

**Lincoln University—School of Nursing  
Systematic Evaluation Plan BSN**

| <p><b>5.1 EPSLO #1: Liberal Education for Baccalaureate Generalist Nursing Practice:</b> Employ concepts from the arts and sciences to form the basis for clinical reasoning.<br/>(2021 Essentials: Domain I—Knowledge for Nursing Practice)</p>  |   |  |
|---|---|--|
| Assessment Method   | Frequency of Data Collection and Frequency of EPSLO Analysis                              | ELAs   |
| NUR 475 Community Health Capstone Poster Presentation   | <p>Collect: Bi-annually (Spring/Fall)</p> <p>Analyze: annually (end of academic year)</p> | All students will achieve a score of 80% or higher on the NUR 475 Community Health Capstone Poster Presentation (assignment total is 10 points; will only measure on 8 content points, not the 2 points for APA).  |
| <b>Data</b> (Aggregate; Disaggregate if applicable)   |   | <b>Analysis/Actions</b><br>(D) Development<br>(M) Maintenance<br>(R) Revision  |
| <p><b>Spring 2026:</b> 10 of 10 (100%) students made 80% or greater<br/> <b>Fall 2025:</b> 11 of 11 (100%) students made 80% or greater<br/> <b>Spring 2025:</b> 10 of 10 (100%) students made 80% or greater<br/> <b>Fall 2024:</b> 13 of 13 (100%) of students made 80% or greater<br/> <b>Spring 2024:</b> 7 of 7 (100%) of students made 80% or greater</p> |   | <p>(M) 5/11/2026: Faculty reviewed trend data from Spring 2024 through Spring 2026 and identified sustained achievement above the established benchmark, with 100% of students meeting or exceeding the expected level of achievement in all reporting periods. Faculty determined that current instructional strategies, assignment expectations, and evaluation methods are effectively supporting student development of clinical reasoning and integration of concepts from the arts and sciences into nursing practice. Current teaching and assessment strategies will be maintained while continuing annual monitoring to ensure consistent student achievement across future cohorts.</p> <p>(R) 1/14/2026: Outlined and updated the frequency of data collection and annual analysis procedures. Clarified the goal and identified the specific content points used for outcome measurement.</p> <p>(D/R) 11/5/25: Revised the assessment method to focus specifically on the Community Health Capstone Poster Presentation.</p> <p>(M) 9/3/25: Faculty reviewed updated data and determined that students continued to achieve the benchmark. No additional revisions were recommended at this time.</p> |

|  |   |
|--|---|
|  | (D) Fall 2024: Revised the goal and method of evaluation to improve alignment between the assessment measure and the EPSLO. |
|--|---|

| <b>5.1 EPSLO #1: Liberal Education for Baccalaureate Generalist Nursing Practice:</b> Employ concepts from the arts and sciences to form the basis for clinical reasoning.<br>(2021 Essentials: Domain I—Knowledge for Nursing Practice) |  |   |
|--|--|---|
| <b>Assessment Method</b>   | <b>Frequency of Data Collection and Frequency of EPSLO Analysis</b>                | <b>ELAs</b>   |
| NUR 435 Kaplan Secure Predictor Exam   | Collect: Bi-annually (Spring/Fall)<br><br>Analyze: annually (end of academic year) | 80% of students in NUR 435 who take the Secure Predictor Exam will score 65% in the clinical judgement category   |
| <b>Data</b> (Aggregate; Disaggregate if applicable)  |  | <b>Analysis/Actions</b><br>(D) Development<br>(M) Maintenance<br>(R) Revision   |
| <b>Spring 2026:</b> 9 of 11 students; 81.8%<br><b>Fall 2025:</b> 6 of 11 students; 54.5%   |  | (R/M) 5/11/2026: Faculty reviewed initial trend data and identified improvement in student performance from Fall 2025 (54.5%) to Spring 2026 (81.8%), resulting in achievement of the established benchmark. Faculty will continue current instructional strategies while monitoring future cohorts for consistency in achievement of the benchmark.<br><br>(R) 1/14/2026: Outlined and updated the frequency of data collection and annual analysis procedures.<br><br>(D) 12/3/2025: Added this new outcome measure to better evaluate student clinical judgment performance within the Kaplan Secure Predictor Exam. |

| <p><b>5.1 EPSLO #2: Basic Organizational and Systems Leadership for Quality Care and Patient Safety:</b> Apply leadership concepts, skills, and decision making in the provision of high quality nursing care, healthcare team coordination, and the oversight and accountability for care delivery in a variety of settings.<br/>                 (2021 Essentials: Domain 5—Quality and Safety, Domain 7—Systems-Based Practice)</p> |  |   |
|--|--|---|
| Assessment Method  | Frequency of Data Collection and Frequency of EPSLO Analysis                       | ELAs  |
| “Management of Professional Issues” Kaplan   | Collect: Bi-annually (Spring/Fall)<br><br>Analyze: annually (end of academic year) | At least 75% of students who take the “Management of Professional Issues” Kaplan in NUR 435 will score a 71%.   |
| <b>Data</b> (Aggregate; Disaggregate if applicable)  |  | <b>Analysis/Actions</b><br>(D) Development<br>(M) Maintenance<br>(R) Revision   |
| <p><b>Spring 2026:</b> 2 of 11 students; <b>18.2%</b><br/> <b>Fall 2025:</b> 4 of 11 students; <b>36.3%</b></p>  |  | <p>(R) 5/11/2026: Faculty reviewed Fall 2025 and Spring 2026 data and determined that the benchmark was not met in either semester. Performance declined from 36.3% in Fall 2025 to 18.2% in Spring 2026, indicating that students need additional support with management, leadership, delegation, prioritization, and professional issues content. Faculty determined that students are struggling in therapeutic communication.<br/> <b>Action Plan:</b> This should be embedded into each course—will add this to Fall 2026 SON curriculum agenda.</p> <p>(R) 1/14/2026: Outlined/updated frequency of collection and analyzing data</p> <p>(R) 12/3/25: Change of goal to 75% of those who take this specific Kaplan in NUR 435.</p> <p>(R) 9/3/25: Revised the ELA from 85% to 75% based on faculty review of data and the need to establish a realistic but meaningful benchmark. Data will start Spring 2026.</p> <p>(D) Change of goal and method of evaluation (Spring 2024).</p> |

| <p><b>5.1 EPSLO #2: Basic Organizational and Systems Leadership for Quality Care and Patient Safety:</b> Apply leadership concepts, skills, and decision making in the provision of high quality nursing care, healthcare team coordination, and the oversight and accountability for care delivery in a variety of settings.<br/>                 (2021 Essentials: Domain 5—Quality and Safety, Domain 7—Systems-Based Practice)</p> |  |   |
|--|--|---|
| Assessment Method  | Frequency of Data Collection and Frequency of EPSLO Analysis                       | ELAs  |
| Team Lead Rubric   | Collect: Bi-annually (Spring/Fall)<br><br>Analyze: annually (end of academic year) | All students in NUR 400 will complete a team lead role in the practicum setting and achieve at least a 75% or greater on the team lead rubric.  |
| <b>Data</b> (Aggregate; Disaggregate if applicable)  |  | <b>Analysis/Actions</b><br>(D) Development<br>(M) Maintenance<br>(R) Revision   |
| <p><b>Spring 2026:</b> 13 of 13 students; (100%) achieved 75% or greater<br/>                     *Start Spring 2026</p>   |  | <p>(M) 5/11/2026: Faculty reviewed initial Spring 2026 data and determined that the benchmark was met, with 13 of 13 students (100%) achieving 75% or greater on the Team Lead Rubric. Faculty identified this as a strength because all students successfully demonstrated leadership behaviors, care coordination, decision making, and accountability in the practicum setting. Because this is a newly added measure, faculty will continue to collect data across future cohorts to determine whether achievement remains consistent over time.</p> <p>(R) 1/14/2026: Outlined and updated the frequency of data collection and annual analysis procedures.</p> <p>(D) 12/3/2025: Added this new outcome measure to more directly assess student leadership, coordination of care, and accountability for care delivery through completion of the team lead role in NUR 400.</p> |

| <b>5.1 EPSLO #3: Scholarship for Evidence Based Practice:</b> Integrate evidence-based practice (EBP) in planning, implementing, and evaluating outcomes of care.<br>(2021 Essentials: Domain 4—Scholarship for Nursing Discipline)  |  |   |
|--|--|---|
| <b>Assessment Method</b>   | <b>Frequency of Data Collection and Frequency of EPSLO Analysis</b>                | <b>ELAs</b>   |
| NUR 360 Research Team Assignment- Literature Review  | Collect: Bi-annually (Spring/Fall)<br><br>Analyze: annually (end of academic year) | All students will achieve a score of 80% or higher on the NUR 360 Research Assignment- Literature Review. (assignment total is 15 points; will only measure on 12 content points, not the 3 points for APA)   |
| <b>Data</b> (Aggregate; Disaggregate if applicable)  |  | <b>Analysis/Actions</b><br>(D) Development<br>(M) Maintenance<br>(R) Revision   |
| <p> <b>Spring 2026:</b> 9 of 9 students (100%) score an 80% or higher<br/> <b>Fall 2025:</b> 16 of 17 students (94.1%) scored an 80% or higher<br/> <b>Spring 2025:</b> 13 of 14 students (92.8%) scored an 80% or higher<br/> <b>Fall 2024:</b> 100% of students made an 80% or greater; 10 students<br/> <b>Spring 2024:</b> 100% of students made an 80% or greater; 10 students                     </p> |  | <p>                         (M/R) 5/11/2026: Faculty reviewed longitudinal trend data from Spring 2024 through Spring 2026. The benchmark was met in three of the five reporting periods and nearly met in the remaining two semesters. Faculty determined that student performance in evidence-based practice remains a program strength, with achievement rates consistently above 90% in all semesters reviewed. Faculty discussed providing additional guidance related to literature synthesis and scholarly writing for students.<br/> <b>Action Plan:</b> Faculty will maintain the current NUR 360 Research Team Assignment Literature Review while continuing to reinforce scholarly writing throughout the curriculum. Faculty will monitor future cohorts to determine whether additional instructional support is needed to consistently achieve the benchmark among all students.                     </p> <p>                         (R) 1/14/2026: Outlined and updated the frequency of data collection and annual analysis procedures. The ELA was clarified to specify that only the 12 content points of the assignment are used for outcome measurement, excluding APA points.                     </p> <p>                         (M/R) 12/3/25: Faculty reviewed Fall 2025 data and determined that although overall student achievement remained high (94.1%), the benchmark was not fully achieved because one student scored below the expected level of achievement. Faculty discussed the rigor of the benchmark.                     </p> <p>                         (M) 9/3/25: Faculty reviewed updated data and noted strong overall student performance; however, the benchmark requiring all students to achieve 80% or higher was not met in Spring 2025.                     </p> |

