Nursing Program

APRC 1997-1998

Section 1 of 8

FERRIS STATE UNIVERSITY
DEPARTMENT OF NURSING

BACCALAUREATE NURSING PROGRAM

B.S.N. PROGRAM REVIEW REPORT

Submitted to

THE ACADEMIC PROGRAM REVIEW COUNCIL

September 1997

TABLE OF CONTENTS

APPENDICES

INTRODUCTION

This report represents a comprehensive review of the Bachelor of Science in Nursing (BSN) program within the College of Allied Health Sciences (CAHS). The review process was conducted according to the guidelines provided by the Academic Program Review Council (APRC). This report reflects the data analysis, conclusions and recommendations of the BSN Program Review Panel (PRP) and is submitted in compliance with APRC guidelines. The members of the PRP for the BSN program were:

Gary Burkholder, Department of Nursing Faculty

Mary Roehrig, Department of Nursing Faculty

Sally Johnson, Nursing Department Head

Beth Daugherty, Nurse Manager, Mecosta County General Hospital

Doug Fonner, Biology Faculty

Julie Coon, Department of Nursing Faculty, PRP Chair

SECTION 1

OVERVIEW OF THE PROGRAM

History of the BSN Program

The Department of Nursing at Ferris State University came into existence in 1969 with the introduction of a career ladder nursing program. An associate degree program was developed, the first year of which incorporated a practical nurse curriculum, with the second year providing the education needed for the student to take the Registered Nurse (RN) Licensure Examination. As well as accepting students for the two-year associate degree program, Ferris State University accepted licensed practical nurses into the second level of the program, where they would complete the requirements to become registered nurses in one calendar year.

With the strong departmental and university history of career mobility programming, it was logical for the faculty to identify and address the need for RN career mobility. In November 1978 the Nursing Study Committee recommended the development of the RN to BSN completion program. Dr. Helen Johnson, Purdue University and Dr. Dorothy Reily, Wayne State University, served as consultants during the planning phase of the new program which was implemented in Fall 1983. This transition eliminated the PN to ADN option.

The first off-campus site was implemented on a part-time basis in Alma, MI. Full and part time on-campus sites were initiated in Muskegon and Ludington/Manistee. In September 1986 three additional off-campus sites were

launched in Elk Rapids (now the Traverse City site), Jackson and Dowagiac/Niles.

Results of surveys and program evaluation indicated continued interest and large enough numbers to justify repeat programming in many sites. In addition to the above sites, the group which started in Alma has been moved further east to the Midland/Saginaw area. The Ludington/Manistee site was discontinued after one rotation as it is a rural area with a small nursing population. A survey is currently being conducted in response to requests to return to both Alma and Ludington/Manistee and to changing enrollment patterns in determining future sites.

The BSN program received full initial accreditation from the National League for Nursing (NLN) in 1989. The Department is currently in the process of seeking reaccreditation. The NLN site visit occurred in April 1997, at which time the BSN program was given a very favorable review by the site visitors, with recommendation for full accreditation for another eight years. The process will be completed with the final decision regarding continued accreditation status to be made in October.

The Department of Nursing opened a Nursing Center when the RN to BSN program was implemented. There were three goals associated with its operation: a site for students to be involved in practice, a site for faculty to role model nursing practice and to maintain current skills, and a site for providing community service.

The Nursing Center enjoyed several years of University support in the

form of a Director, a secretary, faculty paid time to practice and indirect support. The Nursing Department used the income from the Center for Departmental needs. However, during a time of fiscal constraint at the University, support for the Center was withdrawn. Faculty volunteered to continue to provide care to clients of the community. However, the majority of the RN to BSN students were off-campus and required practice in the Nursing Center became very impractical. In the Spring of 1996 the Nursing faculty re-evaluated the goals of the Nursing Center, their commitment and the University's commitment to it, the quality of the care provided, and especially the value to the students in the program. It was decided at that time to close the Nursing Center.

Department of Nursing Faculty

To meet the teaching needs of the program, the Department of Nursing has nine full-time faculty positions. Please refer to Appendix A for the profiles of full time faculty and curriculum vitae for all current full-time faculty. All of the faculty members teaching in the baccalaureate program hold an earned master's degree in nursing. Three full time and one full time temporary members of the Department of Nursing faculty are completing doctoral degrees. Instructional assignments are made with faculty educational preparation and expertise in mind. Experiential qualifications include continuing education, certification in advanced practice, employment as practitioners and prior employment at other universities or colleges. Please refer to individual faculty listings of continuing education and academic credits in personal vitae (Appendix A) indicating recent efforts to maintain nursing knowledge and clinical expertise.

Faculty numbers are sufficient for clinical and classroom instruction, advisement of students and representation on Department, College and University committees. Individual faculty members estimate that approximately 75% of their time is utilized on activities directly related to their teaching responsibilities, 15% for student advisement and 10% on activities related to Department, College and University Committees. This utilization of faculty has afforded faculty/student ratios in the clinical setting of no greater than one to twelve and lecture sections are capped at 20, 30 or 40 depending on class content. All off campus students are part time and do not have clinical every semester which permits maintenance of these instructor to student ratios. Most commonly, Masters prepared part-time faculty are employed under the direction of a full-time faculty member to augment clinical instruction needs when necessary.

Full-time and part-time faculty assignments to the BSN or ADN program vary from semester to semester according to faculty preparation and course offerings. This full-time and part-time personnel mix and the student-faculty ratio allows the department to meet the objectives of having the majority of the didactic courses and clinical instruction taught by full-time faculty. Part-time faculty assist in some courses by teaching clinical groups both on and off campus. With full-time faculty in nearly every nursing course, both on and off campus, program continuity and quality is maintained.

Administration of the BSN Program

The administrator of the nursing unit, Dr. Sally Johnson, holds a Diploma

in Nursing from Blodgett Memorial Hospital School of Nursing, a Bachelor's Degree in Allied Health Teacher Education from Ferris State University, a Master's Degree in Nursing from Witchita State University, and a Doctorate in Educational Leadership from Western Michigan University.

Dr. Johnson has had experience in baccalaureate education at Ferris State University for 10 years. Initial appointment at the University was in January 1987 as the Outreach Coordinator for the RN to BSN program. Development of clinical agency Affiliation Agreements, informal networks, formal articulation agreements with community colleges, assessments for future program development, library and other resources, and student recruitment and retention were all Coordinator responsibilities.

Since 1991, Dr. Johnson has been the Department Head for Nursing. During that time there have been minor and major curriculum changes, implementation of distance education technologies, continuing increase in enrollment, enhanced faculty development through formal and informal learning opportunities, development of an on-going 5 year plan, an award of a grant to enhance immunization education in Michigan nursing schools and most recently, recommendation for continued full accreditation through the NLN.

Mission of the BSN Program

The philosophy of the Department of Nursing (Appendix B) addresses the faculty's belief about the individual and society, the human health experience, professional nursing, teaching and learning. The philosophy provides a foundation for change in response to new directions within the profession of

nursing. The mission statement of the nursing department is reflected in the philosophy. The philosophy of the Department of Nursing directs both the content of the Bachelor of Science in Nursing curriculum and the instructional methodologies by which the content is presented. The faculty believes that learning is an internal, self directed, lifelong process that can occur in a variety of settings and that students have responsibility for their own learning. Teaching methodologies that utilize critical thinking, problem solving, and active learning processes are applied to assist the nursing student to become a professional person possessing these essential skills.

The purpose of the Bachelor of Science in Nursing program is to prepare a professional nurse generalist to function as a practitioner in a diverse, multicultural society. The nursing curriculum has the following terminal objectives:

- Applies knowledge synthesized from nursing sciences and liberal arts into the practice of nursing.

- Provides nursing to a diverse multicultural population across the life span at various points on the health continuum in a variety of settings.

- Utilizes the nursing process as a basis for practice.

- Collaborates with health professionals and consumers in a variety of roles to promote an optimal level of health for individuals, families, groups, and communities.

- Demonstrates personal and professional accountability in nursing practice.

- Integrates research findings into the practice of nursing.

Impact of the BSN Program on the University, State of Michigan and Nation

The Department of Nursing Mission and Goals are consistent with the Mission and Goals of the University, the Academic Affairs Division, and the College of Allied Health Sciences, as reflected in the chart found in Appendix C which takes excerpts from each statement. As this chart demonstrates, the BSN program addresses each component of the University mission. The BSN program is an exemplary example of Ferris State University's unique service to the population of Michigan in regard to career mobility.

With repeated requests from areas throughout the state, FSU has expanded from a University within a rural setting to one which may encompass any area of the State. Each site presents a unique population for clinical focus for the BSN program. For example, the Muskegon area, well known for fruit and vegetable production, may offer study and practice of migrant populations. Other areas provide increased racial diversity or ethnic clustering of populations. These variations are often studied, assessed, and presented in the classrooms. Students are eager to explore topics such as the homeless or the effects of deinstitutionalization of the mentally ill. The off-campus sites of the BSN program were initiated and expanded as a reflection of the institutional policy addressing diversity and meeting the educational needs of the state of Michigan wherever we are able to provide service.

On a national level, the latest American Association of Colleges of Nursing survey (AACN, 1997) demonstrated that amid dropping enrollment rates in associate degree, diploma and generic baccalaureate nursing programs, there

was a continued increase in RN-to-BSN program enrollments. In addition, the highest employment rates at graduation were realized by programs for registered nurses with associate degree or hospital diplomas who are returning to school to pursue the Bachelor of Science degree in nursing (BSN). These findings are also supported by FSU Department of Nursing surveys of graduates.

The changing landscape of health care has impacted the outlook for nurses in the future. The most noticeable trend is the change in practice sites for nurses, which is moving from the acute care setting into the community. The BSN is considered to be the entry level for community-based nursing practice.

These trends indicate that the Ferris BSN program will continue to address the needs of the health care community and the profession of nursing by providing viable options for associate degree and hospital diploma nurses in terms of career mobility. In addition, the growing demand for advanced practice nurses also serves as a catalyst for nurses to obtain the BSN degree as an academic base for Masters in Nursing programs (MSN).

Future of the BSN Program

The BSN program has functioned successfully as an upper division program for registered nurses for thirteen years. Ferris has become known among the nursing community as a leader in the arena of RN-to-BSN education. At the present time, there are ten off-campus sites where faculty travel to deliver instruction. These sites are based upon a part-time schedule which allows the students in each site to take courses one evening a week over ten semesters to complete the curriculum. In addition, each fall a new campus site is started in

conjunction with a site in Grand Rapids at the Applied Technology Center. With this combined site (Big Rapids and Grand Rapids), faculty teach through distance education technology from either site, often rotating on a weekly basis. Students in these sites may opt to complete their program requirements on either a part time for full time schedule.

This variety of options has allowed the Ferris BSN program to remain viable in a climate which is becoming increasingly competitive. Please refer to Appendix D for On campus and Off campus schedules for the BSN program.

In order to continue to compete on the cutting edge of nursing education, the Department of Nursing is currently engaged in several activities which are intended to provide future direction for the program. In addition to the ongoing plan for systematic evaluation of the BSN program (Appendix E), a needs assessment is currently being conducted to help to determine degree of interest in the BSN program in various regions of the State, as well as to guide in scheduling options for the future. In addition, an ad hoc committee of nursing department faculty has been appointed to investigate options for the BSN program in the areas of technology, and futuristic trends in health care and the profession of nursing. This committee will report to the entire nursing department faculty in December 1997, with recommendations for the future in regard to the BSN program.

Administrative Program Review

The Administrative Program Review form, as requested of the APRC has been completed for the BSN program by Dr. Sally Johnson, Department Head.

ADMINISTRATIVE PROGRAM REVIEW

Program/Department:___Baccalaureate of Science in Nursing (BSN)_____

Date Submitted: _____August 5, 1997_____Dean:___Dr. Isabel Barnes_____

Please provide the following information:

	Fall 1992	Fall 1993	Fall 1994	Fall 1995	Fall 1996
Tenure Track FTE	8	8	9	9	9
Overload/Supplemental FTEF	0	0	.75	.66	1.82
Adjunct/Clinical FTEF (unpaid)	0	0	0	0	0
Enrollment on-campus total*	6	24	10	8	48
Junior	157	223	253	187	172
Senior	45	42	104	64	70
Enrollment off-campus*	196	241	347	243	194

* Use official count (7-day count for semesters, 5-day count for quarters).

Financial

Expenditures*	FY 92	FY 93	FY 94	FY 95	FY 96
Supply & Expense	NA	7383.95	7385.91	5655.18	10,948.56
Equipment (included S&E)	NA	same	same	same	same
Gifts & Grants	0	0	0	0	0

* Use end of fiscal year expenditures.

Other

	AY 91/92	AY 92/93	AY 93/94	AY 94/95	AY 95/96
Number of Graduates*: - Total	45	42	104	64	74
- On campus	8	6	35	14	12
- Off campus	37	36	69	50	62
Placement of Graduates	NA	NA	NA	NA	NA
Average Salary	NA	NA	NA	NA	NA
Productivity - Academic Yr. Ave.	NA	NA	NA	NA	NA
- Summer	NA	NA	NA	NA	NA
Summer Enrollment	142	151	89	167	218

* Use total for academic year (F,W,S)

Areas of Strengths:

NLN accredited for 8 years
Scheduleing for working adults
Full time faculty teach at all sites
Personalized advising and regular contact with students

Areas of Concern:

Reduced departmental administrative support
Lack of resources to explore alternative offering options

Future Goals (please give time frame):

1.   Enhance customer service

      1997-99: Improve student graduate & employer surveys and the use
            of the feedback for program improvement

2.   Improve outcome assessment

      1997-98: Enhance systematic evaluation plan
      1998-99: Implment systematic evaluation plan

3.   Seek additional position of program coordinator 1997-98

4.   Seek resources to enhance faculty devleopment opportunities to assure
      currency (ongoing)

5.   Seek alternative technologic advancements (ongoing)

6.   Explore new program options 1997-98.

Recommendations:

1.   Establish the position of program coordinator.

.

SECTION 2

GRADUATE FOLLOW-UP SURVEY DATA

Purpose

The purpose of this activity is to learn from the graduates their perceptions and experiences regarding employment based on program outcomes. The goal is to assess the effectiveness of the program in terms of job placement and preparedness of the graduate for the marketplace. Survey of graduate perceptions of the BSN program has always been an integral component of the systematic plan for program evaluation (Appendix E).

Program satisfaction was selected by the faculty of the Department of Nursing as one of the optional criteria to be addressed in the Self-Study Report for the recent National League for Nursing accreditation process. Program satisfaction is defined by the faculty in the Department of Nursing as the degree to which the program meets the expectations of its constituencies. One very important constituency is the program graduate. Program satisfaction is congruent with the Department of Nursing philosophical belief that "learning is an internal, self-directed, lifelong process resulting in behavioral change...which is best achieved when an atmosphere of mutual trust has been established between the student and teacher."

Method of Data Collection

As an integral component of systematic program evaluation (Appendix E) The Graduate Survey (Appendix F) is mailed to graduates of the BSN program

approximately six months after graduation. The Graduate Survey requests data related to employment specific to site, salary, speciality area of practice, number of years of licensure and practice. In addition the survey asks graduates to compare themselves with other BSNs regarding specific professional practice criteria. The survey also requests other information related to job changes and plans for further education following completion of the BSN program. In addition, other demographic data are requested to update graduate files. The use of this survey instrument has been helpful in terms of tracking graduates according to practice areas and comparing the data to trends that are emerging in health care. In addition, the instrument provides the graduate with an opportunity for an objective self-assessment, according to professional criteria. Overall, graduate surveys have been positive regarding feedback about program effectiveness in preparing graduates for role changes in professional nursing practice.

The only difficulty encountered with this approach to data collection is in regard to the low response rate which is typical with such survey techniques that are conducted after graduation, as completion and return of the survey is voluntary. Often, the graduate does not inform the department of address changes and thus some surveys are returned, unopened. However, in spite of these obstacles, a sampling of graduates is always obtained with each cycle of evaluation. The Department of Nursing has a very consistent alumni tracking process which has proven to be very beneficial to this process as well.

Findings

Table 2-A reflects graduate survey data from alumni in five different BSN sites over a period from 1992 to 1995, which were compiled for the 1996 NLN self-study report. The data from the Muskegon II site (n=22) was collected in 1992; the data from Jackson II (n=20) and Traverse City II (n=17) sites were collected in 1993; the data from a campus site (n=6) was collected in 1994; and the data from the Midland II (n=11) site was collected in 1995. The diversity of sites and time periods provides a broader cross section of date throughout through the State of Michigan among Ferris BSN graduates. The data obtained by the survey was analyzed by the Ferris Assessment Services department to identify patterns and trends.

Unfortunately, as with most surveys, the limited responses do not reflect all graduates of the program. However, some interesting trends are evident when examining the data available. As an upper division program for RNs, most graduates of the program are already employed. However, changes in that employment status are very common upon completion of the program, as 46% of the respondents indicate a change in either job setting, position or responsibility. Although more graduates have been noted to be moving into community practice settings in recent years, the acute care setting is still the most common clinical practice setting for BSN graduates (49%). Although 54% report that they remain in their original employment setting and position, many have indicated that attaining their BSN was a requirement for maintaining this position. This is supported by the high percentage (63%) who indicate that they hold

administrative positions. Many other graduates climb the administrative ladder within the organization they were previously employed or even in other organizations after graduation from the program. Most of the respondents indicate that they are employed full time in nursing and speciality clinical areas remain diverse. A very significant finding is that a significant number of graduates (68%) elect to pursue graduate study, as evidenced by indicating that they are either currently enrolled or plan to enroll within the next five years.

Graduates are also asked to rate themselves regarding how they perceive they compare to other BSN prepared nurses. The areas of questioning represent a wide variety of clinical practice competencies, communication skills and cognitive skills in the area of clinical decision-making. Table 20-B demonstrates these findings from graduate surveys collected from 1990-1995, for a sample of 63 graduates. Over fifty percent of the graduates reported that they felt they were "better" when compared to other BSN graduates on application of research findings, critical thinking, collaboration, facilitative interaction, leadership and management skills and assuming responsibility for self-direction and growth. Fewer than three percent reported that they felt they were "less" well prepared when compared to other BSN graduates in any category.

Graduates are also surveyed to elicit their responses regarding their satisfaction level with program variables such as advising, counseling, teaching, and general communication issues. Table 2-C reflects the findings related to these variables for 174 graduates from 1990-1995.

TABLE 2-A

Current Employment Settings and Positions Reported by Alumni 1992-1995

EMPLOYMENT VARIABLES		# of Respondents n=76	Percent of Sample
STATUS:	Full Time in nursing	49	64
	Part time in nursing	14	18
	Not in Nursing	00	00
	No Response	13	18
SETTING:	Acute Care	37	49
	Community Agency	12	16
	Extended Care	03	04
	No Response	24	31
SPECIALITY:	Community Health	05	07
	ICU / CCU	09	12
	Geriatrics	03	04
	Medical Surgical	09	12
	Mental Health	04	05
	OB / GYN	05	07
	Pediatrics	02	03
	Emergency / Trauma	02	03
	Operating / Recovery	00	00
	Home Health Care	07	09
	Other / No Response	20	13
POSITION:	Administration	44	63
	Staff Nurse	24	36
	Instructor	04	05
	Clinical Specialist	04	05
PLANS FOR EDUCATION:			
Continuing Education Programs		29	38
Graduate Study - Plans for		45	59
Graduate Study - Enrolled		07	09
None		12	16
EMPLOYMENT CHANGES:			
Same employer / position		41	54
Same employer / change in position or responsibility		16	21
Added part-time responsibilities		10	13
Different employer / position		09	12
WAGES:			
Same		23	30
Increased		36	47
Decreased		03	04

TABLE 2-B
Reported Level of Program Satisfaction with Acquired Knowledge and Skills of Graduates (n=63) 1990-1995

FSU BSN'S self-eval of their knowledge & skill compared to BSNs working in their agency with same amount of work experience	Better		Same		Less		No Answer	
	n	(%)	n	(%)	n	(%)	n	(%)
Use of nursing model as a basis for practice	27	(43)	29	(46)	1	(0.02)	6	(10)
Application of research findings to own practice	33	(52)	26	(41)	1	(0.02)	3	(0.05)
Use of critical thinking	33	(52)	26	(41)	1	(0.02)	3	(0.05)
Collaborates with others on the Health Care Team	33	(52)	27	(43)	0		3	(0.05)
Ability to Assess/analyze	30	(48)	29	(46)	1	(0.02)	3	(0.05)
Ability to make nursing diagnoses	26	(41)	34	(54)	0		3	(0.05)
Ability to make a plan	29	(46)	31	(49)	0		3	(0.05)
Ability to implement a plan	31	(49)	28	(44)	1	(0.02)	3	(0.05)
Ability to evaluate & replan	27	(43)	32	(51)	1	(0.02)	3	(0.05)
Ability to interact in a facilitative and purposeful manner with clients and other team members	35	(56)	27	(43)	1	(0.02)	3	(0.05)
Leadership and management Skills	32	(51)	28	(44)	0		3	(0.05)
Practices within ethical standards of profession	23	(37)	37	(59)	0		3	(0.05)
Assumes responsibility for self-direction, personal & professional growth	33	(52)	25	(40)	2	(0.03)	3	(0.05)

TABLE 2-C
Summary of Reported Level of Graduates' Satisfaction with
Advising, Counseling, Teaching and Communication (n=174) 1990-1995

Program Variables	Above Avg-Excel		Average		Poor-Below Avg		No Answer	
	n	(%)	n	(%)	n	(%)	n	(%)
Orientation to the BSN program	53	(31)	89	(51)	26	(15)	6	(3)
Evaluation of transcripts & counseling prior to program admission	55	(32)	83	(48)	29	(16)	7	(4)
Faculty presentation of theory	53	(31)	72	(41)	43	(25)	6	(3)
Non-nursing presentation of theory (general ed)	72	(41)	62	(36)	30	(17)	10	(6)
Clinical competence of faculty	90	(52)	47	(27)	4	(2)	33	(19)
Faculty grading policy	68	(39)	79	(45)	5	(3)	22	(13)
Availability of faculty to answer questions	101	(58)	61	(35)	5	(3)	7	(4)
Faculty sensitivity to individual learning needs	101	(58)	53	(31)	13	(8)	7	(4)
Adequacy of faculty to answer advising questions	83	(48)	64	(37)	18	(10)	9	(5)
Communication between student & nursing dept.	56	(32)	90	(52)	21	(13)	7	(4)
Communication between student & GILL	50	(32)	89	(51)	26	(15)	9	(5)
Communication between student and advisor	53	(31)	79	(45)	30	(17)	12	(7)

Over seventy-seven percent of the graduates evaluated advising, counseling and teaching as average to excellent. It is noted that eighty-eight percent of the graduates reported that nursing faculty presentation of theory was above average to excellent. Less than seventeen percent of the graduates who responded to the surveys reported advising, counseling and teaching to be

below-average. In regard to communication issues while students in the BSN program, over seventy-five percent of the graduates reported that communication was average to excellent with the nursing department, their nursing advisor and GILL. Less than seventeen percent reported communication with these entities below average to poor.

The nursing department is also interested to know if students find the mechanics of progression through the program such as the processes of registration, buying textbooks and the format of course offerings in various outreach sites to meet their needs. Table 20-D reflects the responses of the same 174 graduates from 1990-1995 to these processes of the program.

Approximately eighty percent of the graduates reported that the registration, purchasing of books, process was average to excellent. Seventy-two percent felt that the availability of journals and books in the library was average to excellent also. Approximately ninety percent of the graduates felt that the format for course offerings was average to excellent.

TABLE 2-D
Summary of Reported Level of Graduates' Satisfaction with Registration, Textbook Purchase, and Format of the BSN Course Offerings While a Student in the Ferris BSN Program (n=174) 1990-1995

Program Variables	Above Avg-Excel		Average		Poor- Below Avg		No Answer	
	n	(%)	n	(%)	n	(%)	n	(%)
Registration Process	89	(51)	71	(41)	7	(4)	7	(4)
Purchasing books	55	(32)	83	(48)	55	(32)	3	(1)
Availability of Journals/ Books in Library	47	(27)	78	(45)	43	(25)	6	(3)
One day/evening per week format	129	(74)	34	(20)	5	(3)	6	(3)
Length of each class period	76	(44)	78	(45)	13	(8)	7	(14)

Ferris graduates were asked to report what quality they believed the BSN program was in terms of preparing them for graduate school. Sixty three graduates responded and Table 2-E summarizes that data.

TABLE 2-E
The Quality of the Ferris BSN program to Prepare Students for Graduate Education as Reported by Graduates (n=63) 1990-1995

Comparison Data	Poor- Below Average		Average		Above Average- Excel		No Answer	
	n	(%)	n	(%)	n	(%)	n	(%)
The quality of the Ferris BSN Program to prepare Students for Graduate Education	1	(2)	18	(29)	36	(57)	8	(13)

Fifty-seven percent of the graduates reported that the Ferris State University BSN program prepared them at an above average to excellent level for graduate education. Only two percent of the graduates reported that they had been prepared for graduate education at the poor to below average level.

Conclusions

The results of the graduate surveys reflect that the BSN program at Ferris is perceived to be instrumental in providing graduates access to administrative positions and graduate study. These outcomes reflect program success in regard to preparing students for graduate study or for the role of the nurse generalist.

Consistently the Ferris graduates report that they feel their nursing skills are at least as good or better than other BSN prepared nurses with whom they work. These perceptions reflect graduate satisfaction with the BSN program in regard to the attainment of useful professional skills.

The majority of Ferris BSN graduates also retrospectively rate the affective and mechanical processes of the program as being average to excellent, suggesting that the processes of advising, counseling, teaching and communication are facilitative to the student as he or she progresses through the program. In addition, graduates report that they are pleased overall with the areas of registration, textbook purchase processes, library resources and course format offerings. This feedback has provided significant reinforcement for the current methods utilized to attain program goals. No significant concerns have

been noted as a result of these surveys to date.

In summary, graduate data has been highly valued for the insights gained about the program from the consumer viewpoint. However, the low return rate of these surveys has raised some concern for the quantity of data available to the faculty for program evaluation. As a result, the graduate survey tool is in the process of being revised with the specific purpose of shortening the response forms to provide more concise data and to eliminate data that has been found to be less useful. It is anticipated that this more user-friendly form will increase the response rate in future evaluation cycles.

SECTION 3

EMPLOYER FOLLOW-UP SURVEY DATA

<u>Purpose</u>

This activity is intended to aid in assessing the employers' experiences

with graduates and their perceptions of the program itself. The employers of

graduates of the BSN program represent another constituent for whom

satisfaction with program graduates is measured through the systematic plan for

evaluation of the BSN program (Appendix E).

<u>Method of Data Collection</u>

Graduates at the time of their survey are asked permission to survey their

employers. Surveys are only sent to employers if permission is given by the

graduate. If the graduate reports his or her place of employment and provides

permission for the employer to be surveyed, The Employer Survey (Appendix G)

is then sent which asks the same or similar questions of employers in regard to

their comparisons between the new Ferris BSN graduates and other BSN

graduates. This method, which depends on the number of graduate survey

responses, often yields very small sample numbers for data analysis.

<u>Findings</u>

Table 3-A provides a summary of data collected from forty-four employers

from 1992 to 1995 in regard to their perceived level of satisfaction with acquired

knowledge and skills of Ferris BSN graduates as compared with other BSN

nurses is the agency of employment.

TABLE 3-A
Reported Level of Program Satisfaction with Acquired Knowledge and Skills by Employers 1990-1995

FSU BSN's Employers' evaluation of their knowledge and skills as compared to other BSN graduates	Better		Same		Less		No Answer	
	n	(%)	n	(%)	n	(%)	n	(%)
Use of nursing model as basis of practice	24	(55)	19	(43)	1	(2)	0	
Application of research findings to own practice	19	(43)	18	(41)	2	(5)	1	(2)
Use of Critical Thinking	9	(21)	20	(46)	5	(11)	10	(23)
Collaborates with others on the health care team	20	(46)	14	(32)	5	(11)	5	(11)
Ability to assess/analyze	20	(46)	14	(32)	5	(11)	4	(9)
Ability to make nursing diagnoses	18	(41)	17	(39)	4	(9)	5	(11)
Ability to make a plan	18	(41)	17	(39)	4	(9)	5	(9)
Ability to implement a plan	18	(41)	17	(39)	4	(9)	5	(9)
Ability to evaluate & replan	18	(41)	17	(39)	4	(9)	5	(9)
Leadership & Management skills	24	(55)	18	(41)	4	(9)	4	(9)
Practices within ethical standards of profession	13	(30)	22	(50)	3	(7)	6	(4)
Assumes responsibility for self-direction, personal & professionals growth	24	(55)	14	(32)	3	(7)	3	(7)

Table 3-A reveals that over fifty percent of employers responding reported that Ferris BSN graduates when compared to similar BSN graduates in their agency were better able to use a nursing model as a basis for practice and had better leadership and management skills. Approximately forty percent of employers reported that Ferris BSN graduates' knowledge and skills such as critical thinking, application of research findings and use of the nursing process were the same as other new BSN graduates. Only five percent or less found new Ferris graduates to have less knowledge and skills than other new BSN graduates.

Comparing these data to those of the graduates responding it is noted that both groups reported approximately fifty percent of the graduates were better than other new BSN graduates. These results are viewed favorably not only in terms of the high percentages, but that both employers and new graduates make similar reports. Table 3-B reflects graduates' self evaluation and the evaluation of employers when comparing overall ratings of Ferris BSN graduates to other new BSN graduates.

Fifty-nine percent of graduates rated new Ferris graduates in the High to Very High category compared to other new BSN graduates. Of the employers who responded, a majority rated the new Ferris State University BSN graduates in the very-high category compared to other new BSN graduates. It is also noteworthy that although fifteen percent of the graduates responding to the survey rated themselves as low to very low as compared to other BSN graduates,

no employers rated Ferris BSN graduates as lower than other BSN graduates.

TABLE 3-B
Reported Overall Rating of Ferris BSN Graduates
Compared to Other New BSN Graduates (1990-1995)

Rating of FSU graduates compared to other new BSN graduates	Very Low to Low		Average		High to Very High		No Answer	
	n	(%)	n	(%)	n	(%)	n	(%)
Self Evaluation by BSN Graduate (n=71)	11	(15)	6	(8)	4	(59)	13	(18)
Employer Evaluation (n=14)	0	(0)	3	(21)	2	(14)	9	(64)

Conclusions

In summary, employer data has been highly valued for the insights gained about the program from the employment frame of reference. The data received from those employers of BSN graduates from 1990 to 1995 reflect very favorable impressions of the outcomes of the program in terms of the overall ability of Ferris BSN graduates as compared to other BSN graduates with similar experience. However, the small number of responses is still a concern for this population data source. This low return rate of employer surveys has raised some concern for the quantity of data available to the faculty for program evaluation. As a result, the employer survey tool has is being recently revised with the specific purpose of shortening the response forms to provide more concise data and to eliminate data that has been found to be less useful. In addition, the number of responses

with "no answer" has indicated that perhaps employers are not clear about what

some of the questions are asking in regard to graduate performance in the

practice setting. It is anticipated that a more user-friendly form will increase the

response rate in future evaluation cycles.

SECTION 4

STUDENT EVALUATION OF BSN PROGRAM

Purpose

The purpose of this activity is to obtain information regarding quality of instruction, relevance of courses, satisfaction with program outcomes based on students' own expectations. The survey is also intended to seek student suggestions on ways to improve the effectiveness of the program and to enhance fulfillment of their expectations.

The systematic plan for evaluation of the BSN program (Appendix E) provides for multiple mechanisms for student evaluation of the program. At the completion of each nursing course, student evaluations are solicited in regard to course organization, course instruction and clinical instruction. These evaluations are utilized by individual instructors as well as the departmental curriculum committee to monitor the program for logical organization and internal consistency. For the purpose of this report, however, the Program Review of Occupational Education (PROE) format was utilized to attain data from students currently enrolled in the BSN program. The PROE form addresses program evaluation criteria to include courses, objectives, teaching methods, related courses, clinical experiences, career planning, job success information, placement services, nursing instructors, instructional support services, instructional lectures and laboratory facilities, instructional equipment and materials. In addition, students are asked to respond to what they feel are the

greatest strengths and weaknesses of the program.

Data Collection Method

The PROE format was modified to become The Student Perceptions of the BSN Program form (Appendix H). These surveys were distributed to students in all current outreach sites where a nursing course was offered during the Winter 1997 semester. Nursing faculty distributed the survey forms and collected them on the same day. A total of seventy-five students in the various BSN sites responded to the survey. The surveys were tallied and the results are summarized in this section of the report.

Findings

Of the seventy-five responses, sixty-five of the students indicated that they were attending the program on a part-time basis, while ten indicated that they were completing on a full-time basis. Responses were obtained from Grand Rapids (n=8), Big Rapids (n=9), Traverse City (n=14), Midland (n=24) and Niles (n=20).

The number of categorical responses to each survey item are found on the next pages. Following the survey form, the student's written comments are also presented as perceived strengths, weaknesses and program recommendations related to the general areas of curriculum, instruction, faculty, scheduling, structure of the program, location and other general program issues.

Ferris State University
Academic Program Review - BSN
Student Perceptions of the BSN Program

INSTRUCTIONS: Please rate each item using the following guide:

1 = *POOR* is seriously inadequate, bottom 5 to 10 %
2 = *BELOW EXPECTATION* is only fair, bottom one-third
3 = *ACCEPTABLE* is average, the middle-third
4 = *GOOD* is a strong rating, top one-third
5 = *EXCELLENT* means nearly ideal, top 5 to 10%
6 = *DON'T KNOW* means you lack sufficient knowledge to evaluate or does not apply to this program

CRITERIA TO BE EVALUATED FOR BSN	1	2	3	4	5	6
1. Courses in the BSN program are: * Available and conveniently located		3	13	20	39	
* Based on realistic prerequisites.			22	34	19	
* Available at moderate cost.	3	9	36	21	6	
2. Written objectives for courses in the BSN Program: * Are available to students.	2		8	34	31	
* Describe what you will learn in the course.		3	10	39	23	
* Are used by the instructor to keep you aware of your progress.	2	7	11	35	20	
3. Teaching methods, procedures and course content: * Meet your professional needs interests and objectives.	1	4	17	35	18	
* Provide supervised practice for developing job skills.	2	6	19	29	19	
4. Related courses (Such as English, Mathematics, Science) are: * Pertinent to professional instruction.		6	22	25	22	
* Current and meaningful to you.	1	5	22	24	3	

CRITERIA TO BE EVALUATED FOR BSN	1	2	3	4	5	6
5. *Clinical experience in the BSN program is:* * Readily available at convenient locations.	1	5	18	28	18	5
* Coordinated with classroom instruction.	1	3	15	33	23	
* Coordinated with preceptor supervision.			20	33	22	
6. *Career planning information:* * Meets your needs and interests.	2	3	21	25	11	13
* Helps you plan your program.	4	6	20	22	13	10
* Helps you make career decisions or choices.	4	6	20	22	15	8
* Helps you understand your rights and responsibilities as a member of the profession of nursing.	2	5	15	24	21	8
* Helps you evaluate your job opportunities in relation to salary, benefits and conditions of employment.	2	9	24	12	13	15
* Is provided by knowledgeable, interested staff.	2	3	15	26	16	13
* Explains nontraditional professional opportunities for both genders.	2	6	19	19	18	11
7. *Job Success information on former students in the BSN program:* * Is provided to help you make career decisions.	7	13	16	12	12	15
* Indicates how many job opportunities there are in your discipline.	8	11	17	9	11	19
* Identifies where these job opportunities are located.	8	14	16	13	3	21
* Tells about job advancement opportunities.	8	13	17	10	10	17
8. *Placement services are available to:* * Help you find employment opportunities.	6	7	16	6	7	33
* Prepare to you to apply for a job.	4	9	15	9	9	29
9. *Nursing Instructors:* * Know the subject matter and professional nursing guidelines.	1	2	11	25	36	

●

Nursing Program

APRC 1997-1998

Section 2 of 8

CRITERIA TO BE EVALUATED FOR BSN	1	2	3	4	5	6
* Are available to provide help when you need it.	1	4	10	24	36	
* Provide instruction so it is interesting and understandable.		3	12	27	33	
10. *Instructional support services (such as Tutoring, lab assistance) are:* * Available to meet your needs and interest.	5	3	13	11	14	29
* Provided by knowledgeable interested staff.	3	3	11	11	18	29
11. *Instructional lectures and laboratory facilities:* * Provide adequate lighting, ventilation, heating, power and other utilities.		6	15	28	26	
* Include enough work stations for the number of students enrolled.		2	18	28	27	
* Are safe, functional and well maintained.		3	15	26	31	
* Are available on an equal basis for all students.		3	10	27	35	
12. *Instructional equipment is:* * Current and representative of the industry.	1	2	13	32	22	5
* In sufficient quantity to avoid long delays in use.		6	19	28	22	
* Safe and in good condition.			21	27	22	5
13. *Instructional materials (e.g.,textbooks, Reference books, supplies) are:* * Available and conveniently located for use as needed.		3	19	35	18	
* Current and meaningful to the subject.		2	19	32	22	
* Not biased toward any traditional gender roles.		2	21	33	18	1
* Available at reasonable cost.		9	32	26	8	

What do you feel are the greatest strengths of the FSU BSN program?

Curriculum / Instructional Methods

Excellent course materials

Organized format for classes; Specific guidelines for semester to semester

The program format leads the student through the development process to "professionalism" through education

I feel the FSU BSN program provides an excellent knowledge base for nursing students.

The level of information provided & expectations is in my opinion superior not only to other campus programs, but also to that of generic BSN programs.

Application of education theory of learning to program presentation

Application of critical thinking to nursing process

Review of nursing theory in application to each nursing class

Classes needed that are not within the program clearly identified

Very focused on enhancing professionalism

The group work - I learned a great deal from my classmates

Theory and critical thinking. Although I hate to admit it, the critical thinking has been valuable to my personal and professional life.

Small numbers of students to teacher

Emphasis on individualization

Different perspectives of other students

Researching different subjects; the availability of resources and the knowledge to obtain such information

Prepares me for my graduate study course work

Many facets of nursing amplified

Diverse groups to share experiences

Professional standards introduced & students are encouraged to uphold and strive for these

Paper writing prepares students for master program & how to research topics for these papers.

Building of one class upon another

Interesting classes

Curriculum - the easy access and help to get started into the program

Faculty

Excellent instructors

The Instructors' commitment to the program

Traveling instructors vs teleconference / On sight instructors instead of by TV

Flexible instructors / Instructors are helpful

The BSN professors are very knowledgeable & basically good @ meeting their objectives.

Instructors are excellent - enthusiastic and supportive

Many intelligent instructors

Faculty comments cont.:

The instructors and their knowledge / teaching abilities

The staff as a whole are extremely competent & helpful - truly human & understanding

Certain members of your staff are amazing, flexible, sociable, knowledgeable and able to impart their knowledge upon students in a stimulating & effective way

The nursing subject instructors are Ferris employees, not just someone contracted for that subject that semester

Schedule/ Structure / Location:

Flexibility of schedule

Meets one night a week / very helpful for nurses who work

Tailored for working students

Class consistency - always same night

The flexibility of the tracks of BSN completion are also unique & are compatible with practicing nurses & full time students.

The structure - no need to decide what classes to take and when

Able to work full time and go to school

Class size was conducive to learning

Fairly well organized

Location - close to home

It is conveniently located

The "outreach" approach

Good location for working nurses

Other:

Accessibility to those who have been out of school for years

Toll free #'s for campus bookstore, etc.

Friendly, helpful staff (in all areas) / Access to help

Respects the adult learner/student

Affordable / Cost is reasonable

Realistic expectations

Acceptance of previous nursing credit

Flexibility

Time of class meetings

Excellent at evaluating transcripts & reporting back.

Adaptability, very accommodating, professionalism

Staff is just wonderful, always willing to help

Motivation & support of staff and other students

Thank goodness an outreach nursing BSN program is available on a one day/wk basis. I couldn't have done this otherwise.

Ability to order books over the phone and having them delivered to your home

Accept more classes than other schools (prerequisites)

What do you feel are the major needs for improvement in the FSU BSN program, and what action is required to achieve these improvements?

Curriculum / Instruction
Lectures need to be more geared to the tasks at hand

Many of the classes seem to be not applicable or necessary for the RN to BSN program. For people who have been practicing as nurses for many years some of the material is repetitious or unnecessary.

Would have appreciated more preceptors for clinicals - esp. Family nursing - felt really lost for about 3 weeks. We had preceptors for community nursing and that was so helpful

Less "busy" work / Don't have time to read and learn

Management/Leadership - there is a large amount of clinical - I am not convinced all of this is necessary / 60 hours for NURS 476 clinical too much

More unified grading & criteria scale

Reevaluate pathophys class

English should be first class since so many papers are required in APA

The leadership class was highly geared to adult learning - please look at this class as an example for adult learning

Senior classes need more detailed / specific guidelines or outlines for the major projects & papers

The physical assessment course should have preceptors separate from lecture - to promote greater flexibility for the clinical component. There also needs to be an update of the equipment for student usage & enough for a full class to be productive & not waiting in line to use a piece of equipment

A large television would be more congruent with class sizes of 10 or more (re: distance education courses)

Faculty:
Listen to student concerns about instructors

Better access to advisors - if you are a part-time student, your advisor doesn't have a good handle on what's going on, and many times I have felt I was on my own

Some instructors need to work on their presentation skills to not read from book or notes taken from our text. Use alternative references to lecture to add spice

Every instructor should be evaluated by students each class at end of course - this should be required.

Some of the instructors need to get more organized - but for the most part this isn't a problem

Schedule/ Structure / Location:
Prepare students for next semester subject better, as to amount of time

Schedule / Structure / Location cont.:

Shorten the length of time of program - either make more prerequisites before
     starting the program, or double up on semesters

Have summer off midway through to give a chance to recoup

Program was too long, not enough breaks - very arduous - feeling burnout after 2
     years

Have more concurrent classes at outreach locations (freshman, sophomore, etc.)

Three years is a long time to go for a BSN from an ADN

Need better communication between FSU and students off campus to let them
know where the next class is so that you can possibly catch a class you missed -
     like English

Don't change class times that have been previously established

Class sessions too long; don't feel it was very worker friendly

Add a Flint-area off-campus site for the BSN program

Other:

More communication between main campus and the outreach sites

More one on one contact at least once per year; Phone calls would be an
acceptable method

Would like a little communication from advisors / or secretary re: update on
     program (Individual) course

$ (assume this means the cost is too high)

Should not buy books before class starts - find we don't need some of them -
     have representatives bring books to 1st class for purchase

Need to be more explicit on what classes are needed - I was in the program
     already then had a speech class & math class added

Better defined criteria when attempting to test out of a class

Syllabus and books should be available before classes begin

Other General Comments:

I have been pleased with my education overall.

Overall (this has been) considered a good learning experience for me.

I feel that I am more prepared to be a professional because of this program. I
feel that I have become more goal directed due to this program. Others in the
program share their knowledge from previous experience with me. I feel as
though I'm well prepared for graduate education.

I don't see any needs for improvement for the program, from my perspective.

This program met my needs very well.

General Comments Cont.:

Great program!

Instructors were understanding of work schedules, family responsibilities which made completion of the BSN program a reachable goal.

Thoroughly enjoyed all of it.

Enjoyed the program. Am proud to be a part of this program and recommend it to everyone interested in furthering their education.

I've been very happy with the program and all of my instructors thus far. I hope and assume that this will continue. It's not easy to continue working full-time, and maintain a sane, happy home life (while in school), but Ferris does relieve some of the stress with its many helpful practices and staff.

I have enjoyed the learning and the challenges. It has been an incredible commitment for me and my family. They now share my joy of accomplishment. My growth in the professional behaviors has led to many new opportunities and challenges in my career. I am being rewarded personally and professionally for my effort and growth.

