

Appendix C: UCLA School of Nursing Program Evaluation Plan

UCLA School of Nursing Program Evaluation Plan (Please refer to SON Acronym List for Meaning of Acronyms)

Standard I: PROGRAM QUALITY: MISSION AND GOVERNANCE

The mission, goals, and expected program outcomes 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. 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.

Key Element	Indicators / Criteria / Expected Outcomes	Evaluation Process and Frequency	Accountability [Person(s) / Committee]	Supporting Documents	Follow-up Action Plan
<p>Key Element I-A: The mission, goals, and expected program outcomes are:</p> <ul style="list-style-type: none"> congruent with those of the parent institution (UCLA) reviewed periodically and revised as appropriate. 	<p>Congruence of SON mission, values, goals, and expected outcome with those of UCLA.</p>	<p>Compare relevant UCLA and SON documents; Document alignment of SON and UCLA strategic goals; review and update Strategic Plan review (Formal update every 5 years; annual review)</p>	<ul style="list-style-type: none"> Dean Faculty Executive Committee (FEC) Curriculum Committee (CC) Program Directors (PDs) Associate Dean for Academic and Student Affairs (AD-ASA) 	<ul style="list-style-type: none"> UC and UCLA Mission SON Mission and Goals SON Strategic Plan CCNE report and/or Continuous Improvement Progress Report (CIPR) Academic Senate Report 	<p>FEC and SON leadership recommend changes to faculty based on analysis of congruence of missions, goals, and outcomes between UC, UCLA, and SON. (see also SON Strategic Plan Process map)</p>
<p>Key Element I-B: The mission, goals and expected program outcomes are consistent with relevant professional nursing standards and guidelines for the preparation of nursing professionals.</p>	<p>Congruence of SON mission, values, goals, and expected outcomes with those of professional nursing standards and other relevant nursing standards guidelines.</p>	<p>Review SON mission, values, goals, and expected program outcomes for consistency with relevant professional nursing standards and guidelines. (Annually)</p>	<ul style="list-style-type: none"> Dean FEC CC PDs AD-ASA 	<ul style="list-style-type: none"> Professional Nursing Standards: Essentials of Baccalaureate Education for Professional Nursing (AACN, 2008) Quality and Safety Education for Nurses (QSEN) competencies Master's Education in Nursing (AACN, 2011) Criteria for Evaluation of NP Programs (NTF, 2012) NONPF Competencies CNL competencies (2013) 	<p>Curriculum Committee (CC) and Program faculty recommend changes to whole faculty based on analysis of consistency with most updated professional standards.</p>

Key Element	Indicators / Criteria / Expected Outcomes	Evaluation Process and Frequency	Accountability [Person(s) / Committee]	Supporting Documents	Follow-up Action Plan
<p>Key Element I-C: The mission, goals, and expected program outcomes reflect the needs and expectations of the SON's internal communities of interest (current students, faculty, staff, administration, prospective students, and graduates) and external communities of interest (regulatory bodies, UCLA-affiliated healthcare and academic facilities, practice community, clinical preceptors and mentors in the institutions where students engage in clinical practice experiences, and employers of SON graduates).</p>	<p>Congruence of SON mission, values, goals, and expected outcomes with those of the needs and expectations of SON's communities of interest (COIs).</p>	<p>--Review SON mission, goals, and expected program outcomes for alignment with needs of SON's communities of interest: (Bi-annually)</p> <p>--Review individual course goals and expected program outcomes for alignment with needs and expectations of COI (Biannually)</p>	<ul style="list-style-type: none"> FEC PDS Associate Dean for Diversity Equity and Inclusion (AD-DEI) AD-ASA 	<ul style="list-style-type: none"> FEC minutes Evaluation Subcommittee minutes Program meeting minutes CC minutes SON Faculty minutes 	<p>Program faculty make recommendations to FEC which recommend changes to whole faculty based on analysis of needs and expectations of COIs.</p>
<p>Key Element I-D: The nursing unit's expectations for faculty are written and communicated to the faculty and are congruent with institutional expectations.</p>	<p>--SON appointment and promotions criteria are approved by FEC, written, shared with faculty, and used to guide annual performance reviews and mid-time in rank reviews.</p> <p>--SON appointment and promotion criteria are congruent with UCLA expectations</p>	<p>--Review SON criteria when UCLA Academic Personnel Manual changes are made (As needed)</p> <p>--Inservice all faculty re: SON procedures for academic review (Annually)</p>	<ul style="list-style-type: none"> AD-ASA Assistant Dean of Administration/Director of Human Resources (ADA-DHR) Dean Faculty Chair Program Directors 	<ul style="list-style-type: none"> Academic Personnel website Faculty Handbook Faculty Orientation Plan 	<p>SON Leadership recommend changes to faculty based on institutional expectations of faculty and clearly communicate all expectations to faculty.</p>

