



MONTANA
STATE UNIVERSITY

College of
NURSING

**Self-Study Report
Baccalaureate and Master's Degree Programs**

**Submitted to:
The Commission on Collegiate Nursing Education and
The Montana State Board of Nursing
August 2008**

Mountains & Minds

PROGRAM INFORMATION FORM
Commission on Collegiate Nursing Education
One Dupont Circle, NW, Suite 530
Washington, DC 20036-1120

GENERAL INFORMATION

Official Name of Institution: Montana State University

Type of Institution (**circle one**): **XX** public private, secular private, religious proprietary

Institution's Carnegie Classification: Research University with very high research activity

Chief Executive Officer of Institution: Dr. Geoffrey Gamble, President

Official Name of Nursing Unit: College of Nursing

Chief Nurse Administrator: Elizabeth G. Nichols, DNS, RN, FAAN, Professor and Dean

Address: 115 Sherrick Hall, Montana State University, P.O. Box 173560

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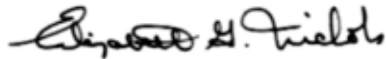
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Signature:



Chief Nursing Administrator

6-27-08

Date

ACCREDITATION AND APPROVAL

Institutional Accreditation:

INSTITUTIONAL ACCREDITOR <i>(identify agency name)</i>	LAST REVIEW <i>(year)</i>	NEXT SCHEDULED REVIEW <i>(year)</i>
Northwest Commission on Colleges and Universities	1999	2009

Specialized Accreditation:

SPECIALIZED ACCREDITOR	LAST REVIEW <i>(year)</i>	NEXT SCHEDULED REVIEW <i>(year)</i>
American Association of Nurse Anesthetists	NA	NA
American College of Nurse Midwives	NA	NA
Commission on Collegiate Nursing Education	BSN1998-99	BSN 2008-09
	MSN 1998-99	MSN 2008-09
National Association for Nurse Practitioners in Reproductive Health	NA	NA
National League for Nursing Accrediting Commission	BSN 1991	BSN NA
	MSN 1991	MSN NA

State Board of Nursing Approval:

Name of applicable state board of nursing: Montana Board of Nursing

NURSING PROGRAM APPROVED	LAST REVIEW <i>(year)</i>	NEXT SCHEDULED REVIEW <i>(year)</i>
Baccalaureate program	2001	2008
Master's program	NA	NA
DNP Program	NA	NA

Add any relevant comments regarding accreditation and approval:

None

NURSING PROGRAM INFORMATION

Degree Programs Offered, Student Data:

Identify all baccalaureate and master's degree tracks offered by the nursing unit. For each track, list current enrollment data, as well graduation data for the previous academic year. For the baccalaureate program, include only nursing students (not pre-nursing students).

NURSING PROGRAM <i>(identify all tracks)</i>	NUMBER OF STUDENTS ENROLLED	NUMBER OF GRADUATES
Baccalaureate Program	368	170
Generic		
RN		
Other <i>(specify)</i> LPN to BSN	0	0
Totals:	368	170
Master's Program <i>(Identify tracks offered)</i>		
Family Nurse Practitioner	45	13
Clinical Nurse Specialist	2	0
Clinical Nurse Leader	16	1 = Summer 2008
DNP Program <i>(Identify all tracks offered)</i>	NA	NA
Totals:	63	14

Identify any post-master's certificates offered by the nursing unit: Family Nurse Practitioner and Graduate Certificate in Nursing Education

Identify any doctoral degree programs (in addition to the DNP program) offered by the nursing unit:
None

Identify any joint degree programs in nursing offered with any other unit at your institution (e.g., MSN/MPH with the School of Public Health): None

NCLEX-RN Pass Rates for the Last Three Academic Years:

Academic Year	Number of Students Taking NCLEX-RN for First Time	NCLEX-RN Pass Rate for First Time Test Takers
2005-06	137	88.32%
2006-07	192	93.23%
2007-08	172	91.86%

Academic Year	Certification Exam	Number of Students taking Exam for the First Time	Certification Pass Rate for First Time Test Takers
2005-06	FNP	Summer 05 –Spring 06 = 14	100
2006-07	FNP	Summer 06 – Spring 07 = 9	100
2007-08	FNP	Summer 07- Spring 08 = 13	
2005-06	CNS - adult	1	100
2006-07	CNS - adult	2	100
2006-07	CNS - adult	2	100
2006-07	CNS-community	1	100

Nursing Program Faculty:

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

# FULL-TIME	# PART-TIME	TOTAL # FACULTY
53	31	84

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

FULL-TIME FTE	PART-TIME FTE	TOTAL FACULTY FTE
37	14.1	51.1

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

FULL-TIME FTE	PART-TIME FTE	TOTAL FACULTY FTE
6	0.1	6.1

Identify the faculty full-time-equivalent (FTE) currently devoted to **BOTH** degree programs:

FULL-TIME FTE	PART-TIME FTE	TOTAL FACULTY FTE
10	2.35	12.35

***This count includes the dean, associate deans, and four campus directors. It does not include the contract to the University of Montana for three 1 credit pharmacology courses, two clinical supervisors provided by the hospitals in Billings, nor graduate teaching assistants.**

Additional Campuses/Sites:

Identify any additional campuses/sites where the nursing degree program is offered, the distance from the main campus, and the average number of nursing students currently enrolled at each location.

CAMPUS/SITE <i>(City, State)</i>	DISTANCE FROM MAIN CAMPUS <i>(in miles)</i>	# STUDENTS ENROLLED	
		BSN	MN*
Billings, Montana	143	160	11
Great Falls, Montana	184	65	17
Missoula, Montana	201	95	19
Kalispell, Montana	291	16	n/a
Bozeman, Montana	0	32	17

***Does not include non degree students (5)**

Distance Education:

Does your nursing unit currently offer curricula (or any part thereof) via distance education (i.e., alternative modalities, including distance-mediated modalities, other than traditional classroom style)?

baccalaureate program (circle one): **XX** yes no not applicable

- Please provide a brief (one paragraph) description of the distance learning offerings at the baccalaureate level: **SEE ATTACHED PAGE**

master's program (circle one): **XX** yes no not applicable

- Please provide a brief (one paragraph) description of the distance learning offerings at the master's level: **SEE ATTACHED PAGE**

DNP program (circle one):

yes no **XX** not applicable

- Please provide a brief (one paragraph) description of the distance learning offerings at the DNP level:

Description of distance learning offerings at the baccalaureate level

Distance learning is used in several ways within the baccalaureate program:

1. All of the didactic content delivery to Kalispell is done by distance from the Missoula campus. Faculty on-site in Kalispell provide in-person clinical instruction, however, theory instruction is done over the Polycom and MetNet systems (real-time interactive video).
2. Some components of courses are shared across one or two campuses; for example, the theory component of N437, Psychiatric Nursing, is taught to both Bozeman and Great Falls students by a faculty member in Great Falls. In the fall, the theory component of N239, Health Assessment Across the Life Span is taught to all sites from Bozeman. In spring of 2008, the theory component of N348, Nursing Care of Childbearing Family, was taught to the Bozeman students by a faculty member in Billings. All of these courses used the Polycom system (real-time interactive video).
3. Some courses are taught only on-line. For example, N115, Nursing as a Profession, and N224, Pathophysiology, are taught on-line three times a year; N220, Foundations of Ethical Nursing Practice, is offered on-line to students on the distant campuses during summer session and to Bozeman students in both spring and fall. These courses use the WebCT course management system.
4. Some courses are taught either on-line or in-person depending upon the campus. For example, N418 is taught on-line on the Bozeman campus using WebCT. It is offered in a face-to face manner on the other campuses.

Description of distance learning offerings at the master's level

All of the courses in the master's program are offered through distance methods. Students are required to attend an initial orientation session in Bozeman. This session covers a broad array of information about the program and the various resources available to students – both for distant course delivery and the general resources for graduate students. Faculty members use a variety of instructional approaches depending on which fits most appropriately with the course, the content, their teaching style, and the learning style of the students. Modalities used include: WebCT, telephone conferencing, and Polycom interactive sessions. Clinical instruction is done with on-site preceptors and local faculty supervisors.

SELF-STUDY OF THE
BACCALAUREATE AND MASTER'S DEGREE PROGRAMS IN NURSING
AT
MONTANA STATE UNIVERSITY
COLLEGE OF NURSING

SUBMITTED AUGUST 2008 TO:
THE COMMISSION ON COLLEGIATE NURSING EDUCATION
AND THE MONTANA STATE BOARD OF NURSING
FOR ON-SITE VISIT: October 6-8, 2008

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Introduction

Montana is a large rural state with a land mass of 145,552 square miles and a population (2006 estimate) of 944,632 inhabitants. The population density is 6.2 persons per square mile, thus qualifying much of the state as frontier. The residents of Montana are predominantly white (91.1%) with two significant minority groups: American Indians (6.5%) and a growing population of individuals of Hispanic descent (2.4%). Most of the counties in the state are designated health professions shortage areas. The majority of the population lives along the I-90 corridor extending from Billings to Missoula. The fastest growing areas of the state are Gallatin County (Bozeman), Ravalli County (south of Missoula) and Flathead County (Kalispell-Whitefish). The top three industries in the state by gross domestic product are: wholesale, retail, trade, transportation & utilities; government and government enterprises (including public education); and financial activities.

Montana State University (MSU), located on 1170 acres in Bozeman in the Gallatin Valley, was founded in 1893 as the Agricultural College of the State of Montana, the state's land-grant institution. In 1913, the college was renamed The Montana College of Agriculture and Mechanic Arts and was popularly known as Montana Agricultural College, or MAC. In 1920s the institution's name was changed to Montana State College and so it remained until July 1, 1965, when, in recognition of the enormous advances in the college's commitment to scientific and humanistic research, the legislative assembly changed the name to Montana State University. On July 1, 1994, the Montana Board of Regents of Higher Education restructured the state's colleges and universities into two umbrella universities, Montana State University (MSU) and the University of Montana (UM) within a single system, The Montana University System. Montana State University in Bozeman is the flagship campus for the MSU group. Campuses affiliated with MSU are: Montana State University-Billings, Montana State University-Northern, and Montana State University-Great Falls College of Technology.

Montana State University has a national and international reputation for its excellence in undergraduate and graduate education in the liberal arts and sciences, agriculture, architecture, education, engineering, health and human development, and nursing. MSU offers baccalaureate degrees in 51 fields, master's degrees in 42 fields, doctoral degrees in 18 fields and a specialist degree in education.

The university enrolls approximately 12,000 students and has 802 instructional faculty members, for an overall student-faculty ratio of 16 to 1. MSU is an institution committed to making history by better positioning today's students for meaningful lives in the globalizing economy of the 21st century. In 2006, MSU was classified by the Carnegie Foundation as a research university with very high research activity. MSU has been accredited by the Northwest Commission on Colleges and Universities since 1932.

The College of Nursing, founded in 1937, is one of seven academic colleges within MSU. It is the only publicly supported basic baccalaureate nursing program in Montana and is the largest supplier of baccalaureate prepared nurses in the state. It is Montana's sole provider of graduate nursing education. Master's level options lead to preparation as a family nurse practitioner, a clinical nurse specialist and a clinical nurse leader. There is a post-master's certificate program for family nurse practitioner and a graduate level certificate in nursing education. The college has had a strong tradition of education and research with a focus on rural populations and theory development for rural nursing.

Since its inception, the College of Nursing has been a multi-campus program, making effective use of educational and clinical resources in the state. The college's administration is located on the main campus in Bozeman, where many baccalaureate students complete lower division nursing requirements. Students complete the upper division component of the program at one of the upper division campuses: Billings, Bozeman, Great Falls, Kalispell, or Missoula. Numbers of students are limited (and differ) on each campus. The communities that house the upper division component of the curriculum have health care facilities that provide the degree of complexity, size, and diversity of patient population needed for upper division clinical experience. While lower division nursing courses are available on all sites, these offerings on campuses other than the Bozeman campus are limited in size and require students to pay an additional distance delivery fee. Each of the college's campuses has resident faculty who serve both baccalaureate and master's students.

The master's program is offered through distance methods statewide; however, students are assigned to a local campus for advising and any required interactive video course meetings. Master's courses are taught using interactive video, teleconferencing, and a Web based learning management system (WebCT).

In 2007, the College of Nursing in cooperation with the Division of Health Sciences received funding for a Montana Area Health Education Consortium (AHEC).

Prior to this time, the Montana AHEC office was a regional unit of the University of Washington AHEC.

The college has been continuously accredited since 1949. From 1949 through 1998, the college was accredited by the National League for Nursing accrediting arm. In 1997, the college decided to seek accreditation from the Commission on Collegiate Nursing Education (CCNE), and was the first program to be site visited by CCNE. The programs received full accreditation in Spring 1999. A continuous improvement report on the college was submitted to CCNE in December 2003, and accepted by the CCNE Board at its April 2004 meeting. At that time, the Board determined that MSU College of Nursing continued to meet all accreditation standards and no recommendations or suggestions were communicated to the college.

STANDARD I. PROGRAM QUALITY: MISSION AND GOVERNANCE

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

I-A. The mission, goals, and expected outcomes of the program are written, congruent with those of the parent institution, and consistent with professional nursing standards and guidelines for the preparation of nursing professionals.

The mission and goals of the College of Nursing are congruent with those of Montana State University. A table showing congruence between the two missions follows.

Table I-1: Mission Statements. Montana State University and College of Nursing

<i>Montana State University</i>	<i>College of Nursing</i>
To provide a challenging and richly diverse learning environment in which the entire university community is fully engaged in supporting student success.	The mission of the Montana State University College of Nursing is to provide leadership for professional nursing through excellence in education, research, and service. Inspire baccalaureate and graduate students within a diverse, challenging, and engaging learning environment to become leaders in the practice of professional

<p>To provide an environment that promotes the exploration, discovery, and dissemination of new knowledge.</p> <p>To provide a collegial environment for faculty and students in which discovery and learning are closely integrated and highly valued.</p>	<p>nursing.</p> <p>Explore, discover, and disseminate new knowledge related to nursing and health care.</p> <p>Create an interactive environment in which faculty and students integrate discovery, learning, and the application of knowledge into nursing practice.</p>
<p>To serve the people and communities of Montana by sharing our expertise and collaborating with others to improve the lives and prosperity of Montanans.</p>	<p>Promote the health of Montanans and the global community through collaboration, sharing of expertise, civic engagement, and leadership in the profession.</p>

As the mission of the college is consistent with that of the university, so are the strategic goals/directions.