An overall opinion of the FSU nursing program and faculty is four stars ****! I value my educational experiences provided and as a graduating senior would like to thank the staff for their contributions as individuals and a group. Your inspirations & encouragement have provided an excellent example of what nursing is & why I want to be a nurse. Thank you.

When reviewing the tabulated responses to the survey items, it is noted that the in each case the vast majority of the students rated each item at the acceptable to excellent range, suggesting a positive impression of the program overall. There were some categories which are included in the PROE format which are not really applicable to the BSN program at Ferris. The areas of career planning, job success information and placement services are less relevant to the RN to BSN completion student, as these students are usually

already employed during their enrollment in the program, and so, would have little need or demand for these services. For these items, it was noted that a few students rated the program at the poor to below expectation levels, most students still rated the program as acceptable or higher or selected "don't know" and noted that they thought this item was "not applicable" to the BSN program.

The students also provided many useful comments which both praised the program and offered some useful feedback for areas they perceived could use improvement. The comments were listed according to themes which emerged as a content analysis was done. In an effort to conserve space, similar comments were not repeated but it should be noted that many comments were often repeated by many students. For instance, the convenience of bringing the program to an outreach site, one night a week was cited by almost every student making comments. By the same token, a previous problem with acquisition of textbooks and course materials at some outreach sites was expressed many times as a concern.

It is apparent that overall students are very satisfied with the curriculum and instructional processes, the faculty (both nursing and general education faculty), the structure, schedule and locations of the program as well as a variety of variables such as support staff, perceived program flexibility for the working nurse and the adult learner, transcript evaluation and overall quality of the program. The quantity of positive comments attests to the strengths of the program which are also noted throughout this report.

The areas of concern are also very important to evaluate, for these reflect

perceptions of the program which could be construed as a negative reflection on the program. It is encouraging that the negative comments were not as numerous as the positive ones, and these comments were usually only stated by one respondent. The only exceptions, where multiple students made the same comment, were in regard to problems with access to textbooks prior to class, the length of the program, and poor communication between campus and outreach students. Two of these three issues have been identified previously, from other feedback from students and during the student affairs committee meeting with occurs once each semester and includes representatives from each outreach site to attend for the purpose of ongoing program evaluation from the student perspective. The textbook issue has effectively been resolved by GILL and students have not experienced these problems since the Fall 96 semester. The communication problem was discussed at length during the April 1997 student affairs meeting and procedural changes are being implemented for this next academic year. These changes will include more timely information about upcoming nursing classes and more contact with advisors. Each outreach site is advised by one faculty advisor, which has historically been very effective in meeting the needs of each individual group of students.

The concern about the length of the program, was essentially countered 5 to 1 with most students preferring the part-time format. However, the concern regarding breaks in the program could be considered by the faculty as an option for the future. This data provides some useful feedback for faculty to ponder as future plans for the program are formulated. The needs assessment for future

outreach sites will solicit additional data regarding scheduling preferences of potential students.

Conclusions

Overall, it can be concluded that students view the BSN program favorably and are satisfied overall with the program in its current form. Specifically, students indicate that they feel the curriculum is current, applicable to their professional lives and adequate to prepare them for graduate study. Students made many favorable remarks about the integration of critical thinking, nursing theory and nursing standards throughout the nursing courses. The general education courses were also viewed positively. Students were very complimentary of the program faculty, both nursing and general education faculty. Finally, students provided a resounding approval for the structure of the program, the outreach sites and the one day a week format. The concerns raised regarding textbook purchase procedures and perceived communication problems are currently being addressed by the Department of Nursing.

It can be concluded that the RN-to-BSN program at Ferris is meeting the professional needs of registered nurses who desire career mobility in the form of professional advancement or graduate study. This conclusion is evidenced by the high level of satisfaction students report about the program faculty, instructional processes, and structure. This positive student feedback is congruent with the consistent enrollment patterns the program has enjoyed since its inception.

SECTION 5

FACULTY PERCEPTIONS OF THE PROGRAM

Purpose

The purpose of this activity is to assess faculty perceptions regarding the following aspects of the program: curriculum, resources, admissions, standards, degree of commitment by administration, processes and procedures used and their overall feelings.

Faculty perceptions of the BSN program are not specifically obtained on a regular basis, as faculty are continuously involved with the ongoing evaluation of the program as outlined in the systematic Plan for Evaluation of the program (Appendix E). However for the purpose of this report, the PROE format for Faculty Perceptions of the program was used to survey the faculty of the Department of Nursing to determine their perceptions about program goals and objectives, program processes, program resources, as well as strengths and weaknesses of the program.

Data Collection Method

The Faculty Perceptions of the BSN Program form (Appendix I) was distributed to the Nursing Department faculty at a regular faculty meeting in April. Faculty completed the form and returned it to the Program Review Panel by the end of the Winter semester. The results were tallied and are reported in this section of the report.

Findings

Eleven nursing faculty completed the survey. This included nine full-time, tenured faculty members, one full-time temporary faculty member and the Department Head, who also delivers instruction on a part-time basis. The survey form is summarized on the following pages, with each item tabulated according to the number of faculty responses in each category. Faculty comments regarding strengths and weaknesses are then listed.

When reviewing the survey items, it is noted that for each item, a minimum of 82 to 90% of the nursing faculty considered each criteria to be met at an acceptable to excellent level. This would indicate that faculty view the program favorably in regard to goals and objectives, processes and resources.

Strengths of the program were noted to far outweigh the perceived weaknesses of the program from the perspective of the faculty. However, one very common concern noted by most faculty was the loss of the BSN outreach coordinator position during fiscal restructuring of the University. This position provided extensive organization and coordination of the BSN program which addressed many of the issues identified by students in their survey responses related to communication, the mechanics of registration and purchasing textbooks, etc. Much of the coordination for each course has now been assumed by the nursing faculty, resulting in the perception of fragmented services to students and less consistent communication to students each semester. Faculty perceptions were consistent with student perceptions in regard to these concerns.

Ferris State University
Academic Program Review - BSN
Faculty Perceptions of the BSN Program

KEY: 1 = POOR   4 = GOOD
          2 = BELOW EXPECTATIONS   5 = EXCELLENT
          3 = ACCEPTABLE   6 = DON'T KNOW

CRITERIA TO BE EVALUATED FOR THE BSN PROGRAM	1	2	3	4	5	6
GOALS AND OBJECTIVES **1. Participation in Development of BSN Program Plan** *Excellent* - Administration and/or other supervisory personnel involved in developing and revising the college plan for this program seek and respond to faculty, student and community input. *Poor* - Development of the plan for this program is basically the work of one or two persons in the college.		1		2	8	
2. Program Goals *Excellent* - Written goals for this program state realistic outcomes (such as planned enrollments, completions, placements) and are used as one measure of program effectiveness. *Poor* - No written goals exist for this program.					11	
3. Course Objectives *Excellent* - Written measurable objectives have been developed for all courses in this program and are used to plan and organize instruction. *Poor* - No written objectives have been developed for courses in this program.				2	9	
4. Competency Based Performance Objectives *Excellent* - Competency based performance objectives are on file in writing, consistent with employment standards and tell students what to expect and help faculty pace instruction. *Poor* - Competency based performance objectives have not been developed for courses in this program.			2	2	7	
5. Use of Competency Based Performance Objectives *Excellent* - Competency based performance objectives are distributed to students and used to assess student progress. *Poor* - Competency based performance objectives have not been developed for courses in this program.				4	7	

CRITERIA TO BE EVALUATED FOR THE BSN PROGRAM	1	2	3	4	5	6
6. Use of Information on Labor market Needs *Excellent* - Current data on labor market needs and emerging trends in job openings are systematically used in developing and evaluating this program. *Poor* - Labor market data is not used in planning or evaluation.		2	2	2	5	
7. Use of Information of Job Performance Requirements *Excellent* - Current data on job performance requirements and trends are systematically used in developing and evaluating this program and content of its courses. *Poor* - Job performance requirements information has not been collected for use in planning and evaluating.		2		4	5	
8. Use of Profession / Industry Standards *Excellent* - Profession / industry standards (such as licensing, certification, accreditation) are consistently used in planning and evaluating this program and content of its courses. *Poor* - Little or no recognition is given to specific profession/industry standards in planning and evaluating this program.				1	10	
9. Use of Student Follow-up Information *Excellent* - Current follow-up data on completers and leavers (students with marketable skills) are consistently and systematically used in this program. *Poor* - Student follow-up information has not been collected for use in evaluating this program.			2	3	6	
PROCESSES **10. Adaptation of Instruction** *Excellent* - Instruction in all courses required in this program recognizes and responds to individual student interests, learning styles, skills and abilities through a variety of instructional methods (such as small group or individualized instruction, laboratory or "hands on" experiences, open entry/open exit, credit by examination). *Poor* - Instructional approaches in this program do not consider individual student differences.		2	1		8	
11. Relevance of Support Courses *Excellent* - Applicable supportive courses (such as sciences, communication, humanities, etc.) are closely coordinated with this program and are kept relevant to program goals and current to the needs of the students. *Poor* - Supportive course content reflects no planned approach to meeting needs of students in this program.				3	8	

CRITERIA TO BE EVALUATED FOR THE BSN PROGRAM	1	2	3	4	5	6
12. Coordination with Other Community Agencies and Educational Programs *Excellent* - Effective liaison is maintained with other programs and educational agencies and institutions (such community colleges , universities) to assure a coordinated approach and to avoid duplication of meeting educational needs in the area or community. *Poor* - College activities reflect a disinterest in coordination with other programs and agencies having impact on this program.				1	10	
13. Provision for Clinical Experience. *Excellent* - Ample opportunities are provided for related work experiences in the form of clinical experiences for students in this program. Student participation is well coordinated with classroom instruction and clinical supervision. *Poor* - Few opportunities are provided in this program for related work experiences in the form of clinical experiences where such participation is feasible.				3	8	
14. Program Availability and Accessibility *Excellent* - Students and potential students desiring enrollment in this program are identified through recruitment activities, treated equally in enrollment selection, and not discouraged by unrealistic prerequisites. The program is readily available and accessible at convenient times and locations. *Poor* - This program is not available or accessible to most students seeking enrollment. Discriminatory selection procedures are practiced.		1			10	
15. Provision for the Disadvantaged *Excellent* - Support services are provided for disadvantaged (such as socioeconomic, cultural, linguistic, academic) students enrolled in this program. Services are coordinated with program instruction and results are assessed continuously. *Poor* - No support services are provided for disadvantaged students enrolled in this program.			4	4	3	
16. Provision for the Handicapped *Excellent* - Support services are provided for handicapped (physical, mental, emotional, and other health impairing handicaps) students enrolled in this program. Facilities and equipment adaptations are made as needed. Services and facilities modifications are coordinated with instruction and results are assessed continuously. *Poor* - No support services or facilities and equipment modifications are available for handicapped students enrolled in this program.			1	1	1	8

CRITERIA TO BE EVALUATED FOR THE BSN PROGRAM	1	2	3	4	5	6
17. Efforts to Achieve Gender Equity *Excellent* - Emphasis is given to eliminating gender bias and gender stereotyping in this program: staffing, student recruitment, program advisement, and career counseling; access to and acceptance in programs; selection of curricular materials; instruction; job development and placement. *Poor* - Almost no attention is directed toward achieving gender equity in this program.	3	1	2	2	3	
18. Provision for Program Advisement *Excellent* - Instructors or other qualified personnel advise students (day, evening, weekend) on program and course selection. Registration procedures facilitate course selection and sequencing. *Poor* - Instructors make no provision for advising students on course and program selection.				2	9	
19. Provision for Career Planning and Guidance *Excellent* - Day, evening and weekend students in this program have ready access to career planning and guidance services. *Poor* - Little or no provision is made for career planning and guidance services for students enrolled in this program.			7	2	2	
20. Adequacy of Career Planning and Guidance *Excellent* - Instructors or other qualified personnel providing career planning and guidance services have current and relevant professional nursing knowledge and use a variety of resources (such as printed materials, audiovisuals, job observation) to meet individual student career objectives. *Poor* - Career planning and guidance services are ineffective and staffed with personnel who have little professional nursing knowledge.			3	4	4	
21. Provision for Employability Information *Excellent* - This program includes information which is valuable to students as employees (on such topics as employment opportunities and future potential, starting salary, benefits, responsibilities and rights). *Poor* - Almost no emphasis is placed on providing information important to students as employees.	1	1	5	2	2	
22. Placement Effectiveness for Students in this Program .*Excellent* - The College has an effectively functioning system for locating jobs and coordinating placement for students in this program. *Poor* - The College has no system or an ineffective system for locating jobs and coordinating placement for students enrolled in this program.			1	1		9

CRITERIA TO BE EVALUATED FOR THE BSN PROGRAM	1	2	3	4	5	6
23. Student Follow-up System *Excellent* - Success and failure of program leavers and completers are assessed through periodic follow-up studies. Information learned is made available to instructors, students, advisory committee members and others concerned (such as counselors) and is used to modify this program. *Poor* - No effort is made to follow up former students of this program.			5	5	1	
24. Promotion of the BSN Program *Excellent* - An active and organized effort is made to inform the public and its representatives (such as news media, legislators, board, professional community) of the importance of providing effective and comprehensive professional education and specific training for this profession to gain community support.		1	1	3	6	
RESOURCES **25. Provision for Leadership and Coordination** *Excellent* - Responsibility, authority, and accountability for this program are clearly identified and assigned. Administrative effectiveness is achieved in planning, managing and evaluating this program. *Poor* - There is no clearly defined lines of responsibility, authority and accountability for this program.			1	1	9	
26. Qualifications of Administrators *Excellent* - All persons responsible for directing and coordinating this program demonstrate a high level of administrative ability. They are knowledgeable in and committed to nursing education. *Poor* - Persons responsible for directing and coordinating this program have little administrative training, education and experience.					11	
27. Instructional Staffing *Excellent* - Instructional staffing for this program is sufficient to permit optimum program effectiveness (such as through enabling instructors to meet individual student needs, providing liaison with advisory committees and assisting with placement and follow-up activities). *Poor* - Staffing is inadequate to meet the needs of this program effectively.			2	3	6	
28. Qualifications of Instructional Staff *Excellent* - Instructors in this program have two or more years in relevant employment experience, have kept current in their field, and have developed and maintained a high level of teaching competence. *Poor* - Few instructors in this program have relevant employment experience or current competencies in their field.			1	1	9	

CRITERIA TO BE EVALUATED FOR THE BSN PROGRAM	1	2	3	4	5	6
29. Professional Development Opportunities _Excellent_ - The college encourages and supports the continuing professional development of faculty through such opportunities as conference attendance, curriculum development, work experience. _Poor_ - The college does not encourage or support professional development of faculty.			1	1	9	
30. Use of Instructional Support Staff _Excellent_ - Paraprofessionals (such as aides, laboratory assistants) are used when appropriate to provide classroom help to students and to ensure maximum effectiveness of instructors in the program. _Poor_ - Little use is made of instructional support staff in this program.		1	3	4	3	
31. Use of Clerical Support Staff _Excellent_ - Office and clerical assistance is available to instructors in this program and used to ensure maxim effectiveness of instructors. _Poor_ - Little or no office and clerical assistance is available to instructors, ineffective use is made of clerical support staff.					10	
32. Adequacy and Availability of Instructional Equipment _Excellent_ - Equipment used on or off campus for this program is current, representative of that used on jobs for which students are being trained, and in sufficient supply to meet the needs of students. _Poor_ - Equipment for this program is outmoded and in insufficient quantity to support quality instruction.			4	4	3	
33. Maintenance and Safety of Instructional Equipment _Excellent_ - Equipment used for this program is operational, safe, and well maintained. _Poor_ - Equipment used for this program is often not operable and is unsafe.			1	5	5	
34. Adequacy of Instructional Facilities _Excellent_ - Instructional facilities (excluding equipment) meet the program objectives and student needs, are functional and provide maximum flexibility and safe working conditions. _Poor_ - Facilities for this program are generally restrictive, dysfunctional or overcrowded.					5	6
35. Scheduling of Instructional Facilities _Excellent_ - Scheduling of facilities and equipment for this program is planned to maximize use and be consistent with quality instruction. _Poor_ - Facilities and equipment for this program are significantly under- or over-scheduled.					1	10

CRITERIA TO BE EVALUATED FOR THE BSN PROGRAM	1	2	3	4	5	6
36. Adequacy and Availability of Instructional Materials and Supplies *Excellent* - Instructional materials and supplies are readily available and in sufficient quantity to support quality instruction. *Poor* - Materials and supplies in this program are limited in amount, generally outdated, and lack relevance to program and student needs.			2	4	5	
37. Adequacy and Availability of Learning Resources *Excellent* - Learning resources for this program are available and accessible to students, current and relevant to the occupation, and selected to avoid gender bias and stereotyping. *Poor* - Learning resources for this program are outdated, limited in quantity and lack relevance to the discipline.			1	4	6	
38. Use of Advisory Committees *Excellent* - The advisory committee for this program is active and representative of the discipline. *Poor* - The advisory committee for this program is not representative of the discipline and rarely meets.				3	8	
39. Provisions in Current Operating Budget *Excellent* - Adequate funds are allocated in the college operating budget to support achievement of approved program objectives. Allocations are planned to consider instructor budget input. *Poor* - Funds provided are seriously inadequate in relation to approved objectives for this program.			2	3	6	
40. Provisions in Capital Outlay Budget for Equipment *Excellent* - Funds are allocated in a planned effort to provide for needed new equipment and for equipment replacement and repair, consistent with the objectives for this program and based on instructor input. *Poor* - Equipment needs in this program are almost totally unmet in the capital outlay budget.			4	2	4	

What are the chief educational strengths of your program?

Strong emphasis on critical thinking.
Sensitive to changes in health care field.
Cohesive, motivated faculty & program director.
Get mostly great students - motivated, caring
Good peer support for teaching excellence

Off campus availability
No-test admission policy
Appropriate clinical experiences

The focus is on the adult learner - building on previous nursing background,
rather than repeating content or experiences
The curriculum is logically organized and internally consistent
Strong faculty commitment to students and teaching excellence
Excellent administrative and clerical support
Strong critical thinking focus

Going out to community of need - outreach sites
Building on ADN nursing foundation
Courses and curriculum carefully organized to provide learning and growth of
students .
Most appropriate nursing curriculum and scheduling known for ladder BSN in
Michigan

Motivated students
Curriculum builds on content throughout
Departmental Leadership
Faculty adviser system

Students are adult learners
Diversity among faculty
Flexible scheduling hours
Written assignments

Accessibility for working students
Format (schedule) "convenient" for working students

What are the major needs for improvement in your program and what action is required to achieve these improvements?

Need to rethink credit for prior learning; evaluate portfolio policy and procedure.

Better coordination among sites and campus; need to consider reinstating the BSN outreach coordinator position

None at this time.

Continue to identify appropriate strategies for adult learners
Increasing opportunities for students to offer feedback

The need for a program coordinator seems to be a priority. The Department Head has responsibility for the coordination of both ADN (40-60 students per year, plus 100+ prenursing students) and the BSN program (9 sites: 3 on campus and 6 off) which is quite excessive. The BSN program has not received the attention it needs for the purpose of coordination since this position was eliminated three years ago.

Enhanced coordination of off-campus sites - personnel
Improved outcome assessment processes

Need to reinstate coordinator position. The Department Head has too much to do to handle all the process - requires faculty planning/coordination 1-2 semesters in advance. Some lacks are showing up, suspect more in the future.

Conclusions

The department of nursing faculty's pride in the BSN program is evident

from their responses regarding the quality of the curriculum and the unique

attributes of the program. It is also evident from reading their comments from

the survey that they are consistent in their perceptions about both strengths and

weaknesses. They repeatedly identify the curriculum, faculty, students and

administration and support staff as strong components of the program. The

primary concerns noted are communication with students, outcomes assessment and the need for greater BSN program coordination. The issues of communication has been previously discussed and is being addressed within the department. The outcomes assessment process is also under scrutiny at all levels within the University, including the Department of Nursing. However, the need for improved coordination of the BSN program is an ongoing concern which threatens to impact the program negatively if not addressed. It would be the recommendation of the nursing faculty, based upon this survey, to reinstate the BSN program coordinator position.

SECTION 6

ADVISORY COMMITTEE PERCEPTIONS OF THE PROGRAM

<u>Purpose</u>

The purpose of this activity is to obtain information from the members of the advisory committee regarding the curriculum, outcomes, facilities, equipment, graduates, micro and megatrends than might affect job placement (both positively and adversely), and other relevant information. Recommendations for improvement are also sought from this group.

The Department of Nursing has an active Advisory Committee which has been in existence since the beginning of the BSN program at Ferris State University. The Advisory Committee's membership is composed of nurses from a variety of contemporary practice settings, ranging from acute care to community-based, from within a 100 mile radius of campus. Some of the members of the committee are nursing graduates of the Ferris nursing programs, while others may represent agencies where students are often placed for clinical experiences during the ADN or BSN programs. A list of current Advisory committee membership can be found in Appendix J. The advisory committee is chaired by a member from outside the nursing department and the committee meets twice during the academic year, once in November and once in April.

The Nursing Department Advisory Committee has played an active and vital role in providing input from the frame of reference of professional and technical nursing practice arenas. The points of view expressed by the

committee members are valued by the nursing department faculty as representative of contemporary nursing practice concerns and issues. Once again, the PROE format was utilized to attain advisory committee perceptions of the BSN program for this report. This form requested advisory committee members to respond to criteria to include instructional program content and quality, instructional equipment, instructional facilities, job placement, and follow-up studies on students.

Data Collection Method

The Advisory Committee Perceptions of the BSN Program form (Appendix K) was distributed to members attending the advisory committee meeting in April. Members completed the forms before they left the meeting. Survey forms were mailed to members who were absent from the meeting, along with a return envelope. A total of nine advisory committee members completed the survey. The only problem noted with this data collection method was that many advisory committee members had just recently joined the committee, replacing more experienced members. Therefore, some members declined to complete the form, based on their perception that they did not have enough information about the program to objectively evaluate it. In addition, it was noted that many members did not feel that they had sufficient information about some of the criteria being evaluated. As a result, some of the criteria were ranked as "don't know" by a majority of the committee members. The summary of the findings of the advisory committee surveys are reported in this section.

Findings

Nine members of the advisory committee completed the survey forms. Of these nine members, two indicated that they were FSU nursing program alumni. Five members represented nursing roles in acute care settings and three in community settings. One member is not a nurse, but the director of the local domestic violence center. One member who is an alumnus of both the Ferris ADN and BSN programs is currently a PhD in nursing candidate. The eight nursing members reported 172 collective years of experience in nursing, for an average of 21.5 years of nursing experience. Those members completing the survey reported that they have served on the Nursing Department Advisory Committee within a range of 6 months to 6 years. Five of the respondents indicated that they have had past opportunities to evaluate FSU nursing graduates either as an employer or as a student in the program.

A tally of the advisory committee responses to each criteria is provided on the next page of this report, with the number of responses in each category noted. When reviewing the responses, it became evident that many of the advisory committee members have limited knowledge regarding specific instructional processes within the BSN program. Many members indicated that they felt some of the criteria were not applicable to the BSN program, especially in the areas of placement, as most BSN students are already employed when enrolled in the program. Overall, the members who responded to the survey rated the BSN program favorably, with no members indicating that they percieved the program to be at the below expectation or poor levels. The advisory

committee members' comments regarding strengths and weaknesses of the program reveal some important insights about the program.

The strengths identified are fairly consistent with those articulated by students and graduates. These include program flexibility, cutting edge approaches to education, faculty, critical thinking focus, well-rounded graduate, user-friendly approaches geared toward the adult student. The areas in need of improvement also provide some excellent feedback for program evaluation.

Ferris State University
Academic Program Review - BSN Program
Advisory Committee Perceptions of the BSN Program

INSTRUCTIONS: Please rate each item using the following guide:

> 1 = *POOR* is seriously inadequate, bottom 5 to 10%
> 2 = *BELOW EXPECTATIONS* is only fair, bottom one-third
> 3 = *ACCEPTABLE* is average, the middle-third
> 4 = *GOOD* is a strong rating, top one-third
> 5 = *EXCELLENT* means nearly ideal, top 5 to 10 %
> 6 = DON'T KNOW means you lack sufficient knowledge to evaluate

COMMENTS: Please note explanatory remarks (such as examples, "Not Applicable" to this program, etc.) or needs for improvement.

CRITERIA TO BE EVALUATED IN BSN	1	2	3	4	5	6
1. Instructional BSN program content and quality are: * Based on performance objectives that represent job skills and knowledge required for successful entry level employment.			1	2	4	1
* Designed to provide students with practical job application and experience.				3	6	1

CRITERIA TO BE EVALUATED IN BSN	1	2	3	4	5	6
* Responsive to upgrading and retraining needs of employed persons.				4	4	1
* Periodically reviewed and revised to keep current with changing job practices and technology.				4	4	1
2. *Instructional equipment is:* * Well maintained.			1		2	6
* Current and representative of that used on the job.			1	1	1	6
3. *Instructional facilities:* * Provide adequate lighting, ventilation, heating, power and other utilities.				2	1	6
* Allocate sufficient space to support quality instruction.				2	1	6
* Meet essential health and safety standards.				1	2	6
4. *Placement:* * Services are available to students completing the program.				2		7
* Job opportunities exist for students completing the BSN program.			1	2	3	3
5. *Follow-up studies on program completers and leavers (Students with marketable skills):* * Demonstrate that students are prepared for entry level employment.				3	1	5
* Collect information on job success and failure of former students.				3		6
* Provide information used to review and where warranted, praise the program.			1	1	1	6

What are the major strengths of the BSN program from your professional perspective?

Completion program for ADNs
Telecommunication programs for outlying areas
Employment opportunities in the area for BSNs
Too early to know (stated by a new member)
Good practical application in the acute care setting
Faculty is a strength
Flexibility for the students
Outcomes - graduates seem to be able to have the knowledge & skills to adapt to
    multiple settings and situations
A well rounded graduate with good interpersonal skills
Faculty that keep up on skills
ADN to BSN articulation
Personal approach - user friendly
Value for the tuition
Well rounded education with critical thinking skills and some ability (or
knowledge) of management

What are the major needs for improvement in the BSN program from your professional perspective?

Knowledge of health care delivery systems
Knowledge of managed care environments
Too early to know (new member)
I believe the major need for the Ferris program is for the regulatory/accrediting
    agencies to allow flexibility for the program so they can meet the outcome
    criteria requisite by hiring agencies.
More focus on community health nursing is student is interested
Additional training possibly in quality improvement, finance, critical thinking,
    independent thinking

Do you have additional comments or suggestions for the BSN program or for utilization of the advisory committee?

Copies of the curriculum for members to increase knowledge of the content of
    the program to enhance directed discussion at the meetings.
Too early to know
Continue the openness in discussion, suggestions & the cutting edge radical
    concepts
Increase language skills - writing, spelling, foreign language
Increase focus on ages - stages of personal development

I enjoy the interaction and exchange of information at the meetings
Meeting was very informative. I'm not sure what I can contribute that will make a
    tremendous impact, but I appreciate that the program looks outside the
    nursing profession (for membership)

Conclusions

The BSN program appears to be viewed favorably by members of the

Nursing Department Advisory Committee.   It can be concluded from the survey

data that the advisory committee members enjoy their membership on the

committee as it is an opportunity for professional networking as well as advising

the nursing programs at Ferris.   It can also be concluded that the Advisory

Committee is very supportive of the BSN program from all perspectives:

historical, present and future initiatives.   The implications of the concerns raised

for program growth in the areas of new and emerging health care delivery

systems are currently under consideration by the Nursing Department faculty.

This area of professional focus has already been identified as a necessary future

thrust for the nursing department either in terms of revision of the BSN curriculum

or for graduate program considerations.

The role of the Nursing Advisory Committee has been perceived to be vital

to the survival of the nursing programs at Ferris.   The insights these

professionals provide for the Nursing Department are invaluable in terms of

program evaluation and future planning.   If the BSN program wants to remain on

the cutting edge of nursing education, advisement from professionals in the

practice arena and related settings is vital.

SECTION 7

LABOR MARKET ANALYSIS

Purpose

This activity is designed to assess the marketability of future graduates.
An analysis of the current labor market is critical for all educational programs
undergoing periodic evaluation. The BSN program at Ferris is no exception.
With the trends in health care moving from an acute care, disease treatment
focus to a community based, health prevention and promotion focus, the role of
nursing must be scrutinized to determine what the employment trends for new
BSN graduates will be. This section of the report summarizes the current status
of the bachelor of science prepared nurse within the context of contemporary
health care.

Method of Data Collection

The primary data source for a current labor market analysis is the 1997
survey from the American Association of Colleges of Nursing (AACN), which has
compiled data from current enrollment trends in nursing programs in the United
States as well as analyzed these trends within the context of the future nursing
workforce needs identified by the Division of Nursing in the U.S. Department of
Health and Human Resources. The AACN report is found in Appendix L, but the
highlights will be identified in this section of the report.

Another timely source of information is the 1995 Pew report which has
called for what many would consider a radical change in the mix of nursing

degrees to meet the changing demands of the health care delivery system.

Another important data source, which has been previously discussed in this

report is the data received from BSN graduates and their employers. FSU

generated data continues to find that the BSN graduate is typically employed

during enrollment in the program, but that the credential of the BSN has provided

more professional opportunities for graduates and well as an excellent foundation

for graduate school.

Findings

The data compiled from the 1997 AACN report (Appendix L) reflected a

disturbing trend for enrollments in both BSN and MSN programs. Enrollment in

bachelor's degree programs fell by 6.5% last fall, the second year in a row the

number has declined. However, in programs like the Ferris BSN program, which

are RN-to-BSN programs there was a continual increase (up 1.4 % above a year

ago). In addition, this group realized the highest employment rates, as 76.4% of

the programs designed for registered nurses with either associate degrees or

hospital diplomas reported that approximately 100% of graduates had secured

employment upon graduation. AACN President Carole A. Anderson notes in an

interview appearing in the January 6, 1997 edition of USA Today (Appendix L):

> "the changing picture of nursing care may be one reason for the decline.
> In some cases, applications remain strong, but the schools themselves
> have had to cut back on some enrollments. For instance, some
> schools have cut undergraduate slots to concentrate their resources on
> advanced programs. Job opportunities for nurses are shifting and nursing
> schools are having trouble staying flexible enough to meet those changing
> demands. Hospitals traditionally have employed two-thirds of all registered

nurses, but as managed care dictates briefer hospital stays and more outpatient treatment, hospitals have cut staffs, including RNs. At the same time, opportunities for nurses are opening up in home care, outpatient centers and neighborhood clinics. As the nursing job market continues to change, schools must find new ways to adapt".

Another statistic noted by the AACN survey is very encouraging for masters graduates. Job placements for master's degree nursing graduates were among the highest at any degree level of graduation. Among responding schools, 67% of master's degree programs reported that approximately 100 percent of graduates had employment commitments upon graduation. This finding has implications for the Ferris BSN program in that it serves as a base for graduate study. Nurse practitioners are in particular demand as primary care networks expand. This increase in the job market for advanced practice nurses has served as a catalyst for BSN graduates to pursue a MSN, which has been noted to be common in FSU graduate surveys.

Across the past five years, enrollments of returning RNs in baccalaureate programs have risen significantly by an average of 983 students per year nationwide, the AACN survey shows. Still, despite these increases, only 14% of RNs prepared in associate-degree programs have obtained the nursing baccalaureate degree, according to the latest figures from the Division of Nursing of the U.S. Department of Health and Human Services. Dr. Anderson explains the significance of these findings:

> Greater gains will be needed if we are to achieve the Division's recommended target of a basic nursing work force in which at least two thirds hold a baccalaureate or higher degree in nursing by the year 2010. With broad preparation in clinical, scientific, community health and patient education skills, the BSN nurse is well

positioned to move across settings such as home care, outpatient centers, and neighborhood clinics where opportunities are expanding rapidly as hospitals focus more on acute care as health care itself moves beyond the hospital to more community-based sites (AACN, 1997).

Finally, FSU generated data continues to find that the BSN graduate is typically employed during enrollment in the program, but that the credential of the BSN has provided more professional opportunities for graduates and well as an excellent foundation for graduate school. Employment has never emerged as a concern for Ferris BSN graduates, according to the data received during the evaluation process. Instead, the data reflects the trends which have been identified by the 1995 Pew report and the 1997 AACN survey.

Conclusions

The labor market analysis for BSN graduates reveals some very important implications for the Ferris program. First, the role of the BSN is one that is congruent with the changing practice arena for nurses as described by the current labor market analysis. Opportunities for nurses are growing in community settings such as home care, outpatient centers and neighborhood clinics. The purpose of the BSN program is to prepare a nurse generalist to function as a practitioner in a diverse, multicultural society. A primary terminal objective is for the BSN graduate to *collaborate with health professionals and consumers in a variety of roles to promote an optimal level of health for individuals, families, groups and communities.* Another is that the BSN graduate *provides nursing to a diverse multicultural population across the life span at*

various points on the health continuum in a variety of settings. These objectives

define the practice arena of the BSN graduate, which is consistent with the one

described by the labor market analysis data.

Second, the increasing opportunities for nurses in advanced practice

serves to reinforce the necessity of RN to BSN programs such as the one at

Ferris which serves as a base for graduate study. One consistent theme which

resonates from graduate survey data is the fact that Ferris BSN graduates feel

very well prepared for graduate study.

Third, the unique configuration of nursing programming at Ferris is

consistent with the inference that career mobility is a growing need for nurses

who are prepared at the diploma or associate degree levels. The Ferris BSN

program is the only stand alone RN to BSN program in the State of Michigan. All

other RN to BSN programs in Michigan are offered in conjunction with a generic

BSN program. Students currently enrolled in and graduates of the Ferris BSN

program have consistently identified this feature of the BSN program at Ferris to

be more flexible than other programs they have investigated as options for career

mobility. As an upper division program only, the BSN program at Ferris is able

to offer a curriculum which is more consistent with current labor market needs in

nursing without the constraints of a generic program which must prepare

graduates for the National Council for Licensure Examination. The FSU

curriculum for the RN to BSN program exemplifies the broad preparation in

clinical, scientific, community health and patient education described by Dr.

Anderson in regard to the AACN survey implications. The BSN program at Ferris

prepares graduates to move into the growing number of community-based settings which are rapidly becoming the primary practice sites for nursing.

The implications for the Ferris BSN program are clear. The job demand for BSN and MSN graduates continues to grow, despite national trends of decreased enrollment in these programs. Ferris has not experienced these decreases in enrollment, presumably due to the user-friendly, flexible nature of the program. However, to remain viable in a turbulent health care climate, the BSN program at Ferris must continue to offer a curriculum which is not only professionally current, but innovative enough to continue to attract the numbers of students which have sustained the program to date. The labor market analysis summarized in this report reinforces this directive.

Nursing Program

APRC 1997-1998

Section 4 of 8

program. She is highly qualified to manage the fiscal resources of the

Department, as wall as to serve as an instructional leader for the faculty. She

has coordinated and implemented several innovations for the Department during

her tenure as Department Head. She carries out her administrative duties

consistently and efficiently within the

parameters of the position.

Finally, a great strength of the BSN program is the ability of the program to

meet the accreditation standards of the National League for Nursing, which reflect

the professional expectations of an academic program within the discipline of

nursing. The NLN accreditation process examines structure and governance,

faculty, administration, material resources, curriculum, evaluation and required

outcome criteria of critical thinking, communication and therapeutic interventions.

In addition, each program selects two optional outcome criteria to include in the

self-study report. The BSN program at Ferris selected "satisfaction" and

"service" as their optional criteria. The NLN site visit occurred in April 1997.

The Department of Nursing was notified at the end of the visit that the BSN

program was being recommended for an additional eight years of full

accreditation.

Areas of Concern for the Program

There was only one area of concern which became evident during the

processes of NLN reaccreditation and academic program review. This concern

is in regard to the loss of the BSN Outreach Coordinator position three years ago.

Although the BSN program has been demonstrated to be highly successful in meeting the needs of RNs returning to school for a BSN degree, concerns of students, faculty and administration have been articulated regarding the perception that the program is not being coordinated effectively.

The student concerns regarding poor communication between campus and outreach sites became very evident in survey responses for this report. Faculty concerns regarding the collection and organization of evaluation data for the BSN program became evident during the writing of the NLN self-study and in preparation for the site visit. These two observations are related directly to program satisfaction and outcomes assessment respectively.

Recommendations

It is the recommendation of the Program Review Panel that the BSN program be continued with one enhancement: reinstatement of the position of BSN Outreach Coordinator to provide improved coordination among the 15 options currently available to BSN students at Ferris. The rationale for this recommendation is based upon the perception of Department of Nursing faculty, administration and students that the potential for a severe decline in the program quality resulting from the lack of consistent communication and coordination of all the BSN outreach sites will eventually result in dissatisfaction with the program from the perspective of all constituents. Program dissatisfaction could consequently result in declining enrollment rates and place the program in jeopardy for the future.

The RN-to-BSN program at Ferris has enjoyed thirteen years of success as a career ladder option for Michigan RNs who desire a baccalaureate degree. Unfortunately, the past three years, without a BSN outreach coordinator have resulted in some growing levels of student dissatisfaction regarding the organization of the program. This problem needs to be addressed if the program is to continue to function at the level of quality expected by faculty, students and employers.

Program Review Panel Evaluation

The PRP Evaluation of the BSN program has been tabulated and the results appear on the following pages. It is evident when reviewing the percepitons of the members of the program review panel that the program is viewed in a favorable light overall. Each criteria was given an average rating which was above average. The criteria which were scored the lowest were in regard to the use of student feedback, and program staffing. These findings are consistent with other sources of feedback data for the BSN program and support the perceived need for a program coordinator to enhance communication with students, facilitate program evaluation and manage overall program functions both on campus in each of the outreach sites. In addition the suggestion that further expansion in the area of distance education and other available instructional technology was also noted.

PROGRAM REVIEW PANEL EVALUATION

Program:_____ Baccalaureate of Science in Nursing (BSN) Program_____

Instructions: Circle the number which most closely describes the program you
                 are evaluating.

1. Student Perception of the Program   Average Score__4.16__

5	4	3	2	1
Currently enrolled students rate instructional effectiveness as extremely high.				Currently enrolled students rate the instructional effectiveness as below average.

2. Student Satisfaction with Program   Average Score__4.16__

5	4	3	2	1
Currently enrolled students are very satisfied with the program faculty, equipment, facilities, and curriculum.				Currently enrolled students are not satisfied with program faculty, equipment, facilities and curriculum.

3. Advisory Committee Perceptions   Average Score__4.33__
of Program

5	4	3	2	1
Advisory committee members perceive the program curriculum, facilities, and equipment to be of the highest quality.				Advisory committee members perceive the program curriculum, facilities, and equipment needs improvement.

4. Demand for Graduates   Average Score__5.0__

5	4	3	2	1
Graduates easily find employment in the field.				Graduates are sometimes forced to find positions out of their field.

5. Use of Information on Labor Market   Average Score__4.33__

5	4	3	2	1
The faculty and administrators use current data on labor market needs emerging trends in job openings systematically develop and				The faculty and administrators do not use labor market data in and planning or evaluating the program.

evaluate the program.

6. Use of Profession / Industry Standards   Average Score 4.33

5	4	3	2	1
Profession/Industry standards (such as licensing, certification, accreditation) are consistently used in planning and evaluating this program and content if its courses.				Little or no recognition is given to specific profession/Industry standards in planning and evaluating this program.

7. Use of Student Follow-up Information   Average Score 3.0*

5	4	3	2	1
Current follow-up data on completers and leavers are consistently and systematically used in evaluating this program.				Student follow-up information has not been collected for use in evaluating this program.

8. Relevance of Supportive Courses   Average Score 3.66

5	4	3	2	1
Applicable supportive courses are closely coordinated with this program and are kept relevant to program goals and current to the needs of students.				Supportive course content reflects no planned approach to meeting needs of students in this program.

9. Qualifications of Administrators and Supervisors   Average Score 4.33

5	4	3	2	1
All persons responsible for directing and coordinating this program demonstrate a high level of administrative ability.				Persons responsible for directing and coordinating this program have little administrative training and experience.

10. Instructional Staffing   Average Score 2.66*

5	4	3	2	1
Instructional staffing for this program is sufficient to permit optimum program effectiveness.				Staffing is inadequate to meet the needs of this program effectively.

11. Facilities   Average Score 5.0

5	4	3	2	1

| Present facilities are sufficient to support a high quality program. | | | | Present facilities are a major problem for program quality. |

12. Scheduling of Instructional Facilities   Average Score __3.66*__

5	4	3	2	1
Scheduling of facilities and equipment for this program is planned to maximize use and be consistent with quality instruction.				Facilities and equipment for this are significantly under-or-over scheduled.

13. Equipment   Average Score __3.50*__

5	4	3	2	1
Present equipment is sufficient to support a high quality program.				Present equipment is not adequate and represents a threat to program quality.

14. Adaptation of Instruction   Average Score __4.17__

5	4	3	2	1
Instruction in all courses required for this program recognizes and responds to individual student interests, learning styles, skills, and abilities through a variety of instructional methods (such as small group or individualized instruction, laboratory or "hands on" experiences, credit by examination).				Instructional approaches in this program do not consider individual student differences.

15. Adequate and Availability of Instructional Materials   Average Score __4.0__

5	4	3	2	1
Faculty rate that the instructional materials and supplies as being readily available and in sufficient quantity to support quality instruction.				Faculty rate that the instructional materials are limited in amount, Generally outdated, and lack relevance to program and student needs.

* Comments:

"Suggest possible use of telephone surveys to enhance data collection."
- "Program coordination is needed"
"Need program auditor"
"Expand distance education capacity"

Cost 95-96   *106.98*

Adv. Comm - OK

Date:

Program Name(s): *BSN*

Program Review Rating Criteria:

- Centrality to FSU Mission — *yes*
- Uniqueness and Visibility — *Yes - esp. for off-campus. — on'y RN to BSN pgm in MI*
- Service to state and nation
- Demand by students — *Enrollment - u. il— peaks in '94 - ditto grads.*
- Quality of instruction *P 19 - high - except for theory P 21 - high*
- Demand for graduates *employers like grads (25)*
- Placement rate and average salary of graduates
- Service to non-majors — *DNA*
  Facilities and equipment *— OK*
- Library information resources *— student complaints (p. 21)*
- Cost *— Students unhappy about cost (31 33)*
- Faculty: professional and scholarly activities
- Administration effectiveness

Curr OK —
place ENG first
off campus

Students pleased w/ pgm. (31-41)

Program Review Rating Categories:

- Continue the program
- Enhance the program
- Continue the program with monitoring
- Continue the program with redirection
- Reduce the program
- Close the program

Faculty Concerns - employability gender equity

Their concerns — staffing + stud follow-up info. — lack of coord.

Enrollment — (88-89) will it support an off campus coordinator?

NLN accredited - 8 yrs - 1997

August 20, 1997

Julie Coon, M.S.N.
Nursing Department
Birkam Health Center
1019 Campus Drive
Big Rapids, MI 49307-2280

Dear Julie:

It was a pleasure to review the B.S.N. Program Review Report. Although I do not have any suggestions for this project, I would like to share the possibility of doing telephone surveys in the future. The outcome return is greater than a mailed survey.

I have enjoyed the opportunity to be part of the B.S.N. Program Review Report. If I may be of any other assistance in the future, please let me know.

Sincerely

Beth A. Daugherty M.P.H.