Key Element	Indicators / Criteria / Expected Outcomes	Evaluation Process and Frequency	Accountability [Person(s) / Committee]	Supporting Documents	Follow-up Action Plan
<p>Key Element I-E: Faculty and students participate in program governance.</p>	<p>SON faculty, staff and students participate in university governance with membership on committees charged with making recommendations regarding achievement of SON and University mission and goals. Governance-related meetings are recorded and archived.</p>	<p>-- Review SON bylaws, committee membership, attendance, and minutes to assure participation of all stakeholders in program governance (Annually) -- Review online or asynchronous opportunities for faculty to provide input and comments on governance decisions (As needed)</p>	<ul style="list-style-type: none"> ▪ AD-ASA, ▪ PDS, ▪ Faculty Chair ▪ Dean 	<ul style="list-style-type: none"> ▪ SON Bylaws ▪ Faculty Meeting minutes and agendas ▪ Committee minutes and attendance sheets ▪ Program meeting minutes that report student-faculty "check-in" sessions and student input during the meeting ▪ Records of online voting 	<p>FEC recommends changes in SON Bylaws based on analysis of congruence with UCLA shared governance model.</p>
<p>Key Element I-F: Academic policies of the parent institution and the nursing program are congruent and support achievement of the mission, goals, and expected student outcomes. These policies are: fair and equitable; published and accessible; and reviewed and revised as necessary to foster program improvement.</p>	<p>--Established policy development, and documentation procedures and timelines are reviewed periodically and revised as needed. --SON academic policies for student admissions, retention, and progression are: -consistent with SON mission goals and expected outcomes -congruent with UCLA academic policies -fair and equitable -published in the SON Student Handbook</p>	<p>--Review alignment of all SON policy, procedural, or guidance documents (written or on the website) for congruence with UCLA policies (i.e., Undergraduate Division, Graduate Division, APO, Office of Diversity, Equity and Inclusion, Office of Research. (Annually) --Review academic policies for fairness, equity, accessibility, and opportunities for program improvement</p>	<ul style="list-style-type: none"> • Faculty Chair • AD-ASA • AD-DEI • AD-Research • Directors of International Programs and Scholarship • ADA-DHR • Directors of Student Affairs, Financial Aid, and Recruitment, Outreach, and Admissions 	<ul style="list-style-type: none"> • SON Mission and Goals • Program-Specific Goals • Student and Faculty Handbooks • SAC minutes • FEC, EMG minutes • DEI minutes 	<p>Student Affairs Committee (SAC) in consultation with AD-ASA, Director of Student Affairs, DEI, and Director of Admissions recommend changes to faculty based on analysis of consistency with UCLA policies, fairness, clarity, and value of continuous program improvement.</p>

Key Element	Indicators / Criteria / Expected Outcomes	Evaluation Process and Frequency	Accountability [Person(s) / Committee]	Supporting Documents	Follow-up Action Plan
<p>Key Element I-G: The program defines and reviews formal complaints according to established policies</p>	<p>--SON adheres to all UCLA procedures related to student complaints or grievances --SON adheres to all UCLA procedures related to faculty or staff complaints or grievances</p>	<p>--Document student concerns and specific actions taken --Document faculty or staff concerns and actions taken (As needed)</p>	<ul style="list-style-type: none"> AD-ASA AD-DEI Student Affairs Director Student Affairs Committee ADA-DHR 	<ul style="list-style-type: none"> Student Handbook Faculty Handbook UCLA Discrimination Complaints overview 	<p>Students: SAC and AD-ASA recommend changes to faculty based on analysis of student grievances. Faculty and Staff: AD-ASA and ADA-DHR recommend changes to appropriate faculty committee based on analysis of grievances and consistency with UCLA policies and procedures.</p>
<p>Key Element I-H: Documents and publications are accurate. A process is used to notify constituents about changes in documents and publications. Need to develop a process for website updates</p>	<p>--Content of Student Handbook, Faculty Handbook, and online materials are consistent, accurate, clear --A process for Prompt notification of changes to constituents is followed.</p>	<p>--Review written and electronic documents to insure accuracy and consistency. --Review process for notifying constituents of changes in documents and publications. (Annually)</p>	<ul style="list-style-type: none"> FEC PDs AD-ASA Director of Student Affairs Student Affairs Committee Program faculty Director of Simulation 	<ul style="list-style-type: none"> Printed and web-based program-related information Student Handbook Faculty Handbook Simulation Handbook 	<p>SON Leadership, PDs, Director of Student Affairs, and Director of Admissions work with Director of Communications to inform constituents of policy and procedural changes. (See also Website Update process map)</p>