Table I-2 Strategic Goal Statements

<i>Montana State University</i>	<i>College of Nursing</i>
<p>Recruitment...emphasis will be placed on enhancing student recruitment efforts, expanding the graduate student population, increasing student scholarships and fellowships at both the undergraduate and graduate levels, and increasing access to university programs both on campus and throughout the state.</p> <p>Retention. ...emphasis will be placed on improving the university's overall rate of retention, fulfilling student interests/preferences for specific academic programs, sustaining increased enrollment, and recognizing enrollment growth in</p>	<p>Recruit and graduate a full complement of high quality, diverse undergraduate and graduate students.</p>

<p>specific academic programs.</p> <p>Quality Enhancements...emphasis here will be on sustaining and enhancing the quality of our academic offerings; supporting the development, retention, and recruitment of high quality, dedicated faculty, staff, and administrators; and sustaining and enhancing the quality of our physical and technological infrastructure.</p> <p>...to sustain and enhance programs that address issues of Montana's traditional industries, contribute to the development of knowledge- and technology-based industries, and contribute to the state's need for well-educated citizens who can participate and lead in an increasingly knowledge-based, technology dependent global economy....</p>	<p>Promote and support high quality human resources for the College of Nursing.</p> <p>Improve research and instructional facilities of the College of Nursing.</p> <p>Offer baccalaureate and graduate curricula that are consistent with national trends in professional nursing education.</p> <p>Enhance the research and scholarly productivity of the CON.</p>
<p>...to increase both public- and private-sector support for higher education, and fosters the growth of beneficial partnerships within the MUS, with the public sector, and with the private sector</p>	<p>Expand interdisciplinary and collaborative activities within and beyond the university.</p> <p>Enhance development and marketing to support the goals of the College of Nursing.</p>

Montana State University is a land grant institution. As such it is charged, through the Morrill Act of 1862, to provide "liberal and practical education...in the several pursuits and professions of life." As a member of the Montana University System, MSU is further charged with providing programs that "stimulate critical analysis, clear and effective communication, and the creative process." Students should also "broaden their cultural horizons by contact with the creative arts, sciences and the humanities, and achieve an understanding of the political, social, economic and ethical problems of the contemporary world and the relation of their studies to these problems." (<http://www.montana.edu/wwwcat/requirements/reqs4.html>) These expectations are met

through a combination of common core curriculum, known as Core 2.0¹, and disciplinary study. Core 2.0 courses emphasize communication and techniques of creative inquiry in a variety of disciplines.

The expected outcomes of the baccalaureate and masters programs in nursing presented below are consistent with the overall charge to Montana State University.

At the completion of the BSN program, the student will be able to:

1. Utilize a foundation of community-based nursing to provide client-centered health care.
2. Synthesize theoretical and empirical knowledge from nursing, the sciences, the arts and the humanities to practice safe and effective professional nursing.
3. Apply principles of critical thinking in professional decision making.
4. Evaluate the applicability of research findings in evidence-based nursing practice.
5. Utilize evidence-based clinical judgments to assist clients with the promotion, maintenance and restoration of health; prevention of disease and death with dignity.
6. Incorporate professional values of altruism, autonomy, human dignity, integrity and social justice and value-based behaviors into nursing practice.
7. Employ legal and ethical principles in the practice of professional nursing.
8. Assume responsibility for career development and participation in life-long learning.
9. Utilize effective communication in professional relationships with clients in order to influence health and healing over time.
10. Utilize progressive technology and information systems to support nursing practice and deliver client care.
11. Collaborate with communities to design, implement, and evaluate population-based approaches to care.
12. Provide culturally sensitive direct and indirect care for clients across a variety of settings.
13. Participate as a member of the nursing profession.

The expected outcomes for the master's program are:

¹ For a description of Core 2.0, see Standard III, Key element III-C

1. Contribute to the development of nursing knowledge, practice, and health care delivery in rural areas.
2. Participate in the nursing research process which expands nursing knowledge, improves nursing care and directs health policy and planning.
3. Provide nursing leadership in the evolution and evaluation of rural health care systems.
4. Manage health of clients in environments characterized by limited health resources.
5. Design nursing care based on theory and research for individuals, families and communities in rural areas.

In addition to these overall outcomes, there are specific expected outcomes for each of the options within the master's degree program. These option outcomes are more fully described under Standard III, Curriculum.

Professional nursing standards and guidelines utilized in the program options:

Professional nursing standards and guidelines as listed below are utilized in the development and periodic review of the baccalaureate and master's programs. To ensure consistency with current professional standards, faculty review and compare the curriculum and the expected outcomes when new versions of these standards are published.

Bachelor of Science in Nursing program

- American Association of Colleges of Nursing. (1998). *The Essentials of Baccalaureate Education for Professional Nursing Practice*. Washington, DC: Author.

Master of Nursing program

- American Association of Colleges of Nursing. (1996). *The Essentials of Master's Education for Advanced Practice Nursing*. Washington, DC: Author.

Family Nurse Practitioner (FNP) option

- National Task Force on Quality Nurse Practitioner Education. (2002). *Criteria for evaluation of nurse practitioner programs*. Washington, DC: Author.
- National Organization of Nurse Practitioner Faculty. (2002) *Nurse Practitioner Primary Care Competencies: FNP Curriculum*. Washington, DC: Author.

Adult Health Clinical Nurse Specialist (CNS) option

- National Association of Clinical Nurse Specialists. (2004). *Statement on Clinical Nurse Specialist Practice and Education*. Harrisburg, PA: Author.

- American Nurses' Association. (2004). *Scope and standards of advanced practice registered nursing*. Washington, DC: Author

Clinical Nurse Leader (CNL) option

- American Association of Colleges of Nursing. (February 2007). *White paper on the education and role of the clinical nurse leader*. Washington, DC: Author.

Certificate Programs

Certificate in Nursing Education

- National League for Nursing Task Force on Nurse Educator Competencies. (2005). *Core competencies of nurse educators with task statements*. Washington, DC: National League for Nursing.

Post Master's Certificate in Family Nurse Practitioner

- This option is based on the same set of specialty documents as is the master's level program.

I-B. The mission, goals, and expected outcomes of the program are reviewed periodically and revised, as appropriate, to reflect professional standards and guidelines.

The mission, goals, and expected outcomes of the program are codified in the college's policy manual. As college policies, these documents are reviewed every 5 years; although policies can be revised at any time it is deemed appropriate or necessary. The mission of the college was updated in Spring 2008, and the vision is currently under review.

The strategic goals of the College of Nursing were developed in the 2004-2005 academic year based on a review of the previous strategic plans/goals and the university's strategic planning document. The current strategic goals mandate that the College of Nursing offer curricula that are current and professional. Strategic direction #3 states: Offer baccalaureate and graduate curricula that are consistent with national trends in professional nursing education. See Appendix A for the entire set of strategic goals.

The baccalaureate curriculum was developed using the 1998 edition of *The Essentials of Baccalaureate Education for Professional Nursing Practice*. The Essentials document is currently under revision by the AACN. Once the revision is finalized, the expected outcomes of the program will be examined to ensure that they reflect the current thinking about preparation for nursing practice as reflected in the new

document. Similarly, the master's program options were developed using the standards that existed at the time of program development. As the guiding documents have been updated, the faculty has looked to the new versions to ensure appropriate expected outcomes and curriculum content.

I-C. The mission, goals, and expected outcomes of the program are reviewed periodically and revised, as appropriate, to reflect the needs and expectations of the community of interest.

The community of interest has both external and internal constituents. The external constituents include the clinical agencies, employers, and professional nursing organizations. Input is received from these communities of interest in several ways. For example, as a part of the strategic planning process, the proposed strategic goals were reviewed and shared with the college's advisory council that includes representatives from health care agencies, faculty, representatives from Montana professional groups, and a health care consumer. At each meeting of the advisory council the associate deans provide updates of the existing programs and proposals for new offerings are shared. For example, when faculty began to consider offering a CNL option, the ideas for this offering were brought to the advisory council to determine whether this program would meet a need for nurses with advanced preparation in this rural state. The revised mission statement was presented and discussed with this council. Two further examples of the college's responsiveness to the external community of interest are the expansion of the baccalaureate nursing program, both in actual numbers of upper division students and numbers of sites in which the program is delivered. The college now offers baccalaureate education in five sites: Billings, Bozeman, Great Falls, Missoula and Kalispell. Most recently, upon the request of mental health care providers in the Missoula area and consistent with state-wide need data, the college has begun the development of a proposal for a (master's) psych/mental health nurse practitioner option. The master's program has always been considered a state-wide program, however, the change to a completely distance delivered program was made to meet the needs of the prospective and current students and the needs of the health care constituency across the state.

Review of the appropriateness of the expected outcomes is accomplished through evaluation of the graduates by the employing community and through formal and informal discussions with the clinical agencies and employers. An additional avenue

of feedback from the employing community is the EBI employer survey. Unfortunately, while the employer assessments are very positive, they are not as helpful as we would like because of the small number of respondents. This aspect of program evaluation will be discussed in greater detail in Standard IV.

The internal constituents include the university and college communities such as students, faculty, staff, and administration. The university expects colleges/departments to review and revise mission and goals documents to maintain consistency with the university documents. For example, when the university last reviewed/revised its strategic goals/priorities, each college/department was asked to review and revise their goals/directions for congruency. At the campus level, mission and goal statements for each academic unit (called Role and Scope) are reviewed as a part of the review of the retention, promotion and tenure process. Within the college there was widespread discussion in the process of revising the mission statement and in the development of the most recent strategic directions document. Student input is received through surveys completed by graduating seniors and through communication with the Student Forum (see I-D for a discussion of Student Forum). Campus directors, the associate deans and the dean all welcome direct student input.

I-D. Roles of the faculty and students in the governance of the program are clearly defined and enable meaningful participation.

Montana State University and the College of Nursing have a strong tradition of shared governance. Faculty, staff, administrators, and students participate in the decision making within the college and the university. The bylaws of the college and the table of organizational structure clearly show the lines of communication and the roles of faculty and students in the governance of the nursing programs. (See Appendix B for the organizational chart). The central unit of faculty governance within the college is the Faculty Organization whose major responsibilities are to facilitate the mission of the College of Nursing, enhance communication among the faculty, and to make recommendations to the dean. The faculty has major responsibility for academic affairs and College of Nursing policy. All members of the faculty who are at least .5 FTE for a whole year are voting members of the organization; other members may have voice, but not vote. The Faculty Organization, chaired by an elected faculty member, meets at least three times a semester. There are ten permanent committees: Executive Council; Nursing Formal Review; Search; Nominating; Bylaws; Undergraduate Academic Affairs;

Graduate Academic Affairs; Faculty Affairs and Faculty Development Subcommittee; Scholastic Committee and the Scholarship Committee.

Staff have input to the Faculty Organization through their representative on the Executive Council, a standing committee that is chaired by the dean and comprised of the assistant to the dean, the four campus directors, the associate deans, the chair of the faculty organization and four elected faculty members. This group provides advice and consultation to the dean, and is empowered to act on behalf of the faculty when the faculty is not available.

The student role on committees is specified in the bylaws, for example, students have voice, but not vote, on the Graduate Academic Affairs Committee and the Undergraduate Academic Affairs Committee. Though the governance structure clearly includes students on committees it is sometimes difficult for students to participate in these committee meetings due to other responsibilities such as their academic schedule, employment, and family. Because of the difficulty in getting students to participate in the governance structure of the College of Nursing, faculty also use the Nursing Student Forum (a student governance structure) to share and obtain feedback about such things as curricular and other policy or procedural changes. The bylaws and policies are available to all on the CON Web site.

I-E. Documents and publications are accurate. Any references in promotional materials to the program's offerings, outcomes, accreditation/approval status, academic calendar, admission policies, grading policies, degree completion requirements, tuition, and fees are accurate.

Accuracy and currency of materials specific to the College of Nursing, including accreditation /approval status are the responsibility of the college. College of Nursing policies are assigned to the various standing committees and have a five-year review schedule. Each policy includes a review date. As various policies, including admission and grading policies, are updated they replace the outdated policies on the college's Web site. Policy changes that affect students are brought to the student's attention through a variety of means, depending upon the particular policy. Changes in admission policies are included in the material sent to students in application for upper division or on the graduate applications for master's students. For example, a relatively new policy regarding *Abilities Required for Success in the Baccalaureate Program* was made known to students in the application process as well as on the Web site as was the new

requirement for criminal background check clearance before entering clinical courses. The Student Forum is another mechanism for sharing and discussing policy changes. For example, when the college proposed changing from clinical course fees to program fees, consultation and support was sought from Student Forum. Policies, procedures, and general information such as accreditation status are posted on the Web site and are available to any Web site visitor. Syllabi for each course contain grading information.

College specific promotional brochures, publications, and displays are prepared by the college staff and are modified as appropriate to ensure accurate and current information. The College of Nursing maintains information about its various programs and requirements on its Web site: www.montana.edu/wwwnu/academic/index.htm. Information that pertains to the university as a whole, for example, the academic calendar, tuition and fee information is maintained by the Montana State University and the Montana State University System Web masters. Fees are reviewed annually by the campus as a whole and any changes or additions must be approved by the Board of Regents. Tuition is set by the Board of Regents.

Requirements for degree completion are published in the Montana State University Course Bulletin. This document is published biannually in hard copy and is available on the university Web site. The Web site catalog is updated annually. The university's official communication mechanism with students is through MyMSU, the MSU portal.

I-F. Policies of the parent institution and the nursing program are congruent with and support the mission, goals, and expected outcomes of the program; these policies are fair, equitable, published, and are reviewed and revised as necessary to reflect ongoing improvement. These policies include, but are not limited to, those relative to student recruitment, admission, and retention.

All university and college policies are published and available on the MSU Web site and some are in the university course bulletin as well. University and College of Nursing policies are congruent with each other and support the mission, goals, and expected outcomes of the program. For example, the university grading policy allows for +/- grading at the discretion of the faculty. In keeping with that institutional policy, the College of Nursing changed its policy from not permitting +/- grades to allowing individual nursing faculty to decide if he or she wants to use +/- grades or not. Faculty

members are required to include the grading system used in the course in the course syllabus.

Recruitment/Admission. The university does not have policies specific to recruitment (other than those specified for recruitment of student athletes); however, the philosophy of the university is to recruit students who have the ability to be successful in their chosen major. The College of Nursing recruiting activities focus on two groups: Native American pre-nursing students and graduate nursing students. Other than for these two groups, the college participates in the general recruitment activities organized by the admissions office, for example, hosting potential students on MSU Fridays, participating in summer orientation programs, etc. The Caring for Our Own Program (CO-OP), a federally funded workforce diversity program, does actively recruit Native American students from the reservations in Montana and surrounding states. The CO-OP program has two staff members with significant recruitment responsibilities. These individuals travel to the various reservations, to reservation high schools, and to tribal colleges to recruit students and to work with teachers in these facilities to enhance preparation of potential students for the rigors of the nursing program. The college allocates a limited number of upper division placements for these students. Students must meet the basic requirements for admission to the college and upper division placement. The processes for selection of CO-OP students for these reserved placements are clearly spelled out in the upper division placement policy. Again, the focus is on recruiting students and offering activities that promote the potential for success in the MSU nursing program.

The university has basic admission requirements that all new undergraduate students must meet; all pre-nursing students must meet these expectations. Success in the nursing curriculum requires more than minimal academic competency, thus the college has set additional academic criteria for eligibility for upper division placement. The aim of this policy and the associated processes is to select those students who are most likely to be successful in nursing, and to place them, to the extent possible, on the campus of their choice. This policy is on the college Web site: www.montana.edu/wwwnu/pdf/A12.pdf. There are also links to this policy and process on the prospective student page of the college Web site.

