### Standard I. MISSION & GOVERNANCE

#### 1A: SON mission, goals, and expected student outcomes
- **Initiated By:** Dean, Senior Administrative Leadership Team (SALT)
- **Expected Outcome:** Consistency with professional nursing standards, and congruency with UR and URMC strategic goals.
- **Assessment Frequency:** Every 4 - 5 years
- **Evaluation Methods:** Strategic planning process
- **Use of Findings/Action:** Self-study and strategic goal-setting
- **Documented Evidence of Use of Findings:** URSON Strategic Plans; 2007-2012 and 2013-2018 (Dean's Office; Office of Evaluation; 2013-2018 online)

#### 1B: SON mission, goals, and expected student outcomes are reviewed periodically and revised, as appropriate, to reflect professional nursing standards and guidelines and the needs and expectations of the community of interest.

**1B1. Records of registration and accreditation of SON degree programs**
- **Initiated By:** Associate Dean (AD) for Academic Affairs; Program Directors
- **Expected Outcome:** Compliance with professional accreditation standards and NYS Education Department requirements, including incorporation of required professional standards:
  - For Baccalaureate programs - The Essentials of Baccalaureate Education for Professional Nursing Practice (AACN, 2008);
  - For Master's programs - The Essentials of Master's Education for Advanced Practice Nursing (AACN, 1996); and for Nurse Practitioner programs - Criteria for Evaluation of Nurse Practitioner Programs (NTF, 2008).
  - For DNP Program - The Essentials of Doctoral Education for Advanced Nursing Practice (AACN 2006)
- **Assessment Frequency:** Every 4 years and/or as prescribed by oversight bodies
- **Evaluation Methods:** Self-assessment and documentation of compliance with accreditation standards and with state education department requirements
- **Use of Findings/Action:** Curriculum revision
- **Documented Evidence of Use of Findings:** Self-study and regulatory body reports (Office of the Associate Dean for Education and Student Affairs)

**1B2. Community of Interest (preceptors, students, advisory groups, employers, program interest groups)**
- **Initiated By:** Dean; Senior Administrative Leadership Team (SALT)
- **Expected Outcome:** Responsiveness to needs and expectations of the community of interest
- **Assessment Frequency:** Annually and as needed
- **Evaluation Methods:** Advisory Groups, Course Evaluations, Surveys, Program Evaluations
- **Use of Findings/Action:** Program development and revisions
- **Documented Evidence of Use of Findings:** Advisory Group Minutes, Trended Course Evaluations, Survey Reports, Quinquennial Program Reports

### 1C: Expected faculty outcomes in teaching, scholarship, service, and practice are congruent with mission, goals and expected student outcomes.

**1C1. Teaching, Scholarship and Practice**
- **Initiated By:** Dean and Associate Deans
- **Expected Outcome:** Faculty roles are congruent with mission, goals and expected student outcomes
- **Assessment Frequency:** Ongoing
- **Evaluation Methods:** Annual Performance Review, Review of Faculty CV's
- **Use of Findings/Action:** Ongoing recruitment and retention of faculty
- **Documented Evidence of Use of Findings:** Performance Evaluations, Search Committee Minutes
### 1D: Faculty and students participate in program governance.

<table>
<thead>
<tr>
<th>Key Element &amp; Program Component</th>
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</tr>
</thead>
<tbody>
<tr>
<td><strong>1D1. Faculty participation</strong></td>
<td>Dean;</td>
<td>Use of established mechanisms to ensure appropriate representation and participation of faculty in university and SON governance. A majority of qualified primary SON faculty will be on university and/or SON committees and subcommittees.</td>
<td>Annually; Ongoing</td>
<td>Review of SON university-wide representation and committee membership, annual evaluation of faculty service. Organizational Behavior Survey - faculty: Mean scores will be &gt; 3.5.</td>
<td>Faculty elections as a function of the Faculty Governance Committee and in accordance with SON Bylaws. Faculty Senate elections in accordance with the UR Faculty Senate Charter. Feedback to faculty development of action plans for lower scored survey items.</td>
<td>Committee membership lists (Faculty Senate, UR/URMC committees, SON committees); Faculty evaluations and CVs; Trended OBS faculty results.</td>
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<tr>
<td>(Full-time &amp; Part-time)</td>
<td>Faculty Governance Committee; UR Senate</td>
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<tr>
<td><strong>1D2. Student participation</strong></td>
<td>Student Organizations; Dean; Program Directors</td>
<td>Student representation on designated standing committees (Curriculum and Student Affairs) and all program subcommittees. Presence of active student organizations.</td>
<td>Annually; Ongoing</td>
<td>Review of committee membership</td>
<td>Elections as a function of Student Nursing Assembly and PhD Student Forum and in accordance with SON Bylaws. Appointments and requests by Dean, Program Directors or faculty advisors.</td>
<td>Committee membership lists; Student organization minutes/event flyers of activities.</td>
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<tr>
<td>(Student Nurses Assn, Sigma Theta Tau, PhD Student Forum)</td>
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<td><strong>1D3. Staff participation</strong></td>
<td>Office of Evaluation</td>
<td>Staff involved in programming and SON functions.</td>
<td>Annually; Ongoing</td>
<td>Organizational Behavior Survey - staff: Mean scores will be &lt; 3.5. Review membership of Dean’s Advisory Cultural Diversity Committee</td>
<td>Feedback to staff. Development of action plans for lower scored survey items. Appointment by SON Cultural Diversity Officer.</td>
<td>Trended OBS staff results; Advisory Council Book</td>
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### 1E: Documents and publications are accurate.

