SITE VISIT REPORT
Weber State University
Ogden, UT

Program Type: Master's
Purpose of Visit: Continuing Accreditation

Date of Visit: September 20–22, 2022
Visit Execution: Physically Onsite

Standards and Criteria: 2017

I. GENERAL INFORMATION

Nursing Education Unit
Annie Taylor Dee School of Nursing
3875 Stadium Way
Ogden, UT 84408

Governing Organization
Weber State University
3750 Harrison Boulevard
Ogden, UT 84408

Nurse Administrator
Rieneke Holman, PhD, RN
Chair/Associate Professor
Telephone: (801) 626-6276
Email: rienekeholman@weber.edu

Chief Executive Officer (local governing organization)
Brad Mortensen, PhD
President
Telephone: (801) 626-6000
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State Regulatory Agency Approval Status

Agency:	Utah State Board of Regents (State Board of Higher Education)
Current Status:	Approved

Accreditation Status (program)

Agency:	Accreditation Commission for Education in Nursing
Initial Accreditation:	October 1, 2009
Last Review:	Fall 2014
Outcome:	Continuing Accreditation
Next Review:	Fall 2022

Accreditation Status (governing organization)

Agency:	Northwest Commission on Colleges and Universities
Current Status:	Reaffirmation of Accreditation

II. SITE VISIT INFORMATION

Site Visit Team:

Chairperson Susan Hall, EdD, MSN, RN, CNE Dean Rowan College at South Jersey Email: shall@rcsj.edu	Member Anna Hamrick, DNP, FNP-C Associate Director Gardner-Webb University Email: ashamrick@gardner-webb.edu
Member Jennifer DiBenedetto PhD, RN-BC Assistant Professor Regis College Email: jennifer.dibenedetto@regiscollege.edu	

Program Demographics:

Students:	Nursing Student Enrollment:	Nursing Students Interviewed:
Total Number:	**36**	**29**
MSN – Nurse Educator	**20**	**18**
MSN – Nurse Executive	**15**	**11**
Post Masters Certificate – Nurse Educator	**1**	**0**
Post Masters Certificate – Nurse Executive	**0**	**0**

Program Options:

Name of Program Option:	MSN Education Track
Uses Distance Education:	Yes
Online Courses Offered:	All nursing courses include distance education.
Official Published Program of Study:	Full-time
Academic Term Type:	Semesters

Name of Program Option:	MSN Executive Track
Uses Distance Education:	Yes
Online Courses Offered:	All nursing courses include distance education.
Official Published Program of Study:	Full-time
Academic Term Type:	Semesters

Name of Program Option:	Post Masters Certificate Education Track
Uses Distance Education:	Yes
Online Courses Offered:	All nursing courses include distance education.
Official Published Program of Study:	Full-time
Academic Term Type:	Semesters

Name of Program Option:	Post Masters certificate Executive Track
Uses Distance Education:	Yes
Online Courses Offered:	All nursing courses include distance education.
Official Published Program of Study:	Full-time
Academic Term Type:	Semesters

Additional Locations:

While Weber State University (WSU) does have multiple additional locations (WSU Davis Campus, Bridgerland Technical College Campus, Ogden/Weber Technical College Campus, and Davis Technical College Campus), the master's nursing program is offered 100% online.

Third-Party Comments:
The nursing education unit had a reasonable process for soliciting third-party comments. Methods used to announce the accreditation visit to the program's communities of interest included announcements on the nursing website as well as through the students' learning management system.

There were nine attendees at the public meeting. The public meeting was held via zoom. There were a variety of representatives in attendance. Roles identified by attendees included alumni, preceptors, advisory members, former WSU nursing program employees, and a school district employee. When asked if program outcomes were shared, two advisory members confirmed that graduation and job placements were shared annually. The preceptors stated the students were well-prepared and many secured positions upon graduation. The school district employee reported a positive collaboration to assist high school students in identifying a nursing pathway and becoming successful. There was consensus on the importance of the WSU's contribution to the community of health care providers. This was said to be attributed to the college administration, faculty, and students.

Written third-party comments were not received by the ACEN.

Introduction:
WSU's nursing program offers the Associate degree, RN-to-BSN, second degree BSN, Masters, and DNP programs. The focus of the site visit was continuing accreditation of the MSN program. The program offers an executive and educational track. There is a post-master's certificate track for the executive and educational concentrations as well.

The program is offered online and is full-time. The student interviews confirmed the program of choice due to affordability and concentrated course of study. Interviews with public constituents confirm the value and importance of the program to the community.

III. CLASSROOM AND CLINICAL MEETINGS

Classroom/Laboratory Observation #1

Course Prefix, Number, and Title:	NURSG 6810
Method of Course Delivery:	100% Distance Education
Observation Method:	Virtual via Recorded Lecture
Faculty Name and Credentials:	Kelly Trump, DNP, RN
Number of Students in Attendance:	35 asynchronous

Classroom/Laboratory Observation #2

Course Prefix, Number, and Title:	NSRG 6520
Method of Course Delivery:	100% Distance Education
Observation Method:	Virtual via Recorded Lecture
Faculty Name and Credentials:	Tamare Berghout, EdD, MSN, RN
Number of Students in Attendance:	21

IV. EVALUATION OF THE STANDARDS AND CRITERIA

STANDARD 1
Mission and Administrative Capacity

The mission of the nursing education unit reflects the governing organization's core values and is congruent with its mission/goals. The governing organization and program have administrative capacity resulting in effective delivery of the nursing program and achievement of identified program outcomes.

1.1   The mission and philosophy of the nursing education unit are congruent with the core values, mission, and goals of the governing organization.

☒   The peer evaluators verified evidence to support compliance with this Criterion.
☐   The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.
☐   The peer evaluators could not verify evidence to support compliance with this Criterion.

The SSR (p. 12) identifies the congruence as the collaboration and connection between students, faculty, peers, and the community. The stackable credential in each program allows for a pathway of professional nursing attainment. The administrative council reports (SSR, p. 12) ongoing assessment of the effectiveness of the organizational structure based on experiences and information feedback from faculty and administration. Interviews with the university administration confirmed the nursing program goals align with the college mission and vision for educating students. The department Dean elaborated on the alignment of the nursing program goals with other health profession programs.

1.2   The governing organization and nursing education unit ensure representation of the nurse administrator and nursing faculty in governance activities; opportunities exist for student representation in governance activities.

☒   The peer evaluators verified evidence to support compliance with this Criterion.
☐   The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.
☐   The peer evaluators could not verify evidence to support compliance with this Criterion.

The nurse administrator serves on the College Executive Committee and the university's General Education Improvement Committee, Assessment and Faculty Senate in addition to nursing department committees. Faculty interviews identify active committee membership for the college and department. Committees specific to the nursing department work collaboratively to ensure end-of-program student learning outcomes (SLOs) are aligned and measured. For example, the Evaluation Committee designs the exit and the program graduate surveys and presents them to faculty for approval. The Testing Committee works with the Curriculum Committee to ensure evaluation tools are effective and measure course outcomes. The SSR (pp. 15–18) documents faculty committee service for the college and department. Faculty interviews confirmed the opportunity to serve at the university and department level was available and they collectively felt their voices were heard and an important part of decision-making.

Students are invited (SSR, p. 14) to be representatives of the School of Nursing (SON). Students are encouraged to complete faculty and course evaluations to allow for feedback to be considered. Student representatives are invited to faculty meetings to address concerns and offer feedback from colleagues. During the student meeting, statements confirmed that students were aware that they could attend faculty meetings and join committees in the department and at the college.

1.3   The assessment of end-of-program student learning outcomes and program outcomes is shared with communities of interest, and the communities of interest have input into program processes and decision-making.

☒   The peer evaluators verified evidence to support compliance with this Criterion.
☐   The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.
☐   The peer evaluators could not verify evidence to support compliance with this Criterion.

The faculty identify the stakeholders as the communities of interest. They include the college, administration, preceptors, staff, students, alumni, Advisory Board, Technical College contractual programs, healthcare professionals, and the community. Also included are healthcare facilities and agencies throughout Utah, and community consumers of healthcare. An example of the advisory committee process is in the SSR (p. 19). The program outcomes, end of program SLOs, and Evaluation Committee reports are presented to the committee bi-annually for feedback and discussion. Evidence of information sharing is documented in the advisory meeting minutes labeled as "1.3.2. Meeting date 2.16.202." Faculty interviews confirmed that the end-of-program SLOs data was shared with the advisory committee; in addition, the data are posted on the website, and in the nursing student handbook, as verified by the peer evaluators.

1.4   Partnerships that exist promote excellence in nursing education, enhance the profession, and benefit the community.

☒   The peer evaluators verified evidence to support compliance with this Criterion.
☐   The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.
☐   The peer evaluators could not verify evidence to support compliance with this Criterion.

Documentation in the SSR (p. 20) and information provided to the peer evaluators, cites partnerships as Intermountain Healthcare, a task force that includes leaders from each university to provide input on meeting the clinical needs of the nursing students in Utah. Clinical site staff support students and serve on the Advisory Board. Utah Organization of Nurses Leaders and Academic Leadership Council communicate with the 25 nursing programs in the state. The program nurse administrator serves as chair of the committee. Utah Action Coalition for Health partners with the program to increase the education level of nurses, develop academic progression models, and increase the diversity of the state's workforce. Faculty interviews confirm an active Sigma Theta Tau Nu chapter (SSR, p. 21) and funding is provided by the chapter to support student initiatives. Lectures from experts provide evidenced based practice updates.

1.5   The nursing education unit is administered by a nurse who holds a graduate degree with a major in nursing and is doctorally prepared.

☒   The peer evaluators verified evidence to support compliance with this Criterion.
☐   The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.
☐   The peer evaluators could not verify evidence to support compliance with this Criterion.

Nurse Administrator Highest Degree and Registered Nurse License
Peer evaluators reviewed and verified the nurse administrator's **transcripts**.
Peer evaluators reviewed and verified the nurse administrator's **licensure**.

The nurse administrator is a registered nurse (RN), holding the academic credentials of a PhD in Nursing with an emphasis in Nursing Education. The Utah Department of Commerce Division of Occupational and Professional Licensing verification website confirms the nurse administrator's unencumbered license. The nurse administrator's transcript was reviewed onsite and confirmed degree conferral. The provost confirmed that the position description for the nurse administrator was created by the dean to support the activities of the nursing program. The position description was submitted via the repository and was reviewed with the nurse administrator onsite.

1.6   The nurse administrator is experientially qualified, meets governing organization and state requirements, and is oriented and mentored to the role.

☒   The peer evaluators verified evidence to support compliance with this Criterion.

☐   The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.

☐   The peer evaluators could not verify evidence to support compliance with this Criterion.

Educational and Experiential Qualification Requirements for the Nurse Administrator Role	
Agency	**Educational and Experiential Qualification Requirements**
Weber State University (WSU)	Holds a doctorate in nursing or an equivalent degree. Holds academic rank or is on tenure/promotion track at Weber State University. The School of Nursing Chair provides leadership in the development of an educational program in accordance with university and college philosophy and objectives. Member of Dumke College of Health Professions, College Executive Committee, and Nursing Administrative Council. Serves on Statewide committees and works with legislature on behalf of the Annie Taylor Dee School of Nursing
Utah System of Higher Education	Not Applicable
Utah Department of Commerce Division of Occupational and Professional Licensing	Not Applicable
A review of the University developed position description was completed. Interviews with the President, Provost and Dean confirmed that the role and responsibilities are developed and supported by the University. A review of the Utah System of Higher Education and Utah Department of Commerce Division of Occupational and Professional Licensing did not document specific criteria for administrators.	

The nurse administrator was trained and mentored by the previous nursing chair through weekly meetings. This was also confirmed by the nurse administrator and the department Dean. Attendance at ACEN and the ACEN Program Administrator Workshop assisted with mentoring (SSR, p. 22). Interviews with the college administration included the president, provost, and dean. All confirmed that the position description of duties and qualifications were determined by the university based on other program chairs and the needs of the department. All parties interviewed reported that there is no regulatory agency that guides the criteria for credentials or guidelines for the development of the position description. An interview with the nurse administrator affirmed the roles and responsibilities and stated that she felt supported by administration and faculty. The nurse administrator reports 100% release time for program duties. This was confirmed by the dean and provost.

1.7   When present, nursing program coordinators and/or faculty who coordinate or lead program options/tracks are academically and experientially qualified.

☒   The peer evaluators verified evidence to support compliance with this Criterion.

☐   The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.

☐   The peer evaluators could not verify evidence to support compliance with this Criterion.

Educational and Experiential Qualification Requirements for the Nursing Program Coordinator Role	
Agency	**Summary of Educational and Experiential Requirements**
WSU	Holds advanced degree in nursing with responsibilities for the overall coordination and management of student clinical/residency experience in graduate programs.
Utah System of Higher Education	Not Applicable
Utah Department of Commerce Division of Occupational and Professional Licensing	Not Applicable
A review of the University developed position description outlines the roles and responsibilities. A review of the Utah State Board of Nursing web site. Onsite review of transcript and position description	

There was no narrative in the SSR. Interviews with the nurse administrator and the program coordinator discussed the workload to be 75% release to time. Roles and responsibilities were reviewed with the university developed position description which was uploaded in the repository. The program coordinator has a DNP, APRN, CPNP, and CNE as well as the experience indicated in the position description, which was verified by peer evaluators. Daily interviews with the program coordinator assisted the peer evaluators with site visit document access, end-of-program SLOs calculations, and program processes.

