

Combined Assessment Reports
College of Health and Human Services
Fall 2015

- Dental Education
- Health Information Management
- Radiologic Sciences
- School of Nursing
- School of Public and Environmental Affairs
- School of Social Work

Major/Program: Dental Education

ASSESSMENT SUMMARY

Fall 2014-Spring 2015

What are the student learning outcomes in the **major/program**?

Goal 1. The Dental Education curriculum will create an educational environment that fosters critical thinking & prepares students to become lifelong learners.

Goal 2. To demonstrate professional competence by judicious use of written and oral communication skills, knowledge and clinical reasoning.

Goal 3. To prepare students for professional competence by creating a comprehensive clinical assessment of patients and the communities they serve.

Goal 4. To expose students to the professional organizational structure of their profession and political advocacy.

Goal 5. To ensure that patient preferences and their social, economic, emotional, physical, and cognitive circumstances are sensitively considered.

Which outcome(s) did you assess this academic year?

Goal 4. To expose students to the professional organizational structure of their profession and political advocacy.

Goal 5. To ensure that patient preferences and their social, economic, emotional, physical and cognitive circumstances are sensitively considered.

How did you assess the learning outcomes this academic year?

Goal 4. Students were required as a component of their clinical course to attend and participate in the local dental hygiene and dental assisting professional meetings. They were exposed to parliamentary procedures, how to critique legislative sessions, and how to develop scripts for writing formal, professional letters to newspapers, government organizations, legislators or lobbyists.

Goal 5. Completion of a *Process of Care Patient Case Project* which incorporated a patient's assessment of their social, economic, educational, emotional, physical, and cognitive circumstances through the use of the patient's medical and dental histories and the projects assessment questionnaire forms.

Please **summarize the data** you have collected this academic year.

Goal 4: Most students were satisfied with attending four (4) local professional meetings and strongly agreed that participation was beneficial to their learning of the structure of their profession, parliamentary procedures and for creating a script for writing formal, professional letters to legislators or lobbyists.

Goal 5: The students completed their *Process of Care Patient Case Project* and presented their findings as a case presentation to the class, being sensitive to the patient's social, economic, emotional, physical, and social well-being.

Please describe any programmatic changes you have made or are planning to make based on the data you have collected (action steps).

Goal 4: Continue to develop and arrange professional opportunities appropriate for achievement of program goals. No improvements needed at this time.

Goal 5: No changes recommended for the *Process of Care Patient Case Project at this time*. Students did a great job with the patient case and presentation.

Please report on the progress of your **action steps** reported in 2013-2014. See <http://www.iun.edu/campus-assessment/assessment-results/index.htm> for your previous unit reports.

Goal 4. The ability to value continual learning, professional development and self-evaluation and personal goals.

Provided educational seminars for faculty and students through the Northwest Indiana Dental Hygienists' Association and the Northwest Indiana Dental Hygiene Study Club.

****Note:** Please use this template to provide the responses to the prompts above.**

Department/Program: BS in Health Information Administration and AS in Health Information Technology		Chair/Director: Margaret A. Skurka	Assessment cycle/year: 2015-16
		Email address: mskurk@iun.edu	
Mission/Purpose			
To provide educational experiences designed to prepare students to achieve the Curriculum Competencies for Registered Health Information Administrators (RHIA's) and Registered Health Information Technicians (RHIT's) in accordance with the requirements as described by the Commission on Accreditation for Health Informatics and Information Management (CAHIIM) Programs.			
Student learning outcomes (Goals):			
<i>Ex. Program will produce well-prepared graduates. (Add more lines as needed.)</i>			
Goal 1. The HIM curriculum will include, at minimum, the required Student Learning Outcomes that include the experiences to enable students to meet the current entry level competencies of the profession.			
Goal 2. The Programs will demonstrate responsiveness to the needs of the communities of interest.			
Goal 3. Program graduates will demonstrate the HIM entry level competencies.			
Goal 4. Faculty will demonstrate current knowledge, skills, and qualifications and professional development in the content areas they teach.			
Goal 5. The HIM program will monitor retention of students currently enrolled in its programs			
Which Goals did you assess this year?			
We assessed fall 5 goals this year			
Assessment Summary			
Outcomes/Objectives	Measure(s)	Findings	Action Plans
<i>Ex. Students will demonstrate proficiency in oral communication.</i>	<i>Rubric applied to capstone project presentations.</i>	<i>60% of students scored a 3 or higher.</i>	<i>Provide tutorials and practice sessions for oral presentations once a month through the tutoring center.</i>
1. Curriculum reassessment done annually, align each year with CAHIIM requirements	CAHIIM annual report completed for AS and BS, student course evaluations, faculty feedback at annual faculty retreat, monitoring of board scores	BS program received first FULL accreditation; ongoing accreditation for AS program; Mission and philosophy of programs reviewed at 8/4/15 faculty retreat 0% full deficiencies in accreditation report; partial deficiencies acted upon and submitted; 100% accepted and accreditation granted.	Complete required accreditation reports yearly per request of CAHIIM; Transfer all courses in September of 2015 to Canvas for continuity for the students; Incorporation of Information Governance principles into the curriculum in a variety of courses. Program handbook updated to reflect accreditation and additional information added re: the advisory board. Will be done next year as well .Program Evaluation Plan reviewed and updated and that is yearly goal

2. Be responsive to the community served, all clinical sites, adjunct faculty, and graduates who come back as volunteers in the program with speaking and teaching.	Graduate survey and employer survey results evaluated	Issues identified to be taken to Fall 2015 Advisory Board of the HIM Dept; more clinical practice activities need to be performed in on campus labs; 100% of employers surveyed reports positive satisfaction for graduates hired. No weaknesses identified	Advisory Board meeting scheduled; Grad surveys and employer surveys to be done every other year. Survey Monkey utilized for grads. Benchmarks met so process is to keep on target.
3. 100% pass rate on RHIT and RHIA credentialing exams from AHIMA	Number of students successfully completing exam of those that write the exam	Pass rate of 88% achieved thus far from graduates of the Classes of 2015	Continue to encourage students to write the exam soon after graduation as we know that leads to a more successful chance of passing. Work on establishing job shadowing opportunities for coding.
4. Faculty will demonstrate current knowledge, skills in respective areas of instruction	Faculty current on CE requirements from AHIMA and positive students evaluations in area of course content	All faculty attend yearly meetings/conferences to keep current—AOE or AHIMA National or webinars. All faculty current in credential in the profession.	Attend yearly AOE and or AHIMA; maintain current volunteer work with AHIMA;
5. Monitor retention in the program with intention of reducing any attrition	Number of students that begin the program; Number of students graduating in 2 year period; reasons for attrition	Class of 2015 started with 29 students and 25 graduated. Reasons for not completing were 3 academic, and one relocation	Monitor class of 2016 in same manner. 30 started, currently at 27. In BS program, monitor years to complete as courses are on line and can be spread out of a number of years.

Analysis Questions

Ex. Based on your findings and action plans, what primary changes will you make for student learning? Program outcomes? Changes to the assessment process?

1. Continue to stress early testing for both exams; identify any “at risk” students early in the semester for counseling and advising. Work on job shadowing to increase exposure to work environment.
2. Increase assessment methods for oral and written communication. Students need additional exposure to writing professionally and communicating effectively. Add lab activity in final spring semester with immediate feedback and opportunity for re-write.

Major/Program: Radiologic Sciences

ASSESSMENT SUMMARY

Fall 2014-Spring 2015

What are the student learning outcomes in the major/program?					
Goal 1. Students will demonstrate clinical competence. (SLO 1-6)					
Goal 2. Students will demonstrate effective communication skills. (SLO 7-8)					
Goal 3. Students will demonstrate critical thinking and problem-solving skills (SLO 9-10)					
Goal 4. Students will demonstrate professional values. (SLO 11-12)					
Goal 5. Students will be involved in professional continuing education activities to instill a desire for lifelong learning. (SLO 13)					
Goal 6. Students will be involved in the community we serve. (SLO 14)					
Goal 7. The program will provide the medical community with individuals qualified to perform radiographic procedures. (15-19 Program Effectiveness Measures)					
Which outcome(s) did you assess this academic year?					
All SLO's are assessed on an annual basis and Program Effectiveness Measures are also updated annually as spelled out in our detailed Assessment Plan provided in the Summary of Data section below.					
How did you assess the learning outcomes this academic year?					
We use a variety of methods as described in our Assessment Plan below.					
Please summarize the data you have collected this academic year.					
Indiana University Northwest Radiography Program Program Assessment Plan and Results July, 2014-June 2015					
The Associate Degree Radiography Program offered by Indiana University Northwest is designed to prepare students for professional careers as radiographers in the medical field. By providing pertinent learning experiences, the program faculty strives to develop students' interests in lifelong learning through the professional societies and continuing education.					
Goal 1: Students will demonstrate clinical competence.					
Student Outcome	Measurement Tool	Benchmark	Timeframe/ Responsible Party	Results	Analysis/Action Plan

Students will demonstrate proper positioning skills.	R101 and R201 Lab Competency Evaluations	Overall class average will exceed 90% (45/50 points)	1 st Year – Fall and Spring Semester Lab Faculty 2015 n=36	2015 = 46.62 (R201) 2014 = 45.14 (R101) 2014 = 45.56 (R201) 2013 = 44.7 (R101) 2013 = 45.44 (R201) 2012 = 45.54 (R101)	Benchmark met for R101 except in Fall of 2013. The lab competencies are a good tool for early assessment of positioning skills. Monitor specific student grades to see if a few poor performers affected the average.
	R290 – Specific Competency Evaluation Form Section D 1-14	100% of graduates will pass the required number of specific competency evaluations with an overall class average that exceeds 85% in the Final Clinical course-R290.	2 nd Year – Spring Semester Clinical Faculty 2015 n=30	2015 = 89.26% 2014 = 87.86% 2013 = 89.78% 2012 = 88.17% 2011 = 91.76%	Benchmark met. The completion of all specific competencies is required to graduate from the program. Overall course average continues to be strong.
Students will demonstrate continued competence in positioning skills.	R290 General Competency Evaluation Forms Section D 1-14	100% of graduates will pass the required number of general competency with and overall class average that exceeds 85% in the Final Clinical course-R290.	2 nd Year – Spring Semester Clinical Faculty 2015 n=30	2015 = 89.26% 2014 = 87.86% 2013 = 89.78% 2012 = 88.17% 2011 = 91.76%	Benchmark met. The completion of all general competencies is required to graduate from the program. Overall course average continues to be strong.
Students will select appropriate technical factors.	R290 – Specific Competency Evaluation Form Section F 1-3	100% of graduates will pass the required number of specific competency evaluations with an overall class average that exceeds 85% in the Final Clinical course-R290.	2 nd Year – Spring Semester Clinical Faculty 2015 n=30	2015 = 89.26% 2014 = 87.86% 2013 = 89.78% 2012 = 88.17% 2011 = 91.76%	Benchmark met. The completion of all specific competencies is required to graduate from the program. Overall course average continues to be strong.

