consistent with previous reporting years.</p> <p>2017-2018 alumni survey respondents (n = 14): &gt; 85% reported their MSN education prepared them well (57.14%) or very well (68.75%) to collaborate within inter-professional teams to manage and improve health care services for individuals, families and populations.</p> <p>2016-2017 alumni survey respondents (n = 23): &gt;90% 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.</p> <p>2018-2019 action plan to survey 2018-2019 alumni during 2020, compare responses, and monitor for favorable and unfavorable trends was appropriate. (11/14/2020)</p> <p><b>Related Documents:</b></p> <p><a href="#">Report 2018-2019 MSN Alumni Survey.pdf</a></p> | <p><b>Action:</b> Survey 2019-2020 MSN graduates during 2021 and monitor for continuation of positive response trends. (11/14/2020)</p>  |

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

**AU Outcome: MSNO 7.0**

| <i>Measures</i>  | <i>Results</i>   | <i>Actions</i>   |
|--|--|--|
| Study Committee  |  |  |
| <p><b>AD: Survey</b> - MSN Alumni Employer Survey--How 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).<br/> <b>Target:</b> 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.<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> Evaluation &amp; Study Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     Employers of 2018-2019 graduates (n = 10): 100% reported graduates perform outcome well (10%) or very well (90%).<br/>                     These results and the results of previous employer surveys indicate employers' perceptions of the Allen College MSN graduate consistently meet or exceed the target.<br/>                     Employers of 2015-2016, 2016-2017, and 2017-2018 graduates: 100% of employers reported the MSN program graduate performs this outcome well or very well .<br/>                     2018-2019 action plan to survey employers of 2018-2019 MSN graduates during 2020 and monitor for continuation of positive response trends was appropriate. (11/14/2020)<br/> <b>Related Documents:</b><br/> <a href="#">Report Employers of 2018-2019 MSN Alumni.pdf</a></p> | <p><b>Action:</b> Survey employers of 2019-2020 MSN graduates during 2021 and monitor for continuation of positive response trends. (11/14/2020)</p> |

**Program (Nursing) - Post-Graduate Certificate APRN**

**AU Outcome: PGC 2.0**

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

**Outcome Status:** Active

| <i>Measures</i>  | <i>Results</i>   | <i>Actions</i>   |
|--|--|--|
| <p><b>SL: Clinical evaluation tool</b> - Clinical evaluation tool Clinical Evaluations- "Safety Outcomes" criterion<br/> <b>Target:</b> 95% of students achieve an acceptable level on</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     This is the first academic year for the measure. No previous results to compare or action plan to evaluate.<br/>                     Target met - See attached report- 2019-2020 CAP Summary PGC Outcomes 1, 2, 3, 4</p> | <p><b>Action:</b> New measure - Will review with Curriculum committee October 2020.<br/>                     Course faculty will review preceptor evaluations and/or</p> |

**Program (Nursing) - Post-Graduate Certificate APRN**

**AU Outcome: PGC 2.0**

| <i>Measures</i>  | <i>Results</i>   | <i>Actions</i>   |
|--|--|--|
| <p>“Safety/Outcomes” criterion on Faculty Clinical Evaluation Tool.<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> Director MSN Program / Graduate Curriculum Committee</p>  | <p>(09/21/2020)<br/> <b>Related Documents:</b><br/> <a href="#">2019-2020 CAP Summary PGC Outcomes 1,2,3,4.pdf</a></p>   | <p>assess student performance with OSCE simulation experiences. Contact with preceptors and students will be maintained throughout the course to evaluate progress toward outcomes. (09/21/2020)</p> |
| <p><b>AD: Survey</b> - 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).<br/> <b>Target:</b> 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.<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> Evaluation &amp; Study Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     2018-2019 graduates: 100% of graduates reported their MSN education prepared them very well to demonstrate this outcome.<br/>                     There are no previous results to compare. There is no previous action plan to evaluate. (11/15/2020)<br/> <b>Related Documents:</b><br/> <a href="#">Report 2018-2019 PGC Alumni Survey.pdf</a></p>      | <p><b>Action:</b> Survey employers of 2019-2020 MSN-PGC graduates during 2021 and monitor for response trends. (11/15/2020)</p>  |
| <p><b>AD: Survey</b> - MSN Alumni Employer Survey--How well MSN graduates apply quality principles to promote patient safety and positive individual and systems outcomes (very poorly, poorly, well, very well).<br/> <b>Target:</b> 75% of respondents will report MSN graduates apply quality</p>   | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     Survey of employers of 2018-2019 graduates: 100% of employers reported the MSN-PGC graduate performs this outcome well.<br/>                     There are no previous results to compare. There is no previous action plan to evaluate. (11/15/2020)<br/> <b>Related Documents:</b><br/> <a href="#">Report Employers of 2018-2019 PGC Alumni.pdf</a></p> | <p><b>Action:</b> Survey employers of 2019-2020 MSN-PGC graduates during 2021 and monitor for response trends. (11/15/2020)</p>  |

**Program (Nursing) - Post-Graduate Certificate APRN**

**AU Outcome: PGC 2.0**

| <i>Measures</i>  | <i>Results</i> | <i>Actions</i> |
|--|----------------|----------------|
| principles to promote patient safety and positive individual and systems outcomes well or very well.<br><b>Timeframe:</b> Annually<br><b>Responsible Parties:</b> Evaluation & Study Committee |                |                |

**AU Outcome: PGC 3.0**

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

**Outcome Status:** Active

| <i>Measures</i>  | <i>Results</i>   | <i>Actions</i>  |
|--|--|---|
| <b>SL: Clinical evaluation tool</b> - Clinical evaluation tool Clinical Evaluations- "Collaboration" criterion<br><b>Target:</b> 95% of students achieve an acceptable level on "Collaboration" criterion on Faculty Clinical Evaluation Tool.<br><b>Timeframe:</b> Annually<br><b>Responsible Parties:</b> Director MSN Program / Graduate Curriculum Committee | <b>Reporting Year:</b> 2019 - 2020 (Year 2)<br><b>Target Met:</b> Yes<br>This is the first academic year for the measure. No previous results to compare or action plan to evaluate.<br>Target met - See 2019-2020 CAP Summary PGC Outcomes 1, 2, 3, 4 (09/21/2020)<br><b>Related Documents:</b><br><a href="#">2019-2020 CAP Summary PGC Outcomes 1,2 3, 4.pdf</a>                              | <b>Action:</b> New measure - Will review with Curriculum committee October 2020.<br>Course faculty will review preceptor evaluations and/or assess student performance with OSCE simulation experiences. Contact with preceptors and students will be maintained throughout the course to evaluate progress toward outcomes. (09/21/2020) |
| <b>AD: Survey</b> - MSN Alumni Survey-- How well MSN graduates perceive that their MSN education prepared them to collaborate within inter-professional teams to manage and improve health care services for individuals, families and populations (very poorly, poorly, well, very well).   | <b>Reporting Year:</b> 2019 - 2020 (Year 2)<br><b>Target Met:</b> Yes<br>2018-2019 graduates. 100% of graduates reported their MSN education prepared them very well to demonstrate this outcome.<br>There are no previous results to compare. There is no previous action plan to evaluate. (11/15/2020)<br><b>Related Documents:</b><br><a href="#">Report 2018-2019 PGC Alumni Survey.pdf</a> | <b>Action:</b> Survey employers of 2019-2020 MSN-PGC graduates during 2021 and monitor for response trends. (11/15/2020)  |

**Program (Nursing) - Post-Graduate Certificate APRN**

**AU Outcome: PGC 3.0**

| <i>Measures</i>   | <i>Results</i>  | <i>Actions</i>  |
|---|---|---|
| <p><b>Target:</b> 75% of respondents will report feeling well or very well prepared to collaborate within inter-professional teams to manage and improve health care services for individuals, families and populations.<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> Evaluation &amp; Study Committee</p>  |   |   |
| <p><b>AD: Survey</b> - MSN Alumni Employer Survey--How well employers perceive that MSN graduates collaborate within interprofessional teams to manage and improve health care services for individuals, families and populations (very poorly, poorly, well, very well).<br/> <b>Target:</b> 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.<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> Evaluation &amp; Study Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     Survey of employers of 2018-2019 graduates: 100% of employers reported the MSN-PGC graduate performs this outcome very well.<br/>                     There are no previous results to compare. There is no previous action plan to evaluate. (11/15/2020)<br/> <b>Related Documents:</b><br/> <a href="#">Report Employers of 2018-2019 PGC Alumni.pdf</a></p> | <p><b>Action:</b> Survey employers of 2019-2020 MSN-PGC graduates during 2021 and monitor for response trends. (11/15/2020)</p> |

College Goal 5 - Allen College is committed to adopting management practices that demonstrate outstanding stewardship of all resources to our constituents.

