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Minnesota Alliance for Nursing Education CORE Evaluation Elements

Program Evaluation Core Elements to Meet ACEN and CCNE Accreditation (program data collected annually and maintained continuously over three calendar years)				
Core Evaluation Element	Frequency	Assessment Method	Expected level of achievement for MANE (*Benchmark) ** REA Committee specific	MANE Criteria for Aggregate Data Collection and Evaluation
Program Completion Rate based on program length, beginning with enrollment in the first nursing course. Completion Rate based on numbers of students finishing at the 5 th and 8 th semester benchmarks. All students start at entry point	February and July	Quantitative analysis of graduation rates	150% program length (program starts at 1 st semester of nursing courses, (semester 3) Identify formula used to calculate completion rate. *80% Completion Rate based on numbers of students finishing at the 5 th and 8 th semester benchmarks Upon re-entry students who attain the AD benchmark and stop out will have 150% program length at point of re-entry. *80% Completion Rate based on numbers of students finishing the 8 th semester benchmarks	Program point of entry is the 1 st semester of nursing courses. (semester three) Measure at completion of semester five and semester eight. Need to trend and analyze completion rates of: Students that continue immediately to 6 th semester Students who stop out and return within three years University students who start and complete at a university Analyze difference in LPN student completion rates.
Progression Rate based on numbers of students continuing to MANE upper division nursing courses (semester 6). Progression includes students who enter 6 th semester within 3 years of completing the 5 th semester benchmark.	February and July	Quantitative analysis per cohort of numbers of students progressing to upper division coursework	Entry point is the 1 st semester of nursing courses (3rd semester) at each college or university. *70% of students will progress to MANE upper division coursework. 70% or higher students will progress to the MANE BSN at the 8 th semester benchmark.	 Progression rates includes: Students who progress immediately. Students who delay progression for one, two, and three years. LPN student progression rates. MN State progression rate is 41% 2013 data (MN BON annual report, 2014).

Benchmark Surveys	End of 5 th and 8 th semesters and at any benchmark, exit point by a student.	Quantitative and/or qualitative analysis of reason for exit from program and perceptions of program quality for formative evaluation for program improvement.	Data from surveys will be used annually for program improvement with attention to 5 th and 8 th semester benchmarks. **REA to create the survey to ensure questions are relevant to program improvement.	For example, include questions regarding preparation for upper division nursing courses at end of semester 8. As applicable, include reasons for exit prior to completion of a benchmark.
NCLEX-RN Pass Rate	Bi-annually by cohort	Quantitative analysis of NCLEX pass rates	For ACEN at or above the three-year mean will be at or above the national mean for the same three-year period. For CCNE 80% or higher	Review quarterly BON reports with faculty – document in meeting minutes If a student takes the exam and fails at the 5 th semester benchmark and chooses not to retake until after the 8 th semester benchmark the student is considered a repeat and not a first time taker. First time test takers any time prior to the completion of the eighth semester will be considered community college test takers. First time test takers at completion of the 8 th semester will be considered university test takers. Trend all student test takers for completion of fifth semester through completion of eighth semester. Initiate discussion with the MBN regarding reporting of pass rate data.

Employer Program Satisfaction	At least annually Within 6-12 months following the **5 th and 8 th semester benchmark.	Quantitative and/or qualitative analysis of measures based on employee competency on PSLO's benchmarked appropriately (5 th and 8 th semester benchmarks)	At least 80% of the respondents will report satisfaction with employee performance on PSLO's and adequacy and effectiveness of the program. **REA to create the survey for the PSLO's and determine the scale specifying satisfaction as an option. **REA to create a focus group template for use in obtaining qualitative data from employers.	To optimize data that can be used for program improvement alternative methods of data collection will be utilized. For example, telephone follow-up. **Only pertains to students who are employed as an RN after the 5 th semester benchmark.
Alumni/ Graduate Program Satisfaction	At least annually Within 6-12 months following the 5 th and 8 th semester benchmark	Quantitative and/or qualitative analysis of measures benchmarked at the 5 th and 8 th semester PSLO's	At least 80% of the respondents will report satisfaction with the program. **REA will create the survey and determine the scale specifying satisfaction as an option.	To optimize data that can be used for program improvement alternative methods of data collection will be utilized. For example, telephone follow-up.
Alumni/Graduate Employment Rate (job placement rates)	At least annually	Quantitative analysis of employment data collected within 12 months of program completion at the AS 5 th semester benchmark and at the BSN 8 th semester benchmark.	Of the graduates who are available for employment. ACEN: Needs to be at or above national range. CCNE: Employment rate is 70% or greater. If less than 70%, the employment rate is 70% or greater when excluding graduates who have chosen not to be employed. Use MnSCU employment survey, which targets an 85% return rate.	Data obtained within 12 months of graduation. Current national range is 84 – 96% (ACEN 2013 report to constituents).