Standard II: PROGRAM QUALITY: INSTITUTIONAL COMMITMENT AND RESOURCES

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

Key Element	Indicators / Criteria / Expected Outcomes	Evaluation Process and Frequency	Accountability	Supporting Documents and Location	Analysis and Follow-up Action
<p>Key Element II-A: Fiscal resources are sufficient to enable the program to fulfill its mission, goals, and expected outcomes. Adequacy of fiscal resources is reviewed periodically, and resources are modified as needed.</p>	<p>--Balanced budget (SON) --Adequate resource allocation to all SON missions and outcomes --Resource allocation decision-making criteria are transparent and equitable. --Budgetary decisions are reviewed annually and consistent with UCLA policies.</p>	<p>--Review budgetary decisions for consistency with UCLA policy and annual administrative review --Review adequacy of fiscal resources for achieving program goals and outcomes --Review how budget decisions are made monthly, mid-year and annually and modified as needed (Monthly, mid-year and annually)</p>	<ul style="list-style-type: none"> • Dean • Chief Financial Officer (CFO) 	<ul style="list-style-type: none"> • SON Budget and Justification • SON Annual Report • EMG minutes 	<p>Based on the analysis results that are done monthly, mid-year then annually, the Dean in consultation with the SON Finance Office and EMG will make recommendations to the Vice Chancellor/Chief Financial Officer of UCLA</p>
<p>Key Element II-B: Physical resources and clinical sites enable the program to fulfill its mission, goals, and expected outcomes. Adequacy of physical resources and clinical sites is reviewed periodically, and resources are modified as needed.</p>	<p>Physical space, facilities, equipment/supplies, and clinical sites are sufficient in quality and quantity to achieve the SON mission and expected outcomes.</p>	<p>Review physical resources and clinical sites that enable SON to fulfill its mission, goals, and expected outcomes. (Quarterly and annual review annual summary)</p>	<ul style="list-style-type: none"> • Dean • ADA-DHR • Chief Financial Office • Program Directors • Program Faculty • Simulation Director • Clinical partners 	<ul style="list-style-type: none"> • SON Budget and Justification • SON Annual Report • EMG meeting minutes • Program Meeting minutes • Clinical Contractual agreements 	<p>Based on the analysis of physical resources that are done quarterly and annually, the Dean approves the suggested recommendations Based on the analysis of clinical sites data, the Program Directors will contract with quality clinical sites to assure quality clinical placements sites for all programs</p>

Key Element	Indicators / Criteria / Expected Outcomes	Evaluation Process and Frequency	Accountability	Supporting Documents and Location	Analysis and Follow-up Action
<p>Key Element II-C: Academic support services are sufficient to meet program and student needs and are evaluated on a regular basis</p>	<p>--Academic support services meet program and student needs. --Academic advisement provided for all students --Program, course evaluation and student satisfaction data used during review of resource allocations, and to determine future needs.</p>	<p>--Review availability and adequacy of academic support services to meet students' needs (Annually) --Review Students Affairs record of academic advisement</p>	<ul style="list-style-type: none"> AD-ADA PDS Director of Student Affairs FEC Dean SAC 	<ul style="list-style-type: none"> SON Strategic Plan Record of teaching assignments Student evaluations (exit surveys, course evaluations) Minutes of faculty-student "check-in" meetings Student advisement records Student Affairs Committee minutes Student Handbook 	<p>Based on the analysis of results, the office of Academic and Student Affairs consults with the SON and UCLA for the resources that are necessary to maintain quality within the academic support serves that are provided for both program and student needs</p>
<p>Key Element II-D: The chief administrator of the nursing unit: <ul style="list-style-type: none"> is a registered nurse (RN); holds a graduate degree in nursing; holds a doctoral degree if the nursing unit offers a graduate program in nursing is vested with the administrative authority to accomplish the mission, goals, and expected program outcomes; and provides effective leadership to the nursing unit in achieving its mission, goals, and expected program outcomes. </p>	<p>--Dean's education and experience are comparable to peers within UCLA and within schools of nursing in research-intensive universities. --Dean demonstrates effective leadership that achieves SON mission. --Dean has authority comparable to other UCLA Deans.</p>	<p>--Evaluate Dean's administrative authority, leadership, and performance (Annually)</p>	<ul style="list-style-type: none"> Dean UCLA Executive Vice Chancellor 	<ul style="list-style-type: none"> Dean's CV Dean's job description Administrative and SON organizational charts 	<p>Based on the analysis of the Dean's performance, changes or recommendations are made to the UCLA Executive Vice Chancellor and Provost</p>