1.8   The nurse administrator has authority and responsibility for the development and administration of the program and has sufficient time and resources to fulfill the role responsibilities.

☒   The peer evaluators verified evidence to support compliance with this Criterion.
☐   The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.
☐   The peer evaluators could not verify evidence to support compliance with this Criterion.

The SSR documents that the nurse administrator has sufficient time to perform the administrative role with 100% release time. Resources include the dean and SON program chairs (SSR, p. 24). Interviews with the president, provost, and dean reported confidence in the abilities of the nurse administrator for the development and administration of the program. The summation was based on the nurse administrator's experience as ADN program chair and serving in the role of faculty. The nurse administrator has the authority and responsibility for the development and administration of the program, which was validated during interviews with college administration, faculty, and the nurse administrator. When asked about sufficient time, the nurse administrator noted that she has good support to meet the role expectations. The nurse administrator affirmed support for the role from the university administration, program coordinator, faculty, and staff.

1.9   The nurse administrator has the authority to prepare and administer the program budget with faculty input.

☒   The peer evaluators verified evidence to support compliance with this Criterion.
☐   The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.
☐   The peer evaluators could not verify evidence to support compliance with this Criterion.

The budget process (SSR, p. 24) identifies that input and preparation of the budget is done by the program administrator. Faculty may discuss and request resources and professional development activities (SSR, p. 25). Interviews with the president, provost, and dean confirm the nurse administrator's authority and discretion when developing and implementing the budget. The dean elaborated on the process of development of the budget in collaboration with the nurse administrator. If needs arise during the fiscal

year, the line of communication between the nurse administrator and the dean identifies the need and ensures that resources are available. The dean communicates with the provost for immediate needs and budget development. The provost reported that the nursing budget is adjusted as enrollment increases. The SSR (p. 25) identifies that the past three years of faculty survey agree and strongly agree that they have input into the budget distribution of resources at a rate of greater than 70%. Interviews with faculty and the nurse administrator confirmed the budget process, the faculty input process, and the execution of spending. The position description of the nurse administrator identifies the role of budget manager in all aspects of planning, implementing, and spending.

1.10   Policies for nursing faculty and staff are comprehensive, provide for the welfare of faculty and staff, and are consistent with those of the governing organization; differences are justified by the purpose and outcomes of the nursing program.

☒   The peer evaluators verified evidence to support compliance with this Criterion.
☐   The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.
☐   The peer evaluators could not verify evidence to support compliance with this Criterion.

Policies for faculty and staff are noted to be comprehensive. They align with the university policies, and the policies are found on the WSU home page. This has been verified to include policies for faculty regarding tenure, promotion, and general well-being. Policies specific for nursing faculty were as presented in the repository, and they justify the need to protect faculty's health and comply with employee safety established by agency partners. University policies are clear about the criteria required for promotion. Criteria are noted to include an earned doctorate for promotion to full professor. Tenure policies are determined by the faculty senate and are extended to the approved and qualified members of the SON and to those who comply with the minimum criteria. Faculty interviews confirmed the location and ease of access to policies. Discussions about the promotion and tenure process were reviewed and confirmed with faculty serving on the committees or providing mentorship. The university faculty identified the onboarding process, which included a review of university policies, and the mentor provided the nursing specific policies. Faculty discussed their understanding of the 12 contact per semester workload and the limit of volunteer overload. They did confirm that there is no collective bargaining unit to represent faculty.

1.11   Distance education, when utilized, is congruent with the mission of the governing organization and the mission/philosophy of the nursing education unit.

☒   The peer evaluators verified evidence to support compliance with this Criterion.
☐   The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.
☐   The peer evaluators could not verify evidence to support compliance with this Criterion.

Faculty training is completed upon hire and as needed. The learning management system (LMS), Canvas, is part of the annual new employee onboarding program. Interviews with the university president and the Medical Simulation Engineer Nursing Compliance Coordinator validated the importance of the nursing program instructional technology support. A tour of the building, known as the digital district, demonstrated technology resources for faculty to learn, utilize, and share information for student instruction. Faculty interviews confirm excellent support with instructional technology staff and responsiveness for equipment such as extra monitors in the office.

<u>Summary of Compliance:</u>

The master's program is in compliance with Standard 1.

The peer evaluators did not identify areas needing development for Standard 1.

STANDARD 2
Faculty and Staff

Qualified and credentialed faculty are sufficient in number to ensure the achievement of the end-of-program student learning outcomes and program outcomes. Sufficient and qualified staff are available to support the nursing program.

Full- and part-time faculty include those individuals teaching and/or evaluating students in didactic, clinical, and/or laboratory settings.

2.1   Full-time nursing faculty hold educational qualifications and experience as required by the governing organization, the state, and the governing organization's accrediting agency, and are qualified to teach the assigned nursing courses.

☒   The peer evaluators verified evidence to support compliance with this Criterion.
☐   The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.
☐   The peer evaluators could not verify evidence to support compliance with this Criterion.

Educational and Experiential Requirements for the Full-time Faculty Role	
Agency	**Summary of Educational Qualifications and Experience Requirements**
WSU	Experience in teaching, in research or in other qualifying work is required. In addition, the master's degree, from an institution accredited by an institutional accrediting agency that is recognized by the US Secretary of education or the foreign equivalent of such a degree, shall be the minimum degree for appointment to the Assistant Professor rank
Utah State Board of Regents (State Board of Higher Education)	Not Applicable
Utah Department of Commerce Division of Occupational and Professional Licensing	Not Applicable
Northwest Commission on Colleges and Universities	Not Applicable
Peer evaluators reviewed the governing organization's job description, the state agency's regulations, the nursing regulatory agency's regulations, and the governing organization's accrediting agency's policies and/or guidelines. Peer evaluators reviewed and verified full-time faculty transcripts. Peer evaluators reviewed and verified full-time faculty licensure.	

Nursing Faculty Academic Credentials – (Highest Degree Only) – **Shared** – **Full-time**								
	Doctoral		Master's		Baccalaureate		Associate	
Number of Faculty	Nursing	Non-nursing	Nursing	Non-nursing	Nursing	Non-nursing	Nursing	Non-nursing
FT Shared	6		2					

Peer evaluators verified that information in the faculty tables located in the repository is accurate (faculty profile table, revised). Embedded links in the faculty profile table were not accessible therefore the nurse administrator uploaded copies of the linked documents to the repository. There are eight full-time shared faculty members. The SON policy (Appendix 2.1.2) states that to teach in a master's program, the full-time faculty member must possess a master's degree in nursing, with doctorate preferred. The SON policy is consistent with the policy of the governing institution. All eight full-time faculty members possess a minimum of an MSN degree. Six of the full-time shared faculty possess a doctorate degree (DNP, PhD, and EdD). Two full-time faculty meet the minimum level of an MSN degree and are also enrolled in doctoral (DNP) programs.

Peer evaluators completed review of all eight full-time faculty files, facilitated by the SON Office Manager, and verified that the full-time nursing faculty meet the requirements of the university and are experientially qualified to teach the assigned nursing courses. The SSR (p. 28) states that individual curriculum vitae/autobiographical forms and transcript of the highest degree were archived in CastleBranch, software which was confirmed onsite. The three most recent years of performance appraisals archives were verified in university password-protected cloud storage software, Box, as well as the survey tool system, Google Forms

2.2   Part-time nursing faculty hold educational qualifications and experience as required by the governing organization, the state, and the governing organization's accrediting agency, and are qualified to teach the assigned nursing courses.

☒   The peer evaluators verified evidence to support compliance with this Criterion.
☐   The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.
☐   The peer evaluators could not verify evidence to support compliance with this Criterion.

Educational and Experiential Requirements for the Part-time Faculty Role	
Agency	**Summary of Educational Qualifications and Experience Requirements**
WSU	Experience in teaching, in research or in other qualifying work is required. In addition, the master's degree, from an institution accredited by an institutional accrediting agency that is recognized by the US Secretary of education or the foreign equivalent of such a degree, shall be the minimum degree for appointment to the Assistant Professor rank.
Utah State Board of Regents (State Board of Higher Education)	Not Applicable
Utah Department of Commerce Division of Occupational and Professional Licensing	Not Applicable
Northwest Commission on Colleges and Universities	Not Applicable
Peer evaluators reviewed the governing organization's job description, the state agency's regulations, the nursing regulatory agency's regulations, and the governing organization's accrediting agency's policies and/or guidelines. Peer evaluators reviewed and verified part-time faculty transcripts. Peer evaluators reviewed and verified part-time faculty licensure.	

Nursing Faculty Academic Credentials – (Highest Degree Only) – Shared – **Part-time**								
	Doctoral		Master's		Baccalaureate		Associate	
Number of Faculty	Nursing	Non-nursing	Nursing	Non-nursing	Nursing	Non-nursing	Nursing	Non-nursing
PT Shared	2							

Peer evaluators verified that information in the faculty tables located in the repository is accurate (faculty profile table, revised). Embedded links in the faculty profile table were not accessible, therefore the nurse administrator uploaded copies of the linked documents to the repository. Peer evaluators completed review of the two part-time faculty files, facilitated by the SON Office Manager, and verified that the part-time nursing faculty meet the requirements of the university and are experientially qualified to teach the assigned nursing courses. Both part-time faculty members previously held full-time appointments at the university. The SSR (p. 28) states that individual curriculum vitae/autobiographical forms and transcript of the highest degree were archived in CastleBranch, software which was confirmed onsite. The three most recent years of performance appraisals archives were verified in university password-protected cloud storage software, Box, as well as the survey tool system, Google Forms.

2.3   Non-nurse faculty teaching nursing courses hold educational qualifications and experience as required by the governing organization, the state, and the governing organization's accrediting agency, and are qualified to teach the assigned nursing courses.

☒   The peer evaluators verified evidence to support compliance with this Criterion.
☐   The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.
☐   The peer evaluators could not verify evidence to support compliance with this Criterion.

Educational and Experiential Requirements for the Non-Nurse Faculty Role	
Agency	**Summary of Educational Qualifications and Experience Requirements**
Webster State University	Experience in teaching, in research or in other qualifying work is required. In addition, the master's degree, from an institution accredited by an institutional accrediting agency that is recognized by the US Secretary of education or the foreign equivalent of such a degree, shall be the minimum degree for appointment to the Assistant Professor rank.
Utah State Board of Regents (State Board of Higher Education)	Not Applicable
Utah Department of Commerce Division of Occupational and Professional Licensing	Not Applicable
Northwest Commission on Colleges and Universities	Not Applicable
Peer evaluators reviewed the governing organization's job description, the state agency's regulations, the nursing regulatory agency's regulations, and the governing organization's accrediting agency's policies and/or guidelines. Peer evaluators reviewed and verified non-nurse faculty transcripts. Peer evaluators reviewed and verified non-nurse faculty licensure.	

The SON utilizes one non-nursing faculty member in the MSN-Nurse Executive program option. The individual holds full-time faculty appointment in the College of Health Professions (CoHP) as the Program Director for the Health Administration program and possesses the Doctor of Health Administration (DHA) degree. Three Masters of Health Administration (MHA) courses are part of the curriculum for the MSN-Nurse Executive track (faculty profile). Based on review of credentials onsite in the office of the SON Office Manager, as well as faculty interviews, the non-nurse faculty member possesses the academic preparation in health administration as well as work experience in health care administration to be qualified to teach assigned courses.

2.4   Preceptors, when utilized, are academically and experientially qualified, oriented, mentored, and monitored, and have clearly documented roles and responsibilities.

☒   The peer evaluators verified evidence to support compliance with this Criterion.
☐   The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.
☐   The peer evaluators could not verify evidence to support compliance with this Criterion.

Educational and Experiential Requirements for the Preceptor Role	
Agency	**Summary of Educational Qualifications and Experience Requirements**
WSU	N/A. Preceptors requirements are not defined at the level of the governing organization but are defined at the level of the SON.
Utah State Board of Regents (State Board of Higher Education)	Not Applicable
Utah Department of Commerce Division of Occupational and Professional Licensing	Not Applicable
Northwest Commission on Colleges and Universities	Not Applicable
Methods Used to Verify: MSN residency handbook	

Peer evaluators verified that preceptors are utilized in the MSN program as described in SSR (pp. 30–31). Students collaborate with course faculty 1–2 semesters prior to the beginning of the clinical residency to identify experienced preceptors in various educational and leadership settings. The qualifications to serve as a preceptor are established by the SON as outlined in the MSN residency handbook (p. 5). The handbook also provides an orientation to preceptors, outlining expectations of the preceptor and students, and clearly defining the role and contact information for the faculty. In interviews with faculty, preceptors, and students, peer evaluators verified the roles and responsibilities of the preceptor, student, and faculty; the progression toward end-of-program student learning outcomes (SLOs), role specific competencies (RSCs), communication expectations, and preceptor evaluations.

