



University of
Connecticut

School of Nursing

MS Program Evaluation 2012-13 and 2013-14

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Charge

- School of Nursing Evaluation Blueprint calls for Masters Program evaluation every three years
- Last evaluated in Spring 2006
- 2009 Evaluation deferred due to plan to phase out the MS in favor of DNP entry to advanced practice
- Revised plan to maintain MS program with reevaluation of market, employment opportunities, and relaxing of the AACN 2015 'deadline' for all NPs to be at DNP entry
- Evaluation initiated Spring 2012

Data Sources

- MS and post-MS Certificate graduates
- Current students
- Faculty
- Course evaluations
- AACN Essentials of Master's Education (2011)
- AACN Essentials of Doctoral Education (2006)
- NTF Program Evaluation Criteria
- Competencies: DNP, NP, CNL
- LACE Report
- UConn philosophies, course objectives, curriculum
- Graduate School criteria

Scope

- 6 Concentrations
 1. Adult-Gerontology Acute Care NP
 2. Adult-Gerontology Primary Care NP (changed from Adult NP in 2011)
 3. Clinical Nurse Leader
 4. Family NP
 5. Neonatal NP
 6. Neonatal CNS
- 3 Concentrations on moratorium
 1. Patient care Services
 2. Community
 3. Psychiatric Nurse Practitioner
- Post-MS Certificate included (same content as MS)
- BS-DNP considered (same content for MS years)

Evaluation Process

- Review of program objectives
- Data collection and analysis
 - S.W.O.T. Analysis
 - Graduate Survey
 - Crosswalks of MS Essentials, DNP Essentials, NP Core Competencies, Concentration Specific Competencies/CNL Competencies
 - Gap Analysis
 - Recommendations / Implemented Changes
- Action Plan and Next Steps

MS Program Terminal Objectives

- Fairly consistent with AACN Master's Education Objectives
- Minor changes needed to reflect:
 - Quality
 - Outcomes
 - Application of evidence-based practice

S.W.O.T. Analysis

- Strengths
 - 6 concentrations robust
 - Applicant #s stable
 - High completion, certification, and employment rates
- Weaknesses
 - Enrollment fell when DNP focused and with FNP
 - Quantity/quality of clinical placements
- Opportunities
 - Online/hybrid
 - Sharing content among concentrations
 - Increased use of simulation/virtual
 - Health assessment standardized patients – partner with fine arts
 - Increased emphasis on CNL role
- Threats
 - Clinical site availability/quality vis a vis students #s and # of programs in CT

Graduate Survey Responses

(n = 14)

Positive feedback

- >50% (n = $\geq 7/14$)
- Faculty and student interactions important to graduate experience
- Faculty understand educational needs and role, program reflects AACN recommendations
- Encouraged and supported to try new endeavors
- Patho, health assessment, pharm, clinical didactic, clinical practicums important to education
- Advisory committee challenged and supported
- Education prepared me well for role and responsibilities

Areas for improvement

- 56% (n = 8/14)
- Nursing theory not an important part of education
- Statistics course not an important part of education
- Comprehensive exam not meaningful or representative of role
- Did not agree that the program should be all online

Graduates: Survey Comments

(n = 14)

Strengths

- Like classes and discussions (cases, varied points of view)
- Helpful to have some courses offered at branch campuses
- Advanced A&P excellent
- Adv Health Assessment excellent

Weaknesses/ Areas for improvement

- Pharm – link meds to disease and pathophysiology
- Want *more* – pharm, patho, clinical, cases online, procedures
- Want *less* – nursing theory, stats (should focus on understanding papers and critiquing)
- PRAXIS – one respondent noted the SON's reputation is affected by how graduates carry themselves

Faculty Comments

(all courses represented)

Positive feedback

- Strength in clinical content and core courses
- Strength in preceptors/placements – strong clinical partners
- Skills lab a huge success
- Students benefit a great deal from discussion in clinical seminars

Recommendations / Areas for improvement

- Stats do not stay with students, disconnect with Research course and application for EBPx
- ↑ emphasis on EBPx, quality, safety – poor understanding of research application seen in Comps
- Integrate Family Theory in Nursing Science course, ↑ Adv px
- Need more good quality clinical placements
- ↑ comparison of normal vs abnormal to enhance management (Patho)