|  |   |
|--|---|
|  | <p>(D) Spring 2024: Revised the goal and method of evaluation to more specifically assess student achievement of evidence-based practice competencies through the NUR 360 Research Team Assignment Literature Review.</p> |
|--|---|

| <b>5.1 EPSLO #3: Scholarship for Evidence Based Practice:</b> Integrate evidence-based practice (EBP) in planning, implementing, and evaluating outcomes of care.<br>(2021 Essentials: Domain 4—Scholarship for Nursing Discipline)   |  |   |
|---|--|---|
| Assessment Method   | Frequency of Data Collection and Frequency of EPSLO Analysis                       | ELAs  |
| NUR 360 EBP Survey  | Collect: Bi-annually (Spring/Fall)<br><br>Analyze: annually (end of academic year) | At least 80% of students in NUR 360 will have a total average score of 4 or greater on a 0-5 scale on the EBP survey given in NUR 360.  |
| Data (Aggregate; Disaggregate if applicable)  |  | Analysis/Actions<br>(D) Development<br>(M) Maintenance<br>(R) Revision  |
| <b>Spring 2026:</b> 9 students; but only 8 completed survey; 8 of 8 students (100%) average score of greater than 4<br><b>Fall 2025:</b> 14 of 16 students (87.5%) average score of 4 or 5<br><b>Spring 2025:</b> 13 of 14 students (92.8%) average score of 4 or 5<br><b>Fall 2024:</b> 10 students took the survey; total average score 90%<br><b>Spring 2024:</b> 10 students took the survey; total average score 96% |  | (M) 5/11/2026: Faculty reviewed data from Spring 2024 through Spring 2026 and identified sustained achievement above the established benchmark across all reporting periods. Faculty will maintain current instructional strategies and continue annual review of EBP survey data to monitor consistency of student achievement and identify any areas of need.<br><br>(R) 1/14/2026: Outlined and updated the frequency of data collection and annual analysis procedures.<br><br>(M) 12/3/25: Faculty reviewed trend data and determined that student performance remained consistently above the expected level of achievement. No additional revisions were recommended at this time.<br><br>(M) 9/3/25: Faculty reviewed updated survey data and determined that students continued to meet the benchmark related to evidence-based practice knowledge and application. Current instructional strategies and EBP learning activities were maintained.<br><br>(D) Spring 2024: Revised the goal and method of evaluation to better assess student perceptions and understanding of evidence-based practice concepts within NUR 360. |

| <b>5.1 EPSLO #3: Scholarship for Evidence-Based Practice:</b> Integrate evidence-based practice (EBP) in planning, implementing, and evaluating outcomes of care.<br>(2021 Essentials: Domain 4—Scholarship for Nursing Discipline)             |  |   |
|---|--|---|
| Assessment Method   | Frequency of Data Collection and Frequency of EPSLO Analysis                       | ELAs  |
| Preceptor daily feedback of student in practicum course NUR 435.  | Collect: Bi-annually (Spring/Fall)<br><br>Analyze: annually (end of academic year) | Greater than 85% of all student’s daily feedback forms from 435 will be evaluated as “S” for evaluation question “Student displayed critical thinking in utilization of Evidence Based Practice in providing care.”   |
| Data (Aggregate; Disaggregate if applicable)  |  | Analysis/Actions<br>(D) Development<br>(M) Maintenance<br>(R) Revision  |
| <b>Spring 2026:</b> 9 of 11 students; <b>81.8%</b><br><b>Fall 2025:</b> 11 of 11 students; 100%<br><b>Spring 2025:</b> 6 of 9 students; <b>66.6%</b><br><b>Fall 2024:</b> 12 of 13 students; 92.3%<br><b>Spring 2024:</b> 6 of 6 students; 100% |  | (R) 5/11/2026: Faculty reviewed this assessment method following ACEN feedback and determined that preceptor daily feedback forms should not serve as the primary evaluation measure for student achievement of program outcomes because preceptors are not responsible for formal evaluation of student learning outcomes.<br><b>Action Plan:</b> Faculty determined that this measure will be removed from the SEP. Existing data will be retained for historical trending purposes, but future program evaluation will utilize measures that align more directly with ACEN expectations.<br><br>(R) 1/14/2026: Outlined and updated the frequency of data collection and annual analysis procedures.<br><br>(M/R) 12/3/25: Reviewed, change wording, continue to track.<br><br>(M) 9/3/25: Faculty reviewed updated data and noted variability in student achievement across cohorts. Current data continued to be monitored while faculty evaluated the appropriateness of the assessment method.<br><br>(D) Spring 2024: Revised the goal and method of evaluation to better assess student utilization of evidence based practice within the practicum setting. |

| <b>5.1 EPSLO #3: Scholarship for Evidence Based Practice:</b> Integrate evidence-based practice (EBP) in planning, implementing, and evaluating outcomes of care.<br>(2021 Essentials: Domain 4—Scholarship for Nursing Discipline) |  |   |
|---|--|---|
| <b>Assessment Method</b>  | <b>Frequency of Data Collection and Frequency of EPSLO Analysis</b>                | <b>ELAs</b>   |
| NUR 435 Final Practicum Evaluation  | Collect: Bi-annually (Spring/Fall)<br><br>Analyze: annually (end of academic year) | All students in NUR 435 will be evaluated as “S” on their Final Practicum Evaluation for “The nurse applies evidence-based practice and decision-making skills in providing high quality nursing care, team care coordination and the oversight and accountability for care delivery.”  |
| <b>Data</b> (Aggregate; Disaggregate if applicable)   |  | <b>Analysis/Actions</b><br>(D) Development<br>(M) Maintenance<br>(R) Revision   |
| <b>Spring 2026:</b> 11 of 11 students; 100%<br><b>*Start Spring 2026</b>  |  | (M) 5/11/2026: Faculty reviewed initial Spring 2026 data and determined that all students (11 of 11; 100%) achieved the expected level of achievement on the NUR 435 Final Practicum Evaluation related to evidence-based practice and decision-making skills. Faculty identified this as an initial indicator that students are appropriately applying evidence-based practice concepts, clinical reasoning, and care coordination skills within the practicum setting. Because this is a newly implemented assessment measure, faculty will continue annual review of future cohorts to evaluate consistency of student achievement and effectiveness of the assessment process time.<br><br>(D)1/14/2026: Added this new faculty-evaluated assessment measure to more directly assess student application of evidence-based practice and clinical decision-making skills within the practicum setting and to strengthen alignment with ACEN expectations regarding faculty responsibility for evaluation of student learning outcomes. |

| <b>5.1 EPSLO #4: Information Management and Application of Patient Care Technology:</b> Demonstrate skills in using client/patient care and information technologies, information systems, and communication devices that support safe nursing practice<br>(2021 Essentials: Domain 8—Informatics and Healthcare Technologies)  |  |  |
|---|--|--|
| Assessment Method   | Frequency of Data Collection and Frequency of EPSLO Analysis                       | ELAs   |
| BSN Program Completion Survey (NUR 435)   | Collect: Bi-annually (Spring/Fall)<br><br>Analyze: annually (end of academic year) | At least 90% of graduates will evaluate information technology skills as satisfactory.   |
| Data (Aggregate; Disaggregate if applicable)  |  | Analysis/Actions<br>(D) Development<br>(M) Maintenance<br>(R) Revision   |
| <p><b>Spring 2026:</b> 11 graduates; 11 responded= 90.9% (36.4% 4 of 11 responded 4/5; 54.5% 6 of 11 responded 5/5)</p> <p><b>Fall 2025:</b> 11 graduates; 11 responded= <b>81.8%</b> (18.2% 2 of 11 responded 4/5; 63.6% 7 of 11 responded 5/5)</p> <p><b>Spring 2025:</b> 9 graduates; 8 responded=<b>87.5%</b> (25%: 2 of 8 responded 4/5; 62.5%: 5 responded 5/5)</p> <p><b>Fall 2024:</b> 13 graduates; 11 responded=<b>36.4%</b> (27.3%: 3 of 11 responded 4/5; 9.1%: 1 responded 5/5)</p> <p><b>Spring 2024:</b> 6 graduates; 5 responded=100% (100%: 5 responded 4/5; 0% responded 5/5)</p> <p><b>Fall 2023:</b> 14 graduates; 12 responded= 91.6% (58.3%:7 responded 4/5; 33.3%: 4 responded 5/5)</p> <p><b>Spring 2023:</b> 10 graduates; 3 responded = 100% (33.3%: 1 responded 4/5; 66.7%: 2 responded 5/5)</p> <p><b>Fall 2022:</b> 10 graduates; 10 responded= 90% (70%: 7 responded 4/5; 20%: 2 responded 5/5)</p> |  | <p>(R/M) 5/11/2026: Faculty reviewed trend data from Fall 2022 through Spring 2026 and determined that graduate perceptions of information technology skills have improved since Fall 2024, with Spring 2026 meeting the benchmark. However, because achievement has been inconsistent across cohorts and this is an indirect measure, faculty determined that this survey data will be used as supportive evidence. Faculty will maintain the BSN Program Completion Survey as an indirect measure while pairing it with direct faculty-evaluated assessment measures.</p> <p>(R)1/14/2026: Outlined and updated the frequency of data collection and annual analysis procedures.</p> <p>(M) 12/3/25: Faculty reviewed data and identified inconsistent achievement of the 90% benchmark across reporting periods. Spring 2025 (87.5%) and Fall 2024 (36.4%) did not meet the expected level of achievement. Faculty discussed the need to strengthen student exposure to patient care technology via documentation in clinical setting.</p> <p>(M) 9/3/25: Faculty reviewed updated survey data and noted variability in student-reported satisfaction across cohorts. Faculty determined that the survey provides useful indirect evidence but should be interpreted alongside direct student performance.</p> <p>(M) Spring 2024: Faculty reviewed this indirect assessment measure and determined that the BSN Program Completion Survey would continue to be used as one source of evidence regarding graduate perceptions of information technology skills.</p> |

