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# SITE VISIT REPORT Middle Georgia State Univesity Macon, GA

**Program Type:** Master's

**Purpose of Visit: Initial Accreditation** 

**Date of Visit:** January 31-February 2, 2017

#### I. GENERAL INFORMATION

**Nursing Education Unit** Governing Organization Department of Nursing Middle Georgia State Univesity 100 University Parkway 100 University Parkway Macon, GA 31206 Macon, GA 31206

Nurse Administrator Chief Executive Officer (entire governing organization) Christopher R. L. Blake, PhD Donna Ingram, DNP, RN

Chair, Department of Nursing President

Telephone: (478) 471-2712 Telephone: (478) 471-2761 Fax: (478) 314-5780 Fax: (478) 757-6658

E-mail: donna.ingram@mga.edu Email: christopher.blake@mga.edu

State Regulatory Agency Approval Status Agency: Georgia Board of Nursing

Last Review: N/A Outcome: N/A Next Review: N/A

Last Review: N/A

Accreditation Status (Program) Accreditation Status (Governing Organization)

Accreditation Commission for Southern Association of Colleges Agency: Agency: **Education in Nursing** 

and Schools Commission on

Colleges

Outcome: N/A Last Review: 2016

Next Review: N/A Outcome: Reaffirmation of Accreditation

Next Review: 2026

# II. SITE VISIT INFORMATION

# **Site Visit Team:**

Chairperson	Member
Diane Weed, PhD, RN, FNP-BC	Judy Burckhardt, PhD, MAEd, MSN, RN
Director, School of Nursing	Dean and Professor, Nursing and Healthcare
Troy University	American Sentinel University
400 Pell Avenue	2260 South Xanadu Way, Suite 3410
Troy, AL 36082	Telephone: (636) 222-4432
Telephone: (334) 670-3745	Fax: (866) 505-2450
Fax: (334) 670-3744	Email: judybphd@hotmail.com
Email: lweed@troy.edu	
<u>Member</u>	
Laurie Hillson, PhD, RN, CNOR	
Associate Director of Master's Nursing Programs	
Van Laon School of Professional Studies	
Endicott College	
376 Hale Street	
Beverly, MA 01915	
Telephone: (978) 232-2332	
Fax: (978) 232-2391	
Email: lhillson@endicott.edu	

ACEN Standards and Criteria Used: 2017

# **Program Demographics:**

Year Nursing Program Established: 2016
Year of Initial ACEN Accreditation: N/A

☐ Yes	The ACEN serves as the Title IV gatekeeper for the governing organization.
⊠ No	

# Faculty:

Number of full-time nursing faculty teaching in the master's program:	2
Number of part-time nursing faculty teaching in the master's program:	0
Number of shared full-time nursing faculty teaching in the master's program:	
Number of shared part-time nursing faculty teaching in the master's program:	0

# Students:

Total enrollment:	16
Full-time:	0
Part-time:	16

Program Options Offered:
Visited By Site Visit Team:

Program Options/Length:	
Name of Program Option:	Master's of Science in Nursing – Adult/Gerontology Acute Care Nurse
	Practitioner (AGACNP)
Method of Delivery:	Distance Education
Percentage of Nursing Credits	□ 0% □ 1–24% □ 25–49% □ 50–100%
Delivered by Distance Education:	□ 0% □ 1-24% □ 23-49% □ 30-100%
Student Enrollment Status:	Part-time
Academic Term Type:	Semesters
Length of Academic Term (weeks):	17
Length of Time/Required Number of	5
Academic Terms:	
Total Number of Credits:	43
Nursing Credits:	43
General Education Credits:	0
Prerequisite Credits:	0
Transfer Credits (included in the	Up to $\underline{0}$ general education credits can be transferred into the program.
nursing/general education credits	Up to $\underline{9}$ nursing credits can be transferred into the program.
above):	
Additional Locations:	
Name of Location:	Warner Robins
Address (Number, Street, City, Zip	100 University Boulevard
Code):	Warner Robins, GA 31093
Location Classification:	Branch Campus
Percentage of Credit Hours for Entire	□ 1-24% □ 25-49% □ 50-100%
Program of Study Taught at	
Location:	

Name of Location:	Cochran
Address (Number, Street, City, Zip	1100 Second Street, Southeast
Code):	Cochran, GA 31014
Location Classification:	Branch Campus
Percentage of Credit Hours for Entire	☑ 1–24% □ 25–49% □ 50–100%
Program of Study Taught at	
Location:	
Program Options Offered:	Online
Visited By Site Visit Team:	No

Online No

Name of Location:	Dublin
Address (Number, Street, City, Zip	1900 Bellevue Road
Code):	Dublin, GA 31021
Location Classification:	Branch Campus
Percentage of Credit Hours for Entire	☑ 1–24% □ 25–49% □ 50–100%
Program of Study Taught at	
Location:	
Program Options Offered:	Online
Visited By Site Visit Team:	No
Location: Program Options Offered: Visited By Site Visit Team:	

Name of Location:	Eastman
Address (Number, Street, City, Zip	71 Airport Road
Code):	Eastman, GA 31023
Location Classification:	Branch Campus
Percentage of Credit Hours for Entire	☑ 1–24% □ 25–49% □ 50–100%
Program of Study Taught at	
Location:	
Program Options Offered:	Online
Visited By Site Visit Team:	No

#### **Interviews:**

#### **Individual Conferences:**

Donna Ingram, DNP, RN, Chair, Department of Nursing

Christopher Blake, PhD, University President

Darrell Thompson, DNP, ACNP, FNP, RN, Graduate Program Coordinator and Associate Dean

#### **Group Conferences**

University Administration

Melanie Hatch, PhD, Provost

Pamela Bedwell, PhD, Vice Provost for Academic Initiatives

Andy Clark, PhD, Vice Provost for Academic and Institutional Quality

Nancy Stroud, CPA, Executive Vice President, Finance and Operations

Kevin Cantwell, PhD, Dean, Office of Graduate Studies

Loretta Clayton, PhD, Associate Dean, Office of Graduate Studies

#### **Nursing Faculty**

Lawanda Greene, DNP, MPH, RN, AGACNP-BC

Stephanie Tolliver Epps, MSN, MBA, RN, APRN, CCRN, AGACNP-BC

Shirley Camp, JD, MSN, RN, FNP

Kinzie Lee, DNP, RN

Kendra Russell, PhD, MSN, RN

#### Support Personnel

Elizabeth Douglas, Admissions Assistant, Office of Graduate Studies

Lee Ann Kirkland, JD, Director, Office of Financial Aid

Michael Stewart, EdD, Assistant Vice President/Chief Student Conduct Office

Jennifer Brannon, EdD, Vice President of Student Affairs

Allen Chastain, MEd, Director of Disability Services

Jeff Marshall, MS, Director of IT Services

Shawn Douglas, Chief, MGA Police Department

Darryl Handcock, EdD, Director Center of Excellence in Teaching/Learning

Charles Smith, Director of Academic Technology Services

Cheryl Carty, M.A., Interim Vice President for Marketing and Recruitment/Chief Marketing Office

Pat Borck, MSLS, University Librarian

Chris Nylund, MLIS, Graduate Studies and Reference/Instruction Librarian

#### **Nursing Students**

Second-semester students, n=2

Fourth-semester students, n=7

#### **Documents Reviewed:**

Catalogs, Handbooks, and Manuals

Middle Georgia State University (MGA) Catalog, 2016–2017

MGA Faculty Handbook, 2016–2017

Office of Graduate Studies, Graduate Student Catalog, 2016–2017

Office of Graduate Studies, Graduate Faculty Handbook Draft Form, October 24, 2016

MSN/AGACNP Student Handbook, 2016–2017

Office of Human Resources Policies and Procedures Manual, November 5, 2015

MGA Office of Human Resources and Procedures Manual for Hiring, November 5, 2015

University System of Georgia (USG) Student and Academic Affairs Handbook, January 6, 2017

Middle Georgia State University Policy Manual, 2017

# **External Constituency Documents**

Coliseum Medical Center Faculty/Students Attestation Form, current

Navicent Student/Faculty Credential Checklist, current

Chair of DON Notes of Meetings with Hospital Educators and Administrators, August 23, 2016–September 20, 2016

Georgia Board of Nursing Education Program Annual Reports, 2014; 2015; 2016

Georgia Board of Nursing Information/Mission, 2017

New Program Prospectus for USG – MSN, August 11, 2014

New Program Proposal for USG – MSN/Letter of Submission, November 7, 2014

Correspondence with Georgia Board of Regents/USG regarding MSN Proposal, March 2015

Letter from USG Approving MSN/AGACNP Program, April 27, 2015

Nursing Faculty Initiative Grant, 2016

President's Support Letter for the Nursing Faculty Initiative Grant (NFI), April 26, 2016

Nurse Administrator's PowerPoint for the NFI Grant, January 24, 2017

NFI Site Coordinator Job Requisition and Job Description, November 22, 2016

NFI Clinical Instructor Job Requisition and Job Description, November 22, 2016

Correspondence with Fairview Park HCA Hospital, 2015; 2016

Georgia Board of Nursing Registered Nursing Education Program Rules, 2017

SACSCOC Approval Letter, January 19, 2016

Georgia Board of Regents Policy Manual, July 28, 2009

Georgia Student Finance Commission Scholarship and Grant Program Compliance Review, 2015

University System of Georgia Policy on Records Management, 2017

American Association of Colleges of Nursing Adult-Gerontology Acute Care Nurse Practitioner Competencies, 2012

NONPF Nurse Practitioner Core Competencies, 2012

Vernon Smith and Sons Construction – Quote for Jones 149 Simulation Addition, November 1, 2016

Board of Regents Executed Commitment Letter, July 8, 2016

STEM Building Blueprint, October 14, 2016; October 25, 2016

## Nursing/Governing Organization Documents

MGA Mission, Vision and Values MGA, 2015-2018

MGA Strategic Priorities—Greatness Begins Here, 2017

MGA Mission Statement, 2017

Office of Graduate Studies Mission/Philosophy Statement, 2017

School of Health Sciences Mission Statement, 2017

Department of Nursing Mission Statement, 2017

MGA Nursing Committee Assignments/Membership, 2015–2016; 2016–2017

School of Health Sciences Committee Assignments/Membership, 2015–2016; 2016–2017

MGA Boards Membership, 2015-2016; 2016-2017

MGA Standing Committees Membership, 2015–2016; 2016–2017

MGA Faculty Senate Membership, 2015–2016; 2016–2017

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MGA Graduate Studies Council, 2016–2017