Preceptors do not provide a student grade. The NRSG 6400 Nurse Executive Faculty and Preceptor Residency Assessment and NRSG 6700 Nurse Educator Faculty and Preceptor Residency Assessment (residency handbook, pp. 18–23) are used as tools for faculty to assess student progression toward and achievement of end-of-program SLO and RSC. Faculty hold a midpoint assessment phone call or a virtual meeting with preceptors approximately seven weeks, or 45 hours, into the experience. A final assessment occurs at week 14 or once 90 hours have been completed.

2.5 The number of full-time faculty is sufficient to ensure that the end-of-program student learning outcomes and program outcomes are achieved.

☒   The peer evaluators verified evidence to support compliance with this Criterion.
☐   The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.
☐   The peer evaluators could not verify evidence to support compliance with this Criterion.

Agency Requirements for Faculty-to-Student Ratios	
Agency	**Summary of Agency Requirements for Faculty-to-Student Ratios**
WSU	Not Applicable
Utah State Board of Regents (State Board of Higher Education)	Not Applicable
Utah Department of Commerce Division of Occupational and Professional Licensing	Not Applicable
Peer evaluators reviewed state agency's regulations.	

Faculty-to-Student Ratios at the Time of the Visit	
Academic Setting	**Ratio**
Classroom:	1:24 in core didactic courses; 1:12–15 in didactic writing intensive courses (NRSG 6801 and 6802).
Laboratory:	N/A
Clinical:	1:8 in clinical residency courses (NRSG 6700 or 6560)
Simulation:	N/A
Methods Used to Verify: Review of faculty schedule (Repository: Revised or Requested Information: Fall 2022 SON Faculty Schedule), interviews with faculty and program administrator.	

The governing organization defines the normal teaching load as 24 semester hours per academic year. Overload teaching must be approved by the department chair and the dean. A regular contracted faculty member may teach an overload of maximum of seven credit hours per semester and up to a maximum of 12 credit hours per academic years (two semesters) (WSU PPM No. 4–6). Peer evaluators verified the faculty workload during onsite interviews with the nurse administrator, program chair, and faculty. Faculty workload calculations of the current semester of the visit were analyzed, with only one shared MSN full-time faculty member having a load over 12 hours at 14 hours (Fall 2022 SON faculty schedule). The nurse administrator is granted 12 hours of workload reassignment for administrative duties. The program chair is granted nine hours of workload reassignment for program administrative duties. Faculty oversight of clinical residency (NRSG 6400/6700) and writing intensive project courses (6801/6802) are included in load calculations like didactic courses. Workload verification as well as interviews with students and faculty demonstrated that the number of faculty is sufficient to achieve the end-of-program SLOs and program outcomes.

Faculty-to-student ratio and the course enrollment policy is determined at the level of the SON, not the governing organization. Non-teaching responsibilities of faculty in the MSN program include SON and university committee service. One MSN shared full-time faculty member has a four-hour workload reassignment serving as a "New Faculty Experience Fellow" in the governing organization's Teaching and Learning Forum (TLF), which was verified during interviews and tour of the TLF.

2.6   Faculty (full- and part-time) maintain expertise in their areas of responsibility, and their performance reflects scholarship and evidence-based teaching and clinical practices.

☒   The peer evaluators verified evidence to support compliance with this Criterion.
☐   The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.
☐   The peer evaluators could not verify evidence to support compliance with this Criterion.

The governing organization's expectation is for faculty to provide quality teaching, maintain professional activity, and contribute through service to the community. University and college administrator interviews, as well as faculty interviews, confirm that the mission is a teaching institution with scholarship being important, but it is not a research-directed institution. Faculty in the program are encouraged to maintain expertise in their areas of responsibility. It was clarified that scholarship is encouraged for tenure track faculty and a "community of practice" program is held monthly to support faculty developing their scholarship portfolios.

SON faculty are encouraged to maintain expertise in their areas of responsibility to ensure that they can fulfill the primary teaching mission of the organization. Institutional, college, and SON level financial support is available for attending professional development opportunities as evidenced by review of faculty annual autobiographical (curricula vitae/résumés) onsite and the interview with Associate Dean of the CoHP, who detailed the approval process for funding. Examples of faculty scholarship include active

research agendas on teaching methods, regional and national presentations, mentoring students, leading regional and international study-abroad for SON students, and publications (SSR, p. 35). Observations of teaching materials posted in the LMS, Canvas, verified that faculty are knowledgeable, current, and employ evidence-based strategies and scholarship in their areas of teaching.

2.7 The number and qualifications of staff within the nursing education unit are sufficient to support the nursing program.

☒   The peer evaluators verified evidence to support compliance with this Criterion.
☐   The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.
☐   The peer evaluators could not verify evidence to support compliance with this Criterion.

Qualification Requirements for Nursing Education Unit Staff/Laboratory Personnel Role			
Staff/Laboratory Personnel Title	**Staff Number/Status**	**Summary of Qualifications for Position**	**Job Description Verified**
Office Specialist/ Office Manager/Administrative Specialist III	1 FT	High school diploma or equivalent, three years of full-time related experience that includes administrative support.	Yes
Enrollment Director, Undergraduate and Graduate Programs	1FT	Professional staff member with education and experience in academic advisement and counseling.	Yes
Graduate Programs Administrative Specialist/Administrative Specialist II	1 FT	High school diploma or equivalent, three years secretarial, administrative and/or office manager experience	Yes
Graduate Programs Clinical and Marketing Coordinator	1 FT	Advanced degree in nursing	Yes
Simulation Operation Manager	1 FT	Baccalaureate Degree in Health Professions. Master's degree preferred. 2 years in Simulation Curriculum Development or 2+ years' experience as a simulation facilitator or instructor or 2+ years' experience teaching in Higher education; Certification in Simulation preferred	Yes
Medical Simulation Engineer and Nursing Compliance Coordinator	1 FT	Holds an Associates or bachelor's degree OR 3-year equivalent work experience	Yes

Peer evaluators verified that the MSN program has sufficient qualified staff to support the program. The job descriptions for staff were reviewed onsite and qualifications verified with random sampling of staff credentials and interviews with the nurse administrator. The administrative support staff profile in the SSR (p. 36) was compared to the current staffing model at the time of the visit, with updates provided above. Interviews with the faculty, students, and the nurse administrator confirmed that the administrative support is sufficient to achieve the program goals and outcomes.

2.8 Faculty (full- and part-time) are oriented and mentored in their areas of responsibility.

☒   The peer evaluators verified evidence to support compliance with this Criterion.
☐   The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.
☐   The peer evaluators could not verify evidence to support compliance with this Criterion.

Interviews with the nurse administrator and faculty and a review of program documents verified that full- and part-time faculty are oriented and mentored in their areas of responsibility. The full-time faculty orientation process was confirmed to be as described in the SSR (p. 39) and in the faculty handbook reviewed onsite. All new SON faculty are enrolled in the SON Faculty Development Course through Canvas (SSR, p. 39), which was reviewed and verified onsite. During interviews, the university provost and college dean confirmed the university level new faculty retreat requirement. SON faculty stated they felt the orientation process was adequate in interviews and in review of program data (SSR, p. 39). A new faculty member stated she was assigned to an experienced faculty mentor with whom she is working closely.

2.9   Faculty (full- and part-time) performance is regularly evaluated in accordance with governing organization's policy/procedures and demonstrates effectiveness in assigned area(s) of responsibility.

☒   The peer evaluators verified evidence to support compliance with this Criterion.
☐   The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.
☐   The peer evaluators could not verify evidence to support compliance with this Criterion.

Full- and part-time faculty are reviewed on an annual basis, in accordance with SON policy, and as described in SSR (p. 40). Peer evaluators verified the process and reviewed the annual evaluation survey tool via Google Forms onsite. Upon completion of the self-evaluation, faculty meet with the SON chair and program directors to review and set goals for the upcoming year (faculty handbook, p. 19). The SON Evaluation Committee utilizes a survey platform, Chitester, for collection of faculty and course evaluations from students each semester. Chitester data are provided to each faculty member at the completion of each semester after grades have been submitted. Program administrators review the student evaluation data annually as part of the faculty review. Reports from Chitester were verified onsite. The SON Evaluation Committee reviews course level evaluation data annually.

2.10   Faculty (full- and part-time) engage in ongoing development and receive support for instructional and distance technologies.

☒   The peer evaluators verified evidence to support compliance with this Criterion.
☐   The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.
☐   The peer evaluators could not verify evidence to support compliance with this Criterion.

Courses in the MSN program are delivered in an online format, utilizing Canvas. Peer evaluators verified in interviews with the faculty, university support personnel, and college administrators that orientation, ongoing pedagogical development, and support are provided to the full- and part-time faculty for instructional and distance technologies through various means (SSR, pp. 42–45). The WSU TLF, a team of WSU online instructional designers, and digital district support the faculty with the LMS as well as online course development and delivery. Peer evaluators toured the university digital district (SSR, p. 46) and found the technological resources available for faculty to be an area of strength. Faculty have access to instructional designers, podcast, and video recording studios, as well as additional technology, enhanced pedagogical resources such as augmented reality, virtual reality, and content creation software for distance education. MSN faculty described an example of collaboration with instructional designers and animators to create character animations and avatars to enhance the student learner experience in an MSN Informatics course.

Interviews with the nurse administrator and the CoHP administration confirmed availability of professional development support allocations as described in SSR (p. 44). Peer evaluators verified in the faculty meeting that the resources and support are sufficient.

Summary of Compliance:

The master's program is in compliance with Standard 2.

The peer evaluators did not identify areas needing development for Standard 2.

STANDARD 3
Students

Student policies and services support the achievement of the end-of-program student learning outcomes and program outcomes of the nursing program.

3.1   Policies for nursing students are congruent with those of the governing organization as well as the state, when applicable, and are publicly accessible, non-discriminatory, and consistently applied; differences are justified by the end-of-program student learning outcomes and program outcomes.

☒   The peer evaluators verified evidence to support compliance with this Criterion.
☐   The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.
☐   The peer evaluators could not verify evidence to support compliance with this Criterion.

The peer evaluators verified in interviews with students and faculty that the master's and post- master certificate programs policies are congruent with those of the governing organization. Policies of the university are congruent with those of WSU and the State Board of Nursing in Utah and are accessible to the students and the public by going on the university's website. Students stated during the interview that the student handbooks are present and that the policies are located within the university's current revised student handbooks (A and B) that include progression, number of credit hours to graduate, and the use of technology. There is a hyperlink on the WSU website that outlines the admission policies and procedures of graduate SON students. There is a non-discrimination policy statement and specialized support services through the Services for Students with Disabilities, which provide opportunities for students to report any discrimination to the Office of Affirmative Action/Equal Opportunity at WSU. Contact information and accessibility to Title IX and non-discrimination policies is present for every type of complaint on WSU's website and verified through interviews with the students and the Executive Director of Financial Aid and Marketing. Formal complaints and grievance procedures were explained in SSR (p. 55) and verified by an email exchange with the Executive Director of Financial Aid and Marketing. Differences in policies from the governing organization are as explained in the SSR (p. 55) and verified by the peer evaluators in interviews with the nurse administrator and the students. The policy differences include having a nursing specific handbook (C) that outlines the differences specifically pertaining to the nursing program, which was found on the university's website and through a link in the SSR (p. 55). Upon review of electronic student files on CastleBranch, 10 files were randomly selected by the administrative assistant and the peer evaluators verified up-to-date and unencumbered information on background checks, drug screening, immunizations, physical examinations, and permission forms. Student policies are found in student handbooks A and B. Therefore, the policies are justified to support the end-of-program SLOs.

3.2   Public information is accurate, clear, consistent, and accessible, including the program's accreditation status and the ACEN contact information.

☒   The peer evaluators verified evidence to support compliance with this Criterion.
☐   The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.
☐   The peer evaluators could not verify evidence to support compliance with this Criterion.

☒ Yes ☐ No	**The institution/nursing program makes available to students and the public current academic calendar, grading policies, and refund policies.**

WSU has a transfer of credit policy for both the online MSN and post-master certificate tracks that are publicly disclosed on their main and SON website and include a statement of the criteria established by the institution regarding the transfer of credit earned at another instruction of higher education. The general academic calendar with the add/drop and withdrawal dates are present along with when appointment registration dates on WSU's registrar page and in student handbooks A and B. Grading policies are located in student handbooks C and on WSU's website. Refund policies were present on the financial aid website and verified through email the links to access the information by the executive director of financial aid services and marketing.

☒ Yes ☐ No	**The institution/nursing program makes available to students and the public current outcomes data – licensure/certification pass rate and completion rate (publication of job placement rate is optional) in accordance with ACEN Policy #29.**

The institution and the master's program make available to students and the public the completion rates and program outcome data were identified with a goal benchmark of 80%. The program completion rate for 2021–2022 was 81% (n= 30/37) compared to prior years of 89% and 82%. The MSN-Edu track had an 80% completion rate (n=16/20), and the MSN-Exec track had an 82% completion rate (n= 14/17). There were no enrollees in the post master's certificate educator and executive track since 2019–2020 where 1 student completed the post-master's certificate in education and 2 students completed the post-master's certificate in education. This information was verified by interviews with the director of the graduate programs.