APPENDIX A

Profile of Department of Nursing Faculty

Faculty Vitae

FACULTY PROFILE FORM

FERRIS STATE UNIVERSITY

FT/ PT	Faculty	Date of Initial Appt.	Rank/ Tenure(T)	Bacc. & Grad. Degree	Institution Granting Degree	Academic Clinical	Preparation Functional	Course & Area of Responsibility
FT	G. Burkholder	9-72	Associate Professor (T)	BSN MSN	Wayne State University Wayne State University	Adult Psych. Mental Health Nursing	Education	N416-Family & Community Nsg.
FT	M. Cairy	6-79	Professor (T)	BSN MSN EdD Cand.	Michigan State University Wayne State University Western Michigan University	Adult Nursing	Education Education	N476-Mgt. & Leadership in Nsg. N344-Research & Statistics in Nsg.
FT	J. Coon	9-84	Professor (T)	BSN MSN EdD Cand.	Grand Valley State College Wayne State University Western Michigan University	Health Care of Women	Clinical Practice Education	N324-Transition into Prof. Nsg. N476-Mgt. & Leadership in Nsg.

FT/ PT	Faculty	Date of Initial Appt.	Rank/ Tenure (T)	Bacc. & Grad. Degrees	Institution Granting Degree	Academic Clinical	Preparation Functional	Course & Area of Responsibility
FT	S. Fogarty	9-87	Associate Professor (T)	BSN Cert. in Primary Care MSN	Mercy College of Detroit Case Western Reserve Wayne State University	 Community Health Nursing	ANA Certified Family Health Nurse Practitioner Education	N324-Transition Into Professional Nsg. N416-Family & Community Nsg.
FT-Temp	D. Hoisington	9-86	Instructor	BSN MSN MS PhD Cand.	Ferris State University Andrews University Ferris State University Michigan State University	Nursing Nursing Occupational Education Leadership & Management	 Nursing Adult Educ.	N330-Health Assessment N331-Health Assessment & Promotion N476-Mgt. & Leadership in Nsg.
FT	S. Johnson	1-87	Professor	BS MN Ed.D.	Ferris State University Wichita State University Western Michigan University	Allied Health Teacher Education Advanced Medical Surgical Nsg. Education	Education Clinical Practice Educational Leadership	N499-Seminar in Professional Nsg. Administration of Department of Nursing

FT/PT	Faculty	Date of Initial Appt.	Rank/Tenure (T)	Bacc. & Grad. Degrees	Institution Granting Degree	Academic clinical	Preparation Functional	Course & Area of Responsibility
FT	L. Lewis	9-78	Associate Professor (T)	BSN MPHN	Ohio State University University of Colorado University of Michigan	 Public Health Nursing	 Gerontologi-cal Nursing	N330-Health Assessment N331-Health Assessment & Promotion N499-Seminar in Professional Nsg.
FT	M. Roehrig	9-85	Associate Professor (T)	BS MSN MA PhD Cand.	University of Detroit Wayne State University University of Michigan Andrews University	Human Services Adult Psych. Mental Health Nursing Education Psychology	Nursing Guidance & Counseling	N344-Research and Statistics in Nsg. N330-Health Assessment N331-Health Assessment & Promotion
FT	C. Slywka	9-81	Associate Professor (T)	BSN MSN	University of Michigan Wayne State University	Nursing Advanced Medical Surgical Nursing	 Clinical Practice	N476-Management & Leadership in Nsg.

FT/ PT	Faculty	Date of Initial Appt.	Rank/Tenure (T)	Bacc. & Grad. Degrees	Institution Granting Degree	Academic Clinical	Preparation Functional	Course and Area of Responsibility
FT	J. Wheeler-Stroud	1-73	Associate Professor (T)	BS	Ferris State University	AH Teacher Education	Education	N324-Transition into Prof. Nursing N330-Health Assessment
				MSN	Wayne State University	Adult Psyc. Mental Hlth Nursing	Clinical Practice	N331-Health Assessment & Promotion N499-Seminar in Professional Nsg.
FT	M. Wolfram	9-77 (1st)	Associate Professor (T)	BS	Ferris State University	AH Teacher Education	Education	N330-Health Assessment N331-Health Assessment & Promotion
		9-81 (2nd)		MSN	Wayne State University	Advanced Medical Surgical Nursing	Clinical Practice	

FT/PT	Faculty	Date of Initial Appt.	Rank/Tenure (T)	Bacc. & Grad. Degree	Institution Granting Degree	Academic Clinical	Preparation Functional	Course & Area of Responsibility
PT	R. Schottle	7/87	Associate Professor	BA MSN	Aquinas Wayne State University	Health Care Maternity Nsg.	Maternal Child Health Education	N330 Health Assessment and N331 Health Assessment & Promotion
PT	A. Sieh	1/95	Instructor	BSN MSN	Oakland University Wayne State University	Nursing Advanced Medical Surgical Nursing	Clinical Practice	N330-Health Assessment N331-Health Assessment & Promotion

GARY S. BURKHOLDER RN, MSN
7462 NINE MILE ROAD
BIG RAPIDS, MICHIGAN 49307
(H) 616-592-1438   (W) 616- 592-2293
gburkhol@alhol.ferris.edu

EDUCATION:

> Master of Science in Nursing
> Wayne State University, Detroit, Michigan. 1970
>> Major: Adult Mental Health Nursing
>> Minor: Education

> Bachelor of Science in Nursing
> Wayne State, University, Detroit, Michigan. 1968

> Associate of Science in Nursing
> Northwestern Michigan College, Traverse City, Michigan
>> 1965

EDUCATIONAL EMPLOYMENT

> Ferris State University
> College of Allied Health
> Department of Nursing
> Big Rapids, Michigan from 1972 to present

> Off Campus Adjunct Graduate Faculty
> College of Nursing
> Wayne State University,
> Grand Rapids, Michigan 1976-1979

> Department of Nursing
> Northwestern Michigan College
> Traverse City, Michigan 1970-1972

PRACTITIONER EMPLOYMENT

> Provision of Health Assessments, Physical Assessments,
> Health Promotion, and Stress Management Programs to clients
> at the Ferris State University Center 1985-1995.

> Charge Nurse at Kingwood Hospital, Ferndale, Michigan. 1967-1969
> Charge Nurse at Regional Hospital, Traverse City, Michigan 1965-1966

COMMUNITY BASED EDUCATIONAL EXPERIENCES

Provided instruction and supervision for students in the Nursing 416 course on Community and Family Nursing. Students met with client families on five occasions to assess the family's health and to assist them to obtain additional information on health promotion for the family unit. Earlier in the semester the students worked with Public Health programs in which they expanded their understanding of the community as client. (1992-to current)

Provided clinicl and classroom instruction in Family Nursing. Students completed a comprehensive assessment prior to a patients discharge, and assessed the client and the family during follow-up meetings. (1986-1992)

Developed and provided clinical instruction for students in the community in the Pediatric, and Mental Health Nursing Courses. Students in Mental Health Nursing have had experiences in Community Mental Health Centers, Crises Centers, Safe Homes for Abused Women, and Residental Treatment Centers. Pediatric Nursing students have had selected experiences in intermediate school districts, preschool programs, and other health care organizations. (1986 to current)

UNIVERSITY, COLLEGE, AND DEPARTMENTAL COMMITTEES

UNIVERSITY COMMITTEES

1997-Student Outcomes Assessment Committee
1995-1996 Substance Abuse Prevention Committee
1985-1987 Task Force on Substance Abuse Prevention Program

COLLEGE COMMITTEES

1995-1996 College of Allied Health Planning Committee
1993-1994 College of Allied Health Safety Committee
1992-1993 College of Allied Health Recruitment and Retention
1990-1992 College of Allied Health Faculty Development

DEPARTMENT OF NURSING

1994-present Member of Student Affairs Committee
1992 Member of Departmental Semester Conversion
Committe
1988-1992 Chair of Student Affairs Committee
1988-1992 Member of Recruitment and Retention,
Planning Committees, Policy and Procedure.

PROFESSIONAL OFFICES AND MEMBERSHIP

Past member of Michigan Nursing Association
1979: Alternate Delegate to ANA Convention
1976-1978 Michigan Nursing Association Board
of Directors
1977-1978 Vice Chair Division of Education
1970-1976 Several district offices

AWARDS AND HONORS

1996-Recommended for Merit Promotion
1992-Winner of National CoAllience for Teaching
Excellence
1992-Nominated for Who's Who in American Nursing
1992-Recommended for Michigan Governing Board
Excellence in Teaching
1976- Recommended for Academic Administration
Internship Program

COMMUNITY ACTIVITIES

1997 Chair of St. Peters Lutheran Church Wellness
Committee that has a short term goal of starting
a parish nurse service.
1990-1994 Elder at St. Peters Lutheran Church
1988-1990 Rotary Club of Big Rapids
1985-1988 Assistant Boy Scout Leader

MILITARY   1959-1963 UNITED STATES NAVY
Armed Forces Expeditionary Medal

SELECTED WORKSHOPS
AND CONTINUING EDUCATION

1997 March   Health Professions Education Futures Conference. Ferris State University. 6 clock hours.

1997 March   Critical Thinking and Process of Assessment. Richard Paul presentor. Center for Critical Thinking. 10 hours.

1996 April   **Peer Review and Professional Porfolio** Development. Ferris State University. 6 hours.

1995 August   Coaching and Teambuilding Skills for Managers and Supervisors. Ferris State University. CAHS faculty development program. 6 hours.

1995 February.   Critical Thinking: Stratagies for the Nursing Classroom. Kalamazoo, Michigan. Michigan Council of Nurse Education Administrators.

1994 November.   Stratagies for Nurse Educators. Eastern Michigan University. Council of Deans of Baccaluarate Programs. 5 hours

1993 March.   Critical Thinking and the Redesign of Instruction Workshop for Higher Education. Richard Paul. Foundation for Critical Thinking. Chicago, Ill 10 contact hours.

1993 February.   Psychiatric/Mental Health Nursing Annual Convention. San Francisco, California. 18 hours.

1992 July   Update on Mental Health Nursing in Michigan.
Department of Mental Health and Michigan
Nursing Association. Grand Rapids, Michigan. 15
hours.

1991 October The Community College-Nursing Home Partner-
ship. Tritorn College Continuing Education Center
for Health Professionals the Ferris State University
Department of Nursing. Ferris State University.
5 contact hours.

1990 April. Psychiatric Mental Health Nursing Update.
Penn. Medical College, Philadelphia, Pa. 18 hours.

1988 April Accreditation: The Process. The Outcome .
National League for Nursing. Chicago, Ill. 5 hours.

1987 April. Michigan Nursing Association Annual Convention.
Grand Rapids, Michigan. 12 hours.

1986 May. Child Abuse Prevention Program Initiatives.
Michigan Department of Social Services and
Department of Public Health. SugarLoaf Mt. Mi
5 hours.

1985 September. Physical Assessment Workshop. Provided
by facutly from Michigan State University to the
faculty of the Department of Nursing. 16 hours.

MARY J CAIRY
PROFESSIONAL RECORD

EDUCATIONAL BACKGROUND
Michigan State University   BSN   1967
Wayne State University   MSN   1981
Western Michigan University Current doctoral student, course work
    completed in Educational Leadership, dissertation in progress.

EXPERIENCE
1967-1979   Staff nurse, assistant head nurse, clinical supervisor,
    in service educator Emphasis: pediatrics/critical care
1979-present   Faculty, Ferris State University Teaching
    responsibilities: Pediatrics, Leadership/Management, Research
1984-1996   Clinical Nurse Specialist, Ferris State University,
    Nursing Center
1992-1995   Mayor, Lake City, Michigan
1992-present   Faculty (CPT), United States Army Nurse Corps, 91C (LPN)
    program

COMMUNITY SERVICE   (limited to the last 5 years)
1994 Consultant: Cooperative Learning Groups - Lake City Middle School
1994 Consultant: Learning Styles - Lake City Adult & Alternative Education.
1993-present Long Range Planning Committee for Lake City Schools
1985-present Athletic physical exams for all Lake City Middle and High
    School athletes
1994 Commencement Address, Lake City Adult Education
1992-1995 Mayor, Lake City, Michigan
1985-present Red Cross Nurse
1986-1992 Greatest 4th in the North, 10K Co-Coordinator
1990-1994 Greatest 4th in the North, Ox Roast Co-coordinator
1992-1995 Lake City Planning Commission
1992-1995 Lake City Downtown Development Authority
1992 Michigan Model Advisory Committee, Lake City Schools
1990-present Yearly guest instructor for Special Education students,
    promoting self-care, Lake City Elementary Schools
1992-1993 Initiated and coordinated Long Range Planning Committee for
    Lake City
1992-1995 Wrote and/or assisted writing 4 successful municipal grants
    for Lake City
1994-present Administered Hep-B immunizations for Lake City School
    Faculty/Staff
1989-1994 Established and administered a recycling program for
    Missaukee County

PROFESSIONAL SERVICE (limited to the last five years)

    1992 Presenter - Third National Conference on Nursing and Space Life Sciences, Houston, TX "The Use of Nursing in Space as a Teaching Framework for Baccalaureate Nursing Students"

    1992 Presenter - Third Annual Leadership Academy, Saginaw Valley State University, Saginaw, MI "Community/School Collaboration"

    1994 Presenter - Fourteenth Annual International Conference on Critical Thinking and Educational Reform, Sonoma, CA "The Use of Problem-Based Learning Groups to Foster Critical Thinking Skills in Associate Degree Nursing Students"

    1994 Presenter - Hampton University, School of Nursing, Hampton VA. "Learning Styles"

    1994 Presenter - Lake City Middle School, "Cooperative Learning Groups Using Problem Based Learning"

    1992 Research: "The Timing of Cognitive Teaching as it Affects the Performance of Psychomotor Skills"

    1993 Research: "The Timing of Cognitive Teaching as it Affects the Performance of Psychomotor Skills at the Articulation Level"

    1984-1996 Clinical Nurse Specialist, primary care, Ferris State University, Nursing Center

    1996 Research: "The Effects of a Cooperative Learning Environment on Attitudes, Social Skills and Processing of Baccalaureate Nursing Students"

    1996 Presenter - Hampton University, School of Nursing, Hampton VA. "Cooperative Learning"

    Sigma Theta Tau member - current

    ANA member - current

EDUCATIONAL PHILOSOPHY

All students can learn and it is the responsibility of the teacher to ensure that all students have this opportunity. Each teacher should interact with students in a way which will make a positive difference in their lives by making learning exciting, school interesting and the educational experience relevant and important to them. Students should leave college with traits that will enhance their development as knowledgeable, caring and involved citizens.

NURSING PHILOSOPHY

Nursing is both a science and an art through which health can be promoted and people can be assisted to maintain and regain optimal functioning.

Julie A. Coon, MSN, RN
CURRICULUM VITAE

OFFICE ADDRESS

Department of Nursing
Birkam 234
Ferris State University
Big Rapids, MI 49307

PHONE: 616-592=2289
E-Mail: jcoon@Music.ferris.edu

HOME ADDRESS

240 W. Logan Street
P.O. Box 91
Lake City, MI 49651

PHONE: 616-839-4838
E-Mail: jcoon@wmisd.k12.mi.us

EDUCATION

1971 - 1972	Central Michigan University
1972 - 1975	Grand Valley State Colleges Bachelor of Science in Nursing (BSN) June, 1975
1980 - 1982	Wayne State University Master of Science in Nursing (MSN) May, 1982 Clinical Specialty: Women's Health Minor: Educational Electives
1992 - Present	Western Michigan University Doctoral Candidate: Educational Leadership Dissertation in progress.

PROFESSIONAL EXPERIENCE

EMPLOYMENT

1984 - present	**Faculty Member** Department of Nursing Ferris State University Big Rapids, MI

1996 - present	Full Professor
1988 - 1996	Associate Professor
1984 - 1987	Assistant Professor

June, 1987	NCLEX Review Instructor in Maternity Nursing Pre RN Review Course Educational Resources Kalamazoo, MI
1982 - 1984	Didactic & Clinical Instructor Associate Degree Nursing Program Kirtland Community College Roscommon, MI
1981 - 1983	Clinical Nurse Specialist, Women's Health Medical Arts Group, P.C. Cadillac, MI
1977 - 1981	Clinical Manager, Obstetrics Department Mercy Hospital; Cadillac, MI
1975 - 1977	Staff Nurse, Obstetrics Mercy Hospital; Cadillac, MI

EXPERIENCE IN EDUCATION

INSTRUCTION

Fifteen Years as a clinical instructor for students at the Associate and Baccalaureate levels in a variety clinical settings, including acute care and community settings. Areas of clinical expertise: maternity and family nursing.

Fifteen years as a Didactic instructor in the areas of Nursing Process, Maternal-Infant Nursing, Nursing Theory, Health Assessment, Family Nursing, and Nursing Leadership & Management

Instructional methodologies utilized include the promotion of critical thinking skill development through problem-based learning, cooperative learning groups, socratic questioning and various tactical approaches employed to replace traditional lecture format.

CURRICULUM

Fifteen years of experience in course development and curriculum alignment in individual courses and programs at the Associate and Baccalaureate levels of nursing education at Kirtland Community College and Ferris State University.

Thirteen years as a member, and eight years as chairperson of the Curriculum Committee within the Department of Nursing, Ferris State University.

Three years as a member of the College of Allied Health Sciences Curriculum Committee, Ferris State University.

Three years as member of the Ferris State University Faculty Senate.

College of Allied Health Sciences representative on the Ferris State University Semester Transition Committee.

Co-author of the curriculum section for the Self-Study Report for the National League for Nursing accreditation of the BSN program, Ferris State University.

EDUCATIONAL RESEARCH

Research endeavors have included the examination of critical thinking skills in baccalaureate and associate degree nursing students and faculty with an emphasis on assessment and the variables which impact the acquisition of higher order thinking skills within the context of the higher education setting.

SELECTED SCHOLARSHIP

PROFESSIONAL HONORS

1995	Grand Valley State University Distinguished Alumni Award
1995	Inducted into 1995-96 Who's Who in American Nursing
1994	Michigan Professor of the Year Presented by the Carnegie Foundation and the Council for Advancement and Support of Education (CASE)
1992	Recognition Award by Ferris State University for Participation in the First FSU Compressed Video Distance Learning Class Session for NUR 347 Big Rapids to Traverse City
1988	Recognized as an "Enrolled Red Cross Nurse" through presentation of badge number: 357258
1982	Inducted into Sigma Theta Tau, National Honor Society for Nursing
1978	Award for "Innovative Ideas in a Rural Health Care Setting" (co-recipient), Michigan Association of Rural Health Care

PUBLICATIONS / BOOK REVIEWS

August, 1994	Invited to submit a copy of presentation paper from the Fourteenth International Critical Thinking Conference at Sonoma State University for consideration for publication in Inquiry,Critical Thinking Across the Disciplines, the journal of the Institute for Critical Thinking at Montclair State University.
April, 1992	Essentials of Maternity Nursing by Leonide L. Martin and Sharon J. Reeder. Served as a reviewer for this textbook: selection based upon clinical expertise in maternity nursing and experience in nursing education.

RESEARCH

1994-Present

<u>A Study of the Critical Thinking Attributes of Undergraduate Nursing Faculty</u>

Dissertation in Progress to meet degree requirements for Educational Doctorate at Western Michigan University

March 1993

<u>The Relationship Between Critical Thinking Ability and Selected Academic and Demographic Characteristics in ADN Students</u>

Unpublished study completed to meet EDLD 646 Research Design and Data Analysis II course requirements, Western Michigan University

December 1992

<u>Differences in Critical Thinking Ability in Two Levels of Associate Degree Nursing Students</u>

Unpublished study completed to meet EDLD 654 Research Design and Data Analysis I course requirements, Western Michigan University

May, 1982

<u>Relationship of Self-Care Characteristics, Demographic Variables and Neonatal Outcome to Childbirth Setting</u>

Research Field Study completed as graduate program requirement for MSN, Wayne State University. Invited to present study at 1982 Annual Research Day, Wayne State University (unpublished)

SELECTED PROFESSIONAL PRESENTATIONS

May 1997 · *The Assessment of Critical Thinking: Issues in the Clinical Setting*
Presentation for the Michigan Organization of Nurse Executives
Lansing, MI

April 1995 · *The Current Status of Critical Thinking in Nursing Education*
Guest Speaker, Alumni Scholarship Luncheon
23rd Annual Research Day College of Nursing
Wayne State University, Detroit, MI

February 1995 · *The Use of Problem-Based Learning Groups to Foster Critical Thinking Skills in Nursing Students*
Presented at the Great Lakes Regional Conference on "Critical Thinking: Strategies for the Nursing Classroom". Conference was sponsored by the Michigan Council of Nursing Administrators (MCNEA)

September 1994 · *The Use of Cooperative Learning Groups in Nursing Education*
Participated in a panel discussion at Ferris State University during faculty orientation week which was presented as a professional development offering for faculty. Presented innovations utilized in the Department of Nursing with cooperative learning to promote critical thinking.

August 1994 · *The Use of Problem-Based Learning Groups to Foster Critical Thinking Skills in ADN Students*
Co-presente at the 14th Annual International Conference on Critical Thinking and Educational Reform at Sonoma State University, Santa Rosa, California.

April 1992 · *The Use of "Nursing in Space" as a Teaching Framework for Baccalaureate Nursing Students*
Nursing and Space Life Sciences Conference
Houston, Texas

CONSULTING

Jan 1996   ***The Use of Problem-Based Learning and other Strategies to
                    Foster Critical Thinking Skills in ADN students.***

                    Worked with the ADN nursing faculty at West Shore Community
                    College
                    Scottville, MI ··

Oct 1995-
Jan 1997   ***Critical Thinking Applications in the Hospital Setting***

                    Served as a resource consultant for Memorial Medical Center.
                    Worked with nurse managers and staff nurses to implement a
                    structured approach to enhance critical thinking skills in hospital
                    nurses.
                    Ludington, MI

June 1995   ***The Use of Problem-Based Learning to Teach a Fundamentals
                    Nursing Course***

                    Consultation session with faculty from Washtenaw Community
                    College Associate Degree Nursing Program
                    Grand Rapids, MI

May 1994   ***Strategies for Fostering Critical Thinking in ADN students***

                    Presentation for Department of Nursing Faculty at Ferris State
                    University

                    Consultation and role modeling demonstration for visiting faculty
                    from Southwestern Michigan College and West Shore Community
                    College.

April 1994   ***Problem Solving for The Adult Learner***

                    Consultation work with Adult Basic Education Program at Lake City
                    Area Schools. Program focus: Critical Thinking in adult education,
                    to include assessment and intervention strategies.
                    Lake City, MI

COMMITTEE INVOLVEMENT AT FERRIS STATE UNIVERSITY

DEPARTMENT OF NURSING

Curriculum Committee:	Member 1984 - present Chair 1985 - 1987 1988 - 1994
Policy & Procedure Committee:	Member 1985 - 1987
Student Affairs Committee:	Member 1984 - 1985
Research Committee:	Member 1986 - 1988
By-Laws Committee, Ad Hoc:	Chair 1987 - 1988
Nursing Process Committee, Ad Hoc:	Member 1986 - 1988
Development of Generic BSN Program Steering Committee, Ad Hoc:	Chair 1985 - 1986
NLN Self Study Report Committee:	Curriculum Section Writer 1986 - 1988 Outcome Criteria Section Writer 1995 - 1996
Semester Transition for ADN Program Committee, Ad Hoc:	Chair 1993 - 1994
Academic Program Review for the BSN Program	Chair 1996 - 1997

COLLEGE OF ALLIED HEALTH SCIENCES (CAHS)

Curriculum Committee:	Member 1985 - 1987
Academic Honors Committee:	Member 1985 - 1986
Faculty / Staff Development:	Member 1987 - 1989

CAHS COMMITTEES, CONT.

Faculty Enrichment Committee:	Member 1988 - 1990
Faculty Development Committee:	Chair 1991 - 1992
Tenure Committee:	Member 1991 - 1994
Promotions Committee:	Member 1992 - 1995
Critical Thinking Steering Committee:	Member 1992 - 1994
CAHS / College of Education Reorganization , Ad Hoc:	Member 1994 - 1995
Planning Committee	Member 1995 - 1997
Curriculum, Assessment & Planning	Member 1996 - 1997

UNIVERSITY COMMITTEES

Institutional Review Committee:	Member 1986 - 1988
Educational Planning Committee:	Member 1986 - 1987
Academic Review Committee:	Member 1986 - 1987
Academic Senate:	Member 1986 - 1989

Subcommittes of Senate:

* Election Committee:	Member 1986 - 1989
* Senate Appointments:	Member 1987 - 1989
* Academic Calendar, Ad Hoc:	Member 1987 - 1988
FSU Distinguished Teacher:	Member 1992 - 1994
Academic Program Review Committee:	Member 1995 - 1996

Nursing Program

APRC 1997-1998

Section 3 of 8

SECTION 8

EVALUATION OF FACILITIES AND EQUIPMENT

<u>Purpose</u>

The purpose of this activity is to provide an analysis of present facilities and equipment as compared to program needs. This analysis includes an assessment of the availability to the program of technologies used in the workplace.

The evaluation of facilities and equipment is relevant to the ability of the program to meet the educational needs of the student. Specifically, the question at issue is whether or not the program provides an instructional environment which is conducive to learning, with the use of equipment which is up to date and functional. This area was recently evaluated for the writing of the self-study report for the reaccreditation process through NLN and is discussed in this section of the report.

<u>Data Collection Methods</u>

The physical facilities were evaluated for the NLN self study report through an inventory of current physical spaces for offices, classrooms, conference rooms, nursing laboratories, instructional media, off campus sites, facilities and support equipment for research. These areas were examined for their adequacy in supporting the delivery of quality instruction for BSN students. In addition, the library resources were evaluated both on campus and at all outreach sites for

their adequacy and accessibility to students. In addition to faculty review of these material resources, students were also asked to respond to surveys which included questions about facilities and equipment. Please refer back to section 4 of this report for specific data from students.

Findings

Available physical facilities and equipment for both on and off campus programming, as identified in this section, indicate the support of the University and cooperating agencies and institutions. Each component of this category of evaluation is described below.

Office Space and Office Equipment: There are adequate offices for administration, faculty, and staff in the Birkam Health Center. The Department Head's office is located near the center of the Department. The Department secretary has an office across the hall from the Department Head, providing constant liaison for her and the faculty, who are located in adjacent hallways in double occupancy offices. These offices are equipped with a voice mail telephone service, shelves, desks, computers, printers and file cabinets. This arrangement stimulates and facilitates direct collaboration, communication and planning among faculty members. A Department fax machine, network hookup and voice mail telephone technology make off campus communication with students very convenient and efficient.

Classrooms and Conference Rooms: Classrooms are available campus wide. Classes are frequently scheduled in the Victor F. Spathelf (VFS) Center for

Allied Health which is the College of Allied Health Sciences building. These classrooms are equipped for A-V programming. An interactive video classroom is based in the IRC building and provides distance learning options to several sites such as Traverse City and Grand Rapids. A classroom, nursing arts laboratory and conference/meeting rooms are available in the Birkam Health Center with nursing faculty and staff offices. Off-campus sites also provide adequate classroom space for classes, as many sites are community college of university center sites. These classrooms are determined whenever an off-campus site is established. Table 8-A reflects the location of each off-campus site. All classrooms and facilities are accessible to the physically challenged.

Nursing Laboratory: Audio-visual and hardware available in the nursing laboratory are adequate for student and faculty use. Two simulated patient rooms and two simulated examination rooms are available for students to practice assessment skills. Appropriate models and supplies are kept in the laboratory. The laboratory is supervised by a RN Teaching Paraprofessional who assists students with audiovisual equipment, keeps rooms stocked with supplies and monitors the post tests for NURS 330 Health Assessment and NURS 331 Health Assessment and Promotion. This allows for greater faculty accessibility to assist students with the development of health assessment skills.

When the Health Assessment courses are offered off campus, whether by distance technology or in person, a nursing faculty member is at the off-campus site each week to guide and precept the students. Laboratory arrangements are made with a community college in the area to use their skills lab or with a clinical

agency which has space available.

Instructional Media: The Nursing Department uses Media Distribution as

necessary for instructional media not owned by the Department for on campus

instruction. Assistance with media resources at off-campus sites occurs in two

ways depending on the course and the site. Media hardware may be arranged by

the GILL office responsible for a site or the faculty are provided with a list of

resource people at various host sites to provide assistance.

Off-Campus Sites: Learning resources available at the off campus sites

are adequate to support the off campus nursing program in accomplishing its

goals. In addition, students are able to obtain material through interlibrary loans

at the community college affiliated with the off-campus site. The Health Sciences

librarian determines local resources at each off-campus site and provides specific

local information for students. She also visits off-campus classes and provides

instruction on the use of computer contact with the campus libraries and the loan

process. Table 8-A reflects the location of A-V equipment and library resources

which might be utilized in an off-campus site for instruction.

Facilities and Support Equipment for Research: No specific additional

space is designated for research other than those services available campus

wide for all faculty and students. Student research at the present time consists

primarily of literature searches. Computer facilities are available in the various

libraries on and off-campus to both faculty and students for literature searches.

The Assessment Services Center is utilized by faculty for statistical analysis of

data collected for the purpose of program and student evaluation.

Library Resources: The establishment of the Health Sciences Library in 1992 has resulted in greater utilization of the library by both nursing faculty and students. A nursing faculty serves as a member of the CAHS Instructional Services Committee, with the opportunity to provide input from the Nursing Department regarding the acquisition of books, journals and other instructional media for the library. Thus, comprehensive and current library resources and other learning resources are developed with input from nursing. As stated previously, the Health Sciences Librarian also serves as a liaison for off-campus programming in terms of library resources available to students in that area. Table 8-A reflects the library resources available in each off-campus site.

TABLE 8-A
Location of Learning Resources at Off-Campus Sites

SITE	LIBRARY RESOURCE	AV EQUIPMENT
Muskegon: Higher Education Center	Muskegon Comm. Coll. Mercy General Hackley Hospital Higher Education Center	Muskegon Comm. Coll Mercy General Hackley Hospital
Jackson: Jackson Community College	Jackson Comm. College Foote Hospital Doctor's Hospital	Jackson Comm. College Foote Hospital Doctor's Hospital
Traverse City: NMC University Center	Northwester Mich. Coll. Munson Medical Center NMC University Center	Northwester Mich. Coll. Munson Medical Center NMC University Center
Niles: Southwestern Michigan Niles Campus	Southwestern Mich. Coll. Lakeland Med. Center Lakeview Comm. Hosp. Lake Mich. College Andrews University Indiana University at South Bend	Southwestern Mich. Coll. Lakeland Med. Center Lakeview Comm. Hosp.

SITE	LIBRARY RESOURCE	AV EQUIPMENT
Midland: Delta College and Great Lakes Jr. College	Kirtland Comm. Coll Central Mich. Univ. Central MI. Comm. Hosp Mid Mich. Comm. Coll. Delta College Saginaw Valley St. Univ St. Luke's Hospital Bay Medical Center Saginaw General Hosp. Alma College U of M - Flint Great Lakes Junior Col. Mott Comm. Coll.	Delta College Great Lakes Junior College

Clinical Facilities: There are three clinical nursing courses in the BSN

curriculum.   Clinical agencies at each site are selected by faculty or by students

and approved by faculty based on their suitability to meet the needs of the

students and to enable them to meet the course objectives. The frequent

changes in agencies which reflect changes in health care delivery require

versatility in selecting agencies each time a course is offered at a site. Table 8-B

provides examples of agencies used in each clinical course and in each teaching

site. Because all students enrolled in the BSN program are Registered Nurses, a

variety of settings is used to meet curriculum and course objectives. As Table 8-

B reflects, many clinical experiences are community based, as opposed to more

traditional acute care settings.

There are four nursing courses which have a clinical component in the

Ferris BSN program.   NURS 330 and 331, the Health Assessment courses

require laboratory settings for the purpose of demonstrating physical assessment

techniques.   NURS 416, the Family and Community Nursing course requires

placement in a community based clinical setting for the community nursing

component and for the family nursing component, students identify a family

system which they visit in the family's home for the purpose of health assessment

and promotion. Finally, in NURS 476, the Leadership and Management course,

the student is placed in a health care organization for the purpose of analyzing a

heath care system and the role of nursing management within the organization.

Thus, this experience may take place in either an acute care, long term care or

community based setting. This variety of settings has proven to be very

beneficial to students in terms of meeting individual professional goals.

TABLE 8-B
Representative Examples of Clinical Agencies

SITE	NURS 330/331 HEALTH ASSESSMENT & PROMOTION	NURS 416 FAMILY & COMMUNITY NURSING	NURS 476 NURSING LEADERSHIP & MANAGEMENT
On-Campus	Skills Lab - Birkam Health Center	Mecosta Co. Health Dept. Hospice Newaygo Co. Health Dept.	Planned Parenthood First of America Home Care Michigan Home Health Care Mecosta County Gen. Hospital
Muskegon	Muskegon Comm. College Nursing Lab Career Tech Ctr Nursing Arts Calvin College Skills lab	Ottawa Co. H. D. Muskegon Co. Health Dept. McCAuley Clinic Comm. Mental Health Hospice Home Health Agencies	Muskegon Gen. Hosp. Oak Crest Manor Villa Elizabeth Care Center Haven Park Chr. Nsg. Home Butterworth Hosp. Hospice Ottawa Co. H.D.

SITE	NURS 330/331 HEALTH ASSESSMENT & PROMOTION	NURS 416 FAMILY & COMMUNITY NURSING	NURS 476 NURSING LEADERSHIP & MANAGEMENT
Traverse City	Northwestern MI College Nursing Lab	Mich. Home Health Thomas Judd Clinic Hospice Leelanau Co. Health Dept. Grand Traverse Band Medicine Lodge	Munson Medical Center Michigan Home Health Paul Oliver Mem. Hospital Northwestern MI College
Midland	Greats Lakes Junior College Nsg. Lab Delta College	Midland H. D. Saginaw H. D. Genessee Co. H.D. Home Health Agencies	Mid-Mich Regional Med. Center St. Luke's Hosp. St. Mary's Hosp. Saginaw Gen. Hospital Bay Medical Center Gladwin Pines Nsg. Home Allen Health Care
Jackson	Jackson Community College Nsg. Lab	Jackson Co. H.D. Ingham Co. H.D. Migrant Health Services	Foote Hospital Doctor's Hospital of Jackson Thorn Hospital, Bixby Hospital Sparrow Hospital Hospice
Niles	Southwestern MI College nursing Lab Lakeland Memorial Med. Center	Berrien Co. H.D. Cass Co. H.D. Hospice Chapin St. Clinic Planned Parenthood	Lakeview Hosp. Bronson Hosp. Borgess Hosp. Upjhon Hospice St. Joseph Hosp. Lee Mem. Hosp.

Conclusions

Based upon faculty and student evaluation data, it can be concluded that

the physical facilities are adequate for the nursing unit to accomplish its goals related to the BSN program. The primary facilities required for the BSN program are classrooms for all courses, including distance education capabilities, laboratory equipment for the Health Assessment courses (NURS 333 and 331) and library resources for students. Each of these areas is determined to be adequate. In addition, the faculty and staff enjoy office space and access to technology which is more than adequate to meet the needs of the BSN program. The nature of the BSN program, with its focus on community based nursing practice has also resulted in an abundance of options for clinical sites for students, as Table 8-B illustrates. These clinical sites will continue to be cultivated with each clinical course rotation in outreach site.

SECTION 9

CURRICULUM EVALUATION

Purpose

The purpose of this activity is to determine through a comprehensive

review of the curriculum whether it meets the needs of the market. This process

was recently completed for the NLN accreditation process. The NLN criteria for

BSN curricula has served as the standard to determine the program is meeting

the needs of the professional nursing market.

The accreditation process for NLN requires that the program demonstrate

that the curriculum is logically organized and internally consistent in the sense

that it is congruent with the goals and mission of the institution. In addition

curriculum is to focus on the discipline of nursing and is supported by cognates in

the arts, sciences and humanities. Finally, the majority of course work in nursing

must be at the upper division level of the program. The Ferris BSN program was

able to demonstrate attainment of each of these criteria for the self-study report

and the site visit in April. This section will summarize the evaluation process of

the BSN curriculum.

Data Collection Methods

.   According to the systematic plan for program evaluation (Appendix E),

components of the curriculum are evaluated on a regular basis. The mission,

philosophy and curricular design of the program are evaluated every four years

by the nursing faculty as a whole. The program objectives are reviewed annually by the faculty. Individual courses are evaluated each semester the course is offered through student evaluation forms (Appendix M) and curriculum committee review of the course organization summaries provided by each instructor. The faculty of the Department of Nursing use the criteria established by the National League for Nursing as a framework by which to monitor, evaluate and revise the BSN curriculum. This mechanism has proven to be beneficial in regard to preparation for each accreditation cycle, which occurs every eight years. In addition, for the purpose of this report the PROE framework for evaluation of programs elicited responses from both students and faculty in regard to the curriculum of the BSN programs. Please refer to sections 4 and 5 for specific data from each of these constituents.

Findings

Logical Organization of the Curriculum: The philosophy of the Department of Nursing addresses the faculty's belief about the individual and society, human health experiences, professional nursing, teaching and learning. The philosophy provides a foundation for change in response to new directions within the profession of nursing. The mission statement of the nursing department is reflected in the philosophy. The philosophy of the Department of Nursing directs both the content of the Bachelor of Science in Nursing curriculum and the instructional methodologies by which the content is presented. The faculty believes that learning is an internal, self directed, lifelong process that can occur

in a variety of settings and that students have responsibility for their own learning. Teaching methodologies that utilize critical thinking, problem solving, and active learning processes are applied to assist the nursing student to become a professional person possessing these essential skills. The purpose of the BSN program is to prepare a professional nurse generalist to function as a practitioner in a diverse, multicultural society.

The nursing curriculum has the following terminal objectives:

- Applies knowledge synthesized from nursing sciences and liberal arts into the practice of nursing.

- Provides nursing to a diverse multicultural population across the life span at various points on the health continuum in a variety of settings.

- Utilizes the nursing process as a basis for practice.

- Collaborates with health professionals and consumers in a variety of roles to promote an optimal level of health for individuals, families, groups, and communities.

- Demonstrates personal and professional accountability in nursing practice.

- Integrates research findings into practice of nursing.

The terminal objectives are consistent with the philosophy and they provide linkages to the level objectives and learning experiences. A chart found in Appendix N illustrates the specific interconnectedness of the philosophy concept, specific terminal objectives, level objectives, nursing courses and specific learning experiences. This chart identifies the philosophy statements on the individual, society, nursing and learning, educational experiences, evaluation, professional development and service and delineates how each is implemented in the curriculum.

The chart described above illustrates a building from simple to complex in concepts, learning experiences and knowledge. For example, in Level I, NURS 324 Transition into Professional Nursing, the concept of critically examining the profession of nursing from several perspectives is met by an analysis of a conceptual model of nursing and providing a class presentation. In subsequent courses the student analyzes the profession of nursing based on common criteria established for a profession, examines standards of professional practice and the professional code of ethics. The NURS 344 Research and Statistics in Nursing course assists students to develop the ability to critique research reports as it relates to professional nursing and to explore application to practice.

In Level II nursing courses the concept of critically examining the profession of nursing from several perspectives occurs with a discussion of community nurse practice standards and the implications of the Healthy People 2000 goals for community and family nursing. In addition, the visit to the State Board of Nursing and the Michigan Nurses Association expands the students' understanding of how these two organizations affect the profession of nursing. For example, the students compare the function and role of the State Board of Nursing to the function and role of the Michigan Nurses Association.

The relationship of level objectives to terminal objectives is critical in the sequence of curriculum planning and development. For example, in Level I the student utilizes the nursing process on individual clients. Health assessment, physical examinations, health histories, and nursing plans utilizing health promotion concepts are emphasized for individual adults, children and geriatric

clients. The client in Level II is a family or a community and the student utilizes the nursing processes with a family different from their own and with aggregates within a community.

Standards for Professional Nursing: The Department of Nursing has adopted the American Nurses Association Standards of Clinical Nursing Practice as the program professional standard. The professional standards are introduced in NURS 324 Transition into Professional Nursing and they are employed in all the nursing courses as a basis for maintaining the quality of care for the application of the nursing process. The ANA Standards of Clinical Nursing Practice are evident in the curriculum, level objectives, and they are an integral part of the student experiences. The visit to the State Board of Nursing during the capstone course, NURS 499 reinforces the importance of standards of care and responsibilities of the professional nurse. The capstone course may consider the Standards of Practice as a seminar topic and the issues that may arise within a rapidly changing health care system and within the nursing profession.

General Education Requirements: The Ferris BSN curriculum supports the nursing faculty's belief that "nursing is a unique dynamic interpersonal endeavor committed to assist individuals, families, groups and communities in maintaining and promoting health, preventing illness and maximizing potential." (Philosophy, Appendix A). The curriculum is an upper division major based on previous associate degree or diploma nursing education. The curriculum is an upper division major based on associate degree or diploma nursing education.

The curriculum builds on both previous general education and nursing

knowledge. The nursing knowledge is validated in the Level I bridging courses.

Any prerequisite general education deficiencies must be completed prior to

beginning level two courses. The prerequisite and general education course

work which support the nursing major are described here. Each cognate course

has been selected or designed to provide both a content and theoretical base or

extension to the core nursing content.

Prerequisite General Education Requirements: Registered or graduate

nurses students entering the BSN program must meet general education

requirements which are nearly equivalent to the requirements of the Ferris

Associate Degree Nursing graduates. Articulation plans exist between Ferris

State University and several community colleges in Michigan to foster articulation

and upward mobility. The prerequisite courses include:

- **BIOL 108 Medical Microbiology** as an introduction to human microbial disease and a basis of a protective immune response.

- **BIOL 205 Human Anatomy and Physiology** as a basis for pathophysiology and for clinical study of human structure and function on a cellular, tissue and organ system level.

- **CHEM 114 Introduction to General Chemistry** as relevant for biological or clinical application and a prerequisite for CHEM 124 Introduction to Organic and Biochemistry.

- **COMM 105 Interpersonal Communications or COMM 121 Fundamentals of Public Speaking or COMM 205 Effective Listening** as a choice of courses enhancing communication.

- **ENGL 150 English 1 and ENGL 250 English 2** as an introduction to general written communication skills and as preparation for researching and writing formal papers.

- **PSYC 150 Introduction to Psychology** as a basis for understanding psychological principles that impact on human behavior.

- **SOCY 121 Introductory Sociology** or a political science elective as a basis for social awareness competency.

Upper Division General Education Requirements: General education courses in the BSN program have also been selected to provide specific theoretical foundations to support contemporary nursing practice. These courses are:

- **ANTH 122 Cultural Anthropology** provides the students with both an understanding of the nature of culture and an appreciation for the diversity of cultures in client populations.

- **BIOL 300 Pathophysiology** builds on earlier anatomy and physiology courses and prepares the student to appreciate deviations from normal in the health assessment course.

- **BIOL 308 Advanced Medical Microbiology** and Immunology provides the student with an in-depth appreciation the topic, which is useful in Health Assessment and Promotion. This course also includes principles of Epidemiology used in the Family Community Nursing course.

- **CHEM 124 Introduction to Organic and Biochemistry** is a prerequisite to BIOL 300 Pathophysiology and provides nurses with other content that helps in understanding normal and abnormal presentations in the Health Assessment courses.

- **ENGL 321 Advanced Composition** is designed to assist students to write at a professional level in other course work and in their professional lives.

- **PSYC 310 Psychology of Teaching** provides a conceptual basis for the nurse as a teacher of clients and peers.

- **MATH 115 Intermediate Algebra** is a university general education requirement, which provides professionals with mathematical competency.

Other electives are chosen to fulfill general education requirements in the areas

of cultural enrichment and personal preference.

Nursing Courses: Each nursing course in the BSN program provides

students with the opportunity to examine nursing as a whole or a particular aspect

of the discipline. These courses are:

- **NURS 324 Transition into Professional Nursing** is a foundation course
  for professional nursing that allows the student to examine the ANA
  Standards of Practice, the nursing process, the theoretical basis for
  nursing using both nursing and related theoretical models, and key issues
  of nursing.