Recruiting for the master's program is done through a variety of mechanisms. Students must meet the admission and progression requirements as set forth by the faculty. The Division of Graduate Education allows students to be admitted provisionally.

The letter of acceptance specifies the provisions to be met. To move from provisional status to full admission status, the student must meet those provisions. The college has admitted a number of students in provisional status usually because of low GRE scores. Most of these students make the transition to regular status after one semester as their grades demonstrate the ability to be successful in graduate work. Students who do not maintain the required graduate gpa may be placed on probationary status. There have been nursing students who have continued on probationary status for several semesters. This practice is being reviewed to determine whether these students do, in fact, complete the program, pass the appropriate certification examination and gain employment in their specialty area. The admission policies for the Division of Graduate Education are at www.montana.edu/wwwdg/cat_admin_pol.shtml.

The success of students at both baccalaureate and master's levels on licensing and certification examinations attests to the fact that the policies and procedures in place do result in recruitment of excellent students at all levels.

Retention/Progression. Just as the university has policies regarding academic progress and retention in the university, the college has policies regarding academic progress and eligibility to continue in the nursing major. For example within the baccalaureate program, to progress to the upper division component of the curriculum, the student must successfully complete all the required prerequisite courses with a grade of C or better and maintain a MSU-Bozeman cumulative gpa of 2.5 (on a 4.0 point scale). Another example of a college policy that is more rigorous than that of the university is Policy C-2: the progression/retention policy: a student who fails two upper division clinical courses in two different semesters is not permitted to continue in the nursing major. The university, as a whole does not have a policy regarding the number of times a student can repeat a course. The CO-OP program has specific policies for the students who are supported through that program. CO-OP students have a summer college-prep program to enhance their science, math and writing skills. These students also have a mandatory seminar and tutoring and have a close system of academic monitoring and advising. The students must maintain a specific grade point in order to retain their stipends. These policies are well publicized within the CO-OP program. The CO-OP program staff is responsible for implementing these additional policies.

Students can appeal policy-based decisions to the college's Scholastic Committee. This committee has the power to waive a particular policy if they deem it

appropriate. For example, a student may request to continue in the curriculum while repeating a course or may petition to substitute a course for a specific required prerequisite course, or may request consideration for readmission after dismissal from the college for academic failures. These petitions are considered on a case-by-case basis. The decision of the Scholastic Committee can be appealed to the dean.

There are also progression policies at both the university and college levels that pertain to the master's program; for example, maintenance of a 3.0 grade point average and satisfactory performance in graduate nursing courses. Students must successfully complete both a comprehensive examination and a thesis or project in addition to coursework.

Policy modification. Policies are assigned to specific committees for review and appropriate modification. All policies undergo a two-level review. The first level of review (Level I) is a specified individual or committee responsible for formulation, distribution, posting, review, revision, retention or deletion of the policy. Policy work at this level includes seeking faculty review and input. The second level review body (Level II) is responsible for final sign-off and posting of the policy on the college Web site. This procedure is clearly articulated at the beginning of the CON policy and procedure manual (www.montana.edu/wwwnu/facstaff/policies.htm). Designation of the individual/group responsible for the level reviews is indicated on the policy itself and on the policy index, also available on-line. As a part of the level I review, the modified (or unchanged) policy is sent to all faculty members by e-mail for a two-week review period. Faculty members may suggest changes or raise issues. These comments are reviewed by the committee and, if they result in significant changes, the policy is sent out again for review. If no significant changes are suggested, the policy is forwarded to the level II review body for final approval and posting on the Web site. Approval dates are then updated. In addition to the scheduled review process, policies can be brought forth by committee or individual faculty for review as appropriate. For example, in spring 2007 the Board of Regents modified the MUS policy for admission to graduate study to remove the requirement of a standardized test for admission and placed the determination of admission criteria in the hands of program faculty. Subsequent to this change at the system level, the Graduate Academic Affairs Committee reviewed the master's nursing program admission policy and recommended to the nursing faculty that they make the same change, which was done. As can be seen from a review of the

policy Web site, the college has a large number of policies. Maintenance of these policies takes a significant amount of committee and individual time that could well be spent on other aspects of the college.

FNP Policies. As an option within the master's program, admission, progression, graduation, and other policies pertaining to the FNP program are under the purview of the Graduate Academic Affairs Committee (GAAC). The coordinator of the FNP option is a permanent member of GAAC and so is involved in policy development and implementation for the FNP option. Other FNP faculty may also be involved as elected members of that committee and through campus and general faculty levels of discussions regarding policies affecting that option.

Standard I: Analysis and Discussion

Strengths:

- The College of Nursing has a recently refined mission statement that is congruent with and reflects the values of the university's mission, professional nursing standards, and the internal and external communities of interest.
- The baccalaureate program is available in five locations.
- The master's program is distance delivered and serves students across the State of Montana as well as surrounding rural states.
- The CO-OP program policies are supportive of the success of students in this program as well as enhancing the college goal of increasing the diversity of the student body.
- The goals of the College of Nursing are stated in the strategic planning document that was developed in concert with the university's priority statements. Both of these documents guide the use of resources as well as set guidelines for the consideration of new initiatives.
- The expected outcomes of each program are clearly explicated in college policies and documents and are congruent with those of the parent institution and consistent with professional nursing standards and guidelines.
- The administrative and governance structures of the college provide clear lines of communication and reporting as well as meaningful participation of both students and faculty in the governance of the organization.

- The college has a process for regular and timely review of an extensive list of well-articulated policies.

Areas for Improvement and Action Plan:

- While the relatively recent change in the process for policy review and modification has reduced the time devoted to policy work, policy work continues to consume a great deal of committee time and energy.
 - The Executive Council will review the list of policies and the policy on policy revision to ensure the most efficient and effective approach to policy development, formulation and revision.
- There is need for analysis of the progress and success of master's nursing students who are admitted provisionally and that of those who are allowed to remain on probationary status for more than one semester.
 - The Associate Dean for Research and Graduate Education and GAAC will review the aggregate data of these students to determine whether there should be recommendations for change in appropriate policies or practices.

STANDARD II. PROGRAM QUALITY: INSTITUTIONAL COMMITMENT AND RESOURCES

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

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

Montana State University provides a rich and supportive academic environment for the nursing programs. The distributive nature of the nursing programs provides challenges to both the institution and the faculty; however, all attempts are made to make the resources of the parent institution available to nursing faculty on all campuses. The major resources are listed below.

Teaching (including distance education): The MSU Teaching and Learning Committee (TLC) supports and promotes advances in student learning through improvements in teaching. The TLC allocates funds for faculty development projects; supports assessment of outcomes by sponsoring teaching improvement activities; and supports attendance at instructional development workshops that provide the potential to impact teaching methods on campus. The Teaching and Learning Resource Page (www.montana.edu/teachlearn/tlresources.htm) sponsored and maintained by the TLC, has a wealth of information and ideas regarding teaching, learning, and assessment and is accessible to faculty and students across the state. The College of Nursing has a representative on the TLC.

The Burns Technology Center (BTC) offers teaching, learning, and technology support for MSU faculty with a focus on distance and non-traditional education. The BTC offers workshops that are available free of charge to faculty able to attend in Bozeman. These workshops generally can be telecast to the other campuses for a nominal rate. Other offices within the university also provide support for the instructional

mission, for example, the Office of International Programs assists both students and faculty seeking to obtain or deliver international educational experiences.

The College of Nursing supports its instructional mission in a variety of ways. All of the master's courses and some of the baccalaureate courses are offered using distance methods – WebCT, teleconferencing, and interactive video. Interactive video equipment is regularly updated and most recently, integrated podiums and flat screen TV panels have been installed in the larger classrooms on each campus. This has facilitated faculty's ability to be effective in this mediated environment by allowing them to focus more fully on their instruction, rather than managing the technology. Workshops to help faculty develop skill in the use of WebCT are offered each semester in Bozeman and abbreviated workshops have been offered on request in Billings. As faculty become more expert with the use of WebCT, updates are provided. A series of brown bag discussions on distance education was held during the 2005-2006 academic year.

The College of Nursing supports in-service educational programs for faculty on a regular basis. Each campus may offer site-specific programs on such topics as test analysis, managing difficult students, innovative teaching practices, etc. Each year during the fall and spring faculty meetings held in Bozeman (all full-time faculty members attend), a faculty development program is offered. The Faculty Development Subcommittee identifies the primary needs and interests of faculty and an appropriate program is planned. During the 2007 fall meeting a workshop on integrating gerontological content into courses was offered and well-received; in 2006 an update on legal and ethical issues was held. At the spring meeting, a content-focused workshop is alternated with the faculty research day. In spring 2008 a workshop on energizing clinical practice was conducted by Dr. Carol Picard, immediate past president of Sigma Theta Tau International. Travel funds, while limited, are available on a competitive basis to faculty for activities that enhance the teaching mission. Faculty representatives are also sent to selected national curricularly focused meetings; for example, NONPF and the AACN meetings on baccalaureate and masters education. Course faculty meetings are held twice a year to ensure consistency of delivery of the baccalaureate curriculum across campuses and to facilitate discussion amongst the faculty members of successful teaching approaches and innovative delivery ideas.

Research: As a major research institution, there are many mechanisms for support of the research activities of faculty and students. The office of the Vice President for

Research, Creativity and Technology Transfer administers MSU's research enterprise. It oversees the Office of Sponsored Programs (OSP) and the Office of Technology Transfer. OSP manages all financial, reporting, compliance and related tasks for sponsored activity at MSU. OSP maintains a Web site full of useful information to faculty and students who are active in the research arena (www.montana.edu/wwwvvr/osp/grntsgen.html).

Examples of programs to enhance the research productivity of faculty are:

- The ADVANCE network, a research leadership project funded by NSF designed to advance women as research leaders via a sustainable, tiered and cascading system of mentoring and professional development. The project draws on Montana State University's existing strengths – its prominent interdisciplinary research centers and crosscutting programs, its well-positioned senior women faculty in sciences and engineering – to develop an innovative system for mentoring women scientists, social scientists and engineers at different career stages and transition points. This project is open to all women scientists on campus. The dean of the college is on the ADVANCE advisory committee.
- The Montana INBRE is a National Institutes of Health funded project designed to build the biomedical research capacity of the state and to develop the next generation of researchers in the biomedical sciences. This project builds on the statewide network of PhD-granting institutions, baccalaureate schools, and tribal colleges and is also regionally networked to other INBRE and Centers of Biomedical Research Excellence (COBRE) programs through the Lariat, which is the first phase of the National Center for Research Resources (NCRR) IDeANet Program. Nursing faculty members have been funded through COBRE and are involved in developing the proposal for renewal of the INBRE project.
- The Center for Native Health Partnerships is funded through the NIH P-20 Center Grant mechanism. The Center projects focus on community-based participatory research (CBPR), a research method in which community members and researchers work together on research projects from the inception of the idea to publication of findings. One nursing faculty member has received funding from this center for work on methylmercury exposure among Native American women.
- The Clinical Research Development Program is designed to assist tenured or tenurable faculty to enhance their clinical research activities by removing barriers to writing and submitting competitive grant applications, providing information

and mentoring on proposal development, and convening a community of faculty engaged in clinical research. This program is funded by the Provost and the Vice President for Research, Creativity and Technology Transfer in conjunction with the Division of Health Sciences. Nursing faculty members have been selected for this program each of its three years of existence.

- The Buy-out for Enhancing Scholarship and Teaching (BEST) program. Faculty can request buy-out of one course for one semester to engage in activities that enhance their scholarship. Nursing faculty members have traditionally been successful in obtaining these awards.

The Undergraduate Scholars Program (USP) is a university program available to students on each campus that is designed to encourage, facilitate, and support undergraduate research and creative activity in collaboration with faculty. Modest funding is available to support students working on specific research/creative projects with faculty; funding is also available to support students' travel to present at professional meetings. Several nursing faculty and students frequently participate in this program.

The College of Nursing has internal structures to support the endeavors of the faculty and students engaging in research and scholarly projects. With the 2007-2008 academic year, the College of Nursing initiated a new position, that of Associate Dean for Research and Graduate Education. This new associate dean provides leadership for the development and implementation of research and scholarly activities within the college and for continued development and implementation of the master's program. The College of Nursing Office of Research and Scholarship (CONORS) provides professional support and an infrastructure to all aspects of research and/or projects that are being conducted at the college. CONORS manages a block grant program for nursing faculty. A description of some of the active research projects is available on the CONORS Web site: <http://www.montana.edu/conors/>.

The Center for Research on Chronic Health Conditions in Rural Dwellers (NIH/NINR 1 P20 NR07790 and SC Ministry Foundation) developed a sound basis for continued development of the college's research mission. In addition to funding of pilot studies, the Center developed a network of researchers across the United States and Canada with interest in research relevant to rural populations. This network continues to be a significant support structure for researchers in colleges and schools of nursing in remote and rural locations.

Service/Practice.

Shared governance is a strong value at Montana State University. At the university level this is easily demonstrated: for example, the president of the Faculty Senate has a significant percent of his/her salary supported by the Provost's Office; the president of the university meets weekly with staff and faculty leadership to address issues of concern to the university; and the university budget and planning committee has membership from a broad range of faculty, administrators, staff, students, and the public. The graduate council holds its meetings in one of the College of Nursing Polycom equipped rooms to facilitate representation from non-Bozeman based faculty.

The college supports off-campus faculty participation in campus committees; for example, the college provides travel support and a substitute for clinical coverage for the representative to the promotion and tenure committee if that person is a distant campus faculty member; the college makes its Polycom system and rooms available to university committees and to the Women's Faculty Caucus. To assist faculty members the College of Nursing assigns a staff member as support for the major nursing committees: Executive Committee, Undergraduate Academic Affairs, Graduate Academic Affairs, Nursing Formal Review and the Search Committee. Generally, faculty members who chair GAAC and UAAC receive a slightly lighter teaching assignment while they hold this position.

Several faculty hold, or have held, leadership positions in international, national, and regional/local organizations. For many years, the college has had a faculty member on the Montana Board of Nursing. Additional data regarding faculty service contributions is presented under Standard IV, Program Effectiveness. (Faculty vitae are available on-site).

The college has a faculty practice policy (Policy E-8). This policy is currently under review as it is more confusing to faculty and administrators than it is helpful. Several faculty take advantage of the opportunity to practice, for example nurse practitioner faculty volunteer at several clinics in the Bozeman area; several faculty in Missoula have part-time private practices; Billings and Great Falls faculty volunteer at the rescue missions in those communities, in fact, the college and its students have provided service to the Billings Rescue Mission for over 20 years. In Great Falls, the college provides the nurse practitioners for the student health service offered in collaboration with the University of Great Falls and the MSU-Great Falls College of

Technology. Montana University System permits faculty to consult up to one day per week and to retain any income received from the consultation. If faculty chose to retain income from any practice, it is considered consultation and so is in addition to the work expected of a faculty member; if revenue is realized to the college, then faculty may receive a lighter teaching assignment (buy-out) and structure the practice time into their workload. Faculty members are active in a number of professional and community organizations.