Students will demonstrate continued competence in selecting appropriate technical factors.	R290 –General Competency Evaluation Form Section F 1-3	100% of graduates will pass the required number of general competency with and overall class average that exceeds 85% in the Final Clinical course-R290	2 nd Year – Spring Semester Clinical Faculty 2015 n=30	2015 = 89.26% 2014 = 87.86% 2013 = 89.78% 2012 = 88.17% 2011 = 91.76%	Benchmark met. The completion of all general competencies is required to graduate from the program. Overall course average continues to be strong.
Students will evaluate the quality of radiographic images and procedures.	R290 – Comprehensive Final Written Exam	Overall class average will exceed 85% on the first attempt.	2 nd Year Spring semester Course Instructor 2015 n=30	2015 = 87.13% 2014 = 86.07% 2013 = 87.34% 2012 = 85.58% 2011 = 87.95%	Benchmark met. Students continue to do well on the comprehensive final exam which emphasizes image critique. Preparation of this exam involves semester long reviews as a part of clinical labs.
Students will practice radiation protection.	RAD 260 Radiation Biology and Protection Final Exam Grades	Average score of 85% or higher	2 nd Year – Spring Semester Course Instructor 2015 n=30	2015 = 90.05% 2014 = 93.10% 2013 = 90.97% 2012 = 89.12% 2011 = 91.62 %	Benchmark met. While this is a cognitive tool, the faculties believe it is the foundation for safe practice.
	R290 - Specific Competency Evaluation Form E 1-2	100% of graduates will pass the required number of specific competency evaluations with an overall class average that exceeds 85% in the Final Clinical course-R290.	2 nd Year – Spring Semester Clinical Instructor 2015 n=30	2015 = 89.26% 2014 = 87.86% 2013 = 89.78% 2012 = 88.17% 2011 = 91.76%	Benchmark met. Clinical faculties regularly emphasize the importance of safe radiation protection practices and students are expected to demonstrate these skills on each competency evaluation. Exam competencies are revoked if safe practices are not followed. The completion of all competencies is required to graduate from the program.

Goal 2: Students will demonstrate effective communication skills.					
Outcome	Measurement Tool	Benchmark	Timeframe/ Responsible Party	Results	Analysis/Action Plan
Students will demonstrate written communication skills.	R202 Case Study evaluating a poor radiographic image	Class average on the case study will exceed 85%.	1 st Year – Spring Semester Course Instructor 2015 n=35	2015 = 88.26% 2014 = 85.42% 2013 = 86.13% 2012 = 85.38% 2011 = 85.75%	Benchmark met. This measurement seems to be a good measure of the students' writing ability. The case study is 8-10 pages and is the longest of the writing assignments in the curriculum.
	R205 Pamphlet	Class average on the pamphlet will exceed 85%.	2 nd Year – Fall Semester Course Instructor 2014 n=30	2014 = 85.4% 2013 = 82.76% 2012 = 83.96%	Benchmark unmet until this year. This is a new measurement tool that will need to be monitored. We may need to reconsider benchmark at 85% as a bit too high.
Students will demonstrate oral communication skills.	R281 Professional Skills Development Evaluation Item 3 a-e	Class average of 85%	1 st Year – Spring Semester Clinical Faculty 2015 n=35	2015 = 88.28% 2014 = 88.0% 2013 = 87.31% 2012 = 87.13% 2011 = 88.30%	Benchmark met. This measurement seems to be a good measure of the students' oral communication abilities.
	R205 Pamphlet Oral presentation	Class average will exceed 90%.	2 nd Year – Fall Semester Course instructor 2014 n=30	2014 = 96% 2013 = 95% 2012 = 93%	Benchmark met. This is a new measurement tool that will need to be monitored. A new evaluation form was developed. First groups have done well.
	R290 Professional Skills Development Evaluation Item 3 a-e	Class average of 85%	2 nd Year – Spring Semester Clinical Faculty 2015 n=30	2015 = 91.27% 2014 = 90.9% 2013 = 91.63% 2012 = 89.76% 2011 = 92.0%	Benchmark met. This measurement seems to be a good indicator of the students' oral communication abilities. When comparing first year to second year students, student skills show improvement.

Goal 3: Students will demonstrate critical thinking and problem-solving skills

Outcome	Measurement Tool	Benchmark	Timeframe/ Responsible Party	Results	Analysis/Action Plan
Students will detail procedural and technical adaptations for a trauma patient.	Critical Thinking scenario on a trauma patient	Class average on the R290 critical thinking scenario will exceed 85%.	2 nd Year – Spring Semester Clinical Instructors 2015 n=30	2015 = 88.63% 2014 = 83.79% 2013 = 89.28% 2012 = 89.12% 2011 = 93.68%	Benchmark met. This was a new tool added in 2011 and the class did very well. Benchmark at 85% seemed appropriate for this tool but 2014 class did not meet it. Monitor the specifics of the class grades to see if a few poor performers may have lowered the average.
Students will evaluate the quality of radiographic images and procedures.	R 290 Comprehensive Final Written Clinical Exam	Class average will exceed 85% on first attempt.	2 nd Year – Spring Semester Course Instructors 2015 n=30	2015 = 87.13% 2014 = 86.07% 2013 = 87.34% 2012 = 85.56% 2011 = 87.95%	Benchmark met. Students spend the spring semester preparing for this comprehensive image critique exam but know that they can retake the exam if they do not pass on first attempt. Continue to monitor.

Goal 4: Students will demonstrate professional values.

Outcome	Measurement Tool	Benchmark	Timeframe/ Responsible Party	Results	Analysis/Action Plan
Students will demonstrate appropriate professional values in the clinical setting.	R281 Professional Skills Development Evaluation Mid-term and Final average	Class average will exceed 85%	1 st Year – Spring Semester Clinical Instructor 2015 n=30	2015 = 89.18% 2014 = 88.48% 2013 = 88.17% 2012 = 88.34% 2011 = 88.2%	Benchmark met. The clinical faculties regularly monitor the overall professional skills of their students and this continues to be a good tool for assessing the students.
	R290 Professional Skills Development Evaluation Mid-term and Final average	Class average will exceed 85%	2 nd Year – Spring Semester Clinical Instructor 2015 n=30	2015 = 91.27% 2014 = 90.84% 2013 = 91.54% 2012 = 89.61% 2011 = 91.38%	Benchmark met. The clinical faculties regularly monitor the overall professional skills of their students and this continues to be a good tool for assessing the students. The average grade increases consistently from first to second year. The recent grads were a strong group and the increase class average reflects this.
Students will detail the ethical obligations described in the ARRT Code of Ethics.	R182 Critical Thinking Scenario on Professional Ethics	Class average will exceed 85%	1st Year – Fall Semester Clinical Instructor 2015 n=35	2014 = 90.64% 2013 = 88.6% 2012 = 87.59% 2011 = 91.29%	Benchmark met. This is a new assessment tool added in 2012 although the assignment is not a new one we believe it may be a good method to assess professional values. The process for completing the scenarios has changed to an in-clinical assignment rather than homework. The clinical faculties feel that the new process is a better evaluation method for critical thinking skills.

Goal 5: Students will be involved in professional continuing education activities to instill a desire for lifelong learning.

Outcome	Measurement Tool	Benchmark	Timeframe/ Responsible Party	Results	Analysis/Action Plan
Students will participate in professional continuing education.	R222 Student assignment to participate in the ISRT meeting or complete a directed reading assignment from the Radiologic Technology journal	90% of students will participate in a professional continuing education activity	2 nd Year – Fall semester Course Instructor 2014 n=30	2014 = 100% 2013 = 100% 2012 = 100% 2011 = 100% 2010 = 100%	Benchmark met. Although this benchmark is met, there is still faculty concern that students are more focused on getting the course points rather than participating in the activity. Students however do generally provide very positive feedback after returning from the ISRT meeting or doing a directed reading activity. Consider using an online Forum for student feedback which could be a graded assignment.

Goal 6: Students will be involved in the community we serve.

Outcome	Measurement Tool	Benchmark	Timeframe/ Responsible Party	Results	Analysis/Action Plan
Student will participate in community service activities.	R205 Student assignment to participate in an activity such as the Beast Cancer Walk	90% of students will participate in a community service activity	2 nd Year – Fall semester Course Instructor 2014 n=30	2014 = 100% 2013 = 100% 2012 = 100% 2011 = 100% 2010 = 100%	Benchmark met. Although this benchmark is met, there is still faculty concern that students are more focused on getting the course points rather than participating in the activity. Students do provide very positive feedback after being involved in a community service activity. Consider using an online Forum for student feedback which could be a graded assignment.

