Continuous Improvement Progress Report (CIPR)
Program Information Form
Baccalaureate & Graduate Nursing Programs

General Information

Official Name of Institution: New Mexico Highlands University

Type of Institution (check one): ☒ public ☐ private, secular ☐ private, religious ☐ proprietary

Institution’s Carnegie Classification: Masters/I

Chief Executive Officer of Institution (Full Name and Title): Dr. Sam Minner, President

Chief Executive Officer of Institution’s email address: president_office@nmhu.edu

Official Name of Nursing Unit: RN to BSN Program

Chief Nurse Administrator (Full Name, Title and Credentials): Dr. Jeanie Flood, PhD, RN, IBCLC, Associate Professor, Director and Chair RN to BSN Program

Address: PO Box 9000
City: Las Vegas State: NM Zip Code: 87701
Phone: 505-454-3210 Fax: 505-426-2109
Email address: jflood@nmhu.edu

Web site address (URL) of institution: http://www.nmhu.edu/
Web site address (URL) of nursing unit: http://www.nmhu.edu/current-students/undergraduate/arts-and-sciences/nursing/
Web site address (URL) of institution’s catalog (if available electronically): http://www.nmhu.edu/highlands-university-catalogs/
Web site address (URL) of nursing student handbook (if available electronically): n/a

☑ Check here to verify that the Chief Nurse Administrator, identified above, has approved this completed form and confirms its contents as of 6/1/2017.
### Institutional Accreditation

<table>
<thead>
<tr>
<th>Institutional Accrdrictor (identify agency name)</th>
<th>Last Review (year or N/A)</th>
<th>Current Status (e.g., full accreditation, probation, warning, show cause)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Higher Learning Commission (HLC)</td>
<td>2016</td>
<td>Probation</td>
</tr>
</tbody>
</table>

If the current accreditation status of the institution is anything other than full accreditation (e.g., probation, warning, show cause, or other equivalent status), please attach a copy of the institutional accrediting agency’s most recent accreditation action letter to this form. Also provide (below) an explanation of the institution’s current accreditation status and how the nursing unit is impacted and/or implicated, if at all:

Effective August 31, 2016, New Mexico Highlands University was placed on probation by the Higher Learning Commission (HLC) because the University was out of compliance with some of the HLC’s Criteria for Accreditation (see attached letter). The concerns related to staffing and institutional support, assessment of student learning, student retention and completion rates, governance, and institutional planning. More information can be found at: [http://www.nmhu.edu/accreditation-information/](http://www.nmhu.edu/accreditation-information/) The University has set up work groups for each area of concern to address issues and write the Assurance Argument. The HLC will visit campus in November 6-8, 2017 to inspect the assurance filing. The expectation is that the HLC Board will meet in June 2018 to take final acting on the filing. At this time, there has not been an impact to the nursing department.

### Specialized Accreditation

<table>
<thead>
<tr>
<th>Specialized Accrdrictor</th>
<th>Last Review (year or N/A)</th>
<th>Current Status (e.g., full accreditation, probation, warning, show cause, N/A)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Council on Accreditation of Nurse Anesthesia Educational Programs</td>
<td>Master’s Degree Program</td>
<td>Master’s Degree Program</td>
</tr>
<tr>
<td></td>
<td>Doctoral Degree Program</td>
<td>Doctoral Degree Program</td>
</tr>
<tr>
<td></td>
<td>Post-Graduate Nurse Anesthesia Certificate Program</td>
<td>Post-Graduate Nurse Anesthesia Certificate Program</td>
</tr>
<tr>
<td>Accreditation Commission for Midwifery Education</td>
<td>Master’s Degree Program</td>
<td>Master’s Degree Program</td>
</tr>
<tr>
<td></td>
<td>Doctoral Degree Program</td>
<td>Doctoral Degree Program</td>
</tr>
<tr>
<td></td>
<td>Post-Graduate Nurse-Midwifery Certificate Program</td>
<td>Post-Graduate Nurse-Midwifery Certificate Program</td>
</tr>
</tbody>
</table>
If the current accreditation status of a nursing program is anything other than full accreditation (e.g., probation, warning, show cause, or other equivalent status), please attach a copy of the accrediting agency’s most recent accreditation action letter to this form. Also provide (below) an explanation of the program’s current accreditation status and what specific deficiencies were noted:

A letter dated December 4, 2016 was received by the department stating that the program was out of compliance with Standard IV-F. A compliance report which demonstrated how the department came in to compliance with the accreditation concerns was submitted February 17, 2017.

State Board of Nursing Approval

Name of applicable state board of nursing: Not applicable for RN to BSN programs in New Mexico

<table>
<thead>
<tr>
<th>Nursing Program</th>
<th>Last Review (year or N/A)</th>
<th>Current Status (e.g., full approval/recognition/accreditation, probation, warning, show cause, N/A)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Baccalaureate Degree Program</td>
<td></td>
<td></td>
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<tr>
<td>Master’s Degree Program</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Doctor of Nursing Practice Program</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Post-Graduate APRN Certificate Program</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

If the current approval/recognition/accreditation status of the program is anything other than full approval/recognition/accreditation (e.g., probation, warning, show cause, or other equivalent status), please attach a copy of the board of nursing’s most recent action to this form. Also provide (below) a brief
explanation of the current status of the program with regard to the state board of nursing and what specific deficiencies were noted:

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**Nursing Program Information**

**Degree Programs Offered (Student Data)**

Regardless of whether the program is under review, please identify all baccalaureate, master’s, and Doctor of Nursing Practice tracks offered by the nursing unit. For each track, list current enrollment data, as well graduation data for the previous academic year. For the baccalaureate program, include only nursing students (not pre-nursing students).

<table>
<thead>
<tr>
<th>Nursing Degree Program (identify all tracks)</th>
<th>Month*/Year Track Became Operational</th>
<th>Number of Students Enrolled</th>
<th>Number of Graduates</th>
</tr>
</thead>
<tbody>
<tr>
<td>Baccalaureate Degree</td>
<td></td>
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<tr>
<td>Generic/Traditional/Pre-licensure</td>
<td></td>
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<tr>
<td>RN-BSN/Post-licensure</td>
<td>2009</td>
<td>116</td>
<td>74</td>
</tr>
<tr>
<td>Second Career/Fast Track/Accelerated</td>
<td></td>
<td></td>
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<tr>
<td>Other (specify)</td>
<td></td>
<td></td>
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<tr>
<td><strong>Totals:</strong></td>
<td></td>
<td><strong>116</strong></td>
<td><strong>74</strong></td>
</tr>
</tbody>
</table>

| Master’s Degree (Identify all tracks offered) |                                     |                            |                     |
|-----------------------------------------------|                                     |                            |                     |

| Doctor of Nursing Practice                   |                                     |                            |                     |
Identify all tracks/majors offered and indicate whether post-baccalaureate or post-master's

<table>
<thead>
<tr>
<th>Track/Major</th>
<th>Post-Baccalaureate</th>
<th>Post-Master's</th>
</tr>
</thead>
<tbody>
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</table>
 Totals:                                             

*Month needs to be identified only if the track began operation in the current or past two calendar years.*

Has there been a 50% or greater increase in student enrollment (headcount) during the past three years for the overall baccalaureate degree program in nursing?

☐ yes  ☒ no

If Yes, please provide the enrollment numbers in each of the past three years, describe the growth and how, specifically, the program accommodated the growth (e.g., in terms of faculty and other resources):

____

Has there been a 50% or greater increase in student enrollment (headcount) during the past three years for the overall master's degree program in nursing?

☐ yes  ☐ no

If Yes, please provide the enrollment numbers in each of the past three years, describe the growth and how, specifically, the program accommodated the growth (e.g., in terms of faculty and other resources):

____

Has there been a 50% or greater increase in student enrollment (headcount) during the past three years for the overall Doctor of Nursing Practice program in nursing?

☐ yes  ☐ no

If Yes, please provide the enrollment numbers in each of the past three years, describe the growth and how, specifically, the program accommodated the growth (e.g., in terms of faculty and other resources):

____

Identify any doctoral degree programs (other than the Doctor of Nursing Practice program) offered by the nursing unit, e.g., PhD or DNSc (note that research doctorates are not eligible for CCNE accreditation):

____

Identify any joint degree programs in nursing offered with any other unit at the institution (e.g., MSN/MPH, MSN/MSW):

____
**Post-Graduate APRN Certificate Programs (Student Data)**

Regardless of whether the program is under review, please identify all post-graduate APRN certificate program tracks offered by the nursing unit. For each track, include role and population focus, student enrollment data, and whether the track is also offered as a track in the graduate degree program (master’s and/or DNP).

<table>
<thead>
<tr>
<th>List each track (role and population focus) in the post-graduate APRN certificate program (e.g., post-master's FNP certificate, post-master's community health CNS certificate).</th>
<th>Current Number of Students Enrolled in Each Track</th>
<th>Identify whether each track in the post-graduate APRN certificate program is also offered as a track in the graduate degree program (e.g., type “Yes” if there is an FNP certificate track and also an FNP track in the master’s degree and/or DNP program).</th>
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</tbody>
</table>

Has there been a 50% or greater increase in student enrollment (headcount) during the past three years for the post-graduate APRN certificate programs?

☐ yes ☐ no

If Yes, please provide the enrollment numbers in each of the past three years, describe the growth and how, specifically, the program accommodated the growth (e.g., in terms of faculty and other resources):

_____

Identify any post-graduate certificate programs that are offered by the nursing unit that do not prepare APRNs, e.g., a certificate in nursing education or nursing administration (note that such certificate programs are not eligible for CCNE accreditation):

_____

**NCLEX-RN® Pass Rates**

Please identify the NCLEX-RN® pass rate for each campus/site and track for each of the three most recent calendar years (January 1-December 31)*

<table>
<thead>
<tr>
<th>Track</th>
<th>Campus/ Site</th>
<th>Year</th>
<th>Number of Students Taking NCLEX-RN® for 1st Time</th>
<th>NCLEX-RN® Pass Rate for 1st Time Test Takers</th>
<th>NCLEX-RN® Pass Rate for All Test Takers</th>
</tr>
</thead>
<tbody>
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</tbody>
</table>
Certification Pass Rates
Please identify the certification pass rate for each examination for which the program prepares graduates, for each of the three most recent calendar years (January 1-December 31)*

<table>
<thead>
<tr>
<th>Year</th>
<th>Certification Organization</th>
<th>Certification Exam (by population focus area)</th>
<th>Number Taking Exam</th>
<th>Certification Pass Rate</th>
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<tr>
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<th>Certification Organization</th>
<th>Certification Exam (by population focus area)</th>
<th>Number Taking Exam</th>
<th>Certification Pass Rate</th>
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</table>

<table>
<thead>
<tr>
<th>Year</th>
<th>Certification Organization</th>
<th>Certification Exam (by population focus area)</th>
<th>Number Taking Exam</th>
<th>Certification Pass Rate</th>
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</thead>
<tbody>
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</tbody>
</table>

*If data from all three years are not available due to the newness of the program, report the data that are available.

Program Completion and Employment Data

Baccalaureate Program (for the three most recent calendar years):

<table>
<thead>
<tr>
<th>Term/Year Of Graduation</th>
<th>Term/Year Of Admission</th>
<th># Students Admitted</th>
<th># Students Graduated+</th>
<th>% Students Graduated</th>
<th>% Graduates Employed++</th>
</tr>
</thead>
<tbody>
<tr>
<td>2016</td>
<td>FA16-41 / SP17-29</td>
<td>70</td>
<td>FA16-73 / SP17- 1</td>
<td>83%</td>
<td>86%</td>
</tr>
<tr>
<td>2015</td>
<td>FA15-29 / SP16-21</td>
<td>50</td>
<td>FA15-51 / SP16-3</td>
<td>73%</td>
<td>38%</td>
</tr>
</tbody>
</table>

+ Based on the entry point and time period to completion as defined by the program.
++Provide employment rate within 12 months of program completion.

Please explain how program completion rates are calculated:
Graduation rates are based on completion of the program in 4 semesters for full time and 7 semesters for part time. Specifically for the current calculation: FA12-1f/t / SP14-5/ FA13-4p/t / SP11-1 / SP08-1 / 12 Graduates from previous semesters not included in graduation rate.
### Master’s Program (for the three most recent calendar years):

<table>
<thead>
<tr>
<th>Term/Year Of Graduation</th>
<th>Term/Year Of Admission</th>
<th># Students Admitted</th>
<th># Students Graduated+</th>
<th>% Students Graduated</th>
<th>% Graduates Employed++</th>
</tr>
</thead>
<tbody>
<tr>
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</tr>
</tbody>
</table>

* Based on the entry point and time period to completion as defined by the program.
++Provide employment rate within 12 months of program completion.

Please explain how program completion rates are calculated:

---

### Doctor of Nursing Practice Program (for the three most recent calendar years):

<table>
<thead>
<tr>
<th>Term/Year Of Graduation</th>
<th>Term/Year Of Admission</th>
<th># Students Admitted</th>
<th># Students Graduated+</th>
<th>% Students Graduated</th>
<th>% Graduates Employed++</th>
</tr>
</thead>
<tbody>
<tr>
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</tbody>
</table>

* Based on the entry point and time period to completion as defined by the program.
++Provide employment rate within 12 months of program completion.

Please explain how program completion rates are calculated:

---

### Post-Graduate APRN Certificate Programs (for the three most recent calendar years):

<table>
<thead>
<tr>
<th>Term/Year Of Graduation</th>
<th>Term/Year Of Admission</th>
<th># Students Admitted</th>
<th># Students Graduated+</th>
<th>% Students Graduated</th>
<th>% Graduates Employed++</th>
</tr>
</thead>
<tbody>
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</tr>
</tbody>
</table>

* Based on the entry point and time period to completion as defined by the program.
++Provide employment rate within 12 months of program completion.

Please explain how program completion rates are calculated:

---
Nursing Program Faculty

CCNE recognizes that faculty may teach across program levels. Nonetheless, please estimate the faculty full-time-equivalent by program level for the academic year in which this form is submitted.

Identify the number (headcount) of faculty currently devoted to the nursing unit:

<table>
<thead>
<tr>
<th>Number Full-Time</th>
<th>Number Part-Time</th>
<th>Total Number of Faculty</th>
</tr>
</thead>
<tbody>
<tr>
<td>3</td>
<td>4</td>
<td>7</td>
</tr>
</tbody>
</table>

Identify the faculty full-time-equivalent (FTE) currently devoted to the baccalaureate degree program:

<table>
<thead>
<tr>
<th>Full-Time FTE</th>
<th>Part-Time FTE</th>
<th>Total Faculty FTE</th>
</tr>
</thead>
<tbody>
<tr>
<td>3</td>
<td>4</td>
<td>7</td>
</tr>
</tbody>
</table>

Identify the faculty full-time-equivalent (FTE) currently devoted to the master’s degree program:

<table>
<thead>
<tr>
<th>Full-Time FTE</th>
<th>Part-Time FTE</th>
<th>Total Faculty FTE</th>
</tr>
</thead>
</table>

Identify the faculty full-time-equivalent (FTE) currently devoted to the Doctor of Nursing Practice program:

<table>
<thead>
<tr>
<th>Full-Time FTE</th>
<th>Part-Time FTE</th>
<th>Total Faculty FTE</th>
</tr>
</thead>
</table>

Identify the faculty full-time-equivalent (FTE) currently devoted to the post-graduate APRN certificate program:

<table>
<thead>
<tr>
<th>Full-Time FTE</th>
<th>Part-Time FTE</th>
<th>Total Faculty FTE</th>
</tr>
</thead>
</table>
Additional Campuses/Sites
Identify any additional campuses/sites where the nursing degree/certificate program is offered (within the United States and/or internationally), the distance from the main campus (unless outside the United States), the average number of nursing students currently enrolled at each location, and the programs offered at each location.

<table>
<thead>
<tr>
<th>Campus/Site (City, State/Country)</th>
<th>Distance From Main Campus (in miles)</th>
<th>Number of Students Enrolled</th>
<th>Programs Offered (check all that apply)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>☐ Baccalaureate Degree Program</td>
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<td></td>
<td></td>
<td></td>
<td>☐ Master’s Degree Program</td>
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<td>☐ Doctor of Nursing Practice Program</td>
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<td>☐ Post-Graduate APRN Certificate Program</td>
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<td></td>
<td>☐ Baccalaureate Degree Program</td>
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<td>☐ Master’s Degree Program</td>
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<td></td>
<td>☐ Post-Graduate APRN Certificate Program</td>
</tr>
</tbody>
</table>

Please provide a brief description of any nursing degree/certificate program that is offered at a campus/site located outside of the United States:

Professional Nursing Standards and Guidelines

Baccalaureate Program:

Identify the professional nursing standards/guidelines that are used by the baccalaureate program (note different dates of documents):

*The Essentials of Baccalaureate Education for Professional Nursing Practice* (AACN, 2008)
☒ yes  ☐ no  ☐ not applicable (no baccalaureate offerings)

Other (please specify):
Master’s Program:

Identify the professional nursing standards/guidelines that are used by the master’s program:

*The Essentials of Master’s Education in Nursing* (AACN, 2011)
☐ yes  ☐ no  ☐ not applicable (no master’s offerings)

*Criteria for Evaluation of Nurse Practitioner Programs* (National Task Force on Quality Nurse Practitioner Education, 2012)
☐ yes  ☐ no  ☐ not applicable (no nurse practitioner offerings)

Other (please specify):

Doctor of Nursing Practice Program:

Identify the professional nursing standards/guidelines that are used by the Doctor of Nursing Practice program:

*The Essentials of Doctoral Education for Advanced Nursing Practice* (AACN, 2006)
☐ yes  ☐ no  ☐ not applicable (no DNP offerings)

*Criteria for Evaluation of Nurse Practitioner Programs* (National Task Force on Quality Nurse Practitioner Education, 2012)
☐ yes  ☐ no  ☐ not applicable (no nurse practitioner offerings)

Other (please specify):

Post-Graduate APRN Certificate Program:

*Criteria for Evaluation of Nurse Practitioner Programs* (National Task Force on Quality Nurse Practitioner Education, 2012)
☐ yes  ☐ no  ☐ not applicable (no nurse practitioner offerings)

Other (please specify):

___
Distance Education
The Commission utilizes the definition of distance education established in the Higher Education Opportunity Act of 2008, as follows:

(A) Education that uses one or more of the technologies described in subparagraph (B)—
   (i) to deliver instruction to students who are separated from the instructor; and
   (ii) to support regular and substantive interaction between the students and the instructor, synchronously or asynchronously.

(B) INCLUSIONS.—For the purposes of subparagraph (A), the technologies used may include—
   (i) the Internet;
   (ii) one-way and two-way transmissions through open broadcast, closed circuit, cable, microwave, broadband lines, fiber optics, satellite, or wireless communications devices;
   (iii) audio conferencing; or
   (iv) video cassettes, DVDs, and CD-ROMs, if the cassettes, DVDs, or CD-ROMs are used in a course in conjunction with any of the technologies listed in clauses (i) through (iii). The Higher Education Opportunity Act of 2008, Pub. L. No. 110-315, § 103(a)(19)

Does the nursing unit currently offer curricula (or any part thereof) via distance education, as defined above?