The collaborative work to develop and implement the Montana AHEC is another example of the service the college, as a whole, provides to both the university and the State of Montana. A description of the AHEC and the range of outreach programs supported through this activity is available on the Web site:

<http://healthinfo.montana.edu/ahec.html>

II-B. Fiscal and physical resources are sufficient to enable the program to fulfill its mission, goals, and expected outcomes. These resources are reviewed, revised, and improved as needed.

Fiscal resources are sufficient to enable the program to fulfill its mission, goals, and expected outcomes. The college receives funds from five major sources: state funds (generated through tuition and state appropriations), program fees, indirect cost recovery, grants, and foundation funds. State funds support the instructional and administrative components of the college and are allocated annually through the Office of the Provost. These are used primarily for salary and operating expenses. Nursing students pay program fees to support the extra expenses of instruction in nursing, such as equipping and maintaining the college skills labs, special needs for courses, faculty travel related to instruction, and some technical support. These funds come directly to the college. Indirect cost recovery and grants support the creative aspects of the college. Grants are tied to specific projects, so do not provide general support, however, do support the scholarship mission of the college. Indirect costs may be used to support a variety of activities that enhance the general scholarship mission, for example, faculty travel to scholarly meetings or start-up funds for new researchers. Foundation funds are generated through gifts to the college and fund primarily scholarships. A relatively modest foundation account supports discretionary spending. The rent for the four distant instructional sites (Billings, Great Falls, Missoula and Kalispell) is paid out of the university facilities budget, not the College of Nursing budget; the liability insurance for

both students and faculty is funded by the Office of the Commissioner of Higher Education.

The university budget is set by the State Legislature and the Board of Regents. The allocation of the funds assigned to the university by the Board of Regents is managed by the University Planning, Budget and Analysis Committee (UPBAC). This committee, on an annual basis, makes allocations to the vice presidents and to specific other projects, based on wide-spread discussion and priorities set by the committee. The committee has broad voting membership, including all the deans, vice presidents, a public member, and representatives from students, and professional and classified staff. Meetings of this group are public and often attended by members of the Bozeman press.

Examples of needs of the college that have been addressed through the university planning and budgeting process are: shifting a series of annually awarded budget allocations that supported the permanent enrollment increases in Billings and Kalispell to make them a part of the base budget of the college (even in a time of tight budgets from the state), and an additional base budget increase to support offering upper division courses in Bozeman. Further, within academic affairs at MSU a system to shift funds to follow enrollment (reallocation) was implemented in FY 2008, however, the College of Nursing was exempted from this system because nursing is a program that maintains maximum enrollment, thus it is not possible for the college to increase student enrollment. The mandatory contributions from college budgets to set up the initial central reallocation pool would thus have been a tax on the college with no chance for the college to recoup the funds through increasing enrollments. Nursing was exempted from this reallocation model as it could only lose through participation in the system.

Program fees are another example of support for the college. Prior to AY 2005, students paid clinical course fees and these funds could be used only for disposable items used in clinical courses (tightly defined). Students and administration supported the switch to program fees that could be used for a broader set of needs, while still directly supporting the nursing program. The college also obtains university-level computer and equipment fee funds. These are distributed on a competitive basis. Over the past two years the college has been allocated equipment fees to purchase SimMan and BabySim simulators for each of the five instructional sites. The college has been able to leverage these funds through successful competition for additional equipment money from the Office of the Commissioner of Higher Education and through a gift from

a private donor in Great Falls. Student computers and projection equipment have been upgraded using campus computer fee funds.

Physical resources. The College of Nursing has instructional sites in five communities: Billings, Bozeman, Great Falls, Kalispell, and Missoula. All instructional sites have high speed Internet access, modern Polycom units, faculty offices, student computers and skills laboratories. On all campuses, space is tight, not just for nursing, but for the host institution as well.

The College of Nursing main campus is in Bozeman. Sherrick Hall houses the administrative offices, faculty offices, some classrooms, and skills laboratories. Some faculty and CO-OP office space is in Culbertson Hall, a building across campus. The college also has a wet laboratory and a controlled-environment room for animal housing in Leon Johnson Hall. Full-time faculty members have private offices, part-time faculty share office space. Over the past two years, some of the meeting and classrooms in Sherrick Hall have been renovated to better facilitate distance learning and conferencing. The skills laboratory area is undergoing renovation to meet the expanding use of simulation within the curriculum.

The distant campuses are housed in rental space: In Billings, the program is housed on two floors of Apsaruke Hall on the Montana State University-Billings campus. Again, space, while excellent for offices, is not as suitable for simulation laboratories and classrooms. There is work in Billings to seek additional or better space, however, this is a middle to long-range project. The Great Falls campus is located in a professional office building across from the west campus of Benefis Health System. This space is rented from Benefis and has been remodeled and expanded to meet the growing needs of the college on that campus. In Missoula offices, classrooms and the learning laboratory are housed in North Corbin Hall on the campus of the University of Montana. Full-time faculty members have private offices; part-time faculty share. On this campus an area that formerly housed several part-time faculty members has been renovated to provide an excellent simulation laboratory. Additional office space has been requested on this campus, however as this request competes with the priorities of the programs of the University of Montana, the host institution, we have not been able to obtain more office space. The Kalispell site is on the property of Kalispell Regional Medical Center. At this site there are offices, a classroom with Polycom equipment, and skills labs. Additional interactive video classrooms are made available at Flathead Valley Community College.

Clinical Resources. The college has access to a broad range of excellent clinical resources. The communities in which we offer programs have community hospitals, health departments, and a variety of other clinical opportunities for students. The college maintains contracts or letters of agreement with over 200 clinical sites. With the recent increase in the number of associate degree registered nursing programs in Montana has come increased competition for clinical opportunities, particularly in specialty settings such as pediatrics, obstetrics and psychiatry. Careful planning with the other nursing programs guarantees that all students receive good clinical experiences. Faculty evaluate the clinical placements on an ongoing basis considering such factors as patient census, types of experiences available for students, relationships between staff, faculty, and students, etc. Concerns are brought to the course faculty and campus directors and, if necessary, alternative or additional clinical sites are found.

Master's level clinical experiences are generally precepted; preceptor sites are found across the state. For the 2007-2008 academic year, 125 individual preceptors were used for the FNP option. The college takes into consideration the availability of preceptors for the nurse practitioner students when deciding how many students to admit, and to which campus to assign the student. This is particularly important in the Missoula area as there are frequently students from another FNP program (from Washington State), thus there is stiff competition for specialty area preceptorships within that city. The availability of clinical sites for the other master's options does not pose a problem at this time – they are more than adequate.

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

Academic support services are available to students on all campuses. Detailed information about the range of support services available to all MSU students is provided on the following MSU Web sites:

<http://www.montana.edu/level2/prospectivestudents.php> and

<http://www.montana.edu/level2/currentstudents.php> and on the College of Nursing Web site: <http://www.montana.edu/nursing>. As most of these resources are based in

Bozeman, the specific mechanisms for accessing these resources may differ for distant campus students. For example, students in Bozeman have in-person access to on-campus student health services, the Renne Library, financial aid, and billing services.

Students on the distant campuses may have to access some of these resources through on-line or telephone mechanisms; in recognition of their inability to utilize selected services, the distant students are not charged fees for some services, for example, student health services and access to the athletic facilities on the Bozeman campus. Students on the Missoula campus can access student health services and athletic facilities by paying a fee to the University of Montana. Similarly, students in Billings can access MSU-Billings facilities. Students in Great Falls can use the collaborative student health services at University of Great Falls for a nominal fee. Financial aid and other financial services are housed on the Bozeman campus. Staff members on the distant sites help students with basic financial aid questions and concerns; however, more complex issues are referred to the Bozeman financial aid office. The distant campuses offer free phone service to students needing to contact that office. The college continually works to remind the staff in these units that many of our students are located at significant distances from the Bozeman campus and so cannot easily come in to pick up refund or reimbursement checks, etc.

All undergraduate students have access to ten hours of “free” tutoring (paid through the Associated Students of Montana State University (ASMSU)). This tutoring is available on all campuses. Writing and math centers are available on the Bozeman campus and at the MSU-Great Falls College of Technology, as are a number of other academic support services particularly focused on first year students. The Caring for our Own Program provides academic, financial, and social support services and advising to Native American nursing students. Each campus has a faculty member identified as the CO-OP advisor who works with these students during their upper division coursework.

Library. All nursing students have access to the on-line library, and access to local institutional libraries, such as the Mansfield Library at the University of Montana, MSU-Billings library, FVCC library in Kalispell, and MSU-COT and University of Great Falls libraries in Great Falls. Librarians at these distant sites are very helpful and welcoming to our students, and some of these libraries house MSU nursing collections. Further, local hospitals welcome our students into their medical libraries. Much of the MSU nursing and health related collection is on-line, and full text, making excellent library resources available across all sites through remote proxy access. One concern that has arisen is that remote (proxy) access is available only when the student is actively enrolled in a course. This does cause problems at times for distant master’s students

who wish to work on literature reviews or projects over the summer without being enrolled in a class. Generally this problem has been resolvable, and the dean is currently working with the Vice Provost for Graduate Education to develop an access fee so that students do not have to find a faculty member and enroll in a grade-bearing course simply to gain proxy access to the library. On-site access over the summer is not a problem; it is only the proxy access.

Advising and registration. All nursing students are assigned individual advisors on their upper division campus. Pre-nursing students in Bozeman are advised by college staff; as the other sites are predominantly upper division units, the pre-nursing advising is generally handled by a pre-nursing advisor on the campus at which the student is taking the pre-requisite classes. There is a good flow of information between the College of Nursing and these pre-nursing advisors, although turnover in the pre-nursing advising positions can cause advising problems. Orientation meetings and on-line registration are conducted at the beginning of the semester on each campus by campus directors and local campus staff. Campus directors and the administrative staff in Bozeman are always available by telephone or e-mail. The Associate Dean for Undergraduate Programs and the Undergraduate Student Service Coordinator from the Bozeman campus make visits to the distant campuses as necessary. Most recently, these individuals have made annual visits to the Billings campus where turnover in the MSU-Billings pre-nursing advisor position had resulted in pre-nursing students receiving inconsistent and outdated information. This had potential to negatively impact students seeking admission to the nursing program from that institution. Nursing students are asked to evaluate the quality of their advising on an annual basis as faculty annual evaluations include evaluation of the quality of advising. Master's students are asked to evaluate their committee chairs/thesis advisors on completion of the thesis or project.

Disability services are available to students, although the need for these services is rare in nursing. Accommodations are provided based on the official evaluation by Disability Services; for example students have received special stethoscopes to magnify sounds, and additional testing time has been allowed.

Technical/computer support is available through the MSU help desk and through the College of Nursing's IT coordinator. The college IT coordinator visits the distant

campuses at least once a year. One of the primary responsibilities of this individual is to oversee the college of nursing IT purchases and support faculty and staff by assuring that the IT equipment is in proper working order. He assists faculty with troubleshooting the Polycom system and office computers. On each campus a staff member has been identified as backup help for the Polycom system. WebCT support from the college is available online and by phone. The college Web master and WebCT expert is available to students and faculty through on-line and telephone communications. She also provides individualized Web based orientation sessions for students in the Web based classes. Support for WebCT is strong as there are both campus and college-based resources, however, the support for the other aspects of technology is stretched. Given the numbers of faculty and the reliance on computer and interactive video for instruction and communication, additional support is needed, particularly on the distant campuses, however it competes in a tight budgetary environment with many other needs. Support services are evaluated both formally and informally through discussions with college administrators and advisors as well as through annual surveys administered by the university and by the college. The results of these evaluations are discussed under Standard IV.

Caring for Our Own Program (CO-OP). The federally funded CO-OP program builds on partnerships with groups of Native American nurses, public school and tribal community college leaders, Indian Health Service personnel and other community stakeholders from three of the Reservations in Montana to develop a support network for American Indian students in pursuit of professional nursing education and practice. Financial assistance is available but the main benefits of the program are expert, culturally-sensitive advising, supplemental academic instruction, and assistance with social and financial aid services available from MSU-Bozeman. The project staff includes Native Americans and is dedicated to helping Native American nursing students achieve success from start to finish. As noted earlier, every campus has a CO-OP advisor.

II-D. The chief nurse administrator is academically and experientially qualified and is vested with the authority required to accomplish the mission, goals, and expected outcomes. The chief nurse administrator provides effective leadership to the nursing unit in achieving its mission, goals, and expected outcomes.

Dean Nichols is well qualified for the position both academically and experientially. She holds a Doctor of Nursing Science from the University of California, San Francisco, was an American Council of Education Fellow, and has attended the Bryn Mawr/HERS Mid-America Summer Program for Women Administrators and the Harvard Management and Leadership in Education program. She has held academic administrative positions from department chair to Assistant to the President for Program Reviews (University of Wyoming). She has been a dean of nursing for 13 years, four at Montana State University. Dr. Nichols has held a variety of elected positions in nursing and professional organizations at the state and national level. She is a Fellow of the American Academy of Nursing. She continues to teach in the baccalaureate program, chair thesis committees in the master's program, and participate as a member of an active research team. Dr. Nichols has authority over the academic and fiscal aspects of the college. Final hiring authority for tenure and tenure track faculty is vested in the Office of the Commissioner of Higher Education and for adjunct faculty in the office of the President, as it is for all units in the MUS. Dr. Nichols is evaluated annually by the Provost, the college faculty and staff, and through self-evaluation.

The College Administrative Team. In addition to the dean, the programs of the college are administered through a team of associate deans and campus directors. The college has two associate deans: one for research and graduate education and one for undergraduate education. Both are well qualified for their positions. Dr. Williams, Associate Dean for Research and Graduate Education is a federally-funded physiologist. She joined the college in fall 2007 and has quickly moved into this new role. Dr. McNeely, Associate Dean for Undergraduate Programs, has been in the associate dean position for nine years. For many years she served as Associate Dean for Academic Programs, however in fall 2007, that position was split and the existing structure developed. Prior to coming to MSU, Dr. McNeely was Dean of the School of Nursing at Westminster College in Salt Lake City. Each campus is headed by a campus director. This individual is responsible for the day-to-day running of the individual campus, hiring of part-time and temporary faculty members for the campus, and annual evaluation of all faculty and staff at the individual campus. The four campus directors are all experienced and effective administrators; two are tenured faculty members, two are long-time adjunct faculty members. The campus director of the Missoula campus is also responsible for the operation of the Kalispell instructional site. The final member of the administrative

team is the Assistant to the Dean. This individual manages the day-to-day operations of budget and personnel and other support aspects for the college. Curriculum vitae for the entire administrative team are available on-site.

II-E. Faculty members are academically and experientially qualified and sufficient in number to accomplish the mission, goals, and expected outcomes of the program.