Goal 7: The program will provide the medical community with individuals qualified to perform radiographic procedures. (Program Effectiveness Measures)				
Outcome	Measurement Tool	Benchmark	Timeframe/ Responsible Party	Results
Students will pass the ARRT certification examination on the 1 st attempt.	ARRT Certification Exam 1 st Time Pass Rates	90% of graduates taking the exam will pass on the first attempt each year and 95% of all graduates will pass the exam during the most recent 5 year period.	Annually Program Director	2014 = 96.6% (29/30) 2013 = 100% (32/32) 2012 = 93.5% (31/33) 2011 = 94.4% (34/36) 2010 = 100% (41/41) 5-yr AVG = 97.1% (167/172)
Students will successfully complete the program in a three year time frame.	Program Completion Rate	75% of entering students will complete the program within three years.	Annually Program Director	2015 = 75% (30/40) 2014 = 75% (30/40) 2013 = 80% (32/40) 2012 = 82.5% (33/40) 2011 = 81.8% (36/44)
Employers will express confidence in the overall quality of graduates' skills.	Employer Surveys	80% of employer responses will indicate that graduates are above average or excellent for Overall Performance.	Biannually in Spring Program Director	2015 = 87.5% (28 of 32 responses) 2013 = 71.9% (23 of 32 responses) 2011: 57% (4 of 7 responses)
Graduate will express confidence in the overall quality of their skills.	Graduate Exit Survey	85% of graduate responses will indicated that they are above average or excellent for their Overall Performance	Last week of classes Program Director	Class of 2015 =96.6% (29 of 30 responses) Class of 2014 = 93.1% (27 of 29 responses) Class of 2013 = 96.9% (31 of 32 responses)
	Graduate Follow-up Survey	85% of graduate responses will indicated that they are above average or excellent for their Overall Performance	Annually 6-12 months after graduation Program Director	Class of 2014 = 100% (9 of 9 responses) Class of 2013 = 100% (19 of 19 responses) Class of 2012 = 100% (12 of 12 responses)
Of those pursuing employment, students will be gainfully employed within 12 months post-graduation.	Graduate Follow-up Survey and "Word of Mouth"	75% of graduate responses over the most recent 5 year period will indicate they found employment.	Annually 6-12 months after graduation Program Director	2014 = 100% (24/25) 2013 = 90% (18/20) 2012 = 92% (11/12) 2011 = 87% (20/23) 2010 = 84% (21/25) 5-Year AVG = 89.5% (94/105)

Please describe any programmatic changes you have made or are planning to make based on the data you have collected (action steps).

The Action/Analysis Section of the Plan described in the above section outlines details programmatic changes based on the data when appropriate.

Please report on the progress of your **action steps** reported in 2013-2014. See <http://www.iun.edu/campus-assessment/assessment-results/index.htm> for your previous unit reports.

The Action/Analysis Section of the Plan details the on-going progress of our programmatic assessment.

****Note:** Please use this template to provide the responses to the prompts above.**

Major/Program: Nursing

ASSESSMENT SUMMARY

Fall 2014-Spring 2015

What are the student learning outcomes in the **major/program**?

Old Curriculum

Outcome 1. A critical thinker who is able to demonstrate intellectual curiosity, rational inquiry, problem-solving skills, and creativity in framing problems.

Outcome 2. A competent provider of health care who assumes the multiple role dimensions in structured and semi-structured health care settings.

Outcome 3. A culturally competent person who provides holistic nursing care to a variety of individuals, families, and communities.

Outcome 4. A knowledgeable coordinator of community resources who facilitates individuals, families, and communities access to resources necessary to meet health care needs.

Outcome 5: A politically aware individual who participates in the profession and practice of nursing with a global perspective.

Outcome 6: An individual who practices within an ethical and legal framework of the nursing profession.

Outcome 7: An effective communicator who is able to share accurate information.

Outcome 8: A professional role model who promotes a positive public image of nursing.

Outcome 9: A responsible manager who balances human, fiscal, and material resources to achieve quality health care outcomes.

New Curriculum implemented Fall 2014

Outcome 1: A critical thinker who demonstrates intellectual engagement and uses evidence as a basis for clinical reasoning and decision making.

Outcome 2: A culturally sensitive individual who provides holistic individual-, family-, community-, and population-centered nursing care.

Outcome 3: A knowledgeable care coordinator who facilitates access to resources across the continuum of health care environments in order to meet the evolving health care needs of individuals, families, communities, and populations.

Outcome 4: An individual who understands and considers the impact of health care policy, finance, and regulatory environments on care delivery.

Outcome 5: An individual who embodies the professional identity of the nurse and translates the

inherent values of the nursing profession into the ethical and legal practice of nursing.

Outcome 6: An effective communicator who collaborates with interprofessional team members, patients, and their support systems for improved health outcomes.

Outcome 7: A competent care provider who is prepared to practice to the full capacity of the professional nurse role in diverse health care environments.

Outcome 8: An accountable leader and manager who applies principles of systems and organizational processes and who balances resources to promote quality care and patient safety.

Outcome 9: An individual who embraces and employs innovations in information management and technology in the delivery of quality patient care.

Which outcome(s) did you assess this academic year?

Old Outcome 1. A critical thinker who is able to demonstrate intellectual curiosity, rational inquiry, problem-solving skills, and creativity in framing problems.

New Outcome 1: A critical thinker who demonstrates intellectual engagement and uses evidence as a basis for clinical reasoning and decision making.

Old Outcome 2: A competent provider of health care who assumes multiple role dimensions in structured and semi-structured health care settings.

New Outcome 7: A competent care provider who is prepared to practice to the full capacity of the professional nurse role in diverse health care environments.

Old Outcome 7: An effective communicator who is able to share accurate information.

New Outcome 6: An effective communicator who collaborates with interprofessional team members, patients, and their support systems for improved health outcomes.

General Education Learning Outcome Principle 3: Critical Thinking, Integration, and Application of Knowledge: IU Northwest graduates will gather and assess relevant information, using abstract ideas to interpret it effectively and come to well-reasoned conclusions and solutions, testing them against relevant criteria and standards.

How did you assess the learning outcomes this academic year?

NCLEX-RN results

RN Comprehensive Predictor results

Critical thinking ATI results

Exit survey results

Simulation/OSCE surveys

Lasater data

Please **summarize the data** you have collected this academic year.

NCELEX: National pass rate 89.79%, IU Northwest SON results 94.00%.

RN Comprehensive Predictor results: The group mean for the BA-BS/BSN graduates 76.9%, and for the traditional BSN students was 75.4% which remains above the national mean of 68.3%. In the 2nd degree group 88.9% of IUNSON students performed above the national individual mean, in the traditional option 94.5% performed above the national individual mean.

Critical Thinking Exit results: The group mean for the BA-BS/BSN graduates 78.8%, and for the traditional BSN students was 73.7% which remains above the national mean of 70.3%.

Exit Survey results: 38/53 exit surveys were completed with 95% agreement (strongly agree or agree) for the 9 student learning outcomes. Only 71% of the students felt that the BSN program prepared them to be a politically aware individual.

Simulation/OSCE results: see attached

Lasater Data: see attached

Please **describe any programmatic changes you have made or are planning to make based on the data you have collected (action steps).**

We have implemented a new curriculum in Fall 2014 after 2 years of development. We based our decision for implementation based on the action step data we had gathered from 2012-2014. Attached is a report on the first year of implementation of the new curriculum with action for change described.

Please report on the progress of your **action steps** reported in 2013-2014. See <http://www.iun.edu/campus-assessment/assessment-results/index.htm> for your previous unit reports.

NCELEX: Use ATI standardized testing program to maintain pass rate for licensure.

RN Comprehensive Predictor results: Continue ATI program providing aggregated student learning outcome assessment data.

Critical Thinking results: Will continue to integrate simulation with OSCE throughout the program to ensure the application of critical thinking in clinical.

Exit Survey results: In B234 an assignment has been added to discuss advocacy on a population level. The students discuss policy implications related to socially determined health factors. They write a letter to a senator or representative supporting or disputing a bill. In H350 students will attend a lecture with the Indiana State Nurses Association Blayne Miley, JD, Director of Policy and Advocacy. He will discuss

the Affordable Care Act and the implications for nursing.

Simulation/OSCE results: Increase utilization of simulation in clinical rotation to meet unit strategic initiative. OSCE's used in didactic to observe meeting of clinical outcomes. Protocol has been developed for determining OSCEs passing scores. Student received grade for OSCE, and were remediated for below passing scores.

Lasater: Faculty members use the Lasater Clinical Judgment Rubric (LCJR) to measure the students' clinical judgment development over time. The LCJR is an evidence-based tool, based on the Tanner's Clinical Judgment Model that measures clinical judgment development over time in a simulated environment. The rubric has four domains, noticing, interpreting, and responding. There are 12 sub-domains. Trained faculty members evaluate the student in each of the subdomains with a scale from one to four scales. One is exemplary, two is accomplished, two is developing, and one is beginning.

****Note:** Please use this template to provide the responses to the prompts above.**

School of Nursing
The Objective Structured Clinical Evaluation (OSCE)
A Performance-based Assessment Integrated Across the Curriculum

The OSCE is an evidence-based multi-station, multi-modal performance-based assessment tool. Students rotate sequentially through the circuit of stations. The size and complexity of each OSCE depend on the level of the students. Faculty members who teach the didactic course and the corresponding practicum design the OSCE. The medical-surgical OSCEs are an end of course summative assessment that address program and course outcomes from both the didactic and practicum. Faculty members use the modified-Delphi method to determine the OSCE blueprint and complete the OSCE Master Grid. [See OSCE Blueprints](#)

The OSCE provides an opportunity for the nurse educator to assess the student in a simulated clinical environment. Students must complete predetermined critical actions to demonstrate understanding and application of core theory and procedural skills. Faculty members use the borderline method to determine the cut score.

The four-station OSCE in the sophomore year and the five-station Objective Structured Clinical Assessment (OSCA) in the junior year first semester include immediate feedback and remediation. The OSCA is a formative assessment and prepares the student for the summative end of course OSCEs administered in the second-semester junior year and the senior year.

