Title.

Middle Georgia State University Administrative Assessment

Instructions. This form is used to collect administrative assessments for each budgeted unit at Middle Georgia State University (academic and nonacademic units). Departments should include a brief mission statement (describing what they do and who they serve), goals the department or unit is working to accomplish (in a 5 year time frame. Your goals and objectives should be reported out individuals, linked to the plan imperatives and strategies, align with the measurable objectives from the previous year , and defined and measurable objectives for the upcoming year. This form should be completed by each budgeted unit no later than the end of July. NOTE: All fields are required, please place NA or O in response field ONLY if the numbered objective is not being utilized, otherwise full responses are required. Provide ALL necessary information requested to the fullest extent possible, such that a peer reviewer is not required to assume any information not provided. Utilize the provided assessment scoring rubric drafting guideline to evaluate your report prior to submission. https://www.mga.edu/institutional-research/docs/IEB_Administrative_Score_Card.pdf

Please SUBMIT the form within 30 minutes of opening this page. If you wait too long to submit you may lose your work In the event that you need to edit your submission, you may contact the Faculty Affairs Manager to secure a custom link to edit and resubmit.

Q1. Submitters Email

donna.ingram@mga.edu

Q2. Who is the person responsible for this report?

Donna Ingram

Q3. For which year are you completing this report?

- ○ FY 23 (July 2022-June 2023)
- ○ FY 24 (July 2023-June 2024)
- ◉ FY 25 (July 2024-June 2025)

Q4. To which division of the University is your unit assigned?

- ○ Office of the President
- ○ Advancement
- ◉ Academic Affairs
- ○ Fiscal Affairs
- ○ Enrollment Management
- ○ Student Affairs

Q5. For which department or area are you reporting? (Ex. Financial Aid, Library, OTR, Athletics, etc)

Nursing

Q6. The mission and goals of the department should be consistent over a 5 year period, although some institutional changes may necessitate and prompt a change in mission or goals for specific departments. In this section, report the mission statement for your department.

The mission of the Middle Georgia State University (MGA) Nursing Programs is to provide quality evidence-based education which prepares students to become competent professional nurses and leaders.

Q7. What are the goals for this department? These should be the "big things" the department/area intends to accomplish within 5 years.

1. Increase enrollment by 3% each year. 2. Maintain ACEN accreditation and GBON approval. 3. Maintain annual NCLEX pass rates at or greater than 90%.

0. Each year, every department should identify objectives the department hopes to accomplish in the next year. These should align with departmental goals and the MGA strategic plan. In the next section you will be reporting on the objectives you set and whether or not you achieved them in FY25. Later in the document you will report on objectives you hope to accomplish in the coming fiscal year, FY26.

8. Objective 1: What was this department's first objective for this fiscal year? Objectives should be specific, measurable, and achievable within one year.

. Maintain first time NCLEX pass rate of 90% or greater for both BSN and ASN students.

9. Objective 1: Detail specifically how your department measured this objective? (Survey, budget number, number of participants, jobs completed, measurable time and/or effort, etc)

Reviewing GBON annual reports.

10. Objective 1: What was your target outcome for this objective? (1.e. 80% participation, 5% enrollment growth, 7% change in engagement)

90% pass rate

11. Objective 1: Provide details for your target performance level established (i.e. accreditation requirement, past performance data, peer program review, etc)

Peer program reviews

12. Objective 1: At what level did the department/area achieve on this objective? (This should be a number, i.e. 82%, 6%, 345 attendees, 75% engagement)

BSN pass rate- 100% ASN pass rate - 96%

13. Objective 1: Did your department meet this objective?

- ○ The department did not meet this objective.
- ◉ The department met this objective.
- ○ The department exceeded this objective.

14. Objective 1: Improvement Plans and Evidence of changes based on an analysis of the results: What did your department learn from working toward this objective? What changes will you make based on this effort next year?

No changes, continue to monitor and stay above 90% pass rate in future years.

15. Objective 2: What was this department's second objective for this fiscal year? Objectives should be specific, measurable, and achievable within one year.

The percentage of re-entry students passing their nursing courses will be at or above 90% between Fall and Spring and Spring and Fall.

16. Objective 2: Detail specifically how your department measured this objective? (Survey, budget number, number of participants, jobs completed, measurable time and/or effort, etc)

Calculating the % of re-entry students who pass their nursing courses in the Fall and also in the Spring.

17. Objective 2: What was your target outcome for this objective? (1.e. 80% participation, 5% enrollment growth, 7% change in engagement)

90% pass rate

18. Objective 2: Provide details for your target performance level established (i.e. accreditation requirement, past performance data, peer program review, etc)

Setting a benchmark for future planning

19. Objective 2: At what level did the department/area achieve on this objective? (This should be a number, i.e. 82%, 6%, 345 attendees, 75% engagement)

83% retention rate for Fall 84% retention rate for Spring

20. Objective 2: Did your department meet this objective?

- (●) The department did not meet this objective.
- ( ) The department met this objective.
- ( ) The department exceeded this objective.