During the 2007-2008 academic year, the college hired a total of 55 full-time faculty members (54 faculty, 1 Clinical Resource Registered Nurse [CRRN]) and 37 part-time faculty members (29 faculty and 8 CRRNs). Forty-nine of these faculty members are certified in their specialty areas, including all faculty members who teach clinical courses in the FNP or CNS options. Several of these individuals teach only one semester and several are very part-time (0.2, 0.3 FTE). In addition, the two hospitals in Billings each support a half-time clinical instructor (CRRN-level). The actual number of faculty employed in any one semester will depend upon the mix of full and part-time faculty, the specific course needs, and whether faculty members have funds to “buy out” time through research and program grants or other externally funded opportunities. The college appoints 4-6 graduate student assistants (GTAs) each year. These GTAs assist faculty with skills labs, clinical supervision, or other instructional duties as is appropriate for a GTA. They have a 10-hour a week work commitment in exchange for a stipend and some tuition remission. See Appendix C for the faculty profile table.

The State Board of Nursing rules require that all faculty members hold at least a masters degree in nursing, or be enrolled in a master’s degree program. The number of individuals that can be appointed as faculty while still enrolled in a master’s program is restricted by Board of Nursing rules to 2 or 10% of the faculty full-time equivalents (whichever number is greater). State Board rules require that faculty members have clinical experience in their field of instruction and that they report annually the activities they have engaged in to maintain/enhance their practice. The college can hire baccalaureate prepared nurses to serve as Clinical Resource Registered Nurses (CRRN), however these individuals must be supervised by master’s prepared faculty. The college faculty:student ratio in junior and senior level clinical groups is 1:8; in sophomore courses it is more commonly 1:10, the maximum allowed by Board of Nursing rules. The actual ratio in any one clinical setting may depend on additional variables, such as size of clinical unit, patient census, etc. Faculty members are

assigned to courses by campus directors based on matching the clinical specialty of the faculty with the focus of the course.

FNP Faculty. All courses in the master's program, with the exception of the three pharmacology courses, are taught by nursing faculty. The pharmacology courses are taught by faculty from the Skagg's School of Pharmacy at the University of Montana under contract with the College of Nursing. Faculty members who teach clinical courses in the FNP program are certified in the appropriate field. The coordinator of the FNP program is a certified FNP, who currently maintains her own clinical practice. One half of her workload assignment is the coordination of the FNP option and FNP practice. The numbers of faculty and students are presented in the program information form at the beginning of this document. Faculty curriculum vitae are available on-site.

Preceptors. Students in the baccalaureate program have precepted experiences in two courses, the elective summer preceptor course and the required leadership/management course in the senior year. As much as is possible, preceptors hold at least a baccalaureate degree in nursing; however, at times experienced non-baccalaureate registered nurses do serve as preceptors.

Master's level students work with preceptors in the clinical setting. FNP preceptors are practicing nurse practitioners, nurse-midwives, physician assistants, or physicians. Because of the breadth of the FNP role, students usually have more than one preceptor in any semester. Students evaluate preceptors each semester, these evaluations are reviewed by the FNP coordinator to determine appropriateness of continuation of the preceptor. In the CNS and CNL roles, faculty often serve as preceptors/supervisors as there are few nurses functioning in CNS roles and no nurses in CNL roles in Montana. All preceptors receive a packet of orientation information at the beginning of the student experience that includes a list of their responsibilities as a preceptor, the responsibilities of the clinical faculty, any necessary forms, and contact information for both the faculty clinical supervisor and the FNP coordinator. A letter of understanding between the college and the preceptor must be on file in Bozeman before the start of any preceptorship.

The college continually faces the challenge of recruiting and retaining tenure-track faculty. The College of Nursing requires an earned research-focused doctorate in nursing or related field for appointment to the tenure track. As of spring 2008, the

college had 21 doctorally prepared faculty (19 tenured/tenure track), and one additional faculty actively pursuing doctoral study. The percentage of doctoral faculty has remained essentially unchanged for the past 10 years despite significant efforts to increase the number of faculty with research doctorates. Several factors seem to block our efforts at increasing doctoral faculty: the national shortage of doctorally prepared nurses who are interested in faculty positions; the heavy commitment of MSU College of Nursing to baccalaureate education; the lack of a doctoral program in the state; retirement of doctorally prepared faculty; salaries that have dropped below competitive levels, and lack of resources to hire a significant number of additional doctorally prepared faculty members.

Over the past two to three years, turn-over in masters prepared faculty has also become a concern. In May 2004, the Board of Regents approved a pilot program to allow multi-year contracts for a limited number of adjunct faculty members; in November 2007, this was made permanent. This opportunity was seen by the Board of Regents as a mechanism to recruit and retain excellent clinicians. While the availability of these appointments has definitely improved the morale of adjunct faculty, all of the full-time adjunct faculty members who have resigned in the past two years have been individuals on these multi-year contracts. All of the individuals have moved to service positions at higher salaries, and in their estimation, lower workloads. Comparative data show that while, until this past year, tenure and tenure-track faculty salaries have been close to the national means for doctorally prepared faculty at rank, salaries for adjunct faculty have lagged significantly for some time. The college is in the process of developing a clinical track (non-tenure track) that would provide a graded set of expectations, possibilities of multi-year contracts, and possibilities for promotion with associated promotional raises. While not resolving the whole issue of salaries and retention, it is hoped that this will provide master's prepared individuals incentive to develop and advance as faculty members.

To enhance the research mission of the college and the ability of tenure-track faculty to develop active programs of research, the college developed a workload formula that provides time for research and creative activity for research active faculty. University regulations require that adjunct (non-tenure track) faculty carry a workload of at least 24 credits a year (based on full-time). Tenure track faculty members are not so restricted. See Appendix D for the workload document.

II-F. The faculty roles in teaching, scholarship, service, and practice are identified clearly and are congruent with the mission, goals, and expected outcomes of the program.

The College of Nursing Policy A-5, attachment 9 clearly identifies the expectations of faculty. In addition, as a part of the annual evaluation process, faculty members develop individual goals for the coming year. These are discussed with, and approved by, the campus directors as a part of the annual evaluation process and become a component of the evaluation process for the subsequent year. The college policies for retention, promotion, and tenure are consistent with those of the university; the policies and procedures for these steps in the life of faculty are explicated in Policy E-1 and available on the college Web site. The college retention, promotion, and tenure policies and procedures are reviewed and reaffirmed each year at the May faculty meeting. The university has policies that also describe the faculty role and responsibilities. Adjunct faculty workloads are developed consistent with the policy of the provost's office that adjunct faculty FTE allocation (and pay) be based on an expectation that a full-time adjunct faculty will teach 12 credits per semester (or the equivalent). (www2.montana.edu/policy/adjunct_policy.htm).

Standard II: Analysis and Discussion

Strengths:

- There is support from the parent institution for the complete faculty role.
- Units of the parent institution are willing to use telecommunication to permit the involvement of distant faculty in university governance.
- The CO-OP program is a nationally recognized program to recruit, retain, and graduate Native American students.
- Program fees provide significant, flexible support to the program.
- The college is developing simulation laboratories on all instructional sites, supported by funds from the campus equipment committee, private donors, and the nursing program fees.
- Ten hours of tutoring, paid through the Associated Students of Montana State University (ASMSU), is available to all baccalaureate students.
- The university and facility libraries provide excellent and available resources to all students.
- Faculty are qualified and motivated.

- The administrative team is highly qualified and well-respected within the college, on-campus, and within the health care community.
- Faculty members are active in a variety of service roles: clinical practice, service to the community, service to the university, and service and leadership within professional organizations.

Areas for Improvement and Action Plans:

- Access to university-level resources and opportunities to support faculty and staff are often only available in Bozeman; for example campus promotion and tenure workshops are held only in Bozeman. The distances between the campuses and the home campus often make these resources unavailable to the distant faculty.
 - Action Plan. Faculty and administrators within the college will continue to request university programs be video or audio taped if it is not possible to have live transmission of important events. The college will continue to make its Polycom system available to university committee meetings, and to support distant campus faculty attendance at meetings when feasible.
- With the increased use of interactive video instruction and high technology simulation equipment, there is an increasing demand for technical support and assistance on all campuses,
 - Action Plan. An assessment of the particular needs will be done. Distant campuses do have access to funds for local IT support and funds to hire hourly local Polycom support. This information will be reinforced each academic year so that campus directors are aware of the resources available to them.
- There is a need for additional or remodeled space on all campuses.
 - Action Plan. As the space issues on each campus differ significantly, each campus has to be addressed separately. In Billings, there are current negotiations with the City and County Health Department to occupy specially designed space in their new education building. In Kalispell, Kalispell Regional Medical Center is seeking new space for the nursing program; this is expected to be completed in time for classes in fall semester 2008. The college is actively involved in this process. In Great Falls there are currently discussions with Benefis Health System to

develop a collaborative regional simulation facility to support the needs of both institutions. Again, the college administrators and faculty are actively involved in these discussions. The Bozeman and Missoula sites are the most challenging as the building needs for nursing compete with extensive deferred maintenance needs and established long range building plans on each campus.

- State resources are tight and impact the ability to recruit tenure track faculty and recruit and retain adjunct faculty. Salaries, especially for adjunct faculty, are well below comparable means and well below those offered by clinical agencies, making recruitment and retention a challenge.
 - Action Plan. University administrators are continually educated about the challenges in recruiting and retaining nursing faculty. A limited number of cases for exceptional salary increases are made (successfully) each year. This practice will continue. Work will continue on the clinical track proposal with submission to the provost's office during the 2008-09 academic year for transmittal to the Board of Regents for approval.
- The faculty practice policy is in need of revision for it to provide meaningful guidance for faculty and administrators regarding the place of practice in faculty workloads.
 - The Executive Council has discussed this policy and referred it back to the Faculty Affairs Committee with guidance. Practice policies from other institutions will be reviewed as a part of the process of redevelopment of the MSU-CON policy.
- Assistance with planning for, and implementation of, the research trajectory for tenure track faculty is not always apparent on the distant campuses, especially where the campus directors are not tenured faculty.
 - Annually, and following the retention review (year 3), tenure-track faculty and the campus director will meet with the Associate Dean for Research and Graduate Education to develop/revise plans and goals for research/scholarly activities. Attainment of annual goals will be part of the annual evaluation process.

**STANDARD III. PROGRAM QUALITY:
CURRICULUM AND TEACHING-LEARNING PRACTICES**

The curriculum is developed in accordance with the mission, goals, and expected outcomes of the program and reflects professional nursing standards and guidelines and the needs and expectations of the community of interest. There is congruence between teaching-learning experiences and expected outcomes. The environment for teaching, learning, and evaluation of student performance fosters achievement of the expected outcomes.

III-A. The curriculum is developed, implemented, and revised to reflect clear statements of expected student learning outcomes that are consistent with professional nursing standards and guidelines and congruent with the program's mission, goals, and expected outcomes.

The baccalaureate and masters curricula were developed, implemented, and are periodically reviewed and revised to be consistent with professional standards and the needs of the communities of interest. The nursing curricula are based on the professional nursing standards and guidelines identified in Standard One, Key Element I-A. The program outcomes are also consistent with the needs and expectations of the community of interest. For example, the community-based care focus of the baccalaureate program is reflective of care delivery in the United States and particularly in rural states such as Montana. The options available at the master's level, including the certificate programs, have been developed following assessment of the stated needs of the health care industry and potential students, and the resources and needs of the nursing education community in rural Montana and the west. For example, in response to a request for master's level options in addition to the family nurse practitioner option, the college developed a clinical nurse specialist curriculum with two sub-specialties: community/public health and acute and chronic care of adults. Although these specialties were selected on the basis of a needs assessment and there was vigorous and ongoing recruitment, only three students enrolled in the community/public health option, two of whom dropped out of the master's program in the first semester. One student completed the option. The acute and chronic care of adults option has attracted

only one or two students a year. This small enrollment is a continuing challenge to faculty from an instructional perspective and to the college from a resource perspective. The community/public health option was discontinued in 2005. GAAC has recommended discontinuing the remaining CNS option in adult health.

Clear statements of expected student learning outcomes for both levels of curriculum have been developed, implemented, and are reviewed and revised as appropriate every five years as is specified in the College of Nursing Master Evaluation Plan (Appendix E). Statements of expected learning outcomes are published on the college Web site, in college publications, and in the master resource outline (MRO) for each course in both the baccalaureate and the master's curricula. The outcomes for the programs (baccalaureate and master's) are consistent with the mission of the university and of the college to develop leaders for professional nursing, to offer a challenging and engaging curriculum, and to serve the people of Montana through improving their lives and prosperity. The specific program outcomes are listed under Standard I, Key Element I-A.

III-B. The curriculum is developed, implemented, and revised to reflect professional nursing standards and guidelines. These standards and guidelines are clearly evident within the curriculum structure and expected learning outcomes. Course/unit/level outcomes are consistent with the roles for which the program is preparing its graduates.

1. The baccalaureate curriculum incorporates knowledge and skills identified in The Essentials of Baccalaureate Education for Professional Nursing Practice (AACN, 1998).

The baccalaureate program was developed using the *Essentials of Baccalaureate Education for Professional Nursing Practice* (AACN 1998) as a major guiding document. The Essentials Grid/Baccalaureate Program Curriculum Map illustrates the relationship of the essential knowledge and skills identified in this document to the courses within the curriculum. (This document is available on-site and on the disc that accompanies the self-study document.) In the baccalaureate program, course objectives are directly related to the foundational level objectives (FO) and/or terminal objectives (TO) to explicate the contribution of each course to the overall expected program outcomes. The foundational level courses begin with the freshman-level course, Introduction to Professional Nursing, and culminate with the four

sophomore level courses: Foundations of Ethical Nursing Practice, Foundations for Planning and Providing Clinical Nursing Care, Pathophysiology, and Health Assessment Across the Lifespan. The junior and senior level courses build upon both the required pre-requisite courses and lower division nursing courses. As students complete each junior and senior level course, they move toward achieving the learning outcomes that are expected by graduation (TOs).

The baccalaureate program includes four curricular threads: critical thinking, communication, learner maturity, and professional socialization. These threads are evident in the course description and objectives, theoretical course content, and teaching/learning activities in the master resource outline (MRO) for each course. See the table of curricular threads in Appendix F. For example, students are expected to demonstrate increasingly advanced levels of providing and evaluating the care given in the various clinical settings as they become more mature learners; professional role socialization occurs throughout the curriculum as the students increase their skills in critical thinking, communication, and care provision. Students increasingly incorporate the professional values of altruism, autonomy, human dignity, integrity, and social justice into their thinking and demonstrate value-based behaviors in their nursing practice.

Throughout the curriculum, faculty members provide learning experiences that focus on preparing the student to become a member of the nursing profession. All clinical courses have an objective to: “Demonstrate responsibility and accountability reflecting professional values.” MRO’s and IFO’s² include recommended content and suggested learning activities that reflect these professional values. Students are expected to meet this objective as they participate in both classroom and clinical experiences within each course in the baccalaureate curriculum. The clinical component of the baccalaureate program progresses as does the didactic component. Clinical experiences in the foundational courses focus on communication and fundamental nursing skills. Clinical performance expectations increase in complexity in the subsequent clinical courses. In total, the baccalaureate students complete 1035 hours of clinical practice within the curriculum.