Each station addresses didactic and practicum program outcomes, course objectives, course concepts, QSEN domains, and learning objectives. For the concepts, learning objectives, and QSEN domains alignment for the OSCE and OSCA stations [see the Master Grids in Faculty Simulation Canvases](#). The program and course outcomes for the OSCEs and OSCA are below.

S470 and S471 Senior OSCE

Program Objectives

- A critical thinker who is able to demonstrate intellectual curiosity, rational inquiry, problem-solving skills, and creativity in framing problems
- A culturally competent person who provides holistic nursing care to a variety of individuals, families and communities.
- An effective communicator who is able to share accurate information.
- An individual who practices within an ethical and legal framework.

Course Outcome

- Applies previous/current knowledge to new context and situations.
- Integrates cultural beliefs, values and practices of individuals, families, and communities when providing nursing therapeutics.
- Incorporates professional standards and statutory rules and regulations pertinent to nursing into individual nursing practice.
- Demonstrates accountability and responsibility for nursing judgments and actions.
- Uses information technology when facilitating communication, managing information data sets and seeking solutions to
- Communicates clearly and effectively with individuals, families, communities and other health care providers for the purpose of positively affecting care outcomes.

H361 and H362 Spring 2015 OSCE Master Grid

Program Outcomes

- A critical thinker who demonstrates intellectual curiosity, rational inquiry, problem-solving skills, and creativity in framing problems.
- An effective communicator who is able to share accurate information.
- A competent provider of health care who assumes multiple role dimensions in structured and semi-structured health care settings.

Course Outcomes

- Applies previously learned information to new situations.
- Individualizes nursing and medical regimens in consultation with members of the healthcare team, the individual, and family.
- Provides safe, effective, nurturing care that is consistent with the student's level of knowledge and skills, and promotes the health of individuals and families.
- Delivers established teaching strategies to individuals, families, and communities that promote learning, health, and illness prevention
- Individualizes nursing and medical regimens in consultation with members of the healthcare team, the individual, and family.
- Shares accurate information and ideas with health care team members
- Demonstrates awareness of how the communication patterns of self and others affect client care outcomes.

H343 and H344 Objective Structured Clinical Assessment (OSCA)

Program Outcomes

- A critical thinker who demonstrates intellectual curiosity, rational inquiry, problem-solving skills, and creativity in framing problems.
- A competent provider of health care who assumes multiple role dimensions in structured and semi-structured health care settings.
- An effective communicator who is able to share accurate information.

Course outcomes:

- Presents reasoned arguments to support stated views with increasing self direction.
- Uses standard approaches when seeking solutions to identified health care issues.
- Provides safe, effective, nurturing care that is consistent with the student's level of knowledge and skills, and promotes the health of individuals and families.
- Implements care strategies designed to reduce real or potential risk in targeted individuals and their families.
- Shares information and ideas with immediate team members.
- Differentiates therapeutic and non-therapeutic communication techniques in client-system interactions.

OSCE PASS RATES

Sophomore OSCE			
Year	Number	Passed	Passes with remediation
Summer 2012	16	16	N/A
Spring 2013	50	50	N/A
Summer 2013	20	20	N/A
Spring 2014	49	49	N/A
Summer 2014	18	18	N/A
Spring 2015	51	51	N/A
Summer 2015	16	16	N/A

Junior OSCE			
Year	Number	Passed	Passes with remediation
Spring 2015 4 Station (71	80.3%	19.7 % after drug calc. remediation

Senior OSCE			
Year	Number	Passed	Passes with remediation
Spring 2014 9 Station OSCE	30	80%	20%
Summer 2014 7 Station OSCE	16	93%	7%
Fall 2014 9 Station OSCE	24	83%	17%
Spring 2015 9 Station OSCE	31	70%	30%
Summer 2015 10 Station OSCE	18	94% passed Mean Score: 80.6%	6%

Clinical Judgment Development

IUN faculty members use the Lasater Clinical Judgment Rubric (LCJR) to measure the students' clinical judgment development over time. The LCJR is an evidence-based tool, based on the Tanner's Clinical Judgment Model that measures clinical judgment development over time in a simulated environment. The rubric has four domains, noticing, interpreting, and responding. There are 12 sub-domains. Trained faculty members evaluate the student in each of the subdomains with a scale from one to four scales. One is exemplary, two is accomplished, two is developing, and one is beginning.

In 2010, faculty members began using the LCJR. Scenario testing for each student level began in summer of 2013; [see Lasater scores in the Faculty Simulation Canvas](#). Faculty members assess students at the end of the sophomore year, junior year, and senior year. Assessing and documenting student's clinical judgment development provides evidence of partial achievement of Program Outcome 1: a critical thinker who demonstrates intellectual engagement and uses evidence as a basis for the clinical reasoning and decision making.

The following provides evidence toward partial achievement of Program Outcome 1

Second-Degree Graduate December 2015

	Sophomore	Junior	Senior
	N 20	N 19	N 18
Noticing	2.12	2.99	2.74
Interpreting	1.86	2.94	2.72
Responding	2.56	2.84	2.66
Reflection	2.34	2.97	2.66
Total Score	2.07	2.95	2.77

Traditional Students: Graduate May 2016

	Sophomore N 49	Junior N 49
Noticing	1.96	2.71
Interpreting	2.06	2.76
Responding	2.07	2.63
Reflecting	2.17	2.79
Total Score	2.06	2.72

Traditional Students: Graduate May 2016

	Sophomore N 49	Junior N 49
Noticing	1.96	2.71
Interpreting	2.06	2.76
Responding	2.07	2.63
Reflecting	2.17	2.79
Total Score	2.06	2.72

[Need: Second –degree: Graduates December 2016](#)

[Need: Traditional Students: Graduate May 2017](#)

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School of Nursing

Student Learning Outcomes					
PLAN			IMPLEMENTATION		
Component	Expected Level of Achievement	Frequency of Assessment	Assessment Methods	Results of Data Collection and Analysis	Actions for Program Development, Maintenance or Revision
<p>A190 Learning Strategies in Nursing</p> <p>Face to Face Course</p> <p>Before 2014 A190 was a required course based on Test of Essential Academic Skills (TEAS) results after admission decision. Students with a TEAS result in the lowest 20th-30th percentile required to take the course face to face.</p> <p>Old Curriculum SLO for course:</p> <ul style="list-style-type: none"> *Describe strategies that facilitate goal setting and time management. *Identify individual learning styles and study strategies. *Define and spell various medical terms. *Translate various medical abbreviations, prefixes, suffixes, and roots. *Organize textbook reading. *Practice active strategies to increase reading efficiency, rate, and comprehension. 	All students will complete course with a 73% passing grade.	Every summer session II	Final exam and final course grade	<p>2014 Exam Score means:</p> <p>Exam 1 78%</p> <p>Exam 2 90%</p> <p>Comprehensive Final 77%</p> <p>14 students passed course</p> <p>2013 Exam score means:</p> <p>Exam 1 80%</p> <p>Exam 2 87.8%</p> <p>Exam 3 87%</p> <p>Comprehensive Final 74.8%</p>	<p>2014 Final exam blueprinted to course objectives, mapped to program outcomes. Will consider adding dimensional analysis (DA) book, students struggled with just power point for DA.</p> <p>Student feedback and faculty discussion suggested adding a shorter version of A190 to the new curriculum and require this course</p>

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<p>*Apply a method of calculating dosages of medications commonly administered by nursing students.</p> <p>*Apply a method of taking lecture notes that are reliably accurate and effective.</p> <p>*Describe the use of APA format for student papers. Implement five strategies of the writing process.</p> <p>*Apply guidelines for answering multiple-choice exam questions.</p> <p>*Use the internet as a means of communication and a source of nursing knowledge.</p> <p>*Identify stressors common to all nursing students.</p> <p>*Describe the stress response, and its effects on psychophysiological/cognitive processes.</p> <p>*Develop a foundation for learning how to think critically in the context of daily life and nursing.</p>	<p>Graduation rate 80% for those testing into A190</p>	<p>3 and 6 years after starting the program</p>		<p>27 students passed course</p> <p>2012 Exam score means: Mid-term 89.7% Final 66.2%</p> <p>18 students passed course</p> <p>2 students failed course</p> <p>Graduation rates for students enrolled/not enrolled in A190: 2012: 55.6%/86% 2011: 89.5%/61.9% 2010: 94.4%/93.3% 2009: 75%/81.3% 2008: 86%/78.6%</p>	<p>for every student. Informal student feedback has consistently been that this course should be required for all students.</p> <p>Graduation rates of those (at risk students testing into A190) are generally as good or better than those not taking the course.</p>
<p>Online</p> <p>First time course required in summer 2014 in revised curriculum for all students not testing into the F2F.</p> <p>Revised Curriculum SLO for course:</p> <p>*Discuss effective strategies to reduce reliance on memory.</p> <p>*Describe contributions of standardization to safety.</p> <p>*Describe the cognitive and physical</p>	<p>All students will complete course with a 73% passing grade.</p>	<p>Every summer session II</p>	<p>Final exam and final course grade</p>	<p>2014 Exam score means: Exam 1 78.95% Exam 2 74.45% Exam 3 92.35% Exam 4 81.65%</p> <p>39 students passed course</p>	<p>Completed final exam blueprint, 2 exam questions needed revision based on exam statistics. Failures were related to students not completing timely work.</p>

