Colorado State University – Pueblo Academic Program Assessment Report for AY 2016-2017

Program: School of Nursing MS Major Nursing Date report completed: June 1, 2017

Completed by: Dr. Joe Franta Interim Associate Dean

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PART I. Program student learning outcomes (SLOs) assessed in this cycle, processes, results, and recommendations for improved student learning.

A. Which of the program SLOs were assessed during this cycle? Please include the outcome(s) verbatim from the assessment plan.	this SLO last assessed? Please indicate the semester and year.	was used for assessing the SLO? Please include a copy of any rubrics	Please fully describe the student group(s) and the number of students or artifacts	E. What is the expected achievement level (EAL) and how many or what proportion of students should be at it?	F. What were	the results		department's	H. What changes/ improvements to the <u>program</u> are planned based on this assessment?
Integrate evidence-based		J		Direct Measure: 100% of students will score	Year	1 st time	2 nd time	Allowing two attempts resulted in	Continue with the same process and reevaluate in
practice, ethical				84% or higher with 2	2016 Cough	91% (3) 100%	97% (1) n/a	100% of students	fall 2017.
decision making			2017 graded on focused		Chest Pain	94% (2)	100%	satisfactorily	
and technology into advanced	Annually Fall		exam in Shadow Health software.	three different focused exams.	Abd Pain	97% (1)		demonstrating standards and	
nursing practice		and abdominal pain)			2017	85.7%	100%	guidelines of the	
		and submit to graduate coordinator.			Cough Chest Pain	100% 75%	n/a 100%	focused patient physical exam.	
		6			Abd Pain	80%	100%	Faculty like the	
								competency-based aspect of this process.	
		In NSG 551, instructor will collect	43 Students in NSG 551	Direct Measure 80% of students will score 84%	Year	2016		New data collected	New data collected will be reviewed in fall faculty
	Annually	grade data from	evaluation.	or better on a health	N	42			meeting.
	Analysis: Annually	presentation using "Healthy People 2020" guidelines and		promotion presentation using "Healthy People" guidelines.	Min Value	90			
		submit to graduate coordinator. (rubric attached)			Max Value	100			
		attached)			Range	10			
					Ave	98.47			
					Median	99			
					SD	2.39			
					Variance	5.69			

Due: June 1, 2017

			42 students enrolled in NSG 506 Roles, Ethics,	Direct Measure: 100% students will score	SLO met: 100 better on case		ents sco	ored 90)% or	Students consistently demonstrating	Review 2016 data in fall 2017 and if SLO continues
	Fall	fall from assignment	and Issues fall 2016	84% or better on an	Year	2013	2014	2015	2016	expected level of	to be met in NSG 506
	J	and submit to graduate coordinator.		ethical decision-making assignment on key	N	30	29	37	42	expertise for an advance beginner	specific collection methods/ elements to be evaluated in
	Spring	(rubric attached)		elements of the ANA Code of Ethics.	Min Value	60	90	90	85	(2013, 2014, 2015 & 2016).	comprehensive exam.
					Max Value	70	100	100	100		
					Range	10	10	10	15		
					Ave	68.23	96.93	97.84	97.26		
					Median	69.50	98	100	100		
					SD	2.33	2.41	4.12	4.61		
								<u> </u>			
2. Utilize	Collection:	In NSG 633 and NSG	NSC 622 Family	Direct Measure:	Variance	5.45	5.79	16.93	21.29	Students consistently	2016 Fall Faculty Retreat:
interprofessional			Practicum III (15	100% of nurse	Year	2014	2015	12	016	demonstrating	Faculty discussed adding a
collaboration to	Summer	collect data from	students) &	practitioner students will	633	N Pass	N Pas		V Pass	expected level of	new measure to address
provide safe, quality, patient- centered care			NSG 683 Psych/Mental Health Practicum III (6 students)	score 84% or better on a group case study/paper.).	Percent of Students scoring ≥ 84% Number 683	N Pass 8/9 M=93.3% SD=10 Range= 20	15/15	100% N S = 0 F 1	5/15 1=99.4% D=0.2	expertise during final semester for SLO #2.	health disparities in LGBTQ populations. Faculty decided to use three final exam questions as a direct measure.
					Percent of Students scoring ≥ 84%	6/6 M=90% SD=0 Range=10	SD=2	2.4% N 2.4 S	/6 /I=95% D=0 tange=0		
		During NSG 622 neuro-trauma	21 students enrolled in NSG 622L Summer	Indirect Measure: 100% of NP students	Year	2015	2	2016		Simulation appears to be at a higher percent	Will review summer 2017
	Summer Analysis: Annually Fall	interprofessional education simulation, a post survey data will be collected by the instructor and submitted to graduate coordinator.	2015 and complete a self-evaluation survey	will score 4 (slightly agree) or 5 (agree) on a post simulation survey.	NSG 622 Percent of Students scoring ≥ 84%	N=17 Score 1 & 2= (1 3= (2) 12 4 & 5= (1 82%	(1) 6% (1) 6% (1) (2) (3) (4)	N=21 Score 1 & 2= 3= (1) 4 & 5 =	(1)7% 2%	for 2016 will continue to monitor. Data Pending for summer 2017	
	Annually Summer Analysis: Annually Fall	NSG 622L, NSG 638L and NSG 683L instructors will collect preceptor evaluation forms at the end of each course and submit to graduate coordinator	Summer 2017 courses will be the first time this occurs and preceptor evaluations will be collected.	Direct Measure: 100% of NP students will score 8 (on an 8-point scale) on the preceptor evaluation sections regarding pharmacological decision-making.	Data Pending	Summer	2017			Will review result in Fall retreat	New direct measure to analyze

