



# Academic Quality Improvement Program

# Systems Portfolio

*Submitted to the Higher Learning Commission  
June 2008*



**Saint Francis Medical Center  
College of Nursing  
Peoria, Illinois  
[www.sfmcon.edu](http://www.sfmcon.edu)**

*A Tradition of Excellence in Nursing Education Since 1905*

Saint Francis Medical Center College of Nursing  
Peoria, Illinois

Systems Portfolio  
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## **Institutional Overview**

### **O1 Distinctive Institutional Features**

Saint Francis Medical Center College of Nursing, owned by The Sisters of the Third Order of St. Francis, is affiliated with and located on the campus of OSF Saint Francis Medical Center (OSFSFMC) in Peoria, Illinois. The College is a private, non-profit, specialized nursing college offering upper division undergraduate and graduate nursing programs. In keeping with the Mission of the Sisters, the College of Nursing continues a tradition of excellence in nursing education. The College of Nursing is the only Catholic college of nursing in the Peoria Diocese. OSF Saint Francis is one of the largest Catholic health care facilities in the United States and the second largest employer in Peoria. The tri-county area, including Peoria, has a population of approximately 365,000. Peoria is known for its leading downstate health care facilities.

The College which had its beginnings as St. Francis Hospital School of Nursing was organized in 1905, for Sisters only. The School's diploma program was approved by the State of Illinois in 1915, and opened to lay students in 1918. The School maintained continuous State approval of the diploma program. In 1950, the School received accreditation of the diploma program from the National League for Nursing (NLN), which continued through graduation of the last class in 1987. From 1905 through 1987, approximately 3400 students graduated from the diploma program.

The College of Nursing was established in November 1985 with approval of the baccalaureate program by the Illinois Department of Professional Regulations. The College enrolled its first students as juniors in August 1986. The first class graduated in May 1988. The College has graduated 1233 Bachelor of Science in Nursing (BSN) students as of December 2007.

In March 2000, the College received approval from the OSF Healthcare Systems Board of Directors to develop and implement a Master of Science in Nursing (MSN) program. In May 2001, the College received approval from the National League for Nursing Accrediting Commission (NLNAC) to offer a MSN program. In June 2001, the Higher Learning Commission of the North Central Association (NCA) approved the program. In February 2004, the Graduate Program was accredited by the NCA and in fall 2004, the Graduate Program received initial accreditation by NLNAC. The first class graduated in May 2004, and there have been a total of 31 graduates as of December 2007.

The College faculty and administration are committed to quality education as demonstrated by institutional and program accreditation. The College was granted candidacy with the NCA in 1987, continued candidacy in 1989, initial accreditation in 1991, and continued accreditation in 1996. The College voted to become involved in the AQIP process in 2004. The College sent a team to the Strategy Forum in 2005. Work continues on the first three projects that were selected by the College with participation from employees at all levels. In March 1992, the College received initial accreditation of the baccalaureate program from the National League for Nursing Accrediting Commission (NLNAC) and continued accreditation was received in fall 2004 with the next visit scheduled for the BSN program in fall 2012. The MSN program received initial accreditation in 2004 with the next visit in fall 2009.

Saint Francis Medical Center College of Nursing continues the history of nursing education started by The Sisters of the Third Order of St. Francis, Peoria, Illinois, whose mission is to provide health care to the sick, injured, and poor, and education for health care providers to the community of Peoria and surrounding areas. The Mission of the College flows from the Sisters' Mission and is "to provide nursing education programs at the undergraduate and graduate level....The College serves the community by providing competent entry level and advanced practitioners responsive to the changing health needs of society and the health care system." The College philosophy, values, goals, and

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program objectives flow from the Mission. The College Goals are: 1) Prepare the graduate to practice professional nursing in a variety of roles and health care settings; 2) Provide the essential foundation for graduate study in nursing; and 3) Foster the commitment to personal and professional growth and accountability. The Core Values of the College are:

- Personal and Professional Development (includes learning, caring, leadership, and personal worth and dignity)
- Service (includes integrity, responsibility, and accountability)
- Quality (includes excellence)
- Agility (includes being future focused and forward thinking).

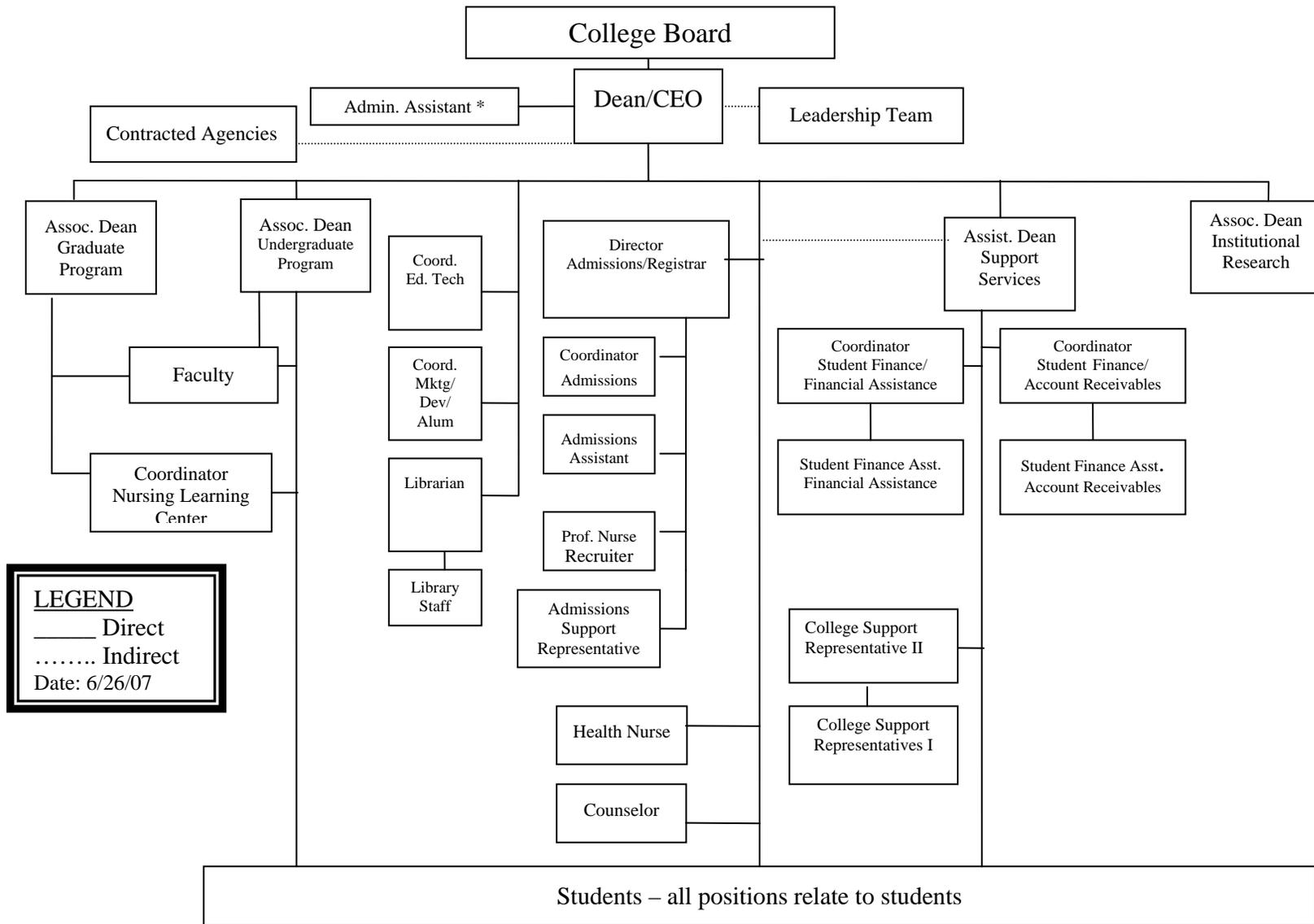
The College's 2007-2010 Strategic Plan provides the strategic direction and vision for the College. Beginning in 2007, the College's Strategic Plan was integrated with AQIP activities to create a more effective and efficient planning process. The combination is intended to eliminate redundant activities and remove gaps in the planning process. Through the transition, the College sustained current levels of accomplishment and gained focus by relating further goals to the Four Pillars on which the College's growth will be based. The plan is organized under Four Pillars which include specific goals:

- Pillar One – Community of Care Givers
- Pillar Two – Public Accountability: Quality, Service, and Safety
- Pillar Three – Financial Stewardship
- Pillar Four – Service Line Development: Education Programs

The College's Mission, philosophy, values, and strategic plan lead the College as it continues "the Tradition of Excellence in Nursing Education." In 2007, as part of this "tradition of excellence," the College received the Spalding School Award from the Catholic Diocese of Peoria in recognition of its long history of providing quality nursing education in the Peoria Diocese.

Figure O1-1 presents the Organizational Structure of the College of Nursing. The College is overseen by a 15 member College Board. The operation of the College is administered by the Dean. The Dean works closely with the Associate Deans who oversee the implementation of the academic programs of the College. More information on the College can be found on the College website at [www.sfmcon.edu](http://www.sfmcon.edu).