Crosswalks

- One for each concentration
- Identify degree of congruency between
 - Essentials for MS and DNP
 - Competencies
 - and Curriculum
- Provide foundation for Gap Analysis

Gap Analysis

- Based on crosswalk results, student feedback, faculty input
- FNP students need content in all 4 clinical didactic courses
- Identified areas of low congruency:
 - Essential I – need to increase scientific base for evidence-based practice
 - Essential II, esp 2.5 – business and economic principles – maybe an assignment and /or integrating billing for clinical practicum seminar reports on patient encounters
 - Essential III, esp 3.8 – leading quality improvement initiative, need to integrate with assignments, perhaps also in simulations

Gap Analysis (con't)

- Essential V, esp 5.4, 5.5, 5.6 – oversight in integrating technology for documentation, using information technologies for teaching patients and others, and using current technologies in the care environment to support lifelong learning; need to integrate with assignments, demonstrate use of technology with documentation in clinical practicum, perhaps also integrate for technology for simulations
- Essential VI, esp 6.1, 6.2, 6.3, 6.4, 6.5 – analyzing policy influences on structure and function of health care, participate in policy development, examine legal and regulatory effects on healthcare, interpret research for policymakers underscoring the nursing perspective, advocate for policies to improve public health and nursing; need to integrate with assignments, demonstrate policy influences and advocacy with advanced practice and in health care
- Essential VII, esp 7.2, 7.6 – maximize contributions of other healthcare providers in the team and function as an effective group leader with understanding of team dynamics and group process; need to integrate group process and use of other healthcare team members in assignments, perhaps through simulation experiences

Gap Analysis (con't)

- Essential VIII – All covered in integrated fashion in clinical didactic courses, need increased emphasis, perhaps focused content in initial clinical didactic course
- Essential IX, esp 9.5, 9.10, 9.14, 9.15 – leadership skills for teaching, coaching, and mentoring other members of the healthcare team; business economics, principles, and systems for design, delivery, and evaluation of care; strategies for lifelong learning; integrate evolving personal philosophy of nursing – need to integrate teaching, coaching, and mentoring of peers and health care team members, can be done through assignments, in clinical practicum, and through simulation; integrate use of business for design and delivery of health care through clinical practicums and simulation; establish plans for lifelong learning and further develop personal philosophy of nursing as reflected in assignments and perhaps through simulation experiences

Recommendations based on Evaluation and Gap Analysis

- Admissions
- Program Terminal Objectives
- Clinical Placement Support
- Curriculum Changes

Admissions

- Caps
 - need to establish realistic class sizes – placements and faculty to student ratio
- CEIN graduates
 - recommend as “preferred” instead of “guaranteed” admission to MS

Program Objectives

Current

1. Synthesize appropriate theories from nursing and related fields to respond to emerging health care challenges.
5. Conduct evaluative research and apply research findings to creatively respond to health care challenges.

Proposed

1. Synthesize appropriate scientific findings and theories from nursing and related fields to lead change to improve outcomes.
5. Conduct evaluative research and apply research findings to creatively improve health care quality and outcomes

Clinical Placements & Hours

- Graduate Clinical Site Coordinator
 - Facilitate increased # quality clinical placements
 - Streamline placement confirmations, communication with preceptors, thank you letters and documentation of hours
 - Preceptor database to facilitate communication
(Thanks Thany for developing and Nancy for adding TONS of data to it!)
- Level clinical credits to hours ration (1 credit = 80 hours)

Curriculum Changes

- Skills lab added Fall 2013
- Descriptions and objectives to align with Essentials and Competencies
- Updated course titles and descriptions approved by faculty
- NURS 5062 Adv Health Assmt & NURS 5072 Adv Pharmacology – NNP/NCNS
- NURS 5875 – CNL students 3 credits
- NURS 5870 – CNL students 3 credits
- Objectives – see table

Action Plan – Next Steps

- Curriculum Revisions – see table
- E-Campus collaborations – explore opportunities for more online/hybrid content
- Advanced Health Assessment simulations – explore possibility of collaborating with fine arts
- Advanced Practice Faculty Practice – Downtown Storrs
- Post-MS certificate concentration – explore market need, feasibility (placements)
- MS with Midwifery Concentration with Baystate – discussing with Grad School
- Graduate follow up surveys and data collections processes – align with Evaluation Blueprint