☒ Yes ☐ No	**Recruitment materials for the nursing program accurately represent the institution's/nursing program's practices and policies.**

Recruitment materials for the master's and post master's certificate program accurately represent WSU's practices and policies through the WSU news and archives site. There is also information located in the student resources tab that provides information about opportunities and expectations in the graduate SON, including the student handbook. The director of student affairs and the president of WSU discuss how the "prestige of the nursing program is high and recruitment strategies are minimally needed."

☒ Yes
 	
☐ No
	The institution avoids the following recruitment practices in order to comply with U.S. Department of Education regulations:
	    a. **Assuring employment unless employment arrangements have been made and can be verified,**
	    b. **Misrepresenting job placement and employment opportunities for graduates,**
	    c. **Misrepresenting program costs,**
	    d. **Disparaging comparisons of secondary or postsecondary institutions,**
	    e. **Misrepresenting abilities required to complete intended program, and**
	    f. **Offering money or inducements other than educational services of the institution in exchange for student enrollment. (Except for awards of privately endowed restricted funds, grants, or scholarships are to be offered only on the basis of specific criteria related to merit or financial need.)**

WSU avoided poor recruitment practices to meet the U.S. Department of Education regulations in the following ways: There is no evidence of misrepresenting program costs, disparaging comparisons of other secondary or postsecondary institutions, misrepresenting abilities to complete intended programs, or any incentives in exchange for student enrollment. Student job opportunities were located on the WSU website that has hyperlinks to career events (Sept. 13, 2022), and to many hospitals and counties for graduate nursing students to receive employment.

☒ Yes ☐ No	**Current ACEN accreditation/candidate status and contact information is accurate, clear, consistent, and accessible in areas where the public can read it in accordance with ACEN Policies #9 or #34.**

WSU's current ACEN accreditation/candidate status was located and is available with a specific accreditation date and expiration, along with an announcement for a public forum opportunity with this current accreditation visit, aligning with ACEN policies evident on the WSU website.

The peer evaluators verified public information regarding ACEN accreditation on WSU's website and the student handbooks A, B and C. The information was presented in an accurate, clear, and concise way. Interviews with the chair of the SON, the Dean of Health Sciences, and the Director of Graduate Studies verified that the information for the public about accreditation is reviewed for accuracy before being posted to the public and located on the university's homepage. Program accreditation status is publicly available with the initial date and renewal date and found on the WSU website.

Verification of the following policies for the master's programs was reviewed on the university's website and student handbooks A and B, which were found in the repository: admission to the program, transfer of credits, financial aid, refund policies, and grading policies. An email exchange between the peer evaluators and the Executive Director of Financial Aid Services and Marketing verified the links to find these policies after broken links were found in the SSR. The student handbook and all course syllabi are present of the courses in the MSN nurse executive and the MSN nurse educator online courses. There is evidence of continuing education and other SON courses on the WSU website (DNP Family Nurse Practitioner; DNP leadership emphasis). A student resources page is evident with program-specific bulletin boards, announcements, student handbooks, study abroad opportunities, student scholarships, job opportunities, and professional organizations. News sources are also located.

3.3 Changes in policies, procedures, and program information are clearly and consistently communicated to students in a timely manner.

☒   The peer evaluators verified evidence to support compliance with this Criterion.

☐   The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.

☐   The peer evaluators could not verify evidence to support compliance with this Criterion.

The MSN students were able to articulate where they can find the nursing policies and procedures related to their track in the nursing program. In addition, the student and faculty interviews described how there is a current "bulletin board" for the Annie Taylor Dee SON that outline updated announcements. This information includes vaccine information, CPR training, and reports to be updated weekly for student notification of any changes. Course related changes and information are evident through student email and Canvas and verified through interviews from the students and faculty. There is also evidence of updates to any student handbook information the following fiscal year, as stated during an interview with the SON chair. The SON homepage also has brochures available to relay information about the nursing program and other changes that students can access when they navigate the university's website.

3.4 Student services are commensurate with the needs of nursing students, including those receiving instruction using alternative methods of delivery.

☒   The peer evaluators verified evidence to support compliance with this Criterion.

☐   The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.

☐   The peer evaluators could not verify evidence to support compliance with this Criterion.

The peer evaluators interviewed administrators, faculty, staff, and students and found that student services are commensurate with the needs of all nursing students. During interviews, the president of WSU, the provost, the Director of Student Affairs, and the Dean of Health Sciences identified student services as a high priority. An example of this was identified during an interview with the provost, the president, the Director of Student Affairs, and the Executive Director of Financial Aid Services and Marketing who stated that the nursing program generates the highest funds for the institution and any additional funds received went directly to students. Additional services that the department of nursing provides their students is a low-tuition education that allow for students to remain recruited and retained. Students in the

master's program were able to identify some of the student services that are available to them, including financial aid, the writing lab, the library resources, governance organizations, counseling, and advising. Because the students are using distance education, there are student support services for those with disabilities, veteran status, testing centers, writing centers, and bookstore information. This information was additionally verified through interviews with the Director of Student Affairs and the Executive Director of WSU online:

- Disabilities Services,
- Veterans Services,
- Testing Centers,
- Writing Centers,
- Wildcat Store (bookstore).

Evidence is also present of accommodations or adaptive testing, the use of adaptive technology (e.g., Pebble, Breeze, NVDA, Firefly by Kurzeweil), ASL interpretative services (and email links to schedule an appointment), recorded textbooks, curriculum adaptation, mobility accommodations, reading and book alternatives, registration assistance with priority registering, and tutoring. This information was verified by the Director of Student Affairs.

Academic advising information is present and was verified by the peer evaluators on the WSU home page and acknowledges that students are contacted within the first three weeks of enrollment and are monitored through WSU Cat Tracks. Upon the peer evaluators locating the information on the university's website, it was reported for Spring 2022 a 4.55/5 score for students in the executive concentration on academic advisement and a 4.42/5 for education concentration on academic advisement. Scores have appreciated overtime.

3.5   Student educational records are in compliance with the policies of the governing organization and state and federal guidelines.

☒   The peer evaluators verified evidence to support compliance with this Criterion.
☐   The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.
☐   The peer evaluators could not verify evidence to support compliance with this Criterion.

The peer evaluators interviewed student support services administrators and found the information was stored in accordance with the university's policy and federal and state laws. Student educational recorders are compliant with FERPA and Title IV regulations as evident in the registrar tab on WSU's website. The use of CastleBranch, Typhon, Proctorio, Instructure, and Canvas allow for a secure transaction and storage of student work, clinical information, and medical/legal student information. Email systems are password-protected and all electronic systems (e.g., CastleBranch, Typhon, Instructure, Portfolium, and Canvas) are password-protected for security. Upon student graduation, electronic student records are stored in the Marriott Allied Health Building on a WSU secured server and verified by the peer evaluators who reviewed 10 MSN files. There were no reported disclosures that violated university, state, or Title IV regulation 690.80 federal guidelines and FERPA. These disclosures are reported annually by the SON chair and located on WSU's website under public disclosures. This information was verified in an email exchange with the Executive Director of Financial Aid Services and Marketing.

3.6   Compliance with the Higher Education Reauthorization Act Title IV eligibility and certification requirements is maintained, including default rates and the results of financial or compliance audits.

☒   The peer evaluators verified evidence to support compliance with this Criterion.
☐   The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.
☐   The peer evaluators could not verify evidence to support compliance with this Criterion.

Year	Official Three-Year Default Rate
2018	4%
2017	6%
2016	7%
Peer evaluators reviewed official default rates on the U.S. Department of Education Financial Aid/Default Rate website.	

During an interview with the Executive Director of Financial Aid Services and Marketing, peer evaluators discussed the default rates and whether they met the benchmark for the expectations of the state of Utah. The interview explained that there was transparency in the reports from WSU that note that the default rate for 2020 was 5.9% (2017–2020) and is below the national average of 9.7%; although nursing specific default rates are not reported.

3.6.1   A written, comprehensive student loan repayment program addressing student loan information, counseling, monitoring, and cooperation with lenders is available.

☒   The governing organization participates in federal financial aid but does not participate in federal loan programs.
☐   The peer evaluators verified evidence to support compliance with this Criterion.
☐   The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.
☐   The peer evaluators could not verify evidence to support compliance with this Criterion.

During the interview and email exchange with the Executive Director of Financial Aid Services and Marketing, it was discussed that financial aid services are available, and the application online was found on the financial services section of WSU's website. It maintains compliance with Higher Education Reauthorization Act Title IV eligibility and certification through loan counseling. The email exchange with the Executive Director of Financial Aid Services and Marketing expressed the following, "Here is a link to the Federal Student Aid information on WSU's website. Here is a link to the Alternative Loans information we provide students. We have nine full-time advisors who meet with students on a first come first serve basis or by appointment through zoom. WSU provides a Money Management Center to help students to budget and plan how to finance their education expenses." Default rates were confirmed thorough a review of the Federal Student Aid website.

Cooperation with lenders is also available and presented on their financial aid website. The application for FAFSA is available along with applications for scholarships. Transparency about withdrawal from WSU, deferment, and outside funding opportunities are available and verified by the Executive Director of Financial Aid Services and Marketing. An interview with the provost/Vice President (VP) of Academic Affairs explained how there is funding at the state level and broad state legislature and enrollment growth

to have enough nursing fundings to start new programs. They also explained how the governing organization participates in federal financial aid through Pell Grants but does not participate in any federal loan programs as evident in the discussion with the Executive Director of Financial Aid Services and Marketing.

3.6.2   Students are informed of their ethical responsibilities regarding financial assistance.

☒   The peer evaluators verified evidence to support compliance with this Criterion.
☐   The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.
☐   The peer evaluators could not verify evidence to support compliance with this Criterion.

Through interviews with the students and with the Executive Director of Financial Aid Services and Marketing, peer evaluators verified that students are aware of the financial responsibilities both verbally and in writing. The Executive Director of Financial Aid Services and Marketing provided an email stating that student ethical responsibilities are present through evidence of pre- and post-loan counseling on the financial aid section of WSU's website through the following quote, "We utilize the U.S. Department of Education Entrance and Exit Counseling requirements to help students know of their responsibilities and responsibilities when taking out loans."

3.6.3   Financial aid records are in compliance with the policies of the governing organization, state, and federal guidelines.

☒   The peer evaluators verified evidence to support compliance with this Criterion.
☐   The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.
☐   The peer evaluators could not verify evidence to support compliance with this Criterion.

The peer evaluators verified with the Executive Director of Financial Aid Services and Marketing that all financial aid records are compliant with the policies of WSU, the state of Utah, and federal guidelines. The Utah State Auditors Association reviews the records annually to ensure they maintain compliance. These records are verified through an email transaction with the Executive Director of Financial Aid Services and Marketing after the link to the SSR was unable to locate the data by stating the following, "Weber State is compliant with the FERPA records requirements. All records are stored electronically, and two factor authentication is required to access the records. The Executive Director of Financial Aid and Scholarships approves access to the data fields in the electronic records."

3.7   Records reflect that program complaints and grievances receive due process and include evidence of resolution.

☒   The peer evaluators verified evidence to support compliance with this Criterion.
☐   The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.
☐   The peer evaluators could not verify evidence to support compliance with this Criterion.

According to the Executive Director of Financial Aid Services and Marketing through both an email exchange and interview, records that reflect program complaints and grievances that receive due process are evident in Policies 9–9 along with a list of seven essential elements of procedural due process. Other forms of misconduct, discrimination, complaints, academic issues, and harassment are located on the WSU website with opportunities to report anonymously.

WSU does not report any complaints in their MSN program after an interview with the chair of SON and an email exchange with the Executive Director of Financial Aid Services and Marketing. The following quote is from the Executive Director of Financial Aid Services and Marketing regarding petitions and grievances: "I am not aware of any students in the graduate programs going through the due process in the past several years. We seldom receive petitions from our graduate students. However, we inform all students who petition our office for an exception to our policies with the opportunity to have a review by the Due Process Officer, Dr. Hal Crimmel. For example, we suspend financial aid eligibility for about 500 students per semester due to Satisfactory Academic Progress. We counsel these students to help them regain their financial aid eligibility and document corrective action. We may have about a dozen students request the due process officer review their circumstances. In most cases the petition decision is upheld, however, occasionally new information is received which is reconsidered and may change the outcome of the petition process." The SON policies regarding grievances and complaints were able to be located on WSU's website. Students are instructed to move up the chain of command to the program director, SON chair, and then the SON Admissions/Advising Committee. Any grievances are then reviewed by the SON chair.

3.8   Orientation to technology is provided, and technological support is available to students.

☒   The peer evaluators verified evidence to support compliance with this Criterion.
☐   The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.
☐   The peer evaluators could not verify evidence to support compliance with this Criterion.

In interviews with students, faculty, the Executive Director of WSU online, and VP of IT, technological resources are available to MSN online students through Canvas technical support or through their 24/7 IT technical support service for computing support. Orientation guides/courses/tutorials, a help button, information for 24/7 live chats, and Canvas support hotlines (with phone numbers) are present for students to be instructed how to navigate the online educational software evident in the student handbook part C and by students during their meeting with the evaluators. WSU IT service desk contact information for computing support is easily provided on the WSU website along with hours of operation for walk-in hours (Monday to Friday, 8:30 a.m. through 5:30 p.m.; Saturday, 2:00 p.m. through 5 p.m.) and through email. The location is Lampros Hall Room 110. There is an IT center that has up-to-date technology to assist faculty and students with services. All IT resources were found as stated in the SSR (p. 55), and peer evaluators verified onsite at the digital district.