Figure O1-1 Saint Francis Medical Center College of Nursing, Peoria, Illinois, Organizational Chart 2007



\*The Administrative Assistant supports the Dean, Associate Deans, and Assistant Dean.

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The College has a shared governance structure which operates through the College Senate. The purpose of the College Senate is to provide a framework to achieve the goals of the College through the efforts of all faculty and staff members, promote the professional growth of its members, and promote participation in the development of the policies and programs of the College and in fulfilling the Mission of the College. There are 10 standing committees of the College Senate. The standing committees are the principal mechanism for doing the work of the College Senate. The committees make recommendations and report at College Senate meetings.

### **O2 Scope of Offerings**

The College of Nursing offers programs at the undergraduate and graduate levels. The undergraduate program is a 124 credit program that leads to the Bachelor of Science Degree in Nursing (BSN). There are 62 credits of liberal arts and science courses and 62 credits in the nursing major. Students enroll in the 62 hours of liberal arts and science courses at an accredited college or university of their choice. The students are admitted to the College for the upper division nursing courses. There is a 123 credit RN to BSN Accelerated Pathway that provides registered nurses the opportunity for an accelerated option in the Baccalaureate Nursing Program.

At the graduate level, the College offers a 45 credit Master of Science in Nursing Degree program in either Medical-Surgical Nursing or Child and Family Nursing. Within this option, the student can select a clinician or educator focus. There is a 35 credit Clinical Nurse Leader option which leads to a Master of Science in Nursing Degree. The College offers an Accelerated Pathway to the MSN for RNs with a Non-Nursing Baccalaureate Degree. The College offers two post graduate certificates. The 9 - 12 credit certificate programs include options as a Nurse Clinician or Nurse Educator.

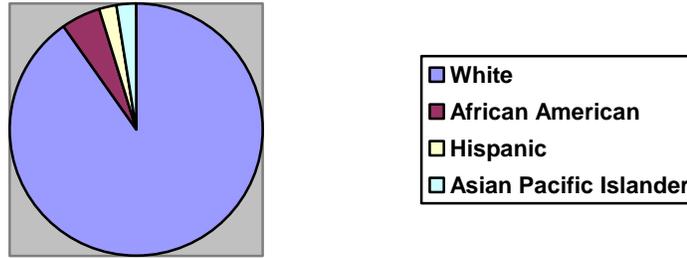
### **O3 Student Base, Needs, Requirements**

Students enroll at the College as junior students in the nursing major in the baccalaureate program. Students transfer courses from a variety of colleges and universities. The majority of the students enroll from area community colleges. Since 2002, the mean GPA on admission has ranged from 3.24 to 3.43 (Category 1). The mean age of students entering in 2006-2007 was 28 years which was up from the previous year's mean age of 27 years. Ninety percent of the students in both programs received some type of financial assistance in 2006-2007.

In spring 2008, there were 417 students enrolled in the College of Nursing. Of the students enrolled, 274 (66%) were full-time students and 143 (34%) were part-time students. Of 417 students, 381 (91%) were female and 36 (9%) were male. As to ethnicity, 376 (90%) of the students were White, 21 (5%) were Black, 9 (2%) were Hispanic, and 11 (3%) were Asian/Pacific Islander (Figure 03-1). Data from the American Association of Colleges of Nursing (AACN) 2007 survey of nursing programs shows that 9.9% of students in BSN programs were male and that 74.8% are White and 25.2% are a minority. AACN data for MSN programs for 2007 shows that 8.9% of the students were male and 77.3% were white and 22.7% were a minority. The College has a strategic goal to increase diversity of students in both programs.

A total of 324 students were enrolled in the BSN program with 270 (83%) enrolled as full-time students and 54 (17%) enrolled as part-time students. There were two full-time and 26 part-time RNs returning for their BSN. There were 293 (90%) females and 31 (10%) males in the BSN program. For spring 2008, there were 93 students enrolled in the MSN program: four (4%) full-time and 89 (96%) part-time with 9 new students enrolling in spring 2008 semester. One of those 9 students was enrolled in the Post Graduate Clinician Certificate program. There were 88 (95%) females and 5 (5%) males.

**Figure 03-1 Ethnicity of Students**



**O4 Collaborations, Needs, Requirements**

Saint Francis Medical Center College of Nursing maintains cooperation and collaborative agreements with a variety of clinical agencies, other colleges and universities (Figure O4-1).

**Figure O4-1 Collaborative Relationships**

Collaborations	Number of Institutions Involved	Collaborative Efforts
<b>Peoria Educators in Nursing (PENS)</b>	10	Coordination of available clinical agencies in the Peoria area to provide the best possible clinical learning experiences for all area schools. To communicate and collaborate with patient care administrators to meet the need for nurses in the community at large (PENS, 2004)
<b>Illinois Central College (ICC)</b>	2	Dual Admission Process – a recruitment process to ensure the enrollment into the correct prenursing courses and enhance a smooth transition from the community college to the College of Nursing
<b>Illinois Central College</b>	2	RN-BSN Articulation Agreement to grant 31 credits to Associate Degree RNs seeking a Bachelor of Science degree
<b>Illinois Central College</b>	2	ICC share student learning resources and testing service
<b>Clinical Agencies/ Educational Institutions</b>	57	Students are assigned to a variety of clinical agencies or educational institutions to ensure the depth and breath of their nursing and education knowledge
<b>eCollege Online Course Ware</b>	3	The license is shared by five areas of OSF Healthcare System and has proven to be very cost effective

**O5 Faculty and Staff Base**

Currently the College employs 5 administrators, 29 full-time faculty, 18 part-time faculty, and 19 full-time staff (Figure O5-1). The Dean and three Associate Deans hold earned doctorates and the Assistant Dean holds a master’s degree. The full-time faculty are ranked as instructor, assistant professor, associate professor, or professor. The faculty and staff are predominately female (96%) and white (96%). This mirrors the national statistics that show that 93% of nurses are female. The College does have a strategic initiative to increase the diversity of the faculty.

Figure O5-1 2007-2008 Faculty and Staff by Status

Education Level	Faculty		Professional Staff		Staff	
	Full-Time	Part-Time	Full-Time	Part-Time	Full-Time	Part-Time
<b>Doctorate/terminal degree</b>	8					
<b>Doctoral Candidates</b>	4	2				
<b>Master's degree</b>	17	17	3		1	
<b>Bachelor's degree</b>	0	0	4		1	3
<b>Associate's degree</b>	0	0	1		2	
<b>High School</b>					7	
<b>Total</b>	29	19	8		11	3

**O6 Facilities, Equipment and Technologies, Regulatory Environment**

The College is housed in two buildings located on the campus of OSF Saint Francis Medical Center in Peoria, Illinois. Educational facilities, library, computer laboratories, administrative and student services offices, and residence facilities are located in an eight-story building. A separate building houses the College's Nursing Resource Center which includes the state-of-the-art laboratories which was opened in August 2007. The main building is currently undergoing renovations to update and modernize student rooms and bathroom facilities.

All faculty and staff desktop computers, as well as the computers in the two computer laboratories and all classrooms are provided service through the network connection via OSFSFMC. The College contracts with RJM for provision of the student information system, SONISWEB. The College provides its online learning experiences through its contractual agreement with eCollege.

The College is approved by the Illinois Board of Higher Education and the State of Illinois Department of Financial and Professional Regulation. The College has had continuous institutional accreditation from the Higher Learning Commission North Central Association and program accreditation from the NLNAC. The College conforms to state and federal Department of Education financial regulations and is audited annually by an independent financial auditor.

**O7 Competitive Environment**

The College is one of five baccalaureate nursing programs within a 50-mile radius in Central Illinois. These four other competitors for the baccalaureate program are: Bradley University, Methodist College of Nursing, Illinois Wesleyan University, and Mennonite College of Nursing at Illinois State University. There are also three associate degree programs (Illinois Central College, Spoon River College, and Heartland Community College) and one diploma program (Graham Hospital School of Nursing) within this same radius. Due to the College's excellent reputation, the College continues to get applications from qualified applicants that exceed the capacity of the class. The College's tuition is comparable or less than the other baccalaureate programs which also allows us to remain competitive for quality students.

The College does compete with these other nursing programs for clinical sites for nursing students. With each program increasing enrollment, there is a need for additional learning experiences and clinical sites for all. Through the Peoria Educators in Nursing (PENS) group, all the nursing programs meet to equitably use the facilities in the Peoria area.

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There is also competition for qualified nursing faculty. With five programs in the Peoria area and an additional four programs within 50 miles, each program is continually seeking qualified faculty. Clinical salaries for advanced practice nurses have increased to a point where the nurses with master's degrees who could teach choose to remain in clinical practice. This increase in clinical nursing staff salaries makes clinical agencies another competitor for qualified faculty.

There is competition from three other graduate programs in the area for qualified preceptors for the students enrolled in the practicum experiences in the MSN program. This arises due to the limited number of advanced practice nurses, the demands of their clinical positions, and the increased number of graduate students. The online MSN program has also provided opportunities for the graduate students to find preceptors in other regions of Illinois and out of state. These experiences offer students a broader perspective on the role of the advanced practice nurse.