<table>
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<tr>
<td><strong>1E. Accuracy of information in all published materials</strong></td>
<td>AD for Education and Student Affairs; AD for Administration and Finance; Office of Student Affairs; Senior Administration Leaders Team (SALT)</td>
<td>Accuracy of information contained in handbooks, websites and published materials.</td>
<td>Annually; Ongoing</td>
<td>Audit review of SON materials (handbooks, catalogs, brochures, and website)</td>
<td>Updating and revision of materials as necessary</td>
<td>SON published and online materials</td>
</tr>
</tbody>
</table>

### 1F: Academic policies of the university and nursing program are congruent and support the achievement of the program's mission, goals and expected student outcomes. These policies are fair, equitable, and published and are reviewed and revised as necessary to foster program improvement these policies include, but are not limited to, those related to student recruitment, admission, retention and progression.
1F. SON policies and procedures
- AD for Education and Student Affairs
- AD for Administration and Finance
- Office of Student Affairs
- Congruency with UR and URMC policies and procedures.
  All SON policies are accessible to students, faculty, and staff.
- Annually
  - Comparison of SON policies, as outlined in faculty and student handbooks, with UR/URMC policies
  - Review accuracy and currency of SON Bylaws, policies, and procedures by responsible administrators and committee chairs
  - Review university employee policies
  - Updating and revision of handbooks as necessary as indicated
- Bylaws
- Congruency Reports (Student Affairs Office)
- Manuals and online University Policies and Procedures
- Faculty and Student Handbooks (online)
- Faculty Meeting Minutes (Blackboard and Office of Evaluation)
- Committee notebooks (Office of Evaluation)

1G: There are established policies by which the nursing unit defines and reviews formal complaints.

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</table>
| 1G. Program policies & procedures |AD of Education and Student Affairs
  +Administrative Assistant to the AD
  +Students +Faculty |Policies and procedures are in place and address student complaints |Ongoing |Review policies
  +Review complaint log |Revise policies and procedures as needed |Complaint Log
  +Student/Faculty handbooks |

Standard II. INSTITUTIONAL COMMITMENT & RESOURCES

2A: Fiscal and physical resources are sufficient to enable the program to fulfill its mission, goals and expected outcomes. Adequacy of resources is reviewed periodically, and resources are modified as needed.
### 2A. Fiscal and Physical Resources

- **Resources are sufficient for successful school and program outcomes**

<table>
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<tr>
<td>Dean; + Associate Deans</td>
<td>Resources are sufficient for successful school and program outcomes</td>
<td>Ongoing</td>
<td>Review of course summaries +Review of 3-year program reports +Assess library holdings and resources +ITS inventory +Assess CERC &amp; CSET lab needs +Assess office space (offices, research and classrooms)</td>
<td>Modify/increase resources as needed</td>
<td>Individual course summaries; +Budget reports (IT, CERC, Education, Research)</td>
</tr>
</tbody>
</table>

#### 2B. Academic Support Services

- **Academic support services are accessible and available to meet student needs**

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<tr>
<td>AD for Education and Student Affairs +CERC Administrator +Director of Student Affairs Office</td>
<td>Academic support services are accessible and available to meet student needs</td>
<td>Ongoing</td>
<td>Assess library holdings and resources +Review/update all handbooks +Review/revise policies</td>
<td>Develop/Implement new policies and create new positions and/or job repositioning</td>
<td>Student Handbooks +University Bulletin +Financial Aid position +Writing Tutor +Student Nurse Assoc. +Safety &amp; Security Bulletin +Discrimination &amp; Harassment Book</td>
</tr>
</tbody>
</table>

#### 2C. Dean’s Qualifications and Leadership

- **The Dean is fully qualified to sufficiently facilitate school operations**

<table>
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<tbody>
<tr>
<td>UR President +Vice Provost</td>
<td>The Dean is fully qualified to sufficiently facilitate school operations</td>
<td>Initial appointment +Reappointment review +Self Evaluation +Review/revise policies +Periodic reviews from President and Vice Provost</td>
<td>Promote visibility and advance mission of the school</td>
<td>Letter of appointment from President +Recognitions and Awards (CVs)</td>
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#### 2D. Faculty Qualifications

