

## Nursing

### *Associate of Science in Nursing (10)*

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**UNIVERSITY OF ARKANSAS AT LITTLE ROCK Plan No. 10**  
Assessment Progress Report Form - Calendar Year 2005

#### **I. USE OF ASSESSMENT FOR PROGRAM BUILDING AND IMPROVEMENT**

As a component of the nursing department's formal written assessment plan, nursing students are tested at the end of the first year of the program (Custom) and prior to graduation (Exit) using a national nursing examination developed by Health Education Science, Incorporated (HESI). Data provide students with individual feedback on knowledge in key areas. This is used to assist students in working on areas of weakness and provides group data specific to course content and program outcomes that is used by faculty to strengthen the curriculum. Research studies have found the HESI HPM to be highly accurate in predicting success on the nursing licensure exam, NCLEX-RN. Based on HESI research data, a score of 900 is identified as the recommended level of performance, with 850 identified as acceptable. A score of 850 has been established as the benchmark that has been incorporated into program outcomes. The class mean is established as the benchmark for consistency in reporting data correlated with NCLEX-RN data.

Students are required to score 850 on the Custom HESI and two attempts are allowed. The exam is administered at the completion of the first year of the program. Students scoring below 850 on the second take are encouraged to use the tutorial resources available in the Learning Resource Center, but progression is not interrupted. Individual score reports indicate areas of strengths/weaknesses which is used to guide students in remediation. Custom HESI data have proven to be an indicator of success in the second year of the program. In 2004, a team faculty review was conducted to verify correlation of the HESI Custom exam content to curricular concepts and revisions were implemented.

As a result of data analysis, a score of 850 on the HESI Exit Exam is required for successful completion of Nursing 2910. The exam is administered at the end of the course. Students are allowed three attempts to achieve the required score, with remediation between attempts. NCLEX-RN pass rates continue to exceed state and national first-write pass rates. The 1999-2005 retake pass rate is 100%.

Analysis of May 2005 HESI Exit Examination data indicated established levels of achievement were met or exceeded in all but three categories of Program Outcomes/Goals. Teaching teams reviewed the content areas where benchmarks were not met and the decision was made to track data before curricular changes were recommended.

The current method of assessment provides the program with trended, aggregated data for use in program improvement. Annually the faculty review data as a component of the systematic Plan for Evaluation. The use of assessment findings for program improvement contributed to the 2001 UALR Department of Excellence Award and the maximum 8-year accreditation by the National League for Nursing Accreditation Commission (NLNAC Fall 2002 Accreditation Visit). Data indicate continued improvement in graduate performance on the HESI Exit Exam and on NCLEX-RN. Curricular revisions related to admission and progression were implemented in 2004. No curricular changes will be made for 2005.

Assessment data are also obtained from bi-yearly evaluations. First and second year students complete Program Evaluations. Student response rate is 78% --100%. Graduates and Employers complete a Graduate/Employer Evaluation Survey 6 months after graduation. This survey has a Content Validity Index of 1.0. Response rate ranges from 24%-33%. In an effort to increase response rates, the department contracted with the Institute of Government Survey Research Center (SRC) to conduct a telephone survey of 2004 Graduates and Employers. Response rate increased to 54% and 93% respectively. These evaluations were done in 2004 and will be repeated in 2006.

During 2005, the department assessed two Program Outcomes/Goals and two Program Objectives that directly relate to student learning.

### **Program Outcome (Goal 1)**

Benchmark: *First and second year students will have a mean score of 850 or higher on the overall HESI examination and on subscores in the areas of critical thinking, communication abilities, and therapeutic nursing interventions.*

#### **Data: HESI Testing**

| Program Objective                 | Class of 2005<br>1 <sup>st</sup> Yr n = 83; 2 <sup>nd</sup> Yr 79 | Class of 2006<br>1 <sup>st</sup> year n=85 |
|-----------------------------------|---|--|
| Utilize Critical Thinking         | 1 <sup>st</sup> Year 918<br>Exit 934                              | 1 <sup>st</sup> Year 861<br>Exit Pending   |
| Effective Communication           | 1 <sup>st</sup> Year 922<br>Exit 921                              | 1 <sup>st</sup> Year 959<br>Exit Pending   |
| Therapeutic nursing interventions | 1 <sup>st</sup> Year 897<br>Exit 936                              | 1 <sup>st</sup> Year 838*<br>Exit Pending  |

\*No action taken. If trend is noted, action will be taken.