3.9   Information related to technology requirements and policies specific to distance education are accurate, clear, consistent, and accessible.

☒   The peer evaluators verified evidence to support compliance with this Criterion.
☐   The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.
☐   The peer evaluators could not verify evidence to support compliance with this Criterion.

☒ Yes	Processes are in place (e.g., login name/password, use of technology such as cameras/video stream) through which the institution can establish that the student who registers in a distance education course or program is the same student who participates in and completes the course or program and receives the academic credit.
☐ No	
After an interview with the executive director of WSU online, the student handbook outlines the use of cameras/video stream that has a verification system for any type of examination through "Proctorio."	

Is there a charge or fee for verifying student identity in distance education courses or programs (e.g., proctoring center fee, required purchase of specific technology such as a camera)? **No.**
There is no evidence of a fee for participating in distance education courses as evident by the interview provided by the IT marketing and training manager. Students are responsible for purchasing their own laptop and equipment, but resources on campus are available for students, free of charge, if needed.

Peer evaluators reviewed the information regarding technology requirements and policies specific to distance learning and found that information related to technology requirements and policies are clear, consistent, and easily accessible. The master's program requires students to use the Canvas online educational software and the use of a computer, Kaltura, email, Zoom, and cloud. Students stated in interviews they had an adequate orientation and were presented on Canvas, which was evident in interviews with the students and the Executive Director of WSU online. Policies regarding distance education are in student handbooks A and B. Students explained that they know the helpdesk and library resources were available to them and how to access these resources if needed.

Summary of Compliance:

The master's program is in compliance with Standard 3.

The peer evaluators did not identify areas needing development for Standard 3.

STANDARD 4
Curriculum

The curriculum supports the achievement of the end-of-program student learning outcomes and program outcomes and is consistent with safe practice in contemporary healthcare environments.

4.1   Consistent with contemporary practice, the curriculum is congruent with established standards for master's programs, including appropriate advanced nursing practice competencies, role-specific professional standards and guidelines, and certification requirements, and has clearly articulated end-of-program student learning outcomes and program outcomes.

☒   The peer evaluators verified evidence to support compliance with this Criterion.
☐   The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.
☐   The peer evaluators could not verify evidence to support compliance with this Criterion.

The master's program and its curriculum enable the graduates to provide direct and indirect patient care in academic or clinical health settings in the roles of a nurse executive or nurse educator. They are equipped with foundational knowledge of doctoral studies as it prepares them with the skills and knowledge to be a nurse leader or educator in a hospital or academic setting. This information is evident in the SSR (pp. 57, 59). The SSR (pp. 58–60) also outlines the seven end-of-program SLOs that are the standards for their master's program that follow QSEN competencies, the National League of Nursing, the role-specific core competencies for academic nurse educators, ANCC nurse executives, and the AACN essentials (Table 4.0.1). The QSEN competencies underpin the EPSLOs, and the role specific competencies and the AACN essentials are woven throughout the course map. Evidence of the AACN essentials is found through signature assignments that are administered to evaluate whether students achieved the end-of-program outcomes and the role specific competencies (RSC), Evidence was found in the SSR Table 6.1.1, and the specific AACN master's essentials of patient safety, policy, leadership, informatics, and interprofessional collaboration, and translating scholarship into practice were identified. Peer evaluators verified this through review of syllabi and in interviews with the faculty. In the SSR on Table 6.1.2 (p. 90), the abbreviated syllabi and the courses themselves (e.g., NRSG 6180 Information Systems) outline and map how the QSEN competencies fit the end-of-program SLOs and the course learning outcomes. One example of the QSEN competencies is "patient centered care," which connects to the SON end-of-program SLO #1: "Recognize the patient or designee as the source of control and full partner in providing compassionate and coordinated care based on respect for patient's preferences, values, and needs." Faculty and preceptors, during interviews, told peer evaluators that they know they need to align the QSEN competencies with the course outcomes and end-of-program SLOs. Faculty also expressed how they practice a "backwards curriculum" where they intentionally design courses based on the end-of-program SLOs of the SON and the programs themselves with the RSCs.

Peer evaluators were able to verify the QSEN competencies, its integration into the end-of-program SLOs, and the alignment back to the course learning outcomes were present through an interview with the MSN Clinical Coordinator, course syllabi, student handbooks A and B, the SSR (p. 60), and the MSN 2021–2022 SPE. End of program SLOs have a clause in the course syllabi (with headers of the topic) with reference to view student handbooks A and B for the complete definitions of the end-of-program SLOs and their alignment with the RSCs. Information was evident from reviewing student handbooks A and B. Students verified through interviews that these end-of-program SLOs were present and that they were aware of the need to achieve them to meet standard competency in their respective tracks. The interviews with the faculty described how the QSEN competencies follow a "backwards curriculum" model that is informed by the nursing standards, guidelines, and competencies. Each section is organized by "patient-centered care," "teamwork and collaboration," "evidence-based practice," "quality improvement," "patient safety," and "informatics." For example, evidence was found in NRSG 6801 Integrating

Scholarship into Practice showing SLOs and inserted parenthesis around the QSEN competency/end-of-program SLOs it aligns. This information was also verified in student handbooks A and B. For example, in NU 6803: Integrating Scholarship into Practice there was evidence of the "evidence-based practice" QSEN competency being met through the completion of the MSN educator project paper. Also, in NRSG 6255 Quality and Safety Analysis there was evidence of completion of the executive quality and safety analysis assignment. This alignment also supports the RSCs that are present in student handbooks A and B that differed between the educator and executive tracks. These RSCs were aligned with the end-of-program SLOs and categorized by the QSEN competencies. Upon reviewing the alignment between the end-of-program SLOs and the RSCs there is alignment; the end-of-program SLOS were the same between both tracks but the RSCs differed. For example, the end-of-program SLO for "patient centered care" is: "Recognize the patient or designee as the source of control and full partner in providing compassionate and coordinated care based on respect for patient's preferences, values, and needs." The RSCs for "patient centered care" in the nurse educator track state: "Lead collaborative patient care environments that promote the development of nursing expertise." The nurse executive track for "patient centered care" is "Design contemporary program outcomes and curricula that prepare graduates to function effectively in the healthcare environment with a focus on the patient." The abbreviated syllabi also show alignment through parenthesis of where the end-of-program SLO fits into that RSC and the course learning outcome. The RSC for each program was verified through interviews with the faculty, the MSN Clinical Coordinator, the chair of the SON, the preceptors, and the director of the graduate program as the standard for curriculum development. The peer evaluators were able to track the syllabus to the national standards for graduate level learning without difficulty.

QSEN competencies derive the end of program SLOs, which abide by the current standards for MSN programs and inspired by Adult Learning Theory. These end-of program SLOs were found in student handbooks A and B and in the MSN SPE and additional alignment with the other courses are evident.

4.2   The end-of-program student learning outcomes are used to organize the curriculum, guide the delivery of instruction, and direct learning activities.

☒   The peer evaluators verified evidence to support compliance with this Criterion.
☐   The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.
☐   The peer evaluators could not verify evidence to support compliance with this Criterion.

The master's program outlines seven end-of-program SLOs, which are used to organize the curriculum, guide the delivery of instruction, and direct learning activities. The QSEN competencies organize the curriculum and serve as the major benchmark of determining master's program level competency for the educator and executive tracks. The end-of-program SLOs and related competencies were validated through referencing the course syllabus and abbreviated syllabi that outlines the course process and how each course corresponds with an end-of-program SLO and QSEN competency for both the executive and the education tracks. Alignment was made in courses that had an open curriculum and through the review of the full course syllabi and the abbreviated syllabi by connecting the QSEN competency content and its application through Bloom's Taxonomy verbs. After speaking with the faculty, they verified that the backwards curriculum allowed them to design a curriculum that follows the end-of-program SLOs, QSEN competencies, and SLOs for each of the courses they teach with their corresponding assignments and RSCs.

For example, end-of-program SLO #2: "Apply evidence-based strategies to advance interprofessional partnerships that support intentional collaboration across professions with care team members, communities, and other stakeholders" is placed under the university's "teamwork and collaboration" competency. It is then divided into RSC's that fit under "teamwork and collaboration" and subsequent RSC (e.g., Education: "Collaborates with other professions to maintain a climate of mutual learning, respect, and shared values" and Executive: "Collaborates with other professions to maintain a climate of

mutual learning, respect, and shared values," which are identical for this end-of-program SLO). It then can be tied to the course NRSG 6180 Information Systems in the SLO "Participate in the information systems lifecycle to develop applications that support safe, quality nursing care. (Collaboration, Healthcare Systems)" and evaluated through the following methods: "Week 2 Course Learning Objectives (CLOs); Ethics Cases 1–6; Unit B Discussion." This allowed students to collaboratively work together to solve cases and have meaningful discussion in the Information Systems course. Faculty were able to articulate to peer evaluators how they used the end-of-program SLOs to build their curriculum through a "backwards curriculum" method. Peer evaluators were also told by the SON chair and the Director of Graduate Studies that the there was no minimum achievement of hours to attain other than the 90-hour clinical practicum that MSN students were mandated to achieve, and the post master's certificate were deemed "optional" to complete, with prior clinical hours to supplement.

4.3   The curriculum is developed by the faculty and regularly reviewed to ensure integrity, rigor, and currency.

☒   The peer evaluators verified evidence to support compliance with this Criterion.
☐   The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.
☐   The peer evaluators could not verify evidence to support compliance with this Criterion.

The master's program curriculum is developed by the individual faculty members, and they revise the courses yearly and by semester, which is evident by the dates of prior forms and files in Canvas at WSU. The curriculum itself is rigorous with measurable learning outcomes used throughout most of the weeks and has alignment to the end-of-program SLOs and RSCs. A backward curriculum design was utilized to add an EBP approach to online curriculum development. This is evident in the NRSG 6801 Integrating Scholarship into Practice course, where students are instructed to complete an assignment and discussion forum about the backwards curriculum in nursing education. This information was verified in interviews with the faculty as to how they design and construct their program and give students opportunities to learn about the backwards curriculum through the assignments and discussion forums.

Presence of a Faculty Course Committee, the SON Curriculum Committee/Testing Committee, a shared governance committee, and a peer review process were identified and verified through interviews with faculty, the SON chair, and the Director of Graduate Studies. Faculty expressed that the "Faculty Development Committee provides curriculum support to help with concept-based teaching and philosophies." College, faculty, and college committees are evident and hierarchal for program decision-making and verified by shared governance and verified through interviews with the president of WSU and two of the MSN faculty members. Meeting minutes were reviewed to ensure that the faculty regularly reviewed the curriculum for integrity, rigor, and currency.

4.4   The curriculum is designed to prepare graduates to be information-literate and to practice from an evidence-based approach in their direct and indirect advanced nursing roles.

☒   The peer evaluators verified evidence to support compliance with this Criterion.
☐   The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.
☐   The peer evaluators could not verify evidence to support compliance with this Criterion.

Upon reviewing courses on Canvas and abbreviated syllabi for graduate nursing students in the master's program for the nurse educator and nurse executive tracks, it was evident that the course syllabus in NRSG 6180 Information Systems, NRSG 6520 Curriculum Development for Nurse Educators, NRSG 6801 Integrating Scholarship into Practice, NRSG 6170 Teaching Strategies, NRSG 6300 Quality Improvement, Patient Safety, and Risk Issues in Patient Care Delivery highlighted evidence of

information literate and EBP approach to direct and indirect nursing roles. Additionally, that evidence was also highlighted in the abbreviated syllabi for NRSG 6300 Quality Improvement, Patient Safety, and Risk Issues in Patient Care Delivery, NRSG 6255 Quality and Safety Analysis, NRSG 6120 Research and Statistics, NRSG 6140 Collaborative Approaches in Population Health, and NRSG 6190 Professional Foundations for Graduate Nursing Students. For example, the peer evaluators found an evidence-based approach in NRSG 6801 Integrating Scholarship into Practice under SLOs #1, #2, and #3; in NRSG 6520 Curriculum Development for Nurse Educators under SLOs #2 and #3; in NRSG 6180 Information Systems under SLO #3; in NRSG 6170 Teaching Strategies under SLO #1 and #2; in NU 6190 Professional Foundations for Graduate Nursing Students under SLO #5; in NRSG 6255 Quality and Safety Analysis under SLO #3; in NRSG 6120 Research and Statistics under SLOs #1, #2, and #3; finally, in NRSG 6140 Collaborative Approaches in Population Health under SLO #2.

Upon reviewing the abbreviated syllabi for evidence related to EBP and information literacy in a variety of roles and settings, the peer reviewers found evidence in NRSG 6110 Translating Evidence into Practice under SLO #3; in NRSG 6255 Leadership and Accountability under SLO #3; in NRSG 6140 Collaborative Approaches in Population Health under SLO #2; finally, NRSG 6801/6802 Integrating Scholarship into Practice under SLOs #1–6. Upon reviewing the abbreviated syllabi for evidence related to EBP and information systems for NRSG 6180 Information Systems, there was evidence found in SLO #3. During the interview with students, they expressed involvement in EBP with their project design and development when constructing their literature review and theoretical framework. Students also commented on the library resources and using online databases with the librarian to generate the most effective search strategies.