Bylaws Interim Graduate Studies Council, August 28, 2015

MGA Graduate Student Advisory Council Mission, 2016–2017

Recruitment and Promotion Materials, November 10, 2016

Middle Georgia State Today Article "Innovative Nursing Master's Degree will Meet Critical Need in Middle Georgia and Beyond," Spring 2016

Houston Home Journal's Article "MGSU's Innovative Nursing Grad Degree Meets Critical Need," June 2016

MGA Graduate Student Advisory Council Membership Invitation, January 9, 2017

MGA Certificate for the Nurse Administrator for service on the President's Vision Taskforce, Spring 2014

MGA/DON Graduate Syllabus Template with MSN SLOs, 2017

Institution and Facility Applied Learning Experience Agreement with Navicent Medical Center, March 11, 2016

Institution and Facility Applied Learning Experience Agreement with Coliseum HCA Medical Centers, September 19, 2016

Institution and Facility Applied Learning Experience Agreement with First Choice Primary, December 19, 2016

Nurse Administrator Curriculum Vitae and RN Licensure Verification, current

Department of Nursing Chair Job Description, 2017

Evaluating Faculty Performance, 2006

Department of Nursing Organizational Chart, Fall 2016

MGA Office of President Organizational Chart, 2016–2017

MGA Academic Affairs Organizational Chart, January 2017

Graduate Coordinator Curriculum Vita, 2016

Graduate Coordinator Graduate Program Coordinator Job Description, current

Sample Quality Matters Checklist, January 12, 2017

Certificate of Completion for Quality Matters, 2016

MSN Clinical Rotations, Summer 2016

Capstone Project Proposal Presentation Grading Rubric, 2017

Simulation Laboratory Evaluation, 2017

Example of Start Module, current

Course Book Checklist, August 2015

Graduate Coordinator Graduate Associate Dean Job Description, 2017

Graduate Coordinator Transcripts, current

Graduate Coordinator Advanced Practice Certifications, current

Job Descriptions for University Department Chairs, current

Nursing Department Budget Reports, 2015; 2016; 2017

MGA Budget Process, 2017

Communication from Chief Financial Officer regarding MGA Budget, December 12, 2016

Department of Distance Learning Job Descriptions, 2017

MGA Faculty Self Evaluation Form, January 2, 2014

MGA Annual Evaluation by Administrator Form, January 27, 2016

MGA DON Performance Based Evaluation Form, 2016

Sample MGA Student Course Evaluations for NURS 1000, Fall 2016

MGA Nursing Faculty Job Description, 2017

MSN Program of Study, current

MGA MSN/AGACNP Preceptor Guide, July 2016

MGA DON Teaching Assignments, Spring 2016; Summer 2016; Fall 2016; Spring 2017

Graduate Faculty Workload, Spring 2016; Summer 2016; Fall 2016, Spring 2017

MGA Capstone Project Faculty Assignments, Fall 2016

Granting of Release for Faculty to Work as Nurse Practitioners, January 4, 2017

MGA School of Health Sciences Faculty Development Plan, 2016–2017

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MGA Outside Occupational Activities Report Form, June 9, 2015

Shirley Camp Abstract for Consideration 2017 GANE Conference, 2016

Kinzie Lee Abstract for Consideration 2017 GANE Conference, 2016

MGA MSN Faculty Professional Development Funding Examples, 2016; 2017

Department of Nursing Salary Adjustment Table, 2016

Graduate Faculty Professional Development Table, 2016; 2017

MGA HR Online Orientation, 2016

MGA New Employee Orientation and Required Training, October 2016

MGA HR New Employee Documents/Forms, 2015

MGA Academic Affairs New Faculty Training Schedule, 2016–2017

MGA DON New Faculty Mentor Assignments, 2014–2015; 2015–2016; 2016–2017

MGA DON New Faculty Orientation Checklist, September 10, 2015

MGA Graduate Tuition Rates and Fees, Spring 2017; Summer 2017

Sample Communication from Graduate Coordinator Regarding Website Changes, September 2015

Information regarding ProctorU Communication with Students, June 9, 2016; January 20, 2017

Description of Services for MSN and Graduate Students, current

MGA Online Orientation, current

MGA Office of Financial Aid Code of Conduct, current

MGA Office of Financial Aid Website, current

MGA Technology Support Resources and Technology Policies, current

MGA Technology Software Toolbox, current

MSN Information Session Agenda, August 16, 2016

MSN Technical Requirements, current

MSN Program Course Schedule, current

Facility/Practice Evaluation Form, current

MSN Preceptor Qualification Forms Binder, current

MSN Preceptor Agreement Forms Binder, current

MSN Program Preceptor-Student Evaluation Forms Binder, current

MSN Program Student-Preceptor Evaluation Forms Binder, current

MSN Program Facility Evaluation Forms Binder, current

MSN Program Clinical Agency Evaluation Form, February 2016

MGA Listing of Current Library Holdings, January 2017

Summary of Nursing Library Resources, Print and Non-print that are Available on the Cochran, Dublin, Macon, and Warner Robin Campuses, January 2017

Sample Communication Discussion Library Allocation for DON, January 2016; January 2017

Sample Communication Discussion with MSN Faculty about Library Resource, January 2017

Librarian's Email Regarding Purchase of Cochrane Library, January 28, 2016

MGA Library Webpage Citing Graduate Student Services, January 30, 2017

MGA Comprehensive Program Review Template and Rubric, current

MSN Program Assessment Binder, current

AGACNP Immersion Days, 2016; 2017

Ophthalmoscope Purchase Order, May 14, 2015

Fall MSN Assessment Report Feedback from Office of Graduate Studies, January 2, 2017

Graduate Alumni Survey, current

Graduate Employer Survey, current

MSN AGACNP information Website, January 6, 2017

Graduate Admissions Criteria, current

Revised Graduate Admissions Criteria, current

MGA MSN applicant Interview Rubric, current

Sample Conference Agendas for Faculty Development, 2016

Invoices and Quotes for Equipment Purchased for MSN Program, March 2015-September 2016

Employee Folders, current

Faculty Clinical Documents, current

#### Graduate Student Folders, current

Invitation to Student Representatives to Meetings with Chair/Notes from Meetings, September 7, 2016—December 5, 2016

## **Meeting Minutes**

Graduate Studies Council meeting minutes, August 2015-October 2016

MSN Workgroup meeting minutes, September 2014–November 2016

Nursing Faculty meeting minutes, February 2015–October 2016

Minutes from Advisory Council meeting minutes, 2015; 2016

MGA Technology Resources Committee meeting minutes, February 5, 2016

Graduate Assessment meeting minutes, July 18, 2016

Nurse Administrator meeting minutes with Representative from Office of Academic Affairs March 3, 2015; April 7, 2015; June 4, 2015

MGA Graduate Studies Council meeting minutes, Fall 2015–Fall 2016

#### **Course Materials**

Course Syllabi, Spring 2017

Course Syllabi, Evaluations, Quizzes/Examinations, Learning Activities, Spring 2016–Spring 2017

Evidence-Based Guideline for the Management of High Blood Pressure in Adults (JNC8), 2014

ACC/AHA Guideline for Treatment of Blood Cholesterol, 2014

MSN Program Textbook List, 2016; 2017

Mapped Course Objectives with SLOs and Evaluation Methods, current

MSN Clinical Rotations, Summer 2016

Clinical Sites Comparison Table, current

Simulation Experience (Objectives, Schedule, and student evaluation), Fall 2016; Spring 2017

Adult-Gerontology Acute Care Nurse Practitioner Certification Review (Barkley) and Course CDs, 2016 Sample History and Physical, NURS 5400, June 2016

NURS 5100 Module 3 - Evolving Opportunities in the U.S. and Internationally, Fall 2016

NURS 5100 Module 11 - Advocacy, Healthcare Policy, and Ethical Decision Making, Fall 2016

NURS 5200 Module 1 – Interviewing, Communication, Health History Physical Examination, Culturally Competent Care, Fall 2016

NURS 5300 Module 1 – Various Topics to Include Culture and Ethics, Spring 2017

NURS 5600 Module 9 – High Reliability Organizations, Fall 2016

Immersion Day Agendas, Summer 2016; Fall 2016, Spring 2017

Capstone Project Proposal Presentation Grading Rubric, current

Capstone Project Presentation Grading Rubric, current

Simulation Laboratory Evaluation, current

Student Satisfaction and Self-Confidence in Learning, current

Simulation Laboratory Provider Order Sheet, current

Sample Student Research Project – Zika Virus, Fall 2016

Sample Student Research Project – Hospital-Acquired Complications, Fall 2016

Example of Start Module, current

Description of Mannequin Availability, current

Online Library Certification Preparation Materials, January 9, 2017

# **Third-Party Comments:**

The nursing education unit had a reasonable process for soliciting third-party comments. Methods used to announce the accreditation visit to the program's communities of interest include announcements published on the Middle Georgia State University (MGA) Facebook page, notices in the Macon Telegraph, and an announcement posted in the Coliseum Medical Center and the Navicent Health Hospital.

There were two (2) attendees at the public meeting, including the Chair of Academic Affairs and Affiliations with Navicent Health and the Assistant Vice President of Clinical Operations for the Navicent Health Physicians Group. The participants described a positive relationship with the MGA Department of Nursing as well as a need for graduates from the master's program.

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



#### III. CLASSROOM AND CLINICAL OBSERVATIONS

#### **Classroom Observation #1**

Course Prefix, Number, and Title:	NURS 5400 Adult/Gerontology Acute Care 1
Method of Delivery:	Distance Education
Faculty Name and Credentials:	Lawanda Greene, DNP, MPH, RN, AGACNP-BC Stephanie Tolliver-Epps, MSN, MBA, APRN, AGACNP-BC, CCRN, RN
Number of Students in Attendance:	5

The peer evaluators reviewed the online courses. All of the online courses were designed using a template to assist students and organizes the courses well. The content browser link included seven (7) content modules, including cardiac, pulmonary, musculoskeletal, and neurological. Modules had readings, assignments, and evaluations. Assignments included PowerPoint presentations, Word documents, journal articles, and tips for success. There was also a "meet the instructor" area, a syllabus, and a course calendar. In addition, the content browser had three (3) examination links posted. A course "tools" link included announcements, technology requirements, a calendar, discussions, assignments, quizzes, rubrics, grades, online rooms, and upcoming events. The students confirmed that they take examinations through an online testing system. During student interviews, students reported that there is an orientation to the online platform and technology, assistance is available when needed, and faculty contact them in a timely manner. The peer evaluators noted that students were actively participating in discussions. Announcements were made at least weekly.