			**REA to create a survey with questions regarding employment status based on			
			continuing on to 6 th semester (further education in nursing). Include questions regarding licensure status, choice of			
			employment and further education.			
CCNE: Faculty Outcomes ACEN: Faculty maintains	Annually	Summary of individual and aggregate accomplishments.	100% of faculty members will demonstrate expertise in their area(s) of responsibility and evidence-based teaching and clinical practice.	CCNE: Faculty accomplishments are reported and analyzed for effectiveness towards program outcomes. Analysis includes Individual and aggregate data on service,		
expertise		Qualitative analysis of individual and aggregate faculty expertise and	**REA to create a survey collecting faculty feedback regarding perception of	teaching, scholarship and practice. Faculty maintains licensure. ACEN: Expertise in areas of responsibility and		
		accomplishments, contribute to program effectiveness within the MANE paradigm.	preparedness for teaching within a concept- based curriculum and participation in professional development opportunities.	their performance reflects scholarship, and evidence-based teaching and clinical practices. Faculty maintains current licensure.		
Formal Student Complaints regarding MANE core policies and procedures.	Annually	Analysis of formal complaints regarding MANE core policies and procedures, and	100% of formal complaints will demonstrate resolution. 100% of students are informed of due process.	Examples of core policies: Admission policy and procedures, Readmission, Progression Policy.		
		qualitative analysis of complaint resolution.	•			
	MANE Specific Evaluation Criteria Related to Diversity Goals					
Core Element	Frequency	Assessment Method	Expected level of achievement for MANE (*Benchmark)	MANE Criteria for Aggregate Data Collection and Evaluation		
Percent of diversity within the accepted cohorts student population	February and July	Quantitative analysis of aggregate demographics of accepted cohorts each fall and spring admission	Ethnic and racial diversity of students accepted to MANE will increase annually.	Diversity benchmark for cohort demographics is fall 2014. Compare changes in diversity of the student cohorts with implementation of the MANE diversity plan.		
Retention Rates by Race/Ethnicity of student population	Each semester	Quantitative analysis per cohort of numbers of racial and ethnically diverse students progressing to upper	Entry point is the 1 st semester of nursing courses at each college or university (semester 3). *70% of students will progress to MANE	Compare changes in diversity of the student cohorts with implementation of the MANE diversity plan. Progression rates includes: Students who progress immediately.		

		division coursework	upper division coursework.	Students who delay progression for one, two, and three years.
			*70% or higher students will progress to the MANE BSN at the 8 th semester benchmark.	LPN student progression rates.
				MN State progression rate is 41% 2013 data (MN BON annual report, 2014).
				Will look for additional sources of evidence for progression rates of racially and ethnically diverse nursing students.
Graduation/Program Completion Rate by Race/Ethnicity of student population	February and July	Quantitative analysis of graduation rates of racially and ethnically diverse students	150% program length (program starts at 1 st semester of nursing courses, semester 3) Identify formula used to calculate completion rate. *80% Completion Rate based on numbers of students finishing at the 5 th and 8 th semester benchmarks Upon re-entry students who attain the AD benchmark and stop out will have 150% program length at point of re-entry. *80% Completion Rate based on numbers of students finishing the 8 th semester benchmarks	Program point of entry is the 1 st semester of nursing courses, (semester 3). Measure at completion of semester five and semester eight. Need to trend and analyze completion rates of: Students that continue immediately to 6 th semester Students who stop out and return within three years University students who start and complete at a university Analyze difference in LPN student completion rates.