- **NURS 330 Health Assessment** and **NURS 331 Health Assessment and
  Promotion** provide students information and clinical experience in health
  assessment and health promotion using Gordon's functional categories as
  an organizing framework and Nola Pender's health promotion model as a
  framework for promoting health in clients across the lifespan. Students
  use the teaching/learning principles from the educational psychology
  course in planning educational interventions for health promotion.

- **NURS 344 Research and Statistics in Nursing** provides students with a
  working knowledge of the research process and an ability to use and
  critique nursing research.

- **NURS 416 Family and Community Nursing** focuses on the complex
  clients of family and community and provides the opportunity to use the
  nursing process along with relevant family and community theories to
  provide care for these clients during the clinical component of the course.
  The knowledge of cultures derived from the culture anthropology course is
  applied to both the community nursing plan and the care given to the
  family.

- **NURS 476 Management and Leadership in Nursing** exposes students
  to group and leadership theories relevant to nursing and the opportunity to
  use those theories in simulated and actual clinical experiences.

- **NURS 499 Seminar in Professional Nursing** is a capstone course in
  which students participate in student led discussions of current and future
  nursing issues.

The program plan or BSN Advising Worksheet (Appendix O) illustrates both the

requirements of the program and the progression of the courses through the

program levels. This is used by faculty as a checklist in advising students.

Conclusions

The BSN curriculum data which has been described in detail in this section

is the result of cumulative ongoing program evaluation as outlined in the

evaluation process for the Department of Nursing (Appendix E) as well as upon

the extensive evaluation of the BSN curriculum which occurred in preparation for

the NLN self-study report. In addition, data was collected from students, faculty

and advisory committee members related to curriculum evaluation.

Review of the data leads to the conclusion that the BSN curriculum is

indeed logically organized and internally consistent with respect to the mission

and goals of the Department, the College of Allied Health Sciences and the

University. In addition, the curriculum is organized as an upper division program

designed to build on previous associate degree and diploma education. This

framework is organized from simple to complex within two levels, leading to the

culmination of the terminal program objectives. The curriculum is also reflective

of professional standards as evidenced by the adoption of subsequent and

integration of the ANA Standards of Clinical Nursing Practice into the curriculum.

Student, graduate, faculty and advisory committee feedback are united in

the agreement that the curriculum meets the needs of the profession and

provides career mobility for graduates of the program. In addition, the curriculum

has been approved by the National League for Nursing as evidenced by granting

full initial accreditation in 1989 and the recommendation for full reaccreditation in 1997.

It can be concluded that evaluation is essential for the development, maintenance and revision of the BSN program and based upon the successful BSN curriculum to date, should continue to be an ongoing process for the Department of Nursing.

SECTION 10

ENROLLMENT TRENDS

Purpose

The purpose of examining enrollment trends of the BSN program is to

determine the potential of the program to maintain enrollment in the future. The

BSN program at Ferris is an upper division program which admits Registered

Nurses or graduate nurses who are eligible to write the NCLEX-RN. The

program has been designed to facilitate matriculation of RNs who are graduates

of either an associate degree or diploma nursing program. Therefore, a student

is admitted as a junior. Potential students must complete required prerequisite

course work prior to official admission to the program (Appendix O).

Method of Data Collection

The multiple and varied alternatives available to our students in regard to

geographic location and program length present some interesting challenges in

terms of tracking students. Students may transfer from site to site for the

purpose of geographic mobility or the need to complete the program at a different

pace. For these reasons, length of time in the program varies considerably, from

one academic year for students who complete the general education

requirements prior to enrolling in nursing courses, to 3.5 years for the part-time

rotations at all outreach sites. Enrollment in the program is determined to be

when the student enrolls in and completes NURS 324, and graduation occurs

when the student completes NURS 499, the capstone course. When compiling

data from the NLN self-study report, it was noted that a total of 623 students

completed the first nursing course (NUR 353 or NURS 324) from 1983 to 1993.

Of those 623 students, 578 students completed the capstone course, NURS 499,

resulting in an overall graduation rate of 93%.

Findings

Table 10-A reveals the number of students enrolled in the BSN program

from 1990 to 1996. These numbers reflect students who have successfully

completed NURS 324, which is the point in the program where they are assigned

an advisor. It should be noted that students may actually be taking general

education course work prior to their enrollment in NURS 324, however, official

tracking occurs in NURS 324.

TABLE 10-A
Enrollment Trends for Students in BSN Program 1990 - 1996

Academic Year	Number of Students Enrolled in NURS 324
1990-91	62
1991-92	73
1992-93	83
1993-94	81
1994-95	176
1995-96	60
1996-97	72

When examining the enrollment trends, it can be noted that an average of 87 students per year are officially enrolled in the program as evidenced by their successful completion of the introductory nursing course. The variance in these numbers is dependent on how many new sites are started each fall, which is the typical beginning point for an outreach site. For instance, the Jackson and Traverse City sites will begin their fourth outreach rotation this fall. At the writing of this report, approximately 80 students have been accepted into the Jackson site, with 10 more students on the waiting list. Between 20 and 30 students are accepted for the Traverse City site. In addition, there will be a group composed of on campus and Grand Rapids ATC students. This number varies, but usually consists of between twenty and thirty students. Thus the projected enrollment for Fall 1997 is between 100 and 130 students. Table 10-B reflects the distribution of students among each BSN campus and outreach site.

TABLE 10-B
Enrollment of BSN students by Outreach Site 1996-97

OUTREACH SITE	NUMBER OF STUDENTS IN CURRENT SITE
Campus: Big Rapids / Grand Rapids (includes full & part-time in 3 classes)	56
Traverse City (completed S 97)	22
Midland: GRJC (completes F99)	28
Midland: Delta (completes S 98)	36
Jackson (completed W 97)	44
Niles (completes F96)	24
Muskegon (completes S 99)	23
Total Enrollment during 1996-97	**233**

Conclusions

Enrollment rates have remained fairly consistent in the BSN program, with

the majority of students enrolled in off-campus sites.   The usual pattern for off-

campus rotations is that a ten semester rotation is completed before another

class is admitted.   However, the demand in the tri-cities was so great that a new

class was admitted for three consecutive years.   That site now has two

remaining rotations which are scheduled to finish in 1998 and 1999 respectively.

Needs assessments are always conducted before beginning a new site or before

making the commitment to return to an established site. This practice has been

successful in maintaining adequate enrollments in most of the BSN outreach sites

for the duration of the program.   The latest needs assessment has resulted in

the decision to return to the Alma and Ludington sites in Fall 1998 and Winter

1999 respectively.

The consistent enrollment and graduation rates the BSN program has enjoyed serve as testimony to the continued demand for the program by RNs with either an associate degree and hospital diploma.

SECTION 11

PROGRAM PRODUCTIVITY & COST

Purpose

The purpose of examining the fiscal resources of the program to determine if they are adequate to support the nursing program in accomplishing its goals. Budgetary allocations for personnel and Supply and Expense (S&E) for the BSN completion program for fiscal years 1995-96, 1996-97 and projected for 1997-98 were recently demonstrated for the NLN self-study report and are included in this report. It should be noted that the S&E budget for the Department of Nursing is divided among the BSN and ADN programs and administration.

Findings

Approximately 45% of the administration budget was used for administrative costs for the BSN completion program. The Administration budget includes travel, materials and supplies, equipment, telephone costs, copy costs, dues and memberships. In 1996-97 and subsequent years the proportions increased to 50% as a result of the closure of the Nursing Center. Table 11-A demonstrates budgetary allocations for academic years 1995-96, 1996-97 and 1997-98. The table projects a 3% increase in salaries and a 0% increase in the operating budget for 1997-98.

Support for part-time faculty salaries, faculty salary for overload assignments and travel for off-campus programming is provided through the

Gerholtz Institute of Lifelong Learning (GILL). Table 11-A includes the GILL

contribution to the BSN budget.

Table 11-A
BSN Program Budget

Category	1995-96	1996-97	1997-98*
Personnel			
salaries (CAHS)	$273,400	$277,500	$285,800
salaries (GILL)	49,794	109,821**	112,000
benefits (CAHS)	92,000	93,400	96,200
Administration			
salary (CAHS)	29,600	30,500	31,400
benefits (CAHS	11,025	11,400	11,700
S&E (Operations)			
CAHS	9,000	8,800	8,800
GILL	18,414	33,653**	35,000
Total Costs	483,233	534,784	580,900

*Projected
** Marked increase due to accounting changes between GILL and CAHS. Do not reflect actual cost increases

Table 11-B compares administrative and faculty salaries with those of the

American Association of Colleges of Nursing (AACN) report on 1995-96 Faculty

Salaries in Baccalaureate and Graduate Programs in Nursing and the AACN

report on 1995-96 Salaries of Deans in Baccalaureate and Graduate Programs in

Nursing. It is evident from this comparison that the faculty mean salary and the

Department Head's salary compare favorably with the AACN comparison

salaries.

Table 5-B
Administrative and Faculty Salaries
1995-96

Comparison Rank	n	Mean Salary	Length of Appointment	Mean Years of Service	AACN Mean Salary
Professor	2	$48,921	9 months	15	$51,077*
Assoc. Prof.	7	$48,718	9 months	18	$42,690*
Dept. Head	1	$66,007	12 months	10	$62,010**

* 1995-1996 Faculty Salaries in Baccalaureate and Graduate Programs in Nursing
Table 7, p. 9, "Mean and Median Faculty Salaries for Academic and Calendar Year Basis

According to Rank and Degree Level, 1995-96." Academic Year Nondoctoral.
Washington: AACN

**1995-1996 Salaries of Deans in Baccalaureate and Graduate Programs in Nursing
Table 10, p.9 "Percentile Salaries of Deans of Baccalaureate and Higher Degree Programs in Nursing by Number of Full-time Faculty and Membership Status." Number of Member Faculty (≤ 10) at the 50th Percentile. Washington: AACN

The relative numbers of nursing faculty members receiving promotions and merit raises has been high. Over the last eight years, nursing faculty have been adequately represented among the CAHS faculty members receiving promotions. In 1993 one faculty member was promoted to the rank of associate professor and in 1996 two members were promoted to the rank of professor. Over the past five years, five members received merit raises.

The issue of productivity has been addressed on an ongoing basis within the Department of Nursing. The BSN program, as an upper division program offers

some advantages in regard to creative mechanisms to keep costs in line. For instance, an upper division program such as the one at FSU does not have the constraints of a generic BSN program, where the State Board of Nursing (SBON) guidelines stipulate that the faculty to student ratio must not exceed one to ten in the clinical instruction setting. In the FSU BSN program, the faculty to student ratio is typically one to twelve for the purpose of clinical supervision, but faculty can take on more clinical students as an overload assignment, without violating SBON guidelines. Faculty have agreed over the past several years to raise the caps on didactic courses as well in an effort to increase productivity. When courses exceed the cap number, and two sections are offered, the two sections may be taught by two faculty who travel together and teach concurrently or one faculty may elect to travel to the site and teach both sections on the same evening, in succession. Both of these alternatives save the university in regard to travel costs. By the same token, large clinical nursing courses are often team taught by two faculty. These solutions to the large class numbers often encountered in the BSN program course offerings have not only increased faculty productivity, but have helped to maintain continuity and quality of the program through the more consistent use of full-time faculty.

An area of concern which has become more acute in the past two years is the absence of the BSN coordinator role, which was eliminated three years ago. Although this was done as a cost cutting measure during the University fiscal restructuring process, it has become evident that this action has resulted in some potentially serious implications for the BSN program. Since the elimination of

this position, the Department Head and faculty have attempted to maintain the BSN program coordination through a redistribution of responsibilities. This has resulted in a very fragmented approach to coordinating a very large program. With 15 BSN student groups (five on campus and ten off campus), many coordination activities are not attended to in a very timely fashion. For instance, although there are two visits to each outreach site from a campus representative (the advisor and the Department Head) each year, many students still convey that they feel the communication between campus and the outreach site is unsatisfactory. These complaints, which have surfaced in the past two years, were not articulated by students historically. During the recent writing of the Self-study report for NLN accreditation, the loss of the BSN coordinator position once again became very evident. In this case, ongoing evaluation and documentation of BSN data was often found to be less than adequate, as responsibility for this process had previously been delegated to the coordinator.

With the very high demands required for the administration of the ADN program, the BSN program, which had historically run smoothly, has been allowed to continue with minimal program coordination. The concerns raised by both students and faculty in regard to the coordination of the BSN program, especially with the outreach sites, attest to this loss of program coordination. Although satisfaction with the program remains high among both these groups, the concern regarding the future implications for the BSN program without ongoing coordination are that the current satisfaction level may suffer a decline.

Conclusions

The resources allocated to the BSN completion program are commensurate with the resources of the university. Ferris State University, in both the budget allocation process and in provision of support services, provides the Nursing Department with the resources it needs to succeed in its mission as stated in the Unit Action Plan (Appendix P). To date, the Nursing Department has received budget allocations as requested and has consistently been able to attract qualified faculty to teach scheduled courses.

Productivity within the Department of Nursing is considered to be optimal in regard to the BSN program, with faculty demonstrating many initiatives directed toward increasing productivity. The concern of program coordination with the elimination of the BSN coordinator position three years ago has been identified as an ongoing issue for the Department of Nursing. It is the consensus of the Department Head and faculty that this position should be reinstated to maintain the quality and high level of student and graduate satisfaction with the program.

SECTION 12

CONCLUSIONS

Centrality to FSU Mission

The Department of Nursing Mission and Goals are consistent with the Mission and Goals of the University, the Academic Affairs Division, and the College of Allied Health Sciences. The alignment of these goals has been clearly demonstrated in the chart found in Appendix A.

Uniqueness and visibility

The Ferris BSN completion program is the only free-standing upper division BSN program in the state of Michigan, which provides only RN-to-BSN education for nurses who are graduates from either an associate degree or hospital diploma nursing program.

The BSN program is the only program in the state which can boast six outreach sites which are geographically dispersed throughout the state. The program offers a variety of teaching approaches, from distance education between Big Rapids and the ATC at Grand Rapids, to faculty who travel to each outreach site. The one night a week format has been applauded by students and graduates as user-friendly, and designed for the working nurse.

Service to State and Nation

The articulation agreements with the majority of the community colleges in the state facilitate career mobility for nurses throughout the entire state. No other BSN completion program has been designed to meet the academic needs for such a large group of potential students. The outreach approach has been identified by students in all geographic areas as the greatest strength of the program in regard to structure and format. Many students have commented that they would never have been able to complete their BSN if the program had not been so conveniently located.

In addition, the program has served as a successful base for graduate study, as evidenced by the large numbers of graduates who pursue masters programs. The changing trends of health care are supported by a program such as the one at Ferris. As noted in the 1997 AACN survey, the only baccalaureate nursing programs in the nation which have enjoyed a consistent increase in enrollments are the RN-to-BSN programs like the one at Ferris.

Demand by Students

The consistently high enrollment numbers for the BSN program indicate that the program continues to be in demand by students. Each outreach site is either completing its third rotation or in the beginning of its fourth rotation. These enrollment trends indicate that the pool of nurses who desire career mobility remains high.

Quality of Instruction

Student and graduate surveys indicate that the Department of Nursing faculty are considered to be one of the strengths of the program. The faculty are diverse in their approaches to instruction, with great effort made within the Department to elevate the quality of instruction on a regular basis. Critical thinking, as a required outcome criteria in the NLN accreditation process, has motivated the faculty of the Department of Nursing to excel in this area of instruction. Most of the faculty have attended critical thinking workshops to gain a greater understanding of the concept of critical thinking and to enhance their own instructional methodologies to more consistently cultivate critical thinking in students. This emphasis has been appreciated by students who have articulated the impact it has made upon their personal and professional lives. This is just one example of instructional excellence within the Department of Nursing.

Demand for Graduates

The demand for graduates of the BSN program continues to be very high. Although, BSN students are generally already employed during their enrollment in the program, graduate surveys indicate that their completion of the program has often resulted in greater professional opportunities for them as nurses in either their current settings or in new settings such as the community. Graduates also continue to pursue graduate study, for which the program serves as a required academic base.

Placement rate and average Salary of Graduates

The placement rate for BSN graduates is determined to be 100%, based on previous employment prior to entering the program. However, as noted above, graduates often enjoy promotions or job changes upon completion of the baccalaureate degree. The average salary of baccalaureate prepared nurses is, $37,441 according to the May 1996 graduate surveys. According to the graduate surveys from 1992-1996, 47% of the respondents reported that their wages increased upon completion of the BSN program, while 30% reported that their wages remained the same.

Service to non-majors

The curriculum focuses on the discipline of nursing and is supported by cognates in the arts, sciences and humanities. This reflects a required criteria for NLN accreditation. The BSN program includes carefully selected general education courses which have been included in the curriculum to complement the nursing course work. The general education courses are included as both prerequisites to the upper division program as well as required upper division courses. A total of 54 credits of the 120 required for the BSN degree are specified general education credits (Appendix O).

Facilities and Equipment

The physical facilities and professional equipment are adequate for the Department of Nursing to accomplish its goals. The physical facilities include

classrooms for didactic courses (traditional and distance education), office space and clinical sites for clinical course experiences. Equipment for the program includes professional equipment for the physical assessment courses (NURS 330 & 331), as well as audiovisual equipment for classroom presentations. Available physical facilities and equipment for both on and off campus programming have been identified in this report and indicate the support of the University and cooperating agencies and institutions.

Library Information Resources

Comprehensive and current library resources and other learning resources are developed with input from nursing and are adequate to meet the goals of the BSN program. The Health Sciences Library has served as the primary coordination of library services for the BSN program, both on and off campus. The combination of the Timme Library, the Health Sciences Library and local libraries at the various outreach sites provide adequate resources to meet the needs of students who are pursuing a BSN through Ferris.

Cost

The fiscal resources of the University are adequate to support the nursing program in accomplishing its goals. Overall, the budget base provides adequately for the Department of Nursing. Budgetary allocations for personnel and S&E for the BSN completion program for three consecutive fiscal years were demonstrated in this report, with no increase in the operating budget for 1997-98.

The resources allocated to the BSN completion program are commensurate with the resources of the university. To date, the Department of Nursing has received budget allocations as requested and has consistently been able to succeed in its mission as stated in the Unit Action Plan (Appendix P).

Faculty: Professional and Scholarly Activities

As the curriculum vitae of the faculty (Appendix A) will verify, faculty within the Department of Nursing engage in regular professional development endeavors in the form of continuing education, presentations at local, state, national and international conferences and doctoral studies. In addition, they also have engaged in many scholarly activities to include educational research and publications. Many of the faculty have been recognized at local, state and national levels for their excellence in nursing practice or education. All of these accomplishments are evident in the quality of instruction enjoyed by students in the Ferris BSN program.

Administration Effectiveness

According to faculty surveys, Dr. Johnson is unanimously regarded as an exemplary administrator who provides leadership which can be described as having both a high task and high relationship focus. She fosters a climate of creativity and collegiality among the faculty, providing administrative support for innovative teaching strategies and faculty involvement in service to the community and the university.

Since February of 1995, the Department Head has taken over the RN to BSN coordinator responsibilities along with Department Head duties. In the past ten years the program has grown from three on-campus and six off campus options to five on-campus and ten off-campus options (Appendix D). The workload of the Department Head involves administration of both the ADN and the BSN programs with responsibilities divided about equally between the two programs. The ADN program enrolls 60 students per year with all courses offered at the main campus.

The expansion of the ADN program in recent years, which has included admission of an additional 20 students per year for the last three years, as well as the increasing enrollment numbers of the BSN program has resulted in a state of role overload for the Department Head position. Although the faculty have attempted to assume some of the BSN outreach coordination responsibilities in regard to their individual courses and as advisors to each group, the loss of the BSN outreach coordinator position is beginning to result in a lack of program consistency in regard to established coordination activities. The expansion of the ADN program has also contributed to role overload for the faculty as additional clinical groups require additional faculty coverage.

It can be concluded that Dr. Johnson is highly qualified for the position of Department Head of Nursing, by virtue of her educational credentials and experiential base in nursing education. In addition, it is very evident that Dr. Johnson has carried out her administrative responsibilities in an effective and efficient manner during her tenure as Department Head. However, it can also be inferred that the combined administrative responsibilities of both the ADN and

BSN programs as well as the coordination of the BSN outreach sites is an excessive load for one administrator. If this administrative structure is maintained, the implications for both programs are potentially serious. In regard to the BSN program, the communication with outreach sites has been identified as a serious issue from both student and nursing faculty perspectives. In addition, the process of outcomes assessment may suffer without sufficient administrative attention in the future.

SECTION 13

RECOMMENDATIONS

The results of the Program Review Panel Evaluation have been compiled according to APRC guidelines. This form is found at the end of this section. The preparation of this report was found to be very well aligned with the critieria recently addressed by the Department of Nursing during the accreditation process for the National League for Nursing. It is the general consensus of the PRP that the BSN program is a strong professional program which continues to meet the needs of Registered Nurses who desire a baccalaureate of science in nursing degree to achieve career mobility within the discipline of nursing. The program strengths, areas of concern and recommendations for the future of the BSN program are described in this section.

Program Strengths

The RN to BSN program at Ferris has been determined to be an excellent professional program which is consistent with the FSU mission. As an upper division only program for BSN completion, it is unique in the state of Michigan as a mechanism for career mobility for RNs prepared at the Diploma or Associate Degree levels. The six different geographic outreach sites of the program have made it the most visible RN-to-BSN program statewide.

Demand for the program has been consistently high throughout the state. Enrollment trends indicate that RNs continue to need a program such as the

Ferris BSN program to meet their professional goals. In addition, current national labor market analysis has revealed that the RN-to-BSN graduates enjoy the highest employment rates of all baccalaureate nursing programs. FSU surveys of BSN graduates and employers of BSN graduates reflect a high level of satisfaction regarding the skills and abilities of FSU graduates of the BSN program.

From a university perspective, the BSN program provides adequate service to non-majors, by providing cognates in the sciences and liberal arts. The facilities and equipment are adequate to support the BSN program in accomplishing its goals. The library information resources are more than adequate to support students and faculty in the attainment of instructional goals for each course in the BSN program. Finally, the fiscal resources are adequate to support the goals of the BSN program and are commensurate with resources of the university. The Department of Nursing has demonstrated a commitment to faculty productivity in an effort to implement the BSN program in the most cost-effective manner.

The faculty are considered to be a major program strength, offering a great deal of diversity and longevity in regard to nursing education experience. Faculty have demonstrated exceptional commitment to professional and scholarly activities. In addition, they demonstrate outstanding levels of service to their communities and to the university. Student evaluations reflect very positive perceptions of the faculty and the quality of instruction of nursing courses.

The Department Head is considered to be an excellent administrator for the

Nursing Program

APRC 1997-1998

Section 5 of 8

SELECTED CONTINUING EDUCATION WORKSHOPS ATTENDED

March 1997   **Health Professions Education Futures Conference**
Ferris State University
6 contact hours

March 1997   **Critical Thinking and the Process of Assessment**
Richard Paul, Presenter, Center for Critical Thinking
Chicago, IL
10 contact hours

April 1996   **Peer Review and Professional Portfolio Development**
Ferris State University
6 Contact hours

January, 1996 **AAHE Annual Conference: Faculty Roles and Rewards**
American Association of Higer Education Annual Conference
Represented Ferris State University as part of leadership team
for the conference
Atlanta, Georga

October, 1995 **Midlife is Only Halfway There...**
Ruth Jacobowitz
Memorial Medical Center
Ludington, MI
2 contact Hours

August, 1995 **Coaching and Teambuilding Skills for Managers and
Supervisors**
Ferris State University
CAHS Faculty Development offering
6 Contact Hours

June, 1995   **Community Based Health Care: New Opportunities
for Student Experiences**
Ferris State University
Michigan Council of Nurse Education Administrators (MCNEA)
5 contact Hours

March, 1995 **Critical Thinking Through Socratic Questioning**
Richard Paul & Linda Elder, Presenters
Center for Critical Thinking Chicago, IL
10 Contact Hours

February 1995	**_Critical Thinking: Strategies for the Nursing Classroom_** Lansing, Michigan Michigan Council of Nurse Education Administrators (MCNEA) 5 Contact Hours
August 1994	**_14th International Conference on Critical Thinking and Educational Reform_** Center for Critical Thinking Sonoma State University Santa Rosa, California 24 Contact Hours
September 1994	**_The Use of Problem-Based Learning to Facilitate Critical Thinking Skills in Allied Health Students_** Workshop presented by College of Allied Health Sciences for Faculty Orientation/Development Week.
March 1993	**_Critical Thinking and The Redesign of Instruction_** Workshop for Higher Education presented by The Foundation for Cr itical Thinking Chicago, IL 10 Contact Hours
April 1992	**_Nursing and Space Life Sciences_** Houston, Texas Third National Space Nursing Conference presented by: University of Alabama Huntsville University of Texas Health Sciences Center School of Nursing Houston NASA 18 Contact Hours; 1.8 CEU's
November 1991	**_Management of Premature Rupture of Membranes)_** Mercy Hospital, Cadillac, MI 4 Contact Hours
October 1991	**_The Community College - Nursing Home Partnership_** Triton College Continuing Education Center for Health Professionals & FSU Department of Nursing Ferris State University 5 Contact Hours

April 1990	**Nursing in Space** Huntsville, Alabama Second National Space Nursing Conference, presented by: University of Alabama, Huntsville 18 contact hrs; 1.8 CEU's
June 1989	**Annual Nursing Research Conference** Wayne State University Detroit Michigan 12 C.E.U.'s
September 1988	**Accreditation: The Process, The Outcome** National League For Nursing St. Louis, MO 6.0 Contact Hours
August 1988	**From Theory to Practice** The Second Nursing Theory Congress Ryerson School of Nursing Toronto, Canada 13.5 Contact Hours
May 1988	**Perinatal AIDS** Nursing Transitions Conference Las Vegas, NV 15.1 Contact Hours
October 1987	**Empowering Families to Take Charge of Their Health** Fourth Annual Nursing Research Day Shapero Institute for Nursing Excellence & Research, Sinai Hospital of Detroit Southfield, MI 6.6 Contact Hours
May 1987	**Clinical Practice Model Workshop** Speaker: Bonnie Wesoriak Butterworth Hospital Grand Rapids, MI 8 Contact Hours
August 1986	**Theoretical Pluralism: Direction for a Practice Discipline** Nursing Theory Congress Ryerson School of Nursing Toronto, Canada 24 Contact Hours

May 1986	***Rehabilitation Nursing*** Speaker: Helen Millen, Kenny Rehab. Foundation Gerholtz Instititute for Lifelong Learning Traverse City, MI 7 Contact Hours
February 1986	***Critical Thinking and Learning Styles*** Speaker: Kitty Manley Department of Nursing Ferris State University
April 1985	***Nursing Knowledge: Improving Education Through Theory*** Sigma Theta Tau Cleveland, OH 8.4 Contact Hours
September 1985	***Transcultural Nursing*** Speaker: Madeline Leninger, RN, PhD, FAAN Ferris State University 5 Contact Hours
August 1985	***Infant Mental Health Certification Course*** Center for the Study of Infants and Their Families Alma, MI 24 Contact Hours

PROFESSIONAL MEMBERSHIPS

American Nurses Association (ANA)

Michigan Nurses Association (MNA)

Association of Women's Health Obstetric and Neonatal Nursing (AWHONN)

Sigma Theta Tau, Lambda Chapter, Wayne State University

National Council for Excellence in Critical Thinking (NCECT)

COMMUNITY INVOLVEMENT

VOLUNTEER / LEADERSHIP ROLES IN COMMUNITY SERVICE

Lake City Area School District Board of Education
Trustee (1989- 1995)
Secretary (1995-present)

Member of the Lake City Area Schools Reproductive Health Committee
(1989-present)

Provider for Sports Physicals for Lake City Middle School
and High School Students each spring (1985-present)

Member of the Community Strategic Planning Committee for Programming
Considerations at Lake City Area Schools (1994)

Lake City United Methodist Church Involvement:

      Health Ministry (1994- present)
      Membership Committee (1993-1996)
      Higher Education Committee (1995- present)
      Advisory Council (1995- present)

Volunteer for American Red Cross blood drives (1984-present)

Michigan Model Advisory Committee for Lake City School District (1991)

Lake City Adult / Community Education Advisory Board Member (1991-93)

Lake City Parent Teacher Association (PTA) Member (1991-present)

Lake City Parent Teachers Student Association (PTSA) (1991-94)

Missaukee Area Recycling (MAR) Volunteer (1990-1992)

Cystic Fibrosis Foundation Campaign Chairperson for Neighborhood Canvas in
Lake City (1987 & 1991)

Pied Piper Cooperative Preschool, President of Executive Board (1984-1986)

Coordinator for Michigan Nurse Week Publicity in Big Rapids Community (1985)

COMMUNITY SERVICE WORKSHOPS & PRESENTATIONS

June 1994
The Use of Cooperative Learning Groups to Teach Problem-Solving
Inservice for teachers at Lake City Middle
School, Lake City, MI

May 1991
Career Day
Lake City Middle School

January 1989
Basic First Aid
Presentation / Demonstration for Lake City Cub
Scouts, Den 2

September 1988
Birth Order and Its Impact on Family Dynamics
Presentation for Lake City Child Study Club

April 1988
AIDS Information Panel Discussion
Lake City Child Study Club

November 1987
Nutrition and Health
Presentation for Lake City Cub Scouts, Den 2

April 1987
Job Sharing: Nursing
Presented for Lake City First Grade Class
Lake City Elementary School

March 1986
Living with PMS
Presentation for Women's Issues Conference
Mecosta Council for the Humanities
Ferris State University

October 1986
Developing Roots and Wings in Children
Presentation for Lake City Child Study Club

September 1985
Pregnancy and the First Year
Focus on Parenting Workshop
Wexford-Missaukee Cooperative Extension Service

November 1984
Developmental Sexuality
Positive Parenting Program
Wexford-Missaukee Cooperative Extension Service

September -
December 1984
Sexual Health Issues
Presented in collaboration with the Ferris Student
Health Center in Dormatory settings (7 programs)

CURRICULUM VITA

NAME:

Susan L. Fogarty
809 Ives Avenue
Big Rapids MI 49307-2425
616-796-1439 (H)
616-592-2288 (O)

EDUCATION:

B.S.N. *Mercy* College of Detroit, Detroit, Michigan.
June 1966.

Primary Care Practitioner Certificate. Case-Western
Reserve University, Cleveland, Ohio. March 1976.

M.S.N. Wayne State University, Detroit, Michigan.
December 1989. Major: Community Health Nursing.
Functional Area: Nursing Education.

EXPERIENCE:

Senior Public Health Nurse. Detroit Health
Department. Detroit, Michigan. General community
health and school nursing. 1966-1967 and 1968.

Psychiatric Nursing Instructor. Mercywood Hospital.
Ann Arbor, Michigan. Temporary position as didactic
and clinical instructor for students from Mercy School
of Nursing. 1967.

Staff Nurse. Fort Worth Neuropsychiatric Hospital.
Fort Worth, Texas. Part-time position in 32-bed
private psychiatric hospital. 1968.

Public Health Nurse II. Texas Department of Health,
Division of Tuberculosis Control. Fort Worth, Texas.
Case finding, case and contact follow up, and family
and community education in a four county area.
1968-1970.

Family Nurse Practitioner. Regional Health Care.
White Cloud and Baldwin, Michigan. Primary
responsibility for managing selected caseload of
family practice clients in a collaborative practice with

1

physician and physician assistant colleagues. 1975-1987.

Nurse Practitioner. Planned Parenthood of Western Michigan. Part-time position providing family planning and related women's health care services. 1978-present.

Clinical Faculty. Ferris State College. Big Rapids, Michigan. Clinical instruction in Nursing Care of Groups and Nursing Care of the Individual within the Family courses. 1986-1987.

Assistant Professor. Ferris State University. Big Rapids, Michigan. Didactic and clinical instruction in both Associate Degree and Bachelors Degree nursing curriculum. Primary teaching responsibilities include the Transition course for RN to BSN students, Nursing Care of Clients with Reproductive Needs, Basics in Nursing, and Community Health Nursing. Developed the Transitions and Community and Family Nursing courses in the bachelors program and two Trends courses in the associate degree program during the transition from terms to semesters. Temporary half-time appointment as ADN Coordinator which involved advising approximately 150 pre-nursing students, arranging clinical sites for forty ADN students, and securing supplemental faculty. Tenured September 1992. 1987-1993.

Associate Professor. Ferris State University, Big Rapids, Michigan. September 1993

Nurse Practitioner. District #5 Health Department. Occasional contract position in Breast and Cervical Cancer Screening Clinic sites. 1992-present.

Nurse Practitioner. Healthy Beginnings. Occasional contract position in nurse managed prenatal clinic for ow income women at several sites. 1992-present.

UNIVERSITY ACTIVITIES:

Committee **Service:**
Department **of Nursing** Curriculum Committee,

1987-present. Chair 1994-present During this time the committee prepared the curriculum portion of the NLN Self-study which resulted in accreditation, developed a major ADN curriculum revision, adapted the ADN curriculum to semesters, and developed a major revision in the BSN curriculum as part of the semester conversion process. Policy, Procedure and Bylaws Committee 1987 - 1994 roles included preparing NLN Self-Study portion on departmental policies and procedures.

College of Allied Health Sciences Faculty Staff Development Committee 1987-1989, Chair 1988-1989. Arranged Faculty and Staff programs. Promotion/Merit Committee 1989-1992. Curriculum Committee 1988 to 1994, Chair 1989 to 1994. During this time the committee reviewed and worked to facilitate the approval of all curricula within the college in the semester transition process.

University **Committees:** MAGB Faculty Award Committee, 1988-1991. Student Health Advisory Committee, 1993-1995.
Senate Student Life Committee 1995-present, Chair 1995-present. As a newly formed committee we are focusing on clarifying the mission and selecting activities.
Faculty Advisor: Ferris Association of Lesbian, Gay, and Bisexual Students 1992-present. Ferris Student Nurses Association 1996.

GRANT AND AWARDS:

Time Grant Recipient 1992. Purpose of grant was to prepare produce video tapes on health history and physical assessment techniques to be used in health assessment courses.
Michigan Association of Governing Boards Distinguished Faculty Award 1996.
Listed in Who's Who Among American Teachers 1996.

PROFESSIONAL ACTIVITIES:

American Nurses Association, Michigan Nurses Association, 1975-present. Convention Planning Committee 1982-1985. Convention delegate 1987, 1988. Newaygo District Nurses Association 1975-

1989, President 1987-1989. Council of Nurses in Advanced Practice.
Professional Nurses for Advanced Practice, Founding Member.
Sigma Theta Tau, Lambda Chapter, 1988-present.
American Public Health Association, 1989-present.

COMMUNITY ACTIVITIES:

Lake County S.C.A.N. Team, 1982-1988.
Lake County Council for the Prevention of Child Abuse and Neglect, 1984-1988. Council wrote a successful prevention grant application and implemented a broad prevention program in Lake County Schools.
Baldwin Area Schools Citizen Advisory Committee, 1987-1988.
Mecosta County Teen Pregnancy Task Force, 1989-1990.
Program for Alcohol and Substance Abuse Treatment Board, 1987-present, vice-president 1989-present.
Mecosta County Affiliate of the American Heart Association Board Member 1996.

PRESENTATIONS PUBLICATIONS:

Presenter Teen Awareness Day, Baldwin, Michigan.
Is it Love or Lust? September, 1989.
Presenter of multiple programs on AIDS and other sexually transmitted diseases and contraception in Ferris State University Residence Halls, for international students, Ferris Association for Lesbian, Gay and Bisexual Students, and for students in Collegiate Skills program.
Fogarty, S. & Wheeler, J. (1993) Health Assessment Series. Videotapes, Ferris State University, Big Rapids. MI.
Presenter

CONTINUING EDUCATION:

5th Annual CONAP Clinical Symposium: Current Clinical Issues. May 1987. 12 Contact Hours.
Community Interventions: Parents and Professionals: A Partnership. June 1988. 16 Contact Hours.
E.C.M. First Annual Symposium: Low-Income, Minority, and Rural Older Adult Populations: Issues for the Future. July 1988. 17 Contact Hours.

4

Melodie Chenevert, How to Survive Professionally. October, 1988. 6 Contact Hours.

Nursing Diagnosis: Application to Clinical Care Planning. March 1989. 6.4 Contact Hours.

Nursing Education '90: Medical College of Pennsylvania Annual Nursing Education Symposium. June, 1990. 17.4 Contact Hours.

Celebrate Nursing '90. Melodie Chenevert. November, 1990. 8.5 Contact Hours.

NLN Annual Nursing Education Conference. Curriculum Revolution: Community Building and Activism. December 1990. 13.5 Contact Hours.

Eleventh Annual CONAP Clinical Symposium: Current Clinical Issues. June 1993. 12.3 Contact Hours.

Seventeenth Community and Public Health Nursing Conference. May 1994. 15 Contact Hours.

Nursing Faculty: Re-Tooling, Re-Energizing Workshop. November 1995. 5.5 Contact Hours.

Vita
Denise L. Hoisington
8727 140th Avenue
Stanwood, MI 49346

Objective: To obtain a Doctoral Degree in Educational Leadership in Higher, Adult and Lifelong Education.

Work Experience:
Ferris State University, Big Rapids, MI

9\1986 - Present   Nursing Instructor. Supervision of associate degree and Bachelor degree nursing students in clinical settings. Coordination of clinical site experiences with facility and staff of various health care institutions. Assisted in implementation of new associate degree curriculum and change to semesters. Clinical site assessment and evaluation. Instruction and coordination of lecture courses across both associate and bachelor degree programs. Developed policy and procedures of assessment of incoming freshmen in the associate degree program for counseling of students for placement into university support services. Assessment and evaluation of students in lecture and clinical settings. Development of student clinical assessment tools. Work on NLN Self Study
Committees: Policy and Procedure committee, Evaluation Committee

COURSES: Technical Nursing I, Assessment, Medical- Surgical Nursing, Pharmacology I and II, Transitions into Professional Nursing , Research, Leadership.

SPECIAL PROJECT: 1996-97Redesign Nursing 111 to include Critical Thinking and reformat labs \ clinical assignments.

Mecosta County General Hospital, Big Rapids, MI

3\1988 - Present   Registered Nurse. Involvement in the health care field as a practitioner in order to maintain skills and knowledge while working with nursing students. Intensive Coronary Care Unit, Emergency Room, Post Partum\Nursery Units, Medical\Surgical Unit, Pediatrics. Charge nurse duties including coordination of staff for 8-10 hour shift Mentor for new employees. Development and implementation of EKG reading class for staff. Participation in Quality Assurance activities and Utilization Program

CONSULTANT - to Computer Information Systems Department to develop Nursing Protocol and provide input into Computer programs being developed for nurisng units.

3\1978 - 7\1982   Staff nurse, relief charge and head nurse in the Operating\Recovery Room and Intensive Coronary Care Units. Evaluation policies and procedures.

Grand Valley State University, Allendale MI

9\1990 - 5\1991   Adjunct Faculty. Preceptor for MS students in education practicum. Preceptor and evaluation of students. Collaboration with MSN students for experience in the hospital setting and in the classroom working with nursing students in the associate degree program at Ferris State University. Development of experience for the students based on student needs. Assessment and evaluation of student work and collaboration with GVSU faculty.

Montcalm Community College, Sidney, MI

9\1990 - 12\1991   Adjunct faculty in department of nursing. Supervision, assessment, evaluation of associate degree nursing students. Coordination of clinical experience with health care agency.

Grand Rapids, Junior College, Grand Rapids, MI

8\1988 - 6\1989   Adjunct nursing instructor in a licensed practical nursing program. Coordination assessment and evaluation of clinical experiences for nursing students. Served on committees for curriculum change in the associate degree nursing program. Assessment and Evaluation of nursing students in clinical health care agencies. Development of clinical pharmacology course.

Miscellaneous: Michigan Home Health Care, Sturgis Hospital, Community Health Center of Branch County.

EDUCATION:

Michigan State University, East Lansing, MI

8\1990 - Present   Ph.D. program in Educational Administration in Higher, Adult and Lifelong Education. 42 credits completed, all courses completed except Research practicum and dissertation credits. Written Comprehensive exams taken November 1996 Pass given 1997. Courses include Adult Learning; Educational Leadership; Planning, Budgeting, and Evaluation; Educational Law; Life Span Psychology; Higher Education Finance. Foundations of Higher Education, Psychology of Learning, Research Seminar, Educational Inquiry

Andrews University, Berrien Springs, MI

1\1987 - 6\1990   Master of Science in Nursing, Nursing Administration , with a minor in Care of the Adult GPA 4.0. Courses: Research Theory, Research Project, Nursing Theory, Management and Leadership Theory, Grant and Proposal writing.

Ferris State University, Big Rapids, MI

1\1988 - 5\1990   Master of Science in Occupational Education. Graduated with Highest Distinction. GPA 4.0. Courses: Supervision in Education, CAI, Statistics, Research, Management, Curriculum Development and Learning Theory.

9\1983 - 5\1986   Bachelor of Science in Nursing. Graduated with High Distinction.

Member of student\faculty advisory committee.
12\1975 -11\1976   Associate Degree in Applied Science Degree , Nursing.

Glen Oaks Community College, Centreville, MI
9\1973 -8\1974   Certificate in Practical Nursing. Graduated with Honors, Presidents' list.

Organizations: Sigma Theta Tau International Nursing Society and,
ETA Zeta Andrews University Chapter.
Phi Kappa Phi Honor Society, 1990 Andrews University
Phi Kappa Phi Honor Society, 1994 Michigan State University

Seminar: June 1997, Health Seminars Conference, FSU

Service: **Red Cross Blood Drives, Participation in Daughter's school**

Honors: Russell Kleis Memorial Scholarship recipient 1994, Michigan State University

CURRICULUM VITAE

LORNA LEWIS

Personal History

Date of Birth	November 24, 1943
Place of Birth	East Cleveland, OH
Marital Status:	Married, 2 Children
Home Address	220 S. Warren
	Big Rapids, MI 49307
Phone	616-796-9042

Education

High School	Shaker Heights High School, Shaker Heights, OH	
	Diploma, 1962	
College	Western Reserve University, Cleveland Ohio	1962-1963
	Cuyahoga Community College, Cleveland Oh	1964-1966
	Associate Degree in Science, 1966	
	Ohio State University, Columbus Oh	1966-1968
	Bachelor of Science in Nursing, 1968	
	University of Michigan, Ann Arbor, MI	1976-1977
	Master of Public Health Nursing, 1977	
	University of Colorado, Denver, CO	1985-1986
	Gerontological Nurse Practitioner, Certificate	
	ANA certified as GNP	1987-1991

Experience

Ferris State University Dept. of Nursing Big Rapids, MI 49307	Associate Professor (promoted 6/82) Merit 1991	Teaching basic skills and gerontological nursing in ADN program (1980-present)
		Teaching physical assessment, health promotion, community health nursing in BSN program (1986-present)
	Assistant Professor Coordinator of Continuing	Develop and implement Continuing Education for

	Education for Nursing	Nursing at Ferris (1978-1980)
Mecosta County Health Dept. Big Rapids, MI 49307	Public Health Nursing	Staff Nurse Duties include planning care and visiting patients for an area of the county and staffing clinics. (1974-76) (1977-1978) ..
Mid-Michigan Community College Harrison, MI 48625	Instructor of Nursing	Part-time teaching of nursing courses: Professional Orientation, Obstetrical Nursing, and Medical-Surgical Nursing (1973-1974)
Ferris State College Nursing Department Big Rapids, MI 49307 In cooperation with Michigan Association for Regional Medical Programs East Lansing, MI 48823	Nurse Consultant	Developed project - Sub-regional Approach to Improved Nursing Care in cooperation with 7 rural hospitals and Ferris State College (1971-1973)
Mecosta Memorial Osteopathic Hospital Stanwood, MI 49346	Supervisor	Staff nurse in charge of hospital 3-11 shift. (1970-1971)
Villa Maria College Eri, PA 16505	Assistant Instructor of Nursing	Team-teaching in psychiatric nursing and fundamentals of nursing with major responsibilities in mental health. (1969-1970)
Cleveland Clinic Hospital Cleveland, OH 44106	Staff Nurse	Staff nurse on unit specializing in hypertensive research and renal disease with pre- and post-kidney transplant patients. Nurses responsible for running

peritoneal dialysis and preparing patients for hemodialysis. (1/1969-7/1969)

Huron Road Hospital   Staff Nurse   Staff nurse with varying
East Cleveland, OH   duties including charge
44112   nurse, team leader, and
                                           medications (6/66-10/68
                                           part and full-time
                                           depending on time
                                           available while pursuing
                                           baccalaureate degree at
                                           Ohio State University)

Lorna Lewis was born in East Cleveland, Ohio, November 24, 1943. She spent most of her early years through high school in Shaker Hts., Ohio. following high school, she attended Western Reserve University for one year and then transferred to Cuyahoga Community College, both in Cleveland. She was graduated from Cuyahoga Community College in 1966 with an Associate Degree in Science and credentials to take the state licensing exam for registered nurses. She became an RN licensed in Ohio in August 1966. Immediately upon graduation from Cuyahoga Community college, Ms. Lewis was accepted and in the fall entered the baccalaureate program for registered nurses in Ohio State University. She completed the program and was graduated in 1968 with a Baccalaureate Degree in Science of Nursing.