#### **Classroom Observation #2**

Course Prefix, Number, and Title:	NURS 5300 Advanced Pharmacology/Therapeutic
	Interventions
Method of Delivery:	Distance Education
Faculty Name and Credentials:	Lawanda Greene, DNP, MPH, RN, AGACNP-BC
	Stephanie Tolliver-Epps, MSN, MBA, APRN, AGACNP-
	BC, CCRN, RN
Number of Students in Attendance:	5

This is a review of an online course. All of the online courses were designed using a template to assist students and organizes the courses well. The content browser icon included seven (7) content modules; for example, introduction, respiratory system, cardiovascular system, renal, and endocrine system. This course included a prescription writing activity and case studies that were related to course content. In addition, students create a creative pharmacology teaching tool to educate patients about a drug.

#### **Classroom Observation #3**

Clubbi com c ppci (ution //c	
Course Prefix, Number, and Title:	NURS 6200 Leadership/Management and Healthcare
	Policy
Method of Delivery:	Distance Education
Faculty Name and Credentials:	Lawanda Greene, DNP, MPH, RN, AGACNP-BC
	Stephanie Tolliver-Epps, MSN, MBA, APRN, AGACNP-
	BC, CCRN, RN
	Dorothy Howell, DHA, MSN, RN
Number of Students in Attendance:	12

This is a review of an online course. All of the online courses are designed using a template to assist students and organizes the courses well. The content browser icon included 14 content modules; for example, introduction to U.S. healthcare delivery and health management, healthcare financing, healthcare leadership, healthcare management, cost, access, and quality. The course has quizzes that are

available for 24-hours and can be repeated until a grade of 80% is achieved. Course announcements are made several times a week.

#### **Classroom Observation #4**

Course Prefix, Number, and Title:	NURS 6400 Adult/Gerontology Acute Care I
Method of Delivery:	Distance Education
Faculty Name and Credentials:	Lawanda Greene, DNP, AGACNP-BC, MPH, RN Stephanie Tolliver-Epps, APRN, AGACNP-BC, MSN, MBA, CCRN, RN
Number of Students in Attendance:	12

This is a review of an online course. All of the online courses were designed using a template to assist students and organizes the courses well. The content browser icon included 13 content modules. The course content includes complex multisystem conditions. Student assignments require interpreting laboratory and diagnostic tests, with risk/benefit, and cost information. Student assignments include course presentations on patient management and history and physical notes.

#### **Clinical Observation#1**

Clinical Agency:	Navicent Health
Unit(s) Visited:	Endocrine Clinic, Anderson Health Center, Heart Failure Clinic
Faculty Name and Credentials:	Lawanda Greene, DNP, MSN, MPH, RN, AGACNP
Agency Representative Interviewed:	Deb Mack, MSN, RN, Assistant Vice President of Clinic
	Operations, Navicent Health Physicians Group
	Carolyn Campbell, MSN, MHA, RN, Anderson Health Clinic
	Yolanda Gates, MSN, RN, FNP, Heart Failure Clinic
	Alexandra Porter, MSN, RN, FNP, Endocrine Clinic
	Marita Hoskstedler, MSN, RN, FNP, Endocrine Clinic
Number of Students Interviewed:	5
Course Prefix, Number, and Title:	NURS 6400 Adult/Gerontology Acute Care II
	NURS 5400Adult/Gerontology Acute Care I

The peer evaluators interviewed students and preceptors at Navicent Health, the primary acute care clinical learning site for the MSN program. Navicent Health is a designated level I trauma center and a Magnet designated hospital for nursing excellence that provides a broad range of services including, community-based outpatient care, diagnostics, primary care, home health, hospice care, comprehensive cancer care, rehabilitation, acute and post-acute care, and adult medicine. Navicent also has specialty centers, which include a center for palliative care, heart center, and a neurology center. At the clinical site, peer evaluators interviewed one (1) student from cohort II in NURS 5400 Adult/Gerontology Acute Care I and four (4) students in cohort IV in NURS 6400 Adult/Gerontology Acute Care II. Students rotate through the following areas for two (2) weeks: Internal Medicine, Family Medicine, OB/GYN, ER, and Surgery/Trauma, in which time, they work with preceptors in GI, Neurology, Renal, Endocrine, and Cardiovascular specialties. Students reported that they participate in the assessment and treatment of 8–15 patients each day with their preceptors. Examples of some activities they participate in under the supervision of preceptors include assessment and training of diabetic patients, rounds with heart failure patients where they assessed and formulated a treatment plan with rationales, and the determination of ICD10 codes for billing. Students expressed that they were satisfied with their clinical experiences and stated that what they learned helped them "put it all together" and learn the role of "provider of care." In interviews, three (3) preceptors discussed the activities that students participated in during their clinical experiences and said that they tailor the experiences to what the students need. The preceptors reported that they received course materials, such as the Preceptor Guide and student learning outcomes, and discussed their role with the course instructor. Preceptors stated that they were well oriented and mentored to the role.

#### IV. EVALUATION OF THE STANDARDS AND CRITERIA

#### STANDARD 1

Mission and Administrative Capacity

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

1.1	The mission and philosophy of the nursing education unit are congruent with the core values, mission, and goals of the governing organization.
$\boxtimes$	The peer evaluators verified evidence to support compliance with this Criterion.
	The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.
	The peer evaluators could not verify evidence to support compliance with this Criterion.
missic techno and su progra 21). T	ISN program and Middle Georgia State University (MGA) have similar themes included in their on/goals, which includes lifelong learning, cultural facets, leadership, professionalism, informational plogy integration, quality, and collaboration. These are components of advanced nursing practice apport the alignment of the program with MGA's mission and core values. The mission of the MSN am is congruent with the MGA mission and is presented in Table 1 and Table 2 in the SSR (pp. 17—the missions and philosophies congruence with the MSN end-of-program student learning outcomes strated in Appendix A (SSR, pp. 143–146).  The governing organization and nursing education unit ensure representation of the nurse administrator and nursing faculty in governance activities; opportunities exist for student representation in governance activities.
$\boxtimes$	The peer evaluators verified evidence to support compliance with this Criterion.
	The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.
	The peer evaluators could not verify evidence to support compliance with this Criterion.
	3 (SSR, p. 24) lists several governing organization activities and committees in which nursing istration and faculty are serving as members. For example, the nurse administrator, Chair of the

Table 3 (SSR, p. 24) lists several governing organization activities and committees in which nursing administration and faculty are serving as members. For example, the nurse administrator, Chair of the Department of Nursing (DON), serves on the Institutional Review Board Committee, and a MSN faculty member is serving on the Faculty Senate. In interviews, the faculty confirmed that they are serving on university, college, and nursing committees. The University President and graduate nursing students confirmed that students have opportunities to serve on the Graduate Student Advisory Council. In addition, graduate nursing students stated that each cohort elects a representative to meet routinely with the nurse administrator throughout each semester. The representatives use this time to share concerns and discuss the program. Student representatives are also invited to the monthly nursing faculty meetings; however, they have not attended.

1.3	The assessment of end-of-program student learning outcomes and program outcomes is shared with communities of interest, and the communities of interest have input into program processes and decision-making.
	The peer evaluators verified evidence to support compliance with this Criterion.  The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.
	The peer evaluators could not verify evidence to support compliance with this Criterion.
admini learning evaluat nursing input a outcom	arsing Advisory Committee is held annually to discuss all of the nursing programs and includes strators and educators from area healthcare agencies. The graduate end-of program student goutcomes and program outcomes data were not available to share at the last meeting. The peer ors verified that Nursing Advisory Committee meeting minutes are recorded and reflect other grogram outcomes. Members of the Nursing Advisory Committee have an opportunity to provide and feedback about the graduate program end-of-program student learning outcomes and program less during each meeting. Another community of interest is the Georgia Board of Nursing (GBON) BON does not regulate graduate nursing programs; however, it licenses and regulates advanced e nurses. This provides input into the graduate program processes and decision-making.
1.4	Partnerships that exist promote excellence in nursing education, enhance the profession, and benefit the community.
	The peer evaluators verified evidence to support compliance with this Criterion.  The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.
	The peer evaluators could not verify evidence to support compliance with this Criterion.
Raines Nursing healthc develop purpose addition (1) nur	culty described a partnership with Navicent Health, First Choice Primary Care, and the Curtis Sr. Foundation (CRSF) as part of the University System of Georgia Board of Regents (USGBOR) g Faculty Initiative (NFI) Grant. The partnership will help with health disparities and access to are for high-risk and chronically ill patients (SSR p.27). The NFI Grant is designed for oment of faculty expertise, provide student clinical training, and improve health outcomes. The e of the grant is for recruitment and retaining faculty for advanced nursing practice (SSR p. 28). In an administration confirmed a partnership with Houston Medical Center (HMC) to help fund one using faculty position for over 10 years. Fairview Park Hospital (FPH) helped fund supplies for the te program.
1.5	The nursing education unit is administered by a nurse who holds a graduate degree with a major in nursing and is doctorally prepared.
	The peer evaluators verified evidence to support compliance with this Criterion.  The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.
	The peer evaluators could not verify evidence to support compliance with this Criterion.
The nu	rse administrator earned a master's of science in nursing (MSN) degree from Georgia College with

The nurse administrator earned a master's of science in nursing (MSN) degree from Georgia College with a concentration in nursing administration in 1994. She received a doctor of nursing practice (DNP) degree from Medical College of Georgia in 2012. The peer evaluators verified her credentials in a review of transcripts.