	Collection: Annually Spring & Summer Analysis: Annually Fall	682 instructors will collect scores on three	621 students was collected in the spring 2017 and NSG 682 will be collected in summer	80% of nurse practitioner students will correctly answer common designated questions	NSG 621 Spring 2017 N=42 Question 1 Correct- 96.6% Question 2 Correct- 53.3% Question 3 Correct- 83.3% NSG 682Data N=6 Question 1 Correct- 50% Question 2 Correct- 66.6% Question 3 Correct- 83.3%	Will review result in Fall retreat	New direct measure to analyze
	Collection: Annually Summer & Fall Analysis: Annually Spring	Evidenced-based section of the student oral comprehensive exam will be scored and reviewed for all	MS Total: 26 Nurse Practitioner: 6 (AGACNP) 15 (Dual: AGACNP and FNP) 5(PMHNP) completed exam.	100% of NP students will score 84% or better	Summer 2016 average score 93% of 26 students scored 84% or greater	2016: Two students scored below an 84% so evaluated how to strengthen use of EBP application. The two students averaged 82%. All Students over passed the exam with an 84% or better.	research skills are being
1. Integrate evidence-based practice, ethical decision making and technology into advanced nursing practice 2. Utilize interprofessional	Summer & Fall Annually Analysis: Annually Spring	At end of program, graduate faculty will utilize an analytic rubric to score end- of-program student learning outcomes and submit data to the graduate coordinator. (see attached rubric)	in Summer and Fall 2016	End-of-Program SLOs:	98% achieved a 'competent' or 'proficient' rating. 2% were rated 'advanced beginner'.	Faculty discussed the advanced beginner ratings on the comp exam and with the low percentage will continue to monitor	New form developed for summer 2017 attached with clearer instructions/definitions and will use this form for 3 years.
collaboration to provide safe, quality, patient- centered care 3. Lead quality improvement initiatives that affect delivery of advanced nursing practice and health care services.	Annually Analysis: Annually Spring	dean/Faculty will	survey	Indirect Measure: 80% of students will rate EBI Exit Survey items, 'resolve practice problems using research, 'consulting with other health professionals', and 'apply performance measures to quality improvement, as >4 on a 7-point scale.	SLO 3 =91%		

Comments on part I:

PART II. Follow-up (closing the loop) on results and activities from previous assessment cycles. In this section, please describe actions taken during this 2016-2017 cycle that were based on, or implemented to address, the results of assessment from previous cycles.

A. What SLO(s) did you address? Please include the outcome(s) verbatim from the assessment plan.	B. When was this SLO last assessed? Please indicate the semester and year.	C. What were the recommendations for change from the previous assessment?	D. Were the recommendations for change acted upon? If not, why?	E. What were the results of the changes? If the changes were not effective, what are the next steps or the new recommendations?
Integrate evidence- based practice, ethical decision making and technology into advanced nursing practice	Summer 2016 Fall 2016 Spring 2017	At the fall 2016 faculty meeting the SLO process was reviewed. Recommendations: Continue with the same process with one additional direct measurement starting fall 2017.	New direct measurement included in the report for fall 2016.	Data analysis scheduled for review Fall 2017, will monitor over three years. Evaluate new measure data Fall 2017.
2. Utilize interprofessional collaboration to provide safe, quality, patient-centered care	Summer 2016 Fall 2016 Spring 2017	At the fall 2016 faculty retreat the SLO process was reviewed. Recommendations: continue same process with two additional direct measurements starting spring and summer 2017.	New direct measurement (same exam questions in two different emphasis areas) included in the report for spring 2017. Second new direct measurement (pharmacological decision-making) will be measured at the end of summer 2017.	Will continue to use simulation and add a direct measurement with 3 questions for this SLO. Data analysis scheduled for review Fall 2017, will monitor over three years. Evaluate both new measure data Fall 2017.
1. Integrate evidence-based practice, ethical decision making and technology into advanced nursing practice 2. Utilize interprofessional collaboration to provide safe, quality, patient-centered care 3. Lead quality improvement initiatives that affect delivery of advanced nursing practice and health care services.	Summer 2016	Summer 2016 comprehensive grading and analytic rubrics reviewed fall 2016 Recommendation: Oral Comp Exam Rubric only change- add all questions from policy. Analytic Rubric- refine to further define column and row criteria and add evaluator names to evaluate inter-rater reliability.	Spring 2017 (for summer 2017 exams) all questions from policy added to the grading rubric and add space for evaluator name. Spring 2017: Analytic Rubric refined to discriminate rubric criteria.	Oral Comprehensive Exam Grading and Analytic Rubric refined to be used summer 2017 (attached). Continue to monitor for consistency summer 2017 and reevaluate in fall 2017. Will monitor over three years.