**Admin - Administration**

**AU Outcome: Admin 1.0**

Remain a fiscally sound institution

**Outcome Status:** Active

| <i>Measures</i>   | <i>Results</i>  | <i>Actions</i>   |
|---|---|--|
| <p><b>AD: Report - Internal</b> - Grant proposal writer’s record of submissions<br/> <b>Target:</b> Maintain the minimum number of applications submitted at 20 while increasing the total dollar value of approved grants<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> President</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>           For the reporting year 2019-2020, Allen College submitted a total of 20 grants that had a cumulative value of \$359,500. Twenty-two grant applications were prepared but two were retracted due to the cancellation of Summer Nurse and Health Careers camp by the SARS-CoV-2 pandemic. The grant activity in 2019-2020 compares favorably to 2018-2019 which saw a total of 17 grant submissions with a combined total of \$280,322. As mentioned in the 2018 action plan, the quality of grants is more appropriate to evaluate than the quantity. In 2019-2020, some grants were not available due to the pandemic, but other opportunities did present for pursuit. Overall, the 2019-2020 grant cycle was one of the most successful in the history of Allen College. (01/25/2021)<br/> <b>Related Documents:</b><br/> <a href="#">2019-2020 Grants Annual Report.pdf</a><br/> <a href="#">2019-2020 Grant Annual Report</a></p> | <p><b>Action:</b> The College President and The College's Grant Writer will continue to collaborate on grants to pursue in 2020-2021. It is critical to engage appropriate faculty and staff on grant opportunities to ensure the grant ask is appropriate for the College's needs. Additionally, the faculty/staff are important contributors of information to the Grant Writer in preparing the application. It is recommended not to pursue any grants for which a campus need is not being met nor available faculty/staff support is not available. (01/25/2021)</p> |
| <p><b>AD: Report - Internal</b> - Allen foundation record of scholarships<br/> <b>Target:</b> Annual increase in number of endowed scholarships<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> Administrative Assistant to the President</p>  | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>           Four new endowed scholarships and one new grant scholarship that is not endowed was established in 2019-2020. The endowed scholarships will be awarded when they have had time to mature. Five endowed scholarships that were created during another academic year showed financial investment income and were awarded for the first time in 2019-2020. Five new endowed scholarships were established in 2018-2019. Even though 2019-2020 generated one less endowed scholarship compared to the previous year, the establishment of four new endowed scholarships is considered a successful measurement. As indicated in the 2018-2019 action plan, the College President and the Allen Foundation staff worked diligently on securing new donors for the 2019-2020 academic year. (08/31/2020)</p>  | <p><b>Action:</b> The College president and Foundation staff seek to increase scholarship support and establish new endowed scholarships to help assist students with the rising cost of education. Because of the ongoing SARS-CoV-2 pandemic, alternative measures to meet with donors will be explored to ensure continued success for this metric in 2020-2021. (08/31/2020)</p>   |

College Goal 5 - Allen College is committed to adopting management practices that demonstrate outstanding stewardship of all resources to our constituents.

## Admin - Administration

### AU Outcome: Admin 1.0

| Measures   | Results  | Actions   |
|--|--|---|
| <p><b>AD: Report - External</b> - Iowa Student Aid Commission data used to compare Allen college tuition and fees to tuition and fees of other comparable private institutions</p> <p><b>Target:</b> Allen College is among the least expensive private colleges offering pre-licensure BSN programs.</p> <p><b>Timeframe:</b> Annually</p> <p><b>Responsible Parties:</b> DOBAS</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> <p><b>Target Met:</b> Yes</p> <p>Our action plan for 2018-19 was successful based on the information gathered for the 2020 budget process, Allen College remains among the least expenses private colleges in Iowa offering pre-licensure BSN programs. Please see attached chart which is for 2019-20, which shows us as third out of fourteen for all and second out of thirteen when excluding the state institution. There is no change in the results compared to 2018-2019 as Allen College was third out of fourteen for all and second out of thirteen when excluding the state institution last year as well. Allen College remains competitive with tuition and fees and the Board of Trustees approves any increases on an annual basis. In 2019-2020, the Board approved a 1% increase in tuition and fees, which is the lost increase over the last 5 academic years. The tuition increase is a data-driven decision each year and our action item from 2018-2019 on monitoring other institutions' tuition and fees to inform the decision. (09/09/2020)</p> <p><b>Related Documents:</b><br/> <a href="#">Tuition and fees 2019-20.pdf</a></p> | <p><b>Action:</b> We continue to be a tuition driven institution, therefore we will continue to monitor tuition and fees to and reduce expenses when feasible to keep Allen College competitively affordable for current and prospective students. Significant changes to tuition and fee structures are occurring at other Iowa private colleges (e.g., Central College and Mercy College of Health Sciences both completely changed their structure during 2019-2020) so Allen College will need to remain diligent in monitoring price competitiveness. (09/09/2020)</p> |
| <p><b>AD: Report - Internal</b> - Allen College balance sheet: Compare December 31 of current year to prior year.</p> <p><b>Target:</b> Annual increase in College's endowment</p> <p><b>Timeframe:</b> Annually</p> <p><b>Responsible Parties:</b> DOBAS</p>  | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> <p><b>Target Met:</b> Yes</p> <p>Upon review of the December 31, 2019 balance sheet, the permanently restricted assets represent non-spendable net asset balances, which is account 2540-10000-33000-0000, and primarily represents scholarship endowments. Our action to continue to increase fund was successful as this account increased from \$7,457,276 as 12/31/18 to \$7,880,114 as of 12/31/19, which is an increase of 5.7%. The change in beneficial interest (2540-10000-33000-1000) represents market fluctuation which decreased from the prior year by \$297,823 or 70.4%, however the total permanently restricted net assets (both accounts) still increased between 2018 and 2019 by \$125,015 or 1.6%. The percent increase does reflect the efforts of the College Leadership and the Foundation staff who work diligently to identify donors and funding sources (e.g., large grants and estate gifts) to increase the College's permanently restricted endowment. (09/09/2020)</p> <p><b>Related Documents:</b><br/> <a href="#">12-31-19 AC Balance Sheet.pdf</a></p>  | <p><b>Action:</b> The college and foundation will continue to raise funds for permanently and temporarily restricted net assets for the benefit of the college and its students. The methods for meeting with donors and securing this funding will need to be evaluated depending on the continuation of the SARS-CoV-2 pandemic and the challenges associated with face-to-face meetings with donors. Additionally, the pandemic has caused a deterioration of the stock market which affects the</p>   |

College Goal 5 - Allen College is committed to adopting management practices that demonstrate outstanding stewardship of all resources to our constituents.

## Admin - Administration

### AU Outcome: Admin 1.0

| Measures  | Results  | Actions  |
|---|--|--|
|   |  | permanently restricted funds. The College will need to work to secure additional funds to offset the market-induced losses in these funds. (09/21/2020)  |
| <p><b>AD: Report - Internal</b> - Projected credit hours compared to actual credit hours.</p> <p><b>Target:</b> Actual credit hours meet or exceed projected credits hours annually.</p> <p><b>Timeframe:</b> Annually</p> <p><b>Responsible Parties:</b> Dean of Student Services &amp; DOBAS</p>  | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> <p><b>Target Met:</b> No</p> <p>We did use existing enrollment forecast for 2019 budget due to trends, however we did not reach our goal and will continue to look at trends and attrition to budget credit hours accordingly. During the 2019 calendar year, 15,527 actual credit hours were taught compared to 15,650 budgeted credit hours. The actual credit hours compare favorably to the 2018 actual credit hours from 2018 of 15,378 and budgeted credit hours from 2018 of This is mainly due to decreases in MSN credit hours for 2019 compared to what was budgeted. Additionally, several smaller programs did not attain their budgeted credit hour goals. Our total credit hours increased from 2018 to 2019 from 15,378 to 15,527. The budget for credit hours was developed as described in the 2018 action plan by using historical data and forecasting with the data from 2018 being incorporated in future forecasting modeling. (09/09/2020)</p> <p><b>Related Documents:</b><br/> <a href="#">Credit Hours 12-31-19.pdf</a></p> | <p><b>Action:</b> For budget for the 2020 calendar year, adjustments were made to the enrollment forecasting template used to project credit hours. Even though the credit hour projection is an estimate based on student plans of study, attrition is difficult to predict in the various programs, as is final number of incoming students in new and smaller programs. We will continue to monitor credit hour trends and budget accordingly. (09/09/2020)</p> |
| <p><b>AD: Report - Internal</b> - Allen College year end income statement year-end income statement: Actual performance compared to budget performance</p> <p><b>Target:</b> Allen College's annual actual operating margin percentage meets or exceeds its annual budgeted operating margin percentage.</p> <p><b>Timeframe:</b> Annually</p> <p><b>Responsible Parties:</b> DOBAS</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> <p><b>Target Met:</b> Yes</p> <p>We budgeted a 7.9% operating margin for 2019 but we ended 2019 with a 13.7% operating margin due to our action plan being successful and using mitigation when credit hours don't come in for our budgeted revenue. We came in \$747,057 better than budget for the year. Our operating margin dropped slightly from 2018 14.4% to 13.7% operating margin. These figures compare favorably to 2018 which ended with an operating margin of 14.4% on a budgeted margin of 5.2% (or \$1,158,870 better than budget). Even though the actual dollar value was less in 2019 vs. 2018, the operating margin was higher, thus a favorable indicator. We did implement mitigation measures in 2019 as prescribed by the 2018 action plan. (09/09/2020)</p>  | <p><b>Action:</b> We continue to use actual financials to come up with an starting budget for the following year. When revenue targets are not met, mitigation takes place to reduce our expenses so that we meet budget targets. (09/21/2020)</p>   |

College Goal 5 - Allen College is committed to adopting management practices that demonstrate outstanding stewardship of all resources to our constituents.