| <b>5.1 EPSLO #4: Information Management and Application of Patient Care Technology:</b> Demonstrate skills in using client/patient care and information technologies, information systems, and communication devices that support safe nursing practice<br>(2021 Essentials: Domain 8— Informatics and Healthcare Technologies) |  |  |
|---|--|--|
| Assessment Method   | Frequency of Data Collection and Frequency of EPSLO Analysis                       | ELAs   |
| Preceptor daily feedback form of student in practicum course NUR 435.   | Collect: Bi-annually (Spring/Fall)<br><br>Analyze: annually (end of academic year) | Greater than 85% of all student’s daily feedback forms from 435 will be evaluated as “S” for evaluation question “Student documentation was accurate and appropriate.”   |
| Data (Aggregate; Disaggregate if applicable)  |  | Analysis/Actions<br>(D) Development<br>(M) Maintenance<br>(R) Revision   |
| <b>Spring 2026:</b> 8 of 11 students; <b>72.7%</b><br><b>Fall 2025:</b> 9 of 11 students; <b>81.8%</b><br><b>Spring 2025:</b> 4 of 9 students; <b>44.4%</b><br><b>Fall 2024:</b> 13 of 13 students; 100%<br><b>Spring 2024:</b> 6 of 6 students; 100%   |  | (R) 5/11/2026: Faculty reviewed this assessment method following ACEN feedback and determined that preceptor daily feedback forms should not serve as the primary evaluation measure for student achievement of program outcomes because preceptors are not responsible for formal evaluation of student learning outcomes.<br><b>Action Plan:</b> Faculty determined that this measure will be removed from the SEP. Existing data will be retained for historical trending purposes, but future program evaluation will utilize measures that align more directly with ACEN expectations.<br><br>(R) 1/14/2026: Outlined and updated the frequency of data collection and annual analysis procedures.<br><br>(M/R) 12/3/25: Faculty reviewed trend data and noted that the benchmark was not consistently met, with student achievement ranging from 44.4% to 100% across reporting periods. Faculty discussed the need for a more reliable and faculty-evaluated measure of student documentation and information management skills.<br><br>(M) 9/3/25: Faculty reviewed updated data and noted variability in student achievement across cohorts. Faculty continued monitoring while evaluating whether the assessment method appropriately reflected faculty evaluation of student learning outcomes.<br><br>(D) Spring 2024: Revised the goal and method of evaluation to assess student documentation accuracy and information management within the practicum setting. |

| <b>5.1 EPSLO #4: Information Management and Application of Patient Care Technology:</b> Demonstrate skills in using client/patient care and information technologies, information systems, and communication devices that support safe nursing practice<br>(2021 Essentials: Domain 8—Informatics and Healthcare Technologies) |  |   |
|--|--|---|
| <b>Assessment Method</b>   | <b>Frequency of Data Collection and Frequency of EPSLO Analysis</b>                | <b>ELAs</b>   |
| NUR 435 Final Practicum Evaluation   | Collect: Bi-annually (Spring/Fall)<br><br>Analyze: annually (end of academic year) | All students in NUR 435 will be evaluated as “S” on their Final Practicum Evaluation for “Documents client assessment, nursing interventions and client responses accurately, completely and truthfully.”   |
| <b>Data</b> (Aggregate; Disaggregate if applicable)  |  | <b>Analysis/Actions</b><br>(D) Development<br>(M) Maintenance<br>(R) Revision   |
| <b>Spring 2026:</b> 11 of 11 students; 100%<br><b>*Start Spring 2026</b>   |  | <p>(M) 5/11/2026: Faculty reviewed initial Spring 2026 data and determined that all students (11 of 11; 100%) achieved the expected level of achievement on the NUR 435 Final Practicum Evaluation related to documenting client assessments, nursing interventions, and client responses accurately, completely, and truthfully. Faculty identified this as an initial indicator that students are appropriately applying documentation standards, clinical communication skills, and information management expectations within the practicum setting. Because this is a newly implemented assessment measure, faculty will continue annual review of future cohorts to evaluate consistency of student achievement and effectiveness of the evaluation process over time.</p> <p>(D) 1/14/2026: Added this new faculty-evaluated assessment measure to more directly assess student competency in clinical documentation, information management, and accurate communication of patient care within the practicum setting. This measure was implemented to strengthen alignment with ACEN expectations regarding faculty responsibility for evaluation of student learning outcomes.</p> |

| <b>5.1 EPSLO #4: Information Management and Application of Patient Care Technology:</b> Demonstrate skills in using client/patient care and information technologies, information systems, and communication devices that support safe nursing practice<br>(2021 Essentials: Domain 8—Informatics and Healthcare Technologies) |  |  |
|--|--|--|
| <b>Assessment Method</b>   | <b>Frequency of Data Collection and Frequency of EPSLO Analysis</b>                | <b>ELAs</b>  |
| NUR 435 Final Practicum Evaluation   | Collect: Bi-annually (Spring/Fall)<br><br>Analyze: annually (end of academic year) | All students in NUR 435 will be evaluated as “S” on their Final Practicum Evaluation for “Accurately documents all subjective and objective data required by the designated clinical agency.”  |
| <b>Data</b> (Aggregate; Disaggregate if applicable)  |  | <b>Analysis/Actions</b><br>(D) Development<br>(M) Maintenance<br>(R) Revision  |
| <b>Spring 2026:</b> 11 of 11 students; 100%<br><b>*Start Spring 2026</b>   |  | (M) 5/11/2026: Faculty reviewed initial Spring 2026 data and determined that all students (11 of 11; 100%) achieved the expected level of achievement on the NUR 435 Final Practicum Evaluation related to accurate documentation of subjective and objective clinical data. Faculty identified this as an initial indicator that students are appropriately applying documentation standards, information management skills, and patient care technology expectations within the clinical setting. Because this is a newly implemented assessment measure, faculty will continue annual review of future cohorts to evaluate consistency of student achievement and effectiveness of the assessment process over time.<br><br>(D) 1/14/2026: Added this new faculty-evaluated assessment measure to more directly assess student documentation accuracy, information management, and use of patient care technology within the practicum setting. This measure was implemented to strengthen alignment with ACEN expectations regarding faculty responsibility for evaluation of student learning outcomes. |

| <p><b>5.1 EPSLO #5: Health Care Policy, Finance, and Regulatory Environments:</b> Demonstrate knowledge of healthcare policy, finance, and regulatory environments, influenced by healthcare trends.</p> <p>(2021 Essentials: Domain 8—Informatics and Healthcare Technologies)</p>   |   |  |
|---|---|--|
| Assessment Method   | Frequency of Data Collection and Frequency of EPSLO Analysis                              | ELAs   |
| NUR 475 Letter to the Legislator  | <p>Collect: Bi-annually (Spring/Fall)</p> <p>Analyze: annually (end of academic year)</p> | All students will achieve a score of 80% or higher on the NUR 475 Letter to the Legislator Assignment-(assignment total is 5 points; will only measure on 4 content points, not the 1 points for APA).   |
| <b>Data</b> (Aggregate; Disaggregate if applicable)   |   | <b>Analysis/Actions</b><br>(D) Development<br>(M) Maintenance<br>(R) Revision  |
| <p><b>Spring 2026:</b> 10 of 10 (100%) students made an 80% or greater</p> <p><b>Fall 2025:</b> 11 of 11 (100%) students made an 80% or greater</p> <p><b>Spring 2025:</b> 9 of 10 (90%) students made an 80% or greater</p> <p><b>Fall 2024:</b> 11 of 13 (84.6%) students made an 80% or greater</p> <p><b>Spring 2024:</b> 100% of students made an 80% or greater</p> |   | <p>(M/R) 5/11/2026: Faculty reviewed trend data from Spring 2024 through Spring 2026 and determined that the benchmark was achieved in three of the five reporting periods. Faculty identified improvement in student achievement from Fall 2024 (84.6%) and Spring 2025 (90%) to Fall 2025 and Spring 2026, where all students achieved the expected level of achievement. Faculty determined that revision of the scoring method to exclude APA formatting points from outcome measurement, along with faculty instructional changes and assignment implementation differences across cohorts, may have contributed to improved student performance in Fall 2025 and Spring 2026. Faculty will maintain the current NUR 475 Letter to the Legislator Assignment. Faculty will continue annual review of outcome data to monitor consistency of benchmark achievement across future cohorts.</p> <p>(R) 1/14/2026: Outlined and updated the frequency of data collection and annual analysis procedures. Clarified the expected level of achievement and identified the specific content points used for outcome measurement, excluding APA formatting points.</p> <p>(M) 12/3/25: Faculty reviewed available data. Faculty discussed maintaining ELA while continuing to monitor consistency of achievement across future cohorts.</p> <p>(M) 9/3/25: Faculty reviewed updated data and noted that overall student performance remained strong; however, the benchmark requiring all students to achieve 80% or higher was not met in Fall 2024.</p> |

|  |   |
|--|---|
|  | <p>(D) Spring 2024: Revised the goal and method of evaluation to more specifically assess student understanding of healthcare policy, finance, and regulatory environments through the NUR 475 Letter to the Legislator Assignment.</p> |
|--|---|

| <p><b>5.1 EPSLO #5: Health Care Policy, Finance, and Regulatory Environments:</b> Demonstrate knowledge of healthcare policy, finance, and regulatory environments, influenced by healthcare trends.</p> <p style="text-align: center;">(2021 Essentials: Domain 8—Informatics and Healthcare Technologies)</p> |   |  |
|---|---|--|
| Assessment Method   | Frequency of Data Collection and Frequency of EPSLO Analysis                              | ELAs   |
| NUR 435 Kaplan Secure Predictor Exam  | <p>Collect: Bi-annually (Spring/Fall)</p> <p>Analyze: annually (end of academic year)</p> | 80% of students in NUR 435 who take the Secure Predictor Exam will score 65% in the leadership category.   |
| <b>Data</b> (Aggregate; Disaggregate if applicable)   |   | <p><b>Analysis/Actions</b></p> <p>(D) Development<br/>(M) Maintenance<br/>(R) Revision</p>   |
| <p><b>Spring 2026:</b> 10 of 11 students; 90.9%</p> <p><b>Fall 2025:</b> 10 of 11 students; 90.9%</p>   |   | <p>(M) 5/11/2026: Faculty reviewed initial trend data from Fall 2025 and Spring 2026 and determined that the benchmark was met in both reporting periods, with 90.9% of students achieving the expected level of achievement each semester. Because this is a newly implemented assessment measure, faculty will continue annual review of future cohorts to evaluate consistency of student achievement over time.</p> <p>(R) 1/14/2026: Outlined and updated the frequency of data collection and annual analysis procedures.</p> <p>(D) 12/3/2025: Added this new outcome measure to assess student knowledge related to healthcare policy, finance, leadership, regulatory environments, and systems-based practice through the leadership category of the Kaplan Secure Predictor Exam. Faculty determined that the leadership category aligns with this EPSLO.</p> |