Key Element	Indicators / Criteria / Expected Outcomes	Evaluation Process and Frequency	Accountability	Supporting Documents and Location	Analysis and Follow-up Action
<p>Key Element II-E: Faculty are:</p> <ul style="list-style-type: none"> • sufficient in number to accomplish the mission, goals, and expected program outcomes; • academically prepared for the areas in which they teach; and • experientially prepared for the areas in which they teach. 	<p>--SON policies promote recruitment of an adequate number of academically and experientially prepared and diverse faculty to achieve program goals</p> <p>--Didactic and clinical teaching assignments meet state and national guidelines</p>	<p>--Review faculty recruitment and hiring processes (Annually)</p> <p>--Verify qualifications and licensure (At hire and at least biannually)</p> <p>--Review teaching assignments for transparency and equity based on SON guidelines, series, and rank (Annually)</p>	<ul style="list-style-type: none"> • Dean • AD-ASA • PDS 	<ul style="list-style-type: none"> • Faculty CVs • Faculty contracts • Recruitment criteria posted on UCLA AP Recruit https://recruit.apo.ucla.edu • Summary reports of SON Faculty Recruitment Committee • Published teaching assignments 	<p>Based on the review analysis of faculty qualifications and assignments that are done annually, recommendations are made by the Program Directors, AD-ASA to the Dean</p>
<p>Key Element II-F: Preceptors (e.g., mentors, guides, coaches), if used by the program as an extension of faculty, are academically and experientially qualified for their role.</p>	<p>--Preceptors are adequately prepared academically and experientially.</p> <p>--Preceptors receive satisfactory student and faculty evaluations</p> <p>--Clinical expertise and practice settings of preceptors supports attainment of SON goals and student outcomes.</p> <p>--SON expectations of preceptors are clearly communicated to preceptors.</p>	<p>--Analyze preceptor and clinical faculty qualifications, licensure, and performance review. (Annually)</p> <p>--Review student evaluations of preceptors (At least annually)</p>	<ul style="list-style-type: none"> • PDS • Lead Faculty for Clinical Courses 	<ul style="list-style-type: none"> • Part-time Faculty CVs • Documentation of preceptor qualifications and performance. • Preceptor and part-time faculty contracts • Student evaluations of clinical courses and preceptors • Faculty evaluations of clinical courses • Preceptor Handbook 	<p>Based on the analysis of findings, Program Directors and Lead Course Faculty in the clinical courses make recommendations for preceptors</p>

Key Element	Indicators / Criteria / Expected Outcomes	Evaluation Process and Frequency	Accountability	Supporting Documents and Location	Analysis and Follow-up Action
<p>Key Element II-G: The parent institution (UCLA) and program (SON) provide and support an environment that encourages faculty teaching, scholarship, service, and practice in keeping with the mission, goals, and expected faculty outcomes.</p>	<p>--Allocation of faculty time for teaching, scholarship, service is commensurate with their series, rank, and professional development goals. --Faculty are supported to achieve their goals in teaching, scholarship, and service.</p>	<p>--Ongoing review and synthesis of faculty expectations, performance, and feedback through multiple channels (i.e., faculty meetings, program meetings, faculty surveys, and annual retreats). --Review availability of UCLA and SON resources for faculty to meet performance requirements and SON expectations of faculty (Ongoing and annually)</p>	<ul style="list-style-type: none"> • Dean • AD-ASA • PDs, • Faculty Chair • FEC • EMG 	<ul style="list-style-type: none"> • Strategic Plan • Faculty Handbook • Faculty workload guidelines • Documentation of faculty development and support • Documentation of professional development-related research and travel support • Faculty orientation materials • EMG minutes 	<p>Based on the analysis of findings, a combination of personnel within the SON will make recommendations that support the mission, goals and expected faculty outcomes of the SON</p>

Standard III: PROGRAM QUALITY: CURRICULUM AND TEACHING-LEARNING PRACTICES

The curriculum is developed in accordance with the program's mission, goals, and expected student outcomes. The curriculum reflects professional nursing standards and guidelines and the needs and expectations of the community of interest. Teaching-learning practices are congruent with expected student outcomes. The environment for teaching-learning fosters achievement of expected student outcomes.

Key Element	Indicators / Criteria / Expected Outcomes	Evaluation Process and Frequency	Accountability	Supporting Documents and Location	Analysis and Follow-up Action
<p>Key Element III-A: The curriculum is developed, implemented, and revised to reflect clear statements of expected student outcomes that:</p> <ul style="list-style-type: none"> are congruent with the program's mission and goals; are congruent with the roles for which the program is preparing its graduates; and consider the needs of the program—identified community of interest. 	<p>--All courses are based on the SON expected program outcomes and demonstrate a logical fit in contributing to curricular consistency.</p> <p>--All courses are congruent with professional roles for each program, and include input from COIs.</p> <p>--Courses are evaluated on a regular basis and revised as needed</p>	<p>--Review courses to evaluate current, relevant, program-specific goals/objectives. (Ongoing)</p> <p>--Review student and faculty course evaluations (At least annually)</p> <p>--Review student outcomes to identify whether they reflect program mission and goals, the current goals of the nursing profession, and the needs of the COIs.</p>	<ul style="list-style-type: none"> AD-ASA PDs CC Program faculty 	<ul style="list-style-type: none"> Program goals and objectives Curriculum committee minutes Program faculty meeting minutes Course syllabi Skyfactor surveys Exit Surveys Student course evaluations EBI Employer survey 	<p>Curriculum Committee will seek input from program faculty and recommend changes in expected outcomes to faculty based on analysis of COI needs, congruence with professional standards, nursing roles, and SON Strategic Plan. (See Curriculum Committee Process Map.)</p>
<p>Key Element III-B: Baccalaureate curriculum is developed, implemented, and revised to reflect relevant professional nursing standards and guidelines, which are clearly evident within the curriculum and within the expected student outcomes (individual and aggregate). Baccalaureate program curricula incorporate <i>The Essentials of Baccalaureate Education for Professional Nursing Practice</i> (AACN, 2008),</p>	<p>--Current universally recognized standards and guidelines for the preparation of nursing professionals are evident in SON baccalaureate curriculum-related materials.</p>	<p>Review baccalaureate curriculum for congruence with relevant professional standards and guidelines. (Biannually)</p> <p>--Document course approvals and revisions (As Needed)</p>	<ul style="list-style-type: none"> AD-ASA PD and Assistant PD CC FEC PL faculty 	<ul style="list-style-type: none"> Program Goals and Objectives Course syllabi Minutes of: FEC, CC, Faculty Meetings, PL Program Meetings Summer Retreats 	<p>Prelicensure Program faculty discuss recommendations at Program Meetings, make recommendations to the CC who then make the changes or recommend to FEC and SON faculty for vote.</p>