### Admin - Administration

#### AU Outcome: Admin 1.0

| Measures | Results  | Actions |
|----------|--|---------|
|          | <b>Related Documents:</b><br><a href="#">Income Statement December 2019.xlsx</a> |         |

#### AU Outcome: Admin 3.0

College receives external monetary contributions in the form of grants, scholarships, and gifts

**Outcome Status:** Active

| Measures  | Results  | Actions   |
|---|--|---|
| <b>AD: Report - Internal</b> - Internal Total Donations to College for Year<br><b>Target:</b> Amount of monetary donations increase.<br><b>Timeframe:</b> Annually<br><b>Responsible Parties:</b> President | <b>Reporting Year:</b> 2019 - 2020 (Year 2)<br><b>Target Met:</b> No<br>The total contributions for 2019-2020 fell short of 2018-2019 by \$2,431.90 (\$728,44.27 in 2019 vs. \$730,876.17 in 2018) mainly due to the successful closure of a major capital campaign. The For Allen For You Campaign included the Gerard Hall campaign to raise funds for office renovations.<br><br>June 1, 2019 – May 31, 2020: Allen College received the following gifts:<br>Cash: \$313,726.42<br>Gift-in-Kind: \$4,065.08<br>Pledges: \$410,181.82<br>Stock/Property: \$470.95<br>Other:<br>Total: \$728,444.27<br><br>The 2018 action plan identified the foundation and College President to continue to work towards successfully meeting this goal. Even with the conclusion of the For Allen For You Campaign, 2019-2020 was a successful year in terms of monetary donations to the College. (09/15/2020) | <b>Action:</b> For 2020-2021, the Foundation staff and College President will need to identify alternative ways to reach donors. The SARS-CoV-2 pandemic has significantly affected how donors are handled. Even though totals for the year were just under totals for the prior year, significant concerns exist about securing donor funds. One new program being launched which will require donor funds is the Allen Legacy Program. (09/15/2020) |

#### AU Outcome: Admin 4.0

Allen College has appropriate technology for facilities, resources, and education services.

**Outcome Status:** Active

College Goal 5 - Allen College is committed to adopting management practices that demonstrate outstanding stewardship of all resources to our constituents.

## Admin - Administration

### AU Outcome: Admin 4.0

| Measures  | Results   | Actions  |
|---|---|--|
| <p><b>AD: Report - Internal</b> - Number of FTEs allocated for instructional technology, media services, and, instructional, designer.</p> <p><b>Target:</b> College provides at least 2.0 FTEs to support faculty technology needs.</p> <p><b>Timeframe:</b> Annually</p> <p><b>Responsible Parties:</b> DOBAS</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> <p><b>Target Met:</b> Yes</p> <p>The college currently has 3.0 full time equivalents (FTEs) to support the college technology needs which meets the target of 2 FTEs. Two are specifically instructional technology, one is an instructional designer and the other an AV specialist, and both are supervised by the Provost. There is one SIS coordinator that writes scripts for our student information system, CAMS who is supervised by the Executive Director of Business &amp; Finance. The SIS Coordinator also assists with behind the scenes scripts as needed for Blackboard. In 2018-19 total FTEs were 3.0. For 2019-20, the Provost completed the action recommended in the 2018-2019 plan of reviewing the instructional design and AV work volume and did not have sufficient need to request additional personnel for the upcoming 2021 calendar year. The Executive Director of Business &amp; Finance concurs with this assessment of sufficient college technology personnel given the workload of the SIS Coordinator as well. (11/11/2020)</p> | <p><b>Action:</b> Monitor work load of current technology staff and review prior to budget cycle 2022 and budget additional staff for calendar year 2022 if deemed necessary. (11/11/2020)</p> |
| <p><b>AD: Report - Internal</b> - Number of major requests by Allen College for hardware-software</p> <p><b>Target:</b> 50% of requests approved</p> <p><b>Timeframe:</b> Annually</p> <p><b>Responsible Parties:</b> DOBAS</p>   | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> <p><b>Target Met:</b> Yes</p> <p>21/21 hardware/software request forms were approved for the 2019-20 academic year. This is 100%. When compared to the number of hardware/software requests for 2017-18, this is a 10.5% increase, which is consistent with prior year requests given the low volume. The results when compared to 2017-18 remained the same at 100%. Both years are still over the 50% approval target. (11/11/2020)</p>  | <p><b>Action:</b> Centralize hardware/software ticket entry through the SIS Coordinator, and review college IT compliance committee work and how it relates to this measure. (11/11/2020)</p>  |

### AU Outcome: Admin 6.0

Financial Aid policies and processes are fair and timely

**Outcome Status:** Active

| Measures   | Results   | Actions   |
|--|---|---|
| <p><b>AD: Survey</b> - Allen College Student Opinion Survey-Satisfaction with Financial aid services</p> <p><b>Target:</b> 80% of students report satisfied or very satisfied on questions</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> <p><b>Target Met:</b> Yes</p> <p>86.9% of the student respondents were satisfied (62.07%) or very satisfied (24.83%) with financial services. This was an increase of 11.22% from the last survey given in 2017-18 where 75.68% of the students reported being satisfied or very satisfied with their financial services. The action plan was for staff to stay current on regulations and continue to advise students</p> | <p><b>Action:</b> Continue to assign net learning module regarding financial aid and billing, continue to send/email letter explaining financial aid process prior to</p> |

College Goal 5 - Allen College is committed to adopting management practices that demonstrate outstanding stewardship of all resources to our constituents.

## Admin - Administration

### AU Outcome: Admin 6.0

| Measures   | Results   | Actions  |
|--|---|--|
| <p><b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> Financial Aid</p>   | <p>on their financial options while providing a financial literacy course. The financial literacy course offered was changed from Cashcourse to Dave Ramsey's Financial Institute and these actions were followed through with leading to the successful increase of 11.22%.<br/>                     (09/25/2020)</p>  | <p>orientation and continue to assign and provide the financial literacy course through Dave Ramsey.<br/>                     (09/25/2020)</p>   |
| <p><b>AD: Survey</b> - Allen College Student Opinion Survey-Access to Financial Aid Information<br/> <b>Target:</b> 80% of students report satisfied or very satisfied on questions<br/> <b>Timeframe:</b> Annually<br/> <b>Responsible Parties:</b> Financial Aid</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     84.7% of the student respondents were satisfied (62.35%) or very satisfied (22.35%) with their access to financial aid services. This was an increase of 3.23% from the last survey given in 2017-18 where 81.47% of the students reported being satisfied or very satisfied with their access to financial aid services. The action plan was for staff to be present at orientations, provide financial services while maintaining current knowledge of regulations and provide communication via students' preferences which proved successful with a 3.23% increase.<br/>                     (09/25/2020)</p> | <p><b>Action:</b> Continue to have popcorn/informational days to communicate options and deadlines and provide staff for financial aid services. Keep current with federal regulations and student communication preferences. (09/25/2020)</p> |

## Admin - Diversity and Inclusion Services

### 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 . . .)

**Outcome Status:** Active

| Measures  | Results   | Actions   |
|---|---|---|
| <p><b>AD: Report - Internal</b> - Academic Enrichment Assessment (i.e., report of enrichment offerings such as student success seminars, one-to-one mentoring, peer to peer mentoring)<br/> <b>Target:</b> Offer at least 6 success activities per academic year (e.g.,</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> No<br/>                     As a result of the 2018-2019 action plan, it was recommended for the D&amp;I Committee to find an alternative to the "Chew and Chat" sessions which were sparsely attended. The Committee developed a new event entitled "International Coffee Hour" which was held 3 times over the course of the 2019-2020 academic year. These events were very well attended with an average of 30 attendees at each event. Additional sessions were planned for the spring 2020 semester but they were cancelled due to the SARS-CoV-2 pandemic. Even</p> | <p><b>Action:</b> It is recommended for the D&amp;I Committee to continue to develop the International Coffee Hour program but determine a manner to continue to reach students in a virtual format due to the ongoing SARS-CoV-2 pandemic. It is still recommended to have 6</p> |

College Goal 5 - Allen College is committed to adopting management practices that demonstrate outstanding stewardship of all resources to our constituents.