Initial employment as a registered nurse was at Huron Road Hospital, East Cleveland, Ohio. This position included summers, weekends, and term break while a student at Ohio State University. Because the position was not continuous, full time employment, it included a variety of experiences throughout the hospital. After graduation from Ohio state University, Ms. Lewis worked as a staff nurse at Cleveland Clinic Hospital. Her employment at Cleveland Clinic was on a unit specializing in hypertensive research and renal disease with patients before and after kidney transplants. She was also responsible for running peritoneal dialysis and preparing patients for hemodialysis.

After moving to Erie, Pennsylvania, Ms. Lewis took a position at Villa Maria College as assistant instructor. She was involved with team teaching in mental health nursing and fundamentals. Her responsibilities included assisting in the classroom and supervising students in discussion groups and on the clinical units.

In 1970 Ms. Lewis was employed as a nursing supervisor at Mecosta Memorial Osteopathic Hospital, Stanwood, MI. This was her first experience in a small community hospital. After four months, Ms. Lewis was appointed to Ferris State College as instructor to develop the project, Subregional Approach to Improved Nursing Care, Feb. 1, 1971. The central focus of the project was to develop an area-wide community structure for self-help that would endure and become self-sustaining. Activities included a wide variety of programs to meet needs to upgrade care provided, such as evaluation of care using Maria Phaneuf's Nursing Audit, coronary care training, improved leadership skills and assistance to develop skills of inservice personnel.

During a 10 month period of not working full-time, Ms. Lewis was employed by Mid-Michigan Community College to teach classroom courses for students of practical nursing.

In May of 1974 Ms. Lewis accepted employment as a public health nurse in Mecosta County. She was closely involved in planning nursing care and visiting patients for one-half of the county as well as staffing various clinics. She had also accepted responsibility for planning and teaching classes for diabetics and special programs and lecture on death and dying having completed three separate week-long seminars with Dr. Elisabeth Kubler-Ross.

Ms. Lewis has given workshops on achievement motivation for public health nurses in a six county area. In addition, following study on death and dying with Elisabeth Kubler-Ross and further indepth study, Ms. Lewis has presented many workshops, seminars, and lectures on death and dying to professional groups, adults, and college students using a variety of teaching techniques. These workshops have been given at Ferris State College, the University of Michigan, University of Chicago, and in various other settings.

During the 1971-73 period of employment with Ferris State College and Regional Medical Programs, there were numerous opportunities to continue professional education by attending workshops on consultation skills, principles of adult education, group dynamics, writing objectives, and leadership skills. Also, Ms. Lewis attended the National Conference on Continuing Education for Nurses in Snowmass, Colorado, 1972, and in San Francisco, 1978. In addition to planning and coordinating workshops for area nurses, Ms. Lewis planned, organized, designed and taught classes to train nurses' aides for the local hospitals.

Having taken courses part-time for two years toward the Master's Degree in Occupational Education, Ms. Lewis began a full-time program at the University of Michigan, School of Public Health, in May 1976 with graduation in May 1977. During this year she expanded her knowledge and skills in the area of death and

dying and provided a series of seminars for nurses at University Hospital, Ann Arbor, as a part of her independent field experience. Additional field experience in leadership skills and supervision was gained at the Detroit visiting Nurses' Association as a supervisor.

In 1977, Ms. Lewis founded a local chapter of the Society of Compassionate Friends, a self-help group for bereaved parents.

From 1978-1980, Ms. Lewis held the position of coordinator of continuing Education at Ferris State College. during that time the program achieved full accreditation by the American Nurses' Association. Ms. Lewis planned, developed, and occasionally presented numerous successful programs over the two year period. With the end of grant monies available, the college decided to terminate the continuing education programming. At that time, Ms. Lewis joined the teaching faculty in the ADN program. For the next five years Ms. Lewis taught basic nursing courses including fundamentals, medical-surgical and maternal-child health nursing in the ADN program.

Mr. Lewis was awarded a sabbatical leave for 1985-86. She attended the Gerontological Nurse Practitioner Program at the University of Colorado in Denver. although the course work emphasized care of the aged, the clinical portion was designed to include the life span. Clinical areas included senior citizen clinics, a nursing home, specialty clinics, and private physician's office in general practice, and Ferris' Student health Center. Ms. Lewis organized a clinic at the Big Rapids Parkview Village for hypertension screening and health counseling for senior citizens. She continued this offering following the conclusion of the nurse practitioner program as a community service. Ms. Lewis was awarded a certificate from the University of Colorado upon completion of the program and has successfully taken the American Nurses' Association certifying exam.

Ms. Lewis' teaching responsibilities include both Associate and Baccalaureate courses within the Department of Nursing. Because nursing development involves a widely comprehensive integration of varied skills, teaching also includes the full spectrum from theory to hands on clinical practice. I am qualified for my teaching assignments as a result of my educational preparation through a master's degree in public health. In addition, the nurse practitioner's program and continuing attendance at conferences, workshops, and lectures, as well as independent study, have enhanced my ability to be prepared in a variety of courses.

Ms. Lewis has taught the following courses: NUR 103 and NUR 105 Foundations of Nursing, NUR 107 Basic Medical Surgical Nursing, NUR Maternal Child Nursing, NUR 209 Leadership Nursing, NUR 333 and NUR 335 Health Assessment I and II, NUR 353 Perspectives in Nursing, NUR 347 Care of the Individual within the Family System, NUR 435 Community Nursing, NUR 443 Care of Groups, NUR 457 Seminar in Nursing. NUR 214 Gerontological Nursing was added as a new course

offering in 1992-93. The change to semesters has added other new courses configurations and challenges such as NURS 324 Transition into Professional Nursing.

For the past 25 years, Ms. Lewis has held an ongoing interest in various aspects of alternative health care and healing. She led a conference on Therapeutic Touch in 1994 and is planning to offer this conference again in 1997. This study and knowledge now is a valuable contribution to her teaching abilities in such courses as Health Promotions and Gerontology.

Publication

Lewis, Lorna, "Getting It All Together: Role of a Nurse Consultant", The Journal of Continuing Education in Nursing, July-August, 1973.

Honors

Sigma Theta Tau, National Honors Society for Nursing, 1977.

Promoted to Associate Professor - June 1982, Merit award 1991.

Sabbatical Leave, 1985-1986

Guest speaker, ADN Graduation Program, May, 1996

Memberships

Sigma Theta Tau, honorary professional society
American Holistic Nurses' Association
Nurse Healers--Professional Associate, Inc.
Michigan Public Health Association
Ferris Professional Women
Michigan Hospice Nursing Association
American Red Cross, service
Society of Rogerian Scholars

Service on Committees at FSU

University Committees:

Faculty Senate--1989-92, 1994-95, 1995-96
Senate Appointments Committee--1989-92
University Curriculum Committee--1991-92
Arts and Lecture Committee, 1994-95

College Committees:

College: Promotion Committee--1992-93
Academic Honors Committee--1994-95

Department of Nursing:
Tenure Committee--1983-present
Student Affairs Committee--1984-85, 1987-present
                          chairman, 94-present
Policy and Procedure Committee--1991-94

CURRICULUM VITAE

MARY J. ROEHRIG, RN, MSN, MA, LPC

Michigan Licensed Professional Counselor # 6401000896
Michigan Registered Nurse License # 4704081511

1302 Windridge Lane	Home Phone: (616) 924-8071
Fremont, MI 49412	Work Phone: (616) 592-2290

EDUCATION

DOCTOR OF PHILOSOPHY, Candidate
Counseling Psychology
Andrews University, Berrien Springs, MI.
Degree Expected 1999

MASTER OF ARTS
Specialization in Guidance and Counseling
University of Michigan, Ann Arbor, MI., 1982

MASTER OF SCIENCE IN NURSING
Adult Psychiatric Mental Health Nursing
Wayne State University, Detroit, MI, 1981

BACHELOR OF SCIENCE
Human Services: Nursing
University of Detroit, Detroit, MI., 1978
Graduated Magna Cum Laude

BRITISH LITERATURE course
Corpus Christi College, Oxford University
Oxford, England, 1978

DIPLOMA in Nursing
St. Joseph School of Nursing
Flint, MI, 1968

EXPERIENCE

1981 to Present	**Private Counseling Practice** Individual, Group, & Family Therapy Specializing in Stress Management
1985 to Present	**Associate Professor of Nursing** Ferris State University Big Rapids, Michigan
1988 to 1990 1990	**Staff Nurse, Select Nursing Services** Pine Rest Christian Hospital Grand Rapids, Michigan

1984 to 1985	**Instructor, Nursing** Nebraska Wesleyan University Lincoln, Nebraska
	Staff Nurse, Chemical Dependency Unit Lincoln General Hospital Lincoln, Nebraska
1983 to 1984	**Director of Nurses** Adult and Adolescent Chemical Dependency and Psychiatric Pavilion Lea Regional Hospital Hobbs, New Mexico
1983	**Clinical Instructor, Psychiatric Nursing** Saginaw Valley State University University Center, Michigan
1981 to 1982	**Academic Advisor and Clinical Instructor** Nursing and Allied Health C.S. Mott Community College Flint, Michigan
1982 1976 to 1977	**Instructor, Pharmacology** C.S. Mott Community College Flint Licensed Practical Nurses Association Flint, Michigan
1980 to 1983 1969 to 1973	**Staff Nurse** Labor & Delivery, Medical, CCU St. Joseph Hospital Flint, Michigan
1981	**Clinical Instructor, Psychiatric Nursing** Delta College University Center, Michigan
1978 to 1980	**Staff Development Instructor** Psychiatric and Medical Units Hurley Medical Center Flint, Michigan
1974 to 1976	**Team Leader & Charge Nurse** Genesee County Community Mental Health Children & Adolescent Inpatient Services Flint, Michigan
1968	**Staff Nurse** McLaren General Hospital Flint, Michigan

PUBLICATIONS AND RESEARCH

Roehrig, M. (1995). Disorders of children and adolescents. In K. Fontaine & S. Fletcher (Eds.), <u>Essentials of mental health nursing</u> (3rd ed.) (pp. 419-429). Menlo Park: Addison-Wesley Publishing Company.

Roehrig, M. (October-December, 1991). Book Review: Body image disturbance assessment and treatment by J. Kevin Thompson. <u>Journal of Psychiatric and Mental Health Nursing</u>.

Roehrig, M. (1990). Wellness education model program. Submitted to U.S. Department of Health and Human Services (not funded).

Roehrig, M. (1989). Nursing centers: State of the art. In <u>Nursing centers: Meeting the demand for quality care</u>. New York: National League for Nursing.

Roehrig, M. & Vance, J. (1989). Community health promotion. Submitted to Kellogg Foundation, Battle Creek, MI. (not funded).

Roehrig, M. (1987). Nursing centers: State of the art, Ferris State University, Big Rapids, MI. Research presented at the 4th Biennial Conference on Nursing Centers, Milwaukee, WI. May, 1988.

Roehrig, M. (1987). Child and adolescent mental health nursing. In S. Cook and K. Fontaine (Eds.), <u>Essentials of mental health nursing</u> (pp. 561-590). Menlo Park: Addison-Wesley Publishing Company.

Roehrig, M. (1981). A descriptive study of the existence and extent of burnout among registered nurses in the Flint, Michigan area, and the willingness of staff nurses to accept counseling. Unpublished master's thesis, Wayne State University, Detroit, MI.

Roehrig, M. (1979). The effects of utilizing nurse counselors to combat nursing burnout: A concept paper. Submitted to U.S. Department of Health (not funded).

Roehrig, M. (1978). The role of the nurse counselor. Unpublished master's thesis, University of Detroit, Detroit, MI.

Roehrig, M. (1978). <u>A part of me</u>. (poetry) Bryn Mawr: Dorrance and Company.

Frequent reviewer of psychiatric and psychosocial content for J.B. Lippincott, C.V. Mosby, and Addison-Wesley Publishing companies and <u>Journal of Child and Adolescent Mental Health Nursing</u>.

PRESENTATIONS

1979 to present	"Stress Management" Frequent presenter; list of groups available upon request.
1992 to 1993	"Nutrition and Recovery" Program for Alcohol and Substance Treatment Big Rapids, Michigan
1992	"Adult Play Therapy" Ninth Annual International Conference of Play Therapy Nashua, New Hampshire
1991	"Learning to Play at Work and Working at Play" "Panic Disorders in Adolescents" Psychiatric Nursing Update '91 Chicago, Illinois
1989 to 1991	Trainer for lay support group leaders New Life, Grand Rapids, Michigan
1990	"Adolescent Mental Health Update, Ambulatory Intervention and Prevention" Cincinnati, Ohio
1989	"Frustrated, Frazzled . . . I Need Help" Work Conference for Office Personnel Ferris State University Big Rapids, Michigan
1988	"Nursing Centers: State Of The Art" 4th Biennial Conference on Nursing Centers Milwaukee, Wisconsin
1987	"Improving Productivity: Stress Reduction Management" 31st Annual Advanced Cosmetology Workshop Ferris State University Big Rapids, Michigan
1984	"Management of the Violent Patient" "Assertiveness Training" Lea Regional Hospital Hobbs, New Mexico
1982	"Burnout" Hurley Medical Center, Flint, Michigan
1980	Shiawassee District Nurses Association Owosso, Michigan

PROFESSIONAL ACTIVITY

1989 to present   Member, Mecosta County Suspected Child Abuse
and Neglect Team

1993 to 1994   Member, Outcomes Assessment Council and
Research Committee
Ferris State University, Big Rapids, MI

1987 to 1990   Member, Mecosta County Community Mental
Health Services Coordinating Body

PROFESSIONAL AFFILIATIONS

American Counseling Association, Student Member
American Psychiatric Association, Student Affiliate
National Education Association
Phi Kappa Phi Honor Society
Sigma Theta Tau International Honor Society of Nursing

Documentation of Continuing Education Supplied Upon Request

References Available Upon Request

RESUME

RUTH N. ROSE
245 Wiseman
Lakeview, MI 48850
517/352-6064

OBJECTIVE:

EDUCATION and TRAINING:

1977-1979	**Wayne State University**
	Detroit, Michigan
M.S.	Nursing
	Clinical Nurse Specialist
	Major: Maternity
	Minor: Teaching in Nursing
1972-1974	**Aquinas College**
	Grand Rapids, Michigan
B.A.	Major: Psychology
	Minor: Teaching
1953-1956	**Edward W. Sparrow Hospital**
	School of Nursing
	Lansing, Michigan
1953	**Lakeview Community Schools**
	Lakeview, Michigan

MASTERS RESEARCH:

The characteristics of Registered Nurse employment in West Michigan Health Systems Agency.

Research Sequence

Introduction to statistics, process of scientific inquiry, and to literature of nursing research. Experience in the use of the research process. Phenomena investigated: Characteristics of Registered Nurses employed in the West Michigan Health Services Agencies.

SCHOLASTIC HONORS:

Women's Club of Grand Rapids: Scholarship Aquinas College
Graduated Summa Cum Laude, Aquinas College, 1975
Master Teaching Award, Montcalm Community College, 1978
Sabbatical Leave, Montcalm Community College 1975

TEACHING EXPERIENCE:

1966-present	**School of Nursing** Montcalm Community College Nursing Skills, Body Structure and Function, Nutrition and Diet Therapy, Mental Health, Maternal-Child Nursing I, Maternal-Child Nursing II, Lead Instructors, Advanced Pharamacology, Interpersonal Communications, Role Transition
1985-Present	Ferris State - BSN Program Assessment Skills and Community Nursing

TEACHING INTERESTS:

Facilitation of the student's learning experiences by providing a role model of clinical practice, being available for conferences, being available for collaboration, and providing a framework and resources for the student. Particular interest in assisting with prepared childbirth and family centered maternity care.

WORK EXPERIENCE:

1962-1966	**Director of Nursing** Kelsey Memorial Hospital Lakeview, Michigan
1961-1962	**Supervisor** Kelsey Memorial Hospital Lakeview, Michigan
1960-1961	**Office Nurse** Dr. L. Tyson, Professional Clinic Big Rapids, Michigan
1957-1960	**Director of Nursing Services** Mecosta Memorial Hospital Stanwood, Michigan
1956-1957	**Staff Nurse** College Health Service Central Michigan University Mt. Pleasant, Michigan

GRADUATE STUDY:

Maternity Major

Systematic assessment of individual and family needs through history taking and physical examination. Special emphasis was upon the clinical care of the high-risk mother and infant.

A sociological analysis of the family institution viewing the family in historical and cross cultural perspective. A structural major paper on "Parent and Youth Attitudes Towards Marriage and the Family."

Teaching Minor

Principles of curriculum development and their application to constructing and revising the nursing school curriculum. Relationship of individual courses to the nursing school curriculum. Planning for clinical teaching and student evaluation. Field practice in clinical teaching.

UNDERGRADUATE STUDY:

1953-1956

Edward W. Sparrow Hospital, School of Nursing
Three year diploma program; incorporating professional courses based on knowledge of physical, biological, social sciences, and communication skills.

Throughout the program, students had opportunities to explore major health care needs and the use of nursing process with patients of various socio-cultural, age, and ethnic groups.

1972-1974

Aquinas College
B.A. in Psychology and a minor in teaching

Psychology included a study of processes and consequences of various theoretical positions in psychology about human behavior, a survey of psychology research and an introduction to statistical methods used in research. Study of experimental psychology including investigation with rats and also with human subjects.

ADVANCED STUDY:

Pharmacology workshops including drug interactions, abuse of prescription drugs, abuse of "street drugs" and interventions.

Modern Methods in Obstetrics and Gynecology — American Medical Society

Education Conferences on Curriculum for Nursing Programs

Evaluation of Clinical Behaviors in Students -- National League for Nursing

"In support of the Family" — Family Centered Nursing Care for Childbearing
Perinatal Association of Michigan

"Modern Childbearing" including methods of teaching Lamaze and prepared
childbirth -- Reflections to renaissance in childbearing. Childbirth without Pain
Education Association and College of Nursing -- Wayne State University

Michigan Conference on Maternal and Perinatal Health — 1981-1983, 1984-1985
Nursing and the Law
Nurses in the Marketplace

SKILLS:

Strong skills in interpersonal communications.
Evaluation skills as evidenced by evaluation of employees while employed as
Director of Nursing.
Evaluation of student performance in clinical and classroom settings.
Successful financial budgeting - budgets prepared for nursing service of Kelsey
Memorial Hospital.
Budget requests prepared for Montcalm Community College, for needs of classes
and clinical settings.
Experience with education of students in nursing, also anatomy and physiology for
liberal arts.
Participated as a student in several classes offered by Montcalm Community
College including current enrollment in Intermediate Computer Awareness class.
Assisted in writing proposal: A Laddered Associate Degree Nursing Program at
Montcalm Community College in 1980. This includes a support of the Mission and
Goals Statement of Montcalm Community College and the philosophy of the nursing
program.

PROFESSIONAL ACTIVITIES:

Presentations:

Kelsey Memorial Hospital 1963-1966
Speaker: "Prepared Childbirth for Prenatal Classes"

Montcalm Community College, Adult Foster Care Education
Speaker: "Diet Therapy in Chronic Disease"

Montcalm Community College 1976
Speaker: Commencement Ceremony

Kelsey Memorial Hospital 1978
Speaker: "Injection Techniques for the Newborn and Pediatric"

Montcalm Community College, Campaign Millage
Presentations to groups including the Lions Club

ELECTION TO PROFESSIONAL OFFICES:

1984-1985	President Montcalm Community College Faculty Association
1962-1965	President Montcalm-Ionia Nurses Association
1957-1959	Vice President Mecosta-Oscelola Nurses Association

COMMITTEES:

Needs Assessment for PN program
Needs Assessment for ADN program
Curriculum Planning and Revision Committee to develop proposal for a laddered
ADN program
Chairperson, Grievance Committee
Negotiations Committee, Faculty Council
Committee to select graduation speaker
Committee to discuss Master Teaching Award candidates
Region 9 Unified Bargaining Committee
Region 9 Coordinating Council Representative

MEMBERSHIPS:

1985-	Michigan Nurses Association (and ANA)
1966-present	Faculty Council Montcalm Community College
1966-present	Michigan Education Association
1966-present	National Education Association
1975-1985	National League for Nursing

CURRICULUM VITAE

Cecile B. Slywka, MSN, BSN, RN

OFFICE ADDRESS

Department of Nursing
Birkam 234
Ferris State University
Big Rapids, MI 49307

PHONE: 616- 592- 2289

HOME ADDRESS

20485 Crestview Drive
Reed City, MI 49677

PHONE: 616- 832- 4359

EDUCATION

1981 - 1984	Wayne State University Master of Science in Nursing (MSN) May, 1984 Major: Advanced Medical- Surgical Nursing
1978 - 1981	University of Michigan Bachelor of Science in Nursing (BSN) May, 1981
1964 - 1965	University of Saskatchewan Diploma in Teaching and Supervision, May, 1965
1958 - 1961	St. Paul's Hospital School of Nursing Diploma in Nursing, June 1961.

EMPLOYMENT

1989 - Present	Associate Professor Department of Nursing Ferris State University Big Rapids, MI
1981 - 1989	Assistant Professor Department of Nursing Ferris State University Big Rapids, MI
1987, June	NCLEX Review Instructor in Medical- Surgical Nursing Pre RN Review Course Educational Resources Schoolcraft, MI
1988 - 1996	Per Diem Nurse - Medical- Surgical, Pediatric and Obstetric Units Mecosta County General Hospital Big Rapids, MI
1978- 1981	Part Time Instructor Department of Nursing Ferris State University Big Rapids, MI

1978	Clinic Staff Nurse - Client assessment and infirmary care Ferris State College Student Health Center Big Rapids, MI
1977- Jan - June	Health Occupations Instructor Reed City High School Reed City, MI
1975- 1976	Clinical and Theory Instructor Maternal - Child Health Baptist Memorial Hospital School of Nursing Memphis, TN
1968- 1969	Clinical Instructor, Pediatrics University of Alberta Hospital Edmonton, Alta. Canada
1965- 1968	Assistant Head Nurse, Pediatric Unit University of Alberta Hospital Edmonton, Alta. Canada
1962- 1964	Staff Nurse, Pediatrics Royal Columbian Hospital New Westminster, B.C. Canada
1961- 1962	Staff Nurse Lloydminster Hospital Lloydminster, Sask. Canada

EDUCATIONAL EXPERIENCE

INSTRUCTION	Eighteen years of involvement in clinical and didactic instruction in both Associate and Baccalaureate courses within the Department of Nursing as well as PH 430 a physical assessment course to the undergraduate Pharmacy and Doctor of Pharmacy students. Nursing instruction was predominantly in the Medical - Surgical area at the Associate level and Health Assessment, Leadership and Management, and Seminar in Nursing at the Baccalaureate level.
CURRICULUM	Experience in individual course development during employment. Five years as a member of the Department Curriculum Committee. On the University Curriculum Committee in 1993 with involvement in the evaluation of programs during the semester conversion.

COMMITTEE INVOLVEMENT

UNIVERSITY COMMITTEES

1988 - 1991	Academic Health and Safety Committee
1990 - 1993	Faculty Research Committee

1992 - 1994	Academic Senate
1993-1994	Subcommittee of Senate: University Curriculum Committee
1996 - 1997	Health Professions Education Futures Conference Committee

COLLEGE OF ALLIED HEALTH SCIENCES

1987 - 1990	Recruitment/Retention Committee
1989	Open House Committee
1989 - 1991	Library Committee
1991	Reorganization Task Force
1992 - 1996	Tenure Committee

DEPARTMENT OF NURSING

1988 - 1991	Faculty Development Committee
1988 - 1994	Policies and Procedure Committee
1991 - 1994	Student Affairs Committee
1994 - present	Curriculum Committee

PROFESSIONAL ACCOMPLISHMENTS/ENDEAVORS

1989	"The Changing You." LeRoy Junior High School students presentation.
1990	"Hazards of Sun Tanning." Ferris State University dormitory presentation.
1991	National Occupational Competency Testing Institute (NOCTI) Collaborated in development of a two part examination evaluating both cognitive and psychomotor domains of learning and facilitating placement of Health Occupation students and Licensed Practical Nurses into nursing programs thus providing easier career mobility.
1992 & 1993	HOSA (Health Occupation Student Association) Bowl judge.
1992	Nightingale Award for Nursing Education. Granted by the Oakland University.

1992	Workshop Presentation: Health Care: The Nursing Process and Physical Assessment. Co.- presented at a three day workshop on the various aspects of assessment at the Mt. Pleasant Regional Center, Mt. Pleasant MI.
1992	Workshop Presentation: Health Care: The Nursing Process and Physical Assessment. Co.- presented at a three day workshop on the various aspects of assessment at Northern Michigan Community Mental Health, Gaylord, MI.

PROFESSIONAL MEMBERSHIPS

1980 - present	Sigma Theta Tau - National Honor Society for Nurses
1984 - present	Member of American Nurses Association (ANA)
1984 - present	Member of Michigan Nurses Association (MNA)

COMMUNITY SERVICES

1984- present	American Red Cross Blood Bank Volunteer
1989 -1990	Reed City Boy Scouts - First Aid Presentation
1991 - 1992	American Cancer Association Volunteer
1990	Member of School Mill Change Advisory Committee
	Reed City St. Philip Neri Catholic Church Involvement:
1984 - 1990	Instruction of Christian Doctrine to Junior High students
1984 - 1991	Minister of the Eucharist
1990 - 1994	Chair of Social Committee
1994 - present	Member of Social Committee
1990 - 1992	Secretary/Treasure of Big Rapids University of Michigan Alumni.
1988 - present	Board member of University of Michigan Alumni.
1997	Volunteer for March for Mothers

CONTINUING EDUCATION WORKSHOPS

March, 1997	**Health Professions Education Futures Conference** **Ferris State University** **Erica Mayer - Keynote Speaker** **Institute for Alternative Futures** **6 Contact Hours**
March, 1997	**Critical Thinking Workshop: Assessment** **Chicago, Illinois** **The Foundation for Critical Thinking** **10 Contact Hours**
February, 1997	**AIDS : Historical Update** **Michigan Pharmaceutical Association** **Dearborn, Michigan** **7 Contact Hours**
September, 1996	**Immunization** **Ferris State University - Videoconference** **Gerholz Institute Lifelong Learning** **2 Contact Hours**
May, 1996	**Critical Thinking Workshop : Foundation** **Orlando, Florida** **The Foundation for Critical Thinking** **10 Contact Hours**
February, 1996	**Cancer Therapies** **American Pharmaceutical Association** **Dearborn, Michigan** **7 Contact Hours**
November, 1995	**Teaching Strategies for Nursing Faculty** **Ysilanti, Michigan** **Eastern Michigan University** **6 Contact Hours**
March,1995	**Advances in Medical-Surgical Nursing** **Nashville, Tennessee** **Contemporary Forums** **18 Contact Hours**

February, 1995	**Critical Thinking: Strategies for the Nursing Classroom**
	Lansing, Michigan Michigan Council of Nursing Education Administrators 5 Contact Hours
November, 1994	**SIS Computer Program**
	Ferris State University - Academic Computing 3 Contact Hours
May, 1994	**Pain Management** **Margo McCaffrey - Speaker**
	Grand Rapids, Michigan 6 Contact Hours
May, 1993	**Advanced Techniques for Medical-Surgical Nurse**
	French Lick, Indiana American Health Care Institute 15 Contact Hours
March, 1993	**Everything You Always Wanted to Know About Nursing** **Documentation**
	Ann Arbor, Michigan American Health Care Institute 7.5 Contact Hours
March, 1993	**HIV Infection: Latest Nursing Care Strategies & Techniques**
	Romulus, Michigan American Health Care Institute 7.5 Contact Hours
May, 1992	**The Difficult Patient** **Melodie Chenevert - Speaker**
	Detroit, Michigan 6 Contact Hours
April, 1992	**Meeting the Challenge**
	San Diego, California American Pharmaceutical Association 12 Contact Hours
October, 1991	**The Community College - Nursing Home Partnership**
	Ferris State University Triton College Continuing Education Center for Health Professionals 5 Contact Hours

June, 1991	Nursing Education 1991
	The Conference for Nursing Faculty
	Boston, Massachusetts
	Medical College of Pennsylvania
	18.6 Contact Hours

June, 1991   Nursing Education 1991
The Conference for Nursing Faculty

Boston, Massachusetts
Medical College of Pennsylvania
18.6 Contact Hours

February, 1991   Dietary Concerns for Hospitalized Patients
Michigan Pharmaceutical Association & Michigan Nurses Association

Dearborn, Michigan
12 Contact Hours

May, 1990   An Assertive Nurse
Melodie Chenevert - Speaker

Kalamazoo, Michigan
7 Contact Hours

May, 1990   Nursing Education 1990
The Conference for Nursing Faculty

Washington, DC
Medical College of Pennsylvania
19.2 Contact Hours

February, 1990   Pain Strategies and Management
Michigan Pharmaceutical Association & Michigan Nurses Association

Dearborn, Michigan
12 Contact Hours

January, 1990   AIDS

Ferris State University - Videoconference
Gerholz Institute Lifelong Learning
2 Contact Hours

May 1989   Basic Computer Literacy

FSU Academic Computing
9 Contact Hours

May, 1989   Nursing Education 1989
The Conference for Nursing Faculty

Philadelphia,Pennsylvania
Medical College of Pennsylvania
19.2 Contact Hours

Nursing Program

APRC 1997-1998

Section 6 of 8

March, 1989	**Clinical Evaluation** **Lynda Carpenito - Speaker** **Gaylord, Michigan** **7 Contact Hours**
March, 1989	**Diabetes** **Indianapolis, Indiana** **Eli Lilly** **3 Contact Hours**
May, 1987	**Clinical Practice Model Workshop** **Bonnie Wesoriak - Speaker** **Grand Rapids, Michigan** **8 Contact Hours**
February, 1986	**Critical Thinking Workshop** **Kitty Manley - Speaker** **Ferris State University**

CURRICULUM VITA

JACQUELINE R. WHEELER KLEIN
21015 Woodward Road
Big Rapids, Michigan 49307   Telephone: (616) 796-9122

PERSONAL

BORN: 2/3/43, in Fort Riley, Kansas
                 Height: 5'4" Weight: 130 lbs

MARRIED: 8/67; Matthew A. Klein, Secondary Education/B.S.,
                 Educational Administration/M.S., Secondary Education
                 and Curriculum Development/Ph.D.

CHILDREN: Lauren   Born: 11/69
                 Elizabeth   Born: 10/73

HEALTH: Excellent

EDUCATION

M.S.N.   Wayne State University, Detroit, Michigan
1979   Major: Adult Psychiatric-Mental Health Nursing
                 Minor: Nursing Education
                 Field Study: "An Assessment of Sexual Knowledge and
                               Attitudes of Nursing Students"

B.S.   Ferris State College, Big Rapids, Michigan
1975   Major: Allied Health Teacher Education

Diploma   Bronson Methodist Hospital School of Nursing
1965   Kalamazoo, Michigan

EMPLOYMENT

9/82 - Present   FERRIS STATE COLLEGE, Big Rapids, Michigan
                 Associate Professor, BSN Program
                 Department of Nursing

9/8-8/82   FERRIS STATE COLLEGE, Big Rapids, Michigan
                 Program Director, Department of Nursing
                 Laddered ADN Program; Assistant Professor

3/71-8/80   FERRIS STATE COLLEGE, Big Rapids, Michigan
                 Technical Instructor; Coordinator-First Level
                 Program-Laddered ADN Program

10/70-7/71   MECOSTA COUNTY GENERAL HOSPITAL, Big Rapids, Michigan
                 Charge Nurse (part-time)

3/68-1/69   AMERICAN RED CROSS, East Lansing, Michigan Staff
                 Nurse; Blood Donor Program

6/67-3/68   BRONSON METHODIST HOSPITAL, Kalamazoo, Michigan
                 Head Nurse; Neonatal Intensive Care

5/66-6/67   BRONSON METHODIST HOSPITAL, Kalamazoo, Michigan
                   Charge Nurse; Department of Pediatrics

9/65-5/66   CHILDREN'S HOSPITAL OF MICHIGAN, Detroit, Michigan
                   Charge Nurse; Russel Ward & Eye & Ear

COURSE DEVELOPMENT:

During my tenure at Ferris, I have been responsible for the development of several courses; including nursing leadership, nursing assessment and professional issues. This responsibility includes the preparation of the course syllabus (or course materials) for sale in the college bookstore. These workbooks are normally 20-40 pages and are required reading for students.

Most recently, I have been responsible for the development and implementation of three of the five new upper-division baccalaureate in nursing courses.

ADMINISTRATIVE EXPERIENCE: Department of Nursing

In the fall, 1977, I was assigned coordinator of the first level program and assistant to the Acting Head, Department of Nursing, Ferris State College. The first level of this laddered, associate degree nursing program allows for career exit at the LPN level. I have been responsible for coordinating seven courses as well as supervising five faculty. This special assignment also included responsibility for the development of course syllabi, coordination of student schedules, evaluation of clinical agencies and orientation of new faculty. In addition, I am responsible to assist the department head with the preparation of written reports to the Michigan Board of Nursing and the Nursing Advisory Committee.

Beginning Fall 1980, I was promoted to Program Director, Department of Nursing. Responsibilities of this position include administration of the Nursing program, faculty development and evaluation, teaching, curriculum development and evaluation.

COMMITTEES AND AWARDS:

9/84   Member, Curriculum Committee   Ferris State College
            BSN Representative   (elected by Departmental faculty)

1983-84   Member, Presidential Search   Ferris State College
            Committee   (appointed by the Ferris State
                                               College Board of Control)

1983-84   Member, Policies and Procedure   Ferris State College
            Committee   (elected by Nursing faculty)

1983-84   Member, Promotions Committee   Ferris State College
            School of Allied Health   (elected by School of Allied
                                               Health faculty)

9/83   Alternate, Educational Planning   Ferris State College
            Committee (All College)   (elected by School of Allied
                                               Health faculty)

COMMITTEES AND AWARDS - continued

82-84	Chairperson, Orientation Committee	Ferris State College (elected by Nursing faculty)
9/80	Chairperson, Budget Subcommittee BSN Planning Committee	Ferris State College (appointed by the Dept. Head)
9/80	Member, BSN Planning Committee	Ferris State College (appointed by the Dean)
9/80	Recipient, Mini-Grant	Ferris State College (awarded by Assistant Vice President for Academic Affairs)
9/80	Advisor, Ferris State College Student Nurse Association	Ferris State College

PROFESSIONAL ORGANIZATIONS:

American Nurses' Association (ANA)

Michigan Nurses' Association (MNA)

Sigma Theta Tau (Professional Honor Society of Nursing)

Michigan Nurses Association
    Council on Nursing Research

National League for Nursing (NLN)

Michigan League for Nursing (MLN)

Council on Nurses in Advanced Practice (CONAP)

Professional Nurses for Advance Practice (PRONAP)

CONTINUING EDUCATION ACTIVITIES:

5/80	Coordinator, AH-250 Pharmacology for Allied Health (core course for Nursing, Medical Assisting, Medical Records)	Ferris State College (appointed by the Dean)
4/80	Member of the Biology Taskforce	Ferris State College (appointed by the Dean)
1/80-9/84	Member, Nursing Advisory Panel	West Michigan Health Systems Agency
5/79-present	Member, Departmental Tenure Committee (Chair 1983-84)	Ferris State College (elected by Department of Nursing faculty)

5/78-8/80	Chairperson, Curriculum Committee, Department of Nursing	Ferris State College (Department of Nursing)
5/78-10/78	Member, Feasibility Study Committee for BSN Program appointed by the Dean	Ferris State College (School of Allied Health)
10/77-4/78	Member, Search Committee, Department Head, Nursing	Ferris State College (School of Allied Health)
1978	Nominee, Teacher of the Year Award	Ferris State College
1/79	Professional Negligence (1-day conference)	The University of Michigan/ Ferris State College, held in Big Rapids, Michigan (participant)
3/79	Ego Psychology/Dr. Erica Fromm (2-day conference)	Pine Rest Mental Health Facility, Grand Rapids, Michigan (participant)
10/79	Michigan Nurses' Association, Annual Convention (2 days)	Michigan Nurses' Association held in Detroit, Michigan (participant)
3/80	Child Abuse (3-hour presentation)	HELP, a support group for pregnant women. Big Rapids, Michigan (co-presentors, J. Klein and E. O'Dea)
4/80	Cooperation vs. Competition Interinstitutional Mobility for Nurses (3-day workshop)	Project MANEC, HEW grant project report, Minneapolis, MN (participant)
4/80	Female Sexuality: A Threat or a Promise (1-day workshop)	Newaygo County Women's Resource Council (presentor, J. Klein), Newaygo, Michigan
4/80	Issues in Nursing: Laddered Nursing programs (1-day workshop)	Ferris State College 9th Annual Ferris State College Vocational-Technical Educational Conference, Big Rapids (J. Klein, panel member)
9/80	Sexuality and the Elderly (1-hour presentation, 1-day seminar)	Grand Valley State Colleges, School of Nursing and Kent County Catholic Social Services, Grand Rapids (J. Klein, presentor)

2/81	Midland Regional Assembly of Constituent Leagues of Nursing (MRACLN) Invitational Conference for A.D. Nursing Educators (1 day)	Chicago, Illinois (participant)
5/81	You and Your Aging Parent (1-day workshop)	Newaygo County Women's Resource Council (co-presentor) Newaygo, Michigan
5/81-7/81	Developmental Disabilities: Educational Program for Nurses-1981 Series of (6) 1-day workshops	Wayne State University Funded by State Department of Mental Health Grant. A. Zuzich & S. Feetham principal presentors. (J. Klein small group leader) Grand Rapids, Michigan
6/81	Faculty Update: Impact of Nursing Models on Curriculum	Wayne State University, Detroit, Michigan (participant)
6/81	Panel Presentation Career Mobility for LPN's The Ferris Model	Michigan Licensed Practical Nurse Association, Midland, Michigan (J. Klein, presentor)
11/81	"Dreams and Reality: Where Do They Meet" (6 hour workshop)	WHMSA Nursing Advisory Panel (J. Klein, co-planner)
3/82	"Understanding the New State Board Examination" (1-day workshop)	Michigan Nurses' Association/ Michigan State Board of Nursing (participant)
7/82	"Nursing Education Administration: A Transcultural Perspective" (1-day workshop)	Michigan Council of Associate Degree Directors (participant)
7/82	"The Three R's in Nursing Education" (1-day workshop)	Michigan Association of Practical Nurse Educators (participant)
9/82	"Writing Across the Curriculum" (1-day workshop)	Ferris State College English Department (participant)
11/82	"Sexual Victimization of Children and Adolescents" (1-day workshop)	St. Mary's Hospital. Dr. Anne Burgess (participant)
3/83	"Stations of the Mind" (1-day presentation)	West Michigan Consultants Association, Dr. William Glasser (participant)

CONTINUING EDUCATION ACTIVITIES - continued

3/83-5/83	Intership with the Family Nurse Practitioner (24 contact hours)	Ferris State College S. Fogarty, RN, FNP, CRN
5/17-6/1/83	Faculty Development Tour (80 contact hours)	Ferris State College/ Universidad de Las Americas (participant)
9/83	"Families: A Psychosocial Perspective (3-hour presentation)	PRONAP (J. Klein, presentor)
10/83	Michigan Nurses' Association Convention (2 days)	Michigan Nurses' Association (participant)
1/84	"Spouse Abuse" (3 hour presentation)	PRONAP - M. Cairy, RN, MSN (participant)
4/84	"Techniques of Glaucoma Screening" (2 hour presentation)	N. Uniake, OD, Ferris State College, College of Optometry (participant)

OTHER RESPONSIBILITIES:

Over the past five years, I have been involved in the preparation of a grant proposal and in writing sections of a departmental self-study for National League for Nursing accreditation.

I also function as a teacher-practitioner in the nurse-managed wellness center which I helped to develop and implement. This nursing center is open twelve months per year, twenty hours per week. It is sponsored by the college and operated by the Department of Nursing.

MARGUERITE ELIZABETH FILER WOLFRAM RN,MSN
12750 190TH AVENUE
BIG RAPIDS, MICHIGAN 49307
(H) 616-796-3688   (W) 616-592-2292
mwolfram@music.ferris.edu

EDUCATION

Diploma in Nursing 1960	Henry Ford Hospital School of Nursing Detroit, MI 48202
Bachelor of Science 1978	Ferris State College, Big Rapids, MI 49307 Major: Allied Health Teacher Education
Master of Science in Nursing 1984	Wayne State University, Detroit, MI 48202 Major: Advanced Medical-Surgical Nursing Minor: Education

EDUCATIONAL EMPLOYMENT

6/77 - 8/79	Ferris State College, Big Rapids, MI 49307 Technical Instructor
1/80 - Present	Ferris State University

10/80 - 9/81	Teaching Assistant
9/81 - 6/85	Technical Instructor
6/85 - 6/89	Assistant Professor
6/89 - Present	Associate Professor

PRACTITIONER EMPLOYMENT

9/60 - 1/62	Oakwood Hospital, Dearborn, MI 48121 Staff Nurse: Surgical Unit
1/62 - 6/62	United States Air Force

1/62 - 6/64	Lackland AFB, Texas: EENT/Oral Surgery Unit
6/64 - 1/66	Ankara, Turkey: Obstetrics
1/66 - 1/68	Andrews AFB, Maryland: Pediatrics
1/68 - 6/70	Yokota AFB, Japan: Flight Nurse
6/70 - 10/70	Travis AFB, California: Special Care Nursery

1/71 - 6/71	Garden City Osteopathic Hospital, MI 48135 Charge Nurse (nights): Surgical Unit
9/71 - 6/77	Kelsey Memorial Hospital, Lakeview, MI 48850

9/71 - 4/72	Evening Supervisor
4/72 - 9/74	Night Supervisor
6/75 - 3/76	Utilization Review Coordinator (part-time)
6/76 - 6/77	Patient Care Coordinator: Med-Surg Units

4/80 - 10/80	Manatee Memorial Hospital, Bradenton, FL Total Patient Care: Progressive Intensive Care
Summer 1985	Kelsey Memorial Hospital, Lakeview, MI 48850 Staff Nurse (part-time)
Summer 1988	Altercare Nursing Home, Big Rapids, MI 49307 Staff Nurse (per diem)
Summer 1988 - present	Mecosta County General Hospital, Big Rapids Staff Nurse (per diem)

PRESENTATIONS

Summer 1990	Co-presented two 20 hour workshops on the Nursing Process and Physical Assessment in Mt. Pleasant, MI
Summer 1992	Co-presented two 20 hour workshops on the Nursing Process and Physical Assessment. One in Mt. Pleasant and one in Gaylord, MI
3/27/94	Presented a paper on "Integrating Nursing Diagnosis in Nursing Education" at the 11th NANDA Conference for the Classification of Nursing Diagnosis - Advancing Professional Practice with Nursing Diagnosis in Nashville, TN

PUBLICATIONS AND BOOK REVIEWS

Fall 1990	Book review of One Woman's War: Letters Home from the Woman's Army Corps, 1944 - 1946 by Anne Bosanko Green was published in the Michigan Historical Review (Vol 16 No 2) Fall 1990.