- **Qualifications adhere to program requirements and SON mission and goals**

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<tbody>
<tr>
<td>Dean +Associate Deans</td>
<td>Qualifications adhere to program requirements and SON mission and goals</td>
<td>Annual</td>
<td>Review of CV +References +Interviews and presentations</td>
<td>Increase/Modify faculty appointments based upon programs/resource needs</td>
<td>Search Committee minutes +Faculty CV’s</td>
</tr>
</tbody>
</table>

#### 2D2. Faculty Numbers

- **Numbers are appropriate to meet school and program goals**

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<tr>
<td>Dean +Associate Deans</td>
<td>Numbers are appropriate to meet school and program goals</td>
<td>Annual</td>
<td>Course assignments +Review of faculty workload (including research, practice and education)</td>
<td>Workload books</td>
<td></td>
</tr>
</tbody>
</table>

#### 2E: Preceptor Qualifications

- **Qualifications meet expected roles**

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<tbody>
<tr>
<td>Associate Dean for Academic Affairs</td>
<td>Qualifications meet expected roles</td>
<td>Each semester</td>
<td>Preceptor CV’s +Preceptor evaluations</td>
<td>Ensure qualified preceptors of clinical experiences</td>
<td>Preceptor files</td>
</tr>
</tbody>
</table>

#### 2F: The university and SON provide and support an environment that encourages faculty teaching, scholarship, service, and practice in keeping with the mission, goals and expected faculty outcomes.
### 2F. Environment

- **Dean**
- **Associate Deans**
- **Program Directors**

Environment encourages teaching, scholarship and practice.

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#### Standard III: CURRICULUM TEACHING-LEARNING PRACTICES & INDIVIDUAL STUDENT LEARNING OUTCOMES.

**3 A:** The curriculum is developed, implemented and revised to reflect clear statements of expected individual student learning outcomes that are congruent with the program's mission, goals and expected student outcomes.

**3 B:** Expected individual student learning outcomes are consistent with the roles for which the program is preparing its graduates. Curricula are developed, implemented, and revised to reflect relevant professional nursing standards and guidelines which are clearly evident within the curriculum, expected individual student learning outcomes and, expected student outcomes.

**3 C:** The curriculum is logically structured to achieve expected individual and aggregate student outcomes.
# SYSTEMATIC EVALUATION PLAN

**Key Element & Program Component** | **Initiated By** | **Expected Outcome** | **Assessment Frequency** | **Evaluation Methods** | **Use of Findings/Action** | **Documented Evidence of Use of Findings**
--- | --- | --- | --- | --- | --- | ---
**3 E: The curriculum and teaching-learning practices consider the needs and expectations of the identified community of interest.**

### 3 D: Teaching-learning practices and environments support the achievement of expected individual student learning outcomes.

#### 3D1. Course related practice
- **Initiated By:** AD for Education and Student Affairs + Program Directors
- **Expected Outcome:** Student learning outcomes are achieved
- **Assessment Frequency:** Ongoing
- **Evaluation Methods:** Quality program improvements
- **Use of Findings/Action:** Content mapping each program
- **Documented Evidence of Use of Findings:** Performance data and comments per program

#### 3D2. Clinical practice site and supervised practice
- **Initiated By:** AD for Education and Student Affairs + Program Directors + Clinical Site/Preceptor Coordinator
- **Expected Outcome:** Sites and practicum are selected and developed to ensure achievement of student learning outcomes
- **Assessment Frequency:** Ongoing
- **Evaluation Methods:** Quality improvements to clinical sites and practicum
- **Use of Findings/Action:** Clinical site contracts + Preceptor database + Faculty Handbook + Faculty Course summaries
- **Documented Evidence of Use of Findings:** Preceptor files + Faculty Handbook + Faculty Course summaries

#### 3D3. Technological competence
- **Initiated By:** All faculty + All students
- **Expected Outcome:** Students, faculty and support staff are competent and have appropriate resources
- **Assessment Frequency:** Ongoing
- **Evaluation Methods:** Continual program/resource improvements
- **Use of Findings/Action:** BlackBoard (Bb) classes - SON & Miner Library - sponsored + Simulation classes + IT equipment inventories
- **Documented Evidence of Use of Findings:** IT equipment inventories + Simulation classes + IT equipment inventories

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**3 E: The curriculum and teaching-learning practices consider the needs and expectations of the identified community of interest.**