## Admin - Diversity and Inclusion Services

### AU Outcome: DIS 4.0

| Measures   | Results   | Actions  |
|--|---|--|
| Chew and Chat, Success Seminars).<br><b>Timeframe:</b> Year 2<br><b>Responsible Parties:</b> DIS Coordinator | though this measurement fell short of the results from the previous reporting period, the introduction of the International Coffee Hour was deemed a success because of the attendance and it reached a larger audience than did the "Chew and Chats." (01/25/2021) | formal events for students during the next reporting cycle but to not be locked into a face-to-face format. (01/25/2021) |

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

### AU Outcome: ASR 1.1

Students will practice proper radiation protection

**Outcome Status:** Active

| Measures   | Results   | Actions  |
|--|---|--|
| <b>SL: Clinical evaluation tool</b> - RA: 135<br>Competency Testing/CCE Part II, numbers 5, 7, 9, 15, 17<br><b>Target:</b> Average score of >= 3 (0-4 pt. scale)<br><b>Timeframe:</b> Level 1-Fall Semester<br><b>Responsible Parties:</b> Lab Instructor/ Program Faculty/ Health Sciences(HS) Faculty Org. Committee | <b>Reporting Year:</b> 2019 - 2020 (Year 2)<br><b>Target Met:</b> Yes<br>2019 = 3.91 (n=19)<br>Previous data:<br>2018 = 3.90 (n=13)<br>2017=3.97(n=14)<br>2016 = 3.89 (n=13)<br>2015 = 3.95 (n=16)<br>2014 = 3.97 (n=17)<br>The action plan from the 2018-2019 was effective for 2019-2020 as the instructors continued to have students practice radiation protection in each lab and in the clinical settings with each new cohort. A slight increase of .01 in 2019 from 2018 results. Students demonstrate clinical competence by applying proper radiation protection. A variety of radiation protection practices and principles are emphasized throughout the curriculum and students continue to evidence the application of this knowledge in the clinical setting. (07/21/2020) | <b>Action:</b> 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. (07/21/2020) |
| <b>SL: Clinical evaluation tool</b> - RA: 275<br>Final Clinical Competency Testing/ CCE Part II, numbers 5,7,9,15,17   | <b>Reporting Year:</b> 2019 - 2020 (Year 2)<br><b>Target Met:</b> NA<br>2020 no data to assess, this program requirement was waived for this cohort due to COVID-   | <b>Action:</b> Assessment of this measure tool will resume for the Sp21 cohort. (07/21/2020)   |

College Goal 5 - Allen College is committed to adopting management practices that demonstrate outstanding stewardship of all resources to our constituents.

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

**AU Outcome: ASR 1.1**

| <i>Measures</i>  | <i>Results</i>  | <i>Actions</i> |
|--|---|----------------|
| <p><b>Target:</b> Average score of &gt;= 3 (0-4 pt. scale)<br/> <b>Timeframe:</b> Level II-Spring Semester<br/> <b>Responsible Parties:</b> Clinical Instructors/Program Faculty/HS Curriculum Committee</p> | <p>19.<br/>                     Previous data:<br/>                     2019 = 4 (n=12)<br/>                     2018 = 3.96 (n=12)<br/>                     2017 = 3.96 (n=15)<br/>                     2016=3.96 (n=17)<br/>                     2015=3.96 (n=15)<br/>                     (07/21/2020)</p> |                |

**AU Outcome: ASR 1.2**

Students will apply correct positioning skills

**Outcome Status:** Active

| <i>Measures</i>  | <i>Results</i>   | <i>Actions</i>   |
|--|--|--|
| <p><b>SL: Didactic - RA:</b> 145 Certification Testing/<br/>                     Part I, numbers 3,12,14,15<br/> <b>Target:</b> Average score of &gt;= 3. (0-4 pt. scale)<br/> <b>Timeframe:</b> Level I-Spring Semester<br/> <b>Responsible Parties:</b> Clinical Instructors/ Program Faculty/ HS Curriculum Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     2020 = 3.92 (n=16)<br/>                     2019 = 3.88 (n=13)<br/>                     2018 = 3.86 (n=14)<br/>                     2017 = 4 (n=12)<br/>                     2016 = 3.96 (n=16)<br/>                     2015=3.79 (n=17)<br/>                     2014=3.86 (n=15)<br/>                     The action plan from the 2018-2019 for 2019-2020 was successful to use the assessment of certification testing at various clinical sites and with different clinical instructors. A slight increase of .04 in 2019 from 2018 results. Students continue to exceed target. The one item that received some point deductions was line 15. This item refers to the student performing the exam without assistance from the instructor and only one exam performed by one student received a 2 "below average" on this item. Overall, the students overwhelming demonstrated the ability to apply correct positioning skills and apply knowledge of positioning in relation to their in the program. (08/26/2020)</p> | <p><b>Action:</b> Course instructors recommend continuing to assess this item since certification testing is completed at various clinical sites and with different clinical instructors. To continue to meet or exceed this target/benchmark for this measure during the 2020-2021 academic year, the clinical instructors/preceptors and faculty will provide the students the instruction and supervision to apply correct positioning skills. (08/26/2020)</p> |
| <p><b>SL: Didactic - RA:</b> 265 Certification</p>   |  |  |

College Goal 5 - Allen College is committed to adopting management practices that demonstrate outstanding stewardship of all resources to our constituents.

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

**AU Outcome: ASR 1.2**

| <i>Measures</i>   | <i>Results</i>   | <i>Actions</i>  |
|---|--|---|
| <p>Testing/Part I, numbers 3,12,14,15</p> <p><b>Target:</b> Average score of &gt;= 3. (0-4 pt. scale)</p> <p><b>Timeframe:</b> Level II-Fall Semester</p> <p><b>Responsible Parties:</b> Clinical Instructors/ Program Faculty/ HS Curriculum Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> <p><b>Target Met:</b> Yes</p> <p>2019 = 3.9 (n= 10)</p> <p>Previous data:</p> <p>2018=3.95 (n=12)</p> <p>2017=3.90 (n=12)</p> <p>2016=3.97 (n=15)</p> <p>2015=3.99 (n=17)</p> <p>2014= 3.96 (n=15)</p> <p>The action plan for the 2018-2019 was effective as the instructors continued to assess the students' positioning skills on more advanced procedures appropriate to their level in the program. The target of 3.0 was exceeded to achieve a 3.9. This is the second cohort that excluded some basic level 1 exams and encouraged the clinical instructors to select from more advanced and challenging exams. The procedural exam difficulty correlates with the student's level in the program and students continue to demonstrate clinical competence by applying correct positioning skills on these more advanced procedures. Students are well prepared in the classroom and lab which permits success in the clinical setting. (07/21/2020)</p> | <p><b>Action:</b> To continue to exceed this target for the 2020-2021 year, the faculty will communicate to the clinical instructors to select from more advanced and challenging exams to correlate with the student's level in the program. Faculty will continue to provide effective instruction in the classroom and lab which permits success in the clinical setting. (07/21/2020)</p> |

**AU Outcome: ASR 2.1**

Students will demonstrate effective communication skills in the clinical setting

**Outcome Status:** Active

| <i>Measures</i>  | <i>Results</i>   | <i>Actions</i>  |
|--|--|---|
| <p><b>SL: Clinical evaluation tool - RA:135</b><br/>Clinical Instructor/ Preceptor Evaluations/<br/>Numbers 3, 6, 10,11</p> <p><b>Target:</b> Average score &gt;= 3.5 (0-4 pt. scale)</p> <p><b>Timeframe:</b> Level I-Fall Semester</p> <p><b>Responsible Parties:</b> Clinical</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> <p><b>Target Met:</b> Yes</p> <p>2019 3.47 (n=19)</p> <p>Previous data:</p> <p>2018 3.67 (n=13)</p> <p>2017 3.68 (n=14)</p> <p>2016 3.56 (n=13)</p> <p>2015 3.81 (n=16)</p> | <p><b>Action:</b> To continue to meet or exceed the target/benchmark for this measure during the 2020-2021 academic year, the clinical instructors/preceptors will deliver prompt feedback to students when issues arise concerning patient care and interpersonal relationships. Faculty continue to discuss and</p> |

College Goal 5 - Allen College is committed to adopting management practices that demonstrate outstanding stewardship of all resources to our constituents.