Baccalaureate Degree Program (check one): ☒ yes ☐ no ☐ not applicable

If yes, please provide a brief (one paragraph) description of the distance learning offerings at the baccalaureate level:

All of our courses have recorded or live lectures through Zoom. Students can opt to log into the class and listen and ask questions of the faculty via email, messaging or phone. Courses have been developed to be conducted in an asynchronous format. Communication between the faculty and students is facilitated through discussion boards, feedback on all assignments and through the course email and phone calls if needed. Faculty are committed to being accessible to students and respond within designated time periods.

If yes, is 50% or more of the required academic credit hours in nursing (excluding practica) accrued through distance education activities? ☒ yes ☐ no

Master’s Degree Program (check one): ☐ yes ☐ no ☐ not applicable

If yes, please provide a brief (one paragraph) description of the distance learning offerings at the master’s level:

If yes, is 50% or more of the required academic credit hours in nursing (excluding practica) accrued through distance education activities? ☐ yes ☐ no

Doctor of Nursing Practice Program (check one): ☐ yes ☐ no ☐ not applicable
If yes, please provide a brief (one paragraph) description of the distance learning offerings in the Doctor of Nursing Practice program:

---

If yes, is 50% or more of the required academic credit hours in nursing (excluding practica) accrued through distance education activities?  ☐ yes  ☐ no

Post-Graduate APRN Certificate Program (check one):  ☐ yes  ☐ no  ☐ not applicable

If yes, please provide a brief (one paragraph) description of the distance learning offerings in the post-graduate APRN certificate program:

---

If yes, is 50% or more of the required academic credit hours in nursing (excluding practica) accrued through distance education activities?  ☐ yes  ☐ no
Continuous Improvement Progress Report (CIPR)

Standards for Accreditation of Baccalaureate and Graduate Nursing Programs

Official Name of Institution: New Mexico Highlands University
Checklist for Writing the CIPR

☐ the font size must be a minimum of 10;

☐ the Program Response must be single spaced;

☐ the document must be no longer than 50 pages (the appendices are excluded from the page limit);

☐ the institution must provide a Program Response for each key element/elaboration statement;

☐ the Program Response to each key element/elaboration statement must adequately address all nursing degree programs and/or post-graduate APRN certificate programs that were directed to submit the CIPR; and

☐ the standard, key element, and elaboration statements provided in the CIPR template must not be altered or deleted by the institution.
Continued Compliance with CCNE Standards & Key Elements

Introduction

In one page or less, summarize under “Program Response” major events that have occurred at the institutional and/or program level since the most recent CCNE on-site evaluation. Include a description of changes at the parent institution if they have had a significant impact on the program.

Program Response:

Institutional Level Events:

Effective August 31, 2016, New Mexico Highlands University was placed on probation by the Higher Learning Commission (HLC) because the University was out of compliance with some of the HLC’s Criteria for Accreditation. The concerns related to staffing and institutional support, assessment of student learning, student retention and completion rates, governance, and institutional planning. More information can be found at: http://www.nmhu.edu/accreditation-information/. The University has set up work groups for each area of concern to address issues and write the Assurance Argument. The HLC will visit campus on November 6-8, 2017 to inspect the assurance filing. The expectation is that the HLC Board will meet in June 2018 to take final action on the filing. The probation did not affect the nursing program and current students and applicants are notified of this status of the university.

Program Level Events:

In January 2017, a new Director, Jeanie Flood, PhD, RN, IBCLC, was hired to replace retiring Director and program founder Dr. Susan Williams. The new Director position is now tenure track and will continue to be 50% Director and 50% faculty. A Substantive Change Notification was submitted to CCNE in January regarding the change in leadership. In addition to a new Director, two additional faculty were hired. A tenure track full time professor and a part time recurring term faculty. For the first time, the department now has two tenure track PhD faculty eligible to serve on the faculty senate and represent the department on university committees. In addition, in accordance with the faculty Collective Bargaining Agreement, the Director of Nursing was elected Department Chair and will now represent the Department within the College of Arts and Sciences.
Assessment by Standard

Following each key element statement, please provide evidence demonstrating continued compliance. Additionally, summarize any pertinent changes or program improvement initiatives that have occurred since the last comprehensive on-site evaluation by CCNE. Before completing this template, refer to CCNE’s FAQs and Guidelines for Preparing the Continuous Improvement Progress Report.

Were you requested to address any specific areas of focus/concern (e.g., a compliance concern at the key element level) according to the most recent CCNE accreditation action letter? If so, please note the specific areas of focus/concern here by indicating which key element(s) this translates to in the 2013 CCNE Standards: We received a letter stating compliance concerns regarding Standard IV-F. This standard was addressed and a letter sent to CCNE with the program response in March of 2017. The updated response is included in this report.

[Please contact CCNE if you need a copy of the most recent accreditation action letter. Refer to the reminder email to access the Crosswalk Table showing the relationship between the former (2009) CCNE Standards and the current (2013) CCNE Standards.]

A response must be provided for each standard and key element below. Give special attention to any specific areas of focus/concern that were identified previously in the CCNE accreditation action letter.
**Standard I**

**Program Quality: Mission and Governance**

The mission, goals, and expected program outcomes are congruent with those of the parent institution, reflect professional nursing standards and guidelines, and consider the needs and expectations of the community of interest. Policies of the parent institution and nursing program clearly support the program’s mission, goals, and expected outcomes. The faculty and students of the program are involved in the governance of the program and in the ongoing efforts to improve program quality.

I-A. The mission, goals, and expected program outcomes are:

V. congruent with those of the parent institution; and

VI. consistent with relevant professional nursing standards and guidelines for the preparation of nursing professionals.

Elaboration: The program’s mission statement, goals, and expected program outcomes are written and accessible to current and prospective students, faculty, and other constituents. Program outcomes include student outcomes, faculty outcomes, and other outcomes identified by the program. A mission statement may relate to all nursing programs offered by the nursing unit or specific programs may have separate mission statements. Program goals are clearly differentiated by level when multiple degree/certificate programs exist. Student outcomes may be expressed as competencies, objectives, benchmarks, or other terminology congruent with institutional and program norms.

The program identifies the professional nursing standards and guidelines it uses. CCNE requires, as appropriate, the following professional nursing standards and guidelines:

I. *The Essentials of Baccalaureate Education for Professional Nursing Practice* [American Association of Colleges of Nursing (AACN), 2008];

II. *The Essentials of Master’s Education in Nursing* (AACN, 2011);

III. *The Essentials of Doctoral Education for Advanced Nursing Practice* (AACN, 2006); and

IV. *Criteria for Evaluation of Nurse Practitioner Programs* [National Task Force on Quality Nurse Practitioner Education (NTF), 2012].

A program may select additional standards and guidelines.

A program preparing students for certification incorporates professional standards and guidelines appropriate to the role/area of education.

An APRN education program (degree or certificate) prepares students for one of the four APRN roles and in at least one population focus, in accordance with the Consensus Model for APRN Regulation: Licensure, Accreditation, Certification and Education (July 2008).

**Program Response:**

NMHU adopted a new mission statement which was approved in the Spring of 2016. The mission or purpose of New Mexico Highlands University (NMHU) is to provide opportunities for undergraduate and graduate students to attain an exceptional education by fostering creativity, critical thinking, and research within a diverse community. The mission and philosophy of the Department of Nursing at NMHU supports the mission of NMHU in providing a learning environment that is responsive to the needs of a diverse student population and that stresses rigorous high-quality education. Congruence of the University’s mission and strategic goals for 2020 with the Department of Nursing’s mission, program goals and outcomes are summarized in Table I-A I.

Within the program outcomes, the Department of Nursing has identified the expected competencies and levels of proficiency to be attained by a student for graduating from the baccalaureate nursing program. These nursing program outcomes (Appendix A) are contained in the
2016/2017 RN to BSN student handbook and are also discussed throughout the courses in the nursing curriculum. The department measures 2014/2015 and 2016/2017 program outcomes by our nursing graduates in Skyfactor. The objectives and assignments for measuring competencies are also included in the course syllabi.

The NMHU Department of nursing continues to utilize the American Association of Colleges of Nursing Essentials of Baccalaureate Education for Professional Nursing Practice (AACN, 2008) as the professional standards that guide the program. The nursing faculty espouses the view that these standards provide and, indeed reflect, the most comprehensive view of professional nursing education outcomes. The Nursing Essentials of Baccalaureate Education for Professional Nursing Practice (AACN, 2008) and other documents such as the Crossing the Quality Chasm: IOM Health Care Quality Initiative and Health Professionals Education: A Bridge to Quality (2003), have served as guidelines as the Department developed the program philosophy and outcomes. These documents have helped shape our department’s curriculum and are incorporated throughout many parts of our curriculum.

The NMHU Department of Nursing’s mission, philosophy, conceptual framework, and program outcomes found to be congruent with each of these professional nursing standards and guiding documents as shown in Appendix B.
Table I-A 1
Sample of Congruence Among NMHU’s Mission and Goals and the Department’s RN-BSN Program Mission, Goals and Outcomes (2017)

<table>
<thead>
<tr>
<th>University Mission</th>
<th>Program Mission</th>
</tr>
</thead>
<tbody>
<tr>
<td>New Mexico Highlands University is a public comprehensive university serving our local and global communities. Our mission is to provide opportunities for undergraduate and graduate students to attain an exceptional education by fostering creativity, critical thinking and research in the liberal arts, sciences, and professions within a diverse community</td>
<td>The mission of the Department of Nursing is to prepare quality health care providers through excellence in education, scholarship, and service. This program builds on the strength of the licensed registered nurse and challenges the individuals enrolled in this program to expand their critical thinking for new professional nursing roles, methods of health care delivery, and approaches to health care practice issues.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>University Core Values</th>
<th>University Strategic Goals</th>
<th>Program Goals</th>
<th>Program Outcomes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Excellence</td>
<td>Academic excellence, academic integration and student success</td>
<td>Incorporates leading edge technology developments into the nursing curriculum and teaching methodology of the faculty in the nursing department.</td>
<td>Incorporate evidence based nursing interventions when planning and providing care for individuals, families, and populations.</td>
</tr>
<tr>
<td></td>
<td>Technological advancement and innovation</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Diversity</td>
<td>Community Partnerships</td>
<td>Promote a curriculum that educates nurses in cultural sensitivity and that emphasizes the practice of nursing in Hispanic, Native American, and global cultures.</td>
<td>Promote achievement of safe and quality outcomes for diverse populations.</td>
</tr>
<tr>
<td></td>
<td>Vibrant campus and community life</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Accessibility</td>
<td>Strategic enrollment management</td>
<td>Develop effective and efficient academic and administrative processes, systems, and structures that continuously improve our total program, including the advising and recruitment processes and the everyday delivery of the program.</td>
<td>Use interdisciplinary and intradisciplinary collaborative strategies to produce professional working relationships.</td>
</tr>
<tr>
<td>Responsiveness</td>
<td>Enhanced communication and efficiency</td>
<td>Develop a learner-centered environment that promotes inquiry, critical thinking, and personal development of our nursing students.</td>
<td>Apply information literacy and health care technology to address the need of patients, organizations, and health care delivery systems.</td>
</tr>
</tbody>
</table>
I-B. The mission, goals, and expected student outcomes are reviewed periodically and revised, as appropriate, to reflect:

I. professional nursing standards and guidelines; and
II. the needs and expectations of the community of interest.

*Elaboration:* There is a defined process for periodic review and revision of program mission, goals, and expected student outcomes. The review process has been implemented and resultant action reflects professional nursing standards and guidelines. The community of interest is defined by the nursing unit. The needs and expectations of the community of interest are reflected in the mission, goals, and expected student outcomes. Input from the community of interest is used to foster program improvement.

**Program Response:**

In 2014, the program updated the Policy and Procedure for curricular evaluation which demonstrates step by step when the mission, goals and other program aspects should be evaluated and how this will affect program change (See Appendix C). Due to the recent changes in the Director and addition of new faculty, this curricular evaluation plan was reviewed in the Spring 2017 and a calendar was created to schedule reviews to the various program components. Initially, all components will be reviewed in the Fall of 2017. Thereafter, the timeline will include scheduled review dates.

The University released a new Vision 2020 and Mission Statement and updated the university strategic goals in the Spring of 2016. After a review of the new university strategic goals, the faculty reviewed and updated the department strategic goals to ensure congruency between the university and department strategic plans in August of 2016.

To obtain external review and community feedback, historically, the department met with the Luna Community College/NMHU advisory committee. The external communities of interest included employers, contracted clinical agencies, professional organizations, regulatory bodies, center staff, and alumni. Forums, such as the Nursing Advisory Board, allow communities of interest to provide feedback regarding all aspects of the curriculum. The faculty discussed the creation of a separate NMHU Nursing Advisory Board to explore needs of the program and community as the program moves forward. The Director recently met with the Nurse Manager and CEO of a new healthcare facility in Santa Fe to explore how our program can meet the community needs. Since the local community healthcare base is small and our students reside across the state, the pool of participants for the advisory board will include the staff at NMHU centers located across the state. The department is exploring the use of the software conferencing program Zoom to have this advisory meeting as a virtual meeting since initially this may be expanded statewide to reflect the communities where our students are employed. Eventually the board will include other entities as our program expands regionally with students from other states.
I-C. Expected faculty outcomes are clearly identified by the nursing unit, are written and communicated to the faculty, and are congruent with institutional expectations.

*Elaboration: The nursing unit identifies expectations for faculty, whether in teaching, scholarship, service, practice, or other areas. Expected faculty outcomes are congruent with those of the parent institution.*

**Program Response:**

Faculty expectations are clearly delineated to both the full-time tenure track faculty and full and part-time contingent faculty. NMHU defines tenure track faculty as ranked faculty and consists of Assistant, Associate, and Professor. Retained term contract is generally set for one year but there is an employee expectation of re-employment, unless given notice. Contingent faculty, formerly referred to as adjunct faculty, typically receive a one semester term contract. Contingent and retained term faculty have duties associated with teaching and generally do not include responsibilities required of ranked faculty (NMHU Faculty Handbook). Although contingent faculty are not covered under the Collective Bargaining Agreement (CBA), many of the policies are in alignment with that document. All faculty are held to the same standards of excellence as their tenured and tenure-track peers. Guidelines and polices for retained term and contingent faculty are in the newly developed Contingent Faculty Handbook. With implementation of the Contingent Faculty Handbook in 2016, all contingent faculty are evaluated annually by the department chair. In the Fall of 2017, the nursing department director and faculty jointly developed a Benchmark Process tool for establishing and measuring faculty outcomes. The benchmark form is located in Appendix D. The tool was adapted to reflect three areas identified by in the NMHU faculty handbook for faculty evaluation. The three areas are Teaching and Advisement, Scholarship, and Professional University, and Community Service. The Department of Nursing Benchmark Process will be completed annually by all faculty.

The evaluation process will assist the Department of Nursing to carry out its mission of “to prepare quality nurse health care providers through excellence in education, scholarship and service.” The faculty expectations have built on this and the expectations operationalize the mission. It is clear what the expectations are for the faculty within the department.

I-D. Faculty and students participate in program governance.

*Elaboration: Roles of the faculty and students in the governance of the program, including those involved in distance education, are clearly defined and promote participation. Nursing faculty are involved in the development, review, and revision of academic program policies.*

**Program Response:**

All faculty members and students are able to participate in Nursing Program governance. The faculty members and the Director typically work together at scheduled faculty meetings on issues affecting governance. Meetings for the spring semester 2017 were held weekly initially and then monthly. Minutes of these meetings are available on SharePoint, a shared drive for which all faculty have access. Each faculty member has a vote at departmental meetings and majority rule is followed. However, decisions within a small faculty group are usually through consensus. Contingent faculty members are included in the faculty meetings and participate in the voting process if their schedule allows by conferencing them in live through the conferencing software, Zoom.

Outside of the Department of Nursing, faculty members may volunteer for participation in events and certain committees that affect decisions of the University community at large. Membership
on certain of NMHU’s committees require only tenured or tenure track faculty, so the contingent nursing faculty are not eligible to vote, but may attend most committee meetings. The Director, who is also Department Chair, represents the Department to the College of Arts and Sciences, Faculty Senate, the University Instructional Technology Committee and other university activities such as freshman orientation. Since the hiring of new faculty was midpoint in the year, the other tenure track faculty will have the opportunity to join university committees in the Fall of 2017.

Similarly, students have opportunity for informal and formal input into the governance of the nursing program. Students regularly provide input and feedback through course evaluations, which are completed at the end of each course. Also, students may provide immediate and ongoing input to the faculty instructor through email, phone or zoom conferencing. A few minutes of each class on-line session is spent giving an update or answering any questions students may have. The University Student Council is another area whereby nursing students may be involved in University governance. Commitment by nursing students to this governance body depends on the availability and interest of nursing students who are typically working fulltime, while also attending to their academic studies. It is not unusual for nursing student participation in University governance to be difficult to manage and minimal. With the emphasis on on-line nursing education, having student participation remains vital, albeit challenging. The department receives input from graduating seniors through the AACN/Benchworks Undergraduate Nursing Education Exit Survey accessed through Skyfactor. This feedback is used in program evaluation and updates.

I-E. Documents and publications are accurate. A process is used to notify constituents about changes in documents and publications.

Elaboration: References to the program’s offerings, outcomes, accreditation/approval status, academic calendar, recruitment and admission policies, grading policies, degree/certificate completion requirements, tuition, and fees are accurate. Information regarding licensure and/or certification examinations for which graduates will be eligible is accurate. For APRN education programs, transcripts or other official documentation specify the APRN role and population focus of the graduate.¹ ²

If a program chooses to publicly disclose its CCNE accreditation status, the program uses either of the following statements:

“The (baccalaureate degree in nursing/master's degree in nursing/Doctor of Nursing Practice and/or post-graduate APRN certificate) at (institution) is accredited by the Commission on Collegiate Nursing Education, One Dupont Circle, NW, Suite 530, Washington, DC 20036, 202-887-6791.”

“The (baccalaureate degree in nursing/master's degree in nursing/Doctor of Nursing Practice and/or post-graduate APRN certificate) at (institution) is accredited by the Commission on Collegiate Nursing Education (http://www.aacn.nche.edu/ccne-accreditation).”

Program Response:

¹ Consensus Model for APRN Regulation: Licensure, Accreditation, Certification and Education (July 2008).

All documents and publications are reviewed for accuracy and timeliness according to the timetable outlined in Table I-E I. Other information is made available to students through publications which include the NMHU nursing program website, university catalog and recruitment brochures. The director, department secretary and recruiting advisor review publications annually to insure they are accurate and up to date.

Table I-E I
Timetable for Review of Documents for the Program.

<table>
<thead>
<tr>
<th>Document</th>
<th>Review timeframe</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Program Offerings and Outcomes</td>
<td>Curriculum and program objectives are reviewed on a three year cycle. Changes are made if necessary. Program offerings are also displayed on the Department website and are updated if changes are made. NMHU catalog changes are made every two years and are coordinated by the Registrar.</td>
</tr>
<tr>
<td>b. Accreditation Status/Reports</td>
<td>Status is monitored by the Director of the Department of Nursing and a progress report and re-accreditation self-study reports will be submitted as required.</td>
</tr>
<tr>
<td>c. Academic Calendar</td>
<td>Prepared by the University. Available on NMHU website under Current Students: Academic Calendar and in the Student Handbook.</td>
</tr>
<tr>
<td>d. Recruitment Policies</td>
<td>Policies are reviewed every two years or as needed.</td>
</tr>
<tr>
<td>e. Admission Policies</td>
<td>Policies are reviewed every two years or as needed.</td>
</tr>
<tr>
<td>f. Grading Policies</td>
<td>Policies are reviewed every two years or as needed.</td>
</tr>
<tr>
<td>g. Degree Completion Requirements</td>
<td>Requirements for the program were submitted to the NMHU Academic Affairs council for approval in Fall 2007. Policies will be reviewed every three years or as needed.</td>
</tr>
<tr>
<td>h. Tuition and Fees</td>
<td>Changed only by the Board of Regents. Tuition and fees structure found in the current catalog and at the NMHU website under Current Students: Tuition. Links are provided on our promotional material to this site for current fees.</td>
</tr>
</tbody>
</table>

The faculty members and the director of the NMHU nursing program fully believe that all program information and policies must be accurate in their content and consistent in their information as accessed by all relevant constituencies. When minor changes to the curriculum are approved, such changes are immediately incorporated into the appropriate documents and documented in minutes. Immediate and direct verbal and written notification is given to all nursing students. Also, the necessary administrative and technical personnel are apprised in a timely and appropriate manner.