21. Objective 2: Improvement Plans and Evidence of changes based on an analysis of the results: What did your department learn from working toward this objective? What changes will you make based on this effort next year?

The retention rate in BSN (Macon, WR, Dublin) is higher than the retention rate in the ASN (Dublin, Cochran). The Success Coach, whose office is located in Macon plans to visit all campuses to enhance visibility and provide a greater presence in the 1st semester nursing courses.

22. Objective 3: What was this department's third objective for this fiscal year? Objectives should be specific, measurable, and achievable within one year.

Incoming Spring PLBSN enrollment will be at or above 60 students.

23. Objective 3: Detail specifically how your department measured this objective? (Survey, budget number, number of participants, jobs completed, measurable time and/or effort, etc)

Enrollment data

24. Objective 3: What was your target outcome for this objective? (1.e. 80% participation, 5% enrollment growth, 7% change in engagement)

60 students

25. Objective 3: Provide details for your target performance level established (i.e. accreditation requirement, past performance data, peer program review, etc)

Historical perspective, past performance data

26. Objective 3: At what level did the department/area achieve on this objective? (This should be a number, i.e. 82%, 6%, 345 attendees, 75% engagement)

39 PLBSN students admitted

27. Objective 3: Did your department meet this objective?

- (●) The department did not meet this objective.
- ( ) The department met this objective.
- ( ) The department exceeded this objective.

28. Objective 3: Improvement Plans and Evidence of changes based on an analysis of the results: What did your department learn from working toward this objective? What changes will you make based on this effort next year?

Nursing PLBSN is far from reaching capacity. The interdepartmental "MGA Nursing Initiative" was implemented secondary to Dr. Shawn Little's increasing enrollment directives. Actions include: securing Supplemental Instructors and embedded tutors for high -DFW courses creating "housing" major for pre-nursing students targeted recruitment campaigns and attended several recruitment events gained Senate approval for an accelerated BSN program option revitalized the Elite Early Assurance Program organized and offered the 1st Summer Scrubs Camp

29. Objective 4: What was this department's fourth objective for this fiscal year? Objectives should be specific, measurable, and achievable within one year.

NA

30. Objective 4: Detail specifically how your department measured this objective? (Survey, budget number, number of participants, jobs completed, measurable time and/or effort, etc)

NA

31. Objective 4: What was your target outcome for this objective? (1.e. 80% participation, 5% enrollment growth, 7% change in engagement)

NA

32. Objective 4: Provide details for your target performance level established (i.e. accreditation requirement, past performance data, peer program review, etc)

NA

33. Objective 4: At what level did the department/area achieve on this objective? (This should be a number, i.e. 82%, 6%, 345 attendees, 75% engagement)

NA

34. Objective 4: Did your department meet this objective?

- ○ The department did not meet this objective.
- ◉ The department met this objective.

- ◯ The department exceeded this objective.

35. Objective 4: Improvement Plans and Evidence of changes based on an analysis of the results: What did your department learn from working toward this objective? What changes will you make based on this effort next year?

NA

36. Based on your goals and objectives listed above please indicate their connection with MGA's Strategic Plan (https://www.mga.edu/about/strategic-plan/docs/Strategic_Plan_2023-2028.pdf) by checking all associated and relevant Strategies from the list below. (Check all the apply)

- ☐ Champion Student Success 1. Demonstrate standards of excellence in all academic programs
- ☐ Champion Student Success 2. Grow student engagement at all degree levels
- ☑ Champion Student Success 3. Expand enrollment and graduation
- ☑ Lead Innovation and Economic Opportunity 4. Ensure high-demand programs for workforce and career alignment
- ☐ Lead Innovation and Economic Opportunity 5. Use Center for Middle Georgia Studies to drive University outreach
- ☐ Lead Innovation and Economic Opportunity 6. Coordinate faculty scholarship and grant awards to build University reputation
- ☐ Build Culture and Identity 7. Plan, resource, and promote campus roles and identities
- ☐ Build Culture and Identity 8. Pursue great-place/college -to-work designation
- ☐ Build Culture and Identity 9. Promote culture of wellness throughout the MGA community
- ☐ Build Culture and Identity 10. Compete and win at the NCAA Division II level
- ☐ Sustain Fiscal Resilience and Brand Value 11. Apply data-driven accountability to all operations
- ☐ Sustain Fiscal Resilience and Brand Value 12. Maintain access, affordability and value for all students
- ☐ Sustain Fiscal Resilience and Brand Value 13. Grow and diversity streams of revenue

37. Please indicate which of the following actions you took as a result of the 2023/2024 Assessment Cycle **(prior cycle)** (Note: These actions are documented in reports, memos, emails, meeting minutes, or other directives within the reporting area)(Check all the apply)