<p>Key Element III-C: Master's curricula are developed, implemented, and revised to reflect relevant professional nursing standards and guidelines, which are clearly evident within the curriculum and within the expected student outcomes (individual and aggregate).</p> <ul style="list-style-type: none"> ▪ Master's program curricula incorporate professional standards and guidelines as appropriate. <p>a. All master's degree programs incorporate <i>The Essentials of Master's Education in Nursing</i> (AACN, 2011) and additional relevant professional standards and guidelines as identified by the program.</p> <p>b. All master's degree programs that prepare nurse practitioners incorporate <i>Criteria for Evaluation of Nurse Practitioner Programs</i> (NTF, 2016).</p> <ul style="list-style-type: none"> ▪ Graduate-entry master's program curricula incorporate <i>The Essentials of Baccalaureate Education for Professional Nursing Practice</i> (AACN, 2008) and appropriate graduate program standards and guidelines. 	<p>--Current universally recognized standards and guidelines at the master's level for the preparation of nursing professionals are evident in SON curricula-related materials.</p> <p>--Current universally recognized standards and guidelines at the baccalaureate level and those relevant at the master's level are evident in the MECN program.</p>	<p>--Review prelicensure curricula and advanced practice master curriculum for congruence with relevant professional standards and guidelines</p> <p>(Biannually)</p> <p>--Document course approvals and revisions (As Needed)</p>	<ul style="list-style-type: none"> • AD-ASA • PDS • MECN faculty • APRN sub-specialty faculty • CC • FEC 	<ul style="list-style-type: none"> • Program Goals and Objectives • Course syllabi • Minutes of: FEC, CC, Faculty Meetings, APRN and PL Program Meetings • Summer Retreats 	<p>MECN and APRN faculty discuss recommendations at Program Meetings, make recommendations to the CC who then make the changes; if needed the faculty ballot on the action suggested</p>
---	---	--	--	--	--

<p>Key Element III-D: DNP curricula are developed, implemented and revised to reflect relevant professional nursing standards and guidelines which are clearly evident within the curriculum and within the expected student outcomes.</p> <ul style="list-style-type: none"> ▪ DNP program curricula incorporate professional standards and guidelines as appropriate. <ul style="list-style-type: none"> a. All DNP programs incorporate <i>The Essentials of Doctoral Education for Advanced Nursing Practice</i> (AACN, 2006) and additional relevant professional standards and guidelines if identified by the program. b. All DNP programs that prepare nurse practitioners incorporate <i>Criteria for Evaluation of Nurse Practitioner Programs</i> (NTF, 2016j). ▪ Graduate-entry DNP program curricula incorporate <i>The Essentials of Baccalaureate</i> 	<p>Post-master's DNP curricula and expected student outcomes reflect DNP Essentials and current practice standards.</p> <p>All post-master's DNP courses are congruent with professional roles for DNP students</p> <p>Courses are evaluated on a regular basis and revised as needed</p>	<p>Review AACN DNP Essentials (2006) to assess whether post-master's DNP program goals and course objectives are congruent with relevant professional standards and guidelines. (Annually)</p> <p>Review post-master's DNP course syllabi. (Annually)</p> <p>Document course approvals and revisions (As needed)</p>	<p>DNP Program Director DNP Faculty CC</p>	<p>Post-master's DNP faculty curriculum review minutes. Quarterly DNP faculty meetings CC minutes if DNP material is presented</p>	<p>DNP faculty discuss recommendations at quarterly DNP faculty meetings; recommendations are made to the CC for any curriculum changes.</p>
--	---	---	--	--	--

Key Element	Indicators / Criteria / Expected Outcomes	Evaluation Process and Frequency	Accountability	Supporting Documents and Location	Analysis and Follow-up Action
<p><i>Education for Professional Nursing Practice</i> (AACN, 2008) and appropriate graduate program standards and guidelines.</p>					
<p>Key Element III-E: Pertains to certificate programs: NA</p>	NA				
<p>Key Element III-F: The curriculum is logically structured to achieve expected student outcomes.</p> <ul style="list-style-type: none"> Baccalaureate curricula build on a foundation of the arts, sciences, and humanities. Master’s curricula build on a foundation comparable to baccalaureate-level nursing knowledge. DNP curricula build on a baccalaureate and/or master’s foundation, depending on the level of entry of the student. Post-graduate APRN certificate programs build on graduate level nursing competencies and knowledge base. 	<p>--Each program curriculum is based on foundational knowledge and appropriate professional standards and guidelines</p> <p>--All courses within each program are aligned with stated program outcomes and demonstrate a logical fit in contributing to curricula and organizational consistency.</p> <p>--Learning assessment methods and grading rubrics align with intended learning outcomes.</p>	<p>--Review programmatic alignment with professional standards/guidelines (Biannually)</p> <p>--Review student evaluations of courses (At least annually)</p> <p>--Review leveling and sequencing of courses within curriculum for each program.</p> <p>--Review how each curriculum builds on its foundation</p>	<ul style="list-style-type: none"> AD-ASA PDs Program faculty CC FEC 	<ul style="list-style-type: none"> Program goals and objectives Course syllabi and course-specific learning objectives Student course evaluations 	<p>BS, MECN, and APRN faculty discuss recommendations at Program Meetings make recommendations to the CC who then make the changes; if needed the faculty ballot on the action suggested</p>

