

**2021 ANNUAL ACADEMIC ASSESSMENT REPORT FORM
(Due October 15 to the dean)**

The Faculty Senate Academic Assessment Committee (AAC) is committed to a vision of assessment that leads to continuous program improvements and benefits students. Annual assessment reporting informs decision making and resource allocation aimed at improving student learning and success. It also enables the AAC to analyze assessment across the institution and to respond to UA System, Board of Regents, legislative, and Northwest Commission on Colleges and Universities (NWCCU) requests. We thank you for your continued support of and participation in this annual activity.

Starting in Spring 2021, UAA is moving to one academic assessment reporting mechanism. The below form merges and streamlines the former Annual Academic Assessment Survey and the Annual Academic Assessment Report. It also incorporates questions about how academic programs contribute to student achievement of institutional core competencies and to student success.

This annual report will be due to the dean on October 15. Programs with suspended admissions and new programs in the first year of implementation are not required to complete this form.

These reports are public documents and will be posted on the assessment website. Responses are to be narrative only, and must be ADA and FERPA compliant. Do not embed any links, including to webpages or other documents. To be FERPA compliant, do not include the names of any current or former students. Rather, use statements such as, "In AY21 four program graduates were accepted to graduate programs in the field." Programs with specialized accreditation or other external recognitions must comply with restrictions regarding what can be published, as per the accreditor or external organization. Do not include appendices. Appendices to this form will not be accepted.

The form uses narrative, text, and drop-down boxes. Narrative boxes have a character limit, which includes spaces. When using text and drop-down boxes, if you want to undo an answer, press "Control-Z" or "Command-Z."

For technical assistance with this form, email Academic Affairs (uaa.oaa@alaska.edu).

PROGRAM SECTION (Due to the dean on October 15)

After completing the Program Section, the program should email this form to the dean, with a copy to the appropriate community campus director(s) if the program is delivered on a community campus.

Submission date: 10/18/2021

Submitted by: Jill Janke PhD Graduate Program Chair

Program(s) covered in this report: Nursing Science MS, Family Nurse Practitioner GC, Nursing Education GC, and Psychiatric & Mental Health Nurse Practitioner GC

(Programs with suspended admissions and new programs in the first year of implementation are not required to complete this form.)

If you selected "Other" above, please identify. *(100 characters or less)*

College: College of Health

Campuses where the program(s) is delivered: Anchorage KOD KPC MSC PWSC

Specialized accrediting agency (if applicable): Accreditation Commission for Education in Nursing

If explanation is necessary, such as only some of the certificates and degrees are covered by the specialized accreditation, briefly describe:

INSTITUTIONAL STUDENT LEARNING CORE COMPETENCIES

In 2020, UAA launched a consensus-based, deliberative process to identify the key skillsets that help students achieve academic and post-graduation success. After a year-long process that included students, faculty, staff, administrators, alumni, and employers, the UAA community identified four "core competencies" at the heart of a quality UAA education. Students develop mastery of these competencies through curricular (e.g., courses), co-curricular (e.g., internships, conferences), and extra-curricular (e.g., student clubs) learning experiences.

After the stakeholder-based process in AY20, UAA conducted a pilot project focusing on the core competency of Personal, Professional, and Community Responsibility (PPCR). This decision was based on input from the 2020 Annual Academic Assessment Retreat.

Question #1 below is designed to engage program faculty in thinking about how they can or already do promote student learning in this core competency.

1. Personal, Professional, and Community Responsibility: The knowledge and skills necessary to promote personal flourishing, professional excellence, and community engagement.

- **What would you hope a student would say if asked where in your program or support service they had the opportunity to develop proficiency in this Core Competency? (500 characters or less)**

Students would indicate they had multidisciplinary exposure through several venues (clinicals, interprofessional collaboration, experts). This exposure builds both

professional and personal growth as they refine advance practice skills. Clinicals occur throughout Alaska and expose students to diverse communities and cultures. Professional growth is built upon throughout the program as they progress toward graduation.

- **Do you have an example that could be a model for the university of an intentionally designed course, assignment, or activity that showcases the student learning in this core competency?** Yes No

If yes, please briefly describe. (500 characters or less)

For the FNP and PMH-NP programs, professional growth begins with a White Coat Ceremony prior to clinicals. Professional Conduct and Evidence-Based Practice Guidelines are provided early in the program. Towards the end of the program professional CV, APRN applications, and other professional topics are covered.

- **Do you have any ideas about where your program or the university might develop other intentionally designed opportunities for students to develop proficiency in this core competency?** Yes No

If yes, please briefly describe. (500 characters or less)

We are having our students develop ePortfolio's to highlight their professional and personal growth throughout the program.