- ☑ Disseminating/Discussing Assessment Results/Feedback to Appropriate Members of the Campus Community
- ☑ Disseminating/Discussing Assessment Results/Feedback to Appropriate External Stakeholders
- ☑ Faculty or Staff Support: Professional Development Activities, Trainings, Workshops, Technical Assistance
- ☐ Process Changes: Improve, Expand, Refine, Enhance, Discontinue, etc Operational Processes
- ☑ Request for Additional Financial or Human Resources
- ☑ Customer Service Changes: Communication, Services, etc
- ☑ Making Improvements to Teaching Approach, Course Design, Curriculum, Scheduling, other
- ☐ Evaluating and/or Revising the Reporting Lines Internal Assessment Processes

- [ ] Other

38. Please indicate which of the following actions you will take as a result of the 2024/2025 Assessment Cycle **(current cycle)** (Note: These actions must be documented in reports, memos, emails, meeting minutes, or other directives within the reporting area)(Check all the apply)

- [x] Disseminating/Discussing Assessment Results/Feedback to Appropriate Members of the Campus Community
- [x] Disseminating/Discussing Assessment Results/Feedback to Appropriate External Stakeholders
- [x] Faculty or Staff Support: Professional Development Activities, Trainings, Workshops, Technical Assistance
- [ ] Process Changes: Improve, Expand, Refine, Enhance, Discontinue, etc Operational Processes
- [x] Request for Additional Financial or Human Resources
- [x] Customer Service Changes: Communication, Services, etc
- [x] Making Improvements to Teaching Approach, Course Design, Curriculum, Scheduling, other
- [ ] Evaluating and/or Revising the Reporting Lines Internal Assessment Processes
- [ ] Other

39. Please provide a **comprehensive narrative** outlining how assessment results are utilized for continuous improvement in this field. Your narrative **should be of sufficient length and detail** to address the past, present, and future aspects of assessment, with specific emphasis on how these results inform decision-making and drive improvement efforts.

Student learning outcomes and program outcomes are tracked using a Systematic Evaluation Plan and are reviewed each year by the Department of Nursing Evaluation Committee in collaboration with the respective Program Coordinators. The Committee and Program Coordinators devise appropriate plans of action for areas needing improvement and also review the estimated levels of achievement for possible revision. Student learning outcomes and program outcomes are also shared with the Department of Nursing Advisory Board each year and posted on the department's website for communities/persons of interest. Additionally, the same is shared with faculty at faculty meetings each August and January. Nursing enrollment is being closely monitored and multi-departmental initiatives should provide positive impact.

40. Please indicate (if appropriate) any local, state, or national initiatives (academic or otherwise) that are influential in the operations, or goals, and objectives of your unit. (Complete College Georgia, USG High Impact Practice Initiative, LEAP, USG Momentum Year, Low-Cost No-Cost Books, etc)

USG Systems Office and the Associate Vice Chancellor of Healthcare Education

41. Please identify and detail three to four measurable objectives for the next fiscal year. In listing the objectives, please use the format shown in these examples.1) The Department of X will improve services levels by 5% as measured by our satisfaction survey. 2) The department of X will provide training in ABC for at least 73 MGA faculty and staff.

1. By the end of the 25-26 AY, the nursing program will have at least 370 pre-licensure students enrolled in the nursing program. 2. Maintain annual NCLEX pass rates at or greater than 90%. 3. The Accelerated BSN program will have at least 20 students enrolled Spring 2026.

42. Optional Mindset Update (Academic Deans ONLY) Please provide an update on the implementation of your school based mindset plan/strategy. Include any adjustments to metrics for the FY24 as well as outcomes associated with your appraisal of your schools activities.

NA

43. Did you use any of the following resources to support your data collection, analysis, and planning efforts? Please check all that apply and/or list any others you utilized:

- [x] MGA Dashboards
- [x] USG Dashboards
- [ ] MGA Institutional Reports
- [ ] USG System-Level Reports
- [ ] MGA Internal Surveys
- [ ] USG-Administered Surveys
- [ ] Academic Program Reviews
- [ ] Strategic Planning Documents (MGA and/or USG)
- [x] Enrollment Reports (term-over-term, year-over-year)
- [ ] Retention/Graduation/Success Rate Reprots
- [ ] Budget or Financial Reports
- [ ] Assessment Reports of Institutional Effectiveness Documents
- [ ] Faculty/Staff Workload Data
- [ ] Peer Institution Comparisons or Benchmarking Reports
- [ ] External Accreditor Data or Standards
- [ ] National or State Data Sets (IPEDS, NCES, Georgia Data System, etc.)
- [ ] Custom Data Requests (OIRDS or other offices)
- [ ] Other (please specify):

44. Optional: The following upload portal is available to supplement your report with supportive documentation should you wish to provide any (instruments, data, etc).