| <p><b>5.1 EPSLO #6: Interprofessional Communication and Collaboration for Improving Patient Health Outcomes:</b> Apply effective communication techniques, including negotiation, collaboration, and conflict resolution to produce positive professional relationships.<br/> <i>(2021 Essentials: Domain 2—Person-Centered Care, Domain 6—Interprofessional Partnerships)</i></p> |  |   |
|--|--|---|
| Assessment Method  | Frequency of Data Collection and Frequency of EPSLO Analysis                       | ELAs  |
| Preceptor daily feedback form of student in practicum course NUR 435.  | Collect: Bi-annually (Spring/Fall)<br><br>Analyze: annually (end of academic year) | Greater than 85% of all student’s daily feedback forms from 435 will be evaluated as “S” for evaluation question “Student utilized effective communication with preceptor, clients, and others as appropriate.”   |
| Data (Aggregate; Disaggregate if applicable)   |  | Analysis/Actions<br>(D) Development<br>(M) Maintenance<br>(R) Revision  |
| <p><b>Spring 2026:</b> 11 of 11 students; 100%<br/> <b>Fall 2025:</b> 10 of 11 students; 90.9%<br/> <b>Spring 2025:</b> 7 of 9 students; <b>77.7%</b><br/> <b>Fall 2024:</b> 13 of 13 students; 100%<br/> <b>Spring 2024:</b> 6 of 6 students; 100%</p>  |  | <p>(R) 5/11/2026: Following ACEN feedback, faculty determined that preceptor daily feedback forms should not serve as a primary evaluation measure for student achievement of program outcomes because preceptors are not responsible for formal evaluation of student learning outcomes.<br/> <b>Action Plan:</b> Faculty determined that this assessment measure will be removed from the SEP. Existing data will be retained for historical trending purposes, but future program evaluation will utilize measures that align more directly with ACEN expectations.</p> <p>(R) 1/14/2026: Outlined and updated the frequency of data collection and annual analysis procedures.</p> <p>(M/R) 12/3/25: Faculty reviewed data. Faculty discussed the need for a more direct, faculty-evaluated measure of interprofessional communication and collaboration.</p> <p>(M) 9/3/25: Faculty reviewed updated data and noted variability in student achievement across cohorts. Faculty continued monitoring while evaluating whether the assessment method appropriately reflected faculty evaluation of student learning outcomes.</p> <p>(D) Spring 2024: Revised the goal and method of evaluation to assess student communication with preceptors, clients, and others in the practicum setting.</p> |

| <p><b>5.1 EPSLO #6: Interprofessional Communication and Collaboration for Improving Patient Health Outcomes:</b> Apply effective communication techniques, including negotiation, collaboration, and conflict resolution to produce positive professional relationships.<br/> <i>(2021 Essentials: Domain 2—Person-Centered Care, Domain 6—Interprofessional Partnerships)</i></p> |  |  |
|--|--|--|
| Assessment Method  | Frequency of Data Collection and Frequency of EPSLO Analysis                       | ELAs   |
| Preceptor daily feedback form of student in practicum course NUR 435.  | Collect: Bi-annually (Spring/Fall)<br><br>Analyze: annually (end of academic year) | Greater than 85% of all student's daily feedback forms from 435 will be evaluated as "S" for evaluation question "Student utilized conflict resolution strategies as appropriate."   |
| <b>Data</b> (Aggregate; Disaggregate if applicable)  |  | <b>Analysis/Actions</b><br>(D) Development<br>(M) Maintenance<br>(R) Revision  |
| <p><b>Spring 2026:</b> 7 of 11 students; <b>63.6%</b><br/> <b>Fall 2025:</b> 10 of 11 students; 90.9%<br/> <b>Spring 2025:</b> 5 of 9 students; <b>55.5%</b><br/> <b>Fall 2024:</b> 13 of 13 students; 100%<br/> <b>Spring 2024:</b> 6 of 6 students; 100%</p>   |  | <p>(R) 5/11/2026: Following ACEN feedback, faculty determined that preceptor daily feedback forms should not serve as a primary evaluation measure for student achievement of program outcomes because preceptors are not responsible for formal evaluation of student learning outcomes.<br/> <b>Action Plan:</b> Faculty determined that this assessment measure will be removed from the SEP. Existing data will be retained for historical reference but will not be used as the primary evidence of future student achievement.</p> <p>(R) 1/14/2026: Outlined and updated the frequency of data collection and annual analysis procedures.</p> <p>(M/R) 12/3/25: Faculty reviewed trend data and identified inconsistent achievement of the benchmark across reporting periods, with student performance ranging from 55.5% to 100%. Faculty discussed the need for a more direct and faculty-evaluated assessment measure of conflict resolution, communication, and interprofessional collaboration skills.</p> <p>(M) 9/3/25: Faculty reviewed data. Faculty continued monitoring while evaluating whether the assessment method appropriately reflected faculty evaluation of student learning outcomes.</p> <p>(D) Spring 2024: Revised the goal and method of evaluation to assess student use of conflict resolution strategies within the practicum setting.</p> |

| <p><b>5.1 EPSLO #6: Interprofessional Communication and Collaboration for Improving Patient Health Outcomes:</b> Apply effective communication techniques, including negotiation, collaboration, and conflict resolution to produce positive professional relationships.<br/>                 (2021 Essentials: Domain 2—Person-Centered Care, Domain 6—Interprofessional Partnerships)</p> |  |  |
|---|--|--|
| Assessment Method   | Frequency of Data Collection and Frequency of EPSLO Analysis                       | ELAs   |
| NUR 435 NCLEX Sample Test 3 Priorities  | Collect: Bi-annually (Spring/Fall)<br><br>Analyze: annually (end of academic year) | 90% of students in NUR 435 will score 60% on the NCLEX Sample Test 3-Priorities Test   |
| Data (Aggregate; Disaggregate if applicable)  |  | Analysis/Actions<br>(D) Development<br>(M) Maintenance<br>(R) Revision   |
| <p><b>Spring 2026:</b> 11 of 11 students; 100%<br/> <b>Fall 2025:</b> 11 of 11 students; 100%</p>   |  | <p>(M) 5/11/2026: Faculty reviewed initial trend data from Fall 2025 and Spring 2026 and determined that the benchmark was met in both reporting periods, with 100% of students achieving the expected level of achievement. Faculty identified this as an initial indicator that students are appropriately applying prioritization, delegation, communication, and collaborative decision-making concepts. Because this is a newly implemented assessment measure, faculty will continue annual review of future cohorts to evaluate consistency of student achievement and effectiveness of the assessment process over time.</p> <p>(R) 1/14/2026: Outlined and updated the frequency of data collection and annual analysis procedures.</p> <p>(D) 12/3/2025: Added this new outcome measure to assess student prioritization, delegation, communication, and collaborative decision-making skills through the NCLEX Sample Test 3 Priorities assessment. Faculty determined that this measure aligns with the EPSLO because prioritization and delegation questions require students to apply communication, collaboration, conflict management, and coordination of care concepts necessary for effective interprofessional practice.</p> |

| <p><b>5.1 EPSLO #6: Interprofessional Communication and Collaboration for Improving Patient Health Outcomes:</b> Apply effective communication techniques, including negotiation, collaboration, and conflict resolution to produce positive professional relationships.<br/>                 (2021 Essentials: Domain 2—Person-Centered Care, Domain 6—Interprofessional Partnerships)</p> |  |   |
|---|--|---|
| Assessment Method   | Frequency of Data Collection<br>and<br>Frequency of EPSLO Analysis                 | ELAs  |
| NUR 435 Final Practicum Evaluation  | Collect: Bi-annually (Spring/Fall)<br><br>Analyze: annually (end of academic year) | All students in NUR 435 will be evaluated as “S” on their Final Practicum Evaluation for “Recognizes and uses effective verbal and nonverbal communication with assigned clients, faculty, peers and agency personnel.”   |
| <b>Data</b> (Aggregate; Disaggregate if applicable)   |  | <b>Analysis/Actions</b><br>(D) Development<br>(M) Maintenance<br>(R) Revision   |
| <p><b>Spring 2026:</b> 11 of 11 students; 100%<br/> <b>*Start Spring 2026</b></p>   |  | <p>(M) 5/11/2026: Faculty reviewed initial Spring 2026 data and determined that all students (11 of 11; 100%) achieved the expected level of achievement on the NUR 435 Final Practicum Evaluation related to effective verbal and nonverbal communication with clients, faculty, peers, and agency personnel. Faculty identified this as an initial indicator that students are appropriately applying communication and collaboration skills necessary for effective interprofessional relationships and patient-centered care within the clinical setting. Because this is a newly implemented assessment measure, faculty will continue annual review of future cohorts to evaluate consistency of student achievement and effectiveness of the evaluation process over time.</p> <p>(D) 1/14/2026: Added this new faculty-evaluated assessment measure to more directly assess student verbal and nonverbal communication skills, professional interactions, and interprofessional collaboration within the practicum setting. This measure was implemented to strengthen alignment with ACEN expectations regarding faculty responsibility for evaluation of student learning outcomes.</p> |

| <b>5.1 EPSLO #7: Clinical Prevention and Population Health:</b> Use clinical prevention and population focused nursing to improve health.<br>(2021 Essentials: Domain 3—Population Health)   |  |   |
|--|--|---|
| <b>Assessment Method</b>   | <b>Frequency of Data Collection and Frequency of EPSLO Analysis</b>                | <b>ELAs</b>   |
| NUR 475<br>Homelessness Practicum<br>Discussion Board  | Collect: Bi-annually (Spring/Fall)<br><br>Analyze: annually (end of academic year) | All students will achieve a score of 80% or higher on the NUR 475 Discussion Board regarding the Homeless population-(assignment total is 5 points).  |
| <b>Data</b> (Aggregate; Disaggregate if applicable)  |  | <b>Analysis/Actions</b><br>(D) Development<br>(M) Maintenance<br>(R) Revision   |
| <b>Spring 2026:</b> 10 of 10 (100%) students achieved a score of 80% or higher<br><b>Fall 2025:</b> 11 of 11 (100%) students achieved a score of 80% or higher<br><b>Spring 2025:</b> 6 of 10 (60%) students achieved a score of 80% or higher<br><b>Fall 2024:</b> 13 of 13 students achieved a score of 80% or higher<br>**Will implement Fall 2024. |  | (M) 5/11/2026: Faculty reviewed data from Fall 2024 through Spring 2026 and determined that the benchmark was achieved in three of the four reporting periods. Faculty identified improvement in student achievement following the lower performance observed in Spring 2025. Because subsequent cohorts achieved the benchmark, faculty determined continued monitoring of future cohorts is appropriate to evaluate long-term consistency of student achievement. Faculty will maintain the current NUR 475 Homelessness Practicum Discussion Board assignment while continuing to have homeless population exposure in NUR 475 practicum. Faculty will continue annual review of outcome data to monitor consistency of benchmark achievement across future cohorts.<br><br>(R) 1/14/2026: Outlined and updated the frequency of data collection and annual analysis procedures.<br><br>(M) 12/3/25: Faculty reviewed available trend data and discussed maintaining current instructional strategies and homeless population exposure in practicum setting.<br><br>(M) 9/3/25: Faculty reviewed Fall 2024 and Spring 2025 data and determined that although the benchmark was achieved in Fall 2024, the benchmark was not met in Spring 2025, with 60% of students achieving a score of 80% or higher. Faculty reviewed Spring 2025 results and discussed possible factors contributing to decreased student performance during that reporting period and suspect it maybe an isolated cohort. |

|  |   |
|--|---|
|  | <p>(D) Spring 2024: Revised the goal and method of evaluation to more specifically assess student understanding of clinical prevention, population health, and care of vulnerable populations through the NUR 475 Homelessness Practicum Discussion Board assignment.</p> |
|--|---|