Key Element	Indicators / Criteria / Expected Outcomes	Evaluation Process and Frequency	Accountability	Supporting Documents and Location	Analysis and Follow-up Action
<p>Key Element III-G: Teaching-learning practices:</p> <ul style="list-style-type: none"> ● support the achievement of expected student outcomes; ● consider the needs and expectations of the identified community of interest; ● expose students to individuals with diverse life experiences, perspectives, and backgrounds. 	<p>--Course syllabi demonstrate that students have opportunities to learn in a wide range of instructional and clinical settings relevant to their learning goals, the local COI and SON's leadership in local and global nursing.</p> <p>--Students are successful in achieving expected program outcomes.</p> <p>--Members of SON's COIs provide feedback related to curriculum development, implementation, and revision.</p>	<p>--Review instructional formats and materials (syllabus, assignments, course websites) (Annually)</p> <p>--Include participation of members of COI in discussions of programmatic needs at annual Clinical Affiliates meetings</p> <p>--Interviews of PDs with affiliate leaders (At least annually)</p>	<ul style="list-style-type: none"> ● AD-ASA ● PDs ● CC ● SON 	<ul style="list-style-type: none"> ● Student evaluations of courses and clinical sites ● Exit surveys ● Skyfactor surveys ● Faculty evaluation of clinical site suitability ● Faculty course evaluations ● Affiliation agreements with collaborating clinical instructional sites ● Feedback from clinical affiliates regarding SON performance (student and programmatic issues) and their staffing and hiring plans and needs 	<p>BS, MECN, and APRN faculty discuss current teaching-learning practices and potential improvements at Program Meetings and then make recommendations to the CC for action.</p>

Key Element	Indicators / Criteria / Expected Outcomes	Evaluation Process and Frequency	Accountability	Supporting Documents and Location	Analysis and Follow-up Action
<p>Key Element III-H: The curriculum includes planned clinical practice experiences that:</p> <ul style="list-style-type: none"> • enable students to integrate new knowledge and demonstrate attainment of program outcomes; • foster interprofessional collaborative practice; and • are evaluated by faculty. 	<p>--Clinical agencies used for student experiential learning are appropriate to the student's level of experience and sufficient in number to provide for achievement of course and program goals.</p> <p>--Students have collaborative clinical practice opportunities locally and globally.</p> <p>--Clinical practice experiences are structured to integrate new knowledge and develop student outcome--relevant competence.</p> <p>--Faculty are responsible for evaluating clinical experiences.</p>	<p>--Review programmatic clinical learning needs and the availability of appropriate clinical sites and preceptors to insure that they effectively meet expected outcomes. (Ongoing and Annually)</p> <p>--Review student evaluations of clinical courses and preceptors.</p> <p>--Document students' clinical hours and experiences. (At least annually)</p> <p>--Review faculty evaluations of clinical experiences and student performance.</p>	<ul style="list-style-type: none"> • PDS • Program Faculty • AD-ASA 	<ul style="list-style-type: none"> • Clinical site assessments by faculty • Student evaluations of courses, clinical sites, and preceptors • Faculty evaluations of student performance, clinical sites, and preceptors • Exit surveys • Skyfactor surveys 	<p>BS, MECN, and APRN faculty discuss current clinical practice experiences and potential improvements at Program Meetings and then make recommendations to the CC for action.</p>