Major curricular or program changes progress through the channels for approval above the departmental level and beyond as required by the University according to the NMHU Faculty Handbook,
Academic Affairs Committee. Such changes are addressed in the Department minutes as well as those minutes of the subsequent approval bodies. These results are communicated to students, and to the necessary administrative and technical personnel, who are responsible for updating such information as produced and disseminated by the University. Since this is a small rural community, many university events (i.e., hiring a new nursing director) are covered in the local newspaper.

I-F. Academic policies of the parent institution and the nursing program are congruent and support achievement of the mission, goals, and expected student outcomes. These policies are:
- fair and equitable;
- published and accessible; and
- reviewed and revised as necessary to foster program improvement.

*Elaboration: Academic policies include, but are not limited to, those related to student recruitment, admission, retention, and progression. Policies are written and communicated to relevant constituencies. Policies are implemented consistently. Differences between the nursing program policies and those of the parent institution are identified and support achievement of the program’s mission, goals, and expected student outcomes. A defined process exists by which policies are regularly reviewed. Policy review occurs and revisions are made as needed.*

Program Response:

Congruence exists between the policies of the parent institution and the Nursing Program. In developing the student and faculty policies for the Department of Nursing at NMHU, there has been, and continues to be, painstaking consideration of both the language and the spirit of published University Mission and Strategic Goals along with careful consideration of the Department’s position within the University. These considerations were essential so that consistency between and among all necessary policies and written documents would be evident and correct. Table I-E I earlier in this section of this document, highlights the congruence of the new mission, vision, and goals of the University and the Department of Nursing. Students must be admitted to both the University and to the nursing program. Since the Nursing Department is a small department, the University policies are followed for most procedures and policies. To date, there have been no controversial issues or points of contention between University policy interpretation and implementation of those by the Department of Nursing.

All Department policies are reviewed at least every three years or as needed. Of course, such a review would be implemented more frequently if necessary. An example of this might occur in addressing a change in University policy that affects a curriculum issue. Such an issue might require timely attention and might not lend itself to a delay until the next scheduled departmental review.
Standard II
Program Quality: Institutional Commitment and Resources

The parent institution demonstrates ongoing commitment to and support for the nursing program. The institution makes resources available to enable the program to achieve its mission, goals, and expected outcomes. The faculty, as a resource of the program, enable the achievement of the mission, goals, and expected program outcomes.

II-A. Fiscal and physical resources are sufficient to enable the program to fulfill its mission, goals, and expected outcomes. Adequacy of resources is reviewed periodically and resources are modified as needed.

Elaboration: The budget enables achievement of the program’s mission, goals, and expected outcomes. The budget also supports the development, implementation, and evaluation of the program. Compensation of nursing unit personnel supports recruitment and retention of qualified faculty and staff. Physical space is sufficient and configured in ways that enable the program to achieve its mission, goals, and expected outcomes. Equipment and supplies (e.g., computing, laboratory, and teaching-learning) are sufficient to achieve the program’s mission, goals, and expected outcomes.

A defined process is used for regular review of the adequacy of the program’s fiscal and physical resources. Review of fiscal and physical resources occurs and improvements are made as appropriate.

Program Response:

The University’s resources are available and heavily utilized by the Department of Nursing to fulfill and enhance its goals. The Department has access to the resources available to all University students and faculty. Specific resources utilized by the program have been the library’s acquisition staff, IT assistance with equipment and network needs and HR assistance in hiring new faculty and staff. The Director and the Recruiter/Advisor Coordinator work closely with the Registrar as all the students in the nursing program are transfer students to campus. The university Budget Director and Vice President for Finance and Administration assist the program director with yearly budget development. A process is in place for budget planning and adjustment requests as needed.

Fiscal Resources: Annual reviews of budgets are conducted by the nursing department before each annual budget request is made for our department in Fall of each year and sent to the University finance department. This is also cross-referenced with our strategic plan to match our goals and actions to fiscal needs. Since the original accreditation review, the department has moved from a budget supported with state supplemental nursing funds (Nurse Enhancement Funds) at a 68% level to the budget in 2011-2012 fiscal years and to the Department being supported 80% by New Mexico Highlands University and 20% by state supplemental Nurse Enhancement funds. All nursing programs in the state receive funds from the state legislature to enhance faculty retention and student recruitment. The University has shown their support and commitment to the nursing program by now financially supporting the program through the state University Budget. See Table II-A 1 which shows the most recent budget allocations. The State of New Mexico has not finalized the budget for the 2017/2018 academic year. The final outcome is still pending but cuts to higher education in the state are expected. The NMHU Board of Regents recently approved tuition increases to offset expected cuts.
TABLE II-A I
Department of Nursing Budget Allocation
2013-2017

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<tbody>
<tr>
<td>Highlands University Contribution</td>
<td>$283,037.00</td>
<td>$417,945.00</td>
<td>$419,460.00</td>
<td>$416,210.00</td>
</tr>
<tr>
<td>NMHED Nurse Enhancement Funds</td>
<td>$66,207.00</td>
<td>$65,900.00</td>
<td>$65,900.00</td>
<td>$64,300.00</td>
</tr>
</tbody>
</table>

The prepared budget provides and supports an environment that enables the nursing program to grow and achieve the mission, philosophy, and the outcomes of the program objectives, even with growth in our program. In 2016, the university supported nursing as one of two departments that received faculty positions as part of the strategic plan. The university has expressed support for the expansion the program. The budget also includes conference registration fees and travel for the director and faculty.

**Physical Resources:** The Department of Nursing is housed in the Engineering Building on campus. The Department currently occupies three offices and a reception area in the east end of the building. Three additional offices (available for contingent faculty, full time faculty and the nursing recruiter/advisor) are also located in the building. As a 100% online program, the Department currently uses the nursing classroom for faculty meetings with video conferencing capacity for faculty located off site. Zoom Web Conferencing Program is available to all faculty and is integrated into Desire2Learn, the university online teaching platform. This Zoom web conferencing software has been used by all faculty onsite and including faculty for health assessment class to demonstrate techniques and procedures which were captured visually and recorded for the student. It is also used to coordinate practicums to maintain consistency when there are multiple faculty teaching different sections.

Other resources utilized by staff and faculty are network systems for electronic mail both within and outside the university and for other computer resource capabilities such as library access, the Internet and the course online learning management system, Desire2Learn. Laptops are available for faculty as needed.

II-B. Academic support services are sufficient to ensure quality and are evaluated on a regular basis to meet program and student needs.

*Elaboration:* Academic support services (e.g., library, technology, distance education support, research support, admission, and advising services) are adequate for students and faculty to meet program requirements and to achieve the mission, goals, and expected program outcomes. There is a defined process for regular review of the adequacy of the program’s academic support services. Review of academic support services occurs and improvements are made as appropriate.

**Program Response:**

**Library Resources:** The Library resources are housed in the Thomas C. Donnelly Library facility on the main campus at Highlands University. The Library and staff have worked with the Director to build the resources of the library and including primarily electronic resources for nursing. An emphasis
has been put on acquiring journals and databases rather than books as library resources are being built for the department. Databases that are pertinent to nursing are CINAHL Complete (EBSCO), Biomed Central, Films on Demand – Allied Health, Health Reference Center Academic (Gale) and Medline. General databases such as Academic Search Premier and ProQuest Research Library are also available. There is a move to online journal editions so more students will be able to access subscribed journals. This meets the needs of students who often live in various parts of the state. Through interlibrary loan the students have access to any journal article and can be requested online. Delivery time is very quick.

The acquisition of additional databases and books is viewed as based on utilization with each year building on what has been acquired and selecting new references, books, DVD’s, journals and databases. The Resource Librarian conducts training for all our online students in the use of electronic databases through a class session in Nurs 310 the RN to BSN Bridge Course with a taped Zoom presentation. This session has been archived so students can refer to this training if they have trouble searching the databases. The library has links to research resources which facilitate student access to library materials. In addition, the reference librarian is available to assist students in their literature search for papers and faculty seeking material to incorporate in their teaching.

**Technology Resources:** The use of technology is in integral part of the Department of Nursing and is identified as part of one of our organizing framework principles of utilizing informatics. The IT Department is responsible for equipment, i.e. computers, phones, hardware and networks for all systems. Each building is assigned a designated IT technician to assist the departments in that building with equipment needs and network and technical support. For the purchase of any new technology equipment the IT Department must be consulted and define the appropriate equipment and obtain the bid for the Nursing Department. This allows systems all over campus to be compatible. All IT work orders are placed electronically and then assigned to an IT person. The IT Department also is responsible for the HELP line for IT problems, phone issues and any computer problems for students, staff and faculty. It is staffed during week from 8am-5pm with additional hours on the weekend. The Nursing Department is also included in several campus site licenses for software which the IT Department purchased such as Respondus for Test Construction, and Zoom live conferencing software. Laptop computers are available for faculty when they travel and as a loaner if students have computer problems.

**Educational Outreach Support:** The Educational Outreach Department is responsible for all distance education courses that are taught thorough the University. This Department provides training for faculty on Desire2Learn. The new Director has a background of teaching online for the past 13 years, so along with many of the faculty, has experience using online software. There is also a help desk staffed from 8am-7pm weekdays and on weekends to assist faculty and students on the use of Desire2Learn and other software of the University. Faculty development is also available through the UNIDOS Equity Leadership Institute.

**Research Support:** The Office of Research and Sponsored Projects is designed to provide high quality support and administrative expertise to faculty, staff and students working with research sponsored projects. In addition, ORSP supervises pre- and post-award activity to ensure compliance with university, state and federal regulations. The Nursing Department has been supported by this department in identifying grants for nursing as well as sending the previous Director to a technical workshop for HRSA grants.

**Teaching Support:** Resources for faculty development and support are available from the Center for Teaching Excellence. The Center of Teaching Excellence includes handbooks, policies and journal articles on teaching and as well as a calendar of events for faculty development.

**Admission and Advising Services:** All the University’s resources are available to the nursing students. Selected University resources that are of special interest and utilized by the nursing students include: Student Financial Aid Services, Writing Center, Tutoring Center, Office of Disability Services, the
Registrar’s office and the Business office. NMHU nursing students typically work with the department recruiter/advisor to obtain help from these departments. More extensive student support service descriptions are detailed in the NMHU Student Handbook available on the NMHU website under student resources. A copy is given to all students in their first nursing course. Most direct student advising is done by phone and email with the recruiter/advisor. Once a student has been accepted into the program, faculty members are available for advising.

The Financial Aid office is working with the Department to look for scholarships for nursing students and to determine what scholarships from the University’s Foundation the students are eligible for. Because most the nursing students are part-time and taking 6-9 semester hours, many scholarships are not available to the students which is regrettably typical for the non-traditional student. Additional financial aid is being explored with the New Mexico Higher Education Department Forgiveness Loan Program and institutions in the state. The Department is especially interested in the employer’s contribution and the assistance to staff returning to school is part of our ongoing discussions with community partners. This is an area that the program, the program advisory group and the University Foundation hope to work on for additional scholarships.

Nursing Student Advising: A recruiter/advisor position in the department was created in 2009 to assist the Director in all the recruitment, application and advisement activities with current and prospective students. Additionally, NMHU has an admission/d recruitment office that works with the nursing department in admission/recruitment efforts. The Director and the nursing advisor sit down each month and prioritize the recruitment tasks for each designated month. This person is available to prospective students, faculty and the Director to assist students to learn about the program, work through the application process and advise students currently enrolled in the program. The Recruiter/Advisor prepares all prospective students’ applications and evaluates transcripts to develop a program of study for each student. In addition, she travels throughout the state to attend recruitment fairs and provides prospective students with packets containing program information and application materials. The application process can be done on line or in person. The Director and the Recruiter/Advisor review applications and select all new students for the program. This person is a vital resource for the department.

II-C. The chief nurse administrator:
1. is a registered nurse (RN);
2. holds a graduate degree in nursing;
3. holds a doctoral degree if the nursing unit offers a graduate program in nursing;
4. is academically and experientially qualified to accomplish the mission, goals, and expected program outcomes;
5. is vested with the administrative authority to accomplish the mission, goals, and expected program outcomes; and
6. provides effective leadership to the nursing unit in achieving its mission, goals, and expected program outcomes.

Elaboration: The administrative authority of the chief nurse administrator is comparable to that of chief administrators of similar units in the institution. He or she consults, as appropriate, with faculty and other communities of interest to make decisions to accomplish the mission, goals, and expected programs outcomes. The chief nurse administrator is perceived by the communities of interest to be an effective leader of the nursing unit. The program provides a rationale and a plan to come into compliance if the chief nurse administrator does not hold a graduate degree in nursing and a doctoral degree (if applicable).

Program Response:
The chief nursing administrator is qualified to develop and lead the program in the pursuit of accomplishing the mission, strategic goals and expected program outcomes.

The Director of the RN-BSN program is the Chief Academic Officer of the Nursing Department and has authorities and duties delegated for this purpose from the Vice-President of Academic Affairs and the Dean of the College of Arts and Science. The Director reports to the Dean of Arts and Sciences. The Director provides liaison for the Department of Nursing to other academic and administrative units of the University, to community agencies appropriate to the educational mission of the Department, and to evaluation and accreditation organizations related to nursing education.

The Director is responsible for and has the authority to perform the administrative duties of the department (see Appendix E for the most recent job description). Some of the Director responsibilities are listed below:

- The Director provides an environment for both faculty and students that facilitates the achievement of academic excellence.
- Provides appropriate leadership for maintaining an adequate number of qualified faculty for the Department.
- Evaluates and holds faculty accountable for teaching excellence.
- Provide leadership for recruiting and maintaining an acceptable and qualified student body in the College.
- Ensure that policies related to students are developed appropriately, implemented fairly and reviewed periodically.
- Maintain open communication with the student body, support and remain aware of student needs, both academically and professional.
- Support faculty activities in the development, implementation, and evaluation of the program.
- Provide for periodic reviews of the organizational structure of the Department, the Department mission, and long range plan, accomplishments and the effectiveness of the Department.

The Director position is .5 FTE administration and .5 FTE faculty, carrying a six-hour teaching assignment. The Director maintains a record of scholarship and service appropriate with the leadership position to serve as a role model for the students and faculty.

II-D. Faculty are:

I. sufficient in number to accomplish the mission, goals, and expected program outcomes;
II. academically prepared for the areas in which they teach; and
III. experientially prepared for the areas in which they teach.

Elaboration: The full-time equivalency (FTE) of faculty involved in each program is clearly delineated, and the program provides to CCNE its formula for calculating FTEs. The overall faculty (whether full-time or part-time) is sufficient in number and qualifications to achieve the mission, goals, and expected program outcomes. Faculty-to-student ratios ensure adequate supervision and evaluation and meet or exceed the requirements of regulatory agencies and professional nursing standards and guidelines.

Faculty are academically prepared for the areas in which they teach. Academic preparation of faculty includes degree specialization, specialty coursework, or other preparation sufficient to address the major concepts included in courses they teach. Faculty teaching in the nursing program have a graduate degree. The program provides a rationale for the use of any faculty who do not have a graduate degree.

Faculty who are nurses hold current RN licensure. Faculty teaching in clinical/practicum courses are experienced in the clinical area of the course and maintain clinical expertise. Clinical expertise may be maintained through clinical practice or other avenues. Faculty teaching in
advanced practice clinical courses meet certification and practice requirements as specified by the relevant regulatory and specialty bodies. Advanced practice nursing tracks are directly overseen by faculty who are nationally certified in that same population-focused area of practice in roles for which national certification is available.

Program Response:

A new Nursing Director was hired in January 2017. A substantive change was submitted to CCNE at that time. The position of the program is now a tenure-track, full time and the appointment is divided as 50% administrative and 50% faculty. In addition to the Director, a full-time tenure track Associate Professor was also hired at that time. The department also has one full-time faculty, as a retained term position, who started August 1, 2012. There are also several Contingent Faculty who have previously taught and are available to teach when needed; one is part time and the remaining are hired on a per course status as needed. Having two full time tenure track faculty will assist the department to have an integral role in the decision-making process at NMHU through the Faculty Senate, university committees and the Collective Bargaining Association.

To demonstrate the appropriate use and adequate number of faculty to meet the program needs as well as the mission, goals, and expected outcomes, courses in the curriculum were taught by the following faculty for the Spring 2017 semester.