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

**AU Outcome: ASR 2.1**

| <i>Measures</i>  | <i>Results</i>   | <i>Actions</i>   |
|--|--|--|
| <p>Instructors/ Program Faculty/ HS Curriculum Committee</p>   | <p>The action plan from the 2018-2019 was effective for the 2019-2020 as the student evaluations are completed on Trajecsys by the clinical instructors. This allowed the students to have immediate access to the completed evaluations on Trajecsys. The students' average scores decreased in all areas of the performance criteria; patient care, interpersonal relationships, multicultural diversity and age appropriate care. Some of the comments on the evaluations were; there is room for improvement when it comes to communication with patient and assessing the patient's condition, student has difficulty working with patients of varying ages.<br/>(07/21/2020)</p>   | <p>review the correct way to communicate with the patient and fellow students, technologists and radiologists. (07/21/2020)</p>  |
| <p><b>SL: Clinical evaluation tool - RA:275</b><br/>Clinical Instructor/ Preceptor Evaluations/Numbers 3, 6,10,11</p> <p><b>Target:</b> Average score &gt;= 3 (0-4 pt. scale)</p> <p><b>Timeframe:</b> Level II -Spring Semester</p> <p><b>Responsible Parties:</b> Clinical Instructors/ Program Faculty/ HS Curriculum Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> <p><b>Target Met:</b> Yes</p> <p>2019-2020 3.86 (n=10)</p> <p>Previous data:</p> <p>2018-2019 3.9 (n=12)</p> <p>2017-2018 3.78 (n=12)</p> <p>2016-2017 3.95 (n=15)</p> <p>2015-2016 3.97 (n=17)</p> <p>The action plan from the 2018-2019 was successful for 2019-2020 as the clinical instructors/preceptors in the clinical setting provided excellent instruction and supervision of students to assess their communication skills. The target of 3.0 was exceeded to achieve a 3.86.This result is a slight decrease in the overall score compared to the last year The student scores were higher than the previous year in areas of; interpersonal relationships, multicultural diversity and age appropriate care. There was a slight decrease in the area of patient care. (07/21/2020)</p> | <p><b>Action:</b> To continue to meet or exceed the target for this measure during the 2020-2021 academic year, clinical instructors/preceptors will continue to instruct students by exhibiting effective communication in the clinical environment.<br/>(07/21/2020)</p> |
| <p><b>SL: Clinical evaluation tool - RA:135</b><br/>Clinical Competency Evaluation/ Part I – Number 4 Part III- Numbers 1,3,6-8</p> <p><b>Target:</b> Average score &gt;= 3 (0-4 pt. scale)</p> <p><b>Timeframe:</b> Level I-Fall Semester</p>   | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> <p><b>Target Met:</b> Yes</p> <p>2019 = 3.94 (n=19)</p> <p>Previous data:</p> <p>2018 = 3.95 (n=13)</p> <p>2017=3.98 (n=14)</p> <p>2016=3.92 (n=13)</p> <p>2015=3.99 (n=16)</p>   | <p><b>Action:</b> To continue to exceed the target for this measure during the 2020-2021 academic year, clinical instructors will continue to deliver instruction, supervision, and feedback to the students in the clinical environment. (07/22/2020)</p>                 |

College Goal 5 - Allen College is committed to adopting management practices that demonstrate outstanding stewardship of all resources to our constituents.

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

**AU Outcome: ASR 2.1**

| <i>Measures</i>   | <i>Results</i>   | <i>Actions</i>  |
|---|--|---|
| <p><b>Responsible Parties:</b> Clinical Instructor/Program Faculty/ HS Curriculum Committee</p>   | <p>2014=3.98 (n=17)<br/>The action plan from the 2018-2019 was effective for 2019-2020 as the clinical instructors provided effective instruction, supervision and feedback to the students in the clinical settings. The target of 3.0 was exceeded to achieve a 3.94. The students are demonstrating communication skills reflective of their level in the program.<br/>(07/22/2020)</p> |   |
| <p><b>SL: Clinical evaluation tool - RA:275</b><br/>Final Clinical Competency Evaluation/<br/>Part I – Number 4<br/>Part III- Numbers 1,3,6-8</p> <p><b>Target:</b> Average score &gt;= 3.5 (0-4 pt. scale)<br/><b>Timeframe:</b> Level II- Spring Semester<br/><b>Responsible Parties:</b> Clinical Instructor/ Program Faculty/ HS Curriculum Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/><b>Target Met:</b> NA<br/>2020 no data to assess. This program requirement was waived for this cohort due to COVID-19.<br/>Previous cohort data:<br/>2019 = 4 (n=12)<br/>2018=3.98 (n= 12)<br/>2017=4 (n=15)<br/>2016=4 (n=17)<br/>2015=3.99 (n=15)<br/>(07/22/2020)</p>  | <p><b>Action:</b> Assessment of this item will resume for the Sp21 cohort.<br/>(07/22/2020)</p> |

**AU Outcome: ASR 2.2**

Students will practice written communication skills

**Outcome Status:** Active

| <i>Measures</i>  | <i>Results</i>   | <i>Actions</i>   |
|--|--|--|
| <p><b>SL: Didactic - RA: 115 Patient Care Presentation</b><br/><b>Target:</b> Average score of &gt;= 85%<br/><b>Timeframe:</b> Level I-Fall Semester<br/><b>Responsible Parties:</b> RA: 115 Course Instructor/HS Faculty Org. Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/><b>Target Met:</b> Yes<br/>2019=98% (n=19)<br/>Previous data:<br/>2018=98% (n=13)<br/>2017=98% (n=14)<br/>2016=97% (n=13)</p> | <p><b>Action:</b> 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 throughout the semester. Email the student's</p> |

College Goal 5 - Allen College is committed to adopting management practices that demonstrate outstanding stewardship of all resources to our constituents.

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

**AU Outcome: ASR 2.2**

| <i>Measures</i>   | <i>Results</i>  | <i>Actions</i>  |
|---|---|---|
|   | <p>2015=98.01% (n=16)</p> <p>The action plan from the 2018-2019 was successful for 2019-2020. The course instructor continued to communicate the paper requirements on the first day of the semester. The instructor instructed the students to the Allen College website and displayed to all students where the academic resources page is located and the APA resource information for APA review. The target continued to be exceeded. The results remained the same from the previous year at 98%. Three of the nineteen students had deductions due to not double spacing on the title page. Ten of the nineteen students had deductions on the reference page; no hanging indents and the spacing of references. (07/22/2020)</p>  | <p>resources information that includes a link to the academic resources page on the Allen College website. On the resources page is an APA link that provides information to assist students to practice written communication skills. (07/22/2020)</p>   |
| <p><b>SL: Didactic</b> - RA:258 Pathology Systems Presentation<br/> <b>Target:</b> Average score of &gt;= 85%<br/> <b>Timeframe:</b> Level II-Fall Semester<br/> <b>Responsible Parties:</b> RA: 258 Course Instructor/ HS Faculty Org. Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes</p> <p>2019=98% (n=10)<br/>           2018=96% (n=12)<br/>           2017=96% (n=12)<br/>           2016=97% (n=15)<br/>           2015=98.01% (n=16)</p> <p>The action plan from the 2018-2019 was effective for 2019-2020. The instructor reviewed the APA format and reminded students that the APA resources information is located on the Allen College website. An increase of 2% in 2019 from 2018 results. Each student completes two papers during the course. Eight of the papers had deductions on the title page due to spacing and incorrect font size. Eight of the papers had deductions on the reference page; no hanging indents, spacing of references, and proper titling of the reference page. (07/27/2020)</p> | <p><b>Action:</b> 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 throughout the semester. Email the student's resources information that includes a link to the academic resources page on the Allen College website. On the resources page is an APA link that provides information to assist students to practice written communication skills. (07/27/2020)</p> |

**AU Outcome: ASR 2.3**

Students will demonstrate oral communication skills

**Outcome Status:** Active

| <i>Measures</i>                               | <i>Results</i>                                     | <i>Actions</i>                              |
|---|--|---|
| <p><b>SL: Didactic</b> - RA:258 Pathology</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> | <p><b>Action:</b> To meet or exceed the</p> |

College Goal 5 - Allen College is committed to adopting management practices that demonstrate outstanding stewardship of all resources to our constituents.