### **O8 Opportunities and Vulnerabilities**

Over the last several years, the College has had the opportunity to more than double its enrollment in both the BSN and MSN programs. The actual and projected nursing shortage as well as job opportunities has sparked an interest in nursing, and the number of qualified applicants has risen greatly. The College continues to explore ways to further increase the enrollment in both programs.

The College's relationship with OSFSFMC has provided a variety of learning opportunities for coordinated theory and clinical experiences for students. OSFSFMC is the primary clinical site for the BSN and MSN programs. OSF Saint Francis Medical Center, a Magnet hospital, is one of the largest Catholic hospitals in the United States and offers an environment which promotes and stimulates learning. OSFSFMC is also the site of the Children's Hospital of Illinois and St. Jude Midwest Affiliate. Complete information can be found at: <http://www.osfsaintfrancis.org>.

With capital funding from OSF Saint Francis Medical Center, the College of Nursing was able to develop a new Nursing Resource Center which contains four laboratories for student learning as well as enhanced classrooms and facilities within the College to meet the educational needs of the increased student base. The laboratories are state of the art with simulation equipment that enables the College to provide real life simulation situations which will better educate the students to prepare for their career in nursing. In addition to these financial benefits, we are currently in the process of reviewing and revising the BSN curriculum in order to accommodate for the changes in nursing and healthcare. This revision will further improve the education offered to students.

The growth of the graduate program has made the availability of preceptors a challenge the College is facing. The increased student enrollment had made it difficult to place the students with the limited number of advanced practice nurses in the Medical Center. This challenge, however, has opened doors to other departments within OSFSFMC to be able to sponsor graduate students during their practicum experience.

Within the next five years, the College will potentially face some key retirements in administration and faculty. The College is planning for these retirements through the education and training of its existing faculty and staff. A formalized plan for Leadership Succession is being developed.

**Category One: Helping Students Learn**

**CONTEXT FOR ANALYSIS**

**IC1 Common Student Learning Objectives**

The curricula of the programs at the College reflect common student learning objectives. All BSN students are required to complete 62 semester hours of pre-nursing liberal arts and science courses prior to starting the nursing major. The liberal arts and science courses provide the foundation for the nursing major. The required pre-nursing sequence is composed of five courses (19 semester hours) in the physical and life sciences, five courses (15 semester hours) in social and behavioral sciences, 3 courses (9 semester hours) in humanities and fine arts, 3 courses (9 semester hours) in communication skills, 2 courses (6 semester hours) in mathematics, and one or two electives to total 62 semester hours. Requirements for students admitted to the MSN programs are a completed baccalaureate degree and successful completion of a graduate level statistics course and undergraduate Health Assessment and Nursing Research. These liberal arts and science courses contribute to the art and science of nursing by enhancing the student’s ability to think logically, reason, formulate ideas, and communicate effectively. They also enhance the student’s natural abilities, stimulate creativity, and encourage a willingness to explore new ideas.

Program objectives were developed by the faculty for the BSN and MSN programs. The objectives flow from the Mission, Vision, and Philosophy. Figure 1-1 presents the program objectives.

Figure 1-1 Program Objectives

<b>BSN Program</b>	<b>MSN Program</b>
<ul style="list-style-type: none"> <li>• Synthesize theoretical and empirical knowledge from the liberal arts and sciences with nursing as a basis for the practice of professional nursing.</li> <li>• Express caring in professional interactions.</li> <li>• Implement the nursing process to assist clients throughout the life cycle in reaching optimal health by facilitating adaptation within their social system.</li> <li>• Evaluate effectiveness of own nursing practice and accept responsibility and accountability for its outcome.</li> <li>• Apply appropriate research findings in the practice of nursing.</li> <li>• Utilize leadership skills and principles of management with clients and health professionals to coordinate, facilitate, and improve the delivery of health care in a variety of settings.</li> <li>• Synthesize legal, ethical, and professional standards with values into nursing practice decisions.</li> <li>• Accept responsibility for continued personal and professional role development.</li> </ul>	<ul style="list-style-type: none"> <li>• Integrate theory, research, and practice using critical thinking, for the improvement of client care in a variety of settings and the advancement of the nursing profession.</li> <li>• Practice autonomously in a variety of professional roles to respond to the social, economic, ethical, political, and legal issues impacting the needs of clients and the nursing profession.</li> <li>• Express caring in professional interactions which supports the values and promotes the growth and self-actualization of individuals, groups, and communities.</li> <li>• Provide collaborative leadership within the complex healthcare system in a culturally diverse society.</li> <li>• Synthesize the principles of education to develop interventions that promote, maintain and restore health.</li> </ul>

The College outcomes are critical thinking, communication, and therapeutic nursing interventions as

additional learning outcomes for both programs. The outcomes were identified by faculty and approved by the College Senate. In addition to critical thinking, therapeutic interventions, and communication, the graduate program students are expected to achieve leadership and scholarly inquiry. The Systematic Program Evaluation and Assessment of Outcomes Plan (SPEAOP) identifies the levels of achievement for each objective for both programs.

### **1C2 Alignment of Student Learning Objectives with College Mission and Vision**

The College of Nursing fulfills the Mission and Vision by providing undergraduate and graduate nursing programs. The Organizing Framework and Program Objectives flow from the Mission, Vision, Philosophy, and College Goals. The Organizing Framework describes the concepts in the curricula and provides direction to faculty for curriculum design, course sequencing, course content, the selection of teaching/learning strategies, and evaluation processes. The Organizing Framework was developed and reviewed by the Curriculum and Graduate Committees and approved and maintained by the College Senate. The Organizing Framework is developed from the five major concepts of person, health, nursing, society, and environment. These concepts are found in the philosophy. The Vision is connected to the strategic plan and is discussed in Categories Two and Eight.

### **1C3 Key Instructional Programs: Delivery and Use of Technology**

The College offers undergraduate and graduate nursing programs. The undergraduate nursing program is 124 credit hours and leads to a Bachelor's of Science Degree in Nursing (BSN). These hours are divided into 62 semester hours of required pre-nursing courses and 62 hours of courses in the nursing major. The required pre-nursing hours are taken at a regionally accredited college or university of the student's choice. The curriculum was designed by the faculty so that each course contributes to the overall program. The curriculum is based on the Mission and Philosophy of the College. Courses required in the pre-nursing sequence prepare the student for the study in the nursing major. Upon completion of the BSN program, students are eligible to write the National Council Licensure Examination for Registered Nurses (NCLEX-RN).

The College offers an accelerated option in the baccalaureate program for registered nurses. The RN to BSN Accelerated option is 123 semester credits. The students take the required 62 credits of liberal arts and sciences along with 61 nursing credits. The nursing credits are offered by the College. Graduates of state approved diploma or associate degree nursing programs may receive 31 semester hours of credit in the nursing major without examination upon satisfactory completion of the specified courses according to College policy. Registered nurse students have the opportunity to obtain credit for two clinical courses through the completion of a portfolio. The portfolio demonstrates achievement of course objectives through prior work experience.

The Master of Science in Nursing (MSN) program is a 45 credit hour program of study designed to provide the baccalaureate professional nurse with current advanced knowledge and skills in Medical-Surgical Nursing or Child and Family Nursing with an option for either clinician or educator. Graduate students who select the nursing clinician option are prepared to assume leadership roles in an integrated healthcare system and are able to develop, implement, and evaluate programs for targeted populations in a variety of settings. Graduate students who select the nursing educator option are prepared to design and use multiple educational delivery systems and teaching strategies and develop, implement, and evaluate curriculum that prepares nurses who are responsive to current and future healthcare systems. The program prepares graduates in scientific inquiry, which includes validating and applying research findings to nursing practice, and evaluating nursing theory appropriate for advanced practice.

Upon successful completion of the program of study, the graduate may either take a national certification examination to become a certified clinical specialist or practice as a master's prepared nurse. Upon

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completion of three years of teaching, graduates are eligible to write the certification in nursing education examination. Graduates choosing to use the title Advanced Practice Nurse, take the national certification examination and apply to the Illinois Department of Financial and Professional Regulations for licensure to practice in Illinois.

The College also offers a 35 credit option that leads to a Clinical Nurse Leader (CNL). This program provides the baccalaureate prepared nurse with in-depth study as a leader in an integrated healthcare system. The CNL student selects a focus of either Medical-Surgical or Child and Family option. Upon completion of the CNL program, graduates are eligible to take the national certification examination for Clinical Nurse Leader. The Accelerated Pathway to the MSN for RN's with a Non-Nursing Baccalaureate Degree is a 45 credit hour program with an accelerated option for nurses who hold either an associate degree or a diploma in nursing and have a bachelors degree in a discipline other than nursing. The accelerated option requires the student to have 62 credit hours of pre-nursing courses. The student receives 31 credits for nursing and takes courses in health assessment, nursing research, community health nursing, a clinical practice experience, and a transitions course. Students have the opportunity to present a portfolio of experiences and education for validation of the courses in community health nursing and/or the clinical practice experience.

The College offers two post-graduate certificate programs for nurses with Master's Degrees in Nursing who wish to further develop their knowledge and skills. Students can earn a Nurse Educator or Clinician certificate. The programs are designed for nurses who hold a master's degree in nursing and wish to acquire additional knowledge and skills in the role of educator or clinician. The certificate programs are 9 to 15 credits in length.