**Spring 2017**

- NURS 310 RN-BSN Transition Course, J.Flood
- NURS 340 Advanced Professional Nursing, S. Gardner
- NURS 370 Nursing Research (3 sections) S. Gardner
- NURS 431 Community Health Theory (3 sections) Bea Hurtado
- NURS 447 Community Health Practicum-S. Williams; B. Bolton; S.Khalsa (2 sections); B Hurtado

The faculty currently employed in the department of nursing, come from a diverse background and are academically and clinically prepared. See Table II-D I. for more detail of the faculty and their expertise to be clinically competent to teach courses in the curriculum.
<table>
<thead>
<tr>
<th>Faculty Member</th>
<th>Title</th>
<th>Educational Preparation</th>
<th>Clinical Experience or Area of Specialty</th>
<th>Teaching Responsibilities in the NMHU Curriculum</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dr. Jeanie Flood</td>
<td>Associate Professor, Director and Chair Department of Nursing</td>
<td>BSN Nursing, MSN Nursing, PhD Nursing</td>
<td>8 years in patient OB and Medical Surgical 10 years Home Health Lactation Certified 20 years 16 years teaching Nursing 14 years developing and teaching online nursing courses</td>
<td>• RN to BSN Bridge Course</td>
</tr>
</tbody>
</table>
| Dr. Sandra Gardner | Associate Professor                           | BSN- nursing, MSN- Adult Health Nursing, MA-Counseling and Educational Psychology, EdD-Curriculum Design and Instruction | 28 years Medical Surgical Hospital Nurse. 29 years teaching experience (11 years online teaching BSN courses). 16 years Legal Nurse Consulting experience for the defense and plaintiff | • Evidence Based Research  
• Advancement of Professional Nursing                                                       |
| Dr. Susan Williams | Contingent Faculty                           | BSN- Nursing, MSN- Community Health Nursing, PhD- Community Health Education          | 8 years community home health/home health experience: 3 years staff nurse, 2 years marketing manager and 3 years Clinical Director for Regional offices and Director of Leadership Institute 8 years own consulting firm in home health management and marketing 19 years BSN/MSN teaching 13 years developing and teaching online nursing courses | • RN-BSN Transition  
• Nursing Informatics  
• Community Health Theory  
• Community Health Practicum  
• Leadership/Management Practicum  
• Leadership/Management Theory                                                                 |
<p>| Ms. Bea Hurtado   | Contingent Faculty                           | BSN- Nursing                                                                          | 5 years school nurse/School Based Health Center Coordinator                                              | • Community Health Theory                                                               |</p>
<table>
<thead>
<tr>
<th>Name</th>
<th>Faculty Status</th>
<th>Education Level</th>
<th>Clinical Experience</th>
<th>Practicum Areas</th>
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<tbody>
<tr>
<td>Ms. Siri Khalsa</td>
<td>Part Time Faculty</td>
<td>Diploma RN- Nursing</td>
<td>4 years nurse for Philmont Scout Camp infirmary supervisor</td>
<td>Community Health Practicum</td>
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<td>RN-BSN- Nursing</td>
<td>10 years Associate Degree nursing faculty (5 years as Program Director)</td>
<td>Leadership/Management Practicum</td>
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<td></td>
<td>MSN - Nursing Education</td>
<td>5 years staff nursing Labor and Delivery/breastfeeding and childbirth educator</td>
<td>Cultural Aspects of Health</td>
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<td></td>
<td>PhD- Concentration in</td>
<td>6 years first aid/CPR certified instructor</td>
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<td></td>
<td></td>
<td>Health Policy (candidate in dissertation phase)</td>
<td>5 years staff other nursing positions in home health/nursing rehabilitation</td>
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<td></td>
<td></td>
<td></td>
<td>3 years developing and teaching online nursing courses at NMHU; (part-time 2 yrs.)</td>
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<tr>
<td></td>
<td>Full Time in Fall</td>
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<td>1 year Diabetic/ Renal Unit- Peritoneal Dialysis &amp; Diabetic Teaching.</td>
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<td>6 years Labor &amp; Delivery, Newborn, Postpartum</td>
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<td>5½ years Emergency Room</td>
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<td>8 years Home Health/Hospice, Case Manager</td>
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<td>1½ years Public Health</td>
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<td>10 months Community Health Clinic</td>
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<td>4 years Medical Surgical/ICU/Day Surgery in a rural hospital.</td>
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<td>8 years Academia (6½ in pre-licensure I programs both in didactic and clinical settings; 1 semester RN-BSN F2F; 2 semesters RN-BSN in on-line setting).</td>
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<tr>
<td>Ms. Bonnie Bolton</td>
<td>Contingent Faculty</td>
<td>RN- Diploma</td>
<td>20 years Hospital Management/Staff</td>
<td>Community Health Practicum</td>
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<td></td>
<td>BSN-Nursing</td>
<td>10 years School Nurse/Supervisor</td>
<td>Leadership/Management Practicum</td>
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<td></td>
<td>MSN Health Care</td>
<td>9 years State Department of Health</td>
<td>Nursing Informatics</td>
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<tr>
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<td></td>
<td>Informatics</td>
<td>15 years Public Ed/Community College/University (3yrsADN,4yrsBSN)</td>
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</table>
II-E. Preceptors, when used by the program as an extension of faculty, are academically and experientially qualified for their role in assisting in the achievement of the mission, goals, and expected student outcomes.

*Elaboration: The roles of preceptors with respect to teaching, supervision, and student evaluation are:*
1. clearly defined;
2. congruent with the mission, goals, and expected student outcomes; and
3. congruent with relevant professional nursing standards and guidelines.

Preceptors have the expertise to support student achievement of expected outcomes. Preceptor performance expectations are clearly communicated to preceptors and are reviewed periodically. The program ensures preceptor performance meets expectations.

Program Response:

Historically, NMHU Nursing Program utilized preceptors in three of the courses: Community Health, Leadership/Management and Health Assessment. Policy and Procedures were developed and contracts for agencies. Approximately three years ago, the program stopped using community based preceptors for the Community Health and Leadership/Management courses. They were converted to an intensive faculty role as preceptors for the students in assigning, monitoring and grading their projects. The reason for the change was due to the difficulty securing agency contracts in a rural environment and a lack of Masters or qualified preceptors available. In addition, student feedback expressed frustration with the time and difficulty making connections with preceptors. Health Assessment was the only remaining course utilizing preceptors. However, during the Fall of 2016, many issues developed including a lack of nurses with the needed skills willing to precept students, feedback from students complaining of difficulty scheduling time and finding sites to meet with preceptors. Starting in the Fall of 2017, the course coordinator will pilot an interactive software program, Shadow Health, as an alternative to the preceptor model. Following the implementation, results of the pilot, including student feedback, will be presented to faculty for discussion and decision.

II-F. The parent institution and program provide and support an environment that encourages faculty teaching, scholarship, service, and practice in keeping with the mission, goals, and expected faculty outcomes.

*Elaboration: Institutional support is available to promote faculty outcomes congruent with defined expectations of the faculty role and in support of the mission, goals, and expected faculty outcomes. For example:*
1. Faculty have opportunities for ongoing development in the scholarship of teaching.
2. If scholarship is an expected faculty outcome, the institution provides resources to support faculty scholarship.
3. If practice is an expected faculty outcome, opportunities are provided for faculty to maintain practice competence, and institutional support ensures that currency in clinical practice is maintained for faculty in roles that require it.
4. If service is an expected faculty outcome, expected service is clearly defined and supported.

Program Response:

The expectations of full time tenure track nursing faculty are clearly defined in the NMHU Faculty Handbook and the current Collective Bargaining Agreement (CBA) which expired in 2016. A new CBA has just been ratified by the faculty senate and has just received approval from the NMHU Board of Regents (May 2017). For the purposes of this standard, reference will be made to the CBA in effect at the time of writing. To facilitate faculty success at NMHU, both new tenure track associate professors
have been assigned a faculty mentor per the CBA. In addition to providing orientation and advice for new faculty, the mentor provides support to meet university expectations for teaching, scholarship and service. The university offers research and development support with allocations in the form of grant rewards for faculty research. Workshops are also provided for grant writing and publication. The faculty handbook lists the resources available to faculty.

Although Contingent faculty are not held to the same requirements for scholarship and service as tenure track faculty, the department strongly supports contingent faculty’s efforts in these areas. Contingent faculty participate in the faculty Benchmarking Process which clearly highlights areas which can meet the benchmark level. Contingent faculty are evaluated annually by the department chair in terms of teaching. Workshops and 1:1 support through the Center for Teaching Excellence are available to both Contingent and Tenure track faculty.

In terms of department level support to help faculty meet the expectations in teaching, scholarship and service, the full-time faculty are each given professional development funds of $700 each. This can be used for lodging, travel or registration. The department tries to offset any costs that these funds do not cover from departmental funds. When funds are available, contingent faculty are also supported for conferences or travel. Historically, the Director has been able to budget one national conference for each full-time faculty member by using nursing supplemental funds from the state legislature that the department receives. The new Director plans to continue this process. The Director has budgeted for two annual meetings of AACN and feels this is extremely important to stay up to date on nursing education and general nursing issues. This is a way that the institution demonstrates there support that encourages our faculty to attend conferences and educational activities that expand their teaching and creative activities. The Director is also attending the June 2017 New Mexico Educators’ Conference to connect with other educators in the state.

Faculty are encouraged to attend events that would enhance their area of expertise in teaching. For example, one faculty member, who teaches community health theory and practicums, in April 2017 attended the New Mexico Public Health Association Annual Conference to learn about ideas that the speakers had in teaching all types of community health content and discuss practicum ideas.

The Department takes advantage of webinars presented by AACN, NLN and other associations for faculty development and often invites the faculty from Luna Community College Nursing Program to participate in these webinars. This allows new ideas and techniques to be seen by the faculty and remain current. Contingent faculty who are employed, attend updates at their employing institutions and are invited to attend any of the webinars the department offers. Membership in professional organizations is encouraged. One full time faculty is a member of the Association of Community Health Nursing Education (ACHNE), American Nursing Association (ANA) and New Mexico Nurses Association (NMNA).

All faculty are encouraged to participate in the health care community. One faculty is currently in the dissertation phase of her doctorate and participates on many state committees. A full time contingent faculty spends summers as a nursing supervisor for a Boy Scout ranch infirmary. She is also a board member of an organization which provides educational scholarship opportunities for orphan children in need. Another contingent faculty is very active in running a soup kitchen for members of the community.
Standard III
Program Quality: Curriculum and Teaching-Learning Practices

The curriculum is developed in accordance with the program’s mission, goals, and expected student outcomes. The curriculum reflects professional nursing standards and guidelines and the needs and expectations of the community of interest. Teaching-learning practices are congruent with expected student outcomes. The environment for teaching-learning fosters achievement of expected student outcomes.

III-A. The curriculum is developed, implemented, and revised to reflect clear statements of expected student outcomes that are congruent with the program’s mission and goals, and with the roles for which the program is preparing its graduates.

Elaboration: Curricular objectives (e.g., course, unit, and/or level objectives or competencies as identified by the program) provide clear statements of expected learning that relate to student outcomes. Expected outcomes relate to the roles for which students are being prepared.

Program Response:

All aspects of the nursing curriculum as originally developed and subsequently implemented, are revised continually and systematically to always reflect current, clear statements of student learning outcomes. In the development of the Nursing Program and with implementation and revisions, the curriculum has been carefully constructed to exhibit congruency with the Nursing Program’s mission, goals, and expected student outcomes as delineated in the Program outcomes.

Evidence is found on all Department of Nursing course syllabi with clearly stated course objectives which are correlated with the Nursing Program outcomes and university traits. Following the course objectives are clear statements of student expectations in the form of the assignments for each course. The weight of individual assignments toward the course grade is also indicated on the syllabus. Any curricular modifications are discussed as a faculty and documented in faculty meeting minutes. Student course evaluations also provide input for curricular revisions. As necessary, expected learning outcomes may be modified or changed given the nature of the students’ feedback. When modifications to activities or assignments are made, great care is taken to assure that these changes continue to be congruent with the course and Program outcomes and are clearly communicated in writing.

The curriculum with its associated student outcomes is also congruent with the Program’s overall mission, the Program’s goals and the more general student expectations, referenced as “Program outcomes.” The Department of Nursing’s mission as a general statement builds on the strengths of the registered nurse student. Emphasis is placed on excellence in education, scholarship, and service. There is an expectation that the program will expand critical thinking and emphasize new nursing roles and new modalities of health care delivery.

The mission is further amplified through the program goals and program outcomes. The areas of particular emphasis in the program are identified and include: collaboration, evidenced-based practice, multicultural awareness, technological applications, and quality and safety nursing interventions toward patients and populations. Program goals are congruent with the more specific Program outcomes. The objectives begin to bring greater detail and clarity to the Nursing mission and goals. The Program outcomes set the stage for the final clarification and amplification of the mission and goals. As noted earlier, students find fulfillment in the Department of Nursing course syllabi where complete delineation of course objectives and specific student learning outcomes are found.

The faculty members of the Department of Nursing are confident of the congruence that flows from the Program mission to the goals then on to the Program outcomes and ultimately, in the nursing curriculum with its clearly stated course objectives and student learning outcomes.
The program objectives, mission, philosophy are reviewed every three years as a whole and are given a cursory review when the strategic plan is updated. The faculty are currently in the process of evaluating and updating the strategic plan. With the addition of new faculty all student evaluations of courses are discussed with the Director and faculty. Plans were made to make revisions in courses as needed. These changes are examined in relation to how they impact the mission, philology or program outcomes.

Student Learning Outcomes: Each faculty defines weekly objectives in their courses and assisting the students in the critical thinking process to determine what is the most important information in their courses. Course objectives clearly outline the outcomes expected. The expectations of the students in weekly assignments are correlated to the program outcomes through course objectives and weekly objectives. All assigned projects or activities closely relate to the course objectives and program outcomes.

III-B. Curricula are developed, implemented, and revised to reflect relevant professional nursing standards and guidelines, which are clearly evident within the curriculum and within the expected student outcomes (individual and aggregate).

1. Baccalaureate program curricula incorporate The Essentials of Baccalaureate Education for Professional Nursing Practice (AACN, 2008).
2. Master’s program curricula incorporate professional standards and guidelines as appropriate.
   a. All master’s degree programs incorporate The Essentials of Master’s Education in Nursing (AACN, 2011) and additional relevant professional standards and guidelines as identified by the program.
   b. All master’s degree programs that prepare nurse practitioners incorporate Criteria for Evaluation of Nurse Practitioner Programs (NTF, 2012).

1. Graduate-entry program curricula incorporate The Essentials of Baccalaureate Education for Professional Nursing Practice (AACN, 2008) and appropriate graduate program standards and guidelines.
2. DNP program curricula incorporate professional standards and guidelines as appropriate.
   1. All DNP programs incorporate The Essentials of Doctoral Education for Advanced Nursing Practice (AACN, 2006) and additional relevant professional standards and guidelines if identified by the program.
   b. All DNP programs that prepare nurse practitioners incorporate Criteria for Evaluation of Nurse Practitioner Programs (NTF, 2012).


Elaboration: Each degree/certificate program incorporates professional nursing standards and guidelines relevant to that program, area, role, population focus, or specialty. The program clearly demonstrates where and how content, knowledge, and skills required by identified sets of standards are incorporated into the curriculum.

APRN education programs (degree and certificate) (i.e., Clinical Nurse Specialist, Nurse Anesthesia, Nurse Midwife, and Nurse Practitioner) incorporate separate comprehensive graduate level courses to address the APRN core, defined as follows:

2. Advanced physiology/pathophysiology, including general principles that apply across the lifespan;
3. Advanced health assessment, which includes assessment of all human systems, advanced assessment techniques, concepts and approaches; and
4. Advanced pharmacology, which includes pharmacodynamics, pharmacokinetics, and pharmacotherapeutics of all broad categories of agents.
Additional APRN core content specific to the role and population is integrated throughout the other role and population-focused didactic and clinical courses.

Separate courses in advanced physiology/pathophysiology, advanced health assessment, and advanced pharmacology are not required for students enrolled in post-master’s DNP programs who hold current national certification as advanced practice nurses, unless the program has deemed this necessary.

Master’s programs that have a direct care focus but are not APRN education programs (e.g., nursing education and Clinical Nurse Leader), incorporate graduate level content addressing the APRN core. They are not required to offer this content as three separate courses.

Program Response:

The outcome of the Nursing Program at Highlands University is to prepare a baccalaureate nurse graduate. The Essentials of Baccalaureate Education for Professional Nursing Practice (AACN, 2008) have been used since the development of the program to refine the program of study, the program outcomes and all activities in the curriculum. Course content has been closely examined by faculty to make sure that all essentials are included in courses throughout the curriculum. Expected individual student learning outcomes are evidenced in each course syllabus. Aggregate student outcomes are reflected in and mesh with the nursing department outcomes.

In Appendix F, Table III-B I highlights the curriculum of the Department and how it incorporates The Essentials of Baccalaureate Education for Professional Nursing Practice (AACN, 2008) into individual courses. This table was updated in the Spring of 2017 to reflect any curricular changes.
III-C. The curriculum is logically structured to achieve expected student outcomes.
1. Baccalaureate curricula build upon a foundation of the arts, sciences, and humanities.
2. Master’s curricula build on a foundation comparable to baccalaureate level nursing knowledge.
3. DNP curricula build on a baccalaureate and/or master’s foundation, depending on the level of entry of the student.
4. Post-graduate APRN certificate programs build on graduate level nursing competencies and knowledge base.

Elaboration: Baccalaureate program faculty and students articulate how knowledge from courses in the arts, sciences, and humanities is incorporated into nursing practice. Post-baccalaureate entry programs in nursing incorporate the generalist knowledge common to baccalaureate nursing education as delineated in The Essentials of Baccalaureate Education for Professional Nursing Practice (AACN, 2008) as well as advanced course work.

Graduate curricula are clearly based on a foundation comparable to a baccalaureate degree in nursing. Graduate programs delineate how students who do not have a baccalaureate degree in nursing acquire the knowledge and competencies comparable to baccalaureate education in nursing as a foundation for advanced nursing education. Accelerated programs that move students from basic nursing preparation (e.g., associate degree or diploma education) to a graduate degree demonstrate how these students acquire baccalaureate level knowledge and competencies delineated in The Essentials of Baccalaureate Education for Professional Nursing Practice (AACN, 2008), even if they do not award a baccalaureate degree in nursing in addition to the graduate degree.

DNP programs, whether post-baccalaureate or post-master’s, demonstrate how students acquire doctoral-level competencies delineated in The Essentials of Doctoral Education for Advanced Nursing Practice (AACN, 2006). The program provides a rationale for the sequence of the curriculum for each program.

Program Response:
The current curriculum builds upon the foundation of the liberal arts education of a baccalaureate curriculum. Prerequisites of the program were determined based on what students bring from their Associate Degree program and then what would the program require in addition for admission. The required transfer courses from the students’ Associate Degree programs are:
1. Microbiology
2. Anatomy and Physiology I
3. Life Span Human Growth and Development
4. All nursing courses required for Associate Degree
5. Anatomy and Physiology II
6. Introduction to Psychology
7. Nutrition

The following additional courses are required for admission to the RN-BSN program at Highlands.
1. Computer course or competency
2. Introduction to Sociology or Anthropology
3. Statistics

The general education core requirements mandated by the state are listed below:
1. 9 hours communications
2. 8 hours lab science
3. 3 hours math
4. 6-9 hours social/behavioral sciences
3. 6-9 hours humanities and fine arts

Nursing students typically graduate from an Associate Degree Program lacking hours in communication, math, social/behavioral science and humanities and fine arts. The recruiter/advisor and the Director work with each student to assist them in review of each student’s transcript and to prepare a degree plan of what courses each student still needs and when the student should plan to take them in the schedule of courses. Individual reviews are done of prior transcripts for students who come into the program with a bachelor or Master’s degree in another area. Currently, the NMHU catalog specifies students should be admitted with an associates or diploma degree in nursing. Discussions are underway with admissions to regarding transfer students who enter NMHU with an Associate of Applied Science (AAS) or an Associate Degree in Nursing (ADN). Currently, students who enter NMHU with an Associate of Science (AS) degree are exempt from general education courses beyond program specific prerequisites.

All nursing courses also clearly delineate what pre-requisites exist for each course, and whether the course is a pre or co-requisite. This sequencing of courses allows the program to build on the liberal arts courses and the previous nursing courses as the students’ progress through the baccalaureate program. Exemptions to the pre or co requisites can only be approved by the Director.

III-D. Teaching-learning practices and environments support the achievement of expected student outcomes.

Elaboration: Teaching-learning practices and environments (classroom, clinical, laboratory, simulation, distance education) support achievement of expected individual student outcomes identified in course, unit, and/or level objectives.

Program Response:

The NMHU RN to BSN program became a fully on-line program in 2012 to better meet the needs of working RN students and the demographics of their physical location. The program utilizes the Desire2Learn platform with ZOOM and Turnitin integrated. The courses are asynchronous with faculty using ZOOM for taped lectures and guest speakers. In addition, faculty can post video notes through ZOOM to communicate feedback to students. Faculty work together as a team to develop assignments and assessments to meet course objectives in a variety of ways: discussions, presentations, papers and exams. Practicums are completed in their home area.

III-E. The curriculum includes planned clinical practice experiences that:

1. enable students to integrate new knowledge and demonstrate attainment of program outcomes; and
2. are evaluated by faculty.