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

**AU Outcome: ASR 2.3**

| <i>Measures</i>   | <i>Results</i>   | <i>Actions</i>  |
|---|--|---|
| <p>Systems Presentation<br/> <b>Target:</b> Average score of &gt;= 85%<br/> <b>Timeframe:</b> Level II-Fall Semester<br/> <b>Responsible Parties:</b> RA: 258 Course Instructor/ HS Faculty Org. Committee</p>                                  | <p><b>Target Met:</b> Yes<br/>           2019=99% (n=10)<br/>           2018=99% (n=12)<br/>           2017=97% (n=12)<br/>           2016=95% (n=15)<br/>           2015=98.82% (n=17)<br/>           The action plan from the 2018-2019 was successful for 2019-2020. The course instructor continued to communicate the paper requirements the first day of class to this cohort. The results remained the same from the previous year at 99%. Each student completes two papers during the course. One student had deductions in their oral presentation due to their oral presentation did not meet the time length. (07/27/2020)</p> | <p>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)</p>   |
| <p><b>SL: Didactic - RA: 115 Patient Care Presentation</b><br/> <b>Target:</b> Average score of &gt;= 85%<br/> <b>Timeframe:</b> Level I-Fall Semester<br/> <b>Responsible Parties:</b> RA: 115 Course Instructor/HS Faculty Org. Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>           2019=98% (n=19)<br/>           2018=99% (n=13)<br/>           2017 =99% (n=14)<br/>           2016=99% (n=13)<br/>           2015=94.53% (n=16)<br/>           The action plan from the 2018-2019 was effective for 2019-2020. The course instructor explained the paper requirements the first day of class. The target of &gt;=85% was exceeded to achieve a 98%. Four students had deductions in their oral presentation portion due to voice level and words not stated correctly during the presentation. (12/01/2020)</p>                  | <p><b>Action:</b> To meet or exceed the benchmark 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. (12/01/2020)</p> |

**AU Outcome: ASR 3.1**

Students will appropriately critique radiographic images

**Outcome Status:** Active

| <i>Measures</i>  | <i>Results</i>   | <i>Actions</i>  |
|--|--|---|
| <p><b>SL: Didactic - RA: 255 Radiographic image analysis worksheets</b><br/> <b>Target:</b> Average score of &gt;= 80%</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes</p> | <p><b>Action:</b> The textbook for this assignment will use the new 5th</p> |

College Goal 5 - Allen College is committed to adopting management practices that demonstrate outstanding stewardship of all resources to our constituents.

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

**AU Outcome: ASR 3.1**

| <i>Measures</i>  | <i>Results</i>  | <i>Actions</i>  |
|--|---|---|
| <p><b>Timeframe:</b> Level II-Summer Semester</p> <p><b>Responsible Parties:</b> RA: 255 Course Instructors/ Program Faculty/HS Faculty Org. Committee</p>   | <p>2019 = 92.72% (n=11)<br/>                     2018 = 93.75% (n=12)<br/>                     2017=87.75% (n=12)<br/>                     2016: 90.19% (n=16)<br/>                     2015: 89.88% (n=17)</p> <p>The action plan from the 2018-2019 was effective for 2019-2020. The course instructor continued the extension of the due date for the shoulder chapter. This allowed two additional weeks for this more difficult chapter. Students demonstrated the ability to apply critical thinking skills while correctly analyzing radiographic images. (07/27/2020)</p>   | <p>edition for the 2020 cohort. No changes recommended. Continue to assess this item. (07/27/2020)</p>  |
| <p><b>SL: Didactic - RA: 265 Radiographic image analysis worksheets</b></p> <p><b>Target:</b> Average score of &gt;= 80%</p> <p><b>Timeframe:</b> Level II- Fall Semester</p> <p><b>Responsible Parties:</b> RA: 265 Course Instructors/ Program Faculty/HS Faculty Org. Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     2019 = 88.8% (n = 10)<br/>                     Previous data:<br/>                     2018 = 93.33% (n=12)<br/>                     2017 = 88.83% (n=12)<br/>                     2016 = 91.66% (n=15)<br/>                     2015= 90.71% (n=17)</p> <p>The action plan from the 2018-2019 was successful for 2019-2020. The course instructor provided the appropriate radiographs to critique and effective feedback. This year's smaller cohort demonstrated similar results when compared to the 2017 cohort. Students continue to exceed target. Students continue to demonstrate the ability to critique and critically analyze radiographic images. (07/27/2020)</p> | <p><b>Action:</b> Next year's cohort will utilize the 5th edition textbook for this assessment item. No changes recommended. Continue to assess this item. (07/27/2020)</p> |

**AU Outcome: ASR 3.2**

Students will demonstrate ability to practice critical thinking

**Outcome Status:** Active

| <i>Measures</i>  | <i>Results</i>   | <i>Actions</i>   |
|--|--|--|
| <p><b>SL: Didactic - RA:145 Scientific Exhibit Evaluation</b></p> <p><b>Target:</b> Average score of &gt;= 80%</p> <p><b>Timeframe:</b> Level I- Spring Semester</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     2020 = 91.90 (n = 11 posters, 16 students)</p> | <p><b>Action:</b> The course instructors have decided to move this assessment item to RA275 beginning in the</p> |

College Goal 5 - Allen College is committed to adopting management practices that demonstrate outstanding stewardship of all resources to our constituents.

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

**AU Outcome: ASR 3.2**

| <i>Measures</i>  | <i>Results</i>   | <i>Actions</i>   |
|--|--|--|
| <p><b>Responsible Parties:</b> RA: 145 Program Faculty/ HS Curriculum Committee</p>  | <p>2019 = 87% N = 9 posters (13 students)<br/>           2018 = 91.5% N= 8 posters (14 students)<br/>           2017 = 92.14% N= 7 posters (12 students)<br/>           2016 = 92.6% N= 10 posters (16 students)<br/>           The action plan from the 2018-2019 was effective for 2019-2020. The course instructors continued to provide effective feedback to the students on their exhibits. Scores for 2020 continue to demonstrate the students’ ability to practice critical thinking skills when developing their scientific exhibits. Many reductions occurred in line item #2 for quality of visuals and charts. Multiple students only used a few or did not support the visuals well. Item #5 also received quite a few reductions since many posters lacked in-depth research. Average scores continue to exceed the target.<br/>           (07/27/2020)</p>         | <p>Spring of 2022 to better coincide with the student educator seminar where the posters are entered in a competition. This measurement tool will be replaced with RA154 CT Topic Presentation as the new measurement tool starting in the 2020-2021 academic year.<br/>           (07/27/2020)</p>          |
| <p><b>SL: Exam/Quiz - Standardized - RA:</b> 203B Corectec exams<br/> <b>Target:</b> &gt; 80% of the students will achieve a score of 70 or greater on one of the four exams.<br/> <b>Timeframe:</b> Level II- Spring Semester<br/> <b>Responsible Parties:</b> RA: 203B Course Instructor/HS Curriculum Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>           2020 = 90% (n=10)<br/>           Previous data:<br/>           2019 = 100% (n=12)<br/>           2018 = 100% (n=12)<br/>           2017 = 93% (n=15)<br/>           2016 = 100% (n=17)<br/>           2015 = 93% (n=15)<br/>           The action plan from the 2018-2019 was effective for 2019-2020. The instructor reduced the % reduction to 1% and was reevaluated in 2020 with no additional changes. 9 out of 10 students achieved a 70 or greater on one of the four Corectec exams. There was a total course grade reduction applied for 2 of the 10 students as a result of their below 70 overall average Corectec scores. This grade reduction policy was implemented to encourage students to put forth their best effort on each of the 4 Corectec exams. (07/27/2020)</p> | <p><b>Action:</b> Overall, the ASR Program curriculum continues to prepare the students for mock board exams. Overall, students continue to demonstrate the ability to practice critical thinking. Will update the target to remove the word “passing” from future year’s assessment plans. (07/27/2020)</p> |

**AU Outcome: ASR 3.3**

Students will be able to critically think in the clinical setting

**Outcome Status:** Active

College Goal 5 - Allen College is committed to adopting management practices that demonstrate outstanding stewardship of all resources to our constituents.