| <b>5.1 EPSLO #7: Clinical Prevention and Population Health:</b> Use clinical prevention and population focused nursing to improve health.<br>(2021 Essentials: Domain 3—Population Health) |  |  |
|--|--|--|
| <b>Assessment Method</b>   | <b>Frequency of Data Collection and Frequency of EPSLO Analysis</b>                | <b>ELAs</b>  |
| NUR 475 Public Health Assessment Quiz  | Collect: Bi-annually (Spring/Fall)<br><br>Analyze: annually (end of academic year) | All students will achieve a score of 75% or higher on the NUR 475 Public Health Assessment Quiz.   |
| <b>Data</b> (Aggregate; Disaggregate if applicable)  |  | <b>Analysis/Actions</b><br>(D) Development<br>(M) Maintenance<br>(R) Revision  |
| <b>Spring 2026:</b> 10/10 students (100%) achieved a score of 75% or higher<br><b>Fall 2025:</b> 6 of 11 (54.5%) students achieved a score of 75% or higher                                |  | <p>(M) 5/11/2026: Faculty reviewed data from Fall 2025 and Spring 2026 and identified improvement in student performance from Fall 2025 (54.5%) to Spring 2026 (100%), resulting in achievement of the established benchmark in Spring 2026. Because this is a newly implemented assessment measure with limited data, faculty determined that continued monitoring of future cohorts is necessary to evaluate consistency of student achievement and determine whether Fall 2025 represented an isolated cohort trend or an ongoing area of concern. Faculty will maintain the current Public Health Assessment Quiz. Faculty will continue annual review of outcome data to monitor consistency of benchmark achievement.</p> <p>(R) 1/14/2026: Outlined and updated the frequency of data collection and annual analysis procedures.</p> <p>(D) 12/3/2025: Added this new outcome measure to assess student understanding of population health, public health assessment, and clinical prevention concepts through the NUR 475 Public Health Assessment Quiz. Faculty determined that this assessment aligns with the EPSLO because it evaluates student knowledge related to public health nursing practice.</p> |

| <p><b>5.1 EPSLO #8: Professionalism and Professional Values:</b> Demonstrate core nursing values to achieve optimal health outcomes by applying the professional standards of moral, ethical, and legal conduct.</p> <p>(2021 Essentials: Domain 9—Professionalism, Domain 10—Personal, Professional, and Leadership Development)</p>  |  |   |
|--|--|---|
| Assessment Method  | Frequency of Data Collection and Frequency of EPSLO Analysis                   | ELAs  |
| NUR 460 Individual Final Case Study  | Collect: Bi-annually (Spring/Fall)<br>Analyze: annually (end of academic year) | 80% of students will achieve a score of 85% or higher on the NUR 460 Individual Final Case Study-(assignment total is 45 points; will only measure on 40 content points, not the points for 5 APA).   |
| <b>Data</b> (Aggregate; Disaggregate if applicable)  |  | <b>Analysis/Actions</b><br>(D) Development<br>(M) Maintenance<br>(R) Revision   |
| <p><b>Spring 2026:</b> 13 of 13 main campus BSN students; 100%</p> <p><b>Fall 2025:</b> 6 of 10 main campus BSN students; <b>60%</b></p> <p><b>Spring 2025:</b> 9 of 11 main campus BSN students; 81.8% met the goal</p> <p><b>Fall 2024:</b> 8 of 10 main campus BSN students; 80% met the goal</p> <p><b>Spring 2024:</b> 11 of 13 main campus BSN students; 84.6% met the goal</p> <p><b>Fall 2023:</b> 6 of 7 main campus BSN students; 85.7% met the goal</p> |  | <p>(M) 5/11/2026: Faculty reviewed data and determined that Spring 2026 performance improved to 100%, resulting in achievement of the established benchmark following the decline observed in Fall 2025 (60%). Faculty discussed the revised benchmark is what we want to continue to monitor and the NUR 460 Individual Final Case Study as an appropriate assessment. Faculty will continue monitoring future cohorts to evaluate consistency of student achievement and determine whether Fall 2025 represented an isolated cohort concern or an area needing additional review.</p> <p>(R) 1/14/2026: Outlined and updated the frequency of data collection and annual analysis procedures. Clarified the scoring method to specify that only the 40 content points are used for outcome measurement, excluding the 5 APA formatting points. Faculty reviewed updated trend data and noted that Fall 2025 performance declined to 60%, which did not meet the established benchmark. Faculty discussed possible factors contributing to the decrease in student achievement and determined that continued monitoring of future cohorts is necessary to evaluate whether Fall 2025 represented an isolated cohort concern or an ongoing area needing additional review.</p> <p>(M) 12/3/25: Faculty reviewed available trend data and determined that students continued to meet the revised benchmark across multiple reporting periods. Faculty identified the NUR 460 Individual Final Case Study as an appropriate measure of professionalism, ethical/legal reasoning, and professional accountability within nursing practice.</p> <p>(R) 9/3/25: Faculty reviewed trend data and determined that students were not consistently meeting the existing benchmark requiring all students to achieve 85% or higher on the</p> |

|  |   |
|--|---|
|  | <p>assignment. Based on review of cohort performance, faculty voted to revise the expected level of achievement to 80% of students achieving 85% or higher in order to establish a more appropriate program-level benchmark for evaluating student achievement across cohorts.</p> <p>(D) Fall 2023/Spring 2024: Revised the goal and method of evaluation to assess student application of professional nursing values, ethical decision-making, legal standards, and professional accountability through the NUR 460 Individual Final Case Study.</p> |
|--|---|

| <p><b>5.1 EPSLO #8: Professionalism and Professional Values:</b> Demonstrate core nursing values to achieve optimal health outcomes by applying the professional standards of moral, ethical, and legal conduct.<br/>                 (2021 Essentials: Domain 9—Professionalism, Domain 10—Personal, Professional, and Leadership Development)</p> |  |  |
|---|--|--|
| Assessment Method   | Frequency of Data Collection and Frequency of EPSLO Analysis                   | ELAs   |
| “Management of Professional Issues” Kaplan  | Collect: Bi-annually (Spring/Fall)<br>Analyze: annually (end of academic year) | At least 75% of students who take the “Management of Professional Issues” Kaplan in NUR 435 will score a 71%.  |
| <b>Data</b> (Aggregate; Disaggregate if applicable)   |  | <b>Analysis/Actions</b><br>(D) Development<br>(M) Maintenance<br>(R) Revision  |
| <p><b>Spring 2026:</b> 2 of 11 students (18.2%)<br/> <b>Fall 2025:</b> 4 of 11 students (36.3%)</p>   |  | <p>(R/M) 5/11/2026: Faculty reviewed initial trend data from Fall 2025 and Spring 2026 and determined that the benchmark was not met in either reporting period, with student achievement declining from 36.3% in Fall 2025 to 18.2% in Spring 2026.<br/> <b>Action Plan:</b> Although this is a newly implemented assessment measure with limited longitudinal data, faculty determined the need to evaluate this further (Fall 2026). Faculty will continue the “Management of Professional Issues” Kaplan.</p> <p>(R) 1/14/2026: Outlined and updated the frequency of data collection and annual analysis procedures.</p> <p>(D) 12/3/2025: Added this new ELA. Faculty determined that this assessment aligns with the EPSLO because it evaluates student knowledge related to ethical and legal practice, delegation, scope of practice, accountability, leadership responsibilities, professional communication, and standards of professional nursing conduct.</p> |

| <p><b>5.1 EPSLO #9: Baccalaureate Generalist Nursing Practice:</b> Demonstrate knowledge, skills, and attitudes necessary for practice as a member and leader of the interprofessional healthcare team.</p> <p>(2021 Essentials: Domain 2—Person-Centered Care, Domain 10—Personal, Professional, and Leadership Development)</p> |   |   |
|---|---|---|
| Assessment Method   | Frequency of Data Collection and Frequency of EPSLO Analysis                              | ELAs  |
| <p>“RN Question Trainer NGN” Kaplan</p>   | <p>Collect: Bi-annually (Spring/Fall)</p> <p>Analyze: annually (end of academic year)</p> | <p>80% of NUR 435 students will demonstrate improvement on the nationalized normed of the “RN Question Trainer NGN” Kaplan from Trainer 5 to Trainer 7.</p>   |
| <p><b>Data</b> (Aggregate; Disaggregate if applicable)</p>  |   | <p><b>Analysis/Actions</b></p> <p>(D) Development<br/>(M) Maintenance<br/>(R) Revision</p>  |
| <p><b>Spring 2026:</b> 6 of 11 students; <b>54.5%</b></p> <p><b>Fall 2025:</b> 3 of 11 students; <b>27.2%</b></p> <p><b>Spring 2025:</b> 3 of 9 students; <b>33.3%</b></p> <p><b>Fall 2024:</b> 4 of 13 students; <b>30.7%</b></p> <p><b>Spring 2024:</b> 4 of 6 students; <b>66.7%</b></p>                                       |   | <p>(M/R) 5/11/2026: Faculty reviewed data from Spring 2024 through Spring 2026 and determined that the benchmark was not met in any reporting period, with student achievement ranging from 27.2% to 66.7%. Although Spring 2026 showed improvement from Fall 2025, overall results indicate that students are not consistently demonstrating expected improvement between Trainer 5 and Trainer 7. Faculty discussed reviewing Kaplan implementation and student remediation processes.</p> <p><b>Action Plan:</b> Faculty identified this as an area requiring further evaluation (Fall 2026). Faculty will continue with the ELA at this time.</p> <p>(R) 1/14/2026: Outlined and updated the frequency of data collection and annual analysis procedures.</p> <p>(M) 12/3/25: Faculty reviewed available trend data and determined that student improvement from Trainer 5 to Trainer 7 remained below the expected level of achievement. Faculty discussed the need to continue reviewing Kaplan implementation, student engagement with remediation, and alignment between course content and NCLEX style clinical judgment expectations.</p> <p>(M) 9/3/25: Faculty reviewed updated data and determined that the benchmark was not being met consistently across cohorts. Faculty continued monitoring student progression on RN Question Trainer NGN performance to determine whether the revised measure accurately reflected student growth from Trainer 5 to Trainer 7.</p> |

|  |  |
|--|--|
|  | <p>(R) Revised the measure from Trainer 1 to Trainer 3 to Trainer 5 to Trainer 7 based on Kaplan usage feedback. Faculty determined that Trainer 5 to Trainer 7 provides a more appropriate measure of student readiness for baccalaureate generalist nursing practice. Fall 2024 will be the first of this data.</p> <p>(D) Spring 2024: Revised the goal and method of evaluation to assess student growth in NCLEX style clinical judgment, prioritization, decision-making, and generalist nursing practice readiness through the RN Question Trainer NGN Kaplan assessments</p> |
|--|--|