² To ensure curricular consistency and also allow necessary variation based on the clinical resources of the campus community, the faculty has three levels of course documentation: MRO – the master resource outline that contains the official course description, course objectives, and suggested content and instructional methods. IFO – the individual faculty outline that specifies how the specific faculty on each campus implement the objectives of the course. Syllabi – documents developed by instructional faculty that provide course detail, e.g., assignments, grading criteria, course policies, etc. that are provided to students each time the course is taught. MROs can only be changed by a vote of the Faculty Organization.

Licensed Practical Nurses (LPN) can obtain advanced placement in the baccalaureate curriculum through successful challenge of the sophomore level nursing courses (a total of 11 credits). To date only one LPN has elected to seek this option. This student successfully challenged all of these courses and is completing pathophysiology in preparation for upper division work.

2. *The master's curriculum incorporates knowledge and skills identified in The Essentials of Master's Education for Advanced Practice Nursing (AACN, 1996). Any specialty standards adopted for the master's program are incorporated into the curriculum. In addition, nurse practitioner program curricula demonstrate incorporation of the Criteria for Evaluation of Nurse Practitioner Programs (NTF, 2002).*

The advanced registered nurse is prepared in theory, research and clinical practice in order to assume leadership positions in meeting the health care needs of rural individuals, families, and communities. The development of each master's or certificate option was based upon and reflects the standards and guidelines of specific national professional organizations. Option outcomes are consistent with the roles for which the students are being prepared (FNP, CNS, CNL, nurse educator). The FNP, CNS, and CNL option curricula reflect the *Essentials of Masters Education for Advanced Practice Nursing* (AACN, 1996). In addition, the family nurse practitioner option incorporates both the *Nurse Practitioner Primary Care Competencies: FNP* (HRSA, 2002) and the *Criteria for Evaluation of Nurse Practitioner Programs* (NTF, 2002). The CNS curriculum incorporates the National Association of Clinical Nurse Specialist *Statement on Clinical Nurse Specialist Practice and Education* (2004) and the *Scope and Standards of Advanced Practice Registered Nursing* (ANA, 2004). The Clinical Nurse Leader program utilizes the *White Paper on the Education and Role of the Clinical Nurse Leader* (AACN, 2007). The certificate in nursing education option is congruent with the *National League for Nursing Task Force on Nurse Educator Competencies* (NLN, 2005). Tables comparing each option with the 1996 AACN Essentials document, the overall master's program terminal objectives/outcomes, and the specific option competencies are found in Appendix G. Post-masters options are in place for master's prepared nurses who wish to become a FNP or CNS. These curricula are also based on the respective national guidelines.

III-C. The curriculum is logically structured to meet expected program outcomes.

1. The baccalaureate curriculum builds upon a foundation of the arts, sciences, and humanities.

The required prerequisites for the baccalaureate curriculum include courses in the arts, sciences, and humanities. All baccalaureate graduates of the Montana University System (MUS) institutions must complete a set of core requirements. Core 2.0 is MSU's core curriculum focused on inquiry-based learning. CORE 2.0 was implemented in Fall 2004, and is required for all students who have entered since then.³ To meet the Core 2.0 requirements, students must complete foundational courses (university seminar, college writing, quantitative reasoning, diversity, and contemporary issues in science) and ways of knowing courses (arts humanities, natural sciences, social sciences). Within this latter group students must take at least one inquiry or one research and creative experience course in each of the specified areas. The courses are selected from the listing of courses approved to meet the university core designations. Nursing students complete 29 credits in the natural, social, and contemporary sciences as well as additional foundations courses to complete the general education and pre-requisite component of the curriculum. Science courses include general chemistry, organic and biochemistry, human anatomy and physiology, infectious diseases, general psychology and sociology, nutrition, and lifespan human development. Successful completion of all prerequisite courses is required for progression to upper division nursing coursework and graduation. Appendix H, shows the relationship between the courses in the nursing curriculum and the required prerequisites illustrating how the curriculum is logically structured and builds on the arts, sciences, and humanities. Appendix I provides the plan of study for the baccalaureate program.

The nursing courses progress from simple at the foundational level to more complex care of the individual at the junior level and to complex care of individuals, families, and groups at the senior level. As noted earlier, the student is expected to demonstrate increasingly sophisticated levels of performance in relation to the four curricular threads: critical thinking, communication, learner maturity, and professional socialization.

³ Students who have been continuously enrolled since before Fall 2004 have the option to complete the original core curriculum or convert to Core 2.0. Students who have completed a core in one of other MUS institutions before transferring to MSU do not have to meet the Core 2.0 requirements.

2. *The master's curriculum builds on the baccalaureate level foundation.*

Admission to the master's program requires a baccalaureate degree in nursing. Upon admission, students take core courses appropriate to the option in which they are enrolled. These courses build on baccalaureate level pharmacotherapeutics, health assessment across the lifespan, pathophysiology, and health care policy and economics. The core courses lead to specialty courses with specific prerequisites as necessary. Core courses for all options include: N517 Foundations of Pharmacotherapeutics, N550 Advanced Health Assessment, N560 Advanced Physiology and Pathophysiology, and N553 Financing and Budgeting of Health Care Systems.

Additional common courses for the FNP and CNS students include: N521 Theory and Research in Nursing, N531 Rural Health Nursing, N552 Administration and Organization of Health Care Systems, N555 Concepts of Family Care, and N565 Principles of Population-Based Health. These courses build on baccalaureate level research, statistics, community health, and family courses. CNL students take N505 Evidence-based Practice that also builds on baccalaureate level research.

Advanced nursing roles content is integrated into FNP and CNL clinical courses. Content in rural, community-focused care, ethics, communication, and the role and scope of practice are threaded throughout the master's courses and build on baccalaureate level community health, ethics, communications, and introduction to professional nursing courses. CNS students take N522 Advanced Practice Nursing Roles and Issues, a course that builds on the baccalaureate level introduction to professional nursing roles and issues course.

All of the master's options and certificates (with the exception of the nursing education certificate) require clinical practice hours in excess of those required for eligibility for certification. Each clinical option requires a series of integrated clinical courses spread throughout the curriculum. Each option also has a culminating clinical experience. Students who take the nursing education courses have the option of completing a supervised teaching experience. Faculty decided to make the teaching experience optional as the full-time master's students stated that requiring this experience inhibited them from taking the education courses because it was not possible to fit the additional practice time required into a schedule already packed with clinical and classroom hours.

Degree seeking students have the choice of completing a thesis or a professional project. These students must successfully pass an oral comprehensive exam in addition to the thesis/project and the required coursework. The plans of study for the clinically oriented specialty options are in Appendix J as is the plan of study for the education certificate.

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

Both baccalaureate and master's program curricula are evaluated on a regular basis. The Undergraduate Academic Affairs Committee (UAAC) has overall responsibility for the baccalaureate curriculum and the Graduate Academic Affairs Committee (GAAC) has overall responsibility for the master's curriculum. Curriculum evaluation occurs at several levels: the course level, the curriculum level, and the overall program level. At the course level, both UAAC and GAAC review the master resource outlines (MROs) for each course in the curriculum at least every three years and more frequently, if needed. MROs include the course number, title, credits, prerequisite(s), semester(s) offered, course description, course objectives, recommended theoretical content and concepts, and examples of learning activities. The specific teaching-learning practices of the faculty are included in the individual faculty outlines (IFOs) that faculty submit to UAAC or GAAC for any new course or at the end of the second semester that a new faculty member teaches the course. The IFOs, as well as the MROs, are regularly reviewed by UAAC and GAAC. As a part of the IFO and MRO review process, UAAC and GAAC generally seek feedback from the faculty members that teach each course. With the recent change in the baccalaureate curriculum, UAAC requested that both faculty and students complete the new course evaluation forms as each course was taught for the first time. Evaluation feedback was summarized by the chair and brought to the committee for review and recommendation (data available on-site). Similarly, GAAC requests that faculty complete new course evaluation forms for all new master's level courses.

Faculty members develop course syllabi based on the MROs. Syllabi contain the specific teaching-learning practices for each individual course: course description, course objectives, and descriptions of course expectations including course assignments, grading criteria and process, evaluation tool, and a short bibliography.

Campus directors on each campus review syllabi with individual faculty members, usually during the annual review process.

At the curriculum level, faculty members have initiated regular course and level meetings. These meetings serve several purposes at the baccalaureate level: they ensure consistency of application of the MRO, they provide faculty the opportunity to share innovative/effective teaching strategies, and they provide faculty the opportunity to discuss gaps and overlaps in content or experiences across curricular levels and across specialty areas.

At the programmatic level, the college evaluates the curriculum through the use of surveys with graduating seniors, employers, and alumni and through discussion with the college's advisory committee. The programmatic evaluation is discussed more fully under Standard IV.

Several processes are used to evaluate teaching /learning practices including administrative and peer review, student evaluations of faculty, student and faculty evaluation of new courses utilizing the new course evaluation forms, evaluation of distance delivery technology by students and faculty, exit surveys of graduating seniors in the baccalaureate curriculum, exit interviews of graduating master's students, and alumni and employer surveys (data available on-site). Many of the baccalaureate courses and all of the master's courses are offered through distance delivery. The college has a long history of delivering nursing coursework to baccalaureate and master's students at significant distances from the main (Bozeman) campus. In fact, nursing is seen as the leader on the MSU campus in this effort. Over time, the specific modality of delivery has changed based on evaluations by students and faculty, the availability and reliability of new technologies, and the type of program being offered.

Following are examples of revision to the curriculum and teaching learning practices that have been made to ensure the students achieve the expected learning outcomes. First, in the two years since the current baccalaureate curriculum has been completely implemented, two major changes have been made based on a review of course evaluations from both faculty and students, a curriculum mapping summary, and faculty discussions of the most effective ways to meet the level and outcome objectives: 1) addition of a one credit "hand's on" component to the nursing research course; and 2) the junior and senior care management courses were combined into a single senior-level care management course. These changes were implemented in Spring 2007 and Fall 2007 semesters respectively. The change in the research course resulted in that course

being designated as a research course for the Core 2.0 requirements. Meeting the research requirement of Core 2.0 had been particularly problematic for students who completed nursing coursework at the distant sites as such courses were not available at most of the feeder institutions. The consolidation of the two care management courses was based on student and faculty evaluation of content redundancy and resulted in “freeing up” the credit needed to expand the research course, thus the curriculum was improved and still remained within the 120 semester credit limit for baccalaureate degrees set by the Board of Regents.

The master’s program example involves a change in teaching-learning strategy rather than curriculum. While the program has always been a state-wide program and considered a distance-delivered program, students still had to attend classes at one of the four campuses. In response to the need to have the program available to students who were not conveniently located near one of the distant campuses, and so meet the statewide land-grant mandate, the faculty has increased the use of Internet based course delivery and also allows telephone hook-ups for the intensive course meetings rather than requiring Polycom connections.

III-E. The didactic and clinical teaching-learning practices and learning environments support the achievement of student learning outcomes.

Student learning outcomes are achieved through the use of a variety of teaching-learning practices in both didactic and clinical settings. In both the baccalaureate and master’s programs, a variety of delivery methods are employed such as face-to-face classes, use of interactive video across campuses, teleconferences across campuses and beyond, as well as Web based (WebCT) delivery. In any of these formats, one may find traditional lectures and discussions as well as more active learning opportunities such as group work, presentations, simulations, case studies, etc. The learning environment provided by the faculty is supportive of student learning and success. Clinical learning environments vary from campus to campus, but faculty at each campus make the best use of the available clinical sites and augment those experiences with simulations in the college laboratory. Each campus has simulation equipment as well as more traditional college skills laboratory equipment to provide the best possible clinical education. Student computer laboratories are also utilized for access to Internet courses for students who may not have access from their homes.

Enrollments in most clinical nursing courses are small with faculty/student ratios of no more than 1:10 and generally 1:8 in clinical practice sites in upper division course sections and 1:6 in master's program clinical sections. Didactic classrooms typically have anywhere from eight to 40 students in the upper division nursing courses of the baccalaureate program. Lower division nursing courses may have up to 100 students, but are typically broken into sections of no more than 25 students, especially for Web based courses. Master's level theory courses are generally capped at 25 students. Faculty members are able to provide more individual attention to students within these small classes, providing a supportive learning environment and one-on-one interactions as appropriate. In addition, each student from pre-nursing through the master's program is assigned an academic advisor in the CON and is able to meet with and discuss various opportunities and concerns as needed.

Analysis of exit surveys and positive results on national licensure and certification examination pass rates provide evidence of a supportive environment in both the baccalaureate and the master's programs. All students are provided with a face-to-face orientation to the curriculum, the college, and to distance technology (WebCT) at the beginning of the program. Baccalaureate students receive orientations at the beginning of each new semester. Master's students are required to attend a face-to-face orientation at the beginning of their first fall semester. At this orientation a graduate program handbook and a clinical manual for the appropriate master's option are provided. Additional orientation for master's students is available in subsequent years for those who choose to attend.

An online virtual support group is available to master's students and includes a chat room and pertinent educational, career, and professional resources. All master's students complete clinical rotations in their home communities or within a reasonable distance with a local preceptor and faculty supervisor. In 2007, each of the college's instructional sites acquired simulation mannequins (Sim Man/Sim Baby) to supplement and complement clinical experiences at both the baccalaureate and master's levels. Master's students also have the opportunity to work as graduate teaching assistants (GTAs) and /or may serve as active members of faculty research teams. Baccalaureate students are often able to work on faculty research teams as well through the Undergraduate Scholars Program (USP). All of these opportunities provide a learning environment that supports the success of students in achieving student learning outcomes.

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

The internal and external communities of interest have been identified in Standard One, Key Element I-C. The college's advisory council that meets once each semester, and the Montana State Board of Nursing are two major external communities of interest that have been engaged in the review and feedback process of the curriculum and teaching-learning practices for the baccalaureate program. Master's program proposals and changes have also been taken to the advisory council. For example, all proposed curricular changes, program updates, purchase and use of simulation equipment, changes in delivery methods, and intensive schedules have been presented and discussed in these meetings and feedback solicited. The Montana State Board of Nursing is apprised of all proposed changes in the baccalaureate curriculum, progress toward goals, changes in policies, faculty and clinical agencies through the annual report required by the Board.

The internal communities of interest have also been involved in many changes including curriculum and policies, the assessment and outcomes process, and the university approval process for all courses and new options. Nursing students have been involved in UAAC and GAAC meetings and UAAC and the Student Forum share information and minutes. The curriculum and teaching learning practices in both the baccalaureate and master's programs, including the use of distance technologies, reflect the needs of students and stakeholders from this large rural state. The curricula have been informed by information from advisory committees, regular meetings with clinical agency personnel, faculty task forces addressing specific curricular or teaching/learning issues, and needs assessments. Other needs and expectations of students are solicited and addressed through representation on UAAC or GAAC. Students volunteer to serve as non-voting members of UAAC and GAAC where they speak on behalf of themselves and their classmates. Their input is requested and appreciated to provide the student perspective on all issues and discussions.