1.6	The nurse administrator is experientially qualified, meets governing organization and state requirements, and is oriented and mentored to the role.
	The peer evaluators verified evidence to support compliance with this Criterion.  The peer evaluators verified evidence to support compliance with this Criterion with areas
	needing development.  The peer evaluators could not verify evidence to support compliance with this Criterion.
The nurdescription nursi evaluate adminis	rse administrator meets the qualifications listed for the Chair of the DON position in the MGA job tion. The GBON requires that the nurse administrator have at least one (1) earned graduate degree ing and at least three (3) years of teaching experience in a nursing education program. The peer ors verified that she met those qualifications through a review of documents onsite. The nurse strator had 15 years of experience in nursing education and 12 years of academic experience beforing the position. The peer evaluators verified during interviews that the chair was oriented and ed to the Chair of the DON position by the previous interim chair.
1.7	When present, nursing faculty who coordinate or lead program options/tracks are academically and experientially qualified.
	The peer evaluators verified evidence to support compliance with this Criterion.  The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.
	The peer evaluators could not verify evidence to support compliance with this Criterion.
an ACN been in post-ma The pee verified serves a	aduate Program Coordinator for the MSN program is credentialed with a DNP and is certified as NP-BC and an FNP-BC. He has been a nurse for 22 years, a nurse practitioner for 17 years, and has academia for 11 years. In a review of transcripts, the peer evaluator verified that he received a aster's certificate in ACNP and a DNP degree in 2011 from Medical College of Georgia (MCG). For evaluators noted his certification is ACNP (2011) and not AGACNP. The peer evaluators that he is currently working as an ACNP in urgent care. The Graduate Program Coordinator also as the School of Health Sciences (SOHS) Associate Dean, and therefore, does not have teaching dibilities.
1.8	The nurse administrator has authority and responsibility for the development and administration of the program and has sufficient time and resources to fulfill the role responsibilities.
	The peer evaluators verified evidence to support compliance with this Criterion.  The peer evaluators verified evidence to support compliance with this Criterion with areas
	needing development.  The peer evaluators could not verify evidence to support compliance with this Criterion.

The Chair of the DON's job description includes responsibility for directing the operations of the DON. The faculty and nurse administrator (Chair) all confirmed during interviews that the nurse administrator has the authority and responsibility for the nursing programs. The nurse administrator received a reduced teaching workload as compared to the usual assignment for a department chair. The faculty and the Graduate Program Coordinator confirmed that she has sufficient time to fulfill her role responsibilities.

1.9	The nurse administrator has the authority to prepare and administer the program budget with faculty input.
$\boxtimes$	The peer evaluators verified evidence to support compliance with this Criterion.
	The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.
	The peer evaluators could not verify evidence to support compliance with this Criterion.
and adi the Inte are nee to start For exa	er evaluators verified that the nurse administrator's job description allows her authority to prepare minister the nursing budget with faculty input. The nurse administrator negotiates the budget with erim Dean of the SOHS, and program needs are updated and reviewed annually. If additional funds ded, the nurse administrator can request more funds. For example, additional funds were received the MSN graduate program. Faculty members confirmed that they provide input for budget needs. ample, the faculty stated that a lumbar puncture trainer and a GYN simulator for the graduate in were purchased recently.
1.10	Policies for nursing faculty and staff are comprehensive, provide for the welfare of faculty and staff, and are consistent with those of the governing organization; differences are justified by the purpose and outcomes of the nursing program.
$\boxtimes$	The peer evaluators verified evidence to support compliance with this Criterion.
	The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.
	The peer evaluators could not verify evidence to support compliance with this Criterion.
peer ev State U from th	culty personnel policies of the DON are consistent with those of the governing organization. The valuators confirmed that the policies are as described in the faculty handbook. The Middle Georgia University Policy Manual describes faculty and staff policies. Nursing program policies that differ lose of other departments are justified. Differences include RN licensure, APRN licensure, faculty-ent ratios, and clinical faculty compensation. Table 6 (SSR p. 34) describes justifications of inces.
1.11	Distance education, when utilized, is congruent with the mission of the governing organization and the mission/philosophy of the nursing education unit.
$oxed{oxed}$	The peer evaluators verified evidence to support compliance with this Criterion.  The peer evaluators verified evidence to support compliance with this Criterion with areas
_	needing development.
	The peer evaluators could not verify evidence to support compliance with this Criterion.

Table 7 (SSR, pp. 36–37) illustrates how distance education is congruent with the MGA, Office of Graduate Studies (OGS), SOHS, and the DON's mission. The university's mission includes educating and graduating inspired, lifelong learners. The mission of OGS is to develop and offer graduate degrees suitable for working adults. The mission of the SOHS is to deliver evidence-based health education programs. The mission of the MGA MSN program is to prepare advanced practice nurses to provide care to the entire adult to older adult age population across the continuum of care, particularly those with acute care needs. The University President, Provost, interim dean of the SOHS, and nurse administrator confirmed that distance education is congruent with the university and the graduate nursing program goals/mission/philosophy.

# **Summary of Compliance:**

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

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



## STANDARD 2

**Faculty and Staff** 

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

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

Nursing Faculty Academic Credentials – (Highest Degree Only) – Master's Program Only								
	Doctoral		Master's		Baccalaureate		Associate	
Number of Faculty	Nursing	Non- nursing	Nursing	Non- nursing	Nursing	Non- nursing	Nursing	Non- nursing
Full-Time	1		1					
Part-Time								

Nursing Faculty Academic Credentials – (Highest Degree Only) – Shared								
	Doctoral		Master's		Baccalaureate		Associate	
Number of Faculty	Nursing	Non- nursing	Nursing	Non- nursing	Nursing	Non- nursing	Nursing	Non- nursing
Full-Time		1						
Part-Time								

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

$\boxtimes$	The peer evaluators verified evidence to support compliance with this Criterion.
	The peer evaluators verified evidence to support compliance with this Criterion with areas
	needing development.
	The peer evaluators could not verify evidence to support compliance with this Criterion.

Two (2) faculty members teach full-time in the MSN program. A review of the faculty files verified that both full-time faculty members hold MSN degrees and are certified AGACNPs. One (1) full-time faculty member holds a DNP degree. The peer evaluators verified that the full-time faculty meet the requirements of the GBON, the USG, MGA, Southern Association of Colleges and Schools Commission on Colleges (SACSCOC), and the ACEN and are qualified to teach their assigned courses.

One (1) full-time faculty member is also shared from the School of Health Sciences/Health Services Administration Department. This faculty member is a licensed RN with a doctorate in health administration, an MSN degree, and eight (8) years of teaching experience. This faculty member teamteaches the leadership/management and healthcare policy course with the two (2) full-time nursing faculty. Peer evaluators confirmed that this faculty member holds the educational and experiential qualifications to team-teach the course.

2.2	Part-time nursing faculty hold educational qualifications and experience as required by the governing organization, the state, and the governing organization's accrediting agency, and are qualified to teach the assigned nursing courses.
	The program does not utilize part-time nursing faculty.  The peer evaluators verified evidence to support compliance with this Criterion.  The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.  The peer evaluators could not verify evidence to support compliance with this Criterion.
2.3	Non-nurse faculty teaching nursing courses hold educational qualifications and experience as required by the governing organization, the state, and the governing organization's accrediting agency, and are qualified to teach the assigned nursing courses.
	The peer evaluators verified evidence to support compliance with this Criterion.  The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.  The peer evaluators could not verify evidence to support compliance with this Criterion.
No non	-nursing faculty teach in the program.
2.4	Preceptors, when utilized, are academically and experientially qualified, oriented, mentored, and monitored, and have clearly documented roles and responsibilities.
qualifie	The peer evaluators verified evidence to support compliance with this Criterion.  The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.  The peer evaluators could not verify evidence to support compliance with this Criterion.  er evaluators verified that preceptors used in the MSN program are academically and experientially ad through review of the preceptor qualification forms completed by the preceptors. All preceptors vanced Practice Registered Nurses (APRNs) currently licensed in Georgia according to the
Georgia Osteopa Precept specialt informa respons Gradua precept	a Registered Professional Nurse Practice Act or are Medical Doctors (MDs)/Doctors of athic Medicine (DOs) currently licensed according to the Georgia Composite Medical Board. For have a minimum of one (1) year of experience as an APRN or MD/DO in their respective ty. Preceptors confirmed that they are given the preceptor guide, which contains program ation and objectives, format, curriculum, and preceptor and student requirements and abilities (SSR, pp. 45–46). Mentoring and monitoring of preceptors are the responsibilities of the te Program Coordinator and the assigned faculty in the AGACNP program. The faculty meet with ors at least once a semester, usually at the start of the semester and complete student evaluations ecceptor input.
2.5	The number of full-time faculty is sufficient to ensure that the end-of-program student learning outcomes and program outcomes are achieved.
	The peer evaluators verified evidence to support compliance with this Criterion.  The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.  The peer evaluators could not verify evidence to support compliance with this Criterion.

The DON uses contact hours to determine teaching workload. The peer evaluators confirmed during meetings with the faculty and the nurse administrator that the workload requires faculty to teach nine (9) contact hours each semester. Faculty receive one-third of a credit for precepted clinical hours (SSR, p. 47). The student-to-faculty ratio is 6:1. The Spring 2016 cohort contains 12 students, and the Fall 2016 cohort contains four (4) students.

Workload also includes online course development, clinical practice, scholarship, and service to the university and community. Additional responsibilities include evaluating student practice and mentoring students regarding their capstone projects. Non-teaching responsibilities include student advising, counseling, remediation, and participation in at least one (1) university and one (1) DON committee. In interviews, the faculty reported that they understand, and are able to fulfill, their role and responsibilities. The peer evaluators verified that the number of full-time faculty and the ratio of faculty to students are sufficient to help students achieve learning outcomes and program outcomes.

2.6	Faculty (full- and part-time) maintain expertise in their areas of responsibility, and their performance reflects scholarship and evidence-based teaching and clinical practices.
	The peer evaluators verified evidence to support compliance with this Criterion.
$\boxtimes$	The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.
	The peer evaluators could not verify evidence to support compliance with this Criterion.

Interviews and review of faculty files confirmed that faculty have expertise in their area of teaching responsibility and clinical practice. In interviews with the nurse administrator, the peer evaluators verified that full-time faculty are allowed one (1) day per week of release time for clinical practice to maintain clinical expertise. Starting January 2017, the faculty have an opportunity to work in an outpatient clinic, in partnership with Navicent Health, First Choice Primary Care, and the Curtis Raines Senior Foundation (CRSF), that addresses health disparities and provides healthcare access to high-rick and chronically ill individuals. Each semester faculty are required to complete an Additional Occupational Activities form that serves as a record of outside professional activities. The peer evaluators reviewed these forms in the faculty files.