| <b>5.1 EPSLO #9: Baccalaureate Generalist Nursing Practice:</b> Demonstrate knowledge, skills, and attitudes necessary for practice as a member and leader of the interprofessional healthcare team.<br>(2021 Essentials: Domain 2—Person-Centered Care, Domain 10—Personal, Professional, and Leadership Development) |  |   |
|--|--|---|
| Assessment Method  | Frequency of Data Collection and Frequency of EPSLO Analysis                   | ELAs  |
| Preceptor daily feedback form of student in practicum course NUR 435   | Collect: Bi-annually (Spring/Fall)<br>Analyze: annually (end of academic year) | Greater than 85% of all student's daily feedback forms from 435 will be evaluated as "S" for evaluation question "Student was knowledgeable about medications and utilized safe medication administration, including immunization and flu shots."   |
| Data (Aggregate; Disaggregate if applicable)   |  | Analysis/Actions<br>(D) Development<br>(M) Maintenance<br>(R) Revision  |
| <p><b>Spring 2026:</b> 11 of 11 students; 100%</p> <p><b>Fall 2025:</b> 8 of 11 students; <del>72.7%</del></p> <p><b>Spring 2025:</b> 6 of 9 students; <del>66.6%</del></p> <p><b>Fall 2024:</b> 11 of 13 students; <del>84.6%</del></p> <p><b>Spring 2024:</b> 6 of 6 students; 100%</p>                              |  | <p>(R) 5/11/2026: Following ACEN feedback, faculty determined that preceptor daily feedback forms should not serve as a primary evaluation measure for student achievement of program outcomes because preceptors are not responsible for formal evaluation of student learning outcomes.</p> <p><b>Action Plan:</b> Faculty determined that this assessment measure will be removed from the SEP. Existing data will be retained for historical reference but will not be used as the primary evidence of future student achievement.</p> <p>(R) 1/14/2026: <del>Outlined and updated the frequency of data collection and annual analysis procedures.</del></p> <p>(M/R) 12/3/25: <del>Faculty reviewed trend data and identified inconsistent achievement of the benchmark, with student performance ranging from 66.6% to 100%. Faculty discussed the need for a more direct, faculty-evaluated measure of student medication knowledge, safe medication administration, and readiness for generalist nursing practice.</del></p> <p>(M) 9/3/25: <del>Faculty reviewed updated data and noted that the benchmark was not consistently met across cohorts. Faculty continued monitoring while evaluating whether the assessment method appropriately reflected faculty evaluation of student learning outcomes.</del></p> <p>(D) Spring 2024: <del>Revised the goal and method of evaluation to assess student knowledge of medications and safe medication administration within the practicum setting.</del></p> |

| <b>5.1 EPSLO #9: Baccalaureate Generalist Nursing Practice:</b> Demonstrate knowledge, skills, and attitudes necessary for practice as a member and leader of the interprofessional healthcare team.<br>(2021 Essentials: Domain 2—Person-Centered Care, Domain 10—Personal, Professional, and Leadership Development) |  |  |
|--|--|--|
| Assessment Method  | Frequency of Data Collection and Frequency of EPSLO Analysis                   | ELAs   |
| Preceptor daily feedback form of student in practicum course NUR 435   | Collect: Bi-annually (Spring/Fall)<br>Analyze: annually (end of academic year) | Greater than 85% of all student's daily feedback forms from 435 will be evaluated as "S" for evaluation question "Student was knowledgeable about diagnostic procedures and results."  |
| Data (Aggregate; Disaggregate if applicable)   |  | Analysis/Actions<br>(D) Development<br>(M) Maintenance<br>(R) Revision   |
| <b>Spring 2026:</b> 10 of 11 students; 90.9%<br><b>Fall 2025:</b> 8 of 11 students; <del>72.7%</del><br><b>Spring 2025:</b> 7 of 9 students; <del>77.7%</del><br><b>Fall 2024:</b> 11 of 13 students; <del>84.6%</del><br><b>Spring 2024:</b> 6 of 6 students; 100%  |  | (R) 5/11/2026: Following ACEN feedback, faculty determined that preceptor daily feedback forms should not serve as a primary evaluation measure for student achievement of program outcomes because preceptors are not responsible for formal evaluation of student learning outcomes.<br><b>Action Plan:</b> Faculty determined that this assessment measure will be removed from the SEP. Existing data will be retained for historical reference but will not be used as the primary evidence of future student achievement.<br><br>(R) 1/14/2026: <del>Outlined and updated the frequency of data collection and annual analysis procedures.</del><br><br>(M/R) 12/3/25: Faculty reviewed trend data and identified inconsistent achievement of the benchmark, with student performance ranging from 72.7% to 100%. Faculty discussed the need for a more direct, faculty-evaluated measure of student knowledge for generalist nursing practice.<br><br>(M) 9/3/25: Faculty reviewed updated data and noted that the benchmark was not consistently met across cohorts. Faculty continued monitoring while evaluating whether the assessment method appropriately reflected faculty evaluation of student learning outcomes.<br><br>(D) Revised the goal and method of evaluation to assess student knowledge of diagnostic procedures and interpretation of diagnostic results within the practicum setting. |

| <p><b>5.1 EPSLO #9: Baccalaureate Generalist Nursing Practice:</b> Demonstrate knowledge, skills, and attitudes necessary for practice as a member and leader of the interprofessional healthcare team.</p> <p>(2021 Essentials: Domain 2—Person-Centered Care, Domain 10—Personal, Professional, and Leadership Development)</p> |   |  |
|---|---|--|
| Assessment Method   | Frequency of Data Collection and Frequency of EPSLO Analysis                              | ELAs   |
| NUR 435 Final Practicum Evaluation  | <p>Collect: Bi-annually (Spring/Fall)</p> <p>Analyze: annually (end of academic year)</p> | All students in NUR 435 will be evaluated as “S” on their Final Practicum Evaluation for “Demonstrates safe performance of all assigned nursing skills.”   |
| <b>Data</b> (Aggregate; Disaggregate if applicable)   |   | <b>Analysis/Actions</b><br>(D) Development<br>(M) Maintenance<br>(R) Revision  |
| <p><b>Spring 2026:</b> 11 of 11 students; 100%</p> <p><b>*Start Spring 2026</b></p>   |   | <p>(M) 5/11/2026: Faculty reviewed initial Spring 2026 data and determined that all students (11 of 11; 100%) achieved the expected level of achievement on the NUR 435 Final Practicum Evaluation related to safe performance of assigned nursing skills. Faculty identified this as an initial indicator that students are appropriately demonstrating clinical competence, patient safety practices, and readiness to function as members of the interprofessional healthcare team within the practicum setting. Because this is a newly implemented assessment measure, faculty will continue annual review of future cohorts to evaluate consistency of student achievement and effectiveness of the evaluation process over time.</p> <p>(D) 1/14/2026: Added this new faculty-evaluated assessment measure to more directly assess student demonstration of safe nursing skills and readiness for generalist nursing practice within the practicum setting. This measure was implemented to strengthen alignment with ACEN expectations regarding faculty responsibility for evaluation of student learning outcomes.</p> |

| 5.2 Program Completion Rate                  |                         |  |   |                 |  |
|--|-------------------------|--|---|-----------------|--|
| Assessment Method                            |                         | Frequency of Data Collection   |   |                 | ELA for Each Program Option  |
| Program Coordinator Documentation            |                         | Collect: Bi-annually (Spring/Fall)<br>Analyze: annually (end of academic year) |   |                 | <p><u>ELA</u>: 55% of the students who begin NUR 225 will graduate within 100% of the time. (5 semesters)</p> <p><u>Rationale for ELA</u>: ACEN requirement; The program demonstrates evidence of students' achievement in completing the nursing program.</p>   |
| Data (Aggregate; Disaggregate if applicable) |                         |  |   |                 | Annual Analysis/Actions<br>(D) Development<br>(M) Maintenance<br>(R) Revision  |
| Semester                                     | Location/Program Option | # Of Admits to Initial Cohort  | On-time Graduates<br>(100%-5 SEMESTERS) | Aggregate Rates |  |
| Spring 2026                                  | Jefferson City          | 13   | 11                                      | 84%             | <p>(M/R) 5/11/2026: Faculty reviewed data and determined that the program completion benchmark was met in Spring 2026, Fall 2025, Spring 2025, Fall 2024, Fall 2023, and Spring 2022. It was not met in Spring 2024, Spring 2023, or Fall 2022. Faculty discussed variability in student completion rates across cohorts and identified student retention and progression as ongoing areas requiring continued review.</p> <p><b>Action Plan:</b> Faculty will further review program completion data and document contributing factors related to students who did not meet the expected level of achievement, including factors identified as within and outside of program control- Fall 2026.</p> <p>(R) 1/14/2026: Outlined and updated the frequency of data collection and annual analysis.</p> |
|  | BSN                     |  |   |                 |  |
| Fall 2025                                    | Jefferson City          | 11   | 10                                      | 90.9%           |  |
|  | BSN                     |  |   |                 |  |
| Spring 2025                                  | Jefferson City          | 13   | 8                                       | 61.54%          |  |
|  | BSN                     |  |   |                 |  |
| Fall 2024                                    | Jefferson City          | 17   | 11                                      | 64.71%          |  |
|  | BSN                     |  |   |                 |  |
| Spring 2024                                  | Jefferson City          | 11   | 6                                       | 54.55%          |  |

|                    |                |    |    |        |   |
|--------------------|----------------|----|----|--------|---|
|                    | BSN            |    |    |        | <p>(R) 11/5/2025: Established NUR 225 as first nursing course based on ACEN visit and number of semesters. Updated to add student numbers with percentages.</p> <p>(M) 9/3/25: Faculty reviewed updated program completion rate data and determined that the benchmark was not consistently achieved across reporting periods. Faculty discussed variability in cohort completion rates and the need to continue monitoring factors that may influence student retention and progression throughout the nursing program.</p> <p>(D) Added goal for 100% completion; keep tracking 150% as well.</p> |
| <b>Fall 2023</b>   | Jefferson City | 19 | 11 | 57.89% |   |
|                    | BSN            |    |    |        |   |
| <b>Spring 2023</b> | Jefferson City | 13 | 6  | 46.53% |   |
|                    | BSN            |    |    |        |   |
| <b>Fall 2022</b>   | Jefferson City | 16 | 8  | 50%    |   |
|                    | BSN            |    |    |        |   |
| <b>Spring 2022</b> | Jefferson City | 16 | 10 | 62.5%  |   |
|                    | BSN            |    |    |        |   |