Elaboration: To prepare students for a practice profession, each track in each degree program and post-graduate APRN certificate program affords students the opportunity to develop professional competencies in practice settings aligned to the educational preparation. Clinical practice experiences are provided for students in all programs, including those with distance education offerings. Clinical practice experiences involve activities that are designed to ensure students are competent to enter nursing practice at the level indicated by the degree/certificate program. The design, implementation, and evaluation of clinical practice experiences are aligned to student and program outcomes.
Program Response:

The RN to BSN program at NMHU prepares licensed RNs for BSN roles. Therefore, activities for practicum courses are established to integrate knowledge through planned assignments that measure course objectives and program outcomes. An example for the Community Health Nursing practicum is a Community Health Assessment Project. To complete the project, a team of two students selects a county from the state and completes a comprehensive assessment, planning, intervention, and evaluation process. Practicum course objectives met through this include:

- Utilization of epidemiological data to collect and interpret county data related to health of population within selected county
- Examine effects of economics, cultural, and environmental influences on community.
- Apply knowledge of Healthy People 2020 and Robert Wood Johnson (RWJ) county health rankings, and other data bases for assessment, planning, interventions for project, based on utilization of evidence based programs.
- Utilize nursing knowledge from theory and research findings to propose plan for addressing health priority need for county.

Another example is for the Nursing Leadership and Management practicum course which includes a Management Plan Project and Summary. This project entails the student completing an organizational assessment plan of their unit where they are currently employed and then selecting a defined issue or problem that has been identified in the assessment to work thorough the components of the management plan to meet the course and program outcomes. An example is transition of care at the end of the shift or between units. It meets course objectives, program outcomes through:

- Application of nursing leadership and management principles from theory
- Analyze influence of health care financing, health policy, and management of resources in the delivery of patient care.
- Evaluate leadership and management competencies of a professional nurse in that role.

The faculty monitor and evaluate progression through sequential and individual practicum course assignments like those described in the above examples. Zoom instruction from course faculty about nursing practicum assignments are done to assist students with learning more about the project.

III-F. The curriculum and teaching-learning practices consider the needs and expectations of the identified community of interest.

Elaboration: The curriculum and teaching-learning practices (e.g., use of distance technology, didactic activities, and simulation) are appropriate to the student population (e.g., adult learners, second language students, students in a post-graduate APRN certificate program) and consider the needs of the program-identified community of interest.

Program Response:

The student body of the NMHU RN to BSN program is composed of adult learners, from within New Mexico and surrounding states. The faculty carefully considers these demographics accordingly in class preparation. Our mission states that teaching learning practices include “building on the strength of the licensed registered nurse and challenges the individuals enrolled in this program to expand their
critical thinking for new professional nursing roles, methods of health care delivery and approaches to health care practice issues.” The faculty executes this mission by constructing their courses and lectures recognizing the students as professionals and as active learners. Assignments are reality oriented, often involving case presentations and substantial application of theory or principals to the “real world.” Discussion activities, as well as a variety of other on-line assignments, such as, but not limited to, written papers, tests and documents review are part of all the courses in the nursing program. Students can contribute many ideas from their working situations to bring facts “to life.” To date, the format of on-line, distance education continues to meet the needs of our population of diverse nursing students as evaluated by student feedback on course evaluations.

III-G. Individual student performance is evaluated by the faculty and reflects achievement of expected student outcomes. Evaluation policies and procedures for individual student performance are defined and consistently applied.

Elaboration: Evaluation of student performance is consistent with expected student outcomes. Grading criteria are clearly defined for each course, communicated to students, and applied consistently. Processes exist by which the evaluation of individual student performance is communicated to students. In instances where preceptors facilitate students’ clinical learning experiences, faculty may seek input from preceptors regarding student performance, but ultimately faculty are responsible for evaluation of individual student outcomes. The requirement for evaluation of student clinical performance by qualified faculty applies to all students in all programs. Faculty evaluation of student clinical performance may be accomplished through a variety of mechanisms.

Program Response:

Evaluation of students is outlined in each course syllabus. Each course syllabus is posted on-line with a calendar of readings and assignment due dates. A separate calendar can be part of the course in Desire2Learn with the students receiving alerts for assignment deadlines. Further, students are also apprised of assignment rubrics so that they know the expectations for assignments and how projects and assignments will be graded. In addition to rubrics, there is usually a general guideline sheet posted outlining what will be expected for them to complete an assignment. All faculty teaching a section in a clinical course provide input into the clinical courses of Health Assessment, Community Health and Nursing Leadership/Management and are asked to complete an evaluation tool given to them by the faculty member in each course. When utilized, students participate with evaluating the preceptor also so this allows the faculty to evaluate the students’ response to the preceptor and if we would want to use this person again with other students.

III-H. Curriculum and teaching-learning practices are evaluated at regularly scheduled intervals to foster ongoing improvement.

Elaboration: Faculty use data from faculty and student evaluation of teaching-learning practices to inform decisions that facilitate the achievement of student outcomes. Such evaluation activities may be formal or informal, formative or summative. Curriculum is regularly evaluated by faculty and other communities of interest as appropriate. Data from the evaluation of curriculum and teaching-learning practices are used to foster program improvement.

Program Response:

The faculty of the Department of Nursing is committed to a process of regularly scheduled evaluations for improvement of the curriculum. Before discussion of the formal plan of evaluation, it is appropriate to also briefly address the informal process that is part of every teaching/learning nursing
activity. Faculty members encourage dialogue and discussion with students enrolled in the nursing classes. Questions and clarifications about course content are encouraged so that students are able to fulfill all requirements. These informal discussions may serve as a springboard for modifications or changes in content for courses going forward.

Formally, regularly scheduled opportunities for course and program evaluation exist. At the conclusion of each course, students have the opportunity to evaluate the course and the faculty instruction before their grades can be released in the Banner grading system on the University. The results of these student evaluations are considered for all semesters. Upon graduation, students also complete the AACN/Benchworks Undergraduate Nursing Education Exit survey. The program initially started offering the survey in the spring of each year but due to a low return rate, the survey is now distributed in the fall since students complete the program in December each year. This has significantly increased the return rate of the survey. The results of this survey are reviewed by faculty and any necessary program changes are discussed and implemented as deemed necessary by the faculty and the program director. An opportunity remains to conduct separate surveys of alumni and employers. These activities have not been done to date due to a limited number of employers in the locale primarily served by the NMHU RN-BSN program.

Community partners and managers of clinical agencies are two sources of community input for the successful operation of the Department of Nursing. Evaluation input from these constituencies is typically received at recruitment outreach and during times of faculty contact with clinical agencies. This manner of dialogue serves to address immediate issues of concern and allows strategies for immediate and open resolution, as may be necessary. These constituencies seem to appreciate this open avenue of communication and responsiveness of the nursing faculty. The creation of the Nursing Advisory Board discussed in Section I-B with meetings via zoom will also be a source of community input.
Standard IV
Program Effectiveness: Assessment and Achievement of Program Outcomes

The program is effective in fulfilling its mission and goals as evidenced by achieving expected program outcomes. Program outcomes include student outcomes, faculty outcomes, and other outcomes identified by the program. Data on program effectiveness are used to foster ongoing program improvement.

IV-A. A systematic process is used to determine program effectiveness.

Elaboration: The program uses a systematic process to determine program effectiveness. The process:
1. is written, ongoing, and exists to determine achievement of program outcomes;
2. is comprehensive (i.e., includes completion, licensure, certification, and employment rates, as required by the U.S. Department of Education; and other program outcomes);
3. identifies which quantitative and/or qualitative data are collected to assess achievement of the program outcomes;
4. includes timelines for collection, review of expected and actual outcomes, and analysis; and
5. is periodically reviewed and revised as appropriate.

Program Response:

The Faculty have reviewed the methods for program evaluation and effectiveness after the last site visit of March 17, 2014 and made changes in the Nursing Department Policy and Procedure Manual Policy for Program Evaluation and Effectiveness. It has been updated and accurately reflects the methods used to address how the department will measure achievement of program outcomes from the faculty and student perspective. Additional measurements and changes for program effectiveness have been added.

Changes to the policy and procedure included:

V. The addition of the program outcomes added to the AACN/Benchworks Nursing Education Exit Assessment as a formal way to obtain input from our graduates about whether the program met their expectations for program outcomes. The addition of NMHU specific questions.

VI. Use this measurement every year for evaluation.

VII. The faculty will evaluate the program every year.

VIII. Additional data are gathered annually:
- completion rates, # of graduates going on to pursue graduate work within 3 years and
- # of graduates planning to change jobs due to completing their BSN. (Ours is a RN-BSN program so employment rates are usually close to 100%)

The following graphic in Table IVA-I depicts the systematic process that is used:
Because the program is small, and there is no dedicated curriculum committee, instead, the department has scheduled more frequent faculty meetings to discuss the program results. The minutes of the department faculty meetings reflect the discussion and the actions taken. Changes implemented will be monitored by appropriate faculty and/or Director and updates are reported back to faculty meetings.
IV-B. Program completion rates demonstrate program effectiveness.

Elaboration: The program demonstrates achievement of required program outcomes regarding completion. For each degree program (baccalaureate, master’s, and DNP) and post-graduate APRN certificate program:
1. The completion rate for each of the three most recent calendar years is provided.
2. The program specifies the entry point and defines the time period to completion.
3. The program describes the formula it uses to calculate the completion rate.
4. The completion rate for the most recent calendar year is 70% or higher. However, if the completion rate for the most recent calendar year is less than 70%, (1) the completion rate is 70% or higher when the annual completion rates for the three most recent calendar years are averaged or (2) the completion rate is 70% or higher when excluding students who have identified factors such as family obligations, relocation, financial barriers, and decisions to change major or to transfer to another institution of higher education.

A program with a completion rate less than 70% for the most recent calendar year provides a written explanation/analysis with documentation for the variance.

This key element is not applicable to a new degree or certificate program that does not yet have individuals who have completed the program.

Program Response:

Table IV-B I contains data captured at the time of admission and graduation. The part time program is completed in seven semesters and the full-time program in four semesters. The completion rate was calculated by dividing the number of completers of each type of program by the number of admitted students.

This data reflects the continued result of the full-time student having a slightly higher graduation rate than the part time for the year 2015. The faculty have discussed the reasons for this and know that the students are being pressured by their employers to obtain a baccalaureate degree within five years of employment in their job. In some cases, they must sign an employment contract which specifies this. This motivates many of the students to take the full-time program and work very hard for four semesters and be done with the degree.

Some of the part time students do not move through as a cohort but have to temporarily leave due to pregnancy, new jobs, and a move, death in the family or other life events. Comments from some of the students have been “I didn’t know it would be so much work” or the faculty have reported that students say they forgot to do the assignments and receive lower grades. The faculty is currently discussing a policy to allow more flexibility for completion of the program. Under consideration is allowing students up to five years to complete the program allowing them to decelerate depending on life events. All rates for 2015 do pass the AACN benchmark of 80% but it appears some of the graduation upcoming rates for 2017/2018 may fall short.
<table>
<thead>
<tr>
<th>Semester of Admission</th>
<th># of Students Admitted</th>
<th># of students not enrolled</th>
<th># of students admitted and enrolled</th>
<th># of Students lost due to family obligations, move or transfer</th>
<th># of students failed, withdrew or left</th>
<th># of students still in courses</th>
<th>Fall/ Spring graduates December May</th>
<th>Graduation Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>SP 2017 Part time</td>
<td>29</td>
<td>0</td>
<td>29</td>
<td>1-financial issues</td>
<td>28</td>
<td>Fall 2018 (anticipated)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>FA 2017 Full time</td>
<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
<td></td>
</tr>
<tr>
<td>FA 2016 Part time</td>
<td>18</td>
<td>4</td>
<td>14</td>
<td>0</td>
<td>2</td>
<td>12</td>
<td>Fall 2018 (anticipated)</td>
<td></td>
</tr>
<tr>
<td>SP 2016 Part time</td>
<td>21</td>
<td>3</td>
<td>19</td>
<td>5</td>
<td>2 of the 5 are off sync</td>
<td>16</td>
<td>Fall 2017 (anticipated)</td>
<td></td>
</tr>
<tr>
<td>SP 2015 Part time</td>
<td>29</td>
<td>0</td>
<td>29</td>
<td>1-financial issues</td>
<td>28</td>
<td>Fall 2018 (anticipated)</td>
<td>96%</td>
<td></td>
</tr>
<tr>
<td>FA 2015 Full time</td>
<td>18</td>
<td>0</td>
<td>18</td>
<td>0</td>
<td>0</td>
<td>18</td>
<td>Fall 2016</td>
<td>100%</td>
</tr>
<tr>
<td>FA 2015 Part time</td>
<td>13</td>
<td>1</td>
<td>12</td>
<td>0</td>
<td>1</td>
<td>11</td>
<td>Fall 2017 (anticipated)</td>
<td>84%</td>
</tr>
</tbody>
</table>
IV-C. Licensure and certification pass rates demonstrate program effectiveness.

Elaboration: The pre-licensure program demonstrates achievement of required program outcomes regarding licensure.

1. The NCLEX-RN® pass rate for each campus/site and track is provided for each of the three most recent calendar years.
2. The NCLEX-RN® pass rate for each campus/site and track is 80% or higher for first-time takers for the most recent calendar year. However, if the NCLEX-RN® pass rate for any campus/site and track is less than 80% for first-time takers for the most recent calendar year, (1) the pass rate for that campus/site or track is 80% or higher for all takers (first-time and repeat) for the most recent calendar year, (2) the pass rate for that campus/site or track is 80% or higher for first-time takers when the annual pass rates for the three most recent calendar years are averaged, or (3) the pass rate for that campus/site or track is 80% or higher for all takers (first-time and repeat) when the annual pass rates for the three most recent calendar years are averaged.

A campus/site or track with an NCLEX-RN® pass rate of less than 80% for first-time takers for the most recent calendar year provides a written explanation/analysis with documentation for the variance and a plan to meet the 80% NCLEX-RN® pass rate for first-time takers. The explanation may include trend data, information about numbers of test takers, data relative to specific campuses/sites or tracks, and data on repeat takers.

The graduate program demonstrates achievement of required program outcomes regarding certification. Certification results are obtained and reported in the aggregate for those graduates taking each examination, even when national certification is not required to practice in a particular state.

1. Data are provided regarding the number of graduates and the number of graduates taking each certification examination.
2. The certification pass rate for each examination for which the program prepares graduates is provided for each of the three most recent calendar years.
3. The certification pass rate for each examination is 80% or higher for first-time takers for the most recent calendar year. However, if the pass rate for any certification examination is less than 80% for first-time takers for the most recent calendar year, (1) the pass rate for that certification examination is 80% or higher for all takers (first-time and repeat) for the most recent calendar year, (2) the pass rate for that certification examination is 80% or higher for first-time takers when the annual pass rates for the three most recent calendar years are averaged, or (3) the pass rate for that certification examination is 80% or higher for all takers (first-time and repeat) when the annual pass rates for the three most recent calendar years are averaged.

A program with a pass rate of less than 80% for any certification examination for the most recent calendar year provides a written explanation/analysis for the variance and a plan to meet the 80% certification pass rate for first-time takers. The explanation may include trend data, information about numbers of test takers, and data on repeat takers.

This key element is not applicable to a new degree or certificate program that does not yet have individuals who have taken licensure or certification examinations.
Program Response:

The nursing program at NMHU is an RN-BSN program and, as part of our admission criteria, all applicants must present a valid unencumbered U.S. RN license prior to the program start date. NCLEX pass rates at the end of our program does not pertain to our program.

The program has accepted, since fall 2012, students who have not taken their NCLEX test at application time, but do have a NCLEX test date before the program starts. This student, if they meet all other admission criteria, is accepted provisionally and if they pass the NCLEX, they can enroll in the program and if they fail to pass the NCLEX, they cannot enroll. The students who fail are tracked for a later admission to the program after they have passed their NCLEX exam. Table IV-C I shows the number and results of this provisional admission. The program will continue this practice and does do follow-up with those who have not passed to see if they have retaken the NCLEX and are interested in reapplying to the RN-BSN program on the next application deadline. The data does show that the majority of students entering the program have already passed the NCLEX.

Table IV-C I
Provisional Admission for NCLEX Exam Applicants

<table>
<thead>
<tr>
<th>Year</th>
<th># of Provisional Acceptance due to NCLEX</th>
<th># Passed NCLEX</th>
<th># Not Pass NCLEX</th>
<th># Enrolled in program</th>
<th>% Enrolled in Program</th>
<th>Other</th>
</tr>
</thead>
<tbody>
<tr>
<td>SP 2017</td>
<td>1</td>
<td>1</td>
<td>0</td>
<td>1</td>
<td>100%</td>
<td></td>
</tr>
<tr>
<td>FA 2017</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>Data not available yet</td>
</tr>
<tr>
<td>SP 2016</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>FA 2016</td>
<td>2</td>
<td>2</td>
<td>0</td>
<td>2</td>
<td>100%</td>
<td></td>
</tr>
<tr>
<td>SP 2015</td>
<td>2</td>
<td>1</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td>Passed did not enroll in program</td>
</tr>
<tr>
<td>Fall 2015</td>
<td>1</td>
<td>0</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td>Did not enroll and did not pass</td>
</tr>
</tbody>
</table>

IV-D. Employment rates demonstrate program effectiveness.

Elaboration: The program demonstrates achievement of required outcomes regarding employment rates.

1. The employment rate is collected separately for each degree program (baccalaureate, master’s, and DNP) and post-graduate APRN certificate program.
2. Data are collected within 12 months of program completion. For example, employment data may be collected at the time of program completion or at any time within 12 months of program completion.
3. The employment rate is 70% or higher. However, if the employment rate is less than 70%, the employment rate is 70% or higher when excluding graduates who have elected not to be employed.
Any program with an employment rate less than 70% provides a written explanation/analysis with documentation for the variance. This key element is not applicable to a new degree or certificate program that does not yet have individuals who have completed the program.

Program Response:

The NMHU nursing program is an RN-BSN program and the majority of our applicants are already licensed nurses who have been working in nursing. Employment data have been collected upon admission on the employment status of accepted students. See Table IV-DN/A I for the summary.

**Table IV-D I**  
Employment Status upon Admission to the RN-BSN Program

<table>
<thead>
<tr>
<th>Year</th>
<th>Total Admitted</th>
<th># Admitted Employed</th>
<th># Admitted Not Employed</th>
<th>Employment Not Known</th>
</tr>
</thead>
<tbody>
<tr>
<td>SP 2017</td>
<td>29</td>
<td>29</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>FA 2017</td>
<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
</tr>
<tr>
<td>SP 2016</td>
<td>21</td>
<td>19</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Fall 2016</td>
<td>41</td>
<td>41</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>SP 2015</td>
<td>47</td>
<td>41</td>
<td>6</td>
<td>0</td>
</tr>
<tr>
<td>Fall 2015</td>
<td>34</td>
<td>32</td>
<td>1</td>
<td>1</td>
</tr>
</tbody>
</table>

Other areas that the department will be following for the students as to employment data are found in the AACN/Benchworks Undergraduate Nursing Exit Assessment. The following institution specific question, “how has the RN to BSN Program affected your employment status”? was added in the 2014/2015 AACN/Benchworks Undergraduate Nursing Exit Assessment survey and will continue to be asked in subsequent surveys so data from several years can be gathered and analyzed.