9/93	Reviewed proposal for the text <u>Pharmacology in Nursing Process: A Prototype Approach</u> for J.B. Lippincott Publishing Company.
1995	Wolfram, M.E. (1995). "Integrating Nursing Diagnosis in Nursing Education" in <u>Classification of Nursing Diagnoses: Proceedings of the Eleventh Conference</u> (edited by M.J. Rantz & P. LeMone). Glendale, CA: CINAHL Information Systems.

UNIVERSITY, COLLEGE AND DEPARTMENTAL COMMITTEES

UNIVERSITY COMMITTEES

1988 - 91	Library/Instructional Services Committee
1990	Search Committee for Health Sciences Librarian

COLLEGE OF ALLIED HEALTH SCIENCES COMMITTEES

1986 - 89	Academic Honors Committee (Chair)
1987 - 90	Computer Committee
1990 - 91	Library Committee (Chair)
Summer 1991	Support Staff Committee
1991 - 92	Promotions Committee
1991-93	Recruitment and Retention Committee
1993 - 94	Library Committee
1994 - 96	Recruitment and Retention Committee
1996 - 98	Student Affairs Committee

DEPARTMENT OF NURSING COMMITTEES

1991 - 93	Curriculum Committee
1991 - 93	Policy and Procedure Committee
1994 - 97	Policy and Procedure Committee (Chair)

PROFESSIONAL OFFICES AND MEMBERSHIP

Member of Michigan Nurses Association
Board Member of Michigan Nursing Diagnosis Association (MINDA)
      Nominating Chair: 1994 - 96
      Program Chair: 1996 - 98

COMMUNITY ACTIVITIES AND MEMBERSHIP

1989 - present	Serve as Red Cross Blood Services Volunteer
March 1991	Served as a consultant to Memorial Medical Center in Ludington to assist in determination of compliance with the Nursing Process Joint Commission Standards.
4/3/92	Served as judge at the 12th Annual State HOSA Conference
3/26/93	Served as judge at the 13th Annual State HOSA Conference
1996 - present	Member of Policy and Procedure Committee for Mecosta County General Hospital

AWARDS AND HONORS

8/70	Air Force Commendation Medal
1975 - 76	Who's Who Among Students in American Colleges and Universities
1984	Sigma Theta Tau, National Honor Society for Nurses
1985	Who's Who in American Nursing

RESUME'
Dr. Sally K. Johnson
5252 Elm Avenue
Big Rapids, MI 49307
(616) 796-2972

Head, Department of Nursing
College of Allied Health Sciences
Ferris State University
Big Rapids, MI 49307
(616) 592-2267

EDUCATIONAL BACKGROUND

Ed.D.	1986	Education Western Michigan University, Kalamazoo, Michigan
M.N.	1979	Nursing Wichita State University, Wichita, Kansas
B.S.	1977	Allied Health Teacher Education Ferris State University, Big Rapids, Michigan
Diploma	1967	Registered Nursing Blodgett Memorial Medical Center School of Nursing, Grand Rapids, Michigan

EMPLOYMENT EXPERIENCE

July 1, 1990 - Present

Head, Department of Nursing, Ferris State University, Big Rapids, MI 49307

Area of Responsibility: Provide leadership for the Ferris State University Associate Degree in Nursing and the Bachelor of Science in Nursing completion programs. Responsible to the Dean, College of Allied Health Sciences.

Duties: Guide the Department of Nursing in the process of goal setting congruent with the University mission and in working to fulfill those goals. Guide evaluation and revision of curricula as needed and plan for future direction of the department and the educational programs. Prepare program reports as requested for University plus state and national organizations. Manage faculty work schedules and coordinate student clinical activities. Plan and monitor the

department budget. Represent the University and the Department at local, state and national activities. Coordinate and participate in recruitment and retention activities. Teaching the BSN capstone course NURS 499 Seminar in Professional Nursing.

August 1, 1992 - July 30, 1993

Acting Assistant Dean, College of Allied Health Sciences, Ferris State University, Big Rapids, MI 49307
(Concurrent with Nursing Department Head responsibilities)

Area of Responsibility: Provided interim leadership for the Student Academic Affairs area of the College of Allied Health Sciences. Responsible to the Dean, College of Allied Health Sciences.

June 1, 1989 - June 30, 1990

Acting Head, Department of Nursing, Ferris State University, Big Rapids, MI 49307

Area of Responsibility: Provided interim leadership for the Ferris State University Associate Degree in Nursing program and Bachelor of Science in Nursing completion program. Responsible to the Dean, College of Allied Health Sciences.

January 1987 - June 30, 1989

Outreach Coordinator, Department of Nursing, Ferris State University, Big Rapids, MI 49307

Area of Responsibility: Planned and coordinated offerings of BSN Completion program on and off campus. Responsible to Nursing Program Department Head.

July 1980 to January 1987

Director of Nursing Education, West Shore Community College, Scottville, MI 49454

Area of Responsibility: Administrator of Practical Nursing/Associate Degree Nursing program. Responsible to the Dean of Occupational Education.

November 1977 to June 1980

    Nursing Instructor, St. John's College, Department of Nursing, Winfield, KS 67156

    Area of Responsibility: Instructed and advised nursing students. Responsible to Director of Nursing Education.

December 1968 to October 1977

    In-Service Educator, Supervisor & Staff Nurse, Reed City Hospital, Reed City, MI 49677

    Area of Responsibility: In-Service Education, supervision and provision of client care in acute and extended care areas of the hospital. Responsible to the Director of Nursing.

September 1967 to September 1968

    Registered Nurse, Mecosta County General Hospital, Big Rapids, MI 49307

    Area of Responsibility: Supervised care of clients on a variety of units on all shifts. Responsible to Director of Nursing.

June 1966 to December 1966

    Licensed Practical Nurse, Blodgett Memorial Medical Center, Grand Rapids, MI 49506

    Area of Responsibility: Provide client care. Responsible to Charge Nurse.

January 1966 to June 1966

    Nurse Aide and Licensed Practical Nurse/Scrub Nurse, Cape Canaveral Hospital, Cocoa Beach, FL 32931

    Areas of Responsibility: January and February - direct client care. March through May - Operating Room Scrub Nurse. Responsible to Charge Nurse in both units.

MEMBERSHIP IN PROFESSIONAL and SERVICE ORGANIZATIONS

Michigan Council of Nursing
Education Administrators -
past officer
Michigan Association of
Colleges of Nursing -past officer
Michigan Nurses Association -
Member of Continuing Education
Approval Committee, 1991 to present

Michigan League for Nursing
National League for Nursing
Zonta International - current Secretary
of Big Rapids Area Chapter
American Association of Colleges of
Nursing
American Nurses Association

CONTINUING EDUCATION AND ACADEMIC CREDITS

"Changing Times: Visions for the Future" and "Educating Nurses in an Era of Health Care Reform" sponsored by the Michigan Nurses Association. 2.4 hours. October 1993.

"Staying Just One Step Ahead of the Future." A symposium on anticipating the educational needs of our communities sponsored by Ferris State University. 12 hours. January 1994.

Academic chairperson "Academic Quality Revisited" sponsored by the Center for Faculty Evaluation and Development, Kansas State University. February 1994.

NLN Accreditation for the 21st Century: "Outcomes, Assessment and Technology" sponsored by the National League for Nursing. 11 hours. March/April 1995.

Coaching and Teambuilding Skills for Mangers and Supervisors by SkillPath Seminars. 6 hours. August 1995.

"Re-tool Your Thinking About Immunization" sponsored by the National Immunization Program. 3 hours. November 1996.

APPENDIX B

Department of Nursing Philosophy

FERRIS STATE UNIVERSITY
DEPARTMENT OF NURSING

PHILOSOPHY

The faculty believes that each individual is a highly complex, unified whole in continuous interaction with an ever - changing environment. Each individual is worthy of appropriate nursing care and has rights and privileges that must be respected including the right to make decisions regarding health care.

The faculty considers health to be a state of physiological, psychological, sociocultural and developmental well - being and is the goal of all nursing activity. This state exists within a range of responses which clients make to the environment in order to maintain equilibrium.

The faculty views society as the context within which the individual must function and within which nursing occurs. Society is composed of multiple subsystems designed to provide for basic human needs of protection, education, and enculturation. The basic unit of this social structure list the family. Families and individuals units into groups and communities based on commonalties which are translated into group norms. Understanding and recognizing diverse societal norms and characteristics serve as a basis for health care intervention.

The faculty believes that nursing is a unique, dynamic interpersonal endeavor committed to assist individuals, families, groups, and communities in maintaining and promoting health, preventing illness, and maximizing potential. The goal of nursing is to facilitate patient movement toward optimal well - being throughout the life cycle through the application of the nursing process. Practitioners make judgments and use skills based on behavioral, scientific and nursing theories. Practitioners accept the legal, ethical, and social standards of their profession and are accountable to the client, the nursing profession and society.

The faculty believes that the technical nurse provides direct nursing care of clients with an apparent or impending health need precipitating common patient problems. This practitioner employs critical thinking and the nursing process to guide the provision of care for individuals under the direction of a professional nurse or physician, supervises other workers in technical aspects of nursing care, and coordinates functions with other health services and personnel for the provision of quality health care.

The faculty believes that the professional nurse must possess critical thinking skills, communication skills, and therapeutic nursing practice skills to provide effective nursing care in a variety of settings. This practitioner is prepared as a generalist at the baccalaureate level in nursing and guides the provision of individualized, comprehensive nursing care for individuals, families, groups, and communities at any point on the health - illness and developmental continua.

The faculty believes that learning is an internal, self - directed, life - long process resulting in behavioral change. Individuals learn in a variety of ways, building on previous knowledge and skill. Faculty has a responsibility to design, implement, and evaluate learning experiences. Critical thinking and problem solving stimulate and facilitate changes in behavior resulting in students' and graduates' fulfillment of their ethical, legal, and societal nursing responsibilities. The faculty assists the learners to develop increasing responsibility for their own learning.

The faculty believes that educational experiences in nursing can be designed to provide opportunity for development of skills, knowledge and professional behaviors specific to different levels of nursing practice. Technical nursing requires skill and knowledge in nursing along with biological, physical, and social sciences to prepare graduates to deliver nursing care in settings providing defined policies,

procedures, and protocols. Professional nursing requires skill and knowledge in nursing along with biological, physical and social science, including research methodology and its application, to prepare graduates to deliver the full scope of nursing practice in an unrestricted setting. Technical nursing education serves as a foundation for professional nursing education, and professional nursing education serves as a foundation for graduate study.

The faculty believes that educational experiences designed to promote professional behaviors include professional development and service which are considered to be intrinsic elements of nursing. It is further believed that these behaviors are learned through guided experiences and through modeling of behaviors by faculty.

The faculty believes that an evaluation plan is required to assure quality of the educational program. This evaluation palm must be developed in collaboration with the University evaluation plan and include the regular collection of data, the thoughtful assessment of that data, and the use of the data in on - going program planning and improvement.

10/95

APPENDIX C

**Comparison of Mission and Goals of BSN Program with
Those of the University**

Comparison of Mission and Goals of Program and Governing Organization

Ferris State University	Student Academic Affairs	College of Allied Health Sciences	Department of Nursing
Educate students in a number of applied technology fields and other selected professions.	Provide a diverse array of academic programs	Add at least one (1) additional degree or certificate program reflective of the industry needs yearly during 1996-1998.	Collaborate with other departments and other Ferris State colleges to expand offerings. (Standard VI)
Educate students to be employable.	Prepare students for immediate employment.	The educational program will result in graduates of entry-level professions.	Prepare competent graduates for entry-level positions in technical or professional nursing. (Standard I)
Educate students to contribute to their profession with skills, knowledge, and high ethics.	Provide academic programming that enables graduates to achieve professional competence, economic independence and personal fulfillment.	Program assessment data will determine congruence with the professional standards on a yearly basis.	Provide clinical experiences designed to be congruent with anticipated employment opportunities of graduates. (Standard III)
Educate students in preparation for a changing global society.	Develop a comprehensive plan for a modern, digitally oriented library.	Work with liaison from health Sciences Library and has a committee formed to evaluate and enrich library holdings.	Educational format shall include the latest technology and use of computers. (Standard III)
Offer an "Open Door" admission to a diverse range of students, racially, culturally, and geographically.	Recruit, retain and serve the individual educational needs of a diverse student population. Continue to encourage ethnic and gender diversity among students.	Faculty and administration will continue recruiting and retention activities directed to maintaining a diverse student body.	Enhance diversity in the student population among faculty members, in classroom and clinical experiences, and in curriculum content. (Standard V)

Ferris State University	Student Academic Affairs	College of Allied Health Sciences	Department of Nursing
Keep educational programs and services responsive to changing needs of manufacturing, business, health care and other industries and professions.	Modify current programs or generate ideas for development of new programs that are flexible, competency-based, and responsive to the changing needs of the state, potential employers, and students.	Review of curriculum initiatives will reflect the changing needs of the industry.	Continual evaluation of the programs with restructuring as needed to reflect the changing needs of the nursing profession. (Standards I and II)
Cultivate among students active learning, critical thinking and problem-solving skills.	Support and encourage the use of alternative teaching methodologies designed to develop communication, critical thinking and collaborative skills.	Classroom and lab exercises will be structured to include experiences requiring collaboration, communication and critical thinking skills.	Classroom and lab activities will include exercises requiring collaboration, communication and critical thinking skills. (Standard VI)
Promote a caring, safe environment to include academic support services and cultural, social, and recreational opportunities.		Encourage at least one Ferris State University recognized student organization in each program by 1997.	Seek out and plan culturally enriching experiences for students. (Standards IV & VIII)
Offer collegial work environment for employees founded on trust, racial and cultural diversity, high standards of performance and conduct, creativity and innovation, and constant attention to quality improvement.	Provide opportunities and support for faculty professional development.	Encourage active participation of faculty and staff members in professional and educational activities and as members of professional organizations.	Facilitate faculty and staff development through planned activities on and off campus, advanced formal education, publication and research, membership in professional organizations, and maintenance of current skills. (Standards III & VII)
	Achieve growth in evening, off campus and distance learning matriculation.	Dept. heads will schedule more courses at non-traditional times and using technology such as distance learning technology. The college & programs will collect data regarding review of off-campus programming.	Expand offering format to include new technology including distance education technology. (Standard III)

APPENDIX D

BSN Program Schedules: On Campus & Off Campus

FERRIS STATE UNIVERSITY
DEPARTMENT OF NURSING
BSN COMPLETION SCHEDULE
Part-time and Full-time On-Campus

	Fall 1996	Wint 1997	Sum 1997	Fall 1997	Wint 1998	Sum 1998	Fall 1998	Wint 1999	Sum 1999	Fall 1999	Wint 2000	Sum 2000	Fall 2000	Wint 2001
*Nursing Courses completed in one year when all other courses completed	Nurs 324 Nurs 344 Nurs 330/ 331	Nurs 416 Nurs 476 Nurs 499		Nurs 324 Nurs 344 Nurs 330/ 331	Nurs 416 Nurs 476 Nurs 499		Nurs 324 Nurs 344 Nurs 330/ 331	Nurs 416 Nurs 476 Nurs 499		Nurs 324 Nurs 344 Nurs 330/ 331	Nurs 416 Nurs 476 Nurs 499		Nurs 324 Nurs 344 Nurs 330/ 331	Nurs 416 Nurs 476 Nurs 499
Schedule for completion of NURS and Non-NURS on a full-time basis		Psyc 310 Anth 122 Chem 124 Elec Humn 320	Biol 300 Biol 308 Engl 321 Math 115 Elec	Nurs 324 Nurs 344 Nurs 330/ 331	Nurs 416 Nurs 476 Nurs 499 Elec				THIS COMPLETE FULL-TIME CYCLE BEGINS EACH WINTER SEMESTER					
Part-time Tuesday Evening	Nurs 499			Nurs 324	Psyc 310 Anth 122	Biol 308 Engl 321	Nurs 344	Chem 124 Humn 320	Biol 300	Nurs 330/ 331	Nurs 416	Nurs 476	Nurs 499	
Part-time Wedneday Evening	Nurs 344	Chem 124	Biol 300 Humn 320	Nurs 330/ 331	Nurs 416	Nurs 476	Nurs 499			Nurs 324	Psyc 310 Anth 122	Biol 308 Engl 321	Nurs 344	Chem 124 Humn 320
Part-time Friday	Nurs 330/ 331	Nurs 416	Nurs 476	Nurs 499 Humn 320			Nurs 324	Psyc 310 Anth 122	Biol 308 Engl 321	Nurs 344	Chem 124 Humn 320	Biol 300	Nurs 330/ 331	Nurs 416
Part-time Thursday Days	Nurs 324	Psyc 310 Anth 122	Biol 308 Engl 321	Nurs 344	Chem 124 Humn 320	Biol 300	Nurs 330/ 331	Nurs 416	Nurs 476	Nurs 499			Nurs 324	Psyc 310 Anth 122

*Full time students complete Nursing classes in one academic year. ALL General Education classes MUST be completed prior to enrolling in this 1 year track.

*MATH 115 proficiency is a general education requirement.

This schedule reflects anticipated offerings in the BSN Completion program. It is subject to change and students are urged to see their advisor for assistance in planning.

oncamp1.doc

6/96

FERRIS STATE UNIVERSITY - DEPARTMENT OF NURSING
BSN COMPLETION SCHEDULE - OFF CAMPUS

	Fall 1997	Wint 1998	Sum 1998	Fall 1998	Wint 1999	Sum 1999	Fall 1999	Wint 2000	Sum 2000	Fall 2000	Wint 2001	Sum 2001	Fall 2001	Wint 2002	Sum 2002	Fall 2002
Southwestern Mich. College - Niles (Wednesday)	Nurs 499 Humn 320		*Psyc 310 Engl 321	Nurs 324	Chem 124	Biol 300	Nurs 344 Anth 122	Nurs 330/331	Biol 308	Nurs 416	Nurs 476	Nurs 499 Humn 320				
Traverse City (Tuesday)	**Nurs 324	Psyc 310 Engl 321	Biol 308	Chem 124	Nurs 344 Anth 122	Biol 300	Nurs 330/331	Nurs 416	Nurs 476	Nurs 499 Humn 320						
Jackson (Monday)	Nurs 324	Chem 124	Biol 300	Nurs 344 Anth 122	Nurs 330/331	Biol 308	Nurs 416	Nurs 476	Nurs 499 Humn 320							
Muskegon (Tuesday)	Nurs 344 Anth 122	Nurs 330/331	Biol 308	Nurs 416	Nurs 476	Nurs 499 Humn 320										
Midland/Delta (Thursday)	Nurs 416	Nurs 476	Nurs 499 Humn 320	ALMA Nurs 324 Thur. Eve.	Psyc 310 Engl 321	Biol 308	Chem 124	Nurs 344 Anth 122	Biol 300	Nurs 330/331	Nurs 416	Nurs 476	Nurs 499 Humn 320			
Midland/GLJC (Wednesday)	Chem 124	Nurs 344 Anth 122	Biol 300	Nurs 330/331	Nurs 416	Nurs 476	Nurs 499 Humn 320									
Grand Rapids (Friday)	Nurs 499 Humn 320			**Nurs 324	Psyc 310 Anth 122	Biol 308 Engl 321	Nurs 344	Chem 124	Biol 300	Nurs 330/331	Nurs 416	Nurs 476	Nurs 499 Humn 320			
Grand Rapids (Thursday)	Nurs 344	Chem 124	Biol 300	Nurs 330/331	Nurs 416	Nurs 476	Nurs 499 Humn 320									
Grand Rapids (Wed. Eve.)	Nurs 330/331	Nurs 416	Nurs 476	Nurs 499 Humn 320			**Nurs 324	Psyc 310 Anth 122	Biol 308 Engl 321	Nurs 344	Chem 124	Biol 300	Nurs 330/331	Nurs 416	Nurs 476	Nurs 499 Humn 320
Grand Rapids (Tues. Eve.)	Nurs 324	Psyc 310 Anth 122	Biol 308 Engl 321	Nurs 344	Chem 124	Biol 300	Nurs 330/331	Nurs 416	Nurs 476	Nurs 499 Humn 320						

This schedule reflects anticipated offerings in the BSN Completion program. It is subject to change and students are urged to see their advisor for assistance in planning.

*MATH 115 proficiency is a graduation requirement.

7/97   offcamp2.doc

FERRIS STATE UNIVERSITY
Department of Nursing

SCHEDULE ALTERATION REQUEST
BSN COMPLETION PROGRAM

Name _____   Outreach Site _____
    Last   First   Middle
                           Or On-Campus Status _____
Address _____   Phone (H) _____
    Street

    _____   (W) _____
    City   State   Zip
SS# _____   Advisor _____

List All Courses Needed to Complete Program

Number & Name	Site Desired	Term & Year

Number & Name	Site Desired	Term & Year

I am requesting this option because I:

_____ wish to complete the program sooner.
_____ missed a class when it was offered at my usual outreach site.
_____ dropped out of program and would like to rejoin at original site.
_____ am interested in the course content.
_____ Other, (please explain) _____

_____

Is this a request for permanent site or status change? _____ Yes   _____ No

_____   _____
Student signature   Date

ADVISOR COMMENTS:

_____   _____
Advisor signature   Date

OUTREACH COORDINATOR COMMENTS:

_____   _____
Outreach Coordinator signature   Date

Original - Nsg. Dept.; Copies - Student; Advisor; Academic Counseling; GILL

Approved 3-13-91

APPENDIX E

Evaluation Plan for BSN Program

BSN PROGRAM EVALUATION PROCEDURE

I Structure and Governance

Evaluative Question	Sources of Information	Method of Data Collection	Time Line	Feedback

A. How are the mission and goals of the DON consistent with those of FSU?	Mission statements/goal statements
	  FSU
	  CAHS
	  DON
		Review mission/goal statements
		Tool#1 Evaluation of Curriculum Organization
		  By: Curriculum Cmtte.
			Fall of odd years
			At any time the University, College or Dept. goal or mission statements are changed
				Curriculum Cmtte. to bring findings and recommendations to faculty for possible action

B. Do faculty, students and staff participate in the governance of the DON?	Committee minutes
	Department Bylaws
	Student Handbook
	Organizational Chart
	  FSU
	  CAHS
	  DON
		Review membership of CAHS & FSU committees
		  By: DON Head
		Review Bylaws
		  By Policy & Procedure Cmtte.
			Review CAHS, FSU and student membership each fall semester
			
			Annually each winter semester
				Encourage student & faculty participation on DON, CAHS & FSU cmttes

C. Does the Dept. Head have appropriate credentials?	Job Description Dept Head Vitae	Review vitae and job description By: Dean of CAHS	When position opens When FSU restructures	The Dean of CAHS & the search committee review criteria for position in relation to FSU requirements & program need
D. Does the Dept. Head plan and allocate resources?	DON faculty minutes Job description of Dept Head Budget process/policies	Review budget policies, faculty minutes and job description By: Dean of CAHS	When new DON Head is hired Annually with evaluation of DON Head	Dean to review & revise job description as needed based on FSU & CAHS needs and DON Head input

II Material Resources

Evaluative Question	Sources of Information	Method of Data Collection	Time Line	Feedback

A. Are fiscal resources commensurate with resources of FSU and adequate to support the DON's goals?	Budgets:
	  CAHS
	  DON
	DON program goals
		Review CAHS budget
		Prepare DON budget
		  By: DON Head
			Annually	After negotiating DON budget with Dean, DON Head reviews budget with faculty

B. Are the physical facilities adequate to accomplish DON goals?	Classrooms, Labs, Clinical Agencies, Storage Space, Offices, Computer Labs	Tours of physical facilities
		  By: GILL (off campus) & faculty & DON(on campus)
		Tool#16 <u>Evaluation of Distance Learning</u>
		  By: students
			At initiation of new site development
			Continuous
			Each time distance learning is used
				Recommendation made to the Dean or GILL for additional space.
				Reallocation of present space, as needed

C. Are library and other resources comprehensive, current, adequate, available & accessible to faculty and students?	Libraries, off and on campus
	CAHS library committee minutes
	Faculty minutes, DON
		Review holdings/potential purchases, books in their area of expertise-recommend purchases
		  By: Faculty
		Student Evaluation Tool #4 <u>Evaluation of Nursing Course Organization and Content</u>
		Review holdings & resources of host libraries
		  By: GILL & DON
		Tool #2 <u>Instructional Media Review Evaluation</u> and Tool #20 <u>Textbook Evaluation</u>
		  By: Faculty
			Annually
			
			Each semester
			
			Ongoing
				Recommendations made to DON Head & Library Liaison
				Faculty use feedback in purchase recommendations
				Arrange to take additional resources to sites
				Arrange for inter-library loans
				
				Report findings to faculty for possible action

III Students

Evaluative Question	Sources of Information	Method of Data Collection	Time Line	Feedback
A. Are student DON policies public, accessible, non-discriminatory and consistent with those of FSU?	Student Handbook- DON Affirmative Action Statements Student Handbook-FSU FSU catalog Departmental Policies/Procedures Faculty Minutes	Review handbooks, catalog, policies, procedures and affirmative action statements for consistency & non-discrimination By: Policy and Procedure Committee	Annually	Report to DON Head, Dean, Policy & Procedure Committee for possible action
		Review student feedback on Tool # 11 BSN Completion Student Survey and Tool # 12 Graduate Survey By: Student Affairs Committee	Each semester	Report to faculty for possible action

IV Faculty

Evaluative Question	Sources of Information	Method of Data Collection	Time Line	Feedback
A. Do the numbers & utilization of full and part time faculty facilitate the meeting of BSN program goals?	Faculty Assignments Faculty/Student Ratios Class & Clinical Course Schedules	Review course needs & staffing patterns to assure full-time faculty maintain major responsibility for all courses. Review student ratio & clinical assignments. Review Tool #3 New Part and Full Time Faculty Evaluation By: DON Head	Every Semester	Adjust assignments as needed

B. Do DON faculty have appropriate credentials, diversity and expertise to meet BSN program goals?	Faculty Curriculum Vitae Faculty Assignments	Faculty to submit updated curriculum vitae
		Review faculty assignments for appropriate expertise
		   By: DON Head
		Review faculty endeavors to maintain expertise in teaching areas Tool #13 Faculty Report of Educational Activities
		   By: DON Head
			Annually
			
			Every Semester
				Recommend new faculty with expertise to provide diversity
				Support educational and growth activities by faculty

C. Are faculty CON policies public, accessible, non-discriminatory and consistent with those of FSU?	FSU Faculty Policies DON Faculty Policies Faculty Handbook FFA Contract Bylaws - DON	Review:
		   FSU & DON faculty policies
		   Faculty Handbook
		   FFA Contract
		   Bylaws
		By: Policy & Procedure Committee
			With contract negotiations
			
			Annually
				Acceptance of Contract
				
				Faculty to review recommendations

V Curriculum

.

Evaluative Questions	Sources of Information	Method of Data Collection	Time Line	Feedback
A. Is the curriculum consistent with the mission of the DON?	Course Syllabi ANA Standards DON Mission/Goals Curriculum Overview Curriculum Committee Minutes	Review syllabi, standards, mission, goals, curriculum plan and committee minutes for consistency to DON goals.Review Tool#4 Course Evaluation (student) , Tool #15 Course Organization & Content (faculty, Tool #19 Evaluation of Instructional Process (faculty) and Tool #16 Evaluation of Distance Learning Experience(student) By: Curriculum Cmtte.	Every semester	Recommendations from curriculum committee to faculty for possible action
B. Does the curriculum focus on the discipline of nursing and is supported by the arts, sciences and humanities?	Curriculum Overviews FSU Catalog Articulation Agreements Student records	Review curriculum Review Tool #18 Evaluation of Curriculum Content By: Curriculum Cmtte.	With any curriculum revision	Recommendations for revisions made in response to university mandates & changes in profession
C. Is the majority of the course work in nursing at the upper-division level?	Curriculum Overview FSU Catalog Articulation Agreements Student Records	Review curriculum By: Curriculum Cmtte.	With any curriculum revision	Recommendations for revisions made in response to university mandates & changes in profession

V Curriculum (con't)

Evaluative Question	Sources of Information	Method of Data Collection	Time Line	Feedback

D. Are clinical facilities adequate to promote attainment of program objectives?	Clinical Facility Contracts Program Objectives Curriculum Committee Minutes	Review clinical contracts
		  By: DON Head
		Review Tool #6 <u>Clinical Site Evaluation/Affiliation Agreement</u> and Tool #7 <u>Clinical Site Evaluation</u>
		  By: DON Head
		Review Tool #8 <u>Clinical Site Follow-up Evaluation</u> and Tool #9 <u>Student Evaluation of Clinical Agency</u>
		  By: Faculty
			Annual
			
			Prior to use of each site
			
			After use of each site
			
			After use of each site
				DON and / or faculty recommend changes in sites.

VI Evaluation

Evaluative Question	Sources of Information	Method of Data Collection	Time Line	Feedback
A. Does student performance demonstrate the skills of reasoning, analysis, research and decision-making within nursing? **(Critical thinking)**	Test Results: California Critical Thinking Skills (CCTS) Disposition & CCTS Inventory NURS 476 Syllabus NURS 499 Syllabus NURS 476 Student Papers DON definition of Critical Thinking	Administer CCTS Disposition & Inventory in NURS 324 By: faculty AdministerCCTS Inventory in NURS 499 By: faculty Review of Student Papers and Course Syllabi By: faculty	Every time NURS 324 and NURS 499 are offered.	Test review by faculty and curriculum committee for possible action.
B. Does student performance demonstrate the communication skills of writing, oral and nonverbal communication, group process, information technology and/or media production? **(Communication)**	NURS 476 Syllabus NURS 499 Syllabus DON definition of Critical Thinking	Review of: Peer and faculty evaluation of verbal communication skills, peer and self-evaluation of group process, verbal and non-verbal communication, faculty evaluation of ability to write. By: faculty	Every time NURS 476 and NURS 499 are offered.	Review by faculty and curriculum committee for possible action.
C. Does student performance demonstrate the ability to perform theory based nursing interventions which includes psychomotor and psychosocial modalities directed at individuals and/or aggregates? **(Therapeutic Nursing Interventions)**	Don definition of Nursing Therapeutic Interventions NURS 416 Syllabus NURS 416 Student Papers	Review student papers and care plans for family and community clients By: faculty	Every time NURS 416 is offered.	Review by faculty and curriculum committee for possible action.

VI Evaluation (con't)

Evaluative Question	Sources of Information	Method of Data Collection	Time Line	Feedback

D. What are the student numbers in terms of admission, attrition, retention, graduation and years to complete the BSN program? **(Graduation Rates)**	Admission Lists
	Class Lists
	Graduation Lists
		Review of:
		  Admission Lists
		  Class Lists
		  Graduation Lists
			Ongoing	Report to faculty for possible action

E. What are the employment patterns of graduates? **(Patterns of employment)**	Two survey tools	Review of: Tool # 12 Graduate Survey and Tool #21 Employer Survey of Graduate Nurse Baccalaureate Degree By: DON Head	With each graduation class	Review and report to faculty and Dean for consideration and possible action.
F. What is the level of program satisfaction of major constituencies, such as student, alumni, employers and faculty? **(Program satisfaction)**	Student Evaluation Tools Faculty Evaluation Tools Employer Surveys Graduate Surveys	Review of course evaluations from students and faculty: Tools: #14 Evaluation of Course Instruction, #17 Evaluation of Clinical Instruction, #9 Student Evaluation of Clinical Agency, #4 Evaluation of Course Organization and Content, #11 BSN Completion Student Survey, #15 Evaluation of Organization & Content by Faculty, #21 Employer Survey, #12 Graduate Survey By: DON, faculty & students	Each semester Last course Each semester At graduation At graduation	Results to curriculum committee Recommendations to faculty for possible action

VI Evaluation (con't)

Evaluative Question	Sources of Information	Method of Data Collection	Time Line	Feedback
G. To what extent do faculty and students participate in activities such as clinical practice, political activism, committee or boards both within the college and in the community? **(Service)**	Faculty Curriculum Vitae Student Community Service Reports	Review of: Faculty curriculum vitae By: DON Head Student community service reports By: Student Advisor	Annually Each semester	Feedback by advisors and DON Head to faculty for possible action

APPENDIX F

BSN Graduate Survey Form

Dear Graduate:

It has not been long since your graduation from the BSN Completion program and it must seem great not to have that regular commitment and home work.

As a Ferris State University Nursing Department graduate you are very familiar with the evaluation process necessary to maintain a quality program. We would appreciate your assistance once again to help maintain the vitality of the BSN Completion program and enhance the program offerings.

The enclosed evaluation asks for a wide variety of information. The form is designed to permit you to complete it rather quickly and we would sincerely appreciate your taking time to assist us in assessing our program.

A return envelope has been provided for your convenience.

Sincerely,

Sally K. Johnson, EdD, RN
Head, Department of Nursing

Enclosures

Nursing Program

APRC 1997-1998

Section 7 of 8

FERRIS STATE UNIVERSITY
DEPARTMENT OF NURSING

GRADUATE SURVEY: BSN

Purpose:

In order to continually evaluate the total nursing program, we are requesting
your assistance in evaluating your educational program and your adaptation to
the role of a BSN graduate. Please place your answers on the provided scan
sheet, using a #2 pencil. Any open-ended (essay) questions, please answer on
this form and return both. The information you provide will be kept
confidential and used only for program evaluation. Please complete and return
in the self-addressed envelope at your earliest convenience.

NAME: _____

SOC.SEC. # _____

MONTH/YR GRADUATED _____

1 - 3. Program Site Attended
1.
        1. Traverse City
        2. Niles
        3. Grand Rapids
        4. Jackson

2.
        1. Big Rapids - Full Time
        2. Big Rapids - Tuesday Evening
        3. Big Rapids - Wednesdays Evening
        4. Big Rapids - Thursday Days
        5. Big Rapids - Friday
3.
        1. Muskegon
        2. Midland

4. BSN Graduation
        1. Prior to 1993
        2. 1993
        3. 1994
        4. 1995
        5. 1996

5. Employment Status
        1. Full-time in Nursing
        2. Part-time in Nursing
        3. Not in Nursing

6. Current site of employment (indicate the one best description)
        1. Acute care setting
        2. Community agency
        3. Extended care facility
        4. Physician's office
        5. Other _____

7.   Type of basic nursing program:
      1.   ADN program
      2.   Diploma

8.   Number of years licensed as an RN
      1.   0-5
      2.   6-10
      3.   11-20
      4.   21-30
      5.   30 +

9.   Number of years of **practice as an RN** (total)
      1.   0-5
      2.   6-10
      3.   11-20
      4.   21-30
      5.   30 +

10.   What is your current salary?   (only necessary to complete one)
      1.   Hourly
            1. $12.00 - $15.00
            2. $15.01 - $18.00
            3. $18.01 - $21.00
            4. $21.01 - $24.00
            5. $24.01+

      2.   Annually
            1. $25,000 - $30,000
            2. $30,001 - $35,000
            3. $35,001 - $40,000
            4. $40,001 - $45,000
            5. $45,001+

11-13.   If in a specialty, please indicate in which area:

11.
      1.   Community Health
      2.   ICU/CCU
      3.   Geriatrics
      4.   Medical/Surgical
      5.   Mental Health
12.
      1.   OB/GYN
      2.   Pediatrics
      3.   Emergency/Trauma
      4.   Operating/Recovery Room
      5.   Inservice/Patient Education

13.
      1.   Home Health Care
      2.   Administration
      3.   Education in a school
      4.   Other

In this section, you are asked to compare your educational knowledge and skills to to other graduates having had a similar amount of work experience at your agency. Please compare yourself to other BSNs using the following scale:
1=Better
2=Same
3=Less

14. Uses a nursing model as a basis for practice.
15. Applies research findings to own practice.
16. Uses critical thinking and independent judgment in decision-making.
17. Collaborates with physicians, members of other health disciplines, and outside health agencies in planning care.

18- 22. Uses the nursing process/problem-solving process effectively. Able to:
18. Assess and analyze problem.
19. Diagnose a problem.
20. Establish a plan.
21. Implement a plan.
22. Evaluate and replan.

23. Interacts in a facilitative and purposeful manner with clients, colleagues and members of all health disciplines.
24. Demonstrates leadership and management skills.
25. Practices within the ethical standards of the profession.
26. Assumes responsibility for self-direction and personal and professional growth.
27. Practices within policies and procedures of agency.

28. Overall, how would you rate yourself in comparison with other BSN graduates?
   1. Very low
   2. Low
   3. Average
   4. High
   5. Very High

Since I started in or graduated from the BSN program, I have:
29. Changed employers.
   1. Yes
   2. No

30. Changed responsibilities with the same employer
   1. Yes
   2. No

31. Added a new part-time role
   1. Yes
   2. No

32. Continued in the same position
   1. Yes
   2. No

33. Since I started in or graduated from the BSN program, my wages have:
   1. Stayed the same.
   2. Increased due to regular agency increase.
   3. Increased due to advanced education.
   4. Increased due to change in position, either at the same agency or a different agency.
   5. Decreased.

34. Since I started in or graduated from the BSN program my responsibilities have:
   1. Been reduced
   2. Stayed the same
   3. Increased
   4. Have changed without increasing or decreasing

35-37.

   My employer recognizes:

35. A difference between ADN, Diploma and BSN nurses.
   1. Yes
   2. No

36. A difference indicated by pay between ADN, Diploma and BSN nurses
   1. Yes
   2. No

37. A difference indicated by responsibility between ADN, Diploma, and BSN nurses.
   1. Yes
   2. No

38-46.

My educational plans are:	Yes	No
38. More formal education	1	2
39. Continuing education programs	1	2
40. Masters in nursing	1	2
41. Doctorate in nursing	1	2
42. Masters in health related field	1	2
43. Doctorate in health related field	1	2
44. Masters in non-health related field	1	2
45. Doctorate in non-health related field	1	2

46. Status of enrollment in planned educational program:
   1. Presently enrolled
   2. Enroll in 6 months to 1 year
   3. Enroll in 2 to 5 years
   4. Not planning enrollment in foreseeable future

47. The Ferris BSN program provided the following type of preparation for advanced education.
   1. Excellent
   2. Above average
   3. Average
   4. Below average
   5. Poor

Please evaluate each of the following statements. Choose the response which best indicates your experiences with the BSN program.

1=Poor
2=Below Average
3=Average
4=Above Average
5=Excellent

48. Orientation to the nursing program regarding curriculum expectations and student responsibilities.

49. Evaluation of credentials and academic counseling prior to entry into the program.

The Nursing Student Handbook contains policies for admission, progression, retention, dismissal and graduation.

50. These policies are clearly stated.

51. These policies are nondiscriminatory.

52   These policies are fairly and consistently implemented.

53. These policies reflect program goals/objectives.

54. The student grievance procedure is available, clear and adequate.

Teaching practices:

55. The nursing faculty presentation of theoretical content.

56. The non-nursing faculty presentation of theoretical content.

57. The nursing faculty clinical competency.

58. The nursing faculty grading policy.

59. The availability of faculty to answer questions related to course content.
60. Faculty sensitivity to individual learning needs/problems.

61. The adequacy of nursing faculty to answer advisement questions.

Communications:

62. The communication of information between you and the nursing department.

63. The communication of information between you and the Gerholz Institute
for Lifelong Learning.

64. The communication of information between you and your advisor.

Logistics:

65. The registration process each quarter.

66. The purchasing of textbooks/syllabi.

1=Poor
2=Below Average
3=Average
4=Above Average
5=Excellent

67. The availability of journals/books in the local libraries (hospital, colleges.)

68. The one day/evening per week format.

69. The length of each class period.

70. If you had it to do over again, and knowing what you know now about the program, would you still enroll in the BSN program at Ferris State University?
    1. Definitely Yes
    2. Probably Yes
    3. Don't Know
    4. Probably No
    5. Definitely No

71. If a friend who qualified for admission to the Ferris BSN program were to ask your advice on whether or not to enroll there, how would you respond?
    1. Would recommend the program without reservations
    2. Would recommend the program only if I felt he/she would "fit in"
    3. Would not recommend the program to a friend

DEMOGRAPHIC DATA - OPTIONAL

72. Age
1. 20-25
2. 26-30
3. 31-40
4. 41-50
5. 51+

73. Sex
1. Male
2. Female

74. Marital Status:
1. Married
2. Single
3. Separated
4. Divorced
5. Widowed

75. Racial/Ethnic Group:
1. Afro-American/Black
2. American Indian or Alaskan Native
3. Caucasian-American/White
4. Mexican-American/Chicano, Puerto Rican, Cuban or other Hispanic Origin
5. Other

76. Number of Children
1. None
2. 1-2
3. 3-4
4. 5-6
5. 7+

77. Age of Oldest Child
1. 0-4
2. 8-10
3. 11-15
4. 16-20
5. 21+

78. Age of Youngest Child
1. 0-4
2. 5-10
3. 11-15
4. 16-20
5. 21+

79. My position title is:_____

80. If title has changed since starting in or graduating form the BSN
    program, my former title was:_____

81. Please identify two or three of the most valuable learning experiences
    you were involved in.

82. Please identify two or three of the least valuable learning experiences
    you were involved in.

83. Is there anything else you would like to tell us that we haven't asked
    about, or any of your responses that you would like to elaborate on?

Name of
Employer:_____

Address of
Employer:_____

I hereby give Ferris State University permission to send an employer survey
similar to the one I just completed to the above employer.

Date:_____   Signature:_____

Alumni Update: Name:_____

              Social Security #:_____

              Address:_____

              _____

              Month and Year of Graduation_____

Thank you for your time. Please return scan sheet and this form in envelope.

APPENDIX G

BSN Employer Survey Form

Subject: Graduate Survey for

The above named student has indicated that she/he is employed by
your health organization and has given us permission to ask you
to complete a graduate nurse survey regarding the graduate´s
adaptation, nursing skills and knowledge.

The information gained through this process assists us in
maintaining quality programs and enables us to enhance our
program offerings. The evaluation form is designed to permit you
to complete it rather quickly and we would appreciate your taking
the time to assist us in assessing our program.

A return envelope has been provided for your convenience. Of
course your responses will be confidential.

Sincerely,

Sally K. Johnson, EdD, RN
Head, Department of Nursing

Enclosure

FERRIS STATE UNIVERSITY
DEPARTMENT OF NURSING

EMPLOYER SURVEY OF GRADUATE NURSE
BACCALAUREATE DEGREE

Purpose:

The graduate survey is one mechanism to obtain information about the
Baccalaureate Degree graduates of the Ferris State University Department of
Nursing. The observations you make regarding the graduate's adaption, nursing
skills and knowledge is valuable in our program evaluation process.

Your responses will be confidential. A signed release of information was
obtained from the graduate identified in the letter and a copy is attached. A
return envelope is enclosed for your convenience. Please use the scan sheet
provided for you, a number 2 pencil, and write the open ended question on this
form.