The College offers courses using traditional, hybrid and online delivery methods during a 16-week semester. Traditional courses are delivered primarily in a classroom setting. Hybrid courses are courses that are predominantly a traditional delivery method with some online activities imbedded within the course. Courses in the BSN program are typically delivered using traditional classroom or hybrid methods. In 2005, the change in federal legislation related to Title IV funding that mandated that colleges could not offer more than 50% of courses as correspondence or distance courses allowed the College to further develop online course offerings for the RN to BSN Accelerated Option. This law allowing Colleges to offer more than 50% of its courses via distance education was effective July 1, 2006. With this change in federal regulation related to distance education, the College focused on developing online sections for most all courses in the RN to BSN option. In fall 2008, the required clinical course, 424 Nursing Care of Clients in the Community, will offer an online section for registered nurses. The final course requiring online development is 302 Ethical Implications in Healthcare. The MSN program is predominately online and was the first to offer online courses. MSN courses meet on campus the first week of classes. Depending on the course, students can meet on campus up to three additional times. A number of courses only meet the first week. In 2001 the College contracted with eCollege as the online course delivery platform, which provides for email, document sharing, and threaded discussion. In 2007-2008, the College became a member of the online public access catalog service of Consortium of Academic and Research Libraries of Illinois (CARLI) (See 7R1). This service provides the students access to and borrowing privileges in academic and research libraries across the state.

The College of Nursing is committed to providing technology for teaching and learning for students, faculty and staff. Desktop computers are present in all faculty and staff offices. There are network printers for faculty and the administrative offices have individual printers as well as network printer access. All classrooms are equipped with computers with sound, CD/DVD, video capability, LCD projector and internet access. The classroom computers are network computers which allow faculty to access materials for teaching that are stored in their Documents. Other equipment such as video cameras, laptop computers, portable LCD projector, and printers are available. The newly designed laboratories in the

Nursing Resource Center have classrooms with the technology listed above. In addition, all beds or patient stations have a computer at the bedside which is networked with access to the Medical Center computerized charting system. Wireless access is available in limited areas in the Nursing Resource Center and College building.

#### **1C4 Preparing Students for a Diverse World and Accommodating Learning Styles**

The College prepares students for a diverse world by incorporating concepts of diversity and culture in nursing courses. Students study and provide nursing care for clients from diverse backgrounds. As part of the assessment and planning for culturally competent nursing care, students consider cultural, religious, and ethnic backgrounds of the patients. Students receive content in problem solving, decision making, informatics and technology as part of being prepared to practice nursing in a changing and diverse healthcare system. Through an Independent Study course, students have had opportunity to be part of medical mission trips to Haiti. The College is currently working on developing a Spanish medical terminology course to offer to undergraduate students as an elective course. The Strategic Plan focuses on increasing diversity in the student and faculty demographics at the College. The plan addresses a goal of having the student demographics more closely mirror the demographics of the 37 county area from which the College draws most of its students.

The College accommodates different learning styles in students by using a variety of learning activities and teaching methods. In the classroom, faculty use a combination of lecture, small group activities, visual learning activities, and team learning. Online courses use visual presentations and threaded discussions along with occasional face to face meetings. Graduate students present at the College Research Day and several graduate courses require in class presentations and formal papers. Nursing courses with a clinical/laboratory component use hands-on learning with laboratories, simulation activities, and clinical experiences. Students in the Community Health Nursing course complete a service learning project. A full-time counselor is available to assist students with test anxiety, test-taking skills, and assessment of learning difficulties. Other practices that accommodate student learning styles are: classrooms equipped with technology, state-of-the-art simulation and practice laboratories, and faculty to student ratios in laboratories and clinical of 1:6-8. Through a cooperative agreement with Illinois Central College, students have access to the Learning Lab which provides assistance to students with a variety of subjects such as English, math, and reading.

#### **1C5 Creating a Climate that Celebrates Intellectual Freedom, Reflection, and Respect**

The College is committed to student learning and accepts the responsibility to create an environment that facilitates student learning and meets the educational needs of its students. The statement on academic freedom formulated by the American Association of University Professors is the policy on academic freedom and is printed in the *Faculty Handbook*. Monthly Communication Forums held by the Dean allow for open discussion and communication among faculty and staff. Open discussions related to College issues are held at College Senate and at times are online via eCollege. This promotion of open discussion of topics carries over into the classroom. Students are encouraged to present divergent ideas and have open discussion. This is reflected by several statements on the course evaluations completed by students. The graduate students are invited to forums each semester. The College policy on Intellectual Property is found in the *Academic Program Handbook*. The policy delineates the ownership between the College and faculty of any intellectual property. The 2005-2010 Strategic Plan has a goal to increase faculty inquiry through increased involvement in research.

The College has a shared governance structure which is reflected in the College Senate and standing committee structure. All faculty and key staff people are involved in the committee and Senate structure. All faculty and staff members have the opportunity to be members of AQIP Action Project groups. All faculty and staff were involved in the discussions which led to the development of the current 2005-2010 Strategic Plan. Every two years, the College sponsors an all College meeting which is held off campus.

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During the meeting, faculty and staff are encouraged to freely discuss issues impacting the College. Strategic initiatives and AQIP projects are discussed.

The College recognizes accomplishments of the faculty and staff both formally and informally. To celebrate faculty and staff accomplishments, announcement of accomplishments are sent via email to all College personnel. Administrators at the College recognize faculty and staff monthly. As a component of the Leadership Development process (Category Five), administrators send a minimum of one letter each month to a faculty or staff member recognizing their contributions to the College. As part of the organization's recognition of employees program, WOW Awards are given to faculty and staff who "go above and beyond" in their daily work activities. WOW stands for "What Outstanding Work". Through the Human Resources department, the employee is able to cash in WOW awards for gift cards to local restaurants and stores.

### **PROCESSES**

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#### **1P1 Determining Common Student Learning Objectives**

The Admission and Progression (A&P), Curriculum, and Graduate committees, initially establish common student learning objectives. The committees are made up of faculty and professional staff. The Admission and Progression committee evaluates, recommends, and implements policies and establishes procedures and guidelines for pre-nursing courses, admission, progression and graduation of baccalaureate students. The Curriculum and Graduate Committee use the SPEAOP for the development, revision, and maintenance of the curricula and facilitate implementation of curriculum changes within their respective programs. The Curriculum and Graduate Committees also review course offerings and schedules each semester and recommend content and credit hour requirements of prerequisite courses to their respective programs. The Graduate Committee evaluates, recommends, and implements policies and establishes procedures and guidelines for admission, progression, and graduation from the MSN program. All committee recommendations are taken the College Senate for approval. Once the recommendations are approved, the committees assume responsibility for implementation, maintenance, and evaluation of the policies.

The requirements of the BSN pre-nursing curriculum incorporate both the General Education Core Curriculum adopted by the Illinois Board of Higher Education and the specific courses required to support the nursing major. The committees review the Rules and Regulations of the Illinois Nurse Practice Act Section 1300.40 Section f9a which specifies curriculum content for professional nursing programs. The Pew Health Professions Commission *Competencies for 2005* and the *21 Competencies for the Twenty-First Century* are other sources used when developing student learning objectives. These documents outline skills and competencies for nursing programs. The specified outcomes in the accreditation requirements from the National League for Nursing Accrediting Commission (NLNAC) are also incorporated into student learning objectives. Feedback from students and alumni are also considered when making decisions. For example, in 2002 the College implemented a change in the pre-nursing requirement based on students' feedback on the Curriculum Satisfaction Survey, which indicated that Introduction to Philosophy was not useful. The College reviewed the Illinois Board of Higher Education core liberal arts curriculum and benchmarked with other colleges of nursing. Based on the gathered data, the College changed the requirement for Introduction to Philosophy to any transferable philosophy course.

Program Objectives are determined by the faculty based on review of literature along with the American Association of Colleges of Nursing (AACN) *Essentials of Baccalaureate Nursing Education* and *Essentials of Master's Nursing Education*. Program objectives are approved by the College Senate and College Board. Course objectives and course descriptions are determined by faculty and approved by the Curriculum Committee for BSN courses and the Graduate Committee for graduate courses. The standing committees bring the objectives to the College Senate for approval. For example, a need was identified

through student feedback to develop a Spanish Medical Terminology course to meet the needs of caring for a diverse patient population. The course is being developed by the faculty through the Curriculum Committee and then it will be taken to the College Senate for approval.

### **1P2 Designing New Programs and Courses**

New programs are developed as the College identifies a need through student, alumni and stakeholder feedback as well as priorities established at a state and national level. Program development is led by the Associate Deans. Feedback received from employers of the graduates, as major College stakeholders, is considered by administration and standing committees when developing new programs and reviewing and revising the curricula. New programs that are developed are consistent with the Mission of the College. A needs assessment is conducted and the feasibility of a program is determined. The College uses consultants from accrediting agencies or other nursing programs to provide assistance in program development. A new program proposal is developed using accrediting and certifying agency criteria, literature review, research, and benchmark data from other colleges and universities. The proposal is submitted to the College Senate and then to the College Board for approval. An example is the Accelerated Pathway to the MSN for RNs with a Non-Nursing Baccalaureate Degree option which was an outgrowth of requests from the RNs wishing to obtain a masters degree in nursing.