PROGRAM STUDENT LEARNING OUTCOMES

2. **Please list the Program Student Learning Outcomes your program assessed in AY21. For each outcome, indicate one of the following: Exceeded faculty expectations, Met faculty expectations, or Did not meet faculty expectations.**

Example: Communicate effectively in a variety of contexts and formats – Exceeded faculty expectations.

1. Engage in scholarly inquiry, including evaluation and application of evidence-based research to advanced nursing practice or leadership (exceeded faculty expectations).
2. Practice in a manner that incorporates ethical, legal, and professional standards for advanced nursing practice or nursing leadership (exceeded faculty expectations).
3. Collaborate across disciplines and in partnership with communities, groups, families and individuals through culturally sensitive practice (exceeded faculty expectations).
4. Demonstrate competence and caring in the professional nurse role to serve as a provider, leader, and educator in the health care system (exceeded faculty expectations).
5. Articulate a plan for self-directed, lifelong learning and professional development (partially met faculty expectations).

3. Describe your assessment process in AY21 for these program student learning outcomes, including the collection of data, analysis of data, and faculty (and other, e.g., advisory board) conversations around the findings. (750 characters or less)

In AY 21 we evaluated program learning outcomes (PSLOs) 1-5. We used several assessment measures: Final Clinical Course Evaluations (PSLOs 1-4), NSG A647 for Nursing Leadership students, NSG A663 for FNP students, and NSG A673 for PMH-NP students; Exit Survey (PSLOs 1-5), sent out at the end of the program; Certification Exam Pass rates for the FNP and PMH-NP students (PSLOs 1-4); Alumni Survey (PSLOs 1-5) sent out 12 months post-graduation. Results are discussed formally during a fall semester Graduate Program Council meeting; and informally with individual faculty and program coordinators. The Exit Survey and Alumni Survey use open ended questions, allowing students the opportunity to share ideas on strengths and weaknesses.

4. What are the findings and what do they tell the faculty about student learning in your program? (750 characters or less)

The benchmarks were exceeded for the Final Clinical Course evaluation: all FNP, PMHNP, & NLDR students passed. Exit Surveys for FNP had an 88.9% return rate (8/9); all benchmarks exceeded. The PMH-NP students had a 100% return rate (5/5) and all but one benchmark was exceeded [0% planned to pursue DNP education in next 5 years]. No Exit Surveys were returned for NLDR students. Certification Pass Rates are not official, they were obtained from an AK Professional License Search: among the Sp 21 grads 100% of the FNPs are licensed APRNs in AK; 60% of the PMHNPs are licensed APRNs in AK. The Alumni Survey for FNP had a 7/9 return rate (77.8%) and benchmarks were exceeded; both PMH-NP and NLDR had 0% return on Alumni Survey.

5. Based on the findings, did the faculty make any recommendations for changes to improve student achievement of the program student learning outcomes? Please describe the recommended action, what improvement in student learning the program hopes to see with this change, the proposed timeline, and how the program will know if the change has worked. If no recommendations for changes were made, please explain that decision. (750 Characters or less)

Due to the DNP re-accreditation visit, we delayed discussion of the MS/Cert Program Assessment outcomes. We have placed it on the agenda for our Nov. meeting. There are two items that need to be addressed. First, is a discussion on how to promote interest in pursuing the DNP. The second has to do with the PMH-NP certification pass rate. We know three students took the exam and are licensed in the state of Alaska. The other two may have gotten licensed outside of Alaska, or they may have taken and not passed the exam, or just not taken the exam. Either way we need to find out and not wait until the official report, which is generally sent in February. We have new faculty for the PMHNP program and we are reviewing the curriculum.

PROGRAM IMPROVEMENTS AND ASSESSING IMPACT ON STUDENT LEARNING

6. In the past academic year, how did your program use the results of previous assessment cycles to make changes intended to improve student achievement of the program student learning outcomes? Please check all that apply.

- Course curriculum changes
- Course prerequisite changes
- Changes in teaching methods
- Changes in advising
- Degree requirement changes
- Degree course sequencing
- Course enrollment changes (e.g., course capacity, grading structure [pass/fail, A-F])
- Changes in program policies/procedures
- Changes to Program Student Learning Outcomes (PSLOs)
- College-wide initiatives (e.g., High Impact Practices)
- Faculty, staff, student development
- Other
- No changes were implemented in AY21.