Key Element	Indicators / Criteria / Expected Outcomes	Evaluation Process and Frequency	Accountability	Supporting Documents and Location	Analysis and Follow-up Action
<p>Key Element III-I Individual student performance is evaluated by the faculty and reflects achievement of expected student outcomes. Evaluation policies and procedures for individual student performance are defined and consistently applied.</p>	<p>--Student performance and progression policies are documented and applied consistently. --Faculty are responsible for evaluating student performance. --Evaluation criteria for student performance are consistent with expected student outcomes and communicated clearly to students. --Students have access to a structured and transparent complaints process. --Students whose performance does not meet expectations receive prompt counseling from faculty and staff.</p>	<p>--Review orientation content for incoming students --Review of student-advisor notes --Review of remediation records of students who are not meeting expectations (Ongoing and annually) OR: --Review policies and procedures that faculty use to evaluate student performance</p>	<ul style="list-style-type: none"> • AD-ASA • PDS • Program faculty • Lead Faculty and course faculty • Director of Student Affairs 	<ul style="list-style-type: none"> • Student Handbook • Course syllabi • Documentation of performance-related intervention procedures • Faculty course evaluations 	<p>Program faculty receive orientation to insure consistency and accuracy in evaluation forms/methods.</p>
<p>Key Element III-J: The curriculum and teaching learning practices are evaluated at regularly scheduled intervals, and evaluation data are used to foster ongoing improvement.</p>	<p>--Evaluation of faculty teaching practices are evident in regular faculty reviews --Curriculum revisions are based on evaluation data.</p>	<p>--Review quantitative and qualitative student evaluations of courses (Annually) --Review formative and summative data on course effectiveness at CC meetings and Summer Retreats (Annually) --Identify how the data are used to improve programs</p>	<ul style="list-style-type: none"> • AD-ASA • PDS • CC • CAPA • MAC • Course faculty • FEC and Evaluation Sub-committee 	<ul style="list-style-type: none"> • Student evaluations of courses • Minutes from CC meetings and Summer Retreats 	<p>Program faculty discuss curricular and teaching-learning practices at least annually and as needed and make recommendations to CC for improvements.</p>

Standard IV: PROGRAM EFFECTIVENESS: ASSESSMENT AND ACHIEVEMENT OF PROGRAM OUTCOMES

The program is effective in fulfilling its mission and goals as evidenced by achieving expected program outcomes. Program outcomes include student outcomes, faculty outcomes, and other outcomes identified by the program. Data on program effectiveness are used to foster ongoing program improvement.

Key Element	Indicators / Criteria / Expected Outcomes	Evaluation Process and Frequency	Accountability	Supporting Documents and Location	Analysis and Follow-up Action
Key Element IV-A: A systematic process is used to determine program effectiveness	<ul style="list-style-type: none"> Evaluation process is: Formalized in writing Comprehensive Accessible to faculty, staff, and students Applied systematically for all evaluation elements Revised as appropriate 	--Synthesize and review evaluation indicators, data, and professional standards to inform revisions to the Master Evaluation Plan. (As needed; at least every 3 years) --Review academic program-specific evaluation criteria by the CC. (As needed; at least every 3 years)	<ul style="list-style-type: none"> AD-ASA PDS FEC CC 	<ul style="list-style-type: none"> SON Master Evaluation Plan Minutes from Program Meetings, CC, FEC, Summer Retreats Current SON Strategic Plan 	Reviewed annually and approved by faculty
Key Element IV-B: Program completion rates demonstrate program effectiveness.	Completion rates are $\geq 70\%$	--Summarize admissions, attrition, and graduation data for each academic program. (Annually)	<ul style="list-style-type: none"> AD-ASA Director of Student Affairs Program Directors FEC 	<ul style="list-style-type: none"> Program completion rates Program annual reports 	Reviewed annually by Evaluation Subcommittee and by SAC and then presented to FEC
Key Element IV-C: Licensure pass rates demonstrate program effectiveness.	--For PL programs, first-time NCLEX passage rates will be $\geq 85\%$ annually.	Review published licensure exam pass rates by degree program. (Annually)	<ul style="list-style-type: none"> AD-ASA PDS Director of Student Affairs FEC 	<ul style="list-style-type: none"> Annual first-time licensure rates for each program 	Reviewed annually by Evaluation Subcommittee and presented to SAC, FEC, and Program faculty
Key Element IV-D: Certification pass rates demonstrate program effectiveness.	-- For APRN programs, first-time certification rates will be $\geq 80\%$ -- For CNL program, 80% of students who choose to take the CNL certification exam pass the exam (70%) on first attempt.	Review published certification pass rates by degree program and specialty role. (Annually)	<ul style="list-style-type: none"> AD-ASA PDS Director of Student Affairs FEC 	<ul style="list-style-type: none"> Annual first-time certification rates for each program 	Reviewed annually by Evaluation Subcommittee and presented to FEC and faculty at Program meetings

Key Element	Indicators / Criteria / Expected Outcomes	Evaluation Process and Frequency	Accountability	Supporting Documents and Location	Analysis and Follow-up Action
Key Element IV-E Employment rates demonstrate program effectiveness.	--Within 1 year of graduation, employment rates for students will be at least 70%	Review online survey of graduates (As needed and at least annually)	<ul style="list-style-type: none"> AD-ASA PDs Director of Development and Alumni Relations 	<ul style="list-style-type: none"> Alumni Surveys Employer surveys 	Reviewed annually by Evaluation Subcommittee and presented to FEC
Key Element IV-F Data regarding completion, licensure, certification, and employment rates are used, as appropriate, to foster ongoing program improvement.	All program assessment data are systematically reviewed with action plans developed for deficits.	Compare outcome data from Key Elements IV-B to IV-E to expected program outcomes	<ul style="list-style-type: none"> Dean AD-ASA PDs and program faculty FEC and Sub-Committee on Evaluation 	<ul style="list-style-type: none"> Program faculty meeting minutes CC minutes FEC minutes Evaluation Subcommittee minutes 	Outcomes discussed and analyzed by faculty at Program Meetings annually