4.5   The curriculum is designed so that graduates of the program are able to practice in a culturally and ethnically diverse global society.

☒   The peer evaluators verified evidence to support compliance with this Criterion.
☐   The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.
☐   The peer evaluators could not verify evidence to support compliance with this Criterion.

Cultural and ethnic diversity, and regional, national, and global perspectives are taught in the virtual classroom as outlined in the SSR (pp. 63–64). Evidence was found in Table 4.5.1 (SSR, p. 64) for "culture" in NRSG 6360 Scope and Practice of Nursing Administration in the case study assignment; NRSG 6300 Quality Improvement, Patient Safety, and Risk Issues in Patient Care Delivery in the discussion about QI issues in low/middle SES countries; NRSG 6560 Role of the Nursing Educator in the learning materials about fair testing and a discussion forum about equity and diversity in nursing; NRSG 6140 Collaborative Approaches in Population Health in an assignment on cultural competency; finally, MHA 6000 Healthcare Systems and Economy with tying in culture to the social determinants of health through an assignment. The peer evaluators reviewed courses MHA 6000 Healthcare Systems and Economy and NRSG 6140 Collaborative Approaches in Population Health for assignments related to culture and diversity and evidence was found in the assignments, case studies, and discussion forums.

Evidence was found for "ethnicity/diversity" in NRSG 6560 Socialization in the Role of the Nursing Educator in the learning materials about fair testing and a discussion forum about equity and diversity in nursing; in MHA 6000 Healthcare Systems and Economy by increased awareness and understanding of issues related to the health of communities, populations, and groups through an assignment; finally, in NRSG 6170 Teaching Strategies under a case study and discussion about being a clinical instructor and how to work with and encourage diverse students and patients. Also, there is a discussion forum on working with students with disabilities. Travel abroad initiatives are organized to Ghana, Cambodia, China, Thailand, and other national, regional, and global places. The full list is presented on the WSU website. This initiative was verified through interviews with students and the faculty. Evidence of regional, national, and global initiatives through NRSG 6300 Quality Improvement, Patient Safety, and

Risk Issues in Patient Care Delivery about QI issues for low-middle income countries and study abroad programs are evident on the WSU website. The 10-year goal is to have WSU become a Hispanic serving institution as evident in the interview with the president of WSU, the chair of the WSU Graduate Council, and the Dean of Health Professions. However, during the interview with the public, there did not seem to be awareness of this initiative or an expression of inclusivity other than the study abroad programs.

4.6   The curriculum and instructional processes reflect educational theory, interprofessional collaboration, research, and current standards of practice.

☒   The peer evaluators verified evidence to support compliance with this Criterion.
☐   The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.
☐   The peer evaluators could not verify evidence to support compliance with this Criterion.

The SSR (p. 65) outlines how the theories, interpersonal collaboration, research, and current standards of practice are being used at WSU. The Knowles' Adult Learning Theory is the theoretical framework of the curriculum and instructional processes. This theory is evident in student selection with various choices when possible. Students verified they employ this theory when selecting their final project topics; faculty verified they employ the theory through their focus on "why things matter" and a focus on their future career. Faculty expressed during the interview how "students can get ahead in curriculum for time management in their lives and they focus on the "why/how/application" of the assignment."

Bloom's Taxonomy verbs are used throughout all end-of-program SLOs and the CLOs, which the peer evaluators verified through a review of the abbreviated syllabi. Transformative Learning Theory is "practice in new and innovative ways" as evident in IT department and conversation about the growth of the IT department with the VP of IT (SSR, p. 65). After interviews with the Director of the Digital District and VP of IT, the development of digital district and how students have free access to this center is evident. They also explained that students have access to tools such as Adobe, Kaltura, Zoom, Canvas, and course management assistance. Experiential Learning Theory was utilized in a "learning through experience" format (SSR, p. 65). This theory is evident in MSN educator and executive residencies in NRSG 6400 Nurse Leader Executive Residency and verified by both the interviews with students and preceptors.

Interprofessional collaboration was incorporated through the curriculum through instructional processes in MHA 6000 Healthcare Systems and Economy through working with faculty from the Medical Health Administration Department and service provider/U.S. Healthcare system settings. The SSR (Table 4.6.1, p. 66) delineates the professional standards of Utah as well as QSEN through examples of courses with interprofessional collaboration with the course name, title, and the learning activities. In summary, the NRSG 6801, 6802, 6803 Integrating Scholarship into Practice students will collaborate inter-professionally through working with faculty on EBP changes on project design and development related to their interests. In NRSG 6700 Nurse Leader Executive Residency and NRSG 6400 Nurse Educator Residency, the nurse executive and educator residencies allow for inter-collaboration between the ATDSN learning outcomes and the RSC teamwork and collaboration through their work with professionals in clinical and academic settings. In NRSG 6300 Quality Improvement, Patient Safety, and Risk Issues in Patient Care Delivery, it allows for work in applying QI initiatives to various populations and interdisciplinary settings through addressing health care challenges through assignments and discussion forums (unit B). Lastly, NRSG 6360 Scope and Practice of Nursing Administration has a case study that asks students to reflect on how they'd practice in the "real world" as a new director; there is a case study on how to address staff turnover and how to hit those roles (SSR, p. 66). Interprofessional collaboration was verified onsite through interviewing faculty members who worked in other departments currently teaching in the SON and after interviewing the Dean of Nursing about the college's various health professions and collaborative efforts amongst the health sciences.

Students apply information from evidence-based sources in core and specialty courses, including research articles, national research databases, as well as principles from education, clinical, and administrative best practice. The peer evaluators found evidence in multiple courses, including NRSG 6110 Translating Evidence into Practice and NRSG 6801 and NRSG 6802 Integrating Scholarship into Practice (abbreviated syllabi). The current standards of practice are used throughout the curriculum by having assignments, LUs, SLOs, and end-of-program SLOs align with the QSEN competencies and recommended by the NLN. The evaluation forms from the residency contract also incorporate the QSEN competencies (SSR, p. 66).

Table 4.6.1 Examples of Courses with Interprofessional Collaboration Course	
Number/Title	**Learning Activities**
MHA 6000 Healthcare Systems and Economy	This is a course taught by the Medical Health Administration Department. Students are required to demonstrate executive-level communication skills that involve all team members and examine the complex organizational dynamics and structures that predicate the interaction among significant components of the U.S. health care system, including service provider settings in which care is provided.
NRSG 6801, 6802, 6803 Integrating Scholarship into Practice	Students must provide a plan on how they will collaborate inter-professionally in the implementation of their proposed EBP changes.
NRSG 6700 Nurse Educator Residency	Students are required to create and meet a personal ATDSN learning outcome aligned with the RSC of Teamwork and Collaboration: "Collaborates with other professions to maintain a climate of mutual learning, respect, and shared values."
NRSG 6400 Nurse Leader Executive Residency	Students are exposed to multiple levels of healthcare administration during their residency, including Human Resources, CIOs, CEOs, CFOs, line managers, unit managers, and staff. They are also offered opportunities to interact with various facility-based disciplines such as physicians, therapists, nutritionists, and pharmacists.
NRSG 6300 Quality Improvement, Patient Safety and Risk Issues in Patient Care Delivery	In *Unit B: High Functioning Interdisciplinary Teams in Health Care and Role of Patients,* students must apply team process principles in the leadership of quality improvement initiatives, assess methods for developing ideas in an interdisciplinary group setting, and contrast characteristics of clinical groups working with and without high-reliability teams to solve healthcare challenges.
NRSG 6360 Scope and Practice of Nursing Administration	The Signature Assignment for this course is a case study entitled New Director Challenges. In this case study, the student is asked to reflect on information and material learned in the course and apply these to "real world" situations in the role of a new director. This case study includes situations involving high staff turnover, increased
Methods Used to Verify: SSR (pp. 66–67)	

4.7 Evaluation methodologies are varied, reflect established professional and practice competencies, and measure the achievement of the end-of-program student learning outcomes.

☒   The peer evaluators verified evidence to support compliance with this Criterion.
☐   The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.
☐   The peer evaluators could not verify evidence to support compliance with this Criterion.

Evaluation methodologies for the MSN courses include midterm check-in quizzes, scholarly papers, a project paper, written assignments, group presentations, reflection journals, peer review activities, poster presentations, case studies, a portfolio, and residency faculty/preceptor assessments (SSR, p. 70). Evidence of these evaluation methodologies is present in the abbreviated syllabi, syllabi, and through a guided review of the assessments with the MSN clinical coordinator. For example, in NRSG 6140 Collaborative Approaches in Population Health the methods of evaluation pertained to the responses to structured discussion (online asynchronous) and preparation for and responses to case studies. Course mapping is present to end-of-program SLOs with evaluation to the SLOs that have the evaluation methods listed in the syllabi and the abbreviate syllabi. The LU outcomes that tie to the week are evident

in some, but not all, courses as well (not evident in preceptor courses). An example of evidence of the CLOs to SLOs to end-of-program SLO/RSC was found in NRSG 6180 Information Systems. These end-of-program SLOs focus on the QSEN competencies and the assignments, case studies, discussion forums, residencies, and projects that all allow for the evaluation of these end-of-program SLOs/RSCs to be aligned to the evaluation methodologies and verified by the peer evaluators who reviewed the courses and syllabi.

Clinical evaluation is done through direct observation of performance by the preceptor and indirectly through completing work for the preceptor, which was explained during the interview with the preceptors. Assessment methods in the graduate program transition to higher-ordered activities as student's progress through the program using Bloom's Taxonomy verbiage. This information is verified by the peer evaluators through the abbreviated syllabi and interviews with the faculty, the students, the preceptors, the MSN Clinical Coordinator, the Director of The Graduate Studies, and the SON chair. Faculty have mapped their evaluation methodologies to professional competencies and the SLOs as well as outcomes expected by the university in each of their syllabi. For example, NRSG 6801 Integrating Scholarship into Practice includes four different types of evaluations, including the scholarly paper, literature review, scholarly document submission, and course participation/preparation. Peer evaluators were also able to view clinical evaluation tools that support preceptor evaluation during direct observation of the preceptor/preceptee midterm and final evaluation forms. These forms were reported to the MSN clinical coordinator, reviewed with the MSN faculty and the student, and discussed during midterms and finals to ensure that students are passing. This information was verified by the MSN clinical coordinator and the preceptors during the interviews with the peer evaluators.

Faculty were able to articulate to peer evaluators how they used different methods of evaluation and how students were able to demonstrate competency and meet the end-of-program SLOs through the assignments, papers, residency, and quizzes. For example, NRSG 6520 Curriculum Development for Nurse Educators had the following evaluations evident upon review of the MSN residency handbook: develop personal learning outcomes, reflective journals, online student discussions, residency time log, preceptor journal, completion of 90 residency clock hours, and student performance evaluation by the MSN preceptor at midterm and final. Signature assessments are required for preceptors and students to achieve end-of-program SLOs as evident in preceptor/student handbook. These signature assessments were verbally verified through interviews with the preceptors, students, and the MSN Clinical Coordinator. The signature assessments and grading rubrics, upon review by the peer evaluators, were evident in the NRSG 6700 Nurse Educator Residency and NRSG 6400 Nurse Leader Executive Residency courses. The signature assignment consists of a faculty and preceptor assessment designed to ensure that students meet the MSN RSCs. The faculty and the Director of Graduate Studies monitor the signature assignment and end-of-program SLO/RSC data at the end of each semester, which are used to inform decision-making, and was verified through an interview with the MSN Clinical Coordinator. Student course progress is discussed at monthly faculty meetings and was verbalized by the faculty during the interview.

An example of how the evaluation methods were met in NRSG 6801 Integrating Scholarship into Practice is evident in the following example:

SLOs in syllabus:
1. Identify an MSN project topic appropriate for the Nurse Educator or Nurse Executive Track (evidence-based practice).

Method of evaluation: Scholarly paper; meeting with faculty; Unit C assignment: content expert feedback on intro, lit review, and framework
2. Develop and finalize MSN project proposal (evidence-based practice).

Method of evaluation: Scholarly paper; meeting with faculty; assignment: Unit A: project proposal outline; Unit C assignment: content expert feedback on intro, lit review, and framework

3. Identify MSN project content expert and complete master's project approval and committee approval forms (evidence-based practice).

Method of evaluation: Course participation/preparation, scholarly paper; Unit C assignment: content expert feedback on intro, lit review, and framework

4. Apply knowledge and skills gained in MSN 6110 to locate and appraise evidence relative to the MSN project (evidence-based practice).

Method of evaluation: Lit review, course preparation/participation; assignment: peer review of papers

5. Create section one: introduction of the MSN scholarly project paper (evidence-based practice).

Method of evaluation: Scholarly paper, discussion forum: MSN project chapter I; appointments with faculty; Unit C assignment: content expert feedback on intro, lit review, and framework

6. Create section two: lit review, including theoretical/conceptual framework, of the MSN scholarly project paper (evidence-based practice).

Method of evaluation: Scholarly document submission, scholarly paper, lit review, course preparation/participation, discussion forum: MSN project chapter II; discussion forum: Unit C discussion-sharing your framework/EBP model; appointments with faculty; Unit C assignment: content expert feedback on intro, lit review, and framework.