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limits of human performance. *Describe expectations for comportment, communication, and ethical conduct. *Recognize areas for self-development as a health care team member.				4 students failed course 2 students withdrew from course	Students, who withdrew, left nursing program. Student feedback included need for DA book, not just power points, and workbook.
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Student Learning Outcomes					
PLAN			IMPLEMENTATION		
Component	Expected Level of Achievement	Frequency of Assessment	Assessment Methods	Results of Data Collection and Analysis	Actions for Program Development, Maintenance or Revision
B230 Developmental Issues and Health Revised Curriculum SLO for course: *Describe how patient/family values serve as a basis for evidence-based nursing practice. *Describe how diverse cultural, ethnic, and social backgrounds function as sources of patient, family, and community values. *Integrate understanding of multiple dimensions of patient-centered care: Patient/family/community preferences, values; Information communication, and education; physical comfort and	All students will complete course with a 73% passing grade.	Every fall in revised curriculum	1. Online Discussion Forums 2. Simulation (peer evaluation) <ul style="list-style-type: none"> a) Cultural b) End of Life 3. Community-based service learning (SL) (peer and faculty	2014 Insightful qualitative responses received. Avg. grade 98.5% 100% of students completed the learning simulation activity (a&b) Mean score for SL activity 99%	Require peer review of the online discussion question postings. Improve delivery of cultural and EOL class simulation activities. Improve delivery of service learning project (clearer description of objectives and

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<p>emotional support; involvement of family and friends.</p> <p>*Describe strategies to empower patients or families in all aspects of the health care process throughout the lifespan.</p> <p>*Demonstrate and understanding of the impact of physical and developmental changes on health outcomes.</p> <p>*Act with integrity, consistency, and respect for differing views</p> <p>*Explore ethical and legal implications of nursing practice and patient-centered care.</p> <p>*Demonstrate awareness of own strengths and limitations as a team member.</p> <p>*Describe impact of own communication style on others.</p> <p>*Demonstrate an understanding of how different styles of communication used by patients, families, and health care providers may impact health care.</p> <p>*Communicate with team members, adapting own style of communicating to needs of the team and situation.</p> <p>*Demonstrate commitment to team goals.</p>			<p>evaluation)</p> <p>4. Quizzes and Exams (includes Case Studies)</p>	<p>Mean quiz and exam grade 75.2%</p> <p>54 students passed course</p> <p>3 students failed course</p>	<p>offering of faculty support)</p> <p>Improve introduction to the online environment.</p> <p>Offer bi-weekly test taking sessions.</p> <p>Online discussions included with more case studies for immediate application of learned concepts.</p> <p>Learning activities and in class simulation included to promote team-based learning.</p> <p>Addition of a structured EOL learning simulation.</p> <p>Service learning partnerships will increase to allow more variety and support of student</p>
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<p>Old Curriculum SLO for course:</p> <p>1.2.1. Presents reasoned arguments to support stated views with consultation or guidance.</p> <p>1.6.1. Critiques nursing research and professional literature findings for applicability to common health problems.</p> <p>2.1.1. Examines own cultural beliefs, values, and practices.</p> <p>6.5.1. Shares information and ideas with student peers and faculty.</p>		<p>Every Spring in old curriculum</p>	<ol style="list-style-type: none"> 1. Online Discussion Forums 2. Simulation (peer evaluation) <ol style="list-style-type: none"> a) Cultural b) End of Life 3. Community-based service learning (SL) (peer and faculty evaluation) 	<p>2013 Insightful qualitative responses received. Avg. grade 98.74% 100% of students completed the learning simulation activity (a&b)</p> <p>Avg score for SL activity 98%</p>	<p>engagement. Clickers are used for all quizzes. Improved use of item analysis for exam validity. Major redesign of course content, delivery, and schedule based on new curriculum that will begin Fall 2014. Discussion forum design was improved. Based on student feedback the simulation will be continued. Addition of an EOL team based learning activity. Improve delivery of service learning project (clearer description of objectives and offering of faculty support) Require clickers for every quiz for</p>
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			<p>4. Quizzes and Exams (includes Case Studies)</p> <p>1. Online Discussion Forums</p> <p>2. Simulation (peer evaluation)</p> <p style="padding-left: 40px;">a. Cultural</p> <p style="padding-left: 40px;">b. End of Life</p> <p>3. Community-based service learning (SL) (peer and faculty evaluation)</p> <p>4. Quizzes and Exams (includes Case Studies)</p>	<p>Avg quiz/ exam grade 80%</p> <p>57 students passed course</p> <p>1 student failed course</p> <p>2012 Insightful qualitative responses received. Avg. grade 9.5/10</p> <p>98% of students completed the learning simulation activity</p> <p>Avg score for SL activity 95%</p> <p>Avg quiz/ exam/ case study grade 75%</p> <p>59 students</p>	<p>immediate quiz remediation. Case studies will be incorporated into the quiz/ exam.</p>
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				passed course	
				5 students failed	
Student Learning Outcomes					
PLAN			IMPLEMENTATION		
Component	Expected Level of Achievement	Frequency of Assessment	Assessment Methods	Results of Data Collection and Analysis	Actions for Program Development, Maintenance or Revision
B234 Promoting Health Populations SLO for Course: *Explains the role of evidence in determining best clinical practices for health promotion. *Describes how diverse cultural, ethnic, and social backgrounds function as sources of patient, family, and community values. *Explores common barriers to active involvement of patients in their own health care. *Identifies community resources available to patients and families that can assist them in meeting their health care goals. *Describes nursing roles in assuring coordination, integration, and continuity of care. *Describes how population health and outcomes of care are influenced by healthcare policy and finance. *Promotes an image of professional	All students will complete course with a 73% passing grade.	Every fall 2014 First time course was offered in revised curriculum	3 Examinations, One Final Exam 2 Presentations, In-class Assignments	2014 Exam score means Exam 1 76.64% Exam 2 80.96% Exam 3 79.2% Final Exam 88.75% Presentation Mean: 97% 55 students passed the course 1 student withdrew from the course	More points allocated for examination purposes. Less focus on presentations. One presentation per semester.

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<p>integrity, consistent with respect for differing views.</p> <p>*Explores ethical issues surrounding health promotion, inequities in health care distribution, and access to care.</p> <p>*Examines how the safety, quality and cost- effectiveness of healthcare can be improved through the active involvement of patients and families.</p>					
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Student Learning Outcomes					
PLAN			IMPLEMENTATION		
Component	Expected Level of Achievement	Frequency of Assessment	Assessment Methods	Results of Data Collection and Analysis	Actions for Program Development, Maintenance or Revision
<p>B220 Professional Nursing and Health Care</p> <p>SLO for Course:</p> <p>*Explain the role of evidence in determining best clinical practice.</p> <p>*Describe evidence-based practice including the components of research evidence, clinical expertise, and patient/family values.</p> <p>*Describe settings where care is delivered and regulatory environments that may impact care.</p> <p>*Describe scopes of practice and roles of healthcare team members.</p> <p>*Act with integrity, consistency, and</p>	<p>All students will complete course with a 73% passing grade.</p> <p>All students will receive an excellent or good on the oral presentation which also fulfills the</p>	<p>Every fall</p> <p>2014 First time course was offered in revised curriculum</p>	<p>3 Examinations with NCLEX style questions & In-class quizzes</p> <p>Oral presentation: Graded group role-play presentation in-class Graded group video on</p>	<p>2014 Exam score means Exam 1 81.43% Exam 2 77.83% Final Exam 74.99%</p> <p>Oral Presentation 100% of the students scored either excellent or good on the rubric designed for grading the oral presentation</p>	<p>Less team teaching</p> <p>Add another student presentation</p> <p>Increase number of examinations to four Increase points for quizzes</p> <p>More strategic placement of quizzes</p> <p>See course report and Dec 2014 minutes where</p>

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<p>respect for differing views. *Explain ethical and legal frameworks for nursing practice and patient-centered care. *Discuss principles of effective communication. *Assess own level of communication skill in encounters with peers, faculty, and interprofessional team members. *Describe impact of own communication style on others. *Demonstrate awareness of own strengths and limitations as a team member. *Recognize that nursing and other health professions students are parts of systems of care and care processes that affect outcomes for patients and families. *Describe strategies for learning about the outcomes of care in the setting in which one is engaged in clinical practice. *Explain why information and technology skills are essential for safe patient care. *Describe examples of how technology and information management are related to the quality and safety of patient care.</p>	<p>General Education requirement for Advance Oral Communication.</p> <p>Students will all complete Nursing Entrance Exam through ATI</p>		<p>therapeutic communication Oral team presentation</p> <p>IHI certified courses on communication, human factors, and safety</p> <p>ATI Entrance Exam</p>	<p>All students completed all IHI courses assigned</p> <p>ATI Entrance Exam results Group composite score is 67.2%. Group mean nationally is 68.0%. 55 students passed course</p> <p>1 student failed course</p> <p>1 student withdrew</p>	<p>course report is presented</p>
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Student Learning Outcomes					
PLAN			IMPLEMENTATION		
Component	Expected Level of Achievement	Frequency of Assessment	Assessment Methods	Results of Data Collection and Analysis	Actions for Program Development, Maintenance or Revision
<p>B221 Introductory Clinical Practicum Experience in Nursing</p> <p>SLO for Course:</p> <ul style="list-style-type: none"> *Value the need for continuous improvement in clinical practice based on new knowledge. *Describe how diverse cultural, ethnic, and social backgrounds function as sources of patient, family, and community values. *Discuss the principles of effective communication. *Examine nursing roles in assuring coordination, integration, and continuity of care. *Value seeing health care situations "through patients' eyes". *Recognize personally held attitudes about working with patients from different ethnic, cultural, and social backgrounds. *Seek information about quality improvement projects in the care setting. *Appreciate that continuous quality improvement is an essential part of the 	All students will complete clinical course with a passing grade (S) in all areas	<p>Every fall</p> <p>2014 First time course was offered in revised curriculum</p>	Clinical evaluation tool, in-clinical activities	<p>2014 100% of the students satisfactorily performed all nursing skills assigned to them in the clinical setting.</p> <p>100% of the students completed all assigned "in-clinical" activities.</p> <p>55 students passed course</p> <p>2 students withdrew</p>	<p>Only 2 groups at any one facility at a time. At the facility a day on patient transfers would be beneficial.</p> <p>First time course was offered.</p> <p>See course report and Dec 2014 minutes where course report is presented</p>