If you checked "Other" above, please describe. (100 characters or less)

7. Do you have any information about how well these or other past improvements are working? Are they achieving their intended goals? Please include any data or assessment results that help you demonstrate this. (750 characters or less)

We approved a standardized syllabus which was implemented this fall semester. This was done in response to student's comments about difficulty finding things. We will evaluate the effectiveness of the standardized syllabus at the end of fall semester. The same concern was voiced about BB shells and we have begun work on standardization of that as well. Last spring we decided to incorporate 'teaching tips' in at least one Graduate Program Meeting per month. To date we have had guests share high impact teaching techniques they are using in their courses. We have also scheduled a full-day Quality Matters workshop for the graduate faculty in November. The sharing has been well-received by faculty.

STUDENT SUCCESS AND THE CLOSING OF EQUITY GAPS

Programs are not required to respond to question #8 below for their report due on October 15, 2021. Question #8 will be required for the next round and moving forward.

8. Respond to at least one of the following metrics. Student success depends on many aspects of a student's experience. On the academic program level, it can relate to correct placement, course sequencing, standardized pre-requisites, the intentional use of high impact practices, proactive advising, course scheduling practices, etc. UAA is using the following two metrics in its cyclical Program Review process, as well as in its reaffirmation of accreditation process. These data are included in the most recent IR-Reports Program Review dashboard. Please review these data for your program, note any equity gaps, and describe steps you are taking or plan to take to close those gaps.

Metric	Definition	Rationale
JUNIOR GRADUATION RATE - BACCALAUREATE	The percentage of students who graduate with a bachelor's degree within four years of first reaching junior class status (60 credits). <i>Data source: RPTP end-of-term freeze files. Disaggregate as per accreditation.</i>	Junior graduation rate (after 60 credits) can reflect a department's success in helping students complete their degrees. Within their first 60 credits, students typically focus on completing GERs and often switch majors. Tracking how long it takes students to complete their degrees after 60 credits, when many students have likely committed to a specific major, can provide actionable information for departments.
COURSE PASS RATES BY COURSE LEVEL (Undergraduate lower-division, undergraduate upper-division, and graduate).	The percentage of students who receive a passing grade (A, B, C, P) for all undergraduate students and (A, B, P) for graduate students in a course offered by a program compared to the same rate calculated for all courses at that level. Based on a 5-year trend. Included in the denominator for undergraduate courses are the grades D, F, W, I, NP, NB. Included in the denominator for graduate level are the grades C, D, F, W, I, NP, NB. Discipline acts as a proxy for a program. <i>Data source: RPTP end-of-term freeze files. Disaggregate as per accreditation.</i>	Low pass rates are one critical way to identify courses that are barriers to student success and degree completion. Failing key courses correlates with low retention and more major switching. Mitigation strategies can be internal or external to the course itself, including, among other things, the use of high-impact pedagogical practices, appropriate placement, course sequencing, tutoring, and other means to ensure student success within a particular course. This metric and the disaggregation of the data can inform planning, decision making, and the allocation of resources to programs and services designed to mitigate gaps in achievement and equity.

9. **Do you have any examples of post-graduate success you want to highlight? For example, major scholarships, the percent of students who pass licensure examinations, the percent of students accepted to graduate programs, the percent in post-graduation employment in the field or a related field. (750 characters or less)**

Seventy-five to eighty percent of our students stay and practice in the State of Alaska after graduation and passing the professional certification exam. One hundred percent of our graduates are employed in nursing.

DEAN SECTION (Due to the program on January 15)

After completing the Dean Section and signing it, the dean should email this form to the program, and copy uaa_oaa@alaska.edu for posting. If the program is delivered on one or more community campus, the dean should consult with the appropriate community campus director(s) on the response and copy the appropriate community campus director(s) when emailing the response to the program.

1. **Based on the program's responses above, what guidance and support do you have for the program moving forward? Is there a particular area the program should focus on? (750 characters or less)**

The program is commended for using a variety of formative/summative and qualitative/quantitative assessment measures. It is also appreciated that the program has had one of the focus areas being on licensing and practice in the state of Alaska since that is a critical need. As the program looks for strategies to meet the goal of more graduates pursuing doctoral level nursing education, it is encouraged to look at the full continuum of nursing education within the School of Nursing and how that meets current or emerging professional standards, Alaska workforce needs, and student needs and expectations. Sustainability of graduate nursing programs will also be an important consideration.

2. **Is there something the program is doing particularly well in terms of its processes for the assessment and improvement of student learning, including the closing of equity gaps, that might serve as a model for other programs? If yes, please explain. You may skip this question. (750 characters or less)**

Dean's signature:



Date: 1/14/2022