4.8 **The total number of credit/quarter hours required to complete the defined nursing program of study is congruent with the attainment of the identified end-of-program student learning outcomes and program outcomes and is consistent with the policies of the governing organization, the state, and the governing organization's accrediting agency.**

☒ The peer evaluators verified evidence to support compliance with this Criterion.

☐ The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.

☐ The peer evaluators could not verify evidence to support compliance with this Criterion.

☒ Yes ☐ No	The governing organization/nursing program policies and procedures for awarding credit hours are consistently applied to all courses required in the official published nursing program of study.
This information was verified through interviews with the SON chair, the director of graduate studies, and faculty. The peer evaluators reviewed student handbooks A, B, and C, the faculty handbook, the residency handbook, and is evident on the WSU SON webpage.	

Policies for Program Credit/Contact Hours	
Agency	**Summary of Policies for Program Credit/Contact Hours**
WSU	The Utah Legislature grants it the power to control, manage, and supervise USHE. The Board's major responsibilities include selecting and evaluating institutional presidents, setting policy, reviewing programs and degrees, approving institutional missions, and submitting a unified higher education budget request to the Governor and State Legislature
Utah State Board of Regents (State Board of Higher Education)	Not Applicable
Utah Department of Commerce Division of Occupational and Professional Licensing	Not Applicable
Northwest Commissions on Colleges and Universities	Institutions accredited or pre-accredited by the Northwest Commission on Colleges and Universities are required to examine their own missions, goals, operations, and achievements. It then provides expert analysis by peer evaluators, and, later, commendations for accomplishments and recommendations for improvement from the accrediting body.
Methods Used to Verify: Governing organization: USHE: https://ushe.edu/ [WSU Logo is present and described on website. State Agency: N/A (SSR, p. 3). Governing Organization's Accrediting Agency Northwest Commissions on Colleges and Universities (SSR, p. 3). And the WSU website. Name of Nursing Regulatory Agency: USHE policies on their website	

Academic Setting	Credit-to-Contact-Hour Ratios Used by the Program at the Time of the Visit
Didactic:	**1:1**
Laboratory:	0
Simulation:	0
Clinical:	1:3
Credit-to-contact hour ratios were reviewed and verified by the peer evaluators through a review of the course syllabus and abbreviated syllabi in the repository. One full semester credit hour is assigned in the following ratio of component hours per week devoted to the course of study (SSR, p.p. 67–68. : (1) lecture courses (which include face-to-face, online and hybrid) – at least one contact hour or equivalent instructional time for each credit hour, (at least two hours of outside work implied, meaning that for a three-credit hour class, a student should plan to spend a minimum of nine hours per week in some combination of instructional time and outside study).	

Program Option/Track:	Length of Time/Required Number of Academic Terms (including any prerequisite terms prior to entry into the program):	Length of Academic Term:	Total Credits for Entire Program Option:	Total Nursing Credits:	Nursing Credits for Prior Learning:
MSN Executive	3	15 weeks	31	31	0
MSN Educator			34	34	
MSN Post-Masters Executive	Not listed		12	13	20 (prior MSN credits)
MSN Post-Masters Educator			14 (optional 2 credits	16	
Program length was verified after the peer evaluators reviewed the Master of Science of residency handbook (p. 4); MSN PDF catalog (p. 973); MSN program of study; and the SSR (p. 5).					

The MSN program is comprised of either 31-credit hours (executive track) or 34-credit hours (educator track), which are distributed over three 15-week academic semesters and broken down into courses that comprise of seven-week blocks (SSR, p. 69). Faculty and students, through interviews, considered this method sufficient to acquire the skills and knowledge needed to function in the diverse roles of a nurse

executive or nurse educator. Faculty told peer evaluators that courses are organized in a progressive sequence that focuses on a backwards curriculum and how each of the courses contribute to meeting the QSEN competencies.

Consistent with the governing organization, the MSN program integrates competencies from the QSEN competencies. which are reflected through nurse residencies and the nursing courses. In an interview with the Director of Graduate Studies, they described the PMC program option and verified the gap analysis process for the PMC program option for the executive and education tracks. These tracks require that the student has a master's degree in nursing in another specialty and are awarded 20 credit hours for their prior master's degree. PMC students take extra courses to complete the post master's and can take an optional residency. It is debatable on whether the "optional" residency can contribute to the successful completion of the end-of-program SLOs but there is reduced enrollment for students going for the PMC.

4.9   Student clinical experiences and practice learning environments are evidence-based; reflect contemporary practice and nationally established patient health and safety goals; and support the achievement of the end-of-program student learning outcomes.

☒   The peer evaluators verified evidence to support compliance with this Criterion.
☐   The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.
☐   The peer evaluators could not verify evidence to support compliance with this Criterion.

Option/Track	Total Direct/Hands-On Clinical Hours	Total Skills Laboratory Hours	Total Simulation Laboratory Hours*
MSN Nursing Educator: NRSG 6700 Nurse Educator Residency	90	0	0
MSN Nurse Executive: NRSG 6400 Nurse Leader Executive Residency			
Clinical hours were verified by the peer evaluators after reviewing the student handbook, and the clinical hours were verbally verified by the chair of SON, the director of graduate studies, and the MSN Clinical Coordinator. Information was also provided in the SSR (p. 70).			

*Simulation laboratory hours include virtual simulation hours.

Per an interview with the Director of Graduate Studies, the number of post-BSN hours is not applicable to this program. Clinical hours can be acquired through participation in a residency where 90 contact hours and two-credit hours can be acquired for all programs, which meet the philosophy and objectives of the governing organization. These experiences are used to achieve the end-of-program SLO #1 of "patient centered care" as outlined in the course syllabi in NRSG 6170 Teaching Strategies. Clinical experiences, through residency for both the executive and education tracks, are established through a contract. Then, students find, or are set up with, preceptors who are willing to assist them in learning about the role. This residency diversifies the clinical practice environment and experiences for each student. This information was verified by the peer evaluators through review of signed contracts in the MHA building that are in a locked, secure drawer and reviewed with the administrative assistant (SSR, p. 70).

Feedback about clinical experiences from students during the interview could not be obtained because of the course being taken in the spring semester, but verified the process, the requirements, and the experience with finding a preceptor being positive albeit difficult. This process begins a semester prior to enrollment in the residency course as evidenced in the interviews with students, preceptors, and the MSN Clinical Coordinator. Preceptor feedback was retrieved during the interview with the peer evaluators and verified strong support of WSU, the students, and the policies to accept and work with students. Residency experiences assist students in achieving end-of-program SLOs by having the feedback evaluation form by both the student and preceptor be completed and submitted to measure and explain how they achieved the end-of-program SLOs during their residency, which was verbally verified through

interviews with the preceptors and the MSN Clinical Coordinator. For example, in NRSG 6400 Nurse Leader Residency and NRSG 6700 Nurse Educator Residency students can complete their 90 contact hours and obtain credit hours for the work required in these courses. Preceptors further expressed how the student, faculty, and preceptor discuss the QSEN competencies, end-of-program SLOs, and RSCs that allow for the student to complete and achieve the end-of-program SLOs for their residencies and complete the evaluation form with the end-of-program SLOs and RSCs. Residency placements can be self-selected by the student, or if necessary, assisted by WSU staff, who find clinical sites in Utah and in other compact states where students reside, as verified in an interview with the MSN Clinical Coordinator and the preceptors. In an interview with the Director of Graduate Studies, WSU does not use simulation for the MSN program but does use it for the undergraduate program.

4.10   Written agreements for clinical practice agencies are current, specify expectations for all parties, and ensure the protection of students.

☒   The peer evaluators verified evidence to support compliance with this Criterion.
☐   The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.
☐   The peer evaluators could not verify evidence to support compliance with this Criterion.

Clinical practice agency agreements were viewed by the peer evaluators with the administrative team and verified that these contracts were signed by both the WSU SON chair, the student, and the preceptor. New agreements are obtained on a yearly basis (SSR, p. 70). This cohort does not have any contracts presently in use because the students begin the following semester, but the process is in place as verified in the interviews with students who are actively seeking clinical residency placement for the upcoming semester (SSE, p. 70; Appendix 4.10.1 and Appendix 2.4.1). A review of prior established affiliation agreement contracts with preceptors/health care organizations in Utah were located and reviewed by the peer evaluators. The documents are stored onsite in a locked, secure drawer in the office of the administrative assistant in MHA. The preceptors, during the interview with peer evaluators, described the preceptor agreement process in the following: "the process begins by the student finding a placement, then the school initiates contact with the institution and verifies whether a prior contract is in place or if a new contract is needed. Once both parties agree, the student, faculty, and preceptor sign a work agreement. Once that process is signed, the student, faculty, and preceptor meet over Zoom to go over the roles and expectations of the preceptor and student and how they fit and align with the end-of-program SLOs/RSCs." This process is estimated to take up to 3–6 months to complete and the process begins the semester before they start their residencies, as evident in an interview with the MSN Clinical Coordinator. The Graduate Admissions Office also views and verifies these clinical practice agency agreements, which were viewed onsite with the peer evaluators.

4.11   Learning activities, instructional materials, and evaluation methods are appropriate for all delivery formats and consistent with the end-of-program student learning outcomes.

☒   The peer evaluators verified evidence to support compliance with this Criterion.
☐   The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.
☐   The peer evaluators could not verify evidence to support compliance with this Criterion.

The MSN program is delivered in an asynchronous, online format. Learning activities, instructional materials, and evaluation methods are appropriate and consistent with the end-of-program SLOs and alignment was shown with the LU and SLOs in the course. These were evident through review of the abbreviated syllabi and live courses by the peer evaluators (e.g., NRSG 6170 Teaching Strategies) and further verbally verified by the MSN executive and education students, VP of IT, and VP of Student Affairs. All courses are delivered through Canvas and the course learning management system.

Faculty-to-student engage through Canvas collaborations to share feedback. Question and Answer forums are present along with midterm check-ins, evident both in the NRSG 6180 Information Systems course and through the faculty interviews. Discussion forums and group discussions (peer-to-peer) with faculty providing feedback responses to their assignments are evident in the NRSG 6180 Information Systems live course and PICOT feedback assignment. Upon further inquiry, the faculty explained that they respond to students via "discussion forums." However, students verified the engagement to be mostly through Zoom, email, and Canvas messaging but reported feeling "engaged" "heard" and "responded to very quickly" by faculty during the student interview. Only pre-recorded, asynchronous lectures are used by faculty through Kaltura, Zoom, or other video lecturing platforms that WSU offers to faculty free of charge. These pre-recorded lectures were evident in the NRSG 6180 Information Systems course upon asynchronous review with the peer evaluators and verified by the Director of The Digital District. The clinical practice courses do not have asynchronous lectures.

Consistency is present between the end-of-program SLOs and the learning activities, instructional methods, and evaluations as evident in course mapping upon review by the peer evaluators. Some courses outlined them clearly, but a few of the course learning outcomes and learning outcomes were not clearly aligned and needed to be manually aligned by the peer evaluators, who could verify alignment. E-certificate programs are available to teach faculty how to do course delivery and development. Those programs offered bi-annually and incentivized with a $500.00 stipend. An instructional designer is available to help faculty as needed when building and revising their programs and using a template that other programs model, as verbally explained by the Executive Director of WSU online.

Summary of Compliance:

The master's program is in compliance with Standard 4.

The peer evaluators did not identify areas needing development for Standard 4.

STANDARD 5
Resources

Fiscal, physical, and learning resources are sustainable and sufficient to ensure the achievement of the end-of-program student learning outcomes and program outcomes of the nursing program.

5.1   Fiscal resources are sustainable, sufficient to ensure the achievement of the end-of-program student learning outcomes and program outcomes, and commensurate with the resources of the governing organization.

☒   The peer evaluators verified evidence to support compliance with this Criterion.
☐   The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.
☐   The peer evaluators could not verify evidence to support compliance with this Criterion.

Financial processes are guided by the policies and procedures of the university system, with revenue generated primarily from state appropriations and secondarily through tuition and fees. In interviews with the Dean and Associate Dean of the CoHP, it was clarified that the budget, including the SON budget, is not a zero-based budget. Each program has their own budget and funds not expended in the fiscal year can be rolled forward to the next budget year. The percentage of budget allocations to the SON is greater as compared to other CoHP programs (SSR, p. 73). Administrators justified the greater allocations were based on the higher enrollment in the SON as well as the larger percentage of full-time faculty in comparison to other university programs.

University administrators including the president, provost, and the Chief Finance Officer, (CFO) confirmed there is a commitment to financial support for the nursing program with acknowledgement that the nursing program is a flagship program of the university. The SON has a strong donor base, which primarily goes to support student scholarship programs. Interviews with university administrators, college administrators, the nurse administrator, and nursing faculty verified that fiscal allocations are sufficient and sustainable and support achievement of the end-of-program SLOs and program outcomes.

5.2   Physical resources are sufficient to ensure the achievement of the end-of-program student learning outcomes and program outcomes, and meet the needs of the faculty, staff, and students.

☒   The peer evaluators verified evidence to support compliance with this Criterion.
☐   The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.
☐   The peer evaluators could not verify evidence to support compliance with this Criterion.