This data in Table IV-D II, from the AACN Skyfactor data, continues to support that our students are obtaining their degree and staying with their current employer. There has been some movement to accept a different position but it is not clear whether this is with the same employer. This question was clarified by an institutional question in the AACN/Skyfactor study in the 2016/2017 survey.
Table IV-D II
Employment Status Post Graduation by Year

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>N</td>
<td>% of Total</td>
<td>N</td>
<td>% of Total</td>
</tr>
<tr>
<td>Staying in Current Position</td>
<td>11</td>
<td>84.6</td>
<td>13</td>
<td>59.1</td>
</tr>
<tr>
<td>Have Changed Position during the Program</td>
<td>0</td>
<td>0</td>
<td>1</td>
<td>4.5</td>
</tr>
<tr>
<td>Accepted a New Position after Graduation</td>
<td>1</td>
<td>7.7</td>
<td>7</td>
<td>31.8</td>
</tr>
<tr>
<td>Not employed in Nursing</td>
<td>0</td>
<td>0</td>
<td>1</td>
<td>4.5</td>
</tr>
<tr>
<td>Unemployed</td>
<td>1</td>
<td>7.7</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Fulfilled Employment 5 yr BSN completion requirement</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Have accepted new position with new employer</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

*Questions were changed for 2015/2016 data collection.

Another employment data measurement that the department is following is the question about the graduate’s plans for continuing their education after achieving their BSN. Table IV-D III is data collected regarding their plans upon graduation. This will be one of the data sets tracked in the next AACN/Benchworks Undergraduate Nursing Exit Assessment survey. This shows that slightly less than half the students are planning graduate education. Following this data will allow us to see the impact of the program and the choices of our students regarding continuing their education after they complete the program.

Table IV-D III
2016/2017
Have you been accepted to graduate school?

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>N</td>
<td>% of Total</td>
<td>N</td>
</tr>
<tr>
<td>Accepted to Graduate School</td>
<td>0</td>
<td>0</td>
<td>4</td>
</tr>
<tr>
<td>No</td>
<td>7</td>
<td>31.8</td>
<td>0</td>
</tr>
<tr>
<td>Applied waiting a decision</td>
<td>1</td>
<td>4.5</td>
<td>0</td>
</tr>
<tr>
<td>Applied not accepted</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Will apply within 6 months (or later)</td>
<td>7</td>
<td>31.8</td>
<td>12</td>
</tr>
</tbody>
</table>

*Questions varied on different year of survey
IV-E. Program outcomes demonstrate program effectiveness.

Elaboration: The program demonstrates achievement of outcomes other than those related to completion rates (Key Element IV-B), licensure and certification pass rates (Key Element IV-C), and employment rates (Key Element IV-D); and those related to faculty (Key Element IV-F).

Program outcomes are defined by the program and incorporate expected levels of achievement. Program outcomes are appropriate and relevant to the degree and certificate programs offered and may include (but are not limited to) student learning outcomes; student and alumni achievement; and student, alumni, and employer satisfaction data.

Analysis of the data demonstrates that, in the aggregate, the program is achieving its outcomes. Any program with outcomes lower than expected provides a written explanation/analysis for the variance.

Program Response:

The program uses two methods of evaluating the program outcomes to measure program effectiveness:

1. First method is the AACN/Benchworks Undergraduate Nursing Exit Assessment (Skyfactor) survey which has an institutional specific question on having the graduates rate “to what degree did the nursing program teach you to and this addressed all ten program outcomes”? This started with the 2014/2015 survey and has continued.

2. The second method is to review all course syllabi and to match the course objectives to the program outcomes and to make sure all are addressed.

The AACN/Benchworks Undergraduate Nursing Exit Assessment survey, which has an institutional specific question, had the graduates rate their evaluation of the program outcomes. Table IV-E I identifies the means of the rating scale for measurement of program outcomes.
### Table IV-E I
Program Outcomes for RN-BSN Program 2014-2017
AACN/Benchmark Undergraduate Nursing Exit Assessment

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Integrate theories and concepts from liberal arts education as the basis for decision making for the professional practice of nursing?</td>
<td>5.95</td>
<td>5.40</td>
<td>5.67</td>
</tr>
<tr>
<td>Scale Used: (1) Strongly Disagree, (2) Disagree, (3) Mildly Disagree, (4) Neutral, (5) Mildly Agree, (6) Agree, (7) Strongly Agree</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Use inter-disciplinary and intra-disciplinary collaborative strategies to produce professional working relationships?</td>
<td>6.10</td>
<td>5.86</td>
<td>5.92</td>
</tr>
<tr>
<td>4. Apply information literacy and health care technology to address the need of patients, organizations and health care delivery systems?</td>
<td>6.05</td>
<td>6.09</td>
<td>5.69</td>
</tr>
<tr>
<td>5. Incorporate evidenced based nursing interventions when planning and providing care for individuals, families and populations?</td>
<td>6.32</td>
<td>6.17</td>
<td>5.89</td>
</tr>
<tr>
<td>6. Recognize spiritually and culturally appropriate health promotion and disease and injury prevention interventions to promote individual and population health?</td>
<td>5.91</td>
<td>6.09</td>
<td>5.85</td>
</tr>
<tr>
<td>7. Explain the impact of socio-cultural, economic, legal, political and health policy factors that influence health care delivery and practice?</td>
<td>6.00</td>
<td>5.83</td>
<td>5.76</td>
</tr>
<tr>
<td>8. Assume accountability for personal and professional behaviors that will foster learning throughout the life span?</td>
<td>6.19</td>
<td>6.13</td>
<td>5.94</td>
</tr>
<tr>
<td>9. Demonstrate leadership principles in managing care of individuals, populations and organizations?</td>
<td>6.13</td>
<td>6.12</td>
<td>5.84</td>
</tr>
<tr>
<td>10. Implement population focused interventions with attention to health promotion and disease and injury prevention across the lifespan?</td>
<td>6.13</td>
<td>5.82</td>
<td>5.84</td>
</tr>
</tbody>
</table>

The data presented shows a mean score above a 5 on all items. The benchmark goal will be to reach 6 for all outcomes. The mean score of 5 or above (mildly agree or agree) demonstrates that the students think that the program is providing them the program outcomes they were told the program
would provide. Return response on the 2016/2017 survey increased which may have influenced the scores.

The second method is to for faculty to review all course syllabi and to match the course objectives to the program outcomes and to make sure all are addressed throughout the curriculum. Table IV-E II demonstrates the review of all the courses offered in the RN-BSN program and how they are matched to the program outcomes. (The x’s demonstrate how many of the course objectives address that program outcome).

Table IV-E II
Program Outcomes Found in Course Syllabi

<table>
<thead>
<tr>
<th>Courses Offered</th>
<th>Program Outcomes</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>I</td>
</tr>
<tr>
<td>310</td>
<td>XXX</td>
</tr>
<tr>
<td>320</td>
<td>x</td>
</tr>
<tr>
<td>332</td>
<td>x</td>
</tr>
<tr>
<td>340</td>
<td>xx</td>
</tr>
<tr>
<td>360</td>
<td>x</td>
</tr>
<tr>
<td>431</td>
<td>x</td>
</tr>
<tr>
<td>432</td>
<td>xxx</td>
</tr>
<tr>
<td>447</td>
<td>xx</td>
</tr>
<tr>
<td>451</td>
<td>x</td>
</tr>
<tr>
<td>452</td>
<td>x</td>
</tr>
</tbody>
</table>

This chart demonstrates that the course objectives reflect the integration of the program outcomes into the courses taught in the curriculum and assist our students to achieve the knowledge for meeting the program outcomes. The faculty review course objectives annually and assure their courses provide content that leads students to accomplishing program outcomes.

IV-F. Faculty outcomes, individually and in the aggregate, demonstrate program effectiveness.

Elaboration: The program demonstrates achievement of expected faculty outcomes. Expected faculty outcomes:
1. are identified for the faculty as a group;
2. incorporate expected levels of achievement;
3. reflect expectations of faculty in their roles and evaluation of faculty performance;
4. are consistent with and contribute to achievement of the program’s mission and goals; and
5. are congruent with institution and program expectations.

Actual faculty outcomes are presented in the aggregate for the faculty as a group, analyzed, and compared to expected outcomes.

Program Response:

The New Mexico Highlands University Department of Nursing faculty deliberated on a process to meet the requirements for Standard IV-F. It was essential to identify a process to demonstrate individual and aggregate faculty effectiveness and include all faculty teaching nursing courses in the department. There are three levels of faculty currently teaching in the nursing program at NMHU.
NMHU defines tenure track faculty as ranked faculty and consists of Assistant, Associate, and Professor. Retained term faculty are generally set for one year but there is an employee expectation of re-employment, unless given notice. Contingent faculty, formerly referred to as adjunct faculty, typically receive a one semester term contract. Contingent and retained term faculty have duties associated with teaching and generally do not include responsibilities required of ranked faculty (NMHU Faculty Handbook). Although contingent faculty are not covered under the Collective Bargaining Agreement (CBA), many of the policies ... are in alignment with that document. All faculty are held to the same standards of excellence as their tenured and tenure-track peers. Guidelines and polices for retained term and contingent faculty are in the Contingent Faculty Handbook.

The benchmark form is located in Appendix D. The tool was adapted to reflect three areas identified by in the NMHU faculty handbook for faculty evaluation. The three areas are Teaching and Advisement, Scholarship, and Professional, University, and Community Service.

There is currently one full time tenure track faculty, another tenure track faculty with duties split serving half time as Director of the Program. There is one retained term faculty and a varying number of contingent faculty hired depending on the need of the current semester. One contingent faculty has a doctoral degree and another is currently working on her doctoral studies. Since historically at NMHU, most of the faculty were either contingent or retained term, the faculty made the decision to include all faculty in the benchmarking process to determine the benchmark level. All faculty currently teaching the spring term of 2017, completed a five-year benchmark form. Yearly medians were obtained for each of the faculty ranks. This is the initial plan for implementation of the benchmark process and will be evaluated.

With the results of the pilot evaluation, a benchmark of 84 points annually was established. Prior to the data collection, the faculty anticipated having different levels for faculty ranks but because the results showed faculty performing consistently despite rank, one benchmark level will be used for the initial use of the tool. Faculty will be required to complete the Benchmark Process annually to allow all faculty to have an opportunity to contribute to the benchmark development. The director will have access to the data in order to support the BSN program effectiveness using individual and aggregate data. Actual levels of achievement of outcomes will be compared to expected levels of achievement. Expected achievement for individual faculty is 90% of target points within the ranking interval. Expected achievement for mean aggregate faculty data is 90% of target points across ranks. Table 1 highlights the different ranks, the five-year range of points and expected annual level. The benchmark level established through this process was 84 points annual achievement for all Ranks. The percent of faculty meeting the benchmark level is identified for each faculty rank.

<table>
<thead>
<tr>
<th>Faculty Rank</th>
<th>5 Year Range</th>
<th>Annual Expected Level</th>
<th>Percent Faculty Meeting Benchmark</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tenure Track (n=2)</td>
<td>281-539 points</td>
<td>410 points /5 years = 82</td>
<td>50%</td>
</tr>
<tr>
<td>Retained Term (n=1)</td>
<td>437 points</td>
<td>437 points/5 years = 87</td>
<td>100%</td>
</tr>
<tr>
<td>Contingent (n=3)</td>
<td>307-702 points</td>
<td>417 points / 5 years = 83</td>
<td>100%</td>
</tr>
</tbody>
</table>
For the total faculty (n=6), 83% were at benchmark level based on the five-year data collection. Data from the initial collection were also examined through sub category on the benchmark tool. This was intended to be helpful for faculty to identify areas to improve. Benchmarks for each subcategory were not created. Table IV-F 2 shows the five-year range accomplishments for faculty.

Table IV-F 2: Five-year subcategory range for achievement

<table>
<thead>
<tr>
<th>Faculty Rank</th>
<th>Scholarship</th>
<th>Teaching and Advisement</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tenure Track (n=2)</td>
<td>170-235 points</td>
<td>5-33 points</td>
</tr>
<tr>
<td>Retained Term (n=1)</td>
<td>180 points</td>
<td>113 points</td>
</tr>
<tr>
<td>Contingent (n=3)</td>
<td>104-332 points</td>
<td>3-93 points</td>
</tr>
</tbody>
</table>

The results of the faculty benchmark will provide individual faculty with feedback to assist them in planning for achievement of the next university rank or contract renewal as well as serve as a benchmark for faculty effectiveness in meeting the BSN program outcomes. Faculty demonstrated high achievement in multiple areas most notably scholarship and service activities. Program effectiveness is a result of faculty engagement whether through individual or aggregate accomplishments.

IV-G. The program defines and reviews formal complaints according to established policies.

*Elaboration: The program defines what constitutes a formal complaint and maintains a record of formal complaints received. The program’s definition of formal complaints includes, at a minimum, student complaints. The program’s definition of formal complaints and the procedures for filing a complaint are communicated to relevant constituencies.*

Program Response:

A formal complaint is defined as a student concern or conflict that does not rise to a violation of university policy or procedure. This would include situations where there is a conflict or concern with coursework, misunderstanding, disagreement or conflict among students, or between a student and a staff member or faculty. Students are encouraged to follow the procedure as outlined the NMHU Student Handbook under The Resolutions to Student Concerns. The Office of Student Affairs oversees this formal process.

No formal complaints have been received by the program to date. If a complaint was received, the Director and the Dean of the College of Arts and Sciences would meet and decide what immediate action was needed as outlined according to the NMHU Student Handbook and in accordance with due process rights accorded to students and faculty. Concerns are rapidly addressed within the nursing department and resolved according to the proper University policy.
If the complaint was not from a student, but from an outside agency, the Director would work out the appropriate action as to the complaint and then discuss how program issues need to be modified to continually improve the program. If the complaint was found to be valid, this would be documented in minutes of the Director and Administrators’ meetings. The complaint would then progress through the resolution, disciplinary or grievance process for resolution. The Director would acknowledge the formal complaint to the agency and discuss with them that corrective action has taken place.

IV-H. Data analysis is used to foster ongoing program improvement.

Elaboration: The program uses outcome data for improvement. Data regarding completion, licensure, certification, and employment rates; other program outcomes; and formal complaints are used as indicated to foster program improvement.

1. Data regarding actual outcomes are compared to expected outcomes.
2. Discrepancies between actual and expected outcomes inform areas for improvement.
3. Changes to the program to foster improvement and achievement of program outcomes are deliberate, ongoing, and analyzed for effectiveness.
4. Faculty are engaged in the program improvement process.

Program Response:

The program included the following measurements to look overall at program improvement. The following measurement of program outcomes and effectiveness data started the spring of 2015:

The program will use the data discussed in Key Elements IVB, IVC, IVD, and IVF to demonstrate the measurement of program effectiveness. The following benchmarks were set for the program to assist in measuring program effectiveness.

- 80% completion rate for our full-time students
- 75% completion rate for our part time students
- 50% acceptance rate of those passing NCLEX for enrollment in the RN-BSN program.
- 85% of those accepted will enroll. Admission data will be gathered as to # of available positions for admission, # admitted, # accepted and # enrolled.
- 90% of the students will be employed at the completion of their program.
- A mean of over 5.00 will be obtained on each of the program outcomes of our RN-BSN program as measured by the AACN/Benchworks Undergraduate Nursing Exit Assessment survey.
- A mean of over 5.00 will be obtained as to the program effectiveness, as measured by the AACN/Benchworks Undergraduate Nursing Exit Assessment survey. The program will continue to use the AACN/Benchworks Undergraduate Nursing Exit Assessment survey program effectiveness question.
New data was gathered starting May of 2015 to see how many of the graduates’ plan to pursue graduate education within three years of graduation from the RN-BSN program. Charts of the summary of the data measurements identified above are included in this report and some in Appendix A which show the updates of the data. This is the data that will be brought to the December faculty meetings each year and faculty will review and discuss the findings and any need for changes. The discussion and actions taken will be documented in the faculty meeting minutes.

Table IVH-I summarizes the data gathered and how it measures to the benchmarks set. Actions that the program took or is going to take are summarized. The following rates, outcomes and discussions were used by the faculty to measure program improvement: Completion rate, NCLEX admission, Admission rates, Employment rates, Program Outcomes, Program Effectiveness and faculty discussion at Faculty meetings.

<table>
<thead>
<tr>
<th>Measurement</th>
<th>% Expected Benchmark</th>
<th>% Actual</th>
<th>Action to Be taken</th>
</tr>
</thead>
<tbody>
<tr>
<td>Completion rates:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2013 FA Full time</td>
<td>80</td>
<td>95</td>
<td>The program is meeting the benchmarks set by the program and AACN. Anticipated completion rates for 2016/2017 may fall short. Faculty/Director to analyze results to plan for ways to help students succeed.</td>
</tr>
<tr>
<td>2013 FA Part Time</td>
<td>75</td>
<td>84</td>
<td></td>
</tr>
<tr>
<td>2014 FA Full Time</td>
<td>80</td>
<td>85</td>
<td></td>
</tr>
<tr>
<td>2014 FA Part Time</td>
<td>75</td>
<td>78</td>
<td></td>
</tr>
<tr>
<td>2015 FA Full Time</td>
<td>80</td>
<td>84</td>
<td></td>
</tr>
<tr>
<td>2015 FA Part Time</td>
<td>75</td>
<td>100</td>
<td></td>
</tr>
<tr>
<td>2015 SP Part Time</td>
<td>75</td>
<td>96</td>
<td></td>
</tr>
<tr>
<td>NCLEX admission:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>FA 2015</td>
<td>50</td>
<td>0</td>
<td>The recent data is show when students are accepted provisionally still needing to take the NCLEX exam, they do pass at a level meeting the benchmark.</td>
</tr>
<tr>
<td>SP 2015</td>
<td>50</td>
<td>50</td>
<td></td>
</tr>
<tr>
<td>FA 2016</td>
<td>50</td>
<td>100</td>
<td></td>
</tr>
<tr>
<td>SP 2016</td>
<td>50</td>
<td>n/a</td>
<td></td>
</tr>
<tr>
<td>FA 2017</td>
<td>50</td>
<td>n/a</td>
<td></td>
</tr>
<tr>
<td>SP 2017</td>
<td>50</td>
<td>100</td>
<td></td>
</tr>
<tr>
<td>Admission:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2015 SP Part Time</td>
<td>85</td>
<td>100</td>
<td>With the exception of Fall 2016 Part time admissions, data supports that if accepted the majority of students do enroll and begin the program. Continue the evaluation of students prior to admission and let them know what courses they still need to complete their degree.</td>
</tr>
<tr>
<td>2015 FA Full Time</td>
<td>85</td>
<td>100</td>
<td></td>
</tr>
<tr>
<td>2015 FA Part Time</td>
<td>85</td>
<td>92</td>
<td></td>
</tr>
<tr>
<td>2016 SP Part Time</td>
<td>85</td>
<td>90</td>
<td></td>
</tr>
<tr>
<td>2016 FA Part Time</td>
<td>85</td>
<td>78</td>
<td></td>
</tr>
<tr>
<td>2017 SP Part Time</td>
<td>85</td>
<td>100</td>
<td></td>
</tr>
<tr>
<td>2017 FA Part Time</td>
<td>85</td>
<td>n/a</td>
<td></td>
</tr>
<tr>
<td>Employment rates:</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
| Already employed and will continue in a nursing position 2016/2017 | 90 | 98 | Data supports that the majority of students are employed and work full time while in the program. Will clarify in the future AACN/Benchworks survey if students
change employers in their employment while in the program or after they graduate.