Graduate Faculty recommended changes to SLO's (data collection) to be based on Comprehensive Exams in 2015, 2016 and 2017 to identify areas of improvement needed within MS program (all emphasis areas). Recommendations will be made fall 2017 for fall 2017, spring and summer 2018 and addressed in 2017 report.

Comments on part II:

Analytic Rubric Template Comprehensive Exam Summer 2017 Graduate Faculty Evaluator Name: Date ______ Time (Check One)

Purpose

□ 10:30 – 11:30 am

This analytic rubric is designed from the Summative Systematic Evaluation Plan to evaluate the CSU-Pueblo Master's degree Expected Level of Achievement for the program Student Learning Outcomes during comprehensive exams. The information provided on the following pages will be complied for all students, not individual students and used in multiple assessment and accreditation reports. The information provided is <a href="mailto:notemail

Orientation to Form

(Columns) Dimensions: Blooms Taxonomy and additional definitions previously defined by the graduate faculty (see column headings)

(Rows are the Components) Student Learning Outcomes: from the "Summative Systematic Evaluation Plan" which identifies the comprehensive exam method to collect direct data measures for all three student learning outcomes. The SLO Expected Level of Achievement on each page.

- 1. Integrate evidence-based practice (**EBP**), ethical decision making (**EBP for EDM**) and technology (**EBP tech**) into advanced nursing practice
- 2. Utilize interprofessional collaboration (IPC) to provide safe and quality (QS) patient centered care (PCC)
- 3. Lead (Explore) quality improvement initiatives (QI) that affect delivery of advanced nursing practice (QI for ANP) and health care services (QI for HCS)

Instructions

- 1. Write in the required information on the top of this page
- 2. Do not include the students name on this form
- 3. Complete one form for each comprehensive exam you attend

 $\Box 9 - 10:00 \text{ am}$

 \Box 8 – 9:00 am

□ 11:30 - 12:30 am □ 1 - 2:00 pm

- 4. Mark a large X in column that applies the most for each row (each SLO components) for each of the three student learning outcomes
- 5. Make sure all rows have one large X in one column and submit all pages to the graduate coordinator or representative at the end of each comprehensive exam

Colorado State University-Pueblo Department of Nursing Masters Comprehensive Oral Examination Evaluation Rubric

The comprehensive oral examination provides an opportunity for the student to demonstrate synthesis of the knowledge and skills required of an advanced practice nurse. The examination is based on the following questions:

- 1. How is this topic important to your role (after graduation) specific to your designated emphasis/ area of practice?
- 2. How would you integrate practice inquiry (scholarly inquiry), evidence, and ethical, culturally sensitive and evidence-based decision making using technology in your anticipated advanced nursing practice role?
- 3. How would you utilize interprofessional collaboration and quality improvement initiatives to provide safe, quality patient-centered care to address the problem in your topic and improve patient outcomes as an advanced practice nurse?
- 4. How do you utilize a theoretical framework in your practice? Describe this framework and how it guides you in practice.

Scoring Procedure:

Each faculty will record points received in the Final Score Calculation table and totals points received.

Presenter:	Faculty	v: Date:					
	Final Score Calculation Table						
	Possible Points	Points Received					
Quality of Presentation	10						
Practice Problem	20						
Evidence-Based Practice	20						
Ethical Decision-Making	20						
Technology	10						
Patient-Centered Care	20						
Total	100						

Each presenter will be graded by at least 3 faculty. Faculty scores will be compiled. A compiled final score of 84 or higher out of a possible 100 points is required to pass the exam.