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<p>daily work of all health professionals.</p> <ul style="list-style-type: none"> *Describe the limits and boundaries of therapeutic patient-centered care. *Respect patient's right to access to personal health records. *Describe scopes of practice and roles of health care team members. *Recognize the contributions of standardization/reliability to safety. *Value own role in preventing errors. *Analyze differences in communication style preferences among patients and families, nurses, and other members of the health team. *Describe impact of own communication style on others. *Value different styles of communication used by patients, families, and health care providers. *Demonstrate awareness of own strengths and limitations as a team member. *Acknowledge own potential to contribute to effective team functioning. *Appreciate importance of teamwork, and intra- and inter-professional collaboration. *Respect the centrality of the patient/family as core members of any health care team. *Seek information about outcomes of care for populations served in care setting. 					
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<p>*Appreciate the value of what individuals and teams can do to improve care.</p> <p>*Describe factors that create a culture of safety (such as open communication strategies and organizational error reporting systems).</p> <p>*Explain why information and technology skills are essential for safe patient care.</p> <p>*Identify essential information that must be available in a common database to support patient care</p> <p>*Navigate the electronic health record.</p> <p>*Value technologies that support clinical decision-making, error prevention, and care coordination.</p> <p>*Protect confidentiality of protected health information in electronic health records.</p>					
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Student Learning Outcomes

Student Learning Outcomes					
PLAN			IMPLEMENTATION		
Component	Expected Level of Achievement	Frequency of Assessment	Assessment Methods	Results of Data Collection and Analysis	Actions for Program Development, Maintenance or Revision
B261 Pathophysiology and Pharmacology for Nursing Practice Revised Curriculum SLO for Course: *Describe human factors and other	All students will complete course with a 73% passing grade.	Every Spring/Summer 2015 First time		Spring 2015 96% of the traditional BSN students received a passing grade for the	Course was changed from B233 to B261. ATI Content exam for pharmacology

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<p>basic safety design principles (high-risk medication list, drug protocols) as well as commonly used unsafe practices (such as work-arounds and dangerous abbreviations).</p> <p>*Apply evidence-based pharmacological and pathophysiological concepts with clinical reasoning that influences medication interventions.</p> <p>*Describe social/cultural/ethnic/ influences on disease prevalence and treatment choices.</p> <p>*Explain how the safety, quality and cost effectiveness of medication regimes can be impacted through the active involvement of patients and families.</p> <p>*Examine common barriers to active involvement of patients in their own health management.</p> <p>*Describe how reporting systems promote a culture of safety.</p> <p>*Discuss potential and actual impact of national patient safety resources, initiatives, and regulations.</p> <p>*Examine nursing roles in assuring coordination, integration, and continuity of care.</p> <p>*Explore ethical and legal implications of nursing practice and patient-centered care.</p> <p>*Describe the benefits and limitations</p>	<p>Students will complete the Content ATI exam for Pharmacology and receive at least a level 1</p>	<p>course was offered in revised curriculum</p>	<p>Content ATI Exam for Pharmacology results</p> <p>Exams, Quizzes, in-class assignments</p>	<p>course. One student failed and 1 student withdrew.</p> <p>ATI results: Level 2 9%(5) Level 1 33% (18) >Level 1 57%(31)</p> <p>Exam score means: Exam 1 67% Exam 2 64% Exam 3 67% Exam 4 81% Exam 5 81% Final Exam 59%</p>	<p>was added as part of the final grade. Final Exam was blueprinted to course objectives. Course was presented in progression meeting May 2015, course report.</p>
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<p>of selected medication administration enhancing technologies (such as Computer Provider Order Entry, electronic Medication Administration Record (MAR), Bar-Code Medication Administration system, Automated Medication Dispensing system, and Smart pump technology). *Describe how technology and information management supports clinical decision-making, error prevention, and care coordination.</p> <p>B233 Health and Wellness Old Curriculum SLO for course: *Presents reasoned arguments to support stated views with increasing self-direction. *Analyzes arguments for validity and relevance to issues being discussed. *Describe the role, responsibilities, and accountability standards of the nurse during medication administration process. *Describe the role, responsibilities, and accountability standards of the nurse during medication administration process. *Apply the nursing process to drug administration, and describe nursing implications of specific medications. *Demonstrate effective use of medication safety strategies to promote patient safety reduce risk of</p>			<p>Exams, Quizzes, in-class assignments</p> <p>Exams, Quizzes, in-class assignments</p>	<p>Spring 2014 100% of the traditional BSN students received a passing grade for the course. Exam score means: Exam 1 92.4% Exam 2 84.78% Exam 3 91.72% Final exam 93.91%</p> <p>Summer 2014 100% of the BA-BS/BSN students received a passing grade for the course. Exam score means: Exam 1 92.76% Exam 2 90.38% Final exam 90.85%</p>	<p>New course to be offered in Spring 2015, moving from a 3-credit hour to a 4-credit hour course, that will meet 2 hours, twice a week instead of the traditional 3 credit hour, meeting once a week. This will make a significant difference as it will allow more time to incorporate examination time into the class, and to have more active classroom time. Students should feel less stressed, and</p>
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<p>harm to patients.</p> <p>*Demonstrate an understanding of the etiological factors of selected disease processes, and related pharmacological interventions across the lifespan. Interpret the basic principles of drug action, differentiating between pharmacotherapy, pharmacokinetics, and pharmacodynamics phases of drug actions.</p> <p>*Describe selected major drug classifications based upon both drug actions, and the effect on the body system.</p> <p>*Identify major types of adverse drug effects/reactions, with some drugs commonly associated with them.</p>			<p>Exams, Quizzes, in-class assignments</p> <p>Exams, Quizzes, in-class assignments</p>	<p>Spring 2013 100% of the traditional BSN students received a passing grade for the course</p> <p>Exam score means: Exam 1 92.5% Exam 2 90.18% Exam 3 89.98% Final exam 86.24%</p> <p>Summer 2013 100% of the BA-BS/BSN students received a passing grade for the course. Exam score means: Exam 1 90.37% Final exam 93.32%</p>	<p>the complexity of the course will be divided into manageable time slots. Based on student feedback course will be scheduled over entire summer as a hybrid for summer 2015.</p>
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Student Learning Outcomes

Student Learning Outcomes					
PLAN			IMPLEMENTATION		
Component	Expected Level of Achievement	Frequency of Assessment	Assessment Methods	Results of Data Collection and Analysis	Actions for Program Development, Maintenance or Revision
<p>B248 Science and Technology of Nursing</p> <p>Revised Curriculum SLO for Course:</p>	<p>All students will complete course with a 73% passing grade.</p>	<p>Every Spring/Summer</p> <p>2015 First time</p>		<p>Spring 2015 96.6% of the traditional BSN students passed the course 1 student</p>	<p>Spring 2015 increased credit hours from 3 to 4. B248 now meets 2</p>

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<p>*Use evidence-based reasoning to perform fundamentals skills and to assess well patients across the lifespan.</p> <p>*Discuss fundamental nursing concepts related to the nursing process and health and wellness continuum.</p> <p>*Begin clinical reasoning in a systematic problem solving process.</p> <p>*Perform a comprehensive health assessment to identify normal age and variant conditions of body systems <i>across the lifespan</i>.</p> <p>*Describe how culture, ethnicity, and social background affect the process and findings of assessment across the lifespan.</p> <p>*Describe how patient's values, beliefs, and preferences influence the practice of evidence-based nursing care.</p> <p>*Identify and provide knowledge and resources for teaching patients, family, significant others, and communities the fundamental nursing concepts across the continuum of the health care environment.</p> <p>*Conduct essential components of a complete health history and a head to toe physical assessment and distinguish between normal and abnormal findings.</p> <p>*Discuss and demonstrate steps and evidence-based rationale in the performance of fundamental nursing skills and the nursing process.</p>	<p>Students will complete the Content ATI exam for Fundamentals and receive a level 2</p>	<p>revised course was offered in revised curriculum</p>	<p>Exams, Quizzes, In-class assignments</p> <p>ATI Content exam for Fundamentals</p>	<p>failed, 1 student withdrew</p> <p>Exam scores means: Exam 1 74% Exam 2 85% Exam 3 80% Exam 4 79% Final Exam 70%</p> <p>ATI results: Level 3 7.5% (4) Level 2 34%(18) Level 1 54.7% (29) >Level 1 3.8%(2)</p>	<p>times per week.</p> <p>More class activities, such as case studies were incorporated in effort to make the class more interactive.</p> <p>Team Testing was also done following Exam 2 and the Comprehensive Final. Students divided into teams of 2 or 3, depending on the number of students who brought laptop computers. They discussed the questions and answer options. They received their answers, the correct answers, and rationale upon submission of the exams.</p> <p>Course was presented in progression meeting May 2015 see minutes.</p>
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<p>Old Curriculum SLO for Course</p> <p>1.4.1. Examines new information within the context of previous knowledge.</p> <p>2.1.1. Examines own cultural beliefs, values, and practices.</p> <p>5.1.1 Clarifies personal beliefs and values.</p> <p>6.2.1Applies communication models to specific interactions.</p> <p>6.3.1 Uses information technology for library use and to enhance communication with faculty, peers, and others.</p>			<p>Exams, Quizzes, In-class assignments</p> <p>ATI Content exam for Fundamentals</p> <p>Exams, Quizzes, In-class assignments</p> <p>ATI Content exam for Fundamentals</p>	<p>Spring 2014 96.6% of the traditional BSN students passed the course 1 student failed, 1 student withdrew</p> <p>Exam scores means: Exam 1 79% Exam 2 75% Exam 3 77% Final Exam 83%</p> <p>ATI results: Level 2 60.3%(36) Level 1 32% (18) >Level 1 6.9%(4)</p> <p>Summer 2014 100% of the BA-BS/BSN students passed the course</p> <p>Exam score means: Exam 1 75.4% Exam 2 87.18% Exam 3 79.75% Final Exam 87.67%</p> <p>ATI results: Level 3 5.3% (1) Level 2 26.3% (5)</p>	<p>Spring 2014 is the last semester that B248 will be taught in the current format in which the focus is strictly on basic nursing concepts and skill.</p> <p>In spring 2015 the course will be merged with B244 Health Assessment, in the next academic year of 2014/2015 as the nursing program moves to a more conceptual approach to the curriculum.</p> <p>In Spring 2015 OSCE will be implemented in the course in conjunction with B249. Students will be assigned 3 SLS scenarios that are part of their B249 OSCE.</p> <p>The pre-simulation work for B248 will require that they follow the pre-simulation reading</p>
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				<p>Level 1 63.2% (12) >Level 1 5.3% (1)</p> <p>Spring 2013 100% of the traditional BSN students passed the course</p> <p>Exam score means: Exam 1 82.46% Exam 2 79.8% Exam 3 66.26% Exam 4 79.93% Exam 5 72.6% Comprehensive Final 77.52%</p> <p>ATI Content</p> <p>ATI results: Level 3 0.05% (3) Level 2 72% (36) Level 1 28.3% (17) >Level 1 0.06% (4)</p> <p>Summer 2013 100% of the Ba-BS/BSN students passed the course</p> <p>Exam score means: Exam 1 80.76% Exam 2 82.81% Exam 3 87.76% Final Exam 84.2%</p>	<p>assignment and pre-simulation exercise and quiz.</p> <p>Following the OSCE, they will be required to complete in B248 a post-simulation exercise, quiz, and SBAR for the patient that they examined. The online quizzes need to be worth less points. As the students could use their texts or notes, the scores may have artificially inflated the students' grades.</p> <p>Looking to increase the number of exams to see if it significantly increases the class average on them. In addition to 5 exams, the students also took a proctored ATI exam, along with the</p>
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			ATI Content	ATI results: Level 2 80% (16) Level 1 15% (3) >Level 1 5% (1)	Comprehensive Final. The number of exams will be reduced back to 3 plus the Final. The ATI exam will become the "4 th " exam for the course.
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Student Learning Outcomes					
PLAN			IMPLEMENTATION		
Component	Expected Level of Achievement	Frequency of Assessment	Assessment Methods	Results of Data Collection and Analysis	Actions for Program Development, Maintenance or Revision
B249 Science and Technology of Nursing: Practicum Revised Curriculum SLO for Course: *Use evidence-based reasoning to perform fundamental skills and to assess patients across the lifespan. *Discuss fundamental nursing concepts related to the nursing process and health and wellness continuum. *Begin clinical reasoning in a systematic problem solving process. *Perform a comprehensive health assessment to identify normal age and variant conditions of body systems across the lifespan. *Describe how culture, ethnicity, and social background affect the process	All students will complete course with a passing grade (S) in all areas	Every Spring/Summer	Clinical evaluation tool, OSCE, Lasater return demos, simulations. OSCE checklists for each of the main skills throughout, then 2 randomly drawn out of 5 one-on-one "test out" at final	Spring 2015 Traditional BSN-52 students passed 1 student failed Demonstration of skills using the OSCE checklists for each of the main skills mid-semester, remediation required if they did not pass. Nine students needed remediation.	Students began to understand clinical reasoning in a systematic problem-solving process. The majority of the students commented that they didn't feel ready to go to the facility on the fourth week of clinical. They would have preferred if they learned all of the skills first. However, they felt that it was nice to see actual patients and that it helped understand the