1.-2. Salary: (only necessary to complete item 3 or 4)

1.   Hourly:
     1. Start at 12.00-15
     2.   15.01-18
     3.   18.01-21
     4.   21.01-24.00
     5.   24.01+

2.   Annually:
     1. 25,000-30,000
     2. 30,001-35,000
     3. 35,001-40,000
     4. 40,001-45,000
     5. 45,001+

3.   Employment Status
     1. Full-time
     2. Part-time

4.   Usual shift worked:
     1. Day
     2. Afternoon
     3. Night

5.   Schedule format
     1. 8 hour shifts
     2. 10 hour shifts
     3. 12 hour shifts
     4. All weekends
     5. Other

6.   Orientation program
     1. None
     2. 6 days
     3. 1-3 weeks
     4. 4-6 weeks
     5. 7+ weeks

7.   Did the graduate work for your agency as an ADN or diploma graduate and
     also as a BSN graduate?
     1. Yes
     2. No

8.   Please respond to the next question only if this BSN completion student
     worked in your agency while attending the BSN program. Comments welcome
     on the last page.

     As the student progressed through the program, I observed:

     1. no change in the student
     2. positive changes in the student's work
     3. negative changes in the student's work

INSTRUCTIONS: Compare the skills, knowledge and ability of this graduate
during the first 6 months of employment with other graduates of similar
experience. Please use the following scale:

1 = Less   2 = About the Same   3 = Better

9.   Uses a nursing model as a basis for practice.
10. Applies research findings to own practice.
11. Uses critical thinking and independent judgment in decision-making.
12. Collaborates with physicians, members of other health disciplines, and
     outside health agencies and the patient in planning care.

(13-17) Is able to:

13. Assess and analyze problem.
14. Diagnose a problem.
15. Establish a plan.
16. Implement a plan.
17. Evaluate and replan.

18. Demonstrates leadership and management skills.
19. Practices within the ethical standards of the profession.
20. Practice within policies and procedures of agency.
21. Assumes responsibility for self-direction and personal and professional
     growth.

22. Overall, how would you rate this BSN graduate in comparison with other
     BSN graduates you have known and/or supervised?
     1. Very low
     2. Low
     3. Average
     4. High
     5. Very high

23. Comments: Your observations and suggestions are encouraged to assist us
     in providing successful educational experiences.

                                        .

Thank you! Please return both the scan sheet and this form in the enclosed
envelope.

b:tool21

APPENDIX H

Student Perceptions of the BSN Program Survey Form

Ferris State University
Academic Program Review - BSN
Student Perceptions of the BSN Program

<u>INSTRUCTIONS</u>: Please rate each item using the following guide:

> 1 = *POOR* is seriously inadequate, bottom 5 to 10 %
> 2 = *BELOW EXPECTATION* is only fair, bottom one-third
> 3 = *ACCEPTABLE* is average, the middle-third
> 4 = *GOOD* is a strong rating, top one-third
> 5 = *EXCELLENT* means nearly ideal, top 5 to 10%
> 6 = *DON'T KNOW* means you lack sufficient knowledge to evaluate

COMMENTS: Please note explanatory remarks (such as examples, "Not Applicable" to this program, etc.) or needs for improvement.

CRITERIA TO BE EVALUATED FOR BSN	1	2	3	4	5	6	COMMENTS
1. Courses in the BSN program are: * Available and conveniently located							
* Based on realistic prerequisites.							
* Available at moderate cost.							
2. Written objectives for courses in the BSN Program: * Are available to students.							
* Describe what you will learn in the course.							
* Are used by the instructor to keep you aware of your progress.							
3. Teaching methods, procedures and course content: * Meet your professional needs interests and objectives.							
* Provide supervised practice for developing job skills.							
4. Related courses (Such as English, Mathematics, Science) are: * Pertinent to professional instruction.							
* Current and meaningful to you.							
5. Clinical experience in the BSN program is: * Readily available at convenient locations.							

CRITERIA TO BE EVALUATED FOR BSN	1	2	3	4	5	6	COMMENTS
* Coordinated with classroom instruction.							
* Coordinated with preceptor supervision.							
6. Career planning information: * Meets your needs and interests.							
* Helps you plan your program.							
* Helps you make career decisions or choices.							
* Helps you understand your rights and responsibilities as a member of the profession of nursing.							
* Helps you evaluate your job opportunities in relation to salary, benefits and conditions of employment.							
* Is provided by knowledgeable, interested staff.							
* Explains nontraditional professional opportunities for both genders.							
7. Job Success information on former students in the BSN program: * Is provided to help you make career decisions.							
* Indicates how many job opportunities there are in your discipline.							
* Identifies where these job opportunities are located.							
* Tells about job advancement opportunities.							
8. Placement services are available to: * Help you find employment opportunities.							
* Prepare to you to apply for a job.							
9. Nursing Instructors: * Know the subject matter and professional nursing guidelines.							
* Are available to provide help when you need it.							
* Provide instruction so it is interesting and understandable.							

CRITERIA TO BE EVALUATED FOR BSN	1	2	3	4	5	6	COMMENTS
10. Instructional support services (such as Tutoring, lab assistance) are: * Available to meet your needs and interest.							
* Provided by knowledgeable interested staff.							
11. Instructional lectures and laboratory facilities: * Provide adequate lighting, ventilation, heating, power and other utilities.							
* Include enough work stations for the number of students enrolled.							
* Are safe, functional and well maintained.							
* Are available on an equal basis for all students.							
12. Instructional equipment is: * Current and representative of the industry.							
* In sufficient quantity to avoid long delays in use.							
* Safe and in good condition.							
13. Instructional materials (e.g.,textbooks, Reference books, supplies) are: * Available and conveniently located for use as needed.							
* Current and meaningful to the subject.							
* Not biased toward any traditional gender roles.							
* Available at reasonable cost.							

Please answer the following questions (continued on next page):

1.   Are you a full-time or part-time BSN student?

2.   What is your current program site?

3. What do you feel are the greatest strengths of the FSU BSN program?

4. What do you feel are the major needs for improvement in the FSU BSN program, and what action is required to achieve these improvements?

5. Other comments (please feel free to attach additional pages if necessary)

Thank you for your participation in this evaluation process.

FERRIS STATE UNIVERSITY
DEPARTMENT OF NURSING

BSN COMPLETION STUDENT SURVEY

PURPOSE:

This survey is one mechanism to obtain information about the BSN Completion
program. Your observations will help us in the ongoing process. Your
responses will be confidential. Please indicate your responses on
accompanying scan sheet, use a number 2 pencil and on open ended question
answer on this form.

1.-3. Site Identification
1.
  1. Niles
  2. Jackson
  3. Traverse City
  4. Muskegon
  5. Big Rapids-full time

2.
  1. Big Rapids-Wed. days
  2. Big Rapids-Thurs. evenings
  3. Big Rapids-Tues. days
  4. Big Rapids-Tues. evenings
  5. Midland (GLJC)

3.
  1. Midland (Delta)
  2. ATC - Grand Rapids

4.   Current site of employment (Indicate all that are appropriate)
  1. Acute care setting
  2. Community agency
  3. Extended care facility
  4. Physician's office
  5. Other_____

5.   Employment Status
  1. Full-time
  2. Part-time
  3. Not employed

6.   Type of basic nursing program:
  1. ADN program
  2. Diploma program

7.   Number of years licensed as an RN
  1. 0-5
  2. 6-10
  3. 11-20
  4. 21-30
  5. 31+

8.   Number of years of practice as an RN
  1. 0-5
  2. 6-10
  3. 11-20
  4. 21-30
  5. 31+

9. - 11. My area of specialization is:
9.
    1. Community Health
    2. ICU/CCU
    3. Geriatrics
    4. Medical/Surgical
    5. Mental Health

10.
    1. OB/GYN
    2. Pediatrics
    3. Emergency/Trauma
    4. Operating/Recovery Room
    5. Inservice/Patient Education

11.
    1. Home Health Care
    2. Administration
    3. Education in a school
    4. Education in a health care agency
    5. Other

Please evaluate each of the following statements. Mark the response which best indicates your experiences with the program.

1 = Unsatisfactory
2 = Below average
3 = Average
4 = Above Average
5 = Superior
Not Applicable= Leave answer blank

12. Orientation to the nursing program.

13. Evaluation of credentials and academic counseling prior to entry into the program.

The Nursing Student Handbook contains policies for admission, progression, retention, dismissal and graduation.

14. These policies are clearly stated.

15. These polices are nondiscriminatory.

16. These polices are fairly and consistently implemented.

17. The student grievance procedure is available, clear and adequate.

TEACHING PRACTICES:

18. The nursing faculty presentation of theoretical content.

19. The nursing faculty clinical competency.

20. The availability of faculty to answer questions related to course content.

21. Faculty sensitivity to individual learning needs/ problems.

COMMUNICATIONS:

22. Communication between you and the nursing department.

1 = Unsatisfactory
2 = Below Average
3 = Average
4 = Above Average
5 = Superior
Not Applicable = Leave answer blank

23. Communication between you and the Gerholz Institute for Lifelong Learning.

24. Communication between you and your advisor.

LOGISTICS:

25. The registration process each semester.

26. The purchasing of textbooks/syllabi.

28. The availability of journals/books in the local libraries (hospital, colleges).

29. The one day/evening per week format.

30. The length of each class period.

<u>Demographic Data</u> - Optional

31. Age:
    1. 20-25
    2. 26-30
    3. 31-40
    4. 41-50
    5. 51+

32. Sex:
    1. Male
    2. Female

33. Marital status:
    1. Married
    2. Single
    3. Separated
    4. Divorced
    5. Widowed

34. Racial/Ethnic Group
    1. Afro-American/Black
    2. American Indian or Alaskan Native
    3. Caucasian-American/White
    4. Mexican-American/ Chicano, Puerto Rican, Cuban
       or other Hispanic Origin
    5. Other

35. Number of Children
    1. none
    2. 1-2
    3. 3-4
    4. 5-6
    5. 7+

36. Age of Oldest Child
    1. 0-4
    2. 5-10
    3. 11-15
    4. 16-20
    5. 21+

37. Age of Youngest Child
    1. 0-4
    2. 5-10
    3. 11-15
    4. 16-20
    5. 21+

38. Please identify two or three of the most valuable learning experiences you were involved in.

39. Please identify two or three of the least valuable learning experiences you were involved in.

Please include comments or suggestions below to improve the nursing program.

Thank you! Please return both the scan sheet and this form in the enclosed envelope.

b:bsnsurvey

APPENDIX I

Faculty Perceptions of the BSN Program Survey Form

Ferris State University
Academic Program Review - BSN
Faculty Perceptions of the BSN Program

KEY: 1 = POOR   4 = GOOD   COMMENTS: Please note explanatory
       2 = BELOW EXPECTATIONS   5 = EXCELLENT   remarks or needs for
       3 = ACCEPTABLE   6 = DON'T KNOW   improvement.

CRITERIA TO BE EVALUATED FOR THE BSN PROGRAM	1	2	3	4	5	6	COMMENTS
GOALS AND OBJECTIVES **1. Participation in Development of BSN Program Plan** *Excellent* - Administration and/or other supervisory personnel involved in developing and revising the college plan for this program seek and respond to faculty, student and community input. *Poor* - Development of the plan for this program is basically the work of one or two persons in the college.							
2. Program Goals *Excellent* - Written goals for this program state realistic outcomes (such as planned enrollments, completions, placements) and are used as one measure of program effectiveness. *Poor* - No written goals exist for this program.							
3. Course Objectives *Excellent* - Written measurable objectives have been developed for all courses in this program and are used to plan and organize instruction. *Poor* - No written objectives have been developed for courses in this program.							
4. Competency Based Performance Objectives *Excellent* - Competency based performance objectives are on file in writing, consistent with employment standards and tell students what to expect and help faculty pace instruction. *Poor* - Competency based performance objectives have not been developed for courses in this program.							

CRITERIA TO BE EVALUATED FOR THE BSN PROGRAM	1	2	3	4	5	6	COMMENTS
5. Use of Competency Based Performance Objectives *Excellent* - Competency based performance objectives are distributed to students and used to assess student progress. *Poor* - Competency based performance objectives have not been developed for courses in this program.							
6. Use of Information on Labor market Needs *Excellent* - Current data on labor market needs and emerging trends in job openings are systematically used in developing and evaluating this program. *Poor* - Labor market data is not used in planning or evaluation.							
7. Use of Information of Job Performance Requirements *Excellent* - Current data on job performance requirements and trends are systematically used in developing and evaluating this program and content of its courses. *Poor* - Job performance requirements information has not been collected for use in planning and evaluating.							
8. Use of Profession / Industry Standards *Excellent* - Profession / industry standards (such as licensing, certification, accreditation) are consistently used in planning and evaluating this program and content of its courses. *Poor* - Little or no recognition is given to specific profession/industry standards in planning and evaluating this program.							
9. Use of Student Follow-up Information *Excellent* - Current follow-up data on completers and leavers (students with marketable skills) are consistently and systematically used in this program. *Poor* - Student follow-up information has not been collected for use in evaluating this program.							
PROCESSES **10. Adaptation of Instruction** *Excellent* - Instruction in all courses required in this program recognizes and responds to individual student interests, learning styles, skills and abilities through a variety of instructional methods (such as small group or individualized instruction, laboratory or "hands on" experiences, open entry/open exit, credit by examination). *Poor* - Instructional approaches in this program do not consider individual student differences.							

CRITERIA TO BE EVALUATED FOR THE BSN PROGRAM	1	2	3	4	5	6	COMMENTS
11. Relevance of Support Courses *Excellent* - Applicable supportive courses (such as sciences, communication, humanities, etc.) are closely coordinated with this program and are kept relevant to program goals and current to the needs of the students. *Poor* - Supportive course content reflects no planned approach to meeting needs of students in this program.							
12. Coordination with Other Community Agencies and Educational Programs *Excellent* - Effective liaison is maintained with other programs and educational agencies and institutions (such community colleges , universities) to assure a coordinated approach and to avoid duplication of meeting educational needs in the area or community. *Poor* - College activities reflect a disinterest in coordination with other programs and agencies having impact on this program.							
13. Provision for Clinical Experience. *Excellent* - Ample opportunities are provided for related work experiences in the form of clinical experiences for students in this program. Student participation is well coordinated with classroom instruction and clinical supervision. *Poor* - Few opportunities are provided in this program for related work experiences in the form of clinical experiences where such participation is feasible.							
14. Program Availability and Accessibility *Excellent* - Students and potential students desiring enrollment in this program are identified through recruitment activities, treated equally in enrollment selection, and not discouraged by unrealistic prerequisites. The program is readily available and accessible at convenient times and locations. *Poor* - This program is not available or accessible to most students seeking enrollment. Discriminatory selection procedures are practiced.							
15. Provision for the Disadvantaged *Excellent* - Support services are provided for disadvantaged (such as socioeconomic, cultural, linguistic, academic) students enrolled in this program. Services are coordinated with program instruction and results are assessed continuously. *Poor* - No support services are provided for disadvantaged students enrolled in this program.							

CRITERIA TO BE EVALUATED FOR THE BSN PROGRAM	1	2	3	4	5	6	COMMENTS
16. Provision for the Handicapped *Excellent* - Support services are provided for handicapped (physical, mental, emotional, and other health impairing handicaps) students enrolled in this program. Facilities and equipment adaptations are made as needed. Services and facilities modifications are coordinated with instruction and results are assessed continuously. *Poor* - No support services or facilities and equipment modifications are available for handicapped students enrolled in this program.							
17. Efforts to Achieve Gender Equity *Excellent* - Emphasis is given to eliminating gender bias and gender stereotyping in this program: staffing, student recruitment, program advisement, and career counseling; access to and acceptance in programs; selection of curricular materials; instruction; job development and placement. *Poor* - Almost no attention is directed toward achieving gender equity in this program.							
18. Provision for Program Advisement *Excellent* - Instructors or other qualified personnel advise students (day, evening, weekend) on program and course selection. Registration procedures facilitate course selection and sequencing. *Poor* - Instructors make no provision for advising students on course and program selection.							
19. Provision for Career Planning and Guidance *Excellent* - Day, evening and weekend students in this program have ready access to career planning and guidance services. *Poor* - Little or no provision is made for career planning and guidance services for students enrolled in this program.							
20. Adequacy of Career Planning and Guidance *Excellent* - Instructors or other qualified personnel providing career planning and guidance services have current and relevant professional nursing knowledge and use a variety of resources (such as printed materials, audiovisuals, job observation) to meet individual student career objectives. *Poor* - Career planning and guidance services are ineffective and staffed with personnel who have little professional nursing knowledge.							
21. Provision for Employability Information *Excellent* - This program includes information which is valuable to students as employees (on such topics as employment opportunities and future potential, starting salary, benefits, responsibilities and rights). *Poor* - Almost no emphasis is placed on providing information important to students as employees.							

CRITERIA TO BE EVALUATED FOR THE BSN PROGRAM	1	2	3	4	5	6	COMMENTS
22. Placement Effectiveness for Students in this Program *Excellent* - The College has an effectively functioning system for locating jobs and coordinating placement for students in this program. *Poor* - The College has no system or an ineffective system for locating jobs and coordinating placement for students enrolled in this program.							
23. Student Follow-up System *Excellent* - Success and failure of program leavers and completers are assessed through periodic follow-up studies. Information learned is made available to instructors, students, advisory committee members and others concerned (such as counselors) and is used to modify this program. *Poor* - No effort is made to follow up former students of this program.							
24. Promotion of the BSN Program *Excellent* - An active and organized effort is made to inform the public and its representatives (such as news media, legislators, board, professional community) of the importance of providing effective and comprehensive professional education and specific training for this profession to gain community support.							
RESOURCES **25. Provision for Leadership and Coordination** *Excellent* - Responsibility, authority, and accountability for this program are clearly identified and assigned. Administrative effectiveness is achieved in planning, managing and evaluating this program. *Poor* - There is no clearly defined lines of responsibility, authority and accountability for this program.							
26. Qualifications of Administrators *Excellent* - All persons responsible for directing and coordinating this program demonstrate a high level of administrative ability. They are knowledgeable in and committed to nursing education. *Poor* - Persons responsible for directing and coordinating this program have little administrative training, education and experience.							
27. Instructional Staffing *Excellent* - Instructional staffing for this program is sufficient to permit optimum program effectiveness (such as through enabling instructors to meet individual student needs, providing liaison with advisory committees and assisting with placement and follow-up activities). *Poor* - Staffing is inadequate to meet the needs of this program effectively.							

CRITERIA TO BE EVALUATED FOR THE BSN PROGRAM	1	2	3	4	5	6	COMMENTS
28. Qualifications of Instructional Staff *Excellent* - Instructors in this program have two or more years in relevant employment experience, have kept current in their field, and have developed and maintained a high level of teaching competence. *Poor* - Few instructors in this program have relevant employment experience or current competencies in their field.							
29. Professional Development Opportunities *Excellent* - The college encourages and supports the continuing professional development of faculty through such opportunities as conference attendance, curriculum development, work experience. *Poor* - The college does not encourage or support professional development of faculty.							
30. Use of Instructional Support Staff *Excellent* - Paraprofessionals (such as aides, laboratory assistants) are used when appropriate to provide classroom help to students and to ensure maximum effectiveness of instructors in the program. *Poor* - Little use is made of instructional support staff in this program.							
31. Use of Clerical Support Staff *Excellent* - Office and clerical assistance is available to instructors in this program and used to ensure maxim effectiveness of instructors. *Poor* - Little or no office and clerical assistance is available to instructors, ineffective use is made of clerical support staff.							
32. Adequacy and Availability of Instructional Equipment *Excellent* - Equipment used on or off campus for this program is current, representative of that used on jobs for which students are being trained, and in sufficient supply to meet the needs of students. *Poor* - Equipment for this program is outmoded and in insufficient quantity to support quality instruction.							
33. Maintenance and Safety of Instructional Equipment *Excellent* - Equipment used for this program is operational, safe, and well maintained. *Poor* - Equipment used for this program is often not operable and is unsafe.							
34. Adequacy of Instructional Facilities *Excellent* - Instructional facilities (excluding equipment) meet the program objectives and student needs, are functional and provide maximum flexibility and safe working conditions. *Poor* - Facilities for this program are generally restrictive, dysfunctional or overcrowded.							

CRITERIA TO BE EVALUATED FOR THE BSN PROGRAM	1	2	3	4	5	6	COMMENTS
35. Scheduling of Instructional Facilities *Excellent* - Scheduling of facilities and equipment for this program is planned to maximize use and be consistent with quality instruction. *Poor* - Facilities and equipment for this program are significantly under- or over-scheduled.							
36. Adequacy and Availability of Instructional Materials and Supplies *Excellent* - Instructional materials and supplies are readily available and in sufficient quantity to support quality instruction. *Poor* - Materials and supplies in this program are limited in amount, generally outdated, and lack relevance to program and student needs.							
37. Adequacy and Availability of Learning Resources *Excellent* - Learning resources for this program are available and accessible to students, current and relevant to the occupation, and selected to avoid gender bias and stereotyping. *Poor* - Learning resources for this program are outdated, limited in quantity and lack relevance to the discipline.							
38. Use of Advisory Committees *Excellent* - The advisory committee for this program is active and representative of the discipline. *Poor* - The advisory committee for this program is not representative of the discipline and rarely meets.							
39. Provisions in Current Operating Budget *Excellent* - Adequate funds are allocated in the college operating budget to support achievement of approved program objectives. Allocations are planned to consider instructor budget input. *Poor* - Funds provided are seriously inadequate in relation to approved objectives for this program.							
40. Provisions In Capital Outlay Budget for Equipment *Excellent* - Funds are allocated in a planned effort to provide for needed new equipment and for equipment replacement and repair, consistent with the objectives for this program and based on instructor input. *Poor* - Equipment needs in this program are almost totally unmet in the capital outlay budget.							

Please answer the following: (Use back of page and extra sheets if necessary).

1.   What are the chief educational strengths of your program?

2.   What are the major needs for improvement in your program and what action is required to achieve these improvements?

APPENDIX J

Department of Nursing Advisory Committee Members

Department of Nursing Advisory Committee 1996-1998

Karen Calkins
Assistant VP Nursing
MidMichigan Reg. Cntr.
Midland, MI

Pam Forbes
Director of WISE
Big Rapids, MI

Lee Hall
Director of Nursing
Reed City Hospital
Reed City, MI

Joan Jennett, RN
Director of Personal
Health Services
Mecosta Co. Health
Department
Big Rapids, MI

Jackie Keehne-Miron,
RN, BSN
Nurse Manager
St. Mary's Hospital
Grand Rapids, MI
(ADN & BSN Alumni)

Bette Newell, RN
Reed City Hospital
Staff Nurse
ADN Alumni

Gene Phillippi, RN, BS
Assitant Administrator of
Patient Services
Memorial Medical Center
Ludington, MI

Nettie Cove, RN
Chief Clinical Officer
Mecosta County General
Hospital
Big Rapids, MI

Carol Corbett
Hospice of Michigan
Big Rapids, MI

Colleen Smith
Director of Clinical
Practice / BSN Alumni
Mercy Hospital
Cadillac, MI

Sally K. Johnson
Department Head for
Nursing
Ferris State University
Big Rapids, MI

Sharon Mumah
Director of Nursing
Greenridge Nursing
Center
Big Rapids, MI

Katie Orent, RN
Staff Nurse
Blodgette Hospital
Grand Rapids, MI

Susan Pratt, RN
ADN graduate
Mecosta County General
Hospital Staff Nurse
Big Rapids, MI

Bobbi Schrader, RN, BS
Dept. Head, Health
Sciences
Grand Rapids
Community College

Phyllis Sullivan
Baldwin, MI

Jan Yarhouse, RN
Amicare Home
Healthcare & BSN
alumni
Cadillac, MI

Duane Spitzley
ADN student

Sandra Walls, RN
Director of Nursing
Kent County Health
Department
Grand Rapids, MI

APPENDIX K

**Advisory Committee Perceptions of the
BSN Program Survey Form**

Ferris State University
Academic Program Review - BSN Program
Advisory Committee Perceptions of the BSN Program

INSTRUCTIONS: Please rate each item using the following guide:

1 = *POOR* is seriously inadequate, bottom 5 to 10%
2 = *BELOW EXPECTATIONS* is only fair, bottom one-third
3 = *ACCEPTABLE* is average, the middle-third
4 = *GOOD* is a strong rating, top one-third
5 = *EXCELLENT* means nearly ideal, top 5 to 10 %
6 = DON'T KNOW means you lack sufficient knowledge to evaluate

COMMENTS: Please note explanatory remarks (such as examples, "Not Applicable" to this program, etc.) or needs for improvement.

CRITERIA TO BE EVALUATED IN BSN	1	2	3	4	5	6	COMMENTS
1. *Instructional BSN program content and quality are:* * Based on performance objectives that represent job skills and knowledge required for successful entry level employment.							
* Designed to provide students with practical job application and experience.							
* Responsive to upgrading and retraining needs of employed persons.							
* Periodically reviewed and revised to keep current with changing job practices and technology.							
2. *Instructional equipment is:* * Well maintained.							
* Current and representative of that used on the job.							
3. *Instructional facilities:* * Provide adequate lighting, ventilation, heating, power and other utilities.							
* Allocate sufficient space to support quality instruction.							
* Meet essential health and safety standards.							

CRITERIA TO BE EVALUATED IN BSN	1	2	3	4	5	6	COMMENTS
4. Placement: * Services are available to students completing the program.							
* Job opportunities exist for students completing the BSN program.							
5. Follow-up studies on program completers and leavers (Students with marketable skills): * Demonstrate that students are prepared for entry level employment.							
* Collect information on job success and failure of former students.							
* Provide information used to review and where warranted, praise the program.							

Please answer the following questions (continued on next page):

1. **What is your professional role or perspective as a member of the Nursing Programs Advisory Committee at Ferris? Please circle all that apply.**

   A.   FSU Nursing Program Alumnus. Specify: ADN, BSN or Both

   B.   Nursing Role in Acute Care. Specify: _____

   C.   Nursing Role in Community Setting. Specify:_____

   D.   Adjunct Faculty Member in (circle one) ADN or BSN Programs.

   E.   Current Nursing Student in either the ADN or BSN program (please circle one)

   F.   Other: _____

2. **How many total years of service do you have in the discipline of nursing?**

3. **How long have you served on the Department of Nursing Advisory Committee at Ferris State University?**

4. **Have you had the opportunity to evaluate graduates of the BSN program at Ferris? If so, in what capacity?**

5. What are the major strengths of the BSN program from your professional perspective?

6. What are the major needs for improvement in the BSN program from you professional perspective?

7. Do you have additional comments or suggestions for the BSN program or for utilization of the advisory committee?

APPENDIX L

Labor Market Analysis Documentation

Critical Challenges: Revitalizing the Health Professions for the Twenty-First Century

The Third Report of The Pew Health Professions Commission

First Release

November 1995

Pew Health Professions Commissi

Executive Summary

A New World for Health Care

American health care is experiencing fundamental change. What was recently conceived as a set of policy changes for reform is now being lent the form and weight of institutional reality by the enormous power of the trillion dollar health care market. In five brief years the organizational, financial and legal framework of much of health care in the U.S. have been transformed to emerging systems of integrated care that combine primary, specialty and hospital services. These systems attempt to manage the care delivered to enrolled populations in such a manner as to achieve some combination of cost reduction, enhanced patient and consumer satisfaction, and improvement of health care outcomes. Within another decade 80-90% of the insured population of the U.S. will receive its care though one of these systems.

By the end of this century these forces will interact in such a manner as to produce an American health care system that in general will be:

- more managed with better integration of services and financing
- more accountable to those who purchase and use health services
- more aware of and responsive to the needs of enrolled populations
- able to use fewer resources more effectively
- more innovative and diverse in how it provides for health
- more inclusive in how it defines health
- less focused on treatment and more concerned with education, prevention and care management
- more oriented to improving the health of the entire population
- more reliant on outcomes data and evidence.

The Impact on the Nation's 10 million Health Care Workers

This demand driven system in health care and health professions practice will create difficult realities for many health professionals and great opportunities for others. Some of these realities will be:

- closure of as many as half of the nations hospitals and loss of perhaps 60 % of hospital beds
- massive expansion of primary care in ambulatory and community settings
- a surplus of 100,000 to 150,000 physicians, as the demand for specialty care shrinks; a surplus of 200,000 to 300,000 nurses generated as hospitals close; a surplus of 40,000 pharmacists as the dispensing function for drugs is automated and centralized
- consolidation of many of the over 200 allied health professions into multi-skilled professions as hospitals re-engineer their service delivery programs

- demands for public health professionals to meet the needs of the market driven health care system
- fundamental alteration of the health professional schools and the ways in which they organize, structure and frame their programs of education, research and patient care

The Implications for the System that Produces Health Professionals

Because health care is a labor intensive enterprise, the next stage in our present cycle of change will demand a rapid transformation in how they are prepared for practice, how that practice is regulated, and the educational programs that prepare them for practice. The knowledge, skills, competencies, values, flexibility, commitment and morale of the health professional workforce serving the systems of care will become the most important factors contributing to the success or failure of the system.

In response to these circumstances, the system that produces both health professionals and the structures in which they work will shift away from its **supply** orientation and toward a **demand** driven system. This situation will create four challenges to the ways health professional practice and are educated and trained. The first challenge is to **re-design** the ways in which health professional work is organized in hospitals, clinics, private offices, community practices and public health activity. The second challenge is to **re-regulate** the ways in which health professionals are permitted to practice, allowing more flexibility and experimentation, but ensuring that the public's health is genuinely protected. The third challenge will be to **right-size** the health professional workforce and the institutions that produce health professionals; for the most part this will mean reducing the size of the professions and programs. Finally, education itself must be **restructured** to make efficient use of the resources that are allocated to it.

The Recommendations of the Commission

This report is intended to be a guide for surviving the transformation and thriving in the emerging health care culture. It is an attempt to balance market driven realities, institutional prerogative and public need. Failure to take up these challenges by institutional, professional or policy leaders is an abdication of their responsibilities to their patients, their students and ultimately to the public they are obligated to serve.

The Commission makes the following recommendations for all health professionals:

A. All health professional schools must enlarge the scientific bases of their educational programs to include the psycho-social-behavioral sciences and population and health management sciences in an evidenced based approach to clinical work.

B. While legitimate areas of specialized study should remain the domain of individual professional training programs, key areas of pre-clinical and clinical training must be put together as a whole, across professional communities, through increased sharing of clinical training resources, more cross teaching, more exploration of the various roles played by professionals and the active modeling of effective team integration in the delivery of efficient, high quality care.

C. The next generation of professionals must be prepared to practice in settings that are more intensively managed and integrated. Specifically, the clinicians of the future will be required to use the sophisticated information and communications technology, to promote health and preventing disease, to sharpen their skills in areas ranging from clinical prevention, to health education to the effective use of political reforms to change the burden of disease, to be more customer or consumer focused and to be ready to move into new roles that ask them to strike an equitable balance between resources and needs.

D. There is a substantial body of literature which concludes that culturally sensitive care is good care. This means two things for all health professional schools. First, they must continue their commitment to ensuring that the students they train represent the rich ethnic diversity of our society. Important investments and many successes have been achieved, but this is a obligation that must be continued at each institution and one that is continued until it is no longer an issue. Second, diversifying the entering class is not sufficient to ensure understanding and appreciation of diversity. Cultural sensitivity must be a part of the educational experience that touches the life of every student.

E. Every professional school must be willing to develop partnerships and alliances that have not been a part of education in the past -- partnerships with managed care for training, clinical research, and tertiary care referrals; with computer and software companies to develop the information and communications systems; partnerships with integrated systems to support health services research;

Pew Health Professions Commission

iii

and partnerships with state government to determine the best ways to meet the health needs of the public.

F. All health professions must recognize that the current health professions regulatory system needs to change. Health professionals must work with state legislators and regulators to ensure that regulation is standardized where appropriate; accountable to the public; flexible to support optimal access to a competent workforce; and effective and efficient in protecting and promoting the public's health, safety and welfare.

The Commission makes the following recommendations for Allied Health:

A. Restructure the mission and organization of allied health education programs to focus on local community health needs identified through partnerships with delivery systems, professional associations, educators, regulators, consumers, and the public.

B. Focus allied health curriculum on related discipline clusters, multi-skilling and interdisciplinary core curricula.

C. Improve student and professional articulation and career ladders within disciplines and between professions.

D. Improve education-practice linkages with diverse care delivery environments, such as managed care, home health care, and ambulatory care, for the benefit of both faculty and students.

E. Improve recruitment of minority, disabled and disadvantaged students and practitioners.

F. Improve faculty leadership skills and competence in clinical outcomes and effectiveness research.

G. Establish innovative collaborations among professional associations.

H. Improve the collection, evaluation and dissemination of data and innovations related to allied health education, training, practice, and regulation.

The Commission makes the following recommendations for Dentistry:

A. Maintain the entering dental school class size at its 1993 level (4001 students).

B. Create the opportunity for a postgraduate year of training for all graduating general dentists. New opportunities should be developed in private practice and managed care settings.

Nursing Program

APRC 1997-1998

Section 8 of 8

C. Accomplish the training for a dental degree and the one year of postgraduate training in four years of post-baccalaureate training.

D. Create adequately funded managed dental care partnerships between dental schools and their clinics and the emerging integrated health care system.

E. Change the clinical training of dentists to reflect a broader orientation to the efficient management of quality dental care.

F. Integrate dental education more thoroughly with that of the other health professions.

G. Increase the productivity of dentists through the efficient and effective use of dental hygienists and dental assistants.

H. Decrease the tuition dependency of dental schools, and subsequent student indebtedness, by developing efficiently managed dental school clinical models and the creation of endowments, scholarships and loan programs for students.

The Commission makes the following recommendations for Medicine:

A. Reduce the number of graduate medical training positions to the number of U.S. medical school graduates plus 10%.

B. By 2005 reduce the size of the entering medical school class in the U.S. by 20-25%. This would mean a reduction from the 1995 class of 17,500 to an entering class size of 13,000 to 14,000 for 2005. The reductions in graduate training positions described in (A) above should move downward with the reduction in medical school class size. This reduction should come from closing medical schools, not reducing class size.

C. Change immigration law to tighten the visa process for international medical graduates ensuring that they return to their native countries for service upon completion of training.

D. Redirect graduate medical training programs (6, 951 programs as of 1991) so that a minimum of 50% of them are in the primary care areas of family medicine, general internal medicine, and general pediatrics by the year 2000.

E. Move training of physicians at the undergraduate and graduate levels into community, ambulatory and managed care based settings for a minimum of 25% of clinical experience.

F. Create a public-private payment pool for funding health professions education that is tied to all insurance premiums and is designed to achieve policy goals serving the public's health.

G. Create an enlarged National Health Service Corps to attract graduate physicians into service roles currently being met by the excessive number of residency positions

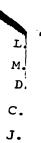**The Commission makes the following recommendations for Nursing:**

A. Recognize the value of the multiple entry points to professional practice available to nurses through preparation in associate, baccalaureate and masters programs; each is different, and each has important contributions to make in the changing health care system.

B. Consolidate the professional nomenclature so that there is a single title for each level of nursing preparation and service.

C. Distinguish between the practice responsibilities of these different levels of nursing, focusing associate preparation on the entry level hospital setting and nursing home practice, baccalaureate on the hospital based care management and community based practice, and masters degree for specialty practice in the hospital and independent practice as a primary care provider. Strengthen existing career ladder programs in order to make movement through these levels of nursing as easy as possible.

D. Reduce the size and number of nursing education programs (1,470 basic nursing programs as of 1990) by 10-20%. These closings should come in associate and diploma degree programs. These closing should pay attention to the reality that many areas have a shortage of educational programs and many more have a surplus.

E. Encourage the expansion of the number of masters level nurse practitioner training programs by increasing the level of federal support for students.

F. Develop new models of integration between education and the highly managed and integrated systems of care which can provide nurses with an appropriate training and clinical practice opportunity and which model flexible work rules that encourage continual improvement, innovation and health care work re-design.

G. Recover the clinical management role of nursing and recognize it as an increasingly important strength of training and professional practice at all levels.

The Commission makes the following recommendations for Pharmacy:

A. Reduce the number of pharmacy schools (75 schools and colleges in 1995) by 20-25% by the year 2005.

B. Recognize the need to evenly distribute these closings to accommodate underserved areas.

NEWS

American Association of Colleges of Nursing

ONE DUPONT CIRCLE, NW, SUITE 530
WASHINGTON, DC 20036
(202) 463-6930   FAX (202) 785-8320

CONTACT: Dan Mezibov
(202) 463-6930, x31
(410) 332-1492 (Jan. 1-2)
E-mail: dmezibov@aacn.nche.edu

BACHELOR'S DEGREE ENROLLMENTS CONTINUE DECLINE AT NATION'S NURSING SCHOOLS, AACN SURVEY FINDS

Master's-Degree Students, Despite Slightly Reduced Enrollments, Secure High Number of Placements at Graduation

WASHINGTON, D.C. -- Enrollment of nursing students in entry-level bachelor's-degree programs fell by 6.2 percent in fall 1996 compared to a year ago, the second consecutive decline in two years amid the quickening pace of hospital downsizing and other restructuring in the health care system.

At the same time, master's-degree enrollments, which had climbed steadily in recent years, saw their first decline since 1988, down in fall 1996 by 3.4 percent below a year ago, according to the latest survey by the American Association of Colleges of Nursing (AACN). Despite the downturn, job placements for master's-degree nursing graduates were among the highest of any degree level at graduation. Among responding schools, 67 percent and 41 percent of master's-degree and master's-level or post-master's nurse practitioner programs, respectively, reported that approximately 100 percent of graduates had employment commitments upon graduation between August 1995 and July 1996, compared to 12 percent of schools that reported a similar number of commitments for entry-level bachelor's-degree graduates.

The highest employment rates at graduation were realized by programs for registered nurses (with associate degrees or hospital diplomas) who are returning to school to pursue the

-- more --

Bachelor of Science degree in nursing (BSN). Of these responding RN-to-BSN programs. 76.4 percent reported that approximately 100 percent of graduates had secured employment upon graduation.

The survey, the latest annual report by AACN of nursing school enrollments and graduations at the nation's universities and four-year colleges, also found a continued increase (up 1.4 percent above a year ago) in RN-to-BSN program enrollments, as well as increased enrollments in doctoral programs in nursing (up 3.7 percent above a year ago).

AACN's findings reflect responses from a total of 522 (79.3 percent) of the nation's nursing schools with bachelor's-degree and graduate programs that were surveyed in fall 1996. *Data reflect actual counts; projections and estimates are not used.* Programs offering two-year associate-degrees and hospital diplomas are not included.

Two-year changes in enrollment and graduations are based on data from a matched group of 475 schools reporting in both the 1995-96 and 1996-97 academic years.

Graduations Up, But Declines Projected

Except for doctoral programs, graduations increased in all degree levels between August 1995 and July 1996, the AACN survey found. Compared to the previous year, the number of graduates rose in entry-level baccalaureate (up 3.7 percent), RN-to-BSN (up 9.6 percent), and master's-degree (up 7.6 percent) programs. In contrast, the ranks of doctoral graduates fell by 5.4 percent in the same period.

"Taken by themselves, graduation rates can be a misleading indicator of future nurse supply," says AACN President Carole A. Anderson, PhD, RN, FAAN. "Because of rising enrollments in the recent past, graduations likely will continue to climb before leveling off in approximately the next three years, when the impact of current enrollment declines is expected to take effect."

— more —

Overall, responding schools reported 123,965 students enrolled in baccalaureate-degree nursing programs. Included as part of this number are 87,315 entry-level students and 36,360 RN-to-BSN students.

However, across the last five years, entry-level baccalaureate enrollments at nursing schools have grown at an unsteady rate, increasing by an average of only 266 students nationwide per year, according to AACN data. "Together with the last two years of enrollment declines in these programs, such figures demonstrate how schools are responding to changing employment conditions in their markets," Dr. Anderson explains. As health care continues to shift outside the hospital to more primary and preventive care at other sites throughout the community, managed care has increased its dominance by ushering in briefer patient stays, an explosion in outpatient treatment, and as a result, downsizing and staff cutbacks at hospitals that traditionally have employed two-thirds of all RNs.

"Although news stories of hospital downsizings may have contributed to this year's decline in BSN enrollments, schools themselves may be a contributing factor as many deans — faced with a changing marketplace and tighter resources — adjust their enrollments to meet the escalating demand for increased numbers of nurse practitioners and other master's-prepared nurses with advanced practice skills," Dr. Anderson says.

Master's Enrollments See Slight Decline

Though full-time master's enrollments rose by 2.5 percent above a year ago, "this year's overall decline of 3.4 percent is particularly disturbing," Dr. Anderson explains. "It is at the master's level that schools prepare the cadre of advanced practice nurses to deliver primary and acute care for a health system in accelerating need, as well as talented candidates for practice in other nursing fields, such as administration and community health. Still, the rising enrollments among full-time master's students and in doctoral programs is welcome news, especially given the fact that part-time study continues to predominate at the graduate level, greatly prolonging the production of needed nursing providers, educators, and researchers."

"Moreover, this year's drop in master's enrollments may signal the heightened competition among nursing and other health professions schools to place students in primary care centers, HMOs, hospitals, and other settings for clinical training. The limited availability of these slots already is taking a toll on enrollments at many nursing schools nationwide," Dr. Anderson says. Indeed, in an AACN survey, while 27 percent of responding schools cited too few faculty as the chief reason for not accepting all qualified applicants to master's-degree nursing programs in fall 1995, 23 percent cited insufficient clinical or classroom space.

In addition, current enrollments indicate that the role of the master's-prepared nurse has become more solidified and focused on clinical practice. Of the 32,458 students enrolled in master's-degree nursing programs in fall 1996 for both nursing and non-nursing college graduates, the vast majority (75 percent) were concentrated in advanced practice tracks, including students in nurse practitioner (46.4 percent), clinical nurse specialist (14.8 percent), combined NP/CNS (8.5 percent), nurse anesthesia (3.1 percent), and nurse midwifery (2.4 percent) programs.

Within nurse practitioner tracks, enrollments were led by students in family nurse practitioner programs (49.2 percent), followed by adult (18.9 percent), pediatric (10.5 percent), gerontological (4.7 percent), and ob-gyn/women's health (4.2 percent) programs. Students enrolled in other master's tracks included nursing administration (8.6 percent), education (5.3 percent), and community health (3.4 percent).

Although the 2,954 doctoral students enrolled in fall 1996 comprised an overall growth of 3.7 percent above a year ago, enrollments across the last five years grew by an average of only 26 students per year, "far short of the numbers needed to produce a sufficient pool not only of nurse scientists, but also educators to teach future nurses," Dr. Anderson says.

Across the past five years, enrollments of returning RNs in baccalaureate programs have risen significantly by an average of 983 students per year nationwide, AACN surveys show. Still, despite these increases, only 14 percent of RNs prepared in associate-degree programs have

obtained the nursing baccalaureate degree. according to the latest figures from the Division of Nursing of the U.S. Department of Health and Human Services.

"Greater gains will be needed if we are to achieve the Division's recommended target of a basic nursing workforce in which at least two-thirds hold a baccalaureate or higher-degree in nursing by the year 2010," Dr. Anderson explains. "With broad preparation in clinical, scientific, community health, and patient education skills, the BSN nurse is well-positioned to move across settings such as home care, outpatient centers, and neighborhood clinics where opportunities are expanding rapidly as hospitals focus more on acute care and as health care itself moves beyond the hospital to more community-based sites."

Employment Opportunities Show Strong Regional Differences

On the average, 67.7 percent of baccalaureate graduates at responding schools had employment commitments upon graduation between August 1995 and July 1996, the AACN survey found. At the master's level, an average of 95.6 percent and 86 percent of graduates at responding schools, respectively, had employment commitments from master's and from master's-degree or post-master's nurse practitioner programs.

However, strong regional differences exist. For example, while only 2.1 percent of responding schools in North Atlantic states reported that approximately 100 percent of graduates from entry-level baccalaureate programs had found employment upon graduation, 17.8 percent of schools in the South did so. In addition, although 33.3 percent of responding schools in Western states reported that approximately 100 percent of graduates from master's and post-master's nurse practitioner programs had employment commitments upon graduation, 51.5 percent of schools in the Midwest did so.