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

**AU Outcome: ASR 3.3**

| <i>Measures</i>   | <i>Results</i>  | <i>Actions</i>  |
|---|---|---|
| <p><b>SL: Clinical evaluation tool</b> - RA:145<br/>Clinical Instructor/ Preceptor Evaluations/Numbers 2,4,7,8</p> <p><b>Target:</b> Average score &gt;= 3. (0-4 pt. scale)</p> <p><b>Timeframe:</b> Level I-Spring Semester</p> <p><b>Responsible Parties:</b> RA: 145 Course Instructor/HS Faculty Org. Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> <p><b>Target Met:</b> Yes</p> <p>2019-2020 3.6 (N=16)</p> <p>2018-2019 3.36 (N=13)</p> <p>2017-2018 3.53 (N=14)</p> <p>2016-2017 3.63 (N=12)</p> <p>2015-2016 3.63 (N=16)</p> <p>The action plan from the 2018-2019 was successful for 2019-2020. The clinical instructors/preceptors in the clinical setting continued to provide excellent instruction and supervision of students to assess their critical thinking skills. This result is an increase compared to the previous year. The student scores were higher than the previous year in all areas; which are application of knowledge, ability to follow directions, self-image for level in the ASR program, and composure and adaptability. (07/27/2020)</p> | <p><b>Action:</b> To continue to meet or exceed the target for this measure during the 2020-2021 academic year, the clinical instructors/preceptors will continue to provide the needed instruction and supervision of the students to evaluate their critical thinking skills in the clinical setting.</p> <p>(07/27/2020)</p> |
| <p><b>SL: Clinical evaluation tool</b> - RA:265<br/>Clinical Instructor/ Preceptor Evaluations/Numbers 2,4,7,8</p> <p><b>Target:</b> Average score &gt;= 3. (0-4 pt. scale)</p> <p><b>Timeframe:</b> Level II- Fall Semester</p> <p><b>Responsible Parties:</b> RA: 265 Course Instructors/HS Curriculum Committee</p>  | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> <p><b>Target Met:</b> Yes</p> <p>2019 3.86 (n=11)</p> <p>2018 3.81 (n=12)</p> <p>2017 3.79 (n=12)</p> <p>2016 3.86 (n=15)</p> <p>2015 3.81 (n=17)</p> <p>The action plan from the 2018-2019 was effective for 2019-2020. All student evaluations were completed on Trajecsyst by the clinical instructors. Students had immediate access and feedback to their evaluations on their critical thinking. The students' scores increased in three performance criteria areas; application of knowledge, ability to follow directions, and composure and adaptability. The area of self image for the level in the ASR program average score remained the same. (07/27/2020)</p>   | <p><b>Action:</b> To continue to meet or exceed the target for this measure during the 2020-2021 academic year, clinical instructors/preceptors continue to demonstrate and explain to students how to practice critical thinking skills in the clinical environment. (07/27/2020)</p>  |

**AU Outcome: ASR 4.1**

Students will integrate leadership skills and construct professional practices

**Outcome Status:** Active

College Goal 5 - Allen College is committed to adopting management practices that demonstrate outstanding stewardship of all resources to our constituents.

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

**AU Outcome: ASR 4.1**

| <i>Measures</i>  | <i>Results</i>   | <i>Actions</i>  |
|--|--|---|
| <p><b>SL: Service</b> - RA:135 Community Service/Service Learning Evaluation<br/> <b>Target:</b> Average score of &gt;= 80%<br/> <b>Timeframe:</b> Level I-Fall Semester<br/> <b>Responsible Parties:</b> RA: 135 Course Instructors/HS Curriculum Committee</p>   | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>           2019 = 87.71% (n=19)<br/>           2018: 83.69% (n=13)<br/>           2017: 94.78 (n=14)<br/>           2016: 72% (n=13)<br/>           2015: 92.56% (n=16)<br/>           The action plan from the 2018-2019 was effective for 2019-2020. The course instructors made a few editorial changes to the assignment instructions for emphasis and clarification based on last year’s recommendations. The overall average score increased slightly when compared to last year. Again, the majority of point deductions occurred in the overall writing and the research categories of the assessment rubric. Some students did not research the organization as directed. All students performed service learning through a variety of organizations. Students demonstrated leadership skills and professionalism through their involvement in service learning activities. (07/27/2020)</p> | <p><b>Action:</b> To continue to achieve the target for this measure during the 2020-2021 academic year, ASR faculty will assess their rubric that are contributing to exceed the target on service-learning and make modifications accordingly. Will continue to assess this measure. (07/27/2020)</p> |
| <p><b>SL: Service</b> - RA: 265 Community Service/Service Learning Evaluation<br/> <b>Target:</b> Average score of &gt;= 80%<br/> <b>Timeframe:</b> Level II-Fall Semester<br/> <b>Responsible Parties:</b> RA: 265 Course Instructors/HS Curriculum Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>           2019 = 85.6% (n = 10)<br/>           2018: 76.75% (n=12)<br/>           2017: 93.33% (n=12)<br/>           2016: 93.4% (n=15)<br/>           2015: 82.47% (n=17)<br/>           The action plan from the 2018-2019 was successful for 2019-2020. The course instructors made a few editorial changes to the assignment instructions to better emphasize and clarify the expectations for the assignment. Improved average scores this year may be the result of implementing the 2018 recommended changes. (07/27/2020)</p>  | <p><b>Action:</b> To continue to achieve the target for this measure during the 2020-2021 academic year, the course instructors will continue to assess the assignment instructions and make modifications accordingly. Continue to assess this measure. (07/27/2020)</p>                               |

**AU Outcome: ASR 4.2**

Students will practice professionalism

**Outcome Status:** Active

College Goal 5 - Allen College is committed to adopting management practices that demonstrate outstanding stewardship of all resources to our constituents.

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

**AU Outcome: ASR 4.2**

| <i>Measures</i>  | <i>Results</i>   | <i>Actions</i>   |
|--|--|--|
| <p><b>SL: Clinical evaluation tool - RA:135</b><br/>Clinical Instructor/Preceptor Evaluations Numbers 1,5,9,12,13</p> <p><b>Target:</b> Average score &gt;= 3 (0-4 pt. scale)</p> <p><b>Timeframe:</b> Level I- Fall Semester</p> <p><b>Responsible Parties:</b> Clinical Instructors/ Program Faculty/HS Curriculum Committee</p>   | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> <p><b>Target Met:</b> Yes</p> <p>2019 3.51 (n=19)</p> <p>2018 3.68 (n=13)</p> <p>2017 3.68 (n=14)</p> <p>2016 3.6 (n=13)</p> <p>2015 3.83 (n=16)</p> <p>The action plan from the 2018-2019 was effective for 2019-2020. All student evaluations were completed on Trajecsys by the clinical instructors. Students had immediate access and feedback to the completed evaluations. Clinical instructors continued to provide effective and timely feedback to students. The students' average scores decreased in all areas of the performance criteria, organization of assignments, initiative, appearance, policies and procedures, ethical and professional behaviors. Some of the comments on the evaluations were; student lacks initiative to be involved in the exams, there were a lot of exams that the student was not involved in-this student has no initiative, needs to work on professionalism with patients and technologists. (07/27/2020)</p> | <p><b>Action:</b> To continue to meet or exceed the target for this measure during the 2020-2021 academic year, the clinical instructors/preceptors will continue to deliver prompt feedback to students when issues arise concerning initiative and professionalism. Faculty continue to discuss the importance of initiative and professionalism in the clinical setting. (07/27/2020)</p> |
| <p><b>SL: Clinical evaluation tool - RA:275</b><br/>Clinical Instructor/Preceptor Evaluations Numbers 1,5,9,12,13</p> <p><b>Target:</b> Average score &gt;= 3 (0-4 pt. scale)</p> <p><b>Timeframe:</b> Level II-Spring Semester</p> <p><b>Responsible Parties:</b> Clinical Instructors/ Program Faculty/HS Curriculum Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> <p><b>Target Met:</b> Yes</p> <p>2019-2020 3.88 n=10)</p> <p>2018-2019 3.83 (n=12)</p> <p>2017-2018 3.76 (n=12)</p> <p>2016-2017 3.96 (n=15)</p> <p>2015-2016 3.98 (n=17)</p> <p>The action plan from the 2018-2019 was successful for 2019-2020. The clinical instructors/preceptors in the clinical setting provided excellent instruction and supervision of students to assess their professionalism. This result is an increase compared to the previous year. The student scores were higher in areas of organization of assignments, initiative, appearance, and ethical and professional behaviors. The scores were lower in only one area which was policies and procedures. (07/27/2020)</p>  | <p><b>Action:</b> To continue to meet or exceed the target for this measure during the 2020-2021 academic year, clinical instructors/preceptors will continue to be positive role models for students by practicing professionalism in the clinical setting. (07/27/2020)</p>  |

College Goal 5 - Allen College is committed to adopting management practices that demonstrate outstanding stewardship of all resources to our constituents.