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<p>and findings of assessment across the lifespan. *Describe how patients' values, beliefs, and preferences influence the practice of evidence-based nursing care. *Identify and provide knowledge and resources for teaching patients, family, significant others, and communities the fundamental nursing concepts across the continuum of the health care environment. *Discuss and demonstrate steps and evidence-based rationale in the performance of fundamental nursing skills and the nursing process. *Demonstrate the safe practice of nursing at the appropriate level.</p> <p>Old Curriculum SLO for Course</p> <p>1.1.1 Participates in selected problem solving exercises that promote critical examination of the professional nurse role. 1.2.1 Presents reasoned arguments to support stated views with consultation or guidance. 1.3.1 Identifies factors that affect development of the professional nurse role.</p>				<p>Passed successfully upon second attempt.</p> <p>Final: OSCE's, Physical assessment, dose calculation, drawing up medication, and administration of IM or SQ injection. 52 students passed.</p> <p>Lasater- not counted toward grade was an introduction to high fidelity mannequin</p> <p>Spring 2014 Traditional BSN-58 students passed 1 student withdrew</p> <p>Summer 2014 BA-BS/BSN students- 19 passed the course</p>	<p>concepts. We received especially good feedback regarding the simulations. The students were anxious, but excited about using simulations and how it enhanced their learning experience in the future! The students liked going to the acute care setting, which gave them another setting to see and more opportunities to perform skills. By the end of the semester, students said they understood the value of having structured evaluations and feel more confident with skills. In Spring 2014 One student withdrew for personal reasons. There were many changes. The course is going to radically change, as Physical Assessment and the Science of Technology in Nursing are merging together in the revised</p>
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<p>2.1.1 Examines own and various cultural beliefs, values, and practices.</p> <p>2.2.1. Assesses culturally-tied health beliefs and practices to maximize health potential.</p> <p>5.1.1. Clarifies personal beliefs and values.</p> <p>5.6.1. Recognizes the need for statutory rules and regulations in defining professional nursing practice.</p> <p>5.7.1. Values personal accountability and responsibility for individual judgments and actions.</p> <p>6.2.1. Applies communication models to specific interactions.</p> <p>6.3.1. Uses information technology for library use and to enhance communication with faculty, peers, and others.</p> <p>6.4.1. Identifies opportunities for using communication as a therapeutic technique.</p> <p>6.5.1. Shares information and ideas with student peers and faculty.</p> <p>7.1.1. Recognizes the meaning and value of collaboration within the variety of health care settings.</p> <p>7.2.1. Recognizes real and potential health needs of individuals, families, and communities.</p> <p>7.3.1. Recognizes normal health patterns of individuals and families.</p> <p>7.4.1. Provides safe, effective nursing care that is consistent with the</p>				<p>Spring 2013 Traditional BSN-56 students passed</p> <p>1 student withdrew</p> <p>Summer 2013 BA-BS/BSN students-20 passed the course</p>	<p>curriculum.</p> <p>In Spring 2013 comments from journals and verbalizations include much interest in going to other units, surgery, and ER. Positive feedback from starting IV's on one another noted. Students completed competencies, journal entries with specific rubric that allowed them to reflect on his/her clinical experiences for the week, care plans, and profile sheets on each patient that included a section on the pathophysiology, labs, medications, and other pertinent exams. Students also were required to research all the medications that the patient was on. All forms that were utilized were the standard forms adopted by the IUN Nursing Faculty.</p> <p>Alternating lab with clinical facility. Assigned</p>
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<p>student's level of knowledge and skills and promotes the health of individuals and families.</p> <p>7.5.1. Recognizes personal readiness to learn and teaching strategies consistent with personal learning styles.</p> <p>7.6.1. Identifies behaviors that place self and others at risk for developing health problems.</p> <p>7.7.1. Identifies nursing resources available for consultation and learning.</p> <p>7.8.1. Begins developing nursing knowledge base and skills as an outcome of guided self-evaluation.</p> <p>7.10.1 Identifies outcomes that are consistent with health of individuals, families, and communities.</p> <p>8.1.1. Recognizes the positive professional image desired by the public and professional nursing.</p>					<p>medication cards weekly which were congruent with the lecture concepts. Simulation mid-semester and for the final. OSCE checklists to test skill proficiency/competency. In addition, the Meditrek program was initiated to record the students' progress and also for course evaluations. Reflective journaling was also introduced and piloted by two of the instructors over the entire semester.</p>
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Program Outcomes—Graduation Rates					
PLAN			IMPLEMENTATION		
Component	Expected Level of Achievement	Frequency of Assessment	Assessment Methods	Results of Data Collection and Analysis	Actions for Program Development, Maintenance or Revision
3 and 6 year graduation rates	80% graduation within 6 years of starting the program	Every 3 and 6 years	Graduated/began	Traditional Option 2008 3 year: 49/71 (69%) 6 year: 59/71 (83.1%)	Three year graduation rates are low. Curriculum revision

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	(traditional)			<p>2009 3 year: 49/64 (65.6%) 6 year: 51/64 (79.7%)</p> <p>2010 3 year: 43/63 (68.3%) 6 year (<i>to date</i>): 57/63 (90.5%)</p> <p>2011 3 year: 37/61 (60.7%) 6 year: TBD</p> <p>2012 3 year: 47/65 (72.3%) 6 year: TBD</p>	<p>begun in 2012 utilizing ATI standardized test results, NCLEX reports, and reviews of the literature.</p> <p>Several faculty members have attended QSEN and concept-based curriculum workshops in preparation.</p>
	90% graduation within 4 years of starting the BA/BS to BSN program option	Every 18 months and 4 years	Graduated/began	<p>BA/BS to BSN Option</p> <p>2008 18 mo.: 13/16 (81.3%) 4 years: 16/16 (100%)</p> <p>2009 18 mo.: 21/23 (91.3%) 4 years: 23/23 (100%)</p> <p>2010 18 mo.: 18/18 (100%) 4 years: N/A</p> <p>2011 18 mo.: 20/24 (83.3%) 4 years: 23/24 (95.8%)</p> <p>2012 18 mo.: 11/17 (64.7%) 4 years (to date): 13/17 (76.5%)</p> <p>2013 18 mo.: 15/19 (78.9%)</p>	<p>Preparing for new curriculum</p>

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	90% graduation with 24 months of starting the RN to BSN program option	Every 12, 18, and 24 months	Graduated/began	4 years: TBD 2011: 1/1 (100%) 2012: 3/6 (50%) 2013: 6/6 (100%) 2014: TBD	implementation for the BA/BS-BSN students in summer 2015. Numbers are very small. We are recruiting heavily for this program. Evaluation occurs in the RN-BSN Consortium Evaluation Committee and is ongoing.
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Major/Program: SPEA

ASSESSMENT SUMMARY

Fall 2014-Spring 2015

What are the student learning outcomes in the **major/program**?