The peer evaluators agreed with the finding the DON reported in the SSR that identified faculty scholarship and development as an area needing development. The peer evaluators found minimal evidence of an emphasis on scholarship and limited evidence of completion of scholarship activities by full-time faculty. The MSN students are required to complete a capstone project based on research, but there was little faculty research/scholarship reported in the faculty curricula vitae and the SSR. The faculty did not report any additional research/scholarship during the faculty meeting. The scholarly activities of the faculty are not consistent with common practices for the graduate level. The SSR states that "Enhancing faculty professional development and scholarship productivity will directly impact mentorship of the capstone process" (SSR, p. 16).

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

$\boxtimes$	The peer evaluators verified evidence to support compliance with this Criterion.
	The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.
	The peer evaluators could not verify evidence to support compliance with this Criterion.

The DON employs three (3) administrative secretaries and two (2) laboratory coordinators. One (1) administrative secretary holds a baccalaureate of science in psychology degree; a second secretary holds

an associate of science degree in business, psychology, and social work; and a third secretary holds a business office technology certificate. Administrative secretary responsibilities include maintaining student records, processing textbook orders, entering course schedules, and enrolling students in appropriate courses each semester. One (1) laboratory coordinator is credentialed with an MSN in nursing education, and another coordinator holds a baccalaureate of science in nursing (BSN) degree. For the MSN program, laboratory coordinators schedule laboratory time and order supplies. The peer evaluators confirmed during meetings with the faculty that the two (2) laboratory coordinators do not teach or evaluate MSN students, nor do they participate in student simulation activities or health assessment experiences. All staff meet the GBON, USG, MGA, and SACSCOC requirements.

2.8	Faculty (full- and part-time) are oriented and mentored in their areas of responsibility.
$\boxtimes$	The peer evaluators verified evidence to support compliance with this Criterion.
	The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.
	The peer evaluators could not verify evidence to support compliance with this Criterion.
the Office of academ New far aid in the Nursing	ill-time faculty receive one-day, face-to-face training through the Office of Human Resources and fice of Risk Management, which review employee benefits and open enrollment information. The of Academic Affairs provides new faculty with two (2) half-day training sessions, which discuss his support services, disabilities accommodations, student code of conduct, and technology support, culty are assigned by the nurse administrator to an experienced nursing faculty for one (1) year to the transition to the academic workplace. The mentor is responsible for covering all topics on the graculty Orientation Checklist. The peer evaluators verified that completed checklists were in files. The faculty reported that they were well oriented and mentored to their roles at the ity.
2.9	Faculty (full- and part-time) performance is regularly evaluated in accordance with governing organization's policy/procedures, and demonstrates effectiveness in assigned
	area(s) of responsibility.
$\boxtimes$	The peer evaluators verified evidence to support compliance with this Criterion.
	The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.
	The peer evaluators could not verify evidence to support compliance with this Criterion.

Faculty are evaluated annually based on their teaching, service, and scholarship/professional development for the academic year. The peer evaluators confirmed that faculty gather evidence of their performance in a portfolio and complete an annual self-evaluation that is submitted to the nurse administrator. The self-evaluation includes goals for teaching, service, and scholarship/professional development for the next academic year.

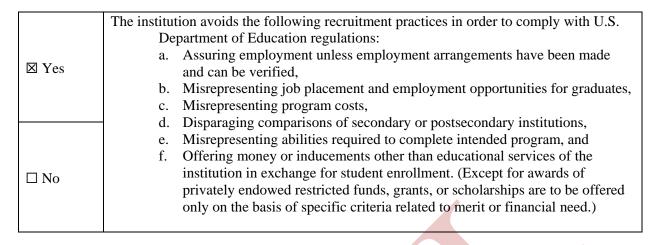
Tenure-track faculty have an additional pre-tenure, in-depth, and formative review in their third year of employment when they apply for tenure and/or promotion. Faculty undergo tenure review during their sixth or seventh year of employment. Post-tenure review starts five (5) years after the award of tenure and continues at five-year intervals. The process is outlined in the *MGA Faculty Handbook* (Section 4.05.02). The peer evaluators found evidence of completed annual evaluations in the faculty files.

2.10	Faculty (full- and part-time) engage in ongoing development and receive support for instructional and distance technologies.
	The peer evaluators verified evidence to support compliance with this Criterion.  The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.
	The peer evaluators could not verify evidence to support compliance with this Criterion.
Outread curricul office a	receive continuing development and support through the university's Office of Innovation and ch. This office is staffed by credentialed faculty with advanced degrees and experience in lar design, online learning platforms, and technology. Two (2) instructional designers from this assist the faculty in building online MSN courses. Nursing faculty serve as content experts, and the tional designers serve as the course structure experts.
faculty confere confere	ents provided to the peer evaluators confirmed that, in 2016, university funding for full-time professional development activities ranged from \$1,150 to \$1,900 for faculty attendance at ences and podium and poster presentations. The SSR (pp. 49–50) includes a list of faculty ence attendance and presentations. Interviews with the faculty and documentation of ongoing practice activities in faculty files demonstrate the faculty's commitment to practice in the unity.
Innovat toolkit i	onal instructional and distance technology support is provided by the Center for Teaching tion. This center offers consultation services to the faculty and access to an innovation toolkit. This includes information on how to use the learning management system; lecture capture programs; ation software; and telepresence technology (SSR, p. 57).
Summa	ary of Compliance:
The ma	aster's program is in compliance with Standard 2.
The pee	er evaluators identified the following area needing development for Standard 2:
	Criterion 2.6
	Ensure the faculty performance reflects scholarship.

# STANDARD 3 Students

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

3.1	Policies for nursing students are congruent with those of the governing organization as well as the state, when applicable, and are publicly accessible, non-discriminatory, and consistently applied; differences are justified by the end-of-program student learning outcomes and program outcomes.
$\boxtimes$	The peer evaluators verified evidence to support compliance with this Criterion.
	The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.
	The peer evaluators could not verify evidence to support compliance with this Criterion.
the MS website to adm conductrational specification, and	It policies are available and publicly accessible to students in the MSN student handbook, online on SN program information webpage, and on the Board of Regents University System of Georgia e. MSN student policies that differ from those of other MGA student policies include those related issions, clinical documentation requirements, performance standards, grading, progression, student et, and attendance. Table 14 in the SSR (pp. 59–66) provides a list of these policies and the le for the differences. The MSN program is delivered online, and students pay a tuition rate cally for online students, which is exempt from the activity fee, athletic fee, recreation and wellness d parking fee. Each semester, the MSN students are required to complete two (2) days of sion, primarily on the Macon Campus.
3.2	Public information is accurate, clear, consistent, and accessible, including the program's accreditation status and the ACEN contact information.
$\boxtimes$	The peer evaluators verified evidence to support compliance with this Criterion.
	The peer evaluators verified evidence to support compliance with this Criterion with areas
	needing development.  The peer evaluators could not verify evidence to support compliance with this Criterion.
⊠ Ye	The institution has a transfer of credit policy that is publicly disclosed and includes a
□No	statement of the criteria established by the institution regarding the transfer of credit earned at another institution of higher education.
⊠ Ye	and demis as landon and in a national and refund nations
⊠ Ye	autaemas data ligarayma/agntification mass note completion note and ich placement note
⊠ Ye	
□No	institution's/nursing program's practices and policies.



In a review of documents and webpages, as well as in interviews with students and faculty, the peer evaluators verified that information regarding the current accreditation status with the ACEN is publicly accessible. Accurate contact information is posted on the university's accreditation webpage, in the 2016–2017 MGA graduate catalog, and on the "About the Department of Nursing" webpage (SSR, p. 68).

The peer evaluators confirmed that information about the transfer of credit policy is available to students and the public in the MGA graduate catalog on the university website. The guidelines for graduate transfer of credit can be found in the Graduate Studies Petition for Course Substitution and Transfer Credit form (modified July 2015) available to students and the public on the university website.

The peer evaluators confirmed that the current academic calendar (Spring 2017) is available to students and the public on the university website under "Academics."

The peer evaluators confirmed that grading and progression policies for the MSN program are found in the MSN student handbook, which is available on the university website. Refund policies for the Spring 2017 term are available to students and the public on the university website.

Certification data and completion rates for the MSN – AGACNP program are not available because the first cohort will not graduate until August 2017. Completion rates, NCLEX pass rates, and employment rates for the other nursing programs at the university are available to students and the public on the university website.

Students for the MSN program are recruited primarily within Georgia through postcard mailings, recruitment visits to hospital facilities, attendance at graduate school fairs, and university website information. The recruitment postcard reviewed onsite by the peer evaluators contained accurate information about the MSN program. The peer evaluators verified that online and paper recruitment materials accurately represent the program practices and policies. In interviews with students, faculty, and the public, the peer evaluators did not identify any recruitment practices that violated the U.S. Department of Education regulations.

3.3		es in policies, procedures, and program information are clearly and consistently unicated to students in a timely manner.
	The pe	er evaluators verified evidence to support compliance with this Criterion. er evaluators verified evidence to support compliance with this Criterion with areas g development.
		er evaluators could not verify evidence to support compliance with this Criterion.
manner platfort faculty meeting	through m, the un Studen g, studen	ators verified that changes in policies and procedures are communicated in a timely in multiple avenues, including the official university student email, the online learning niversity website, and communication with the Graduate Program Coordinator and course to expectations and associated policies are detailed in the course syllabi. During the group into confirmed that communication regarding program information and changes in policies was clear and timely.
3.4		nt services are commensurate with the needs of nursing students, including those
	receivi	ng instruction using alternative methods of delivery.
	The pe	er evaluators verified evidence to support compliance with this Criterion. er evaluators verified evidence to support compliance with this Criterion with areas
		g development. er evaluators could not verify evidence to support compliance with this Criterion.
online student career technol availab	students s receiv services logy and le to the	ews, the students complimented the services available to them for meeting their needs as . The services available to online students are equivalent to the services that on-campus e. Some examples of services available to the MSN students include academic advising, online bookstore, reference and research support with a dedicated graduate librarian, I learning management system support, and the Writing Center. A full list of services eMSN students is found in the SSR (pp. 70–72). Students receive support by email, messaging service, as well as assistance via remote access with technology support (SSR,
3.5		nt educational records are in compliance with the policies of the governing zation and state and federal guidelines.
$\boxtimes$	The pe	er evaluators verified evidence to support compliance with this Criterion.
	The pe	er evaluators verified evidence to support compliance with this Criterion with areas
		g development.
	The pe	er evaluators could not verify evidence to support compliance with this Criterion.
⊠ Ye	s	The institution has written procedures in place specific to protecting the privacy of
□ No		students enrolled in distance education courses or programs.
□ N1/		The nursing program does not utilize distance education.