New course development occurs as student needs are identified by faculty or the administration. A new course proposal based on guidelines published in the *Faculty Handbook* is developed. The proposal includes the course description, prerequisites, objectives, learning activities, and syllabus. The proposal is reviewed by the Curriculum (BSN) or Graduate (MSN) committee for initial approval and then to College Senate for final approval.

### **1P3 Determining Student Preparation Requirements for Programs and Courses**

The Admission and Progression (A&P) Committee establishes admission and progression requirements for the BSN program which are approved by the College Senate and the College Board. Benchmark data from other colleges of nursing is used for comparison in establishing courses and admission requirements. Research on successful completion of nursing programs and students at high risk was used in establishing admission and course requirements. Recommendations from the A&P Committee are taken to the College Senate for approval, implementation, and evaluation. Student applications are reviewed by the Admissions staff. Students who are transferring from another nursing program or who have been enrolled in another nursing program are reviewed and acted on by the A&P Committee.

The Graduate Committee establishes admission and progression requirements for the MSN program. The Committee used benchmark data from other graduate nursing programs for comparison in establishing MSN courses and admission requirements. Recommendations from the Graduate Committee are taken to the College Senate for approval. Figure 1-2 outlines BSN and MSN admission requirements. An international applicant whose first language is not English is required to demonstrate proficiency in English through the Test of English as a Second Language (TOEFL).

### **1P4 Communication of Expectations for Student Preparation and Learning Objectives**

The College communicates expectations for programs and courses with students through a variety of methods including print materials, the college web-site, and personal communication (Figure 1-3). The Admissions Department and Nurse Recruiter provide students information on pre-nursing liberal arts and science courses prior to enrollment at the College. Pre-requisites for courses are identified in the catalog and on course syllabi.

Figure 1-2 BSN and MSN Admission Requirements

BSN Requirements	MSN Requirements
<ul style="list-style-type: none"> <li>• Evidence of graduation from a state approved high school or GED.</li> <li>• Completion of 62 semester hours or required prenursing courses at a regionally accredited college or university with an overall GPA of at least 2.5 on a 4.0 scale.</li> <li>• 2.5 GPA for Anatomy &amp; Physiology courses.</li> <li>• Only courses with grade of “C” or above accepted for transfer credit.</li> <li>• A total of two courses may be repeated within the past five years. Each course may be repeated only one time.</li> </ul>	<ul style="list-style-type: none"> <li>• Bachelor of Science in Nursing degree from NLNAC or CCNE accredited program</li> <li>• Minimum cumulative GPA of 2.8 on 4.0 scale.</li> <li>• Proof of licensure as a Registered Professional Nurse.</li> <li>• Evidence of completion of undergraduate health assessment and nursing research courses with a grade of “C” or above.</li> <li>• Evidence of completion of graduate statistics course with a grade of “C” or above within 5 years.</li> <li>• A 2-3 page essay detailing professional and educational goals.</li> <li>• Evidence of one year of professional nursing experience preferred.</li> </ul>

Communication of expected outcomes to faculty is done through discussions in standing committees and College Senate meetings. Minutes of all meetings are posted online for all faculty and staff. Faculty receive the *Faculty Handbook*, *Academic Program Handbook*, and *Advisement Handbook* which outline expectations for student learning. The handbooks are revised and updated every two years. The Associate Deans of the academic programs lead the revision of the handbooks.

**1P5 Helping Students Select Programs of Study**

The College has an academic advisement program for undergraduate and graduate students that provides help to students in selecting programs of study. Once students are accepted, they are assigned an academic advisor. Students are required to contact advisors to develop a plan of study. When meeting with the students, the academic advisor and student complete a plan of study which outlines courses and course sequencing. Academic advisors of incoming first semester junior students complete the Advisement Checklist for Junior One Students with the student. This process reviews with the student the College requirements that must be completed prior to beginning classes. Students meet with academic advisors each semester to review the plan of study and register for courses for the upcoming semester. To help faculty better assist students with course planning, the *Academic Advisement Handbook* was developed in 2006 as a component of an AQIP Action Project that focused on student services processes and communication. The Handbook provides faculty with detailed information related to prerequisites for each course and suggested sequencing of courses for all programs. It also provides MSN student advisors information related to students enrolled in the research experience, immersion experience, or practicum experiences. This provides advisors with detailed information to facilitate students’ success in these select courses. When there is a discrepancy between the courses taken by a student and the required prerequisites, the advisor develops a plan with students to obtain the required prerequisites prior to enrolling in nursing courses.

The Admissions department has developed general education requirement course sheets for the major colleges and universities to assist students in selecting general education courses that meet the College of Nursing pre-nursing requirements. When students submit an inquiry for information on the College, Admissions personnel ask students what college or university they will be attending for their general education courses. When materials related to the program are sent to the student, a sheet identifying the specific courses by number for the selected college or university is sent to aid in course selection.

Figure 1-3 Communication of Student Preparedness Expectations

<b>Activity</b>	<b>Audience</b>	<b>Person Responsible</b>	<b>Method</b>	<b>Purpose</b>
College Catalogs	Prospective students, enrolled students	-Associate Deans	Printed	Describe Mission, Values, Philosophy, policies and requirements
Open House	Prospective students	-Admissions -Faculty	Program brochures Tours Meet the faculty Presentations	Provides opportunity to tour College, discuss nursing as career option, meet faculty
Individual/Group Tours/Interviews/ Personal contacts	Prospective students High school & College counselors	-Admissions	Tours Presentations Timed letters Emails and phone calls	Provides opportunity to learn about nursing and College
High School Visits/College Fairs/Healthcare institutions	Prospective or transfer students	-Admissions	View Book Program brochures Presentations	Provide information to prospective students on College and nursing programs, courses and degree requirements
Orientation/ Registration	Newly enrolled students	-Faculty -Student Finance -Admissions -Counselor -Health Nurse	New Student Orientation program Student Handbooks	Introduce incoming students to College, courses, student services available
Academic Advising	Enrolled students	-Faculty	Meetings	Develop plan of study; provide information on grades, course progression
Course Syllabi	Enrolled students	-Faculty	Course syllabus – print & online	Provides course description, pre-requisites, objectives, textbooks, grading, assignments, and schedule
Website	Prospective students	-Educational Technology Coordinator -Admissions -Student Finance	Web based	Provides information on College programs and requirements
SONISWEB	Enrolled students	-Educational Technology	Web based	Obtain grades, schedules, billing

		Coordinator -Admissions -Registrar -Faculty		information
eCollege	Enrolled students	-Faculty -Student Finance -Admissions -Counselor -Health Nurse		Program changes, events, policy changes Requirements for courses, programs

**1P6 Determining and Documenting Effective Teaching and Learning**

A variety of methods are used to determine and document effective teaching and learning. To determine effective teaching, a standardized examination is given to students at the end of the junior year and to senior students during the semester before graduation to assess the level of nursing knowledge and readiness for the NCLEX-RN licensure exam. Students and advisors receive their individual and group means. Faculty assist students in preparation for NCLEX-RN by using these individual scores to help students identify strengths and areas needing further study. Students are encouraged to enroll in a structured NCLEX-RN review course.

The Six Sigma process was used to analyze the standardized testing used at the College and to make a decision to change vendors. The result was a recommendation to change standardized testing for students. Beginning with spring 2005 semester, the College began a 3 semester pilot project of the Health Education Systems, Inc. (HESI) Mid-curricular and Exit Exams. Prior to this pilot, the College had a long history of using the National League for Nursing (NLN) Achievement tests, Diagnostic Readiness exam, and Comprehensive Exam. The mid-curricular exam is a custom exam designed by HESI. The exam reflects the course content of the junior year of the BSN curriculum. HESI used the course syllabi from the first and second semester junior nursing courses to guide the development of this test. While there is no defined level of achievement for the mid-curricular exam during the pilot phase, faculty are using the passing probability score of 850 as a guide. Initially in the pilot program, the student was encouraged to retake the HESI mid-curricular no sooner than three weeks after the initial testing time. In 2007, the HESI policy was finalized and approved by the College Senate and College Board. Students who do not achieve an 850 on the mid-curricular exam are required to complete 15 hours of remediation in the Meds Publishing review program before they can progress into the senior level courses.

In fall 2007, MEDS Publishing’s Total Curriculum Support package plus Dosage and Calculations Made Easy was implemented. This was an online learning resource for students with modules assigned in each course. The modules are learning activities that are designed to help the student improve test taking abilities, increase knowledge in content areas, develop critical thinking skills, and prepare the HESI and NCLEX-RN exams. Each nursing course assigns specific modules for review, assessment, and testing for the students. The completion of the assigned Meds Publishing modules is a requirement for successful completion of the nursing course.