### **Program Outcome (Goal) 2**

Benchmark: *Graduates will meet or exceed the average Arkansas NCLEX-RN pass rates on first writes.* Benchmark exceeded since 1999. The May 2005 class pass rate is

96%. The Arkansas pass rate is 87%. Of note, UALR nursing graduates exceeded both the Arkansas and national pass rate (87%) and have consistently done so for the past 6 years.

This year the faculty also assessed three Program Learning Objectives:

1. Use critical thinking while applying the nursing process to provide effective nursing care to human beings with unmet biophysical and psychosocial needs who require promotion, maintenance, and/or restoration of health.
2. Use effective communication to assist individuals, families, significant others, and health care providers.
3. Manage nursing care for a small group of individuals by establishing priorities for care and collaborating with other health care providers.

### Program/Learning Objective – Nursing Process

The nursing process includes assessment, analysis, planning, implementation, and evaluation. Benchmark: *First and second year students will have a mean HESI score of 850 or higher on nursing process subscores (assessment, analysis, planning, implementation, evaluation).*

#### Data: HESI Testing

| Nursing Process/HESI | Class of 2005<br>1 <sup>st</sup> yr n = 83; 2 <sup>nd</sup> yr n = 79 | Class of 2006<br>1 <sup>st</sup> year n= 85               |
|----------------------|---|---|
| Assessment           | 1 <sup>st</sup> Year 864<br>2 <sup>nd</sup> Year 942                  | 1 <sup>st</sup> year 863<br>2 <sup>nd</sup> year pending  |
| Analysis             | 1 <sup>st</sup> Year 849*<br>2 <sup>nd</sup> Year 903                 | 1 <sup>st</sup> year 873<br>2 <sup>nd</sup> year pending  |
| Planning             | 1 <sup>st</sup> Year 984<br>2 <sup>nd</sup> Year 976                  | 1 <sup>st</sup> year 843*<br>2 <sup>nd</sup> year pending |
| Implementation       | 1 <sup>st</sup> Year 901<br>2 <sup>nd</sup> Year 917                  | 1 <sup>st</sup> year 850<br>2 <sup>nd</sup> year pending  |
| Evaluation           | 1 <sup>st</sup> Year 974<br>2 <sup>nd</sup> Year 938                  | 1 <sup>st</sup> year 870<br>2 <sup>nd</sup> year pending  |

\*No action taken. If a trend is noted, action will be taken.

### Program/Learning Objective – Communication, Manage Care

Use effective communication to assist individuals, families, significant others, and health care providers.

Benchmark: *First and second year students will have a mean score of 850 and higher on communication subscores.*

Manage nursing care for a small group of individuals by establishing priorities for care and collaborating with other health care providers.

Benchmark: *First and second year students will have a mean score of 850 or higher on management of care subscores.*

#### Data: HESI Testing

|                    | Class of 2005<br>1 <sup>st</sup> yr n = 83; 2 <sup>nd</sup> yr n = 79 | Class of 2006<br>First Year N=85                         |
|--------------------|---|--|
| Communication      | 1 <sup>st</sup> year 922<br>2 <sup>nd</sup> year 921                  | 1 <sup>st</sup> year 952<br>2 <sup>nd</sup> year pending |
| Management of Care | 1 <sup>st</sup> year 955<br>2 <sup>nd</sup> year 937                  | 1 <sup>st</sup> year 908<br>2 <sup>nd</sup> year pending |

## II. FACULTY AND STAKEHOLDER INVOLVEMENT

The department has a systematic method for program assessment and evaluation that was implemented in 1998. Under this governance model, faculty serve on department committees. This structure allows for continued systematic program assessment. Bi-annual Systematic Evaluation Meetings (December and May) serve as a forum for presenting assessment data, reviewing program progress, and soliciting faculty input. Each committee chairperson completes a written report using a designated report format. Faculty are provided with copies of all reports in advance of the meeting.

Decisions regarding program maintenance, revision, and/or development are based on trended data analysis and are approved by faculty at these meetings.