<table>
<thead>
<tr>
<th>Program Outcomes:</th>
<th>Mean 5</th>
<th>Average Mean 6.10</th>
<th>Average mean is above the benchmark but has steadily declined. Higher response rate in 2016. Plan to continue to evaluate outcomes in courses to measure on exit survey for comparative data.</th>
</tr>
</thead>
<tbody>
<tr>
<td>10 NMHU RN-BSN Program Outcomes 2014</td>
<td>Mean 5</td>
<td>5.96</td>
<td></td>
</tr>
<tr>
<td>2015</td>
<td>Mean 5</td>
<td>5.86</td>
<td></td>
</tr>
<tr>
<td>2016</td>
<td>Mean 5</td>
<td>5.75</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Overall Program Effectiveness:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rating from AACN/Benchworks Undergraduate Nursing Exit Assessment survey 2014</td>
</tr>
<tr>
<td>2015</td>
</tr>
<tr>
<td>2016</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Faculty Discussion:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Faculty discussion about students writing ability--continues to be an issue and want more emphasis on this in the curriculum</td>
</tr>
</tbody>
</table>
The Chief Nurse Administrator has approved the program information form and completed report, and confirms its contents as of ___5/11/2017_______. (DATE)

Submission Instructions:

All reports must be submitted on or before the due date (but no sooner than 30 days before the due date) to ensure that the information provided is current. Email the program information form, completed report, and appendices (as one document), if any, in PDF format, to Renee Ricci at rricci@aacn.nche.edu. Please do not send hard copies to CCNE.
Appendix A

RN-BSN
PROGRAM OUTCOMES

The Faculty members have put forward the following program outcomes:

IV. Integrate theories and concepts from liberal arts education as the basis for decision making for the professional practice of nursing.

I. Promote achievement of safe and quality outcomes for diverse populations.

II. Use inter-disciplinary and intra-disciplinary collaborative strategies to produce professional working relationships.

III. Apply information literacy and health care technology to address the need of patients, organizations and health care delivery systems.

IV. Incorporate evidenced based nursing interventions when planning and providing care for individuals, families and populations.

V. Recognize spiritually and culturally appropriate health promotion and disease and injury prevention interventions to promote individual and population health.

VI. Explain the impact of socio-cultural, economic, legal, political and health policy factors that influence health care delivery and practice.

VII. Assume accountability for personal and professional behaviors that will foster learning throughout the life span.

VIII. Demonstrate leadership principles in managing care of individuals, populations and organizations.

IX. Implement population focused interventions with attention to health promotion and disease and injury prevention across the lifespan.
## Appendix B

### Comparison of Program Philosophy, Framework, Standards, and Program Objectives

<table>
<thead>
<tr>
<th>Program Philosophy</th>
<th>Program Framework</th>
<th>Professional Standards (AACN)</th>
<th>Program Objectives</th>
</tr>
</thead>
<tbody>
<tr>
<td>...strong foundation in liberal education.</td>
<td>The nurse is accountable for his or her professional behavior and relies on evidence-based data.</td>
<td>Nursing practice derives knowledge from a wide array of other fields and professions, adapting and applying this knowledge as appropriate to professional practice (AACN).</td>
<td>I. Integrate theories and concepts from liberal education as the basis for decision-making.</td>
</tr>
<tr>
<td>A generalist...who is prepared to care for patients across a lifespan.</td>
<td>Nursing care is based on the patients’ biological, psychosocial, spiritual, cultural needs and values.</td>
<td>Liberal education is needed for the development of intellectual and innovative capacities for current and emergent generalist nursing practice (AACN).</td>
<td></td>
</tr>
<tr>
<td>The RN-BSN nursing education allows the registered nurse to build on core knowledge and experience. These adults are self-directed learners.</td>
<td></td>
<td>Liberally educated graduates practice from a foundation of professional values and standards (AACN).</td>
<td></td>
</tr>
<tr>
<td>Baccalaureate nursing education prepares professional nurses who have a strong foundation in liberal education.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>...meet human needs by providing safe, culturally sensitive, patient centered care across the lifespan to promote health and quality care.</td>
<td>The nurse uses many forms of evidence date to monitor outcomes of patient care. ... and participates in designing methods to improve patient outcomes.</td>
<td>Baccalaureate prepared nurses provide patient centered care that identifies, respects, and addresses patients’ differences, values, preferences, and expressed needs (IOM, 2003a).</td>
<td>II. Promote achievement of safe and quality outcomes for diverse populations.</td>
</tr>
<tr>
<td>Patients are recipients of nursing care and may be individuals, families, communities or populations.</td>
<td>The nurse incorporates clinical judgment and patient preferences to ensure patient safety and quality care</td>
<td>Patient advocacy...requires that nurses deliver high quality care, evaluate care outcomes, and provide leadership in improving care (AACN).</td>
<td></td>
</tr>
<tr>
<td>Through the process of quality improvement, professional nurses reflect on their individual practice and function as an instrument of change in the health care system.</td>
<td>...nurse minimizes risk factors that could cause injury or harm to patient, family or staff as advocate to promote health and quality care.</td>
<td>Graduates will be able to recognize safety and quality concerns and apply evidence based knowledge from the nursing profession and other clinical sciences to their practice (AACN).</td>
<td></td>
</tr>
<tr>
<td>Program Philosophy</td>
<td>Program Framework</td>
<td>Professional Standards (AACN)</td>
<td>Program Objectives</td>
</tr>
<tr>
<td>--------------------</td>
<td>-------------------</td>
<td>-------------------------------</td>
<td>-------------------</td>
</tr>
<tr>
<td>Nurses as part of the interdisciplinary health care team, promote health and quality care. As an agent of change, the professional nurse may function independently as well as in collaboration with other health team members.</td>
<td>Coordinates patient care and collaborates with members of nursing and interdisciplinary health team to achieve positive patient outcomes. Nurse fosters communication and mutual respect among health care team members.</td>
<td>All health professions are challenged to educate future clinicians to deliver patient centered care as members of an inter-professional team, emphasizing communication, evidence based practice, quality improvement approaches, and informatics (IOM, 2003a). Teamwork among healthcare professionals is associated with delivering high quality and safe patient care (AACN). Collaboration with other healthcare professionals and populations is necessary to promote conditions and healthy behaviors that improve population health (AACN).</td>
<td>III. Uses inter- and intra-disciplinary collaborative strategies to produce professional working relationships.</td>
</tr>
</tbody>
</table>
| Professional nurses have skills and proficiencies with information literacy and health care technology to assist in delivery of quality care. | The professional nurse uses information literacy, information processes, and information technology to support clinical decision-making. | Knowledge and skills in information and patient care technology are critical in preparing baccalaureate nursing graduates to deliver quality patient care in a variety of healthcare settings (IOM, 2003a). 

... Graduates must have competence in the use of information technology systems ... to gather evidence to guide practice (AACN).

Computer and information literacy are crucial to the future of nursing (AACN). | IV. Apply information literacy and health care technology to address needs of patients and health care organizations. |
<table>
<thead>
<tr>
<th>Program Philosophy</th>
<th>Program Framework</th>
<th>Professional Standards (AACN)</th>
<th>Program Objectives</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Nursing requires critical thinking, clinical judgment,</strong></td>
<td>The professional nurse accesses and utilizes current evidence from research and other</td>
<td>The generalist nurse provides evidence based care to patients within this changing environment (AACN).</td>
<td>V. Incorporate evidence-based nursing interventions when planning and providing care for individuals, families and groups.</td>
</tr>
<tr>
<td><strong>and evidence-based practice.</strong></td>
<td>creditable sources.</td>
<td>Professional nursing practice is grounded in the translation of current evidence into practice (AACN).</td>
<td></td>
</tr>
<tr>
<td><strong>RN-BSN nursing education allows the registered nurse to</strong></td>
<td>The nurse incorporates clinical judgment and patient preferences to ensure patient</td>
<td>Evidence based practice models provide a systematic process for the evaluation and application of scientific evidence surrounding practice issues (IOM, 2003b).</td>
<td></td>
</tr>
<tr>
<td><strong>build on core nursing knowledge and experience.</strong></td>
<td>safety and quality care.</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>...meet human needs by providing safe, culturally</strong></td>
<td>Nursing care is based on the patient’s biological, psychosocial, spiritual cultural</td>
<td>Increasing globalization of healthcare and the diversity of this nation’s population mandates an attention to diversity in order to provide safe, high quality care (AACN).</td>
<td>VI. Recognize spiritually and culturally appropriate health promotion and disease and injury prevention interventions.</td>
</tr>
<tr>
<td><strong>sensitive, patient centered care across the lifespan to</strong></td>
<td>needs and values.</td>
<td>The professional nurse practices in a multicultural environment and must possess the skills to provide culturally appropriate care (AACN).</td>
<td></td>
</tr>
<tr>
<td><strong>promote health and quality care.</strong></td>
<td>Provides patient centered care that is compassionate, caring, and culturally sensitive.</td>
<td>Professional nurses need to demonstrate sensitivity to and understanding of a variety of cultures to provide high quality care across settings (AACN).</td>
<td></td>
</tr>
<tr>
<td></td>
<td>The nurse uses many forms of evidence date to monitor outcomes of patient care and participates in designing methods to improve patient outcomes.</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Professional nurses also promote social justice and</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>advocacy, and help to optimize health in diverse</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>populations.</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Program Philosophy</td>
<td>Program Framework</td>
<td>Professional Standards (AACN)</td>
<td>Program Objectives</td>
</tr>
<tr>
<td>--------------------</td>
<td>------------------</td>
<td>-----------------------------</td>
<td>-------------------</td>
</tr>
<tr>
<td>Professional nurses promote social justice and advocacy, and engage in grassroots efforts to influence public policy.</td>
<td>The professional nurse is knowledgeable as to legislative mandates that influence the safe effective and economical delivery of nursing care.</td>
<td>Healthcare policies... directly and indirectly influence nursing practice as well as the nature and functioning of the healthcare system (AACN).</td>
<td>VII. Explain impact of socio-cultural, economic, legal, political, and health policy factors that influence health care delivery.</td>
</tr>
<tr>
<td>Baccalaureate nurses possess attitudes, knowledge, and skills that will prepare them for a long term career in an every changing practice environment.</td>
<td>Nurse contributes towards improving the functioning of health systems or agency and serves as an instrument of change in the health care organizations.</td>
<td>Professional nurses are knowledgeable as to legislative mandates that influence the safe effective and economical delivery of nursing care.</td>
<td></td>
</tr>
<tr>
<td>Nursing requires critical thinking, clinical judgment, and evidence-based practice.</td>
<td>The professional nurse accesses and utilizes current evidence from research and other credible sources.</td>
<td>The generalist nurse also is committed to lifelong learning, including career planning, which increasingly will include graduate level study (AACN).</td>
<td>VIII. Assume accountability for personal and professional behaviors that will foster learning throughout the lifespan.</td>
</tr>
<tr>
<td>Baccalaureate nurses are leaders in the health care environment as they continue their pursuit of lifelong learning for professional development.</td>
<td>Nurse is accountable for his or her professional behavior.</td>
<td>Professionalism also involves accountability for one's self and nursing practice, including continuous professional engagement and lifelong learning (AACN).</td>
<td></td>
</tr>
<tr>
<td>Woven throughout the program is the reinforcement of the importance of self-evaluation and the identification and development of one's own ongoing strategies for lifelong learning.</td>
<td>The nurse advocates for and respects the patient's decisions.</td>
<td>Baccalaureate graduates will have knowledge, skills, and attitudes that prepare them for a long term career in a changing practice environment (AACN).</td>
<td></td>
</tr>
<tr>
<td>Program Philosophy</td>
<td>Program Framework</td>
<td>Professional Standards (AACN)</td>
<td>Program Objectives</td>
</tr>
<tr>
<td>--------------------</td>
<td>-------------------</td>
<td>-------------------------------</td>
<td>-------------------</td>
</tr>
<tr>
<td>Baccalaureate nurses must possess attitudes, knowledge and skills that will prepare them for a long term career in an ever-changing practices environment.</td>
<td>The professional nurse uses information literacy, information processes and information technology to support clinical decision-making.</td>
<td>The development of leadership skills and acceptance of responsibility to promote social justice are expected outcomes of a liberal education (AACN).</td>
<td>IX. Demonstrate leadership principles in managing care of individuals, populations, and organizations.</td>
</tr>
<tr>
<td>These adults are self-directed learners who use their experiences to expand their knowledge base as leaders in the profession.</td>
<td>...Leader and manager of care coordinate patient care to achieve positive patient outcomes and provide continuity.</td>
<td>Leadership skills are needed that emphasize ethical and critical decision making, initiating and maintaining effective working relationships, using mutually respectful communication and collaboration within inter-professional teams... (AACN).</td>
<td></td>
</tr>
<tr>
<td>Baccalaureate nurse are leaders in the health care environment as they continue their pursuit of lifelong learning for professional development.</td>
<td>The nurse contributes towards improving the functioning of health systems or agency and serves as an instrument of change in the health care organizations.</td>
<td>Baccalaureate graduates will be skilled in working within organizational and community arenas and in the actual provision of care (AACN).</td>
<td></td>
</tr>
<tr>
<td>Professional nurses promote social justice and advocacy, engage in grassroots efforts to influence public policy, and help to optimize health in diverse populations.</td>
<td>Nursing care is based on the patient’s biological, psychosocial, spiritual cultural needs and values.</td>
<td>Advocacy for vulnerable populations with the goal of promoting social justice is recognized as moral and ethical responsibilities of the nurse (AACN).</td>
<td></td>
</tr>
<tr>
<td>...meet human needs by providing safe, patient -centered care across the lifespan to promote health and quality care.</td>
<td>...nurse minimizes risk factors that could cause injury or harm to patient, family or staff as advocate to promote health and quality care.</td>
<td>Health promotion, disease, and injury prevention across the lifespan are essential elements of baccalaureate nursing practice and ...necessary to improve population health (AACN).</td>
<td>X. Implement population-focused interventions with attention to health promotion and disease and injury prevention across the lifespan.</td>
</tr>
<tr>
<td>Patients are recipients of nursing care and may be individuals, families, communities, or populations.</td>
<td>The nurse advocates for and respects the patient’s decisions.</td>
<td>In population focused nursing, the aggregate, community or population is the unit of care. Emphasis is placed on health promotion and disease prevention (AACN).</td>
<td></td>
</tr>
</tbody>
</table>
Appendix C
Policy and Procedure for Curriculum Evaluation
NEW MEXICO HIGHLANDS UNIVERSITY
RN-BSN PROGRAM
Curricular Evaluation System: Policy & Procedures

IV. Purpose

To provide a mechanism for the evaluation of the RN-BSN curriculum of the Department of Nursing.

II. Policies

1. Evaluation of the BSN curricula shall be the responsibility of the Director and full and part time faculty.

2. The Curricular Evaluation System shall consist of the following evaluation methods:

   a. Review philosophy, organizing framework, program outcomes.
   b. Review the program outcomes for the RN-BSN program.
   c. Review of all courses in the curriculum.
   d. Student evaluation survey of all courses.
   e. Graduating seniors AACN/Benchworks Exit survey

3. Curricular changes based on results from any part of the evaluation system shall be presented to faculty for discussion and action at the spring faculty meeting.

III. Assumptions

1. All curricular decisions are guided by the concepts set forth in the NMHU Department of Nursing philosophy and conceptual framework.

2. Curricular decisions are based on a variety of data that are derived from students, faculty, and other members or the community of interest as appropriate.

3. Students, and faculty are committed to assuring that the curricula are structured, implemented and evaluated to address current and future trends.

4. It is the responsibility of the Director and Faculty to continuously improve the quality of the undergraduate program through systematic evaluation and feedback of the undergraduate curricula.

IV. Procedures

The attached chart identifies the areas to be considered for curriculum evaluation, evaluation methods, specific time frame for evaluation, who’s responsible for data and who will be responsible for decision making regarding the data obtained.

DATE APPROVED: Spring 2011
REVIEW DATE: Spring 2017
<table>
<thead>
<tr>
<th>Areas of Evaluation</th>
<th>Evaluation Methods</th>
<th>Time Frame</th>
<th>Responsible for Data Gathering and Data Evaluation</th>
<th>Responsible for Decision Making</th>
</tr>
</thead>
<tbody>
<tr>
<td>Area 1: The philosophy, organizing framework, program outcomes, and NMHU and DON strategic plans are consistent.</td>
<td>Compare philosophy, organizing framework and program outcomes, and NMHU and DON strategic plans for congnurence</td>
<td>At least every five years or with changes to NMHU</td>
<td>Director and Faculty</td>
<td>Director Faculty</td>
</tr>
<tr>
<td>Area 2: The curriculum is logically organized, internally consistent, responsive to the needs of the communities of interest, and are based on the philosophy, conceptual framework, and program outcomes. The curriculum progressively prepares the student to attain the program outcomes.</td>
<td>The curriculum plan will be reviewed. RN to BSN program of studies Individual nursing course reviews</td>
<td>At Least every five years</td>
<td>Director Faculty</td>
<td>Director Faculty NMHU Academic Affairs Curriculum Committee</td>
</tr>
<tr>
<td>Area 3: Each course contributes to the attainment of BSN Program outcomes.</td>
<td>Student course Evaluations Program Evaluation Program Outcome /Course Grid Individual nursing course reviews</td>
<td>After each semester</td>
<td>Director Faculty Office of Institutional Research</td>
<td>Director Faculty</td>
</tr>
<tr>
<td>Area 4: Clinical facilities are effective in providing experiences for meeting RN-BSN course and program outcomes.</td>
<td>Student course evaluation Advisory Committee, Faculty, and Community input</td>
<td>After each clinical course</td>
<td>Director Faculty Advisory Committee</td>
<td>Director Faculty</td>
</tr>
<tr>
<td>Area 5: Library holdings are adequate to facilitate the achievement of the RN-BSN course and program outcomes.</td>
<td>Student course evaluations Graduated senior Exit Survey</td>
<td>Annually</td>
<td>Director Faculty Library Staff</td>
<td>Director Faculty</td>
</tr>
<tr>
<td>Area 6: Components of CES will be reviewed</td>
<td>All elements of the Curricular Evaluation System are reviewed</td>
<td>At least every five years</td>
<td>Director Faculty Nursing Advisory Group</td>
<td>Director Faculty</td>
</tr>
</tbody>
</table>
Appendix D

NMHU Faculty Benchmark Process

New Mexico Highlands University
Nursing Faculty Benchmark Process

The faculty benchmarking process (BP) is a mechanism to measure New Mexico Highlands University (NMHU) nursing faculty expectations in three professional areas: Teaching and Advisement, Scholarship, research and creative activity, and service. The purpose of the BP is to demonstrate value and improvement in each of the three professional areas that will serve as a method to track faculty activities for contract renewal, tenure and promotion. For tenure track faculty, review periods will be the same periods designated NMHU contract renewal and promotion and tenure. The BP recommends achievement goals for each of the designated University ranks: Contingent Faculty, Retained Term Faculty, and Tenure track faculty.

Please complete the faculty BP by assigning points to each achievement you have accomplished during the review period.

Name:  Click here to enter text.  Rank Click here to enter text.