The HESI Exit Exam is administered via computer at least three weeks prior to the end of the second semester senior year. The exam covers the content of the entire nursing program. The HESI Exit Exam is a national test that has strong psychometric properties and is predictive of success on the NCLEX-RN Exam. During the pilot phase, students continued to take the NLN Diagnostic Readiness exams, but no longer took the Comprehensive NLN test. The HESI exam was selected because it was comparable to the NLN tests in ability to predict success on NCLEX-RN. HESI can be administered on the computer and provide the student with immediate feedback. HESI also provided specific results related to the selected outcomes of critical thinking, therapeutic nursing interventions, and communication. While there is no

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level of achievement for the exit exam, the faculty use the passing probability score of 850 as a guide. The score of 850 was chosen based on the HESI guidelines that identify 850 as the minimally-acceptable level, literature review, and benchmarking with other programs. The College set the level of achievement that the mean score on the HESI Exit Exam will be 850 or higher.

The College administers the College Student Experience Questionnaire (CSEQ) as a measure of evaluation of the outcomes of the undergraduate experience. The CSEQ was developed using a variety of concepts related to the nature of higher education, accountability, student learning and development, and the demand for new measures in evaluation of higher education programs. The instrument is used to provide data related to quality of effort and achievement of educational goals. The final section of the instrument is reserved for additional questions. For the College, 20 additional questions are used to assess student perceptions of the estimate of gains in relation to the achievement of outcomes. These outcome statements are consistent with the Criteria for the Evaluation of Baccalaureate and Higher Degree Programs in Nursing from the National League for Nursing Accrediting Commission and the College of Nursing BSN Curriculum Objectives and Program Goals. The norm data were derived from participating individuals from select liberal arts and sciences colleges.

End of Program Portfolios are reviewed for MSN students as a component of program assessment. The Portfolio Review functions as an external review of student progress toward accomplishment of program outcomes and learning for the purposes of determining areas of improvement in overall student performance in select areas. Aggregate data is used by the Graduate Program to identify possible changes in courses or curriculum. The portfolio review process is not used to determine whether students may progress through the program. The assessment of the portfolio focuses on the outcomes of communication, including caring, writing, technology, and speaking; leadership; critical thinking; therapeutic nursing intervention; and scholarly inquiry. Scoring for each outcome is summed to obtain a total score. The portfolios are reviewed by the Portfolio Review Committee, which is composed of four members of the Graduate Committee who serve on a two year rotating basis. Portfolios are reviewed annually. A random sampling of 10% or a minimum of four student portfolios from each cohort group are reviewed for evidence that outcomes are being accomplished. The review is done based on an established rubric. Students are given a Portfolio Review for Program Assessment Guide which explains the review process, and communicates portfolio requirements and evaluation rubrics.

At the end of the program, MSN students complete two surveys, the MSN Curriculum Satisfaction Survey and either the Assessment of Program Outcomes for the Clinician Role, Assessment of Program Outcomes for Educator Role, or Clinical Nurse Leader Role, the latter of which will be first used in fall 2008. On the MSN Curriculum Satisfaction Survey, graduates are asked to rate their level of achievement of program goals and perception of gain on characteristics. The two competency surveys ask students to rate their assessment of level of achievement for the Clinical Nurse Specialist, Educator competencies or Clinical Nurse Leader roles.

The College uses the annual Course Report as a mechanism for documenting effective teaching. At the end of the year, course faculty complete a course report that summarizes achievement of course goals and achievement of performance indicators for the year. Strengths and areas for improvement in the course are identified and goals are established for the upcoming year. Faculty submit these to the Associate Dean who compiles them into a summary report for the junior and senior level courses for the BSN program. This summary is reviewed by the Curriculum Committee and used to establish goals for the year. The summaries are distributed to all faculty. Results of the analysis of effective teaching are also published in the *Annual Report*.

### **1P7 Building an Effective and Efficient Course Delivery System**

Course delivery system needs are determined by examining the needs of the student populations. When the MSN program was first developed, it was a traditional classroom program. The MSN students expressed a desire for courses in the program to be offered online due to work schedules. Based on this and current trends in higher education, the MSN program was developed as a predominantly online program. The Educational Technology Coordinator provides assistance to the faculty in developing effective online course delivery systems. The Help Desk at the institution and the Help Desk through eCollege are available to assist with technology issues.

Initial course scheduling is done by the Associate Deans. Student needs, enrollment, classroom and clinical site availability, and faculty workloads and availability are considered when determining class sections needed and scheduling of days and times for sections. The Associate Deans discuss additional sections needed prior to adding the section. A draft of the schedules is sent to administration, faculty, and staff for feedback. The Associate Deans incorporate feedback as able. Final course schedules are distributed to students, faculty, and staff at least six weeks prior to the registration deadline to provide students ample time to meet with academic advisors. If additional course sections are needed once the schedule is published, the Associate Deans discuss the addition of additional sections with the Dean. Enrollment limits are placed on courses due to limitations of space in classrooms and clinical groups based on state regulations and faculty determination of the size for online class.

The Associate Dean assigns classroom space at the time the schedule is developed. Assignment is based on class size, needs for specialized equipment, i.e. laboratory space, and faculty preference when possible. Classroom assignment is entered into SONISWEB at the time courses are loaded for registration. Classroom and laboratories are scheduled through the Microsoft Outlook Calendar.

### **1P8 Monitoring the Currency and Effectiveness of the Curriculum**

Within the committee structure of the College Senate, the Curriculum Committee has the function and responsibility of monitoring the currency and effectiveness of the BSN curriculum and the Graduate Committee has the function and responsibility of monitoring the MSN curriculum. Every three years, the Curriculum Committee sponsors an all day, all faculty meeting where the BSN curriculum is reviewed and revised as needed. Literature review, research findings, current trends in healthcare and nursing are reviewed and serve as the basis for revisions made to the courses and curriculum. The Curriculum committee monitors student achievement on the HESI and NCLEX-RN examinations as methods to identify strengths and weaknesses in the program.

The MSN program just completed a review of the curriculum using the above sources of information and has received approval to develop separate health assessment, pathophysiology, and pharmacology courses to replace the current three integrated courses. The courses will be first offered in fall 2009. Program accreditation serves as another process which is used for reviewing the rigor, currency and effectiveness of the curriculum. All recommended revisions and changes in curricula are made by the standing committees and then sent to the College Senate for approval. Final approval is received from the College Board. Following these approvals, substantive reports have been prepared and submitted to the NLNAC and received approval related to adding the child and family option, the accelerated pathway for the RN to MSN for those with a non-nursing baccalaureate degree, the post-graduate certificates, the Clinical Nurse Leader, and the curriculum revision to create separate courses in advanced pharmacotherapeutics, pathophysiology, and health assessment.

### **1P9 Determining Student and Faculty Needs Relative to Learning Support**

Academic support is determined and provided to traditional and online students in several ways. Faculty identify student learning needs and the need for resources to enhance student learning. The College has a full-time Counselor who helps students with personal issues that may be impacting academic study.

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Sessions on test-taking strategies and study skills are provided in the first week of school to newly enrolled students during a class period. Individual sessions for additional help can be scheduled with the Counselor or individual faculty. Referrals to the Counselor are made by faculty when students fail examinations or are doing poorly in class indicating additional assistance is needed. A Peer Teaching program provides assistance to BSN students with coursework, clinical paperwork, preparation for examinations, or clinical skills. Peer learners are referred by course faculty or may “self refer.” A cooperative agreement with Illinois Central College provides students access to the Learning Lab for assistance with English, writing, and math. The College is exploring learning resources to help students who struggle with learning the nursing content. The College provides for an NCLEX-RN review course to be brought to campus to facilitate student success on the licensure examination.

The Library provides assistance for all faculty and students whether on campus or online. The Library serves as an intellectual resource center for the teaching and learning mission of the College. The Library provides support for teaching and support for evidence-based research, evidence-based teaching, and the evidence-based learning of the students, faculty and staff. The Library provides access to and delivery of information resources in the fields of nursing practice and higher education, instruction related to information literacy, information technology and information management as a means to facilitate learning, enhance critical thinking, promote scholarship, and improve institutional outcomes. Direct links to the library are provided in eCollege.

Individual faculty determines student and faculty needs based on needs of individual courses. For example, faculty identifies students who need peer tutoring or additional help on test-taking skills. Faculty support is provided in several ways. The Educational Technology Coordinator provides assistance and support to faculty and students with the development of online course and learning activities and troubleshooting problems with the online course programs. The Library provides support with course development materials and providing books and other instructional materials to meet course, curricula, and program needs.

### **1P10 Aligning Co-curricular Development Goals and Curricular Learning Objectives**

Co-curricular activities at the College help students develop leadership skills and develop personally and professionally. Although the College does not have a systematic method to align co-curricular goals with the College goals, the co-curricular activities contribute to the value of the students’ educational experience. Student Senate provides students the opportunity to become involved in governance issues, work with each other, participate in a variety of community activities, and become leaders. The Student Nurse Association provides opportunities for students to participate at a local, state, or national organization and develop both personally and professionally. Other activities available for students to become involved in include the Peer Teaching Program, Resident Assistant Program, Students Offering Support (SOS) Program, Student Minority Group, Bible Studies, and other religious groups. These various programs provide opportunities for students to become peer teachers, mentors for incoming students, share values and beliefs, and deepen their faith. The College has a chapter of Sigma Theta Tau International Honor Society which provides students an opportunity to develop in their professional role and that of a scholar in nursing. The College does not offer formal athletic opportunities. The graduate students have had student representatives to the Illinois Association of Advance Practice Nurses and some have held membership with the National Association of Clinical Nurse Specialists. The College recently established a policy and procedure to support student organizations on campus.