The department underwent an accreditation visit by the NLNAC in September 2002. We were cited as having a *“fully implemented Systematic Plan of Evaluation that serves as a model for assessment activities in nursing education!”* Patterns of strength that were cited in the official reporting document included, *“the outstanding contributions of the faculty members within the department in all areas;”* *“the UALR DON is truly a Department of excellence, not only at UALR but also within the broader nursing education community;”* *“the full achievement of each of the 22 NLNAC criterion for accreditation.”* Additionally, the NLNAC National Review Panel cited the program as a national model and encouraged the program to publish the Self-Study Report as an example of an exemplary report.

The department underwent an accreditation visit by the Arkansas State Board of Nursing (ASBN) in November 2005 and was granted full accreditation (5 years) with no recommendations for improvement. The next accreditation visit by the ASBN and the NLNAC will be in 2010.

The department consistently earns high ratings (3.7—4.0) in college assessment evaluations. For several years we have submitted a poster at the University Assessment Expo outlining our assessment process.

In 2001, a Student Advisory Committee was developed consisting of student representatives from the first and second year classes. Student participation in the Student Advisory Committee has resulted in monthly meetings in which student/faculty dialogue regarding concerns and suggestions for departmental improvement.

Additional stakeholders involved in the ongoing assessment process include the institutions and community agencies in which nursing students participate in clinical laboratories as students and subsequently as registered nurses. Employers and alumni alike provide formal assessment feedback to the program every other January via the Graduate/Employer Follow up Survey. In 2004, we hosted the first annual “Day of Dialogue,” in which representatives from area healthcare agencies were invited to meet with faculty to discuss issues relating to program assessment and improvement. Feedback from the meeting was positive and resulted in several nursing student policy revisions.

The community of health care consumers in the metropolitan area of central Arkansas participates in the program’s assessment process. These are accomplished by evaluation of direct care received by students/graduates as part of extensive service learning projects and nursing care provided by the nursing students/graduates.

Data from all stakeholders is used as a part of the formal systematic plan for evaluation. It is used to evaluate and modify teaching/learning methods, content, and objectives, as trended data indicate. Fall 2003, the first year of the program is offered at the UALR Benton site. The decision to offer the classes at the Benton campus was in response to the community's request for nursing course availability in Benton and the awarding of a \$826,000 Workforce Grant. Public and agency support for the course offerings has been generous and continuation is planned.

In Fall 2005, a partnership with St. Vincent Health was established which provided classroom and clinical space for an additional 100 nursing students. This enabled the department to admit 190 first semester students. Because clinical slots for additional nursing students are not available, the program implemented an "accelerated option." Thirty students were selected to participate in the accelerated option, in which the third semester courses will be offered during the summer, and the fourth semester courses will be offered in the fall. These students will graduate in December and be eligible to take the licensing examination in January. Through this partnership, the department and St. Vincent have acted to address the current nursing shortage in the central Arkansas area.

### **III. APPROACH**

#### **Program Outcomes (Goals)**

Program Outcomes (Goals) are specified by the National League for Nursing Accreditation Commission (NLNAC). Benchmarks are established by the department.

#### **1. Critical Thinking, Communication Abilities, Therapeutic Nursing Interventions**

- First and second year students will have a mean score of 850 or higher on the overall HESI examination score and on subscores in the areas of critical thinking, communication abilities, and therapeutic nursing interventions.

#### **2. NCLEX-RN Pass Rates**

- UALR Department of Nursing graduates will meet or exceed the average Arkansas NCLEX-RN pass rate on the first write.

#### **Central Student Learning Objectives (Program Objectives)**

Program Objectives for the nursing program are required to be linked to concepts in the philosophy (i.e. nursing process, communication, etc.)

At the conclusion of the Associate Degree Nursing Program, the student is prepared to:

1. Use the nursing process to deliver effective nursing care for human beings with unmet biophysical and psychosocial needs who require promotion, maintenance, and/or restoration of health.
2. Use effective communication to assist individuals, families, significant others, and health care providers.

3. Practice accountability and responsibility by adhering to legal and ethical standards of practice.
4. Manage nursing care for a small group of individuals by establishing priorities for care and collaborating with other health care providers.
5. Pursue self-established goals for continued self-development and maintenance of clinical competencies.
6. Prepare to contribute to society through participation in community and/or professional activity.