| 5.2 Program Completion Rate                  |                         |  |   |  |   |
|--|-------------------------|--|---|--|---|
| Assessment Method                            |                         | Frequency of Data Collection   |   |  | ELA for Each Program Option   |
| Program Coordinator Documentation            |                         | Collect: Bi-annually (Spring/Fall)<br>Analyze: annually (end of academic year) |   |  | <p><u>ELA:</u> 70% of the students who begin NUR 225 will graduate within 150% of the time. (7 semesters)</p> <p><u>Rationale for ELA:</u> Missouri State Board of Nursing tracking requirements.</p>   |
| Data (Aggregate; Disaggregate if applicable) |                         |  |   |  | Annual Analysis/Actions<br>(D) Development<br>(M) Maintenance<br>(R) Revision   |
| Semester                                     | Location/Program Option | # Of Admits to Initial Cohort  | On-time Graduates<br>(150%-7 SEMESTERS) | Aggregate Rates                          |   |
| Spring 2026                                  | Jefferson City          | 13   | 11                                      | 84%                                      | <p>(M/R) 5/11/2026: Faculty reviewed data and determined that the program completion benchmark was met in Spring 2026, Fall 2025, Spring 2025, Fall 2024, Spring 2024, and Spring 2022. It was not met in Fall 2023, Spring 2023, and Fall 2022. Faculty discussed variability in student completion rates across cohorts and identified student retention and progression as ongoing areas requiring continued review.</p> <p><b>Action Plan:</b> Faculty will further review program completion data and document contributing factors related to students who did not meet the expected level of achievement, including factors identified as within and outside of program control- Fall 2026.</p> <p>(R) 1/14/2026: Outlined and updated the frequency of data collection and annual analysis.</p> |
|  | BSN                     |  |   |  |   |
| Fall 2025                                    | Jefferson City          | 11   | 10                                      | 90.9%                                    |   |
|  | BSN                     |  |   |  |   |
| Spring 2025                                  | Jefferson City          | 13   | 11                                      | 84.6%<br>(RH FA 25)<br>(RH and KO SP 26) |   |
|  | BSN                     |  |   |  |   |
| Fall 2024                                    | Jefferson City          | 17   | 12                                      | 70.59%                                   |   |
|  | BSN                     |  |   |  |   |
| Spring 2024                                  | Jefferson City          | 11   | 8                                       | 72.73%                                   |   |

|                    |                |    |    |        |   |
|--------------------|----------------|----|----|--------|---|
|                    | BSN            |    |    |        | <p>(R) 11/5/2025: Established NUR 225 as first nursing course based on ACEN visit and number of semesters. Updated to add student numbers with percentages.</p> <p>(M) 9/3/25: Faculty reviewed updated program completion data and determined that the benchmark had not been consistently achieved across reporting periods. Faculty discussed variability in cohort completion rates and the need to continue monitoring factors influencing student retention and progression.</p> <p>(D) Added goal for 100% completion; keep tracking 150% as well.</p> |
| <b>Fall 2023</b>   | Jefferson City | 19 | 12 | 63.15% |   |
|                    | BSN            |    |    |        |   |
| <b>Spring 2023</b> | Jefferson City | 13 | 8  | 61.54% |   |
|                    | BSN            |    |    |        |   |
| <b>Fall 2022</b>   | Jefferson City | 16 | 11 | 68.75% |   |
|                    | BSN            |    |    |        |   |
| <b>Spring 2022</b> | Jefferson City | 16 | 13 | 81.25% |   |
|                    | BSN            |    |    |        |   |

**5.3 Licensure/Certification Pass Rate**

**GOAL:** The program's most recent annual NCLEX licensure examination pass rate will be at least 80% for all first-time test-takers during the same 12-month period.

| <b>Data</b> (Aggregate; Disaggregate if applicable; include “n” values) |                                |                |  | <b>Annual Analysis/Actions</b>  |
|---|--------------------------------|----------------|--|---|
| Collect: Bi-annually (Spring/Fall)                                      |                                |                |  | (D) Development   |
| Analyze: annually   |                                |                |  | (M) Maintenance   |
|   |                                |                |  | (R) Revision  |
| <b>Academic Year</b>  | <b>Location/Program Option</b> | <b>n=value</b> | <b>Aggregate</b>   |   |
| Fall 2025- Spring 2026  | Jefferson City/BSN             | 11             | Fall 2025: 9/10 students passed on first attempt; 90%—1 student has not taken it; the student who did not pass on first attempt passed successfully on second attempt.; Spring 2026: | (M) 5/11/2026: Faculty reviewed updated NCLEX pass rate data and determined that the program continues to meet the established benchmark of at least 80% first-time pass rate. For Fall 2025, there were 11 program graduates. Of the 10 graduates who tested during the reporting period, 9 students passed on the first attempt. One graduate had not tested at the time of data review despite faculty outreach efforts following relocation out of the area. The one student who did not pass on the first attempt was successful on the second attempt. During follow-up discussion, the graduate reported limited utilization of Kaplan preparation resources prior to the initial testing attempt. Faculty identified NCLEX performance as a program strength and will continue monitoring pass rate data by semester and academic year. |
| Fall 2024-Spring 2025   | Jefferson City/ BSN            | 22             | <b>90.9%</b> = 20/22 students passed on first attempt (Fall 2024: 11/13 students passed on first attempt; 84.62%; Spring 2025: 9/9 students passed on first attempt, 100%)           | (R) 1/14/2026: Outlined and updated the frequency of data collection and annual analysis.<br><br>(M) 12/3/2025: Faculty reviewed available NCLEX pass rate data and determined that the program continued to meet the established benchmark. No changes were recommended at this time.  |
| Fall 2023-Spring 2024   | Jefferson City/ BSN            | 20             | <b>95%</b> =19/20 students passed on first attempt (add K.P. later in 2024); (Fall 2023: 13/14 students passed on first attempt, 92.8%; Spring 2024: 6/6                             | (M) 11/6/2025: Faculty reviewed NCLEX pass rate data and determined that the program continued to demonstrate strong first-time pass rate outcomes. Faculty agreed to continue monitoring data by semester and calendar year.   |

|                       |                     |    |   |   |
|-----------------------|---------------------|----|---|---|
|                       |                     |    | students, 100%)   | <p>(R) Fall 2025: Updated NUR 435 coursework to reflect the new Kaplan RN Prep Suggested Plan. Faculty implemented all Kaplan Trainer Exams 1–6 instead of only Trainers 4–6 to provide students with more exposure to NCLEX-style testing and remediation.</p> <p>(M) We will start to track data by semester and calendar year. Keep goal at 80%.</p> |
| Fall 2022-Spring 2023 | Jefferson City/ BSN | 20 | <p><b>95%</b>= 19/20 students passed on first attempt; (Fall 2022: 10/10 students, 100%; Spring 2023: 9/10 students, 90%)</p>   |   |
| Fall 2021-Spring 2022 | Jefferson City/ BSN | 36 | <p><b>77.78%</b>= 28/36 students passed on first attempt; (Fall 2021: 18/21 passed on first attempt, 85.71%; Spring 2022:10/15 passed on first attempt; 66.7%)</p>                    |   |
| Fall 2021-Spring 2022 | Jefferson City/ BSN | 26 | <p><b>80.77%</b>=21/26 students passed on first attempt; (Spring 2021: 11/14 students passed on first attempt; 78.57%; Fall 2020: 10/12 students passed on first attempt; 83.33%)</p> |   |

**5.3 Licensure/Certification Pass Rate (National)-** Missouri State Board of Nursing tracking requirements.

**GOAL:** The program's most recent annual NCLEX licensure examination pass rate will be greater than or equal to the national NCLEX licensure examination pass rate for all first-time, U.S.-educated test-takers during the same 12-month period.

| <p><b>Data</b> (Aggregate; Disaggregate if applicable; include “n” values)</p> <p>Collect: Bi-annually (Spring/Fall)</p> <p>Analyze: annually</p> |                         |                        |  | <p><b>Annual Analysis/Actions</b></p> <p>(D) Development</p> <p>(M) Maintenance</p> <p>(R) Revision</p>   |
|---|-------------------------|------------------------|--|---|
| Academic Year   | Location/Program Option | National NCLEX-RN Rate | Aggregate  |   |
| Fall 2025-Spring 2026   | Jefferson City/BSN      |                        | Fall 2025: 9/10 students passed on first attempt; 90%—1 student has not taken it; the student who did not pass on first attempt passed successfully on second attempt.; Spring 2026: | <p>(M) 5/11/2026: Faculty reviewed NCLEX-RN pass rate data and determined that the program continued to exceed the national NCLEX-RN pass rate benchmark across reporting periods beginning Fall 2022–Spring 2023. Waiting for the Spring 2026 test results.</p> <p>(R) 1/14/2026: Outlined and updated the frequency of data collection and annual analysis.</p> <p>(M) 9/3/25: Faculty reviewed updated NCLEX-RN national comparison data and determined that the program continued to exceed the national NCLEX-RN pass rate benchmark. Faculty identified NCLEX performance as a program strength and will continue monitoring.</p> <p>(D) 3/6/2024: Per vote in Outcomes meeting, second benchmark/goal added to align with what is displayed on BSN website under program outcome. While 80% remains the direct benchmark required by the Missouri State Board of Nursing, the additional benchmark allows faculty to monitor program performance against national NCLEX-RN pass rate averages.</p> |
| Fall 2024-Spring 2025   | Jefferson City/ BSN     | 87.6%                  | <b>LU Above=90.9%</b> = 20/22 students passed on first attempt (Fall 2024: 11/13 students passed on first attempt; 84.62%; Spring 2025: 9/9 students passed on first attempt, 100%)  |   |
| Fall 2023-Spring 2024   | Jefferson City/ BSN     | 91.9%                  | <b>LU Above=95%</b> =19/20 students passed on first attempt (add K.P. later in 2024); (Fall 2023: 13/14 students passed on first attempt, 92.8%; Spring 2024: 6/6 students, 100%)    |   |
| Fall 2022-Spring 2023   | Jefferson City/ BSN     | 88.56%                 | <b>LU Above=95%</b> = 19/20 students passed on first attempt; (Fall 2022: 10/10 students, 100%; Spring 2023: 9/10 students, 90%)   |   |
| Fall 2021-Spring 2022   | Jefferson City/ BSN     | 79.91%                 | <b>LU Below=77.78%</b> = 28/36 students passed on first attempt; (Fall 2021: 18/21   |   |
|   |                         |                        |  |   |

|  |  |  |  |  |
|--|--|--|--|--|
|  |  |  | passed on first attempt, 85.71%; Spring 2022:10/15 passed on first attempt; 66.7%) |  |
|--|--|--|--|--|