In the West, 31.2 percent of responding schools reported that approximately 76-90 percent of graduates from entry-level baccalaureate programs secured employment upon graduation. In North Atlantic states, however, only 12.5 percent of responding schools did so. ·

"As health care shifts increasingly from hospital-based, inpatient care to other points of delivery, flexibility will be key both for entering and moving within the profession," Dr. Anderson says. "As more hospitals downsize, merge, or close, graduates may need to seek hospital employment in different parts of their home states, in another state, or another region where hiring is less constricted. Unlike the past, where most nursing graduates began their careers in acute-care hospitals, today's newly-licensed RNs are practicing more in other settings, such as home care, community health, other outpatient sites, and long-term care, where opportunities are fast expanding."

Copies of the AACN Survey, *1996-1997 Enrollment and Graduations in Baccalaureate and Graduate Programs in Nursing,* are available for $35 (including postage), prepaid orders only, from AACN, Dept. 178, Washington, DC 20055-0178; (202) 463-6930.

The American Association of Colleges of Nursing is the national voice for university and four-year-college education programs in nursing — the nation's largest health care profession. Representing more than 500 member schools of nursing at public and private institutions nationwide, AACN's educational, research, governmental advocacy, data collection, publications, and other programs work to establish quality standards for bachelor's- and graduate-degree nursing education, assist deans and directors to implement those standards, influence the nursing profession to improve health care, and promote public support of baccalaureate and graduate nursing education, research, and practice.

#

EDITORS: News media can obtain a copy of the AACN survey by contacting the AACN Office of Public Affairs at 202-463-6930, x31, or E-mail: dmezibov@aacn.nche.edu.

96enrrls.dm

NURSING SCHOOL ENROLLMENTS AND GRADUATIONS
FALL 1996

DEGREE	NUMBER OF SCHOOLS REPORTING	STUDENT STATUS FULL-TIME	PART-TIME	TOTAL
ENROLLMENT (522 Schools Reporting)				
Baccalaureate				
Entry-level (Basic)[1]	426	75,273	11,808	87,315
RN	502	6,099	30,261	36,360
Combined[2]	1	290	0	290
Total Baccalaureate	514	81,662	42,069	123,965
Graduate				
Master's	281	9,343	22,309	31,652
Doctoral	64	1,072	1,882	2,954
Generic (for non-nursing college graduates)				
Master's	14	741	65	806
Doctor of Nursing	4	190	154	344
Postdoctoral	15	31	8	39

GRADUATIONS FROM 8/1/95-7/31/96 (522 Schools Reporting)

DEGREE	NUMBER OF SCHOOLS REPORTING	NUMBER OF GRADUATES
Baccalaureate		
Entry-level (Basic)	429	28,354
RN	502	10,167
Total Baccalaureate	514	38,521
Graduate		
Master's	281	9,068
Doctoral	64	366
Generic (for non-nursing college graduates)		
Master's	14	240
. Doctor of Nursing	4	70

[1] One institution did not separate entry-level baccalaureate student status. These data are included in the entry-level baccalaureate totals.

[2] One institution did not separate entry-level and RN baccalaureate enrollment data.

Nursing school enrollment falls amid job demand

By Karen S. Peterson
USA TODAY

The good news for nursing schools is that their graduates with advanced training are finding jobs. The bad news: Enrollment in both bachelor's and master's degree programs is down, shows a new survey from the American Association of Colleges of Nursing (AACN).

Sixty-seven percent of 522 nursing schools surveyed said almost 100% of their nurses graduating with master's degrees between August 1995 and July 1996 had job commitments upon leaving school.

"The statistics for master's graduates are very good," AACN President Carole A. Anderson says. Nurse practitioners are in particular demand as primary care networks expand, she says.

But enrollment in bachelor's-degree programs fell by 6.2% last fall, the second year in a row the number has declined. And master's-degree enrollment fell 3.4%, the first decline since 1988.

The changing picture of nursing care may be one reason for the decline. In some cases, applications remain strong, but the schools themselves have had to cut back on some enrollments. Anderson speculates, for instance, that some schools have cut undergraduate slots to concentrate their resources on advanced programs.

Job opportunities for nurses are shifting, Anderson says, and nursing schools are having trouble staying flexible enough to meet those changing demands. Hospitals traditionally have employed two-thirds of all registered nurses, but as managed care dictates briefer hospital stays and more outpatient treatment, hospitals have cut staffs, including RNs.

At the same time, opportunities for nurses are opening up in home care, outpatient centers and neighborhood clinics.

As the nursing job market continues to change, schools must find new ways to adapt, Anderson says.

NESS MONDAY IN MONEY FOR BUSINESS OPPORTUNITIES ACROSS THE USA

1/6/97   USA Today

History has documented a consistent division among nurses. This divisiveness has consumed an inordinate amount of time and energy. What fuels this divisiveness? According to the U.S. Department of Health and Human Services, 1994, here are the figures.

The basic educational level of practicing R.N.s in 1992 was:

Diploma	42%
Associate	32%
Baccalaureate	25%
Other	1%

According to the National League for Nursing, 1994, new R.N. graduates in 1992 and 1980 were:

	1992		1980	
	#	%	#	%
Associate Degree:	52,896	65	36,034	48
Baccalaureate:	21,415	27	24,994	33
Diploma:	6,528	8	14,495	19
Total:	80,839		75,523	

Percentage of programs graduating candidates for R.N. licensure in 1992 and 1980 was:

	1992		1980	
	#	%	#	%
Associate Degree:	848	57	697	51
Baccalaureate:	501	34	377	27
Diploma:	135	9	311	22
Total:	1484		1385	

Enrollments in basic RN programs in 1992 and 1980 were:

	1992		1980	
	#	%	#	%
Associate Degree:	132,603	51	94,060	40
Baccalaureate:	102,128	40	95,858	41
Diploma:	23,253	9	41,048	19
Total:	257,983		230,966	

The highest educational preparation of the registered nurse population in 1992 and 1980 was:

	1992 #	1980 #
Diploma	34%	55%
Baccalaureate	30%	22%
Associate	28%	18%
Other	8%	5%

In 1989, Health and Human Services predicted that the need for baccalaureate nurses in 2020 would be more than twice the amount that would be supplied. The Pew Report (1995) has now requested a decrease in associate-degree programs.
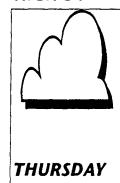
LOW

33°   HIGH 34°

NESDAY   THURSDAY

LOW 24°   LOW 27°

EXTENDED

Thursday, dry. Lows 15 to 25. Highs in the low to mid-30s. Friday, chance of snow north. Chance of snow or rain south. Lows in the 20s. Highs in the low to mid-30s north and 35 to around 40 south. Saturday, chance of snow showers north and chance of snow showers or rain showers south. Lows 25 to ...

Nurses make house calls

HOLLAND (AP) — They say doctors don't make house calls anymore. But nurses do.

In fact, an increasing number of nurses are requiring more intense education as they begin to focus on prevention of illness and education of the patient.

Health care experts say a new career field is emerging for nurse practitioners, who are moving out of the hospital and into the home due to shortened hospital stays.

"The old stereotype of a white uniform bustling up and down hospital halls and putting a cold hand to a fevered brow is now a bit of an anachronism," said Marjorie Viehl, chairwoman of the Hope/Calvin College Department of Nursing.

A more modern picture might be Sandy Depree, who is a nurse practitioner for the Siegers & Tyler Obstetrician-Gynecology practice in Holland. DePree went back to school to get a master's in nursing.

"I get to diagnose problems and treat problems," DePree said. "I don't claim to have similar knowledge as physicians, but I have a lot of independence."

DePree is also part of a health care trend which is pushing many nurses out of the hospital.

"There will always be an in-patient nursing need in this community. It just may not be the center of the continuum anymore," said Tracey McKnight, corporate director of acute care at Holland Community Hospital.

Nationwide, the number of community-based nurses increased 38 percent from 1988 to 1992, according to a survey by the Bureau of Health Professionals in Rockville, Md.

Although the bureau's 1996 survey is not yet available, analysts believe the trend toward non-hospital nursing is continuing to grow, said Evelyn Moses, chief of the Bureau's Nursing Data and Analysis.

Because of cost pressures, doctors are treating more patients outside the hospital than they did a decade ago.

While health-care providers insist patients aren't being discharged before they're well enough to go home, those patients still may not be emotionally ready or physically strong enough to care for themselves.

Deportation po

DETROIT (AP) — A married a Royal Oak wo to gain United States ci faces jail or deportation sentence issued by a fec Monday.

Haithman Abdul Ha of Jordan was sentence months in jail and three supervised release for n fraud, by U.S. District C Bernard Friedman. But agreed to waive the sen favor of immediate dep Hammad waives his rig the matter.

Clean-up deal

METAMORA TOWN — Thirty-five companie Ford Motor Co., Chrysle General Motors Corp., a Corp., have agreed to pa lion to the Environment Protection Agency for c the Metamora Landfill i County.

An EPA official said that the arrangement w panies helps EPA recove the $40 million it spent t contaminated area.

APPENDIX M

BSN Curriculum Evaluation Tools

FERRIS STATE UNIVERSITY
DEPARTMENT OF NURSING

Evaluation of Nursing Course Organization
and Content by BSN Students

Please record your answers on the answer sheet that is provided for you, using a #2 pencil.

1-2 Site
  1.
      1. Niles
      2. Jackson
      3. Traverse City
      4. Muskegon
      5. Big Rapids

  2.
      1. Midland (GLJC)
      2. Midland (Delta)

3. Semester
      1. 95 Fall
      2. 96 Winter
      3. 96 Summer
      4. 96 Fall
      5. 97 Winter

4-5 Course
  4.
      1. NURS 324   Trans. into Prof. Nurs.
      2. NURS 344   Research and Statistics in Nurs.
      3. NURS 330   Health Assessment I
      4. NURS 331   Health Assessment II
      5. NURS 416   Families and Communities

  5.
      1. NURS 476   Management and Leadership
      2. NURS 499   Seminar in Prof. Nurs.

1 = Poor   2 = Below Average   3 = Average   4 = Above Average
5 = Excellent   N/A Not applicable please leave blank

COURSE ORGANIZATION

1. Syllabus well organized.

2. Textbook addressed course objectives.

3. Course content consistent with course objectives.

4. Audiovisual materials, if used, consistent with course objectives.

5. Amount of credit allocated appropriate for amount of content.

6. Reading/reference material needed to meet course objectives available.

7. Non-nursing courses taken prior to this course enhanced student understanding of the course content.

8. This course builds on learning from the previous nursing courses.

1 = Poor   2 = Below Average   3 = Average   4 = Above Average
5 = Excellent   N/A Not applicable please leave blank

<u>COURSE CONTENT</u>

Please rate the following areas of content in terms of how well they were each addressed in this course.

9.   Health promotion

10.   Illness care

11.   Rehabilitation

12.   Historical perspectives

13.   Social issues

14.   Economic implications of health care

15.   Multicultural populations

16.   Covers range of life cycle

<u>COMMUNITY PERSPECTIVE</u>

Please rate the following areas of professional development in terms of how well this course enhanced your personal awareness and professional accountability skills.

17.   Implications for nursing research

18.   Leadership and management skills

19.   Opportunity to make nursing decisions

20.   Opportunity to make independent judgements

21.   Development/enhancement of critical thinking skill

22.   Please share any recommendations you feel would improve the quality of this course and the curriculum as a whole.

FERRIS STATE UNIVERSITY
DEPARTMENT OF NURSING

Evaluation of Course Instruction by Students

The instructor in charge of this course honestly desires to make it of maximum value to the students who take it. By answering the following questions sincerely, fairly, and carefully, you can do your part to help bring about improvements. This is the whole purpose of the questions which are asked of you.

Guarantee is given that the instructor will not see the evaluation before the grades are filed for the semester so there can be no possible influence on grading. Do not sign your name.

Instructor Name _____

Course Title & Number _____

Semester _____

Fill in the appropriate number in the space provided. Write additional comments on this form.

1 = Poor
2 = Below Average
3 = Average
4 = Above Average
5 = Excellent

_____1. The instructor demonstrated knowledge of the subject matter.

_____2. A variety of instructional methods were utilized. (Use of A-V, guest speaker, films, role playing, group learning, etc.)

_____3. Assignments were reasonable and clearly presented.

_____4. Course content was clearly presented.

_____5. Instructor's presentations were well organized.

_____6. Student's critical thinking skill was enhanced.

_____7. Frequency of testing, quizzes and papers was appropriate.

_____8. Testing and assignments were consistent with the course objectives.

_____9. Instructor available when assistance was needed.

_____10. Returns written assignments and test results within a reasonable time.

over

CLASSROOM INSTRUCTOR EVALUATION
Strengths:

Weaknesses:

Thank you!

FERRIS STATE UNIVERSITY
DEPARTMENT OF NURSING

Evaluation of Clinical Instruction by Students

The instructor in charge of this course desires to make it of <u>maximum value to
the students who take it.</u> By answering the following questions <u>sincerely,
fairly and carefully,</u> you can do your part to help bring about improvements.
<u>This is the whole purpose of the questions which are asked.</u>

Guarantee is given that the instructor will not see the evaluation before the
grades are filed for the semester so there can be no possible influence on
grading. <u>Do not sign your name.</u> Write on this form.

1.   Term of Enrollment

     1. 95 fall
     2. 96 winter
     3. 96 summer
     4. 96 fall
     5. 97 winter

2.- 3. Site Identification

2.
     1. Niles
     2. Jackson
     3. Traverse City
     4. Muskegon
     5. Grand Rapids

3.
     1. Midland (GLJC)
     2. Midland (Delta)
     3. Big Rapids-Tuesday Evenings
     4. Big Rapids-Wednesday Evenings
     5. Big Rapids-Fridays

4.-6. Course Identification - **mark only the course being evaluated, leave all
      other courses blank.**

4.   1. NURS 111 Fundamentals
     2. NURS 112 Assessment
     3. NURS 211 Reproductive Nursing
     4. NURS 212 Pediatric Nursing
     5. NURS 213 Psychiatric Nursing

5.   1. NURS 214 Geriatric Nursing
     2. NURS 222 Advanced Medical-Surgical Nursing
     3. NURS 330 Health Assessment I
     4. NURS 331 Health Assessment II
     5. NURS 416 Families & Communities

6.   1. NURS 476 Management and Leadership

Fill in the appropriate number on the answer sheet for numbers 7-19. Write additional comments on this form.

1 = Poor
2 = Below Average
3 = Average
4 = Above average
5 = Excellent
N/A = Not applicable (Leave answer blank)

7.   Organizes assignments to meet clinical objectives

8.   Makes expectations for the learning experiences clear.

9.   Provides feedback consistently and regularly.

10.   Encourages independent thinking.

11.   Establishes a positive learning environment.

12.   Provides an appropriate amount of clinical supervision.

13.   Provides constructive comments on written assignments.

14.   Returns written assignments within a reasonable period of time.

15.   Acts as a positive role model.

16.   Facilitates learning opportunities.

17.   Respects student as an individual.

18.   Provides opportunity for self evaluation.

19. Evaluates students on course objectives.

CLINICAL INSTRUCTOR EVALUATION

Strengths:

Weaknesses:

Thank you! Please return both the scan sheet and this form in the enclosed envelope.
b:Clinical

tool #17
Reused 5/84, 10/84, 4/85, 7/88; 1995
Reviewed 10/82, 1/83, 7/83

FERRIS STATE UNIVERSITY
DEPARTMENT OF NURSING

Evaluation of Instructional Processes

The Curriculum Committee will review instructional processes in odd years
(i.e., 87-88) and report findings and recommendations to the Nursing faculty
committee by March of even years. This evaluation is designed to assure that
the instructional processes are based on the philosophy and goals of the pro-
gram and the objectives of the curriculum.

1. Give examples of how the philosophy statement about learning is reflect-
    ed in instructional processes.

2. Give examples of how the classroom and clinical experiences are reflec-
    tive of learning theory and student needs.

3. Identify the relationship between instructional methods and students'
    ability to achieve objectives.

4. The areas of and items on student evaluation tools match instructional
    objectives. Complete this table to illustrate that relationship.

One Course Objective For Each Nursing Course	Instructional Method Used to Assist Student in Attaining That Objective	Evaluation Method to Illustrate Student Achievement of That Objective

FERRIS STATE UNIVERSITY
DEPARTMENT OF NURSING

Evaluation of Curriculum Organization

To be completed by Curriculum Committee in even years (i.e. 96-97, 98-99). Findings and recommendations are to be brought to nursing faculty for consideration no later than February of odd years.

The curriculum is logically organized and internally consistent.

1. Are the philosophy and objectives of the program
   1. clearly stated?
      1. No
      2. Yes

   2. Congruent with the University mission?
      1. No
      2. Yes

   3. Appropriate to current nursing status in service and education?
      1. No
      2. Yes
Comments:

2. Is the curriculum based on the stated philosophy and objectives.
   1. Are the main concepts identified in the philosophy evident in the level objectives?
      1. No
      2. Yes

   2. Does each level objective assist in attaining the stated terminal competence?
      1. No
      2. Yes
Comments:

3. Review the organizing framework which supports selection and sequencing of content.

   A. Name the curricular threads/concepts or framework themes.

   B. Illustrate how each thread has influenced selection or sequencing of a portion of program content.

   C. Show that knowledge and skills are developed progressively through the program as suggested by threads/concepts.

4. Are the level objectives
1.   Clearly stated?
       1. No
       2. Yes

2.   Readily available?
       1. No
       2. Yes

3.   Appropriate to the program goals (terminal objectives)?
       1. No
       2. Yes

4.   Current in view of changes in profession?
       1. No
       2. Yes
Comments:

Using the course syllabus for each course, review course descriptions, course objectives, and topical outline. <u>Considering all courses:</u>

5. Is there evidence of inappropriate repetition among courses?
       1. No
       2. Yes
    Comments:

6. Are courses objectives and course descriptions congruent and reflective of program goals?
       1. No
       2. Yes
    Comments:

7. Is total course sequencing reflective of organizational framework?
       1. No
       2. Yes
    Comments:

Considering <u>each</u> course:

8. Does topical outline reflect goals and objectives of course and course description?
       1. No
       2. Yes

9. Is each syllabus complete and current?
       1. No
       2. Yes
    Comments:

The majority of learning experiences of nursing theory and practice are at the upper division level:

10. Number of nursing <u>credits</u> at upper division. _____

11. Number of non-nursing <u>credits</u> at upper division. _____

12. Number of nursing <u>credits</u> accepted/granted for basic
    nursing education. _____

13. Number of non-nursing transfer <u>credits</u> which can be
    accepted for prerequisites (lower division). _____

14. Are the majority of learning experiences in nursing theory and practice at the upper division level as
    indicated by the information in items 10-13?
    1. No
    2. Yes
    Comments:

The curriculum content focuses on the discipline of nursing and is supported by other sciences as well as
the arts and humanities :

15. Number of nursing <u>credits</u> which are designed to nursing. _____

16. Number of <u>credits</u> which are designed to research.
    Nursing _____
    Non-nursing _____

17. Identify at least one area of nursing curriculum which assists students to relate each of the following
    areas to nursing.
    a. Medical sciences
    b. Behavioral sciences
    c. Natural and physical sciences
    d. Liberal arts
    e. Humanities

18. Comments suggested by findings from 15, 16, & 17.

19. Overall summary of Curriculum Organization evaluation.

_____   _____
Date   Chairperson

6/88
Adopted 11/88
Revised 9/96

FERRIS STATE UNIVERSITY
DEPARTMENT OF NURSING

Instructional Media Review/Evaluation

Complete this form when evaluating current or new media materials.

EVALUATOR:_____DATE:_____

TITLE OF MATERIAL:_____

TYPE OF MATERIAL :_____

DISTRIBUTOR:_____PRICE:_____

Evaluation Scale (circle one number at end of each statement):

1= Above Average   2= Average   3= Below Average

1. The goal and objectives are defined and are evidenced in the content of the material.

2. The material achieves its stated goals and objectives.

3. The material adequately represents the subject for which it was developed.

4. The material has an up-to-date focus on events, issues, people, things.

5. The material is appropriately free of confusing and/or conflicting concepts.

Please check at least one item below:
( ) Recommend deletion of this material from A-V library.

( ) Would not recommend purchase/rental of this material at all.

( ) May be of limited value, recommend with reservations.

( ) Recommend further evaluation because_____

_____

( ) Recommend purchase of this material.

( ) Recommend rental of this material.

If purchase/rental is recommended, list course(s) for which it would be valuable._____

_____

3/82, 10/84, 6/86
Revised 6/88, 11/88
Reviewed 9/96

APPENDIX N

Curriculum Organizational Framework

Chart I
Philosophy Concepts in Nursing Courses and Learning Experiences

Philosophy	Terminal Objectives	Level Objectives Level I	Nursing Course	Course Objectives	Learning Experiences
INDIVIDUAL					
	#1, #3	1. 1.2	NURS 324	1.B	Nursing theory paper that addresses nursing theory, nursing paradigms.
		1.3		1.A	
*Highly complex unified whole *Interacts with ever changing environment					
*Worthy of care *Inherant rights *Right to make health decisions	#2, #4	1. 1.3 1. 1.1 1.2 1.3	NURS 330 NURS 331	1.A-1.E 1.G, 1.J 1.E 1.A, 1.B, 1.D. 1.H, 1.I, 1.K, 1.L, 1.M, 1.N	Health promotion concepts for the individual across the developmental continuum.
	#3	Level II 1. 1.3	NURS 344	1.A-1.H	The rights of individuals within the research process is discussed in class.
		3.3		1.A-1.H	
	#2	II. 1.1 1.2	NURS 416	1.A,1.B 1.A,1.B	Family & Community theory that examines the relationship of individual in a family & community system.
		1.3		1.A, 1.B	
	#4	II. 1.3 1.2	NURS 476	1.A, 1.B 1.B	Educational presentation so group leader considers individual rights of group members.
	#1	II. 1.1	NURS 499	1	Seminar focus involves impact of various issues on individuals.

Philosophy	Terminal Objectives	Level Objectives	Nursing Course	Course Objective	Learning Experience
		1.2		1	
		1.3		1	
*Physical -Psych-Social-Cultural	#2	Level I			
*Health as basic goal of Nursing		2.1	NURS 324	IIAB	Presentations in class and in written papers address health in nursing paradigms.
*Health exists in range of responses clients make to maintain equilibrium		2.1, 2.2	NURS 330	IIA	Individual health belief model examined.
				IIA, B	
		2.1	NURS 331	IIA, B, E, H	Students analyze an individual health concept, knowledge, and health practices.
		2.2		IIC,G	
		2.3		IID, F	
		Level II			
		2.1	NURS 344	IIA,B,C	Nursing research related to the effectiveness of health beliefs and practices is critiqued.
		2.1, 2.2	NURS 416	IIA, B	Family & community health values, beliefs, practices & knowledge are assessed. Paper addresses geopolitical community and need. Family & community theory is incorporated.
		2.1, 2.3		IIC	
		2.1	NURS 476	IIA,B	Leadership and classroom presentation examines health care organization as a system. Group process theory is incorporated into group projects.
		2.2, 2.3		IIB, C	
		2.1, 2.3	NURS 499	II	State Board of Nursing and State Nursing Association is visited on a field trip. The roles and Function of each is examined and their effect on nursing and society.
SOCIETY	#2	Level I			
*Context in which individuals function		3.1	NURS 324	IIIA	
*Context of all nursing		3.1 - 3.5		IIIB	
*Composed of subsystems are are designed to meet individual needs... protection, education, enculturation		2.1 - 2.3	NURS 330	IIA, B	
*Family is the basic unit of society		2.1	NURS 331	IIA,B,E,H	

Philosophy	Terminal Objectives	Level Objectives	Nursing Course	Learning Experience
*Families and individuals unite into groups and communities		2.2		IIC, G
*Understanding diverse (societal) norms serve as basis for health care intervention		2.3		IID,F
		Level II		
	#1			
		1.1	NURS 344	IIA, B, C
	#6	6.1 - 6.2		
	#1	1.2	NURS 416	I A, B
	#2	2.2 - 2		IIA, B, C
				IIIA, B, C, D, E, F
				IVA, B
		2.1		IV A, B
				VI A, B
	#1	1.1, 1.2	NURS 476	
	#2	2.2		VA, B
	#5	5.3		VI C

NURSING

Philosophy	Terminal Objectives	Level Objectives	Nursing Course	Learning Experience
		1,2,3	NURS 324	
*Interpersonal endeavor	#1			
*Clients are individuals, families, groups and communities	#2	1,2,3	NURS 330	
*Assist the client in maintaining and promoting health, preventing illness, maximizing potential			NURS 331	
*Goal is to promote optimal well being throughout the life cycle.	#5			
*Methodology is the nursing process	#1, #3			
*Practitioners make decisions based on behavioral theories, scientific theories, nursing theories.	#1, #6			
*Practitioners accept standards from legal standards, ethical standards, social standards	#5			

The philosophy of nursing concepts are an integral part of each nursing course. Level I nursing courses expands the students understanding of nursing and health promotion throughout the life cycle, the theory framework of professional nursing, and the use of the nursing process with a child, an adult, or a senior., and nursing research.

Level II nursing courses utilize the philosophy concepts with families, communities, groups and organizations also.

Student utilizes a critical thinking journal in family and community nursing in which steps of reasoning are applied.

Philosophy	Terminal Objectives	Level Objectives	Nursing Course	Course Objective	Learning Experience
*Practitioner accountability is to the client, the nursing profession, society *(technical nursing is not applicable for this report)	#5				N476- The student makes an analysis of the health care delivery system and the role of the nurse manager in that system.
*Professional nurse must posess critical thinking skills, communication skills, therapeutic nursing practice skills *Professional practitioner is prepared as a generalist at baccalaureate level	#1,#3				
*Professional practitioner guides the provision of individualized, and comprehensive nursing care for individuals, families, groups, and communities	#3				
*Professional practitioner guides nursing care for clients at any point on health illness continuation, developmental continuation.	#3				

LEARNING

Philosophy	Terminal Objectives	Level Objectives	Nursing Course	Course Objective	Learning Experience
*Internal, self-directed, life-long process that results in behavioral change	#1	Level I 1.1.3	NURS 324	OB. VG	Literature review based on elements of reasoning. Small group experience examines criteria for a profession.
*Faculty responsibilities involve design of learning experiences, implementation, and evaluation of learning experiences.	#3	3/3/1	NURS 330	IIIE	
*Learning builds on prior knowledge	#2	1.2.1 - 1.2.3	NURS 331	IIC, E, F	
*Critical thinking and problem solving stimulate changes in behavior	#4	1.4.2		IV A, B	
*Students understand their ethical, legal, and societal responsibilities	#6	1.4.2		VI B	
*Students are responsible for their own learning	#3	Level II 3.1,3.2,3.3	NURS 344	I, II, III	
	#5 #6	3.4, 3.5		IV, V, VI	
	#1	1.2, 1.3	NURS 416	IA, B	Geopolitical and community of need are analyzed within structured groups. Students understand responsibilities to family client.
	#2	2.1, 2.2, 2.3		II A, B, C	
	#3	3.3		III A, IV	
	#4	4.2		V A & B, VI	

Philosophy	Terminal Objectives	Level Objectives	Nursing Course	Course Objective	Learning Experience
	#5	5.3			
	#6	6.2			
	#1	1.1, 1.2, 1.3	NURS 476	I.1, I.2, I.3	Students have a self directed clinical experience in a health care organization as a group leader for a group. didactic environment involves cooperative learnign format.
	#2	2.1, 2.3		II C, D, E, F, G	
	#3	3.1, 3.2		III C, D, E, F	
	#4	4.1, 4.2, 4.4, 4.5		IV B	
	#5	5.2, 5.3		V A, B	
	#6	6.1, 6.2, 6.3		VI A, B, C	
	#1	1.1, 1.2	NURS 499	I	Seminar format showcases individual students ability to critically think and to communicate effectively on an issue they have selected.
	#4	4.5		III	
	#5	5.1, 5.2, 5.3			
	#6	6.1, 6.2		VI	

EDUCATIONAL EXPERIENCES

Philosophy	Terminal Objectives	Level Objectives	Nursing Course	Course Objective	Learning Experience
*Designed to develop skills, knowledge, and professional behaviaors in the learner	#1	1.2, 1.3	NURS 324	I A,B	
*Technical nursing (N.A.)	#5	2.1, 2.2, 2.3, 5.1, 5.2, 5.3		II A, B	
*Professional nursing requirements skills and knowledge in nursing, biological sciences, physical sciences, social sciences and research methodology	#6	6.1, 6.2			Students are very self directed. In 416 the student and the family agree on times for home visits. In 476 the student shadows a professional nurse manager, ie role modeling.
*Deliver nursing care in unrestricted setting	#2	2.1, 2.2, 2.3	NURS 330	I A, B, C, D, E	
*Technical nursing serves as foundation for professional nursing study	#3	3.1, 3.2, 3.3, 3.4, 3.1		III D, B, C, D, E, F, G, H, I	
*Professional nursing serves as foundation for graduate study	#2	2.1, 2.2, 2.3	NURS 331	III A-F	
	#4	4.5 LEVEL II		IV A, B	
	#6	6.1, 6.3	NURS 344	I, A-H II A-C III A-E IV A, B	

Philosophy	Terminal Objectives	Level Objectives	Nursing Course	Course Objective	Learning Experience
				V A, B	
				VI A, B	
	#1	1.1, 1.2, 1.3	NURS 416	I A, B	
	#2	2.1, 2.3		II A,B,C	
	#3	3.1 - 3.5		III A-F	
	#4	4.5		IV A	
	#5	5.1, 5.3, 5.3		V A & B	
	#6	6.1, 6.2		VI A & B	
	#1	1.1., 1.2, 1.3	NURS 476	I A, B	A paper is written to graduate level standards ie A.P.A., theory analysis, communication of ideas.
				II A, B	
				III A-G	
				IV A, B	
	#5	5.1, 5.2, 5.3		V A, B	
	#6	6.1, 6.2, 6.3		VI B, C	
	#5		NURS 499	V	Seminar is usually on graduate school format. Students refine their professional development plan, vitae and compare their accomplishments to the professional standards of ANA.

EVALUATION PLAN

*Developed in collaboration with University, College		LEVEL I			
*Evaluation plan collects, analyzes data and contributes to replanning	#1	1.3	NURS 324	II A, B	Evaluation is an important aspect of nursing process and contributes to replanning
	#3	3.5		III A B	
	#4	4.4	NURS 330	III A	Evaluation of returning to school plan.
		LEVEL II			
	#1	1.3	NURS 416	III E, F	Development of evaluation criteria for community of need plan. An evaluation exists for the curriculum and data is used for replanning.
	#3	3.5			
	#4	4.4			
	#1	1.3	NURS 476	III H	

Philosophy	Terminal Objectives	Level Objectives	Nursing Course	Course Objectives	Learning Experience
	#3	3.5		V A, B	
	#4	4.4		VI B, C	

**PROFESSIONAL DEVELOPMENT
AND SERVICE**

Philosophy	Terminal Objectives	Level Objectives	Nursing Course	Course Objectives	Learning Experience
*Students are stimulated toward continuing professional development		**LEVEL I**			
*Professional and community service	#4	4.5	NURS 324	I A	
*Developed through guided experiences				IV D	
*Faculty model behaviaors				V C	
	#5	5.1, 5.2, 5.3			
		LEVEL II			
		4.5	NURS 416	V A, B	Students participate in their own professional development and community service while in the BSN program.
		5.1, 5.2, 5.3			
		4.5	NURS 499	V A, B	
		5.1			
		5.2			Students complete a professional development plan in the nursing program. The community service requirement is a rpogram requirement. The seminar in nursing class requires the student to update their resume and their professional development plan.

APPENDIX O

BSN Advising Worksheet

FERRIS STATE UNIVERSITY
DEPARTMENT OF NURSING

BSN ADVISING WORKSHEET

Student Name _____

Phone _____

Student No. _____

Advisor _____

FSU Admission	Level I	Level II

FSU Admission

General Education Requirements:

	GR	CR	CR
ENGL 150	___	3	___
ENGL 250	___	3	___
COMM 105	___	3	___
OR COMM 121			
OR COMM 205			
BIOL 205	___	5	___
BIOL 108	___	3	___
CHEM 114	___	4	___
SOCY 121 or			
PLSC elec.	___	3	___
PSYC 150	___	3	___
Total		27	

Nursing Requirement:

NURS. Cred.	36
Total	63

Level I

Nursing Bridging Courses:

	GR	CR	CR
Theory			
NURS 324	___	4	___
NURS 344	___	4	___
Clinical:			
NURS 330	___	2	___
NURS 331	___	5	___
Total		15	

General Education Courses:

PSYC 310	___	3	___
CHEM 124	___	3	___
ANTH 122	___	3	___
BIOL 308	___	3	___
BIOL 300	___	3	___
ENGL 321	___	3	___
Total		18	

Level I Complete _____

Satisfactory completion Level I courses required for admission to Level II.

Level II

Nursing Courses:

	GR	CR	CR
NURS 416	___	6	___
NURS 476	___	6	___
NURS 499	___	3	___
Total		15	

General Education Courses:

HUMN 220 or HUMN 320	___	3	___
Total		3	

Cult. Enrich. Elect.	___	3	___
Cult. Enrich. Elect.	___	3	___
Free Elect.	___	3	___
Total		9	

MATH 115 _____

_____ ACT> 23

_____ Prof. Test
Community Service

_____ _____ _____

Level II Complete

_____

GRAD CLEARANCE FORM COMPLETE _____

MUST HAVE A MINIMUM OF 120 CREDITS TO GRADUATE

APPENDIX P

**Department of Nursing Unit Action Plan
Annual Report 1996-97**

GOAL 1.	To Produce Graduates Immediately Employable

The Department of Nursing will prepare competent graduates for entry level positions in technical or professional nursing.

MAJOR ACTIVITIES AND PROCESSES

- The Advisory Committee, composed of representatives of a variety of health care agencies and program graduates, will meet twice per year.
- Program graduates and employers will be surveyed.
- Evaluation of the program on a continual basis with restructuring as needed.
- Technical (ADN) only - Monitor level of performance on the Licensure examination.
- Plan clinical experiences designed to be congruent with the anticipated employment opportunities of graduates.
- Maintain State Board of Nursing approval (AND) and National League for Nursing accreditation (BSN).

EXPECTED OUTCOMES

- At least 90% of alumni believe they are well prepared for their work role.
- At least 90% of graduates are working in nursing and/or are enrolled in further educational endeavors.
- At least 90% of employers express satisfaction with new graduates from Ferris.
- Implementation of course and program improvements such as critical thinking, or distance education technology each year.
- All Students will gain clinical experience at in-patient and community agencies.

INDICATORS/SOURCES

- Advisory Committee meeting minutes.
- Department of Nursing meeting minutes.
- Graduate survey sent to each class within 1 year of graduation
- Employer survey sent to employers within 1 year of graduate employment.
- Course, clinical, and instructor evaluations by students.
- Results of State Board of Nursing approval process and National League for Nursing re-accreditation process.
- Course and clinical evaluations done by faculty.
- Student clinical schedules and course objectives.

REPORTING PROCESS

- Department Committees will report to the department faculty as a whole at regularly scheduled faculty meetings.
- Survey results will be discussed at faculty meetings.
- Course /clinical evaluations will be monitored by the Evaluation Committee and reported at faculty meetings.
- Instructor evaluations will be obtained by tenured faculty for their own use.
- Instructor evaluations will be obtained by non-tenured and part-time faculty for their personal review and review by the Department Head.
- Approval and re-accreditation results are reported to the Department of Nursing and may include recommendations for change and improvement which will be incorporated into future evaluation processes.

RESOURCE REQUIREMENTS

- There will be minimal cost for sending out surveys and duplicating evaluation forms.
- National League for Nursing accreditation costs approximately $8000.00 every 8 years plus annual membership of $1600.00 with the next accreditation year being 1997.

GOAL 2.	Enhance diversity among students and faculty

The Department of Nursing will enhance diversity in the student population, among faculty members, in classroom and clinical experiences and in curricular content.

MAJOR ACTIVITIES AND PROCESSES

- Focus on minority recruitment and retention among students and faculty.
- Seek out and plan culturally enriching experiences for students, staff, and faculty.
- Include cultural awareness and diversity training in nursing courses.

EXPECTED OUTCOMES

- Increase minority enrollment by 5% and minority graduation rate by 2.5%.
- Involvement in 2 culturally enriching experiences outside the classroom for faculty each year.
- All nursing courses will include content in cultural diversity.

INDICATORS/SOURCES

- Institutional data.
- Faculty meeting minutes.
- Course syllabi.
- Faculty travel records.

REPORTING PROCESS

- Discussed by department faculty and replanning as needed.

RESOURCE REQUIREMENTS

Variable amounts to support attendance at workshops and cultural events with personal, departmental, and faculty development funds.

GOAL 3.	Keeping programs responsive to change
Increase the diversity of departmental offerings to serve additional employers and students.	

MAJOR ACTIVITIES AND PROCESSES

- Collaborate with Gerholz Institute of Lifelong Learning, other health care agencies, and other educational entities to explore opportunities for new offerings, programs, and clinical experiences.
- Expand offering format to include new technology including distance education technology and use of computers.
- Collaborate with other departments in the CAHS and in other FSU Colleges to expand offerings.

EXPECTED OUTCOMES

- Incorporate one new scheduling option, offering, or format annually.

INDICATORS/SOURCES

- University data.

REPORTING PROCESS

- Discussed in departmental meeting and reported to the Dean.

RESOURCE REQUIREMENTS

- Variable depending on opportunities.

GOAL 4.	High standards of performance and professional growth
Facilitate faculty and staff development.	

MAJOR ACTIVITIES AND PROCESSES

- Department of Nursing Faculty Development Committee will plan development activities.
- Faculty and staff will attend on and off campus developmental activities.
- Faculty and staff will enroll in advanced formal education.
- Personnel will write grants, publish, be involved in research, and/or sponsor a workshop.
- Personnel will maintain membership in professional nursing organizations.
- Faculty will volunteer time in the Nursing Center and/or seek additional methods for maintaining current skills.

EXPECTED OUTCOMES

- Each faculty member will attend one departmental development activity.
- All full time faculty will attend one off-campus workshop, seminar, professional organizational meeting annually.
- Departmental personnel will write one grant and publish, complete research, or sponsor a workshop annually.
- All faculty members will maintain current skill in nursing.

INDICATORS/SOURCES

- Departmental records.
- Committee records.
- Faculty personnel records.
- Nursing Center records.

REPORTING PROCESS

- Discussed in departmental meetings.
- Notification of the Dean.
- University data.

RESOURCE REQUIREMENTS

- Varies with the activities.

DEPARTMENT OF NURSING
ANNUAL REPORT
1996-97

The annual report of the Department of Nursing is based on the Fiscal Year 1997 Unit Action Plan.

Goal 1. The Department of Nursing will seek improved marketing and recruitment strategies while continuing to enhance retention practices.

During this year over 15 Health Occupations students have met the criteria for admission into the ADN program in Fall 1997. The Department Head has met with Health Occupations instructors and faculty release time has been allocated to revising the nursing skills course to better accommodate Health Occupations students who have learned basic skills and are Certified Nurse Aids. Approximately 30 hours of laboratory time can be omitted by these students and their skills will be verified in the clinical portion of the course.

The Nursing Advisory Committee has met twice during 1996-97. During these meetings changes in the health care system have been noted and employment opportunities discussed for both ADN and BSN graduates. In addition, the conduct of clinical experiences and the facilities for experiences have been reviewed to assure currency.

Identifying and arranging for course tutors has been difficult as those who are qualified as course tutors are often in the BSN program and are also working or commuting. They have neither the time nor the resources to work in this way. However, Structured Learning Assistance for the NURS 222 Advanced Medical-Surgical Nursing course was arranged in 97W. The formal evaluation of that experience is not completed but faculty felt that assistance given to students was beneficial and additional SLA sections are scheduled for Summer and Fall.

Expected Outcomes:
Applications to the nursing programs have not varied from current levels.

Graduation rates in both the ADN program and the BSN program exceed the expected outcomes of 90% for the ADN program and 70% for the BSN program.

Over 15% of the ADN cohort is gender and racially diverse and the graduation rate of these students will exceed the 10% projected. The BSN program is not gender and racially diverse at the 15% level yet the graduation rate for the diverse students who are enrolled is over the 70% graduation rate expected overall.

1997-98 GOALS:

Continue to seek opportunities to enhance diversity in the BSN program.
Continue to evaluate SLA and other student support systems.
Ongoing evaluation of the ADN curriculum for appropriateness for the students we admit.

Goal 2: The Department of Nursing will prepare competent graduates for entry level positions in technical or professional nursing and will seek opportunities for new program development.

Program graduates and employers have been surveyed and the data gathered has been evaluated by the faculty and used in the process of program evaluation and planning. Graduates and employers have indicated that graduates generally are well or very well prepared for their work role. All graduates are working in nursing and/or are enrolled in further educational endeavors.

The level of performance on the NCLEX-RN is below an acceptable level of performance according to the State Board criteria and according to expected outcomes. Efforts to improve the performance include SLA classes, a planned on-campus review at the end of 97W semester, stricter adherence to performance standards for currently enrolled students, a review of the progression policy for pre-nursing students, and an end of semester plan for total review of the curriculum by the nursing faculty.

Clinical experiences in both levels of the program are being expanded into community agencies to more effectively prepare graduates for the changed health care system. All ADN students are gaining experience at in-patient and community agencies.

State Board and NLN approval for the program are ongoing with a successful NLN site visit in 97W resulting in a recommendation for an 8 year (maximum) accreditation for the BSN program.

Collaboration with programs in the CAHS and other agencies has been minimal, however, the Department Heads of Nursing and Health Care Systems met with selected faculty members from both departments to explore the possibilities of an add-on certificate program. Also, a nursing faculty member is on the core curriculum planning committee for the CAHS.

In the past year, another class of 20 students was admitted to the clinical sequence of courses in the ADN program.

1997-98 Goals:

Improve level of performance on the NCLEX-RN.
Implement a new program option for ADN in 98W and continue working on BSN program option between Alma and Ludington.
Complete Outcome Assessment/Evaluation process so that useful feedback can be obtained and used to improve program quality.

Goal 3: The Department of Nursing will improve processes to enhance customer service.

A change in personnel supporting the BSN program in the CAHS Dean's office has initiated a revision of the admission process for the BSN program. Admission and

enrollment processes are being revised so that additional steps can be completed at the off-campus sites with less handling of paperwork. BSN student files have been moved to the Department of Nursing and a tracking process is being developed to assure follow-up and improved graduation rates.

SLA courses are encouraged for pre-nursing students to enhance their potential for success. The Nursing Student organization is developing a plan for mentoring beginning students to improve coping and studying skills and to enhance retention.

1997-98 Goals:

Continue to work on SLA and other student support systems.
Complete progression policy for pre-nursing students.
Initiate a tracking system for BSN students to assure completion of all general education program requirements for graduation and to improve data on graduation rates.
Explore options for adding a clinical coordinator position to assist with planning clinical rotations and coordinating recruitment and retention activities for both ADN and BSN programs.

Goal 4: Improve technology in program delivery by faculty development and technological advancement.

The administration and faculty attended a Critical Thinking Workshop in Chicago in March 1997 in an effort to enhance our ability to teach critical thinking to our students as expected by accrediting agencies and by employers.

Work has been initiated on the distance technology link between Alma and Ludington for BSN classes with an intended start date of Fall 1998.

Several faculty members have taught via distance technology this year.

Many faculty members have attended internet and e-mail classes and seminars offered on campus.

One faculty member attended an update on AIDS Care and Treatment. Three other full time faculty members and one full time temporary faculty member have been enrolled in Doctoral level study.

Faculty have identified new teaching aids and equipment needed for instruction and those items will be ordered in the near future.

1997-98 Goals:

Continue faculty development in Critical Thinking and other areas to enhance technology in care giving and teaching and to maintain current skills in health care.

4/29/97