### **1P11 Determining the Processes for Student Assessment**

Assessment activities are built into the BSN and MSN programs and are developed by faculty. The Rules and Regulations for the College Senate adopted by the faculty established an “Evaluation Committee” as a standing committee. This committee has responsibility for overseeing the implementation of the institution’s systematic evaluation plan which includes specific activities for the assessment of student academic achievement. Each of the other standing committees is expected to include related assessment activities into annual committee goals.

The College designed a SPEAOP that describes components, methods, levels of achievement, and processes related to student learning, program and institutional assessment and evaluation. The overall purposes of the plan are to provide evidence of the College’s performance in relation to the established standards, criteria, and expected levels of achievement; to identify areas for improvement; and to be accountable to accrediting bodies. With these purposes in mind, the College will be able to fulfill its commitment to “a tradition of excellence in nursing education.”

The chairperson of each standing committee of the College Senate is responsible for completing the SPEAOP feedback form at the end of the academic year for submittal to the College Senate. The Dean and Associate Deans are responsible for the implementation of this plan through College Senate and its standing committees. The feedback loop provides for data to be shared with students, faculty, members of the College Board, and accrediting and approval agencies as appropriate. Standing committees use the data for planning for the upcoming year. Student representatives on standing committees share feedback and results through reports back to the Student Senate. Data are then reported in the College’s *Annual Report* and used for institutional and program improvements.

In 2005-2006, the Evaluation Committee developed the Methodology for Administering College Survey Tools document. It was approved by the College Senate in 2006. The document identifies each evaluation or survey tool, its status, when to administer, who administers the tool, and the process for administering. Copies were distributed to all faculty. The document is found in the Academic Handbook.

### **1P12 Discovering Student Preparation for Further Education or Employment**

Graduating seniors from the BSN program are surveyed each fall and spring to determine levels of satisfaction with their education and preparation for practice and graduate school. Up until 2006-2007, the College used two surveys, an End of The Program survey and the College Student Experiences Questionnaire (CSEQ). The Evaluation Committee noted that there was duplication in the questions and was able to include the End of the Program survey questions on the CSEQ. On the survey the students are asked to rate their achievement of the College Goal which states: Provide the essential foundation for graduate study in nursing” and their satisfaction with their education and preparation for clinical practice. The CSEQ queries students on their perceptions of gain or progress in nursing characteristics and satisfaction with the College. The graduating MSN students complete the MSN Program Curriculum Satisfaction Survey which asks them to rate their satisfaction with curriculum and achievement of objectives.

Alumni of both the BSN and MSN programs are surveyed at 1, 5, and 10 years. Alumni are asked to rate their satisfaction with the educational programs and achievement of College goals and nursing characteristics. Employers of graduates at 1 year are surveyed to determine if graduates demonstrate appropriate skills and knowledge for a beginning practitioner.

The College analyzes results from the HESI Exit Exam, NCLEX-RN licensure pass rates, and GPAs of graduating students to determine preparation for employment and further education of the BSN graduates. Certification rates and employment data are analyzed by the Graduate Committee to determine preparation for employment and further education of MSN graduates.

The results of all surveys, licensure and certification pass rates, test scores and employment data are shared with faculty through the established standing committee structure. Standing committees such as Admission and Progression, Curriculum, and Graduate review the data and use the results in establishing goals and determining needs of the students. The results are also used for course and program improvement and development. Results of surveys are published in the College's *Annual Report*.

### **1P13 Measuring Student Performance**

The Assessment Program of the College is both an ongoing evaluation process and a deliberate, planned assessment. The plan is based on three beliefs: through assessment and evaluation, the College meets responsibilities to student and to the community; assessment focuses on outcomes and the experience leading to outcomes; and assessment works best when it is planned, ongoing, and with a definite feedback loop leading to improvement. The College uses multiple measures to assess student academic achievement as well as program or course improvement needs. SPEAOP included both formative and summative activities as well as direct and indirect assessment methods. Figure 1-4 (p. 22) displays the variety of assessment and evaluation measures used by the College.

The Admission & Progression Committee is currently investigating the potential use of a standardized admission exam to measure the achievement of common learning objectives. This exam would test the knowledge of the incoming students on English including reading comprehension, grammar, and vocabulary; math; and science knowledge. The exam also examines learning characteristics which would provide useful information to the students to select strategies and activities that best help them learn according to their learning style. The exam would provide the College with assessment data on student attainment of general education objectives. The graduate committee is going to administer the NLN Advanced Health Assessment and Pharmacology tests spring 2008 to the MSN May graduates.

## **RESULTS**

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### **1R1 Results for Common and Specific Program Learning Objectives**

Students enroll in an accredited college or university of their choice to take the required liberal arts and science courses. The majority of the students enroll in colleges within the state of Illinois. The College also receives applications from students who attend college out of state. Many students have been enrolled in more than one institution. Over half of the students attend the local community college, Illinois Central College. Figure 1-5 shows the mean grade point average (GPA) of students entering the College in the BSN and MSN programs. The mean for both levels of students is greater than 3.0 indicating a high caliber of student enrolling. The results show that entering students in both programs exceed the minimum GPA for admission of 2.5 for BSN students and 3.0 for MSN students.

Figure 1-5 Mean GPA of Entering Students

	<b>2002-2003</b>	<b>2003-2004</b>	<b>2004-2005</b>	<b>2005-2006</b>	<b>2006-2007</b>
<b>BSN Students</b>	3.24	3.37	3.42	3.43	3.29
<b>MSN Students</b>	3.17	3.53	3.43	3.75	3.39

Figure 1–4 Assessment and Evaluation Measures

<b>Formative</b>	<b>Summative</b>	<b>Direct</b>	<b>Indirect</b>
<p><b>Individual</b></p> <ul style="list-style-type: none"> <li>• Admission criteria</li> <li>• Course grades</li> <li>• Clinical feedback</li> <li>• Assignments</li> <li>• Student feedback, weekly, midterm, end of semester</li> </ul>	<p><b>Individual</b></p> <ul style="list-style-type: none"> <li>• Graduation</li> <li>• CSEQ on exit</li> <li>• NCLEX-RN results</li> <li>• Cumulative GPA at graduation</li> <li>• Achievement of program objectives</li> <li>• Employment</li> <li>• Graduate students pass rates on certification examinations (CSN, CNL, CNE)</li> </ul>	<ul style="list-style-type: none"> <li>• HESI mid-curricular exam</li> <li>• HESI Exit Exam</li> <li>• Course tests</li> <li>• Lab Proficiencies</li> <li>• Clinical evaluation of paperwork, plans of care/clinical paper work and clinical experience</li> <li>• Course papers</li> <li>• Reflective journals in select courses</li> <li>• Threaded discussion responses in online courses</li> <li>• Graduate students formal presentations i.e. Research Day</li> </ul>	<ul style="list-style-type: none"> <li>• End of Program Survey</li> <li>• CSEQ</li> <li>• Alumni Surveys: 1, 5, 10 years</li> <li>• Employer surveys: 1 year</li> <li>• Academic program reviews: State, NLNAC, HLC NCA</li> <li>• Student evaluation of faculty</li> <li>• Course evaluations</li> <li>• Clinical site evaluations</li> <li>• MSN End of Program Portfolios</li> </ul>
<p><b>Group</b></p> <ul style="list-style-type: none"> <li>• Mean GPA on entry</li> <li>• Mean GPA: course, semester</li> <li>• Mean scores: CSEQ, HESI mid-curricular, HESI Exit exam</li> <li>• Attrition and retention rates</li> <li>• Student evaluation of course and course faculty each semester</li> <li>• College Services Survey each spring semester</li> </ul>	<p><b>Group</b></p> <ul style="list-style-type: none"> <li>• Graduation rates</li> <li>• NCLEX-RN pass rates</li> <li>• HESI scores: critical thinking, communication, therapeutic interventions</li> <li>• Certification pass rates for MSN-CNS</li> <li>• Comparative analysis of curriculum every 3 years</li> <li>• Semester course report of aggregate data of students' achievement with therapeutic intervention</li> </ul>		

The College has set the level of achievement on the HESI tests as a score of 850 or above on the examination (Figure 1-6). Students who do not achieve a score of 850 or above on the examinations are required to complete 15 hours of remediation work with the Meds Publishing program.

Figure 1–6 Mean Scores HESI Mid-Curricular Exam

	Spring 2005	Fall 2005	Spring 2006	Fall 2006	Spring 2007	Fall 2007
<b>Overall</b>	780	775	790	773	813	805
<b>Critical thinking</b>	780	775	790	773	813	805
<b>Communication</b>	845	796	865	856	913	894
<b>Therapeutic Interventions</b>	764	771	773	754	790	784

The CSEQ has been administered to all College BSN graduates beginning with the first group who graduated in May 1988. It is administered in the last half of the final semester. Due to space limitations, only 5 years of data are presented. Students rate their perception of gain or progress toward the educational objectives of the College on a 1 to 4 scale with 1 being little or no progress and 4 being high degree of progress. Figure 1-7 (p. 24) presents mean ratings. For the outcome of critical thinking, the College has set the level of achievement as the graduating students will indicate a perceived gain at or above 3.0 on the CSEQ in the areas of critical thinking which include inquiry, analysis, and synthesis. The College has met or exceeded the set level of achievement in these areas. In the area of communication, the College has set the level of achievement as graduating students will indicate a perceived gain at or above 3.0 on the CSEQ in writing effectiveness and speaking effectiveness. The College has not met this level of achievement. The Curriculum committee beginning last year has looked at writing in the curriculum in an attempt to improve the scores.