Standard III: Analysis and Discussion

Strengths:

- The college is viewed by the university as a leader in distance delivery of baccalaureate and master's coursework that utilizes a variety of modalities including face-to-face, interactive video, teleconferencing, and Internet.
- Faculty members utilize a wide variety of teaching-learning strategies and distance delivery modalities to create an active learning environment and address multiple learning styles. These strategies and modalities include Internet based courses, interactive video, face-to-face, use of preceptors, skills/simulation/computer laboratories, clinical experiences, one-on-one advising/mentoring.
- The implementation of Core 2.0 in Fall 2004 improved the quality of the liberal education component of the baccalaureate program and made it possible for every student to have an undergraduate research/creativity experience, and to enroll in a diversity and contemporary issues in science course. The college made it possible for students to complete the research/creativity requirement by revising the nursing research course rather than requiring students complete an additional course to meet the requirement.
- The clinical component of both the baccalaureate and the master's programs is strong. Graduates of the baccalaureate program have a total of 1035 clock hours of clinical experience within the required curriculum. All graduate program options exceed the number of clinical hours required for eligibility to sit for the national certification boards.
- The faculty as a whole want to be, and are, involved in every aspect of the development, evaluation and revision of the baccalaureate and master's curricula. Faculty are encouraged to review and update MROs and courses as needed following discussions in regularly scheduled course faculty meetings. Faculty are committed to assuring that all changes are needed, relevant, and appropriate to the level of student.
- Clear statements of expected student learning outcomes are found in the baccalaureate and master's MROs, IFOs, and course syllabi. MROs are evaluated at least every three years for relevancy and fit with national standards and current nursing practice. IFOs are evaluated for fit and congruence with the MRO when a new course is taught or a change in faculty assignment is made. Course syllabi are reviewed regularly and updated as needed for currency and relevancy as well.

- Many faculty members teach or have taught in both the baccalaureate and master's programs; thus the faculty members have a sound knowledge base of baccalaureate competencies upon which to build the graduate program curricula and knowledge of the competencies needed to undergird a strong master's program.
- Teaching-learning practices for the master's program are planned based on input from geographically distant students who wish to learn in place. Strategies, instructional schedules, and the availability of part-time study are also based on the needs of the target population.

Areas for improvement and action plan:

- There is a need to formalize the use of baccalaureate course faculty meetings to more fully integrate course faculty into curricular evaluation and continuous improvement efforts.
 - Course meetings will be held each semester, alternating between within course meetings and cross course meetings.
- There is a need to continue to improve the effectiveness and efficiency of distance delivery modalities and pedagogical strategies for both the baccalaureate and master's programs.
 - Workshops and in-service opportunities will continue to be pursued to assist faculty and increase the effectiveness of the distance delivery of courses. Faculty will be encouraged to attend these programs and to attend the course management system updates offered by the college or by the Burns Technology Center.
- The small number of students enrolled in the CNS program is a challenge to nursing faculty in terms of developing appropriate teaching-learning practices.
 - The CNS option will be placed on moratorium. This will provide a three-year window to assess the continued need for this option within the graduate program.
- There is a need to improve the use of course evaluation summaries by the baccalaureate and master's program faculty to further improve the courses and the curricula as a whole. Returning the summarized evaluation data to faculty

- can be a lengthy process thereby delaying effective and efficient curricular review and revision.
- A structured annual agenda for UAAC and GAAC will be developed to include designated times to analyze and disseminate summarized evaluation results.
 - Although the AACN Master's Essentials document defines core curriculum content, it is less clear within the MSU master's program what areas faculty believe should be contained in separate core courses and what can be integrated in courses as core content.
 - The Associate Dean for Research and Graduate Education and the chair of the GAAC will host a retreat for faculty teaching in the graduate program to discuss this issue and bring forth a recommendation to the Faculty Organization.

**STANDARD IV. PROGRAM EFFECTIVENESS:
STUDENT PERFORMANCE AND FACULTY ACCOMPLISHMENTS**

The program is effective in fulfilling its mission, goals, and expected outcomes. Actual student learning outcomes are consistent with the mission, goals, and expected outcomes of the program. Alumni satisfaction and the accomplishments of graduates of the program attest to the effectiveness of the program. Actual faculty outcomes are consistent with the mission, goals, and expected outcomes of the program. Data on program effectiveness are used to foster ongoing improvement.

The College of Nursing has a well-articulated master evaluation plan (Appendix E) that addresses all aspects of college and program evaluation, time frames, individuals or groups responsible for that component of the evaluation, instruments used, and feedback loops.

IV-A. Student performance is evaluated by the faculty and reflects achievement of expected outcomes. Evaluation policies and procedures are defined and consistently applied.

Course objectives as specified in each MRO provide the basis for the evaluation of theory and clinical learning in both the baccalaureate and master's courses. Specific clinical objectives that draw from the course objectives are specified in the course syllabi. Students must demonstrate that they have met all course objectives in order to pass each course. Clinical performance is graded on a satisfactory or unsatisfactory basis; didactic performance receives letter grades. Baccalaureate students must achieve at least 70% in the didactic portion to pass the course, although faculty members can set higher standards if they feel it is appropriate; there is not a set percent for passing within the master's courses. Satisfactory performance is required in the clinical as well as didactic portions of all clinical courses in both the baccalaureate and master's programs in order for the student to pass the course. If the student fails either portion of a course, the student is required to repeat the entire course. Specific course requirements and mechanisms for evaluation are published in the individual course syllabi. The college has a number of policies that pertain to student performance in clinical and didactic

courses that are published on the policy and procedures section of the college Web site (and on the accompanying disk), specifically policies C-1, C-2, C-14, D-3 and D-8.

In the baccalaureate program, students move from individual course objectives/student learning outcomes toward both the foundational level as well as the terminal program outcomes. Achievement of foundational level objectives is ascertained by the student's successful completion of the lower division nursing courses, all pre-requisite courses, and maintaining or exceeding a MSU-Bozeman cumulative gpa of 2.5. Achievement of terminal program outcomes is assessed through successful completion of the curriculum, success on the NCLEX-RN, and self-evaluation by the graduating seniors, alumni, and employers on EBI surveys.

The grading scale for Montana State University is published in the Montana State University Course Bulletin and permits the use of +/- grades. Individual faculty members may decide whether to use or not use +/- grades as long as they indicate within the course syllabus the grading system to be used, the criteria for each of the grade levels, and that they apply these criteria to all students in the course.

Clinical evaluations are important in the College of Nursing programs. Clinical objectives are specified for each course; students are given feedback on how well they are meeting those objectives on a regular basis. At minimum, faculty must provide students with both a mid-term and a final evaluation in the clinical portion of a course. If students are failing to meet clinical objectives at mid-term, they are so informed and are given a specific timeframe in which to demonstrate competencies in the deficient areas before the end of the semester and the final clinical evaluation.

The college administers the Assessment Technologies Institute (ATI) Comprehensive Assessment Test to all graduating seniors. While this is not used as a measure of curricular success, this test does have predictive ability in terms of NCLEX-RN, and so can provide the student and faculty an assessment of the student's readiness for the licensure examination. The results of each administration of the ATI are shared with the campus directors and with UAAC for their review. Students receive individual results to help them prepare for NCLEX-RN. From an overall curricular point of view, no particular patterns of student performance or deficiency have been noted.

In the master's program, students move from individual course objectives/student learning outcomes toward both the individual option outcomes and the overall master's degree outcomes. Students are evaluated at the end of each course and receive an appropriate letter grade. Thesis progress is evaluated using pass/fail grades. Faculty

members generally develop a written contract with the student to specify expectations and benchmarks for progress on the thesis or project.

Successful achievement of expected clinical outcomes for the particular master's option is evaluated by faculty and preceptors at the completion of the final clinical experience. When preceptors are used in clinical courses, they provide both formative and summative data to the faculty member for inclusion in the student's clinical evaluations.

Achievement of the overall master's program outcomes is assessed by success on the comprehensive examination, acceptance of the professional project or thesis, by success on national certification examinations, and through data from exit interviews or surveys with graduating students.

IV-B. Surveys and other data sources are used to collect information about student, alumni, and employer satisfaction and demonstrated achievements of graduates. Student outcome data include, but are not limited to, graduation rates, NCLEX-RN pass rates, certification examination pass rates, and job placement rates, as appropriate.

A variety of surveys and other data sources are used to collect information about program satisfaction and achievements of graduates.

For the ***baccalaureate*** program, Educational Benchmarking, Incorporated (EBI) Undergraduate Nursing Education Exit Assessment Surveys have been used as a satisfaction tool for graduating seniors since 2002. This tool measures 11 program factors and provides comparisons with six peer institutions, all programs in the same Carnegie Classification, and all participating programs in the nation. It also gives graduating seniors the opportunity to share their perceptions of how well they feel they were prepared at graduation in relation to the expected program outcomes. The results are shared with the administrative team and reviewed by the UAAC each year. Results have also been shared with the college's advisory council, the university Assessment and Outcomes Committee, and the State Board of Nursing. MSU consistently ranks high on development of professional values and lower on satisfaction with facilities and administration, although no scores are at the unsatisfactory level on this survey. A summary of the EBI results for the past 5 years is found in Appendix K.

In summer 2006, the EBI on-line survey for baccalaureate alumni and employers was administered, however, the response rate from employers was so poor that no data

analysis was possible. Difficulty in obtaining current e-mail addresses of alumni reduced the usefulness of that aspect of the survey, and led to a very small number of respondents. Prior to using EBI, the college used an in-house survey that was sent by regular mail to alumni and employers every other year. The results from this survey were equally disappointing with low participation, especially from employers. However, employers who did respond were generally satisfied with the baccalaureates graduates and most alumni were satisfied with their preparation for professional nursing practice. Montana State University conducts an on-line satisfaction survey of all graduating seniors. The College of Nursing has obtained data for the nursing graduates of 2005-06 and 2006-07. Again, a problem with the data is that the response rate was low. See Appendix L for a copy of survey tools/summarized results.

While the ATI results (discussed under the previous element) are analyzed by student and by campus; EBI results are provided for the college as a whole, thus it is very difficult to know how to interpret the EBI data for program improvement – are dissatisfactions spread across all five instructional sites, are they grouped, are some items more problematic on some campuses than others? Follow-up work needs to be done to determine what actions, if any, are needed, and if so, where.

NCLEX-RN scores for the institution, as well as the state and the nation, are provided by the State Board of Nursing each quarter. The Board of Nursing no longer provides information on each test taker (that is individual pass/fail determination); they simply provide aggregate rates for the college as a whole. Thus, it is very difficult to determine correlations between such things as gpa in pre-requisites, trends by individual instructional site, etc. In effect, we are not able, except through anecdotal information, to be able to add the dependent variable (P or F on the NCLEX-RN) to our data base! The college subscribes to the program reports from Mountain Measurement, Pearson VUE, and The National Council of State Boards of Nursing (NCSBN). This analysis, an aggregate analysis for all of the graduates of the college in the time frame for that analysis, is obtained twice a year and contains detailed performance data based on the NCLEX-RN Test Plan. Again, because of the aggregate nature of the data, it is not possible to use these data to determine whether issues are a function of the whole curriculum, of one instructional site, or other factors. The NCLEX-RN statistics and analyses are shared with campus directors and with UAAC for their review. As the pass rates are generally among the highest in the state and well above the national average, the college considers them to be evidence of the quality of the program. If the pass rate

drops significantly or there is a negative trend in the pass rate, the administrative team reviews the data and determines if the change is a function of NCLEX-RN test adjustment or a curricular or student problem. Table IV-1 shows the pass rates for the past 3 years. NCLEX-RN success rates are also shared with the college's advisory council on a regular basis and summary information is included in brochures and on the college Web site.

Table IV-1 Performance of First Time Candidates on the NCLEX-RN, 2005-2007

Year	# of Candidates	% Passed MSU	% Passed MT	% Passed US
2005	137	88.32	87.42	87.29
2006	192	93.23	85.01	88.11
2007	172	91.86	83.29	85.47

The college defines the on-time graduation rate for the baccalaureate program as the percentage of nursing students who complete the program in four consecutive semesters of upper division coursework. The students who do not graduate on time are separated into two distinct groups: those who graduate late and those who never graduate. The graduation rate for the past five years is presented below in Table IV-2. The range of rates for on-time graduations has been from 79.33% during the 2003-04 academic year to 90.95% during the 2005-06 academic year. The percentage of students who have graduated late in any given academic year has ranged from a low of 2.0% during the 2003-04AY to a high of 10.06% during the 2004-05AY. While many students do return and successfully complete the program, the percentage of students who have dropped out and not returned is higher than that for the students who did return and completed the program. The goal of the college is for 80-90% of the baccalaureate students to graduate on-time and for those who do not graduate on-time, for them to graduate within an additional semester or two. Because the nursing program admits a full class of students each semester, and so the ability to readmit a student depends on attrition within the program, students who must stop out for any reason (personal or academic) must apply for readmission on a semester-by-semester basis. These students are placed on a prioritized list and are offered placements as they become available. There is no guarantee that the placement that becomes available will

be on the student's original upper division campus, thus some students chose to sit out for a semester or more in order to complete the program on the same upper division campus on which they started. At times students who have become semester-by-semester students because of academic failure wish to retake the course on another campus, again potentially lengthening the time to graduation as they may have to wait for an appropriate opening.

Table IV-2 Graduation Rates for Baccalaureate Program: Fall 2003 – Spring 2008

	2003-04AY	2004-05AY	2005-06AY	2006-07AY	2007-08AY
Students who did graduate on time	79.33%	81.13%	90.95%	88.52%	85.9%
Students who did not graduate on-time	20.67% (2.0% graduated late; 18.67% never graduated)	18.87% (10.06% graduated late; 8.8% never graduated)	9.05% (4.02% graduated late; 5.03% never graduated)	11.47% (4.91% graduated late; 6.56% never graduated)	14.13% (8.15% graduated late; 5.98% never graduated)

Analysis of retention data and reasons for delayed or non completion show that students leave or stop out for a variety of personal reasons (family, illness, finances), because of academic failure, and because once they are in the clinical setting, they determine that "nursing is not for me". To reduce the loss of students due to financial distress, the university has initiated a program of retention scholarships; also the Billings campus faculty has set up their own retention fund to assist students with short-term financial needs (e.g. rent or utility payment, purchase of food). The CO-OP program also has such emergency funds for their students.

The Career Services Office at the university surveys graduates each year in regard to employment in the profession, geographic location of employment, and starting salaries. The latest report from this office (graduates of 2007) indicates that of the baccalaureate respondents (69% response rate) 92% were working full-time in nursing, 4% were working part-time, 2% was unemployed. Seventy-six percent of the respondents were employed in Montana, an increase over the previous year. Over the past few years, the percent of baccalaureate nursing graduates who leave Montana for employment had been increasing, although this trend was reversed for the 2207 graduates. Consistently, nursing graduates are one of the groups with the highest

percentages of graduates obtaining employment in the state upon graduation. Though salaries remain relatively low in Montana compared with other states, graduates of the nursing major are earning among the highest salaries of all university graduates, (\$54,940 in 2007) usually second only to those in engineering. See Appendix M for employment and salary data.