NASPAA Competencies that guided student learning outcomes:

1. to analyze, synthesize, think critically, solve problems and make decisions; and,
2. to lead and manage in public governance

Student Learning Outcomes:

1. Differentiate between rational, natural and open systems.
2. Understand the different structures, processes and outcomes that public organizations utilize to fulfill their duties and missions.
3. Understand how internal and external environments impact organizations.
4. Understand the impact of technology and how that intersects with human nature relative to planned and unplanned organizational change.
5. Apply different theoretical frameworks to the challenges and pressures organizations face.
6. Fully and critically analyze a public organization and chart a path forward for the management from every aspect covered in this class.
7. This outcome relates to the students ability to summarize the case information concisely, accurately and completely.
8. The ability to properly cite and reference sources in APA format.

9. This outcome measures the student's ability to properly format their document.

Which outcome(s) did you assess this academic year?

All of the aforementioned outcomes were assessed during this academic year. The V504 Public Organizations course was employed to assess these goals.

It is also significant to note that during the 2014-2015 academic year a pilot study was conducted to test a rubric developed specifically to assess student learning outcomes on the final written project in the V600 Capstone in Public Affairs course. Although taught by two different professors, a case study analysis was used as the final project for both semesters.

Initial data analysis completed in the summer of 2015 resulted in a decision to restructure the methodology for testing the rubric. Although no results can be reported at this time, the project was beneficial in that it provided an opportunity for ongoing discussions of the rubric, the selection of cases, and the means through which to incorporate the interdisciplinary nature of the program through multiple faculty raters.

How did you assess the learning outcomes this academic year?

A case study presented as a part of the midterm was employed to assess the goals, along with a public organization analysis (10-12 pages) completed as a primary part of the final examination.

Please **summarize the data** you have collected this academic year.

OUTCOME 1	18 students: 6 less than adequate (33%), 9 good (50%), 3 excellent (17.5%) 67.5% good or excellent
OUTCOME 2	18 students: 1 less than adequate (5.5%), 9 good (50%), 8 excellent (44.5%) 94.5% good or excellent
OUTCOME 3	18 students: 1 less than adequate (5.5%), 12 good (67%), 5 excellent (28%) 95% good or excellent
OUTCOME 4	18 students: 9 less than adequate (50%), 3 good (17.5%), 6 excellent (33%) 50% good or excellent
OUTCOME 5	18 students: 8 less than adequate (44.5%), 5 good (28%), 5 excellent (28%) 56% good or excellent
OUTCOME 6 (NASPAA)	18 students: 4 less than adequate (22%), 9 good (50%), 5 excellent (28%) 78% good or excellent
OUTCOME 7 (Case Study)	18 students: 9 less than adequate (50%), 7 good (39%), 2 excellent (11%) 50% good or excellent
OUTCOME 8 (Program)	18 students: 8 less than adequate (44.5%), 6 good (33%), 4 excellent (22%) 55% good or excellent
OUTCOME 9	18 students: 4 less than adequate (22%), 6 good (33%), 8 excellent (44.5%) 78% good or excellent
OVERALL	162 ratings: 45 less than adequate (28%), 66 good (41%), 46 excellent (28%) 69% good or excellent
Please describe any programmatic changes you have made or are planning to make based on the data you have collected (action steps).	
This assessment demonstrated the effectiveness of the case study, as well as the organizational analysis, as vehicles for measuring student mastery of learning outcomes. Thus, no substantial changes will be employed at this time.	

Please report on the progress of your **action steps** reported in 2013-2014. See <http://www.iun.edu/campus-assessment/assessment-results/index.htm> for your previous unit reports.

Based on the assessment report from 2013-2014, Dr. Sanders (instructor for J 202) has assigned an additional writing assignment at the end of the semester, as well as providing an additional case study. Dr. Sanders has also reinforced the importance of submitting assignments at this time.

****Note:** Please use this template to provide the responses to the prompts above.**

Major/Program: Bachelor of Social Work

ASSESSMENT SUMMARY

Fall 2014-Spring 2015

What are the student learning outcomes in the **major/program**?

Indiana University School of Social Work routinely collects and analyzes student learning outcomes for the BSW Program. The Council on Social Work Education (CSWE) mandates that accredited BSW Programs collect data and report student learning outcomes on several practice competencies. The first set of outcome data match the competencies adopted by the Council on Social Work Education in 2008. The second set of data match the revised competencies adopted by the Council on Social Work Education in 2015.

Which outcome(s) did you assess this academic year?

- Identify as a Professional Social Worker
- Apply Ethical Principles
- Engage Diversity in Practice
- Apply Critical Thinking
- Advance Human Rights/ Social and Economic Justice
- Engage in Research Informed Practice/ Practice Informed Research
- Apply Human Behavior Knowledge
- Engage in Policy Practice
- Engage with Individuals, Families, Groups, Organizations, and Communities
- Assess Individuals, Families, Groups, Organizations, and Communities
- Intervene with Individuals, Families, Groups, Organizations, and Communities
- Evaluate Practice with Individuals, Families, Groups, Organizations, and Communities

How did you assess the learning outcomes this academic year?

First Measure: The Council on Social Work Education (CSWE) mandates that accredited BSW Programs widely report student learning outcomes on several practice competencies. The first reported data were collected based on the 2008 Educational Policy and Accreditation Standards (EPAS) and included 10 Competencies. The tables contain a brief description of each of the 10 competencies through 2015, the benchmark at which individual students' scores are considered proficient, and the percentages of students attaining the level of proficiency on each of the 10 CSWE accreditation competencies. The measurement tool in current use by Indiana University to identify students' learning outcomes is called the 'Learning and Evaluation Tool' (LET). The LET is completed by agency supervisors to evaluate student competence throughout two semesters (fall and spring). The tool upon which the tables are based contains all 10 CSWE accreditation competencies and the various social work practice behaviors that comprise these 10 competencies. A score of '5' or above is considered '*proficient*' in a given competency.

Second Measure began in 2015: The Case Analysis Presentation was used by Indiana University School of Social Work as a second way to measure students' learning outcomes. Students present a case analysis to faculty members who evaluated their analysis in spring of 2015. They were required to achieve a minimum evaluation score of '5' to demonstrate competence in a particular area. The second table includes the revised CSWE competency and the percent of students who met the competencies in each area.

Please **summarize the data** you have collected this academic year. **% of students competent**

First Measure (old competencies 2008 - 2015)	
1. Identify as a Professional Social Worker	95%
2. Apply Ethical Principles	95%
3. Apply Critical Thinking	95%
4. Engage Diversity in Practice	95%
5. Advance Human Rights/ Social and Economic Justice	95%
6. Engage Research Informed Practice/Practice Informed Research	95%
7. Apply Human Behavior Knowledge	95%
8. Engage Policy Practice to Advance Well-Being and Deliver Services	95%

9. Respond to Practice Contexts	95%
10 a Practice Engagement	100%
10 b Practice Assessment	100%
10 c Practice Intervention	100%
10 d Practice Evaluation	100%
	% of students competent
Second Competency (new competencies 2015)	
1. Apply Ethical Principles:	90%
2. Engage Diversity in Practice:	77%
3. Advance Human Rights/ Social and Economic Justice:	95%
4. Engage in Research Informed Practice/ Practice Informed Research:	91%
5. Engage in Policy Practice:	91%
6. Engage with Individuals, Families, Groups, Organizations, and Communities:	91%
7. Assess Individuals, Families, Groups, Organizations, and Communities:	91%
8. Intervene with Individuals, Families, Groups, Organizations, and Communities:	91%
9. Evaluate Practice with Individuals, Families, Groups, Organizations, and Communities:	91%

Please describe any programmatic changes you have made or are planning to make based on the data you have collected (action steps).

- The program faculty members are identifying or developing signature assignments to measure a student's progress in each year of the program. This form of assessment measures milestones as students develop the knowledge, skills, and values needed to become competent social workers. Measuring signature assignments will help faculty identify and provide additional support and feedback to students who struggle to meet the competencies in the final outcome measures.
- Although students demonstrated increased competence in research, the primary faculty member who teaches research and program evaluation and will be measuring pedagogical strategies for the courses.
- A new elective which will strengthen student research and writing skills has been proposed. We plan to offer this course in the spring of 2016.
- The first year using the Case Presentation and rubric as a second measure was 2015, this evaluation format was not available until early in the spring, 2015. This academic year we have started discussing the case presentation expectations sooner in the academic year. More explicit instructions and guidance will be provided in 2016, based on our experiences in 2015. We will also discuss the process with other IUSW campuses to also learn from their experiences.
- Diversity was identified as an issue in the second measure, but not the first. We offer a diversity course SWK S102 at the beginning of the program. Diversity assignments are integrated into practice courses. Additional emphasis in diversity has been added into the Capstone course SWK S402 and Case Presentation instructions.

Please report on the progress of your **action steps** reported in 2013-2014.

See <http://www.iun.edu/campus-assessment/assessment-results/index.htm> for your previous unit reports.

- Revised competencies were passed by the Council on Social Work Education in 2015. The curriculum is being evaluated to meet the revised competencies and standards. Although, students were educated using the old competencies, they were evaluated based on the new competencies in the second measure, which may have led to lower scores. The content of the competencies were similar, but not exactly the same as the old ones.
- We still struggle to find agencies that provide research opportunities. We hired our first BSW Field Coordinator, Marshelia Harris in 2014 who is aware of the concern. She and the new MSW Field Coordinator plan to provide training to agency supervisors about the expectations of the revised

competencies, including in the area of research. Although changes were made to the BSW courses with research content, further revision is required, based on these outcomes. The primary instructor, Jill Chonody, has revised the two BSW research courses and will revise assignments based on her ongoing assessment of the outcomes of the two courses. She has put the two courses online, increased the number of quizzes and online discussions.

****Note:** Please use this template to provide the responses to the prompts above.**