#### 3 E: Community of Interest
- **Initiated By:** AD for Education and Student Affairs + Program Directors
- **Expected Outcome:** Community of Interest (COI) is involved in program design, implementation and evaluation
- **Assessment Frequency:** Ongoing + Annual
- **Evaluation Methods:** Review of alumni & employer surveys + Review of Advisory Board/group minutes + Review of CE & TE data and comments + Review of preceptor annual surveys (Preceptor Workshop)
- **Use of Findings/Action:** Ensure that the needs and expectations of our Community of Interest are met.
- **Documented Evidence of Use of Findings:** Alumni & Employer surveys + Trended CE data + Minutes from Advisory Board/groups + Preceptor surveys
### 3 F: Individual student performance is evaluated by the faculty and reflects achievement of expected individual student learning outcomes. Evaluation policies and procedures for individual student performance are defined and consistently applied.

<table>
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</thead>
<tbody>
<tr>
<td>3F1. Evaluation of Student Performance</td>
<td>Course faculty</td>
<td>Student performance is evaluated by faculty</td>
<td>Per semester</td>
<td>Review of academic warnings •Review of evaluation criteria in course syllabi •Review of Clinical Evaluation forms</td>
<td>To ensure achievement of expected outcomes per program</td>
<td>Academic Warning forms •Subcommittee Minutes •Academic Warning forms •Student Affairs Committee Minutes •Student Affairs Committee Minutes •Student Files</td>
</tr>
<tr>
<td>3F2. Evaluation of Student Policies</td>
<td>AD for Education and Student Affairs •Student Affairs Committee</td>
<td>Evaluation policies are defined and consistent</td>
<td>•Annual •Ongoing</td>
<td>Review of student and handbook policies</td>
<td>Update/revise policies as indicated</td>
<td>Student handbook •Student Affairs Committee minutes/ notebook</td>
</tr>
<tr>
<td>3G: Curriculum and teaching-learning practices are evaluated at regularly scheduled intervals to foster ongoing improvement.</td>
<td>Undergraduate (UG) Graduate (G) Program Directors</td>
<td>Regularly scheduled program examinations</td>
<td>•Formative •Per semester •3-year comprehensive program reviews</td>
<td>Review of CE and TE data •Quinquennial report reviews</td>
<td>Program revisions and development</td>
<td>CE &amp; TE data •5-year comprehensive program reviews •Undergraduate &amp; Graduate Subcommittee reports/notebook</td>
</tr>
</tbody>
</table>

### Key: Standards

- **4 A:** Surveys and other data sources are used to collect information about student, alumni and employer satisfaction and demonstrated achievements of graduates.
- **4 B:** Aggregate student outcome data are analyzed and compared with expected student outcomes.
- **4 C:** Aggregate student outcome data provide evidence of the program's effectiveness in achieving its mission, goals and expected outcomes.
- **4 D:** Aggregate student outcome data are used, as appropriate, to foster ongoing program improvement.

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**Standard IV. AGGREGATE STUDENT PERFORMANCE & FACULTY ACCOMPLISHMENTS**

- **4 A:** Surveys and other data sources are used to collect information about student, alumni and employer satisfaction and demonstrated achievements of graduates.
- **4 D:** Aggregate student outcome data are used, as appropriate, to foster ongoing program improvement.
**Student Outcomes**
- Program Directors
- Director of Evaluation Office
- Student Affairs Office
- NCLEX pass rates
- Graduation and Retention rates
- Comp Exam pass rates
- NP Certification rates
- DNP Qualifying Exam Pass rates
- Program Satisfaction
- Alumni Achievements

**Annual**
- Review of standardized tests (ERI, RN Assessment, Comp Exam, certification exams)
- Review of alumni, employer, and exit surveys
- Review of retention and graduation rates

**Foster ongoing program improvements**
- Trended NCLEX results
- Trended ERI and RN assessments
- Trended Comp Exam results
- Surveys
- Student Handbook, graduation and retention rates
- Trended NP Certification rates
- Trended DNP Qualifying Exam rates

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**4 E: Aggregate faculty outcomes are consistent with and contribute to achievement of the program's mission, goals, and expected student outcomes.**

**4E: Faculty Outcomes**
- Faculty
  - Associate Deans
  - Program Directors
- Faculty accomplishments demonstrate program effectiveness

**Annual**
- Review at annual performance evaluation
- Review of TE and CE data

**To increase teaching effectiveness and scholarly productivity**
- Faculty accomplishments
- Individual TE and CE data
- Faculty CVs
- Research and Scholarship News

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**4 F: Information from formal complaints is used, as appropriate, to foster ongoing program improvement.**

**4F: Program Improvement**
- AD for Education and Student Affairs
- Program Directors
- Formal complaints will foster ongoing improvements

**Annual and as needed**
- Complaint Logs

**Ensure program improvement**
- Complaint Logs