### 5.4 Job Placement

| Assessment Method(s)                                  |                | Frequency of Data Collection   |  |  | ELA   |
|---|----------------|--|--|--|---|
| Program Completion Survey;<br>Employment Verification |                | Collect: Bi-annually (Spring/Fall)<br><br>Analyze: annually (end of academic year) |  |  | <p><u>ELA:</u> 90% of the graduates will be employed in entry-level RN roles within 6 months of graduation.</p> <p><u>Rationale for ELA:</u> The program demonstrates evidence of graduates' achievement in job placement.</p>  |
| <b>Data</b> (Aggregate; Disaggregate if applicable)   |                |  |  |  | <p><b>Annual Analysis/Actions</b></p> <p>(D) Development<br/>(M) Maintenance<br/>(R) Revision</p>   |
| Semester  | # Of Graduates | # Of Graduates responding  | Job Placement Rate   | Response Rate                                | <p>(M/R) 5/11/2026: Faculty reviewed job placement data and determined that the benchmark has not been achieved since Spring 2023. Faculty discussed possible contributing factors including graduate relocation and individual graduate employment preferences. Faculty identified job placement as an area requiring continued monitoring.</p> <p><b>Action Plan:</b> Faculty will further review job placement data and document contributing factors related to students who did not meet the expected level of achievement.</p> <p>(R) 1/14/2026: Outlined and updated the frequency of data collection and annual analysis.</p> <p>(R) 1/5/2025: Change of assessment methods and wording of ELA following ACEN visit and recommendations.</p> <p>(M) 9/3/2025: Faculty discussed continued monitoring of employment trends and continuing to list external factors that may influence graduate job placement.</p> <p>(R) 2/7/2024: Faculty revised the expected level of achievement from 80% to 90% employment within six months of graduation based on review of historical graduate employment outcomes and program performance</p> |
| Spring 2026   | 11             | 11   | $9/11=81.8\%$<br>2 were exploring jobs                                   | $11/11=(100\%)$<br>Program completion survey |   |
| Fall 2025   | 11             | 11   | $8/11=72.7\%$<br>3 were exploring jobs/considering graduate school       | $11/11=(100\%)$                              |   |
| Spring 2025   | 9              | 9  | $7/9=77.78\%$<br>2 were relocating out of state                          | $9/9=(100\%)$                                |   |
| Fall 2024   | 13             | 11   | $11/13=78.57\%$<br>1 student was relocating out of state                 | $13/13=(100\%)$                              |   |
| Spring 2024   | 7              | 3  | $3/7=42.86\%$<br>C.H., N.M.; & A.R. by choice                            | $7/7=(100\%)$                                |   |
| Fall 2023   | 14             | 12   | $12/14=85.71\%$<br>C.D.by choice/traveling;<br>B.M. licensure challenges | $14/14=(100\%)$                              |   |
| Spring 2023   | 10             | 10   | $10/10=100\%$  | $10/10=(100\%)$                              |   |

|  |  |  |  |  |  |
|--|--|--|--|--|--|
|  |  |  |  |  | trends. Faculty also revised wording of the outcome measure to improve clarity and consistency of reporting. |
|--|--|--|--|--|--|

| <b>Physical Resources/Clinical Sites: (Missouri State Board of Nursing Requirement)</b> Physical resources and clinical sites enable the program to fulfill its mission, goals, and expected outcomes. Frequency of physical resources and clinical sites is reviewed periodically, and resources are modified as needed.   |   |   |
|---|---|---|
| <b>Assessment Method</b>  | <b>Frequency of Data Collection and Frequency of EPSLO Analysis</b> | <b>ELAs</b>   |
| (1) Physical resources<br>(2) Coordinating Council JC and Mid-Mo.<br>(3) Agency Contracts   | (1) Annually (August)<br>(2) Spring and Fall<br>(3) Annually        | (1) Review physical resources to verify that they are sufficient to meet program outcomes. Review budget allocations /expenditures, adequacy of facilities (classrooms, conference spaces, offices administrative space, lab space and equipment).<br>(2) Clinical site arrangements negotiated through Coordinating Councils.<br>(3) Review agency contracts and letters for completeness.   |
| <b>Data</b> (Aggregate; Disaggregate if applicable)   |   | <b>Analysis/Actions</b><br>(D) Development<br>(M) Maintenance<br>(R) Revision   |
| <p><b>Spring 2026:</b> Participated in Coordinating Council meetings on 4/15/2026 (MMESCC) and 4/21/2026 (JCCC) to support clinical placement coordination and maintain regional clinical partnerships. Planning continued for relocation to the new nursing building anticipated in Summer 2026 for instructional use beginning Fall 2026. Faculty explored additional community health clinical opportunities and agency contracts. FY27 budget requests were submitted to administration for review.</p> <p><b>Fall 2025:</b> Participated in Coordinating Council meetings on 10/14/2025 (MMESCC) and 10/20/2025 (JCCC). Clinical agency contracts were reviewed and updated as needed. Continued planning for transition into the newly constructed facility anticipated for Fall 2026.</p> <p><b>Summer 2025:</b> The nursing program was relocated to a temporary instructional location.</p> <p><b>Fall 2024:</b> Participated in JCCC and MMESCC meetings to coordinate and secure clinical assignments.</p> <p><b>Summer 2024:</b> JCMG clinical agency contract finalized and implemented.</p> |   | <p>(M/R) 5/11/2026: Faculty reviewed updated clinical placement resources, coordinating council participation, and physical resource needs. The BSN Coordinator participated in coordinating council meetings to support continued access to clinical placements and maintain collaborative relationships with regional clinical partners. Faculty identified ongoing regional competition for obstetric clinical placement opportunities. Faculty also reviewed physical resource needs related to the temporary relocation of program space during Summer 2025 and transition planning for relocation into the newly constructed facility anticipated in Summer 2026 for instructional use beginning Fall 2026. Budget requests and approvals related to program resources remain under institutional review and had not yet been returned to the Department Head at the time of review.</p> <p>(M) 9/3/2025: Faculty reviewed agency contracts, coordinating council participation, clinical placement availability, and physical resource needs. Faculty determined that current clinical partnerships and physical resources continued to support program delivery and student clinical experiences. Faculty continued monitoring clinical placement availability and resource needs due to increasing competition for clinical sites within the region (especially preceptorships).</p> |

|  |   |
|--|---|
| <p><b>Spring 2024:</b><br/>Participated in JCCC and MMESCC meetings to coordinate and secure clinical assignments. Agency contracts were reviewed. Program faculty explored development of additional clinical agreements with JCMG and CenterPointe. Program budget was reviewed, and requests for additional budget resources were submitted to the LU Budget Committee in March 2024.</p> | <p>(D) Spring 2024: Added review of physical resources, clinical site availability, coordinating council participation, and agency contracts as an ongoing measure to evaluate adequacy of resources and clinical placement support for program outcomes.</p> |
|--|---|

| <b>Faculty: (Missouri State Board of Nursing Requirement)</b> Faculty are sufficient in number to accomplish the mission, goals, and expected program outcomes; academically prepared for the areas in which they teach; and experientially prepared for the areas in which they teach.  |   |   |
|--|---|---|
| <b>Assessment Method</b>   | <b>Frequency of Data Collection and Frequency of EPSLO Analysis</b> | <b>ELAs</b>   |
| Workload Assignments   | Spring and Fall   | Workloads are reviewed and faculty profiles are analyzed in relation to course assignments.   |
| <b>Data</b> (Aggregate; Disaggregate if applicable)  |   | <b>Analysis/Actions</b><br>(D) Development<br>(M) Maintenance<br>(R) Revision   |
| <p><b>Spring 2026:</b> Faculty workload assignments reviewed. Adjunct clinical faculty utilization and availability reviewed. New full-time faculty member added (AG). Full-time faculty continued supporting instructional needs through willingly taking overload assignments. Administrative assistant left (end of March)—new one hired and left (beginning of May).</p> <p><b>Fall 2025:</b> Faculty workload assignments reviewed. Adjunct clinical faculty utilization and availability reviewed. One new adjunct faculty hired. Full-time faculty continued supporting instructional needs through willingly taking overload assignments. New BSN Coordinator assigned.</p> <p><b>Spring 2025:</b> Faculty workload assignments reviewed. Adjunct clinical faculty utilization and availability reviewed. Full-time faculty continued supporting instructional needs through willingly taking overload assignments.</p> <p><b>Fall 2024:</b> Semester workload assignments reviewed. Adjunct clinical faculty utilization and availability reviewed. Lab instructor hired. Full-time faculty continued supporting instructional needs through willingly taking overload assignments.</p> <p><b>Spring 2024:</b> Semester workload assignments reviewed. Adjunct clinical faculty utilization and availability reviewed. Temporary instructional coverage utilized during faculty leave period (maternity leave).</p> |   | <p>(M) 5/11/2026: Faculty reviewed updated workload assignments, adjunct faculty utilization, and instructional coverage needs. Faculty determined that program delivery continues to be supported; however, several full-time faculty continue teaching overload assignments to meet program needs. Adjunct clinical faculty continue to be utilized when available to assist with program coverage. Faculty also identified the need for administrative support role to be filled to assist with program operational responsibilities.</p> <p>(M) 9/3/2025: Faculty determined that current staffing patterns continued to support program delivery, although continued monitoring of workload distribution (especially prolonged overload) and adjunct faculty availability remained necessary.</p> <p>(D) Spring 2024: Added workload assignment review as an ongoing measure to evaluate adequacy of faculty resources, instructional coverage, and alignment of faculty expertise with course and clinical assignments.</p> |

| <p><b>Curriculum: (Missouri State Board of Nursing Requirement)</b> Baccalaureate curricula are developed, implemented, and revised to reflect relevant professional nursing standards and guidelines, which are clearly evident within the curriculum and within the expected student outcomes.</p>   |  |   |
|--|--|---|
| Assessment Method  | Frequency of Data Collection and Frequency of EPSLO Analysis | ELAs  |
| Ongoing curriculum review process or as stimulated by individual faculty course review and revision.   | SON Curriculum Meetings                                      | Individual course review process of content and outcomes by Departmental Curriculum Committee.  |
| <p><b>Data</b> (Aggregate; Disaggregate if applicable)</p>   |  | <p><b>Analysis/Actions</b><br/>                     (D) Development<br/>                     (M) Maintenance<br/>                     (R) Revision</p>  |
| <p><b>Spring 2026:</b> Courses mapped to the new NCLEX test plan. New clinical paperwork developed. Updated informational session documents and online resources. BSN course mapping documents and admission application materials updated.</p> <p><b>Spring and Fall 2025:</b> Faculty focused extensively on ACEN preparation and documentation review, resulting in several SON committee meetings being replaced with ACEN-focused work.</p> <p><b>Fall 2024:</b> Kaplan content mapped to curriculum with support from Kaplan representatives. Faculty reviewed Kaplan resources relevant to assigned courses and began integrating. Faculty continued test blueprint mapping activities. Plans established to incorporate NGN style questions into course unit examinations by Spring 2025.</p> <p><b>Spring 2024:</b> Curriculum mapping to the NCLEX blueprint initiated. Ongoing curriculum mapping activities aligned with university curriculum review initiatives.</p> |  | <p>(M/R) 5/11/2026: Faculty reviewed updated curriculum mapping activities and evaluated curriculum alignment with the new NCLEX test plan and current nursing education standards. Through the curriculum review process, faculty identified several gaps within the curriculum related to NCLEX content areas. Faculty determined that one identified gap will be addressed through implementation of a NUR 475 Postmortem Care Simulation experience, while additional identified areas were added to the SON Curriculum Committee agenda for further review and discussion during Fall 2026. Faculty also developed revised clinical paperwork to improve consistency across NUR 225, NUR 340, and NUR 400 clinical courses. Informational session documents, online informational session, BSN course mapping documents, and admission application materials were also reviewed and updated as part of ongoing program improvement.</p> <p>(M) 9/3/25: Faculty reviewed curriculum mapping activities, Kaplan integration efforts, and NCLEX alignment work. Faculty will continue evaluating curriculum and identifying areas requiring revision or additional support.</p> <p>(D) New measure added Spring 2024.</p> |