Review Period:
<table>
<thead>
<tr>
<th>Achievement</th>
<th>Assigned Points</th>
<th>Points Achieved</th>
<th>Comments</th>
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<tbody>
<tr>
<td>Journal Article</td>
<td>25</td>
<td>Click here to enter text.</td>
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</tr>
<tr>
<td>Single author</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Multiple authors divide 25 points by number of authors</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>National Presentation</td>
<td>20</td>
<td>Click here to enter text.</td>
<td>Click here to enter text.</td>
</tr>
<tr>
<td>Peer reviewed</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Multiple presenters divide 20 points by number of presenters</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Book</td>
<td>20</td>
<td>Click here to enter text.</td>
<td>Click here to enter text.</td>
</tr>
<tr>
<td>Peer reviewed</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Multiple authors divide 15 points by number of authors</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Website Development</td>
<td>15</td>
<td>Click here to enter text.</td>
<td>Click here to enter text.</td>
</tr>
<tr>
<td>For course (in addition to D2L), community or professional use. Each site developed eligible during the review period developed.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Book Chapter</td>
<td>15</td>
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<tr>
<td>Peer reviewed</td>
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<tr>
<td>Multiple authors divide 10 points by number of authors</td>
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<tr>
<td>Poster Presentation</td>
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<tr>
<td>Peer Reviewed or Invited</td>
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<tr>
<td>Newsletter Editor</td>
<td>5</td>
<td>Click here to enter text.</td>
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<tr>
<td>Local or national</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Journal Editor National</td>
<td>10</td>
<td>Click here to enter text.</td>
<td>Click here to enter text.</td>
</tr>
<tr>
<td>Grant Submission (no funds)</td>
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<td></td>
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</tr>
<tr>
<td>Federal (3), Regional (2), local (1)</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Grant Submission (Funded)</td>
<td>Click here to enter text.</td>
<td>Click here to enter text.</td>
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<tr>
<td>---------------------------</td>
<td>----------------------------</td>
<td>----------------------------</td>
<td></td>
</tr>
<tr>
<td>Federal (5), Regional (3), local (2)</td>
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<tr>
<th>Continuing Education (CEUs)</th>
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<tbody>
<tr>
<td>Each CEU is one point (itemize CEUs)</td>
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<table>
<thead>
<tr>
<th>National Certification &amp; Recertification (APRN)</th>
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<tr>
<td>25</td>
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<table>
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<tr>
<th>Specialty Certification &amp; Recertification</th>
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<tr>
<td>15</td>
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<table>
<thead>
<tr>
<th>CPR/ACLS Instructor, Certification &amp; Recertification</th>
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<tbody>
<tr>
<td>10</td>
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</table>

<table>
<thead>
<tr>
<th>Other (specify)</th>
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<table>
<thead>
<tr>
<th>Total</th>
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### Benchmark Level

#### Teaching and Advisement

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<tr>
<th>Teaching Award</th>
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</table>

<table>
<thead>
<tr>
<th>Special Honors Practice awards, service awards (itemize awards)</th>
<th>5</th>
<th>Click here to enter text.</th>
<th>Click here to enter text.</th>
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</table>

<table>
<thead>
<tr>
<th>Teaching Evaluations Benchmarks</th>
<th>5/course</th>
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<table>
<thead>
<tr>
<th>Innovative Classroom Technology</th>
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<table>
<thead>
<tr>
<th>Award Nomination</th>
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<tbody>
<tr>
<td>Distance Certified Courses (each)</td>
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<tr>
<td>Other (specify)</td>
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<td></td>
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<tr>
<td>Total</td>
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</tbody>
</table>

**Benchmark Level**

**Professional, University, and Community Service**

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<th>National Board of Directors</th>
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<tbody>
<tr>
<td>Editorial Board Member</td>
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<td>Click here to enter text.</td>
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</tr>
<tr>
<td>National Committee Chairperson</td>
<td>20</td>
<td>Click here to enter text.</td>
<td>Click here to enter text.</td>
</tr>
<tr>
<td>National Organization Membership (STTI, AACN, etc.) (each review period)</td>
<td>10</td>
<td>Click here to enter text.</td>
<td>Click here to enter text.</td>
</tr>
<tr>
<td>Local Organization Chair</td>
<td>15</td>
<td>Click here to enter text.</td>
<td>Click here to enter text.</td>
</tr>
<tr>
<td>Local Organization Membership (STTI, etc)</td>
<td>5</td>
<td>Click here to enter text.</td>
<td>Click here to enter text.</td>
</tr>
<tr>
<td>Curriculum Consultant</td>
<td>15</td>
<td>Click here to enter text.</td>
<td>Click here to enter text.</td>
</tr>
<tr>
<td>Advanced Degree in process or Achievement (PhD, DNP, etc.)</td>
<td>15</td>
<td>Click here to enter text.</td>
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</tr>
<tr>
<td>----------------------------------------------------------</td>
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<td>---------------------------</td>
<td>---------------------------</td>
</tr>
<tr>
<td>Post Masters or other Certificate program</td>
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<td>Click here to enter text.</td>
</tr>
<tr>
<td>Journal Reviewer (per article)</td>
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<td>Click here to enter text.</td>
<td>Click here to enter text.</td>
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<tr>
<td>Applied Learning (for each 20 hours; practice)</td>
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<tr>
<td>Total</td>
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<tr>
<td>University Committee Chair</td>
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<tr>
<td>University Senate Member</td>
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<tr>
<td>Senate Committee Member</td>
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<td>Click here to enter text.</td>
</tr>
<tr>
<td>Ad Hoc University Committees (each) (e.g. TPRC; Search)</td>
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<td>Click here to enter text.</td>
<td>Click here to enter text.</td>
</tr>
<tr>
<td>Nursing Search Committee (Faculty, staff)</td>
<td></td>
<td>Click here to enter text.</td>
<td>Chair 5 Member 3</td>
</tr>
<tr>
<td>Nursing Department Committees (each) Please list each committee. Each committee is counted once during the review period</td>
<td>1</td>
<td>Click here to enter text.</td>
<td>Click here to enter text.</td>
</tr>
<tr>
<td>Total</td>
<td></td>
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<tr>
<td>Position</td>
<td>Points</td>
<td>Notes</td>
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</tr>
<tr>
<td>----------------------------------------------</td>
<td>--------</td>
<td>--------------------------------------------</td>
<td></td>
</tr>
<tr>
<td>Board of Directors (member) (clinic, hospital.)</td>
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<tr>
<td>Advisory Board (member) Community agency</td>
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<tr>
<td>Health Fair/Screening Organizer</td>
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<tr>
<td>Health Fair Participation (each)</td>
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<tr>
<td>CPR/ACLS Instructor each class taught</td>
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<td>Click here to enter text.</td>
<td></td>
</tr>
<tr>
<td>Others Submit purpose &amp; rationale for community service</td>
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<td>Click here to enter text.</td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td></td>
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<tr>
<td>Grand Total</td>
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</table>

Outcome Target:
All Faculty
Annual accrual of minimum of 84 points.
NEW MEXICO HIGHLANDS UNIVERSITY
SEEKS A PROFESSIONAL NURSE EDUCATOR TO SERVE AS THE
DIRECTOR OF NURSING

New Mexico Highlands University is accepting applications for a twelve month, tenure-track (optional) faculty position (Assistant or Associate depending on experience) to be filled as soon as possible.

NMHU is seeking energetic, creatively engaged faculty to join our growing online RN-BSN degree program. The mission of the Department of Nursing is to prepare quality nurse health care providers through excellence in education, scholarship and service. The program builds on the strength of the licensed registered nurse and challenges the individuals enrolled in this program to expand their critical thinking for new professional nursing roles, methods of health care delivery and approaches to health care practice issues. The mission of the Department of Nursing is to prepare quality nurse health care providers through excellence in education, scholarship and service.

JOB DUTIES: In addition to managing the department, the person will be expected to teach 6 credit hours a semester. The selected applicant will be expected to serve on departmental and university committees. The person will write the report to maintain the department’s accreditation with CCNE nursing accreditation and develop the assessment of Student Learning Outcomes. The ideal candidate will have competencies in some of the following areas: leadership of an online program, budgetary experience, curriculum program evaluation and development, online instructional experience and course development.

The selected candidate must have proficiencies with teaching the adult learner students about professional-issues. Will work on a strategic plan to foster growth of the RN-BSN program and the need for the development of a masters in nursing. We seek an individual who enjoys the management, enhancement of an existing program and is willing to further shape and develop the Nursing program.

The Nursing program is currently delivered and supported with resources located on the main campus in Las Vegas, NM; however, as the program is completely online, the residence of the director is negotiable upon hire.

MINIMUM REQUIREMENTS: Education: Doctorate in Nursing (PhD or DNP) preferred. Applicant who is ABD will be considered. Experience: Five years nursing education experience. One of the five years of experience with an RN-BSN program preferred. Demonstrated experience in Nursing curricula evaluation and development for RN-BSN Programs, University program leadership and delivery of online Nursing courses preferred.

While the position is open until filled review of applications will begin Monday, September 30, 2016

MINIMUM SALARY: Assistant $70,000, Associate $75,000

APPLICATION PROCEDURE: A complete application must include 1) One to three page letter of interest highlighting key experiences and outlining a vision and plan for growing the nursing program at Highlands University 2) curriculum vita, 3) unofficial copies of advanced degree transcripts, 4) University employment application and, 5) names/address/phone numbers of 3 professional references.

Required application materials should be sent to: jobs@nmhu.edu.

References will be contacted in conjunction with on campus interview and official transcripts should be requested upon acceptance of the on campus interview.
For more detailed information regarding the position you may contact: sdwilliams@nmhu.edu

NMHU is an open admissions university with over 70% Hispanic, Native American, or African American students and nearly 40% studying at the master’s degree level. The university is committed to student success and improved retention and graduation rates. NMHU serves approximately 2,500 undergraduate and graduate students at the main campus in Las Vegas, NM (one hour east of Santa Fe) and another 1,300 students at centers in Rio Rancho, Albuquerque, Santa Fe, Espanola, Farmington, and Raton. The university enrolls students from 42 states, 19 tribes, and 35 foreign countries. For more information about the university, visit the website at www.nmhu.edu.

For disabled access or services call (505) 454-3242 or hr@nmhu.edu

NEW MEXICO HIGHLANDS UNIVERSITY IS AN EEO EMPLOYER
Appendix F

Table III-B I
The Essentials of Baccalaureate Education Evidence in NMHU Curriculum (2017)

<table>
<thead>
<tr>
<th>BSN Essentials</th>
<th>Courses</th>
</tr>
</thead>
</table>
| Essential II: Basic organizational and systems leadership for quality care and patient safety. | NURS 320 Health Assessment: Course objectives require incorporation of cultural considerations as well as the health history assignments.  
NURS 332 Nursing Informatics: course objectives look at how informatics can be used to affect patient safety and quality outcomes.  
NURS 340 Professional Nursing: Course objectives introduce students to professionalism in nursing by exploring resources, issues, politics and the role of the professional nurse within the health care system. The course broadens the knowledge and understanding of the BSN nurse to competently assume the role of the professional nurse.  
NURS 370 Nursing Research: Course Objectives and assignments are related to Evidence Based Research that seeks to examine research that impacts professional nursing. Students appraise the current research and the applicability to practice and demonstrate knowledge via APA papers or discussion.  
NURS 431 Community Health: Course objectives and assignments incorporate change theory, social change and leadership skills the CH/PH nurses needs for community interventions.  
NURS 432 Health Law and Policy: Course objectives require the exploration of interrelationships of legal, regulatory and practice issues; evaluation of certain health care policies in shaping health care delivery, quality and costs; and the discussion of how proactive health care policy strategies can enhance delivery of quality nursing care.  
NURS 447 Community Health Practicum: course objectives and activities incorporate how community organizations function and students will participate in an exercise defining health problems and health solutions for a population in a specified county.  
NURS 451 Leadership Seminar: Course objectives describe the management and organizational principles.  
NURS 452 Leadership Practicum: Course objectives explore how the student will utilize theory from NURS 451 in a clinical practicum through a potential issue found after an organizational assessment and problem identification in an organization. Quality and safety are two core concepts covered in theory. |
<table>
<thead>
<tr>
<th>Essential III: Scholarship for evidence-based practice.</th>
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<tbody>
<tr>
<td><strong>NURS 310 RN to BSN Bridge Course:</strong> Course objectives prioritize scholarly writing principles and students learn how to use APA format and search the literature through nursing databases. They choose an issue and write a paper referencing appropriately using nursing literature. <strong>NURS 320:</strong> Course readings and assignments prioritize the use of evidence-based assessment techniques and health prevention interventions when working with diverse population considering age specific recommendations. <strong>NURS 340 Professional Nursing:</strong> Course objectives explore professionalism relate to practice, the varying roles of the professional nurse and the issues that impact practice. Lengthy, research supported discussions are used to provide communicating and collaborating with other professional nurse to discuss issues that affect practice. <strong>NURS 370 Nursing Research:</strong> Course objectives explore relationships of research and clinical practice; also, the course objectives, readings and assignments consider current professional and ethical issues, credibility of literature and integration of research findings into practice. <strong>NURS 431 Community Health:</strong> Course objectives speak to using epidemiological methodology and evidence based practice to guide nursing interventions in the community. <strong>NURS 432 Health Law and Policy:</strong> The course objectives identify relevant health care topical issues one is the importance of the use of evidence-based research in support of policy development. One student assignment is the development of a policy brief based on evidence-based research. <strong>NURS 447 Community Health Practicum:</strong> course objectives have students define a county community health problem and provide evidence that supports the solution to the problem defined in the county. <strong>NURS 360 Cultural Competency:</strong> Course objectives examine use of evidence-based research and its influence on the delivery of culturally congruent/competent care</td>
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<th>Essential IV: Information management and application of patient care technology.</th>
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<td><strong>NURS 320 Health Assessment:</strong> Course readings and assignments address the documentation of assessment findings through Electronic Health Data Management Systems. <strong>NURS 332 Nursing Informatics:</strong> Course objectives describe the nurse as a knowledge worker and discuss how the nurse can use health technology for better patient outcomes. <strong>NURS 432 Health Law and Policy:</strong> Course objectives explore the interrelationships of legal, regulatory and practice issues which includes the HIPPA and Electronic Medical Records policies and laws. <strong>NURS 340 Professional Nursing:</strong> Course objectives review quality improvement and safety that affects professional nursing. Discussions are provided that report on new technologies and the efficacy of treatments that are utilized. <strong>NURS 447 Community Health Practicum:</strong> Course objectives address collecting epidemiological data to complete an online community assessment using databases online and other health information accessed through websites.</td>
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<td>NURS 370 Nursing Research:</td>
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<td>Essential V: Healthcare policy, finance, and regulatory environments.</td>
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<td>NURS 340 Professional Nursing:</td>
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<td>NURS 370 Research:</td>
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<td>NURS 360 Cultural Competence:</td>
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<td>NURS 431: Community Health:</td>
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<td>NURS 432 Health Law and Policy:</td>
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<td>NURS 447: Community Health Practicum:</td>
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<td>Essential VI: Interprofessional communication and collaboration for improving patient health outcomes.</td>
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<td>NURS 310 RN to BSN Bridge Course:</td>
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| NURS 370 Nursing Research:                                           | Course readings and class activities address historical development of ethical codes of  
practice and their application to contemporary nursing research. Discussion questions review Standards of Care to reduce falls, infections and other mandates to improve patient outcomes and what their health care setting is doing to meet these standards.

**NURS 432 Health Law and Policy:** Course readings and discussion identifies communication tactics to bring health care issues and concerns to those in position to make legal, regulatory and practice policies. The development of a policy brief which communicates a policy issue is one of the assignments.

**NURS 447 Community Health Practicum:**
Objectives show through the investigation by the student as to county health problems and what some of the interprofessional solutions to identified problems may be.

**NURS 451 Nursing Management:** Course objectives explore communication from a management and leadership perspective. Topics to be discussed are role conflict, problem solving, and change and leadership style.

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**Essential VII: Clinical prevention and population health.**

**NURS 320 Health Assessment:** Comprehensive health history and assessment assignments incorporate family history, environmental exposure, and use of evidence-based practices to guide patient teaching.

**NURS 340 Professional Nursing:** Course objectives introduce the student to the health care delivery system with an emphasis on health promotion and prevention.

**NURS 360 Cultural Competence:** Course objectives explore health disparities and resources for clinical prevention in providing care to diverse ethnic populations.

**NURS 370 Nursing Research:** Course objectives are met by inquiry via current research literature related to Evidence Based Practice for student papers that report on current clinical prevention and treatments to promote health.

**NURS 431 Community Health:** Course objectives focus on the all levels of prevention directed toward populations.

**NURS 432 Health Law and Policy:** Course readings and discussion expose the students to the relationship of policy development to clinical prevention and population health.

**NURS 447 Community Health Practicum:** Students are involved with the implementation of all levels of prevention in community based nursing through written projects required to justify a health promotion project.

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**Essential VIII: Professionalism and professional values.**

**NURS 310 RN to BSN Bridge Course:** Objectives include the concepts of critical thinking, problem solving, and the spirit of inquiry as it applies to nursing situations.

**NURS 320 Health Assessment:** Health histories and assessments incorporate consideration of cultural mores and issues of privacy and confidentiality.

**NURS 340 Professional Nursing:** Objectives address the professional role of the nurse in a changing health care delivery model. Lifelong learning and professionalism is explored.

**NURS 360 Cultural Competency:** Course objectives and activities explore self-awareness and self-assessment of
professional nursing behavior in working with diverse ethnic populations.

**NURS 370 Nursing Research:** Course objectives, readings and assignments emphasize ethical principles and practices; through class discussions, students explore their own philosophical beliefs and how these affect research interests and practice application. Reviewing and reporting via student papers also expose the student to professionalism and the role of the professional nurse.

**NURS 431 Community Health:** Objectives explore roles of community health nurses and their professional role in implementing health changes into communities.

**NURS 432 Health Law and Policy:** Course objective discuss how proactive health care policy strategies through professional nursing organizations and networking can enhance delivery of quality nursing care.

**NURS 447 Community Health Practicum:** Course has the student interview a current practicing community health professional as to their role, values and job duties.

**NURS 451 Management:** Course objectives and activities address the professional role of the nurse in leadership of health care organizations. Change, emotional intelligence and conflict as explored as issues for professional nurse leader.

**Essential IX: Baccalaureate generalist nursing practice.**

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<tr>
<td><strong>NURS 310 RN to BSN Bridge Course:</strong></td>
<td>Course objectives and activities have the student explore what the professional role of nurse and the guiding documents that outline the role of the baccalaureate nurse.</td>
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<td><strong>NURS 320 Health Assessment:</strong></td>
<td>Course objectives and health history assignments emphasize safe care environment and application of evidence-based assessment interventions; health history assignments also emphasize effective communication of findings.</td>
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<td><strong>NURS 340 Professional Nursing:</strong></td>
<td>Course objectives have students explore baccalaureate nursing issues relevant to the profession.</td>
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<td><strong>NURS 370 Nursing Research:</strong></td>
<td>Through use of the research assignments, students probe best nursing practices that promote high quality patient outcomes.</td>
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<td><strong>NURS 431 and NURS 447 Community Health Nursing and Practicum:</strong></td>
<td>Course objectives outline the expanded professional role of the baccalaureate nurse in many different health care delivery settings. The nurse’s role in disasters and emergency situations is also discussed.</td>
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<tr>
<td><strong>NURS 432 Health Law and Policy:</strong></td>
<td>Course objectives and readings identify relevant health care topical issues within the policy arena of the importance of increasing the number of baccalaureate prepared nurses in patient care and safety.</td>
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| **NURS 451 and NURS 452 Nursing Management:** | Course objectives explore the management principles of delegation, resource management and general principles of nursing management in a variety of health care settings. Through an organizational assessment, students see theory into practice. Student also explore professional role of the nurse manager in a clinical setting with a faculty preceptor through written
assignments. Leadership and management competencies are explored using AONE in written assignments.