The peer evaluators reviewed student files after retrieving them from locked file cabinets within a locked room in the DON. Information maintained in student files includes advising information, clinical evaluations, admission documents, registered nurse license confirmation, resumes, grade reports, transcripts, and letters of reference. The peer evaluators verified that student files are in compliance with the policies of the university and state and federal regulations. Written training for faculty about the

Family Rights and Privacy Act (FERPA) is located in the faculty handbook, and the FERPA guidelines located on the university website are available to faculty, students, and the public.

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

$\boxtimes$	The peer evaluators verified evidence to support compliance with this Criterion.
	The peer evaluators verified evidence to support compliance with this Criterion with areas
	needing development.
П	The peer evaluators could not verify evidence to support compliance with this Criterion

		Year	Three-Year Default Rate
Current	⊠ Final □ Draft	2013	13.6%
Previous		2012	15.6%
Previous		2011	16.0%

Initially, the university offered financial aid only to undergraduate students. On January 19, 2017, the university received approval to provide financial aid to MSN students for the Spring 2017 Semester. The peer evaluators verified the university's final default rates in the table with the Director of Financial Aid.

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

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

The university's Office of Financial Aid website has information that is easily accessible regarding student loans, repayment, and counseling. Students who have questions about financial aid and student loan information may review the "Frequently Asked Questions" page, contact the university financial aid office, ask a question through a live chat feature, or submit a question through the MGA website.

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

$\boxtimes$	The peer evaluators verified evidence to support compliance with this Criterion.
	The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.
	The peer evaluators could not verify evidence to support compliance with this Criterion.

The peer evaluators confirmed with the Director of Financial Aid that students seeking financial aid are required to complete online entrance counseling developed by the U.S. Department of Education (USDE) prior to receiving their first financial aid disbursement. This counseling outlines students' ethical responsibilities. Once students graduate, withdraw, or drop to less than half-time, the university requests that students complete the exit counseling developed by the USDE. The financial aid department and lender partners participate in a "Grad Finale" event before graduation, which provides students with information about loan repayment.

3.6.3	Financial aid records are in compliance with the policies of the governing organization, state, and federal guidelines.
$\boxtimes$	The peer evaluators verified evidence to support compliance with this Criterion.
	The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.
	The peer evaluators could not verify evidence to support compliance with this Criterion.
and sta with th	fice of Financial Aid maintains all financial aid records in compliance with the university, federal, te guidelines. Electronic and physical records are secured (SSR, p. 75). To demonstrate compliance e Higher Education Opportunity Act, the Director of Financial Aid verified in interviews the of Financial Aid abides by the Financial Aid Code of Conduct available on the financial aid ge.
3.7	Records reflect that program complaints and grievances receive due process and include evidence of resolution.
$\boxtimes$	The peer evaluators verified evidence to support compliance with this Criterion.
	The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.
	The peer evaluators could not verify evidence to support compliance with this Criterion.
meeting to outli	er evaluators verified that the MSN program has no grievances or complaints during the group gs with the University President and administrators. During the group meeting, students were able ne the process for grievances/complaints as noted in the MGA graduate catalog and on the te studies website.
3.8	Orientation to technology is provided, and technological support is available to students.
$\boxtimes$	The peer evaluators verified evidence to support compliance with this Criterion.
	The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.
	The peer evaluators could not verify evidence to support compliance with this Criterion.

During the interview with the peer evaluators, students stated that they received orientation to technology online and in-person. The Office of Technology outlines the procedure for students to request technical support during business hours and after hours using a help ticketing system. Students receive a response to their issue within 24 hours. The peer evaluators verified that 10 learning management system videos are available online to students. Students also receive a face-to-face demonstration of the online platform during the MSN orientation and "question and answer" session held during the first week of classes for new students (SSR, p. 75).

3.9		nation related to technology requirements and policies specific to distance education curate, clear, consistent, and accessible.
		er evaluators verified evidence to support compliance with this Criterion.
	•	er evaluators verified evidence to support compliance with this Criterion with areas g development.
	The pe	er evaluators could not verify evidence to support compliance with this Criterion.
⊠ Yes	s	Processes are in place (e.g., login name/password, use of technology such as cameras/video stream) through which the institution can establish that the student who
□ No		registers in a distance education course or program is the same student who participates in and completes the course or program and receives the academic credit.
⊠ Yes	s	Written procedures are distributed at the time of registration or enrollment in a distance education course that notify students of any projected additional student charges
associated with the verification of student identity (e.g., proctoring center for purchase of specific technology such as a camera).		associated with the verification of student identity (e.g., proctoring center fee, required purchase of specific technology such as a camera).
□ N/A	A	There is no charge to verify student identity.

The MSN program is fully online, except for two (2) mandatory face-to-face immersion days each semester that are delivered on campus. The peer evaluators verified in interviews with administrators that discussion of online learning and program expectations are introduced at point of inquiry with prospective students and are included in the admission interview. Technology requirements are published on the university's website and are included in each syllabus, the MSN student handbook, and the online learning platform.

The peer evaluators confirmed with faculty and students during interviews that the MSN program uses an online testing system to verify students' identity when they complete proctored written examinations (SSR, Appendix I). This system uses video technology to confirm students' identity using a webcam to compare the picture on a government-issued photo ID to the person taking the examination. The identity of students in the online classroom is confirmed by requiring students to enter a username and password to access the online classroom.

# **Summary of Compliance:**

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

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

## STANDARD 4 Curriculum

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

4.1	Consistent with contemporary practice, the curriculum is congruent with established standards for master's/post-master's programs, including appropriate advanced nursing practice competencies, role-specific professional standards and guidelines, and certification requirements, and has clearly articulated end-of-program student learning outcomes and program outcomes.
$\boxtimes$	The peer evaluators verified evidence to support compliance with this Criterion.
	The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.
	The peer evaluators could not verify evidence to support compliance with this Criterion.
Regulat Educati Practitio (AGAC confirm discusse	of the learning management platform used by MGA verified that the curriculum is consistent with porary practice and congruent with the Consensus Advanced Practice Registered Nurse (APRN) tory Model, American Association of Colleges of Nursing's (AACN) Essentials of Master's ion in Nursing (2011), National Organization of Nurse Practitioner Faculties (NONPF) Nurse oner Core Competencies (2012), and Adult-Gerontology Acute Care Nurse Practitioner CNP) Competencies (2012) as presented in the SSR (pp. 77–78). Review of the curriculum also ned that there are 11 clearly articulated end-of-program SLOs and five (5) program outcomes as ed in the SSR (pp. 78–79).
4.2	The end-of-program student learning outcomes are used to organize the curriculum, guide
	the delivery of instruction, and direct learning activities.
$\boxtimes$	The peer evaluators verified evidence to support compliance with this Criterion.
	The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.
	The peer evaluators could not verify evidence to support compliance with this Criterion.
In inter	views, faculty confirmed that the mission of the program is to prepare advanced practice nurses to

In interviews, faculty confirmed that the mission of the program is to prepare advanced practice nurses to provide care to young adult to older adult age population with an acute care focus. Faculty also confirmed that the end-of-program SLOs are used to organize the curriculum, guide the delivery of instruction, and direct learning activities.

Review of course syllabi verified that the course objectives reflect the integration of SLOs throughout the courses to organize the concepts of the curriculum. Review of all course materials on the online platform demonstrated that the graduate faculty mapped the SLOs to the professional standards and competencies and developed course work to align with each as presented in the SSR (pp. 80–92).

Review of the curriculum plan demonstrated appropriate course sequencing and progression from simple in NURS 5400 Adult/Gerontology Acute Care I to complex knowledge and skill acquisition in NURS 6500 Adult/Gerontology Acute Care III as presented in the SSR (pp. 95–101).

4.3	The curriculum is developed by the faculty and regularly reviewed to ensure integrity, rigor, and currency.
$\boxtimes$	The peer evaluators verified evidence to support compliance with this Criterion.
	The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.
	The peer evaluators could not verify evidence to support compliance with this Criterion.
the SSI of the c	neeting with faculty, it was confirmed that the curriculum is developed by the faculty as stated in R (pp. 102–104). The faculty verbalized that they are assigned to develop courses with the support listance learning department and that they review courses at the end of each semester to ensure y, rigor, and currency.
	of the 2015 and 2016 MSN committee meeting minutes verified that faculty have made textbook and changes to course assignments to increase currency and rigor.
4.4	The curriculum is designed to prepare graduates to be information-literate and to practice from an evidence-based approach in their direct and indirect advanced nursing roles.
$\boxtimes$	The peer evaluators verified evidence to support compliance with this Criterion.
	The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.
	The peer evaluators could not verify evidence to support compliance with this Criterion.
information information in the compete access,	ew of all MSN courses on the online platform and faculty interviews amplified that components of ation literacy are integrated in all core courses. The faculty verbalized examples of increasing tency in information throughout the program, such as navigating electronic tools to effectively search, and critically evaluate appropriate resources to synthesizing accumulated information into ting body of knowledge in their final capstone project as presented in SSR (pp. 104–105).
4.5	The curriculum is designed so that graduates of the program are able to practice in a culturally and ethnically diverse global society.
$\boxtimes$	The peer evaluators verified evidence to support compliance with this Criterion.
	The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.
	The peer evaluators could not verify evidence to support compliance with this Criterion.

Review of syllabi, course assignments, and clinical experiences verified that the curriculum incorporates cultural, ethnic, and socially diverse concepts in the online didactic material, immersion days, and clinical learning experiences as reported in the SSR (pp. 105–106). Additionally, the MGA program philosophy includes Leininger's Transcultural Nursing Model, which emphasizes that nurses have the responsibility to understand the role of culture in the health of the patient.