For the *master's* program, satisfaction data have been collected through mailed surveys and most recently, exit interviews with program graduates. In addition retention rates, success on national certification examinations, advanced practice licensure, and employment rates are tracked.

Satisfaction data obtained from a summer 2005 EBI survey showed that FNP students ranked factors related to the curriculum and instruction (eg the capstone course, satisfaction with preceptors, and faculty responsiveness and role modeling) the highest; students were least satisfied with various aspects of preparation for clinical laboratory procedures such as X-ray and EKG interpretation. As a result, faculty members incorporated more preparation for clinical laboratory procedures within the FNP curriculum. In comparison to the peer institutions, MSU FNP graduates ranked MSU higher in the areas of role development and role knowledge. Several other changes have been made in the master's program based on feedback from graduating students. For example, a few years ago the FNP students reported that they were being disadvantaged in the job market because they completed their program at the end of the summer session. Beginning in Summer 2005, the college changed the structure of the curriculum to allow students to complete two required courses during the summer between the first and second year and thereby complete the program at the end of the second spring semester, rather than the end of the second summer session.

CNS graduates provided data regarding their satisfaction with the program through exit interviews. They indicated overall satisfaction with the program, but three areas in need of adjustment were identified. One related to the strong focus on primary care practice in the pharmacology courses, to the perceived exclusion of content important to CNS practice. This concern was shared with the appropriate faculty and changes were made to include more CNS specific content in those courses. The second concern was expressed by both FNP and CNS students and focused on the theory/research course. Graduates stated the course lacked appropriate rigor, and that the faculty member was not available to students and that the faculty member did not provide adequate feedback on assignments. These issues were brought to GAAC and

to the campus directors and changes in the course and the teaching assignments were made. The third change made in response to student input was the development of a full-time plan of study for the CNS option.

National certification examination pass rates are an indication of program quality. The pass rates are reported in two ways: by self-report and by the report from the ANCC or AANP certification organizations, if the number of graduates is large enough to generate a report. Since the FNP option was implemented in Fall 2004, all graduates who have sought certification have passed the AANP or the ANCC certification examination on the first try. All three graduates of the adult CNS option have passed the certification examination on the first attempt as did the single graduates of the nursing administration and the community/public health CNS options. To date, there have been no students who have completed the new CNL or certificate in nursing education options.

Graduation rates for the master's degree program are defined as the percent of students who complete the master's program within the six year timeframe allotted by the university for degree completion. The majority of students graduate within six years; there has not been a request by a graduate student in the master's program for many years for additional time to graduate, however students have dropped out of the program. Student retention rates have been reviewed on a regular basis. The students who have left the program did so primarily for personal reasons (eg family, health, financial); very few left because of academic or clinical difficulties. See Table IV-3 for graduate program retention rates.

Table IV-3 Graduate Student Retention/Graduation Rate past 5 years: 2003-2008

Graduate Option	2003-04AY	2004-05AY	2005-06AY	2006-07AY	2007-08AY
FNP	5/5 (100%) retained and graduated	10/10 (100%) retained and graduated	9/11 (81.82%) retained; 5/11 (45.45%) graduated; 4/11 (36.36%) anticipate graduation	14/15 (93.33%) retained; 9/15 (60%) graduated; 5/15 (33.33%) anticipate graduation	15/16 (93.75%) retained and anticipate graduation
FNP post-	1/1 (100%)	1/1 (100%)	NA	1/1 (100%)	1/1 (100%)

master's Certificate	retained and completed	retained and completed		retained and completed	retained; anticipate completion
Adult Health CNS	1/1 (100%) retained and graduated	2/2 (100%) retained and graduated	NA	3/3 (100%) retained in MN program: 2/3 (66.7%) retained in CNS option w/ anticipated graduation in Sp09; 1/3 (33.3%) transferred to CNL option.	NA
CH/PH CNS	NA	1/2 (50%) retained & graduated	0/1 0%	NA	NA
CNL	NA	NA	NA	NA	4/5 (80%) retained; 1/5 (20%) graduated; 3/5 (60%) anticipate graduation in Sp09
Program TOTAL	7/7 (100%)	14/15 (93.33%)	9/12 (75%)	18/19 (94.74%)	20/22 (90.90%)

Most of the graduates of the master's program take national certification examinations and seek employment in the area in which they were prepared to practice. The 2007 Office of Career Services survey of master's graduates (5 of 7 graduates responded) indicated that four were employed full-time in their field, and one was employed part-time. No one reported being unemployed. The CNS graduates reported an average salary of \$63,000. No data on salaries for FNP graduates was reported. See Appendix M.

IV-C. Program outcome data are analyzed to provide evidence of program effectiveness and are used to foster ongoing program improvement.

Outcome data are reviewed and analyzed by various constituencies within the college including the Undergraduate and Graduate Academic Affairs Committees, as well as the administrative team, to determine the effectiveness of the baccalaureate and master's programs. Summarized data are shared with the faculty, the college's advisory council, the university Assessment and Outcomes Committee, the State Board of Nursing, and others. The data are predominately positive, although occasionally, recommendations are made to improve program effectiveness and ongoing improvement in both degree programs. For example, as noted under Standard III, one credit was added to the research course in the baccalaureate curriculum as the result of several factors: on the EBI surveys it was noted that preparation for "evaluating the applicability of research findings for evidence-based practice" was consistently rated lower than was preparation for the other expected outcomes. It is hoped that with the "hands-on" research experience that was added, the graduates will feel more competent in evaluating and applying research to practice. Course evaluations have revealed that students and faculty feel that some of the 2 credit courses in the baccalaureate program are not valued as much as higher credit (clinical) courses. In response to this and the desire to add the additional credit to the research course, the two care management courses, each 2 credits, were combined into one 3 credit course. These changes were initiated in Spring 2007 and have not been formally evaluated yet. Examples of change in the graduate program based on the analysis of student survey data were provided in Key Element IV-B.

IV-D. Faculty outcomes demonstrate achievement of the program's mission, goals, and expected outcomes and enhance program quality and effectiveness.

The expected outcomes as they relate to faculty performance are elucidated in faculty job descriptions and are consistent with the mission and goals of the university and college: productivity and effectiveness in teaching, productivity and effectiveness in research and scholarly activity (for tenured/tenure track faculty) and participation in service to the university, the community, and the profession. As noted under Standard II, all faculty are evaluated annually by their campus director, tenure track faculty are also reviewed for retention during their third year of employment, and for tenure and promotion according to the college and university criteria and timelines. The overall

effectiveness of the college in achieving its goals of offering high quality education at the baccalaureate and graduate levels, enhancing the research and scholarly productivity of the college, and expanding interdisciplinary and collaborative activities within and beyond the university is assessed each year as a part of the dean's evaluation process and as a part of the assessment of achievement of the goals set forth in the strategic plan. Evidence of achievement of these goals follows.

High quality instruction is reflected by the curricular outcomes stated earlier in this report. It is also reflected in student's evaluation of instruction both of individual faculty members and in the EBI survey data that are available on site. In addition, in both 2005 and 2007, nursing faculty members (one from Bozeman and one from Missoula) received the Provost's Award for Undergraduate Research /Creativity Mentoring, a prestigious campus-level award. One of the Great Falls faculty members was the first nurse educator in Montana to seek and obtain certification in nursing education through the National League for Nursing, and another faculty member on that campus received the Elsevier Student & Faculty Award for Nursing Excellence; this is a student-nominated award.

Achievement in research and scholarly activity is evidenced by the ongoing record of publications, refereed presentations, grant submissions and grant awards. Research projects that currently are, or recently have been, externally funded include:

- ERRNIE (Environmental Risk Reduction through Nursing Intervention and Education). A project to learn how nurses can help families reduce environmental risks to children
- Women to Women. An innovative multidisciplinary telehealth project that provides a research-based model for conducting computer support groups and health education via personal computers for chronically ill rural women.
- Caring for Native American Elders. Community-based participatory research is used to study elder abuse and to offer a culturally anchored family conference intervention to address this complex and sensitive concern.
- Sheer Stress and Capillary Function. Microcirculation and control of water permeability is studied in intact, living capillaries using a frog model.
- Health Care Choices. Access to and quality of formal (allopathic) and informal (complementary) health care services for people living in sparsely populated rural areas.
- Sleep and Sleep Habits. The effect of strategic naps for night shift nurses.

- The Libby Study. A descriptive study to establish a more comprehensive understanding of the biopsychosocial health status and health service needs of persons exposed to Libby asbestos.

Additional research projects that are ongoing are:

- end-of-life decision making, especially in minority populations, in particular Japanese Americans and American Indians
- methylmercury exposure of American Indian women of child-bearing age
- incivility in nursing and nursing education
- family bereavement experiences after sudden cardiac death of a family member
- the effect of power that is embedded naturally within groups of clinicians impacts patient outcomes
- care of wounds and pressure ulcers, including risk and skin assessment, dressings, and nurse's knowledge.

Table IV-4 provides information on the number of publications and presentations made by faculty as well as the research expenditures by the college for the past three years. The university Office of Sponsored Programs lists all external funding as research expenditures. The significant drop in these expenditures in 2005-2007 reflects termination of two training grants and one research grant. Additional funding for both research and training grants was obtained for the 2007-2008 academic years; data for the 2007-2008 year will be available at the time of the site visit.

Table IV-4 Faculty Research and Scholarly Productivity 2004-2007

	<i>04-05*</i>	<i>05-06*</i>	<i>06-07*</i>
Research Expenditures	\$1,822,653	\$1,393,681	\$1,171,279
Publications +	81	62	70
Presentations +	70	65	64

*data available only from tenured/tenure track faculty

+may be duplicated count if paper or presentation had multiple authors

Students are also engaged in scholarly activity with faculty. Over the past three years, seven graduate students presented papers at professional meetings as did six baccalaureate students. Students were also involved as co-authors on faculty publications.

Faculty members are involved in a number of university, community, and professional service activities. Following are but a few of the many service contributions made by college faculty. One faculty member served as Vice President of Sigma Theta Tau International; two have served four year terms on the Montana State Board of Nursing. One of these served as president for two years, and also served on the NCSBN Examination Committee; three of the MSU faculty members are CCNE site-visitors. One nursing faculty member received the Good Samaritan Award from the Great Falls Rescue Mission for her work there; three faculty from Great Falls were recognized as nominees for the campus Excellence in Outreach Award for their work on the collaborative student health service in Great Falls; one faculty member from Bozeman was also recognized as a nominee for this award for her work with rural women with chronic illnesses. A faculty member from Billings is a member of the National Pressure Ulcer Advisory Panel; a faculty member from Missoula was president of the Montana Nurses' Association; and another from Bozeman hosts a monthly health-focused radio program on Yellowstone NPR. One faculty member from Missoula served on the Advisory Committee to the Board of Directors of Community Hospital in Missoula; another served on the Advisory Committee for the Institute of Medicine and the Humanities in Missoula, and was chairperson of the Research Committee for the American Association of Critical Care Nurses. Another Missoula faculty member served on the Governor's Pain Panel. One faculty member from the Missoula campus is a member of the Montana State Legislature. Faculty members serve on a variety of college and university committees as noted earlier as well as participating in community activities through service clubs and practice opportunities. Complete faculty curriculum vitae will be available on-site.

IV-E. The program has established policies and procedures by which it defines and reviews formal complaints; analyses of aggregate data regarding formal complaints are used to foster ongoing program improvement.

Annually a formal document regarding student conduct and instructional guidelines & grievance procedures is published and distributed widely by the Dean of Students Office. Formal complaints are typically submitted by students as grade grievances, appeals to a higher level when a decision has been made by an individual or group/committee that is not the desired one for the student, or referred to the College of Nursing by someone outside of the university who believes that they or someone in their

family have not been treated appropriately. For example, lack of transfer of courses from another institution, inability to obtain a desired upper division placement, or similar situations. Between Fall 2005 and Spring 2008, nine formal complaints were submitted and addressed. A summary of the formal complaints over the past three years is found in Appendix N.

Data regarding formal complaints, that is, complaints that are submitted in writing to an individual or group/committee in the College of Nursing and are not anonymous, are aggregated by the Associate Dean(s) and reviewed by the Executive Council each year to determine if complaints are handled in a consistent and appropriate manner and if any changes need to be made in the processes or the programs.

A recent example of a change that has been made to improve the programs based on a formal complaint is that all students must now submit official transcripts to the College of Nursing from every college they have attended, rather than being able to submit personal copies of transcripts. The Registrar's Office has always required official transcripts, however, the college accepted copies. In a recent situation, a student submitted a transcript from one school that contained grades from both the issuing school and another school the student had attended. There had been a transcribing error in this transcript resulting in the College of Nursing using incorrect grades in calculating priority points for upper division placement. This resulted in the student being offered an upper division placement in error. When the college attempted to rescind the placement, the student petitioned the Scholastic committee to retain the placement and the counsel of the university attorney was that the college not rescind the placement offer as it had already been accepted and the student had made the necessary arrangements to start for upper division coursework. As a result of this, all applicants for upper division must submit official transcripts from every school attended.

Standard IV: Analysis and Discussion

Strengths:

- The college's Master Evaluation Plan (Policy A-9) is based on the CCNE standards providing a framework for the collection, review, and analysis of data to assess and evaluate the effectiveness of the programs.
- All baccalaureate students are well prepared for the national licensing examination and employment as a registered nurse. The baccalaureate

- graduates consistently score well above the state and national averages for passage of NCLEX-RN.
- All FNP, CNS, CNL, and nurse educator students are well prepared for national certification examinations and employment in advanced nursing roles. All FNP and CNS graduates who have taken a national certification examination have passed on the first attempt.
 - Faculty members are productive in areas consistent with the mission and goals of the university and the college: high quality instruction, research and scholarly work, and service to the university, the profession, and the community.

Areas for improvement and action plan:

- Various assessment data have been collected throughout the past 10 years though not always in a systematic or consistent manner.
 - UAAC and GAAC are working to improve standardized data collection, review, analysis, and reporting mechanisms in order to provide recommendations for changes to improve the quality of the programs.
- While the college collects and analyzes a significant amount of pertinent data, the faculty has not set benchmarks against which to assess the level of the various accomplishments.
 - Appropriate faculty committees and the Executive Council will identify benchmarks against which to assess college performance. For example, target NCLEX-RN pass rate, target graduation rate, expected levels of scholarly productivity.
- Some data collected (e.g. EBI data) do not provide useful information.
 - Evaluate data obtained and determine the cost-effectiveness of continuing the existing data collection approaches.
- The college has no systematic way of determining which students did not pass NCLEX, therefore it is difficult to determine what might be associated with failure on this test.
 - The dean and associate dean will discuss this issue with the Montana Board of Nursing to see if specific information can be obtained that will permit more detailed analysis.