The MSN program courses are offered online with no on-campus classroom requirements. During interviews with the college administrators, nurse administrator, and faculty it was verified that there are sufficient physical resources currently available. University administrators and college administrators confirmed that the remodeling of space to accommodate new college and SON program development (SSR, p. 75) had taken some creativity and collaboration noting available space is at a premium. Interviews confirmed that a small number of MSN faculty are sharing office space but that accommodations have been adequate and have not negatively impacted the delivery of the program. Faculty sharing a common office space are provided separate equipment, including desks and computers. They utilize flexible scheduling, which allows time for independent use of the space allowing time for private virtual and/or in-person meetings with students. MSN Students are primarily off-campus but do have access to private study space and computer lab space in the nursing building as well as computer labs in the library. The current physical resources are sufficient to ensure the achievement of the MSN

end-of-program SLOs and program outcomes and meet the needs of faculty, staff, and students. The governing organization is in the silent phase of a capital campaign with funding of a new CoHP and SON facility being a priority investment.

5.3   Learning resources and technology are selected with faculty input and are comprehensive, current, and accessible to faculty and students.

☒   The peer evaluators verified evidence to support compliance with this Criterion.
☐   The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.
☐   The peer evaluators could not verify evidence to support compliance with this Criterion.

The MSN program instruction is provided in an online format using Canvas. Students enrolled in the MSN program have access to a variety of learning resources and technology. The WSU Stewart Library offers an expansive list of resources at its on-campus physical site, including many books, e-books, and appropriate peer-reviewed journals (SSR, pp. 78–79). This was verified onsite by peer evaluators during a library tour led by the health science library liaison. The CoHP has a dedicated librarian who works with faculty to maintain appropriate nursing journal subscriptions. Faculty and students also have access to library resources remotely. During interviews with students, it was verified that the library liaison was accessible and helpful in conducting research and accessing resources very efficiently. As detailed in the SSR (p. 79), a variety of databases are available to support graduate nursing education, including but not limited to CINAHL Complete, UpToDate (digital subscription at a student reduced rate), and Nursing Reference Center Plus. Faculty and library liaison confirmed the process for identifying classic and current resources through an annual review cycle.

5.4   Fiscal, physical, technological, and learning resources are sufficient to meet the needs of the faculty and students engaged in alternative methods of delivery.

☒   The peer evaluators verified evidence to support compliance with this Criterion.
☐   The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.
☐   The peer evaluators could not verify evidence to support compliance with this Criterion.

Fiscal, physical, technological, and learning resources are sufficient to meet the needs of the faculty and students engaged in alternative methods of delivery. Interviews with faculty and students confirmed that they have access to WSU Online Canvas Support during regular business hours and Instructure Canvas online support options 24/7. Students confirmed, during interviews, that the IT support is timely and supports their distance learning needs. Faculty, staff, and students verified to peer evaluators that they are satisfied with technology support, orientation, and ongoing support from the technological and learning resources provided by the institution. Faculty provided examples of technological resource strengths provided by university resources including the University Digital District (SSR p. 45) and the Teaching Learning Forum (TLF), an in-person and virtual collaborative learning environment for faculty development.

Summary of Compliance:

The master's program is in compliance with Standard 5.

The peer evaluators did not identify areas needing development for Standard 5.

STANDARD 6
Outcomes

Program evaluation demonstrates that students have achieved each end-of-program student learning outcome/role-specific professional competency and each program outcome.

The nursing program has a current systematic plan of evaluation. The systematic plan of evaluation contains:

  a. **Specific, measurable expected levels of achievement for each end-of-program student learning outcome/role-specific professional competency and each program outcome.**

  b. **Appropriate assessment method(s) for each end-of-program student learning outcome/role-specific professional competency and each program outcome.**

  c. **Regular intervals for the assessment of each end-of-program student learning outcome/role-specific professional competency and each program outcome.**

  d. **Sufficient data to inform program decision-making for the maintenance and improvement of each end-of-program student learning outcome/role-specific professional competency and each program outcome.***

  e. **Analysis of assessment data to inform program decision-making for the maintenance and improvement of each end-of-program student learning outcome/role-specific professional competency and each program outcome.**

  f. **Documentation demonstrating the use of assessment data in program decision-making for the maintenance and improvement of each end-of-program student learning outcome/role-specific professional competency and each program outcome.**

Programs seeking initial accreditation are required to have data from the time that the program achieves Candidacy with the ACEN.

6.1 The program demonstrates evidence of students' achievement of each end-of-program student learning outcome/role-specific professional competency.

There is ongoing assessment of the extent to which students attain each end-of-program student learning outcome/role-specific professional competency.

There is analysis of assessment data and documentation that the analysis of assessment data is used in program decision-making for the maintenance and improvement of students' attainment of each end-of-program student learning outcome/role-specific professional competency.

☒ The peer evaluators verified evidence to support compliance with this Criterion.
☐ The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.
☐ The peer evaluators could not verify evidence to support compliance with this Criterion.

The SPE in the repository identified the systematic plan with end-of-program SLOs for the education and executive tracks. The varied assessment measures are specific and appropriate to measure each end of program SLOs. The SPE identified the assessment method, ELA, the results of the data collection, and

the analysis. Assessment tools include signature assignments, the end-of-program survey during the final weeks of the last course, MSN student residence, student portfolios, and the graduate survey. Assessment methods include signature assignments and the end-of-program survey that addressed each of the end-of-program SLOs: patient-centered care, teamwork and collaboration, evidenced-based practice, quality improvement, patient safety and informatics. This was verified by the peer evaluators through review of course documents and review of graduate surveys. As verified by the peer evaluators, the students are demonstrating achievement of the EPSLOs by course evaluation methods and graduate surveys.

The SPE documented that the previous ELA of 85% was not providing meaningful data although most students met the 85%. The signature assignments did not clearly identify the details for those who fell below the benchmark. A faculty meeting minutes for November 2021 discussed increasing the benchmark to 90% beginning with the 2021–2022 academic year. This was confirmed in the faculty interview. Representatives from the Evaluation Committee stated they tracked the student assignments and made a recommendation to full-time faculty to increase the benchmark for the purpose of closely monitoring the students. The revision of the signature assignment benchmark from 85% to 90% was implemented so the students would achieve at least a 90% score of total points on the grading rubric to meet the designated end-of-program SLO.

Data collection for the end-of-program surveys is completed once a year, six months after graduation. The signature assignments assessment was collected at the conclusion of semesters two and three then were revised and relocated to the end of the program to align with the newly published AACN Essentials (SSR, p. 86). Students who are enrolled in the final residence experience will meet student performance and standards as evaluated by the faculty on the MSN faculty/preceptor assessment of student residency tool at 90%. This measures standards 1–6 of the RSCs. The SSR (p. 86) identifies that the preceptor and faculty assessment of the residency was further explored to ensure students were meeting minimum level of proficiency of the educator and executive RSCs. Interviews with the preceptors confirmed the expectations were for students to meet the RSCs and this is done through assignments and communication with the students and faculty.

End-of-program evaluations are provided to students to enhance decision-making and provide students with the opportunity for feedback regarding the program in the final weeks of the last course. The ELA for the end-of-program evaluation of end-of-program SLOs/RSCs is 80% or 3.0/5.0 on the Likert scale survey. Data in the SSR (p. 99) documents the ELA was met for the past three years. Faculty stated that an example of feedback used from the surveys was the semester calendar to the block schedule to allow for more credits in less time for completion. This information was verified through an interview with the program coordinator.

6.2 **The program demonstrates evidence of graduates' achievement on the licensure examination and/or certification examination.**

For entry-level master's programs, the program's most recent annual licensure examination pass rate will be at least 80% for <u>all</u> first-time test-takers during the same 12-month period.

For each certification examination, the annual pass rate for <u>all</u> first-time test-takers will be at or above the national mean for the same three-year period; in the absence of a national mean, the pass rate for each certification examination will be at least 80% for <u>all</u> first-time test-takers during the same 12-month period.

There is ongoing assessment of the extent to which graduates succeed on the licensure examination and/or certification examination(s).

There is analysis of assessment data and documentation that the analysis of assessment data is used in program decision-making for the maintenance and improvement of graduates' success on the licensure examination and/or certification examination(s).

There is a minimum of the three most recent years of available licensure examination and/or certification examination pass rate data, and data are aggregated for the nursing program as a whole as well as disaggregated by program option/certification examination, location, and date of program completion.

☒   The peer evaluators verified evidence to support compliance with this Criterion.
☐   The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.
☐   The peer evaluators could not verify evidence to support compliance with this Criterion.

Graduates from the MSN program are not required to take national certification of licensure. However, students are encouraged to sit for post-licensure certification such as the NLN Educator Certification (CNE) examinations and the American Organization of Nursing Leadership (AONL) certification examination.

6.3 **The program demonstrates evidence of students' achievement in completing the nursing program.**

The expected level of achievement for program completion is determined by the faculty and reflects student demographics.

There is ongoing assessment of the extent to which students complete the nursing program.

There is analysis of assessment data and documentation that the analysis of assessment data is used in program decision-making for the maintenance and improvement of students' completion of the nursing program.

There is a minimum of the three most recent years of annual program completion data, and data are aggregated for the nursing program as a whole as well as disaggregated by program option, location, and date of program completion or entering cohort.

☒   The peer evaluators verified evidence to support compliance with this Criterion.

☐   The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.

☐   The peer evaluators could not verify evidence to support compliance with this Criterion.

Program Completion – Aggregated for the Entire Program		
Current Expected Level of Achievement as Specified in the SPE	Date of Completion	Program Completion Rate
80% of graduates will complete the program on time	2021–2022	81%
Same as above	2020–2021	89%
Same as above	2019–2020	82%

Program Completion – Disaggregated by Program Option					
Current Expected Level of Achievement as Specified in the SPE	Date of Completion	Program Completion Rate			
		MSN		Post-Master's Certificate	
		Educator	Executive	Educator	Executive
80% of graduates will complete the program on time	2021–2022	81%	82%	No Enrollees	No Enrollees
Same as above	2020–2021	92%	84%	No Enrollees	No Enrollees
Same as above	2019–2020	92%	88%	100%	100%

The SPE identified the program completion rate aggregated for the MSN program at an ELA of 80%. The SSR (pp. 108–109) reports program and disaggregated completion rates. An interview with the director of the graduate program demonstrated each cohort class roster. The calculation rate was calculated on 100% completion time. The ELA was determined to be based on student demographics, the college mission and goals related to retention, align with the undergraduate and graduate student completion rates. Disaggregation of data reports the MSN executive, and the MSN educator, program options meet or exceed the 80% ELA. The ELA does not reflect from the first day of the first nursing course. The faculty should revise the ELA to be consistent with the ACEN Glossary definition; if the program uses the 2023 ACEN Standards and Criteria, then the faculty must ensure the ELA is consistent with the Glossary definition of program completion. Faculty noted in the SSR and in the interview with the director of the graduate program that the decline of completion rates in the 2021–2022 cohort was due to the COVID-19 pandemic.

6.4   The program demonstrates evidence of graduates' achievement in job placement.

> **The expected level of achievement for job placement is determined by the faculty and reflects program demographics.**

> **There is ongoing assessment of the extent to which graduates are employed.**

> **There is analysis of assessment data and documentation that the analysis of assessment data is used in program decision-making for the maintenance and improvement of graduates being employed.**

> **There is a minimum of the three most recent years of available job placement data, and data are aggregated for the nursing program as a whole.**

☒   The peer evaluators verified evidence to support compliance with this Criterion.
☐   The peer evaluators verified evidence to support compliance with this Criterion with areas
          needing development.
☐   The peer evaluators could not verify evidence to support compliance with this Criterion.

Job Placement Rates – Aggregated for the Entire Program					
Current Expected Level of Achievement as Specified in the SPE	**Year**	**Total Number of Graduates**	**Total Number of Graduate Responses**	**Response Rate (%)**	**Job Placement Rate (%)**
80%	2021	34	8	24%	25%
Same as above	2020	29	4	12%	25%
Same as above	2019	24	6	83%	30%

The SSR does not document criterion 6.4. The SPE shows the graduates and placement rate. The ELA was established at 80%. The interview with the Medical Simulation Engineer Nursing Compliance Coordinator identified strategies to increase the return rate of the surveys. Changes included emailing the survey 10 months after graduation and the 11-question tool was changed to three questions. Emails to personal and university emails with follow-up phone calls were made to increase return. The calculation of the job placement rate is based on the surveys returned that answered yes to employment in which the program prepared the graduate. An interview with the program coordinator identified that the graduate survey is now introduced in the final two courses of the program to make certain that students are aware of the importance of returning the survey. No further explanation of the 80% was presented.

Summary of Compliance:

The master's program is in compliance with Standard 6.

The peer evaluators identified the following areas needing development for Standard 6.

Criterion 6.3
Review and revise the program completion outcome statement(s) to be congruent with the ACEN definition of program completion by including the first day of the first nursing course and on-time completion.

Criterion 6.4
Review and revise the job placement outcome statement to be congruent with the ACEN definition of job placement by including an ELA with an appropriate timeframe and in a role for which they were prepared.

V. RECOMMENDATION FOR ACCREDITATION STATUS

Continuing Accreditation:

Continuing accreditation as the master's program, including the post-master's certificate option(s), is in compliance with all Accreditation Standards.