**1R2 Evidence that Students Have Obtained the Required Knowledge and Skills Base**

The College defines graduation rates as the percentage of students enrolled in the BSN program for the first time that complete the program within three years. For the BSN students, 90% of the students will successfully complete the program within 2-5 years. For the MSN program, 100% of the students will graduate in five years. The College has met both of these benchmarks. Figure 1-8 shows graduation rates.

Figure 1-8 Graduation Rates BSN Students

Semester of Entry	Graduation Rate BSN (%)	Graduate Rate MSN (%)*
Spring 2001	73	--
Fall 2001	92	63
Spring 2002	100	50
Fall 2002	96	46
Spring 2003	95	50
Fall 2003	100	54
Spring 2004	98	0
Fall 2004	98	29
Spring 2005	89	8
Fall 2005	88	--
Spring 2006	88	--

\* First students entered in fall 2001.

As of December 2007, a total of 31 MSN students have completed the program since the program’s inception in fall of 2001. The majority have completed the program within three years. Seventeen (100%) have successfully passed the ANCC National Advanced Nursing Practice Certification Exam. This exceeds the level of achievement set by the College that 95% of the MSN graduates taking the certification exam will pass on the first writing. Five of the graduates pursued the educator MSN option

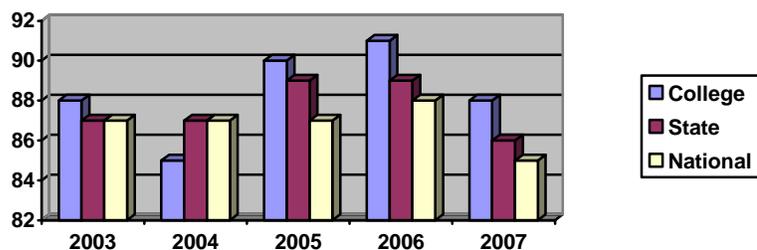
and are not eligible for testing until they are employed in the education field for three years. Two graduates chose to not pursue advanced certification.

Figure 1-7 Summary of Substantial Gain/Progress toward Educational Objectives of College

<b>Gain Toward Educational Objective</b>	<b>2003</b>	<b>2004</b>	<b>2005</b>	<b>2006</b>	<b>2007</b>	<b>Norm</b>
<b>Inquiry-learning on own</b>	3.0	3.0	3.1	3.1	3.4	N=1427 3.48
<b>Understand Self</b>	3.0	3.0	3.0	3.1	3.3	N=1427 3.41
<b>Synthesis</b>	3.1	3.0	3.1	3.0	3.3	N=1426 3.41
<b>General Education</b>	2.7	2.8	2.9	2.7	2.9	N=1431 3.32
<b>Team Ability</b>	3.3	3.3	3.2	3.4	3.5	N=1426 3.02
<b>Analytical &amp; Logical thinking</b>	3.1	3.2	3.1	3.3	3.4	N=1426 3.36
<b>Writing Effectiveness</b>	2.8	2.7	2.7	2.7	2.9	N=1428 3.32
<b>Speaking Effectively</b>	2.8	2.8	2.8	2.9	3.2	N=1430 3.18
<b>Other Philosophies</b>	2.6	2.4	2.6	2.5	2.8	N=1428 3.14
<b>Analyzing Quantitative problems</b>	2.5	2.6	2.5	2.5	2.5	N=1426 2.66
<b>Adapting to Change</b>	3.1	3.1	3.1	3.2	3.4	N=1425 3.19
<b>Using computers &amp; other information technology</b>	2.9	3.0	3.1	3.3	3.3	N=1428 3.00
<b>New Science Technology</b>	2.8	2.7	2.8	2.7	2.7	N=1426 2.49
<b>Understand Science</b>	2.5	2.5	2.7	2.5	2.5	N=1427 2.54

In 2004 with the development of the SPEAOP, the College identified a 90% pass rate for first time test takers as the expected level of achievement on the NCLEX-RN examination. The pass rates for the students from the College have risen from 2003 to above the set level of achievement for 2006. Except for 2004, the College pass rate has been above both the state and national pass rates. In 2003, the College instituted measures to assist students in preparing for the exam. Based on research, benchmark data and literature review, students who were in their final semester of the program were required to complete 2000 NCLEX-RN style questions on the computer and achieve a 70% or higher. Students are also encouraged to enroll in an NCLEX-RN review course to prepare for the exam. Individual or group assistance on testing and exam preparation were provided to students. Figure 1-9 shows NCLEX-RN pass rates. The College will study how the usage of the MEDS Publishing tutorial program impacts student success on the licensure exam.

**Figure 1-9 Pass Rates on NCLEX-RN Licensure Exam**



Another measure that students have obtained the knowledge and skills needed is employment rates. The College set the levels of achievement as 95% of the BSN graduates will be employed in the first 6 months following graduation and 87.5% of the MSN graduates will be employed in the first 3 months. Figure 1-10 shows the employment rates for 2003-2007. The BSN data was gathered by the Admissions Office at the time that application for the licensure exam is completed. At the time of interview, a number of students have started interviewing but have not accepted a position which accounts for employment rates less than 100%. Except for spring 2005, the College has met or exceeded the benchmark at the time of graduation. The first MSN students graduated in 2004. Except for spring 2004, the College has met or exceeded the benchmark at the time of graduation. The first MSN students graduated in 2004. For 2004, the one student who was not employed at graduation was interviewing for a position.

**Figure 1-10 Employment Rates**

<b>Semester of Graduation</b>	<b>BSN Rates % Employed at Graduation</b>	<b>MSN Rates %Employed at Graduation</b>
<b>Fall 2003</b>	95.5	---
<b>Spring 2004</b>	100	87.5
<b>Fall 2004</b>	94.3	*
<b>Spring 2005</b>	85.5	100
<b>Fall 2005</b>	97.9	100
<b>Spring 2006</b>	95.1	100
<b>Fall 2006</b>	97.7	100
<b>Spring 2007</b>	96	100

\* No one graduated from the MSN program fall 2004

One of the College goals is to “provide the essential foundation for graduate school.” The BSN students on the CSEQ respond to a question that asks them if they expect to enroll for an advanced degree after completing their undergraduate degree. Over half of the students indicate that they expect to attend graduate school indicating the College does well in achieving this goal (Figure 1-11).

**Figure 1-11 Percentages of Students Planning on Enrolling in Graduate School**

<b>2003</b>	<b>2004</b>	<b>2005</b>	<b>2006</b>	<b>2007</b>
61	76	81	78	83

The College of Nursing has set the level of achievement for students on the HESI exam at a probability level of 850 or above. College results are in figure 1-12. After the pilot was completed, the HESI policy was developed. The score of 850 was chosen based on the HESI guidelines that this is the minimally-acceptable level, a thorough literature review, and benchmarking with other programs. The policy states that the HESI Exit Exam score given in percent counts as an exam grade in the 428 Nursing Care of

Clients in Complex Situations course. It is worth a specified percentage of the total course grade. Students who do not achieve the 850 are encouraged to meet with their advisors to devise a plan of study for the NCLEX-RN and to take a structured RN-Review course.

Figure 1-12 Mean Scores HESI Exit Examination

Semester	Overall Exam		Critical Thinking	Communication	Therapeutic Interventions
	College	National Mean	College	College	College
Spring 2005	878	Not Reported	878	848	883
Fall 2005	880	856	880	836	883
Spring 2006	829	856	829	880	825
Fall 2006	842	835	838	774	850
Spring 2007	833	835	831	846	832
Fall 2007	840	825	834	837	836

For the 20 years that the College has used the CSEQ and asked students to rate their gain or progress in nursing characteristics, the mean score for all areas has consistently been 3.4 or above. Figure 1-13 shows 4 years of data related to perceived gain in nursing characteristics. In 2007, the 20 questions for the CSEQ that were added by the College were revised. Two surveys were combined and questions related to perception of obtainment of the program objectives were added to the CSEQ. Figure 1-14 shows the summary or gain or achievement in the program outcomes. The rating for both figures is based on a 1 to 4 scale with 1 being little or no gain and 4 being substantial gain. The College identifies opportunities for improvement in outcomes where the perceived gain score is less than 3.0

Figure 1-13 CSEQ Means Scores for Perceptions of Gain/Progress in Nursing Characteristics

Nursing Characteristic	2003 N=57	2004 N=66	2005 N=80	2006 N=93
Administration of nursing care	3.6	3.6	3.6	3.6
Synthesis of liberal arts with nursing	3.3	3.2	3.3	3.2
Use of nursing process	3.6	3.6	3.6	3.6
Evaluation of own nursing practice	3.6	3.6	3.6	3.6
Application of nursing leadership skills	3.2	3.3	3