Presenter:	Faculty:		Date:
		f Presentation	
	Possible points = 10	Points received:	
Criteria			Comments/ Specific Examples
 Grammar and Spelling 			
 Use of Multimedia 			
 Organization of Presentation 			
 Presentation Skills 			
 APA Format/ References 			
	Practi	ce Problem	
	Possible points $= 20$	Points received:	
Criteria			Comments/ Specific Examples
 Identification of Practice Problen Identification of Population Affec Significance of Problem Relevant to APRN practice 			

Evidenced-Based	l Practice
Possible points = 20 Poin	ts received:
Criteria	Comments/ Specific Examples
Interpretation and Use of Research, Standards and/or Guidelines	
Applies Standards and Guidelines	
Hierarchy of Evidence (systematic review, RCTs. Controlled	
cohort studies and uncontrolled cohort studies, case studies,	
etc.) and/or Guidelines to Identified Practice Problem	
 Identification of Gaps in Research and/or Guidelines 	
 Implications of Research and/or Guidelines for Advanced 	
Practice Nursing	
 Application of EBP resources at point of care 	
Advocacy	
 Identification of Legislative, Regulatory (scope) or Standards of 	
Practice that Guide Advanced Practice Nursing and Affect the	
Identified Practice Problem	
Theoretical Framework	
Description of Chosen Theory or Theoretical Framework and	
How It Guides Practice	
Application of a Theory or Theoretical Framework to the	
Identified Practice Problem and the Advanced Practice Role	
Leadership	
Change agent to move healthcare forward	
Recognize role to provide input for policy change	
Demonstrate professional integrity as coordinator and	
advocate of pt. care	
Understand transformational and other leadership styles	
Initiate/ Participate QI	
Communication	

Ethical Decision Making (ANA Code of Ethics)					
Possible points = 20 Point	s received				
Criteria	Comments/ Specific Examples				
Ethical decision making					
 Identification of Ethical Dilemmas and/or Potential 					
Consequences in the Identified Practice Problem					
 Implications of Ethical Dilemmas for Advanced Practice Nursing 					
Cultural Sensitivity					
Application of Cultural Sensitivity					
ANA Code of Ethics					
• Provisions					
Respect for Human Dignity					
Relationships with patients/ Advocacy					
The nature of health					
The right to self-determination					
Relationships with colleagues and others					
Ethical principles evident in patient care					
Technolog	y				
Possible points = 10 Points					
Criteria	Comments/ Specific Examples				
Identify HIT in evidenced based care					
Utilize current technologies to communicate and deliver patient					
care Application of Identified Current Technology					
Use most up to date resources and documentation HIPAA					
Implement equipment and information systems/ Communication					
 Identification of Current Technology for Communication and 					
Resources When Dealing with the Identified Practice Problem					
Identification of Gaps in Technology					

Patient Centered Care (NONP	PF, NP Competencies)
Possible points = 20 Point	
Criteria	Comments/ Specific Examples
 Advocacy 	
 Vulnerable populations 	
 Respect for pt. preferences, values, and needs 	
 Cultural sensitivity 	
 Application of Cultural Considerations 	
Holism	
 Management Strategies for Patient and Family 	
 Diagnosis/ Treatment Strategies 	
 Care Plan and Implications for Advanced Practice Nursing 	
 Identification of Health Resource Utilization and Consultation 	
Interprofessional Collaboration	
 Function as a member of healthcare system and teams to 	
effectively deliver pt. care / Advocacy	
 Inter and intra –professional communication 	
 Clarity of Roles and Intra-Professional and Inter-professional 	
Relationships/ committee	
 Use multiple resources and referrals in pt care 	
 Understand/ distinguish all stakeholders' roles 	
Safety/ Quality	
Do no harm	
 Practice follows Standards and guidelines 	
 Demonstrates safe pt. care guided by competencies 	
 Looking at pt/client outcomes 	
 QSEN (QI, NQI national safety guidelines) 	
 Identification of Quality Improvement for Patient Safety 	

Revised 5.16.2017

Analytic Rubric Template

Outcome: SLO 1- Integrate evidence-based practice, ethical decision making and technology into advanced nursing practice.