4.6	The curriculum and instructional processes reflect educational theory, interprofessional collaboration, research, and current standards of practice.
	The peer evaluators verified evidence to support compliance with this Criterion.  The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.
	The peer evaluators could not verify evidence to support compliance with this Criterion.
intervie standar from re interpre exampl	evident to the peer evaluators in review of the course materials on the online platform and faculty ews that the curriculum and instructional processes reflect educational theory, research, and current eds of practice as presented in SSR (pp. 106–108). The peer evaluators could not find evidence eview of the course materials that the curriculum and instructional processes reflect of pressional collaboration. Additionally, in interviews, the faculty had difficulty verbalizing les within the curriculum and instructional processes that reflect interprofessional collaboration. It example faculty verbalized was that during immersion days, there are speakers from different times.
4.7	Evaluation methodologies are varied, reflect established professional and practice competencies, and measure the achievement of the end-of-program student learning outcomes.
$\boxtimes$	The peer evaluators verified evidence to support compliance with this Criterion.
	The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.
	The peer evaluators could not verify evidence to support compliance with this Criterion.
method the SLO discuss measur	of all syllabi and faculty student interviews verified that students are evaluated using a variety of its that reflect established professional and practice competencies and measure the achievement of Os as presented in the SSR (p. 108). Examinations, presentations, written assignments, projects, sion postings, and clinical practice competency are the major evaluation methodologies used to be knowledge and attainment of SLOs. Students must achieve a grade of 80% or above in didactic stand a satisfactory rating on the clinical evaluation tool to progress to the next semester.
4.8	The total number of credit/quarter hours required to complete the defined nursing program of study is congruent with the attainment of the identified end-of-program student learning outcomes and program outcomes, and is consistent with the policies of the governing organization, the state, and the governing organization's accrediting agency.
$\boxtimes$	The peer evaluators verified evidence to support compliance with this Criterion.
	The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.
	The peer evaluators could not verify evidence to support compliance with this Criterion.
⊠ Ye	The governing organization/nursing program has policies and procedures for determining the credit hours awarded for nursing courses, and policies and procedures conform to commonly
□ No	

Review of documents onsite and interviews with the nurse administrator verified the total number of credit hours required to complete the MSN program is congruent with the attainment of SLOs and program outcomes and is consistent with the policies and procedures of MGA, the USG, and the American Nurses Credentialing Center (ANCC) requirements as described in the SSR (pp. 110–111).

Students take a total of 43 credit hours, and complete 630 clinical practice hours, for the MSN program. Based on the recommended plans of study, the program can be completed in two (2) years over five (5) semesters. This was verified by reviewing all course syllabi and in interviews with faculty and students. The AGACNP program requires advanced pathophysiology, advanced pharmacology, and advanced physical assessment coursework.

4.9	Student clinical experiences and practice learning environments are evidence-based; reflect contemporary practice and nationally established patient health and safety goals; and support the achievement of the end-of-program student learning outcomes.		
	The peer evaluators verified evidence to support compliance with this Criterion.  The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.		
	The peer evaluators could not verify evidence to support compliance with this Criterion.		
given p SLOs. Clinical practice intervie acuity r two (2)	h partnerships with Navicent Health System and Coliseum Medical Center, the MSN program is riority for access to preceptors and clinical practice hours, which supports the achievement of the Four of clinical facility and interviews with faculty, students, and preceptors verified that student experiences and practice learning environments are evidence-based and reflect contemporary and nationally established patient health and safety goals, as stated in the SSR (pp. 111–113). In two, the faculty also verbalized that, as students' progress through the curriculum, the patient reflects the increasing complexities of the SLOs and program outcomes. The faculty stated that the clinical sites utilized, Navicent Health and Coliseum Health System, environments have received our recognitions for patient care through evidence-based practice initiatives.		
4.10	Written agreements for clinical practice agencies are current, specify expectations for all parties, and ensure the protection of students.		
	The peer evaluators verified evidence to support compliance with this Criterion.  The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.  The peer evaluators could not verify evidence to support compliance with this Criterion.		
clinical faculty presente allow o	ime of the site visit, the peer evaluators confirmed that the two (2) affiliation agreements for practice agencies are current and appropriately signed, identify the responsibilities of the staff and for both parties, and contain termination language to ensure the protection of the students as ed in the SSR (p. 113). Evaluations from the students demonstrated that the clinical placements protunities for varied clinical experiences that prepare the students for their role as Gerontology Acute Care Nurse Practitioners.		
4.11	Learning activities, instructional materials, and evaluation methods are appropriate for all delivery formats and consistent with the end-of-program student learning outcomes.		
	The peer evaluators verified evidence to support compliance with this Criterion.  The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.		
	The peer evaluators could not verify evidence to support compliance with this Criterion.		

Review of learning activities, instructional materials, evaluation methods, and the onsite documents of schedules of the mandatory two (2) immersion days each semester, as well as faculty interviews, verified that the learning activities, instructional materials, and evaluation methods are appropriate for the asynchronous online delivery format and are consistent with the end-of-program program SLOs. Some

examples given in meetings with the faculty and students include discussions, examinations, quizzes, written assignments, and presentations are described in the SSR (pp. 113–114).

# **Summary of Compliance:**

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

The peer evaluators identified the following area needing development for Standard 4:

Criterion 4.6

Ensure the curriculum and institutional processes reflect interprofessional collaboration.



### STANDARD 5 Resources

5.1

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

Fiscal resources are sustainable, sufficient to ensure the achievement of the end-of-program

	student learning outcomes and program outcomes, and commensurate with the resources the governing organization.		
$\boxtimes$	The peer evaluators verified evidence to support compliance with this Criterion.		
	The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.		
	The peer evaluators could not verify evidence to support compliance with this Criterion.		

The budget reports for the MSN – AGACNP program were reviewed and verified the information in the SSR (pp. 115–118). The Vice President of Finance and Operations was interviewed and affirmed that the fiscal resources are sustainable and sufficient to ensure the achievement of the SLOs and program outcomes and are commensurate with resources of the governing organization. MGA receives approximately 51% of its educational and general funding from state appropriations. The remaining 49% is from tuition, fees, and various "other' revenue. The Georgia State Legislature uses an incremental based funding formula to determine the amount of state appropriation funds allocated to the USG. Allocations are based on previous year allocation and new money based on the funding formula. The funding formula includes new money for increases in credit hour production, increases in square footage of facilities, merit salary increases, and other items. Additionally, capital requests for new buildings or renovations of existing space are funded separately by the state legislature.

The USG begins gathering information for their request to the Governor of Georgia in July for the next fiscal year. During this process, each institution is allowed to make requests to the Governor in July for the next fiscal year. Each institution is allowed to make requests for funding for enrollment increases and other special considerations. The USG uses this information to develop their funding request to the Governor. Once the budget request is submitted to the Governor, the USG begins "budget hearings" with each USG institution. MGA presents special requests to USG each year. For example, two (2) years ago, MGA requested for a 9% tuition increase, which was granted by the USG, and MGA has requested a 4% tuition increase for Fiscal Year 2018.

The Governor then provides his budget recommendation to the state legislature in January at the legislative session. The legislature approves the overall State budget in March of each year, and the USG then allocates funds to each institution based on enrollment changes and other considerations brought to the attention of the USG through the Budget hearings. MGA has been successful in recent years in obtaining new funds such as funding for a new STEM building on the Warner Robins Campus, funding for student veterans, and over \$450,000 in Nursing Initiative funding.

The University President establishes several annual budget priorities to help focus budget decision-making on campus. Each vice president seeks budget information and requests from their direct reports, which includes Deans, Department heads, and others, to develop their budget request based on the strategic priorities established by the President along with their department needs. Each Vice President then presents their requests to the Executive Vice President for Finance and Operations and the Executive Director of Budgets. These requests are summarized and vetted by the University President and the university's cabinet to determine funding priorities each year. MGA uses a centralized, incremental planning and resource allocation model, which means that each department generally receives the same funding as the previous year, plus or minus funds based upon requests received. The budget is submitted to the USG in May of each year and the USG Board of Regions (USGBR) gives final approval of the

budget each year. During the year when new initiatives and needs arise, faculty and staff members can request new funds, or redirection of existing funds, through their departments. Each department controls their own budget and is able to move funds between personal services, travel, and operating.

In interviews with the nurse administrator, it was confirmed that institutional support ensures that the MSN faculty teaching in clinical courses maintain currency in clinical practice by affording them a practice day as part of workload and that institutional resources support the development, management, and evaluation of the MSN program. In interviews, the faculty confirmed that institutional resources support the development, management, and evaluation of the MSN program.

support	the development, management, and evaluation of the MSN program.
5.2	Physical resources are sufficient to ensure the achievement of the end-of-program student learning outcomes and program outcomes, and meet the needs of the faculty, staff, and students.
	The peer evaluators verified evidence to support compliance with this Criterion.  The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.
	The peer evaluators could not verify evidence to support compliance with this Criterion.
conduc	of the faculty offices, skills/simulation laboratories, computer laboratories, and classroom spaces ted on the Macon Campus confirmed the content of the SSR (pp. 118–122). There are appropriate in the skills/simulation laboratory areas to support learning and facilitate the attainment of SLOs
college NP prog filing ca	the faculty meeting, faculty confirmed satisfaction with physical resources. The university, and department administration stated that they support all the physical resources needed for the gram. All full-time faculty have private offices with appropriate furnishings that include a desk, abinet and book shelf along with appropriate computer equipment, access to printers, copy es, and office supplies.
	student meeting, students verbalized satisfaction with physical resources, which includes the imulation laboratories and classrooms utilized on the two (2) immersion days each semester.
	erview with the nurse administrator verified that physical resources were available for the NP n as needed.
5.3	Learning resources and technology are selected with faculty input and are comprehensive, current, and accessible to faculty and students.
$\boxtimes$	The peer evaluators verified evidence to support compliance with this Criterion.
	The peer evaluators verified evidence to support compliance with this Criterion with areas needing development.
	The peer evaluators could not verify evidence to support compliance with this Criterion.

A tour of the educational facilities verified that learning resources are comprehensive, current, and accessible as presented in the SSR (pp. 123–125). There are multiple computers available for student use at the university within the nursing department and in the library. The library has a distinct dedicated nursing area that contains current literature. The university recently hired a graduate studies librarian. In interviews, the librarian indicated that the Cochrane Library Database was purchased following input from the faculty for graduate student use.