The department uses the following data collection tools that are rated consistent and valid by established content validity indices:

- Program Evaluations: These are completed bi-yearly in April by both first and second year students. In 2003 the evaluations were done electronically via WebCT. Student response was favorable and this method will continue. In addition to Likert scale items, students are asked to provide suggestions for improvement for any item not rated as satisfactory. Students are also provided with the opportunity to document general comments regarding the program. The Program Evaluation tool was developed using NLNAC guidelines and is assessed annually. Data obtained from Program Evaluations are analyzed by the Assessment Committee and distributed to faculty at the August Faculty Meeting. Data are reported as counts and percentages. Program Evaluations were conducted annually for several years and last year the timetable was changed to every other year. The change was implemented because results were consistently positive over time. Program Evaluations will be obtained in 2006.
- Graduate and Employer Surveys: Surveys are conducted six months following graduation to each graduate and direct supervisor of the graduate. In an effort to increase the response rate to this survey, they are being conducted by the ISR via telephone. Surveys were developed using NLNAC guidelines and are evaluated annually by the Assessment Committee. Data from the surveys are presented at the May SPE faculty meeting. Data are reported as counts and percentages. This evaluation method also changed from annual to bi-yearly in 2005. It will be conducted for the 2006 graduates.
- Heath Education Science, Incorporated (HESI) testing: This is a proven external prediction model for NCLEX-RN pass rates and a valid measurement tool for use in evaluating nursing curricula. Reliability is calculated using the Kuder-Richardson Formula 20 (KR-20). The KR-20 has indicated high reliability for our students since we began using the HESI exam.
- NCLEX-RN results: Results are provided by the National Board of Nursing and the Arkansas State Board of Nursing. Data are reported as counts and percentages.

Feedback from the CSAM 2005 Assessment Report:

*“Student retentions showed an increase of 9% over last year.”*

*“The program had an exceptional percentage (83%) of graduate and employer follow-up...”*

*“The UALR Benton program is also an integral part of the overall assessment.”*

*“The nursing department should serve as a model of assessment for other departments...”*

Program Outcomes/Goals and Program Objectives will be evaluated per this schedule:

#### **Timeframe for Assessment Activities**

| 2005-2006<br>Objectives<br>Evaluated               | 2006-2007<br>Objectives<br>Evaluated          | 2007-2008<br>Objectives<br>Evaluated | 2008-09<br>Objectives<br>Evaluated              |
|--|---|--------------------------------------|---|
| Nursing<br>Process<br>Communication<br>Manage Care | Nursing<br>Process<br>Member of<br>Profession | Nursing Process<br>Legal/Ethical     | Nursing Process<br>Communication<br>Manage Care |

#### **IV. ASSESSING ASSESSMENT**

Before implementation of the governance model in 1998, it was difficult to track the timeframe for assessment of specific criteria, to keep up with revisions, and to clearly document rationale for decision-making. The governance model and the Systematic Plan for Evaluation (SPE) streamline the assessment process and have fostered ownership in assessment. The departmental committee structure allows each faculty member to be actively involved in the assessment process through committee responsibilities. Faculty view the department’s mechanism for systematically evaluating the program as a strength. In addition, the SPE contributed to the success of the faculty in developing a DON Strategic Plan that corresponds with the CSAM Strategic Plan.

The biannual SPE meetings provide a systematic method of reporting and monitoring compliance with NLNAC guidelines and ensure that each faculty member is provided with information regarding program development, revision, and maintenance. The biannual SPE meetings provide a forum for faculty input and discussion. The minutes from the SPE meetings summarize the assessment activities of the program and are centrally located for faculty access/reference.

In addition to student individual performance indicators and outcome measures, the HESI Exam provides curriculum content strengths and weaknesses. Each teaching team is provided with HESI results and uses the results to improve course content areas. Content category scores are positively related to success on the NCLEX-RN examination. HESI scores can be used to draw inferences regarding the appropriateness of curricular content and curricular effectiveness. The HESI Exit Exam has been found to be 96%-98% accurate in predicting licensure failures and is considered a valid measure of students’ preparedness for the NCLEX-RN.

It is estimated that each individual faculty member spends 60 hours (committee work) and 10 hours (biannual SPE meetings) annually in the assessment process. The department spent an estimated \$4200 on program assessment in 2005. The Department of Nursing's commitment to program assessment is highly valued for continued program development, maintenance, and quality improvement.