Evidence: Comprehensive Exam

Expected Level of Achievement: 100% of students achieve competent or proficient

Columns	Knowledge/ Comprehension	Application/ Analysis	Synthesis/ Evaluation
	Advanced Beginner	Competent	Proficient
SLO Components	(Aware and Identifies. Requires Guidance to Perform/ Apply)	(Aware and Applies. Requires Guidance to Formulate in complex situations.)	(Recognize/ Formulate integrating and applying evidence in complex situations. Minimal to No Guidance Required)
Rows	Guidance to Ferform/ Appry)	complex situations.)	complex situations. William to No Guidance Required)
Integrate Evidence- Based Practice (EBP)	Identifies EBP: *Consistently demonstrates a clear understanding how to identify the best current evidence: a practice guideline, current evidence including theory and research associated with standards of care for an individual vulnerable patient in the ANP role.	*Consistently demonstrates a clear understanding how to apply the best current evidence and other ways knowing to problem solve using standards of care in common advanced practice patient care (and/or ANP role) situations *Examines short-term patient care outcomes for an individual vulnerable patient in the ANP role.	*Recognizes, Applies and Integrates (formulates) EBP: *Consistently demonstrates a clear understanding how to apply the best current evidence and ways knowing to problem solve using standards of care in complex advanced practice patient care (and/ or ANP role) situations *Integrates an evidence-based treatment plan addressing short and long-term patient care outcomes *Formulates and plans to disseminate new APN practice approaches (based on evidence) justifying outcomes to create evidence for individual patients, aggregates and patient populations
Integrate Ethical Decision Making (EDM)	Identifies EBP for EDM: *Consistently demonstrates a clear understanding how to identify scientific knowledge (ANA Code of Ethics/ provisions) to support EDM to care for an individual vulnerable patient in the ANP role.	*Consistently demonstrates a clear understanding how to apply EDM scientific knowledge (ANA Code of Ethics/Provisions) to problem solve in common advanced practice care (and/or ANP role situations) *Examines short-term EDM patient care outcomes for an individual vulnerable patient in the ANP role	Recognizes, Applies, and Integrates (formulates) EBP: *Consistently demonstrates a clear understanding how to apply EDM scientific knowledge (ANA Code of Ethics/ Provisions) to problem solve for complex advanced practice patient care (and/ or ANP role) situations *Integrates an evidence-based treatment plan addressing short and long-term patient care outcomes *Formulates and plans to disseminate new APN practice approaches (based on evidence) using evidence-based to justify EDM for individual patients, aggregates and patient populations
Integrate Technology (Tech)	*Consistently identifies scientific technology for patient care: safety and monitor health outcomes for a vulnerable patient in APN role	Applies EBP Tech: and general quality improvement methods to communicate and deliver patient care to examine safety, monitor and promote health outcomes for a vulnerable patient in APN role	Recognizes, Applies, and Integrates (formulates) EBP Tech: and formulates a quality improvement method to enhance patient safety, monitor health care information and track health outcomes to develop new APN practice approaches to evaluate and justify Tech for EB care: patients, aggregates and vulnerable population.

Outcome: SLO 2- Utilize interprofessional collaboration to provide safe, quality patient-centered care.

Evidence: Comprehensive Exam

Expected Level of Achievement: 100% of students achieve competent or proficient

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Dimensions Columns SLO Components Rows	Knowledge/ Comprehension Advanced Beginner (Aware and Identifies. Requires Guidance to Perform/ Apply)	Application/ Analysis Competent (Aware and Applies. Requires Guidance to Formulate in complex situations.)	Synthesis/ Evaluation Proficient (Recognize/ Formulate integrating and applying evidence in complex situations. Minimal to No Guidance Required)
Interprofessional Collaboration (IPC)	Identifies IPC: *Consistently demonstrates a clear understanding how to identify the APN role and function as: *A member of a healthcare system and an IPC team to *Effectively deliver patient care using IPC communication for an individual vulnerable patient in the ANP role.	*Applies IPC: *Consistently demonstrates a clear understanding how to apply the APN role and function as: *A member of a healthcare system and an IPC team to effectively deliver patient care through problem solve using IPC in common advanced practice patient care (and/or ANP role) situations *Examines stakeholder roles and communication needs including peers, patients, families, etc. to promote short-term patient care outcomes for an individual vulnerable patient in the ANP role.	*Recognizes, Applies and Integrates (formulates) IPC: *Consistently demonstrates a clear understanding how to apply the APN role and function as: *A member of a healthcare system and an IPC team to effectively deliver patient care through problem solve using IPC in complex advanced practice patient care (and/ or ANP role) situations *Integrates an evidence-based treatment plan to include all stakeholder roles including peers, patients, families, etc. to address short and long-term patient care outcomes *Formulates and plans to disseminate new APN practice approaches (based on evidence) justifying outcomes to create evidence for IPC communications for individual patients, aggregates and patient populations
Safety and Quality (SQ)	Identifies IPC for SQ: *Consistently demonstrates a clear understanding how IPC to identify safe patient care guided by competencies in the APN role	*Applies IPC for SQ: *Consistently demonstrates a clear understanding how to apply safe patient care guided by competencies in the APN role *Examines standards and guidelines for IPC role in SQ outcomes for an individual vulnerable patient in the APN role.	*Recognizes, Applies and Integrates (formulates) IPC for SQ: * Consistently demonstrates a clear understanding how to apply safe patient care guided by competencies in the APN role *Integrates an evidence-based treatment plan formulating and justifying SQ using IPC referral and communication to problem solve and effectively deliver SQ patient care in complex advanced practice patient care (and/ or ANP role) situations *Formulates and plans to disseminate new APN practice approaches (based on evidence) justifying outcomes to create evidence for SQ through IPC including peers, patients, families, etc. to address short and long-term patient care outcomes for vulnerable individual patients, aggregates and patient populations
Patient-centered care (PCC)	*Consistently demonstrates cultural sensitivity with a clear understanding how to respectfully identify holistic patient preferences, values and needs for an individual vulnerable patient in the APN role.	**Respective Applies PCC: * Consistently demonstrates cultural sensitivity with a clear understanding how to respectfully apply respectful methods to an APN PCC plan holistic patient preferences, values and needs *Examines standards and guidelines PCC to develop a PCC plan to improve outcomes for an individual vulnerable patient in the APN role.	*Identifies, Applies and Integrates (formulates) PCC: *Consistently demonstrates cultural sensitivity with clear understanding how to respectfully apply respectful methods to an APN PCC plan *Integrates an evidence-based APN PCC treatment plan in complex advanced practice patient care (and/ or ANP role) situations to include all stakeholder roles including peers, patients, families, etc. to address short and long-term patient care outcomes *Formulates and plans to disseminate new APN practice approaches (based on evidence) justifying outcomes to create evidence for PCC for vulnerable individual patients, aggregates and patient populations

Outcome: SLO 3- Lead (Explore) quality improvement initiatives that affect delivery of advanced nursing practice and health care services.

Evidence: Comprehensive Exam

Expected Level of Achievement: 100% of students achieve competent or proficient

Dimensions Columns SLO Components Rows	Knowledge/ Comprehension Advanced Beginner (Aware and Identifies. Requires Guidance to Perform/ Apply)	Application/ Analysis Competent (Aware and Applies. Requires Guidance to Formulate in complex situations.)	Synthesis/ Evaluation Proficient (Recognize/ Formulate integrating and applying evidence in complex situations. Minimal to No Guidance Required)
Explore quality improvement initiatives that affect delivery of advanced nursing practice (QI for ANP)	Identifies QI for ANP: *Consistently demonstrates a clear understanding how to identify QI initiatives that affect delivery of advanced nursing practice	*Applies QI for ANP: *Consistently demonstrates a clear understanding how to propose to apply QI initiatives that affect delivery of advanced nursing practice in common situations *Examines QI methods, standards and guidelines to implement current best evidence in advanced nursing practice role	*Recognizes, Applies, and Integrates (formulates) QI for ANP: *Consistently demonstrates a clear understanding how to propose to apply QI initiatives that affect delivery of advanced nursing practice in complex situations *Integrates QI initiatives in a proposed QI project to implement new or to improve clinical evidence gaps within the APN scope of practice and competencies. *Formulates and plans to disseminate evidence into ANP practice to justify QI activities within the ANP scope of practice and competencies
Explore quality improvement initiatives that affect delivery of health services (QI for HCS)	Identifies QI for HCS: *Consistently demonstrates a clear understanding how to identify QI initiatives that affect delivery of health services	*Applies QI or HCS: *Consistently demonstrates a clear understanding how to propose to apply evidence-based QI initiatives that affect delivery in common health services *Examines QI methods, standards and guidelines to implement current best evidence in the delivery of health care services recognizing role in policy change	*Recognizes, Applies, and Integrates (formulates) QI for HCS: *Consistently demonstrates a clear understanding how to propose to apply evidence-based QI initiatives to problem solve and recognize role in policy change for APN's to deliver complex health care services *Integrates QI initiatives to propose implementation of current evidence into the delivery of HCS to address patient care outcomes and recognize role in policy change within the APN scope of practice *Formulates and plans to disseminate and implement current evidence into APN practice to justify QI activities in advanced nursing practice recognizing role in policy change

Rev: -5172017

Healthy People 2020 Rubric

N551 - Fall 2016

You all have your selected topic from the list of Healthy People 2020. This assignment will consist of a power point presentation that you will post in Blackboard along with a brief oral summary done during class. The combined assignment is worth 30% of your grade; 20% for the PPT and 10% for the oral summary in class.

As for the power point portion (worth 100 points), you will need the following:

- a cover slide with your topic, name, date, course (Health Promotion N551), & Professor's name (Professor Howard) 10 points
- Goal & Overview of Topic (1-3 slides) 20 points
- Summary of Objectives of Topic (1-3 slides) 20 points
- Interventions & Resources to include the following three components: Summary of Evidence-Based Resources; Clinical Recommendations of Screenings (when & why) if applicable to your topic some topics do not have clinical recommendations; Summary of Consumer Information (8 slides or less) 40 points
- Reference slide containing at least one reference from website where you accessed information (APA format on reference slide) 10 points

The PPT will be due prior to your presentation date. I will have a sign-up sheet in class Thursday so you can select the date you present. Oral presentations of your topic will be brief (8 minutes or less) and will just be summary of what you learned about your topic in regard to Health Promotion.

Oral Presentation (8 minutes or less): Worth 50 points

- PPT submitted Wednesday prior to presentation by MN 10 points
- Business casual attire for presentation 10 points
- Summary of topic orally (hand held notes allowed if needed) 25 points
- Completed presentation in 6 minutes or less 5 points

The Healthy People 2020 Topics you selected to present on are listed below:

- Access to Health Services
- Adolescent Health
- Arthritis, Osteoporosis and Chronic Back
- Blood Disorders and Blood Safety
- Cancer
- Chronic Kidney Disease
- Dementias, Including Alzheimer's Disease

- Diabetes
- Disability and Health
- Early and Middle Childhood
- Educational and Community-Based Programs
- Environmental Health
- Family Planning
- Food Safety
- Genomics
- Global Health
- Healthcare-Associated Infections
- Health Communication and Health Information Technology
- Health-Related Quality of Life and Well-Being
- Hearing and Other Sensory or Communication Disorders
- Heart Disease and Stroke
- HIV
- Immunization and Infectious Disease
- Injury and Violence Prevention
- Lesbian, Gay, Bisexual, and Transgender Health
- Maternal, Infant, and Child Health
- Medical Product Safety
- Mental Health and Mental Disorders
- Nutrition and Weight Status
- Occupational Health
- Older Adults
- Oral Health
- Physical Activity
- Preparedness
- Public Health Infrastructure
- Respiratory Diseases
- Sleep Health
- Social Determinants of Health
- Substance Abuse
- Tobacco Use
- Vision

Grand Round Case Study Assignments Instructions and Grading Rubric

Online Week: In Blackboard your group will be given a brief synopsis to guide your case study for the focused topics during the online week for your group Grand Round Case Study. You will use a Wiki tool to develop your group case study. Everyone in the group will use the Wiki page I create for you. Do not create another Wiki page without direction from instructor. Please contact the HELP desk at 719-549-2002 and email the course instructor if your group has any technical issues. Use the Wiki page to develop your case study. Discuss, ask questions and make decisions by making comments below the Wiki, not in the Wiki page. If you put your name in the Wiki page make sure to erase it for the final product. This is a group grade and I can see who did what (added, deleted, altered or changed) submitted content in the Wiki and in what chronological order during the online week. This assignment will require you to access and contribute to the grand round case study at least 3 days during the 7 days of the assignment period. You can divide up sections 2-5 but make sure all sections flow with content and accuracy with the synopsis I give you and the case study your group creates. The group needs to complete the case study before completing the other requirements. You will be in the same group for all three grand round case studies this semester. Each student needs to complete a different section for each case study. For example: Molly completes Differential Diagnoses or the majority of this section for case study number one. In case study number two she completes the APN Role section and case study number three she completes the most likely diagnosis and treatment plan section. In all three Molly made corrections, additions and asked questions and make other comments below the Wiki page to contribute to the overall Grand Round assignment at least three different days out of the seven days of the assignment. This is about one specific patient. Do not try to cover every possibility, commit to a plan.

Grading Rubric

- 35/35 points for all group members if:
 - ✓ All group members participate nearly equal in assignment in the Wiki page during online week
 - ✓ All group members participate in the comments section to plan, discuss and finalize assignment at least 3 different days during the online week to finalize assignment
 - ✓ All required elements listed below are included in the Wiki page before the assignment deadline
- 30/35 points for all group members if:
 - ✓ Lacking required elements in one area or lacking detail for required elements in any 2 areas listed below. No corrections or regrading will be allowed after the due date this semester.
- 25/35 points or less for all group members if:
 - V Lacking required elements in 2 or more areas or lacking detail for required elements in any 3 or more areas listed below. No corrections or regrading will be allowed after the due date this semester.

Grand Round Case Study Required Elements

Keep the required elements in order. You can format so certain elements are separated in your write-up to avoid duplication and emphasize important topics by addressing them individually within your assignment.

- 1. Case Study: Add relevant chief complaints, history, Review of systems, physical exam findings, vital signs, personal/family history, previous or recent diagnostics, etc.
- 2. **Etiology/Epidemiology/Pathophysiology/Genetics/Genomics:** Concise but complete including patient education, referrals as needed, etc. and only significant content related to the patient in your Case Study, differentials and clearly identify the most likely diagnosis and any comorbidities. This semester is about complex patients you must address all of the patient's needs. Pathophysiology should be specific to how the different disease processes are influencing each other and considerations for pharmacology and non-pharmacology treatments (adverse reactions, potential toxicity, decreased effectiveness, etc. You may want to use the P-Drug tables you used in pharmacology)
- **3. Cultural/Health Disparities/Family Theory/Associated Family History**: Concise but specific to the content in your case study and your APN role for this specific patient. *Application to practice*.
- 4. **Differential diagnoses:** List <u>top 5</u> differential diagnoses and associated distinguishing history, physical exam, diagnostic testing or other diagnostic *information* (*don't forget lab values and other test results that are typical for this type of patient in the case study)* that assists the NP to accurately differentiate the diagnoses from one another. Use a table with headings to quickly differentiate between differentials, not all the details for each.
- 5. **Most Likely Diagnosis, Treatment plan with Developmental considerations**: be specific to the patient in your case study and use bullet points for your evidence-based treatment plan (reference current Practice Guidelines and at least two additional peer reviewed journal articles related to treatment plan). Be specific what pharmacological and/ or non-pharmacological interventions you would order for this patient. Do not list options, you have to commit to a specific evidence-based treatment and follow-up plan. Your follow-up plan needs to include more than just when you will have the patient return to see you. The APN implications in this section need to include any labs you will follow or community resources you will refer to the patient to utilize, etc. Whatever is applicable for the patient you create. List in parentheses after applicable content for your patient the associated NP competencies. Just listing the competencies and stating you are using them is not enough this semester. You must be specific in what you do for the patient demonstrating the competency and identifying the competency in parentheses.

- 6. **APN Role/Implications**: Discuss any local, state or national rules, regulations, health-care policy or other barriers to providing quality and safe patient care for the patient in your patient in the case study. *Does insurance cover the tests you did in the differential diagnosis section?* (ie: genetic testing in the pregnancy case study). What codes would you bill for the visit you describe in the grand round?
- 7. List all **references** APA format at the end of the Wiki page (Don't forget in textreferences and a reference list at the end of your Wiki page)

Post-Neurosimulation Survey Results: NSG 622

Criteria: To what extent do students demonstrate respect for patient preferences, values, and needs?

BB Survey: Evaluate pre and post simulation survey/each cohort/ every Summer semester in NSG 622

Instructions:

The purpose of this pre and post simulation survey is to assess your comfort and confidence level related to: respect for patient preferences, values and needs before and after the simulation activities. The results from the surveys will be compiled and reported to the accreditation organization as part of our student learning assessment process. The surveys will not be included as part of your participation grade or evaluation of your skill performance. Please answer to the best of your beliefs.

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1=Disagree

2= Slightly Disagree

3= Not sure

4= Slightly Agree

5=Agree

Question 1:

I feel confident caring for patients when their values are significantly different from my own.

Question 2:

I feel comfortable caring for critically ill patients whose religious beliefs differ significantly from my own beliefs.

Question 3:

I feel confident communicating with family members to make end of life decisions.

Question 4:

I feel comfortable discussing patient and family preferences in critical situations.

Question 5:

I am confident in my role as a Nurse Practitioner to respectfully assess and meet the needs for my critically ill patients.

Question 6:

I understand what resources are available to assist me when the family's wishes conflict with the patient's preferences.

NSG 683

Group project – This will be a WIKI online project. Divide portions of the assignment and enter your input into WIKI.

- A. Define the problem and client population affected and statistics.
- B Literature review for current knowledge of problem
- C. Legislation that may affect area (eg, patient's rights, state statutes)
- D. When problem emerged: is it getting better or worse?
- E. Include summary of an interview with a professional who is involved in the area: Identify by role, not by name.
- F. Barriers to solving the problem economic, tradition, etc.
- G. Is the problem solvable in your estimation?
- H. What could you do as a change agent?
- I. Describe one or more of the QSEN competencies to improve patient care in your

N506 Advanced Practice Roles, Issues & Ethics

Ethical Decision Making Assignment

Grading Rubric

Each student will individually complete this assignment. It should be no more than 2 typed pages. You are asked to answer the following questions after reviewing the material in Module 3, week 6. Resources should be cited using APA format. Please be sure to label with course, your name, the date and please virus check before uploading to Blackboard.

- 1. List the key elements of the ANA Code of Ethics
- 2. How will these elements help to guide you as you embark on your journey in advanced practice nursing?
- 3. Review the ethical models. How would you use a model to work through and ethical dilemma you have experienced in practice?

Grading:

- 1. Student lists the key elements of the ANA Code of Ethics (20 points)
- Student describes how the key elements in the ANA Code of Ethics will help guide them in their journey in advanced practice nursing (30 points)
- Student will utilize an ethical model to work through an ethical dilemma they have experienced (30 points)
- 4. Sources will be cited in APA format and correct grammar and spelling will be utilized (10 points)