Key Element	Indicators / Criteria / Expected Outcomes	Evaluation Process and Frequency	Accountability	Supporting Documents and Location	Analysis and Follow-up Action
<p>Key Element IV-G Aggregate faculty outcomes demonstrate program effectiveness.</p>	<p>--Faculty perform effectively in teaching, scholarship, practice and/or service roles: <u>Teaching:</u></p> <ul style="list-style-type: none"> Quality of instruction will be greater than 6 (scale 1-9 with 9 being highest) on student evaluations. <p><u>Faculty scholarship:</u></p> <ul style="list-style-type: none"> 75% of all tenure track and adjunct faculty will disseminated at least 1 scholarly product annually. <p><u>Faculty Practice:</u></p> <ul style="list-style-type: none"> 80% of faculty engage in clinical practice which includes active practice, research in a hospital or community-based clinical setting, volunteer in a clinical setting such as medical trips or health fairs. <p><u>Faculty Service:</u></p> <ul style="list-style-type: none"> 75% of all faculty serve on at least one SON, university, or professional organization committee. 	<p>Assess faculty outcome data in teaching, scholarship, and service</p>	<ul style="list-style-type: none"> Dean AD-ASA PDS FEC 	<ul style="list-style-type: none"> Faculty promotions/merits Record of faculty development symposia Aggregate student evaluations of teaching State of the School Report Faculty CVs Faculty 4th year reviews Workload Policies 	<p>Reviewed annually by Evaluation Subcommittee and presented to FEC</p>
<p>Key Element IV-H Aggregate faculty outcome data are analyzed and used, as appropriate, to foster ongoing program improvement.</p>	<p>All faculty outcome data are systematically reviewed with action plans developed as needed.</p>	<p>--Compare outcome data from Key Element IV-G faculty outcome data to expected program outcomes</p>	<ul style="list-style-type: none"> Dean AD-ASA PDS FEC 	<ul style="list-style-type: none"> State of the School Reports Faculty CVs Faculty course evaluations 	<p>AD-ASA collaborate PDS to assess opportunities for program improvement; plans for improvement are referred to program faculty meetings and FEC if appropriate.</p>

Key Element	Indicators / Criteria / Expected Outcomes	Evaluation Process and Frequency	Accountability	Supporting Documents and Location	Analysis and Follow-up Action
<p>Key Element IV-1 Program outcomes demonstrate program effectiveness.</p>	<p>--Student Exit Survey (EBI):</p> <ol style="list-style-type: none"> 1. overall student satisfaction > 75% 2. overall scores for student assessment of learning > 75% 3. overall scores for student assessment of program effectiveness > 75% <p>--Alumni Employment Survey:</p> <ol style="list-style-type: none"> 1. time to employment is at least 90% for PL alums and 80% for APRN alums at 12-months post-graduation 2. 80% of student respondents report UCLA education as one of the top 2 indicators of securing a nurse position <p>--Employers' ratings of graduates' clinical performance:</p> <ol style="list-style-type: none"> 1. 90% of employers surveyed rate graduates as "good, very good, or outstanding" in clinical performance <p>--End-of-Program Student Achievement of Program Goals:</p> <ol style="list-style-type: none"> 1. BS Program: 90% of B.S. students achieve a passing score of 74% on the Capstone Project. 2. MECN program: students achieve ≥ 80% on the first-take of the comprehensive exam. 3. APRN program: students achieve ≥ 80% on the first-take of the comprehensive exam. 	<p>--Collect data on student satisfaction and achievement upon graduation annually</p> <p>--Collect data on alumni and employer satisfaction every three years</p>	<ul style="list-style-type: none"> • AD-ASA • PDS • Student Affairs Director • Director of Development and Alumni Relations 	<ul style="list-style-type: none"> • Employer Survey • Alumni Survey • EBI (new grad survey) 	<p>Outcomes presented to Evaluations Subcommittee after discussion and analysis by faculty at Program Meetings.</p>

Key Element	Indicators / Criteria / Expected Outcomes	Evaluation Process and Frequency	Accountability	Supporting Documents and Location	Analysis and Follow-up Action
<p>Key Element IV-J Program outcome data are used, as appropriate, to foster ongoing program improvement.</p>	<p>--All program assessment data are reviewed systematically with actions plans developed and implemented as needed</p>	<p>Collect, review, and synthesize data to inform ongoing program quality improvement and leadership/faculty decision-making throughout SON. (Ongoing)</p>	<ul style="list-style-type: none"> • Dean • AD-ASA • PDS, • FEC • Faculty Chair 	<ul style="list-style-type: none"> • SON Master Program Evaluation Plan • Course Evaluations • Minutes of CC, FEC, Program Meetings, Summer Retreats 	<p>After review by Evaluations Subcommittee, FEC conducts systematic review and assigns development of action plans to appropriate entities (i.e., Curriculum Committee, SAC, Program Directors). Completed action plans are presented to program faculty for discussion and feedback prior to final approval by FEC</p>