Review of course materials, NURS 5200 (45 hours), NURS 5400 (135 hours), NURS 6400 (180 hours), NURS 6500 (225 hours), and NURS 6600 (45 hours), verified that the program has 630 supervised direct

patient care clinical hours, which exceeds the minimum of 500 required clinical hours. Tour of clinical setting and meetings with faculty and students verified that the facilities and clinical resources support MSN educational experiences.

At the faculty meeting, the faculty confirmed that institutional resources and services support the development, management, and evaluation of the MSN program and verbalized that their input is sought in the selection of learning resources and technology. Review of the MSN faculty meeting minutes confirmed that faculty have input as presented in the SSR (p. 123). At an MSN faculty meeting on October 18, 2016, the nurse administrator requested the group members' suggestions for technology budget, and the following suggestions were made: electronic documentation system for students to take the place of the patient encounter log, poster printer, cardiac sounds simulator, and Barkley's tapes/CDs. At faculty meeting on December 10, 2015, nurse administrator requested the faculty's input of any highend items needed for inclusion in the budget request and reminded them at the January 7, 2016 meeting. Additionally, the faculty provided the peer evaluators with a list of program equipment purchases made for the MSN program over the last year, which included GYN/AID gynecologic medium skin tone skills trainer, lumbar puncture trainer, lumbar puncture trays, minor laceration trays, electronic stethoscopes, pocket ophthalmoscopes, otoscope diagnostic sets, thoracostomy tray, and physical assessment equipment kits.

At the student meeting, students verbalized that they were satisfied with learning resources and technology, including orientation and 24-hour access to online and telephone assistance and support. Students are able to access the library through their online accounts.

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

$\boxtimes$	The peer evaluators verified evidence to support compliance with this Criterion.
	The peer evaluators verified evidence to support compliance with this Criterion with areas
	needing development.
	The peer evaluators could not verify evidence to support compliance with this Criterion.

The MSN program is conducted in an asynchronous online environment using a learning management system. Review of budgets, tours of physical resources, and interviews with faculty, students, staff, and administrators verified that fiscal, physical, technological, and learning resources are sufficient to meet the needs of the faculty and students engaged in the MSN program.

Faculty and students interviewed confirmed that additional preparation and support for online teaching and learning was provided through orientation and training as well as ongoing support from the Information Technology personnel. Additionally, all faculty members teaching in the MSN program received continuing development in curricular design, online learning platforms, and technology through the Office of Innovation and Outreach. Faculty members and students have access to technical support on a 24-hour basis.

## **Summary of Compliance:**

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

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

## STANDARD 6 Outcomes

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

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

- a. Specific, measurable expected levels of achievement for each end-of-program student learning outcome/role-specific professional competency and each program outcome.
- b. Appropriate assessment method(s) for each end-of-program student learning outcome/role-specific professional competency and each program outcome.
- c. Regular intervals for the assessment of each end-of-program student learning outcome/role-specific professional competency and each program outcome.
- d. Sufficient data to inform program decision-making for the maintenance and improvement of each end-of-program student learning outcome/role-specific professional competency and each program outcome.\*
- e. Analysis of assessment data to inform program decision-making for the maintenance and improvement of each end-of-program student learning outcome/role-specific professional competency and each program outcome.
- f. Documentation demonstrating the use of assessment data in program decision-making for the maintenance and improvement of each end-of-program student learning outcome/role-specific professional competency and each program outcome.

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

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

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

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

$\boxtimes$	The peer evaluators verified evidence to support compliance with this Criterion.
	The peer evaluators verified evidence to support compliance with this Criterion with areas
	needing development.
	The peer evaluators could not verify evidence to support compliance with this Criterion.

The peer evaluators verified that the program has initiated a program evaluation plan with the beginning of the first cohort of students for the MSN – AGACNP program. The plan provides for evidence of students' achievement of each end-of-program SLOs/role-specific professional competency (SSR, pp. 132–136; 138–141). The MSN program has a current program of evaluation and has scheduled regular

evaluation of students' progress toward end-of-program learning outcomes and role-specific professional competencies. There are no graduates yet and no data to report.

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

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

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

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

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

There is a minimum of the three (3) most recent years of available licensure examination and/or certification examination pass rate data, and data are aggregated for the program as a whole as well as disaggregated by program option/certification examination, location, and date of program completion.

$\times$	The peer evaluators verified evidence to support compliance with this Criterion.
	The peer evaluators verified evidence to support compliance with this Criterion with areas
	needing development.
	The peer evaluators could not verify evidence to support compliance with this Criterion.

Performance on Certification Examination – Aggregate		
Expected Level of Achievement	Year	Certification Examination Pass Rate
90%	2019	Not yet available
Same as above	2018	Not yet available
Same as above	2017	Not yet available
	Three-Year Mean:	N/A

At the time of the site visit, the program had not graduated a cohort. There are no data to review. The expected level of achievement (ELA) for the certification pass rate will be at or above the national mean and trended over the next three (3) years.

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

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

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

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

There is a minimum of the three (3) most recent years of annual program completion data, and data are aggregated for the nursing program as a whole as well as disaggregated by program option, location, and date of program completion or entering cohort.

$\boxtimes$	The peer evaluators verified evidence to support compliance with this Criterion.
	The peer evaluators verified evidence to support compliance with this Criterion with areas
	needing development.
	The peer evaluators could not verify evidence to support compliance with this Criterion.

Program Completion – Aggregate		
Expected Level of Achievement	Year	Program Completion Rate
75%	2019	Not yet available
Same as above	2018	Not yet available
Same as above	2017	Not yet available

The program had not graduated a cohort at the time of the site visit. There are no data to review. The SSR reported a 90% program completion rate, but after the SSR was published, the faculty voted to change it to 75%. The faculty stated that they viewed the ELA of 90% as an unrealistically high expectation; this was provided as the rationale for changing the ELA. According to the program's plan, this information will be documented and monitored by faculty.

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

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

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

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

There is a minimum of the three (3) most recent years of available job placement data, and data are aggregated for the nursing program as a whole.

$\boxtimes$	The peer evaluators verified evidence to support compliance with this Criterion.
	The peer evaluators verified evidence to support compliance with this Criterion with areas
	needing development.
	The peer evaluators could not verify evidence to support compliance with this Criterion.

	Job Placement Rates - Aggregate						
Expected Level of Achievement	Year	Job Placement Rate	Number of Surveys Distributed	Number of Surveys Returned	Response Rate		
100%	2019	Not yet available	Not yet available	Not yet available	Not yet available		
Same as above	2018	Not yet available	Not yet available	Not yet available	Not yet available		
Same as above	2017	Not yet available	Not yet available	Not yet available	Not yet available		

The program had not graduated a cohort at the time of the visit. There are no data to review. The faculty determined that the ELA is 100% of graduates seeking employment will have role-related professional practice at one (1) year post-graduation. The rational for this ELA is the stated need for AGACNPs from the hospitals and other area healthcare organization representatives in the community. The first graduating class of the MSN program will occur complete the program in Summer 2017, and graduates will be surveyed in March 2018 (SSR, Appendix J, pp. 177–174). The cohort graduates following this initial cohort will be graduating each May and will be surveyed in November of the same year.

### **Summary of Compliance:**

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

The peer evaluators did not identify areas needing development for Standard 6.

# V. RECOMMENDATION FOR ACCREDITATION STATUS

# **Initial Accreditation:**

Initial accreditation as the program is in compliance with all Accreditation Standards.



# Faculty Profile Table Qualifications of Full-Time Faculty Exclusive to Nursing Program

# Faculty Profile Table Qualifications of Full-Time Faculty Exclusive to Nursing Program

FACULTY MEMBER'S NAME	DATE OF INITIAL APPOINTMENT AS FULL-TIME FACULTY MEMBER AT INSTITUTION	FACULTY MEMBER'S ACADEMIC DEGREES	FACULTY MEMBER'S AREA OF EXPERTISE/ EXPERIENCE	ALL NURSING COURSE(S) TAUGHT BY FACULTY MEMBER DURING CURRENT ACADEMIC YEAR	NON-TEACHING AREA(S) OF RESPONSIBLITY	FACULTY MEMBER'S OTHER QUALIFICATIO RELATED TO NURSING COURSE(S) TAUGHT
Last Name: Epps First Name: Stephanie	Month/Year: August 2016	Undergraduate Degree(s): BBA in Marketing/2006 ASN/2009 RN-BSN/ 2010 Graduate Degree(s): MBA/2008 MSN, AGACNP/2014	Area of expertise/ experience: Neuro Adult/Medical Surgical Critical Care Trauma Hospice Orthopedics	For Program Being Reviewed  Term: Fall 2016 NURS 5000 – Advanced Pathophysiology NURS 5200 – Advanced Health Assessment/ Diagnostic Reasoning NURS 5200L  Term: Spring 2017 NURS 5400 – AGAC I NURS 6400 - AGACII NURS 6400L NURS 5400L  Term: Summer 2017 NURS 6500 – AGAC III NURS 6600 – Project Management	Office Hours 8 hours/week  Committee Work 4 hours/week  Research/ Scholarship 4 hours/week  Coordination of Course 16 hours/week  Clinical Practice 8 hours/week	Current certification(s) (if applicable):  AGACNP 2014008422 EXP: June 2019

				NURS 6600L NURS 6500L		
Last Name: Greene First Name: Lawanda	Month/Year: August 2013	Undergraduate Degree(s): BS in Community Health/1998 BSN/2005 Graduate Degree(s): MPH/2001 MSN/2011 DNPAGACNP/2014	Area of expertise/ experience: Case Management Neonatal Intensive Care Pediatrics Adult/Gerontology Utilization Management Pain Management	For Program Being Reviewed  Term: Fall 2016 NURS 5000 – Advanced Pathophysiology NURS 5200 – Advanced Health Assessment/Diagnostic Reasoning NURS 5200L  Term: Spring 2017 NURS 5400 – AGAC I NURS 6400 - AGACII NURS 6400L  Term: Summer 2017 NURS 6500 – AGAC III NURS 6500 – AGAC III NURS 6600 – Project Management NURS 6600L NURS 6500L	Office Hours 8 hours/week  Committee Work 6 hours/week  Coordination of Course 22 hours/week  Clinical Practice 4 hours/week	Current certification(s) (if applicable):  AGACNP 2014024875 EXP: December 20