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

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

**AU Outcome: DMS 2.2**

Students will successfully obtain patient history

**Outcome Status:** Active

| <i>Measures</i>  | <i>Results</i>   | <i>Actions</i>  |
|--|--|---|
| <p><b>SL: Clinical evaluation tool -</b><br/>DMS:408 Clinical<br/>Instructor/Preceptor Evaluations<br/>Number 1<br/><b>Target:</b> On a scale from 1-5, 5 being the highest rating, the average of all the responses <math>\geq 4</math><br/><b>Timeframe:</b> Didactic Level - Fall Semester<br/><br/><b>Responsible Parties:</b> DMS:408 Course Instructor/Program Faculty/HS Curriculum Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/><b>Target Met:</b> Yes<br/>Fall 2019 avg rating of 4.72 on a scale of 1-5. All students were rated 4 (n=6), which is consistent with previous years.<br/>Fall 2018 avg rating 4.62<br/>Fall 2017 avg rating 4.94<br/>Fall 2016 avg rating 4.71<br/>Fall 2015 avg rating 4.47<br/><br/>Scale 0-4<br/>Fall 2014 avg rating 3.40<br/>Fall 2013 avg rating 3.45<br/>Fall 2012 avg. rating 3.6<br/><br/>Per the 2018-2019 action plan, faculty obtained and assessed feedback from clinical instructors. Faculty reviewed evaluations with clinical instructors and student at each site visit and identified/made recommendations for student improvement. This action plan appears to have been effective in helping students be successful in the clinical setting and in achieving the target for this measure. The 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. (09/23/2020)</p> | <p><b>Action:</b> This outcome or measure will be deactivated and replaced with a new measure for the 2020-2021 academic year. (09/23/2020)</p> |

**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.

**Outcome Status:** Active

College Goal 5 - Allen College is committed to adopting management practices that demonstrate outstanding stewardship of all resources to our constituents.

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

**AU Outcome: EdD 5.1**

| <i>Measures</i>  | <i>Results</i>  | <i>Actions</i> |
|--|---|----------------|
| <p><b>SL: Didactic - EdD 780: Integrating Evolving Technology in Health Professions Education –Tech Topic Assignment</b><br/> <b>Target:</b> 100% of students will receive a score of &gt;= 85%<br/> <b>Timeframe:</b> When course is taught (e.g., 2015, 2018, etc.)<br/> <b>Responsible Parties:</b> Program Chair/ HS Grad Curriculum Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> NA<br/>           Course not offered. (07/31/2020)</p> |                |
| <p><b>SL: Didactic - EdD 790: Practicum in Health Professions Education – Course Discussions</b><br/> <b>Target:</b> Students will receive an average score of &gt;80%<br/> <b>Timeframe:</b> When course is taught (e.g., spring 2017)<br/> <b>Responsible Parties:</b> Program Chair/HS Graduate APG Committee</p>                                   | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> NA<br/>           Course not offered. (07/31/2020)</p> |                |

**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.

| <i>Measures</i>  | <i>Results</i>  | <i>Actions</i>  |
|--|---|---|
| <p><b>SL: Exam/Quiz - Teacher-made - OT 501 – Midterm Exam</b><br/><br/> <b>Target:</b> Minimum score of 80% on midterm exam</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>           Questions relating to reimbursement, documentation, are housed in the final exam rather than the midterm. All students passed the final exam. This target has been met in 3 of the 4 past reporting periods. It appears that the action plan resulted in increasing student</p> | <p><b>Action:</b> To facilitate student success on this assignment during 2020-2021, faculty will continue to develop activities and opportunities related to supervision guidelines to</p> |

College Goal 5 - Allen College is committed to adopting management practices that demonstrate outstanding stewardship of all resources to our constituents.

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

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

| <i>Measures</i>   | <i>Results</i>  | <i>Actions</i>   |
|---|---|--|
| <p><b>Timeframe:</b> When course taught (1st Year, e.g., Fall 2016)</p> <p><b>Responsible Parties:</b> Instructor/ OT Faculty /HS Grad Curriculum Committee</p> | <p>performance.</p> <p>Per the 2018-2019 action plan, to facilitate student success on the exam during 2019-2020, faculty added more cases/activities involving supervision guidelines for OT personnel, which appears to have been effective. (09/22/2020)</p> | <p>support students in learning the process. Due to newly revised 2018 ACOTE accreditation standards, this measurement tool and its placement in the coursework/curriculum will be reviewed by faculty and revised as appropriate to meet the new standards. The shift from 2011 to 2018 ACOTE standards went into effect July 2020 and so were in process during the 2019-2020 CAP data collection period. (09/22/2020)</p> |

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

Students will develop a comprehensive new program evaluation plan.

| <i>Measures</i>  | <i>Results</i>   | <i>Actions</i>  |
|--|--|---|
| <p><b>SL: Didactic - OT 613 – Program Evaluation Assignment</b></p> <p><b>Target:</b> Minimum score of 80% on the assignment</p> <p><b>Timeframe:</b> When course taught (2nd Year, e.g., Spring 2017)</p> <p><b>Responsible Parties:</b> Instructor/ OT Faculty /HS Grad Curriculum Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> <p><b>Target Met:</b> Yes</p> <p>All students achieved at least 80% on the assignment. The target has been met 3 of the past 4 reporting years.</p> <p>Per the 2018-2019 action plan, faculty continued to work on developing an increasingly consistent format for teaching program evaluation in each of the practice classes to support students in learning the process. The action plan was successful in supporting student success. (09/22/2020)</p> | <p><b>Action:</b> To facilitate student success on this assignment during 2020-2021, faculty will continue to develop an increasingly consistent format for teaching program evaluation in each of the practice classes to support students in learning the process. Due to newly revised 2018 ACOTE accreditation standards, this measurement tool and its placement in the coursework/curriculum will be reviewed by faculty and revised as</p> |

College Goal 5 - Allen College is committed to adopting management practices that demonstrate outstanding stewardship of all resources to our constituents.

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

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

| <i>Measures</i> | <i>Results</i> | <i>Actions</i>  |
|-----------------|----------------|---|
|                 |                | appropriate to meet the new standards. The shift from 2011 to 2018 ACOTE standards went into effect July 2020 and were in process during the 2019-2020 CAP data collection period. (09/25/2020) |

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

**AU Outcome: PH 2.1**

Student will be able to gather information on policy

**Outcome Status:** Active

| <i>Measures</i>   | <i>Results</i>   | <i>Actions</i>  |
|---|--|---|
| <p><b>SL: Exam/Quiz - Teacher-made - PH 495 Final Exam</b><br/> <b>Target:</b> Average score &gt;= 80%<br/> <b>Timeframe:</b> Summer semester<br/> <b>Responsible Parties:</b> PH 495 Course Instructor/HS Curriculum Committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> Yes<br/>                     In Summer 2019, 12 students took the final exam and received an average of 83.41%. This is the first time the course was offered. (09/03/2019)</p> | <p><b>Action:</b> Next year students will be allowed to take the exam twice. While they will not have the correct answers the second time, they will be able to take notes over items they are uncertain about and reattempt the exam. (09/03/2019)</p> |

**AU Outcome: PH 2.2**

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

**Outcome Status:** Active

| <i>Measures</i>                                 | <i>Results</i>                                     | <i>Actions</i>                                 |
|---|--|--|
| <p><b>SL: Exam/Quiz - Teacher-made - PH</b></p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)</p> | <p><b>Action:</b> It is planned that a new</p> |

College Goal 5 - Allen College is committed to adopting management practices that demonstrate outstanding stewardship of all resources to our constituents.

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

**AU Outcome: PH 2.2**

| <i>Measures</i>  | <i>Results</i>  | <i>Actions</i>  |
|--|---|---|
| <p>480 Final Exam. (Public Health Research and Evaluation)<br/> <b>Target:</b> Average score &gt; 80%<br/> <b>Timeframe:</b> Spring semester<br/> <b>Responsible Parties:</b> Program faculty / Health Science (HS) Curriculum committee</p> | <p><b>Target Met:</b> Yes<br/>                     In Spring 2020, eight students took the final exam and scored an average of 83.3%. 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%. While the standard was met in Spring 2020, this was with the advantage of being able to take the test twice, per the 2018-2019 action plan. The standard was only met this time since students were offered a second chance to take the final exam. The four students who opted to do so raised their scores an average of 7.25 points, or 10%. (05/18/2020)</p> | <p>instructor will be brought on to teach the course in Spring 2021, resulting in all new course materials including the exam. (09/15/2020)</p> |

**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

| <i>Measures</i>   | <i>Results</i>  | <i>Actions</i>   |
|---|---|--|
| <p><b>SL: Exam/Quiz - Teacher-made - PH:</b><br/>                     410 Final exam<br/> <b>Target:</b> Average score of &gt;80%<br/> <b>Timeframe:</b> Fall semester<br/> <b>Responsible Parties:</b> Program faculty / HS Faculty Org. committee</p> | <p><b>Reporting Year:</b> 2019 - 2020 (Year 2)<br/> <b>Target Met:</b> No<br/>                     In Fall 2019, seven students earned an average of 74.4% on the final exam. In Fall 2018, eleven students received an average of 82.6% on the final exam. There is a significant drop in scores, likely due to a change in curriculum including a more difficult textbook. (02/04/2020)</p> | <p><b>Action:</b> Despite test questions being reviewed for fairness as stated in the 2018-2019, scores decreased rather than increased. The plan to allow students to take the exam twice was paused in hope that the question review process would be adequate to raise scores above the target without making the course too easy. Allowing a retake will be considered for the 2020-2021 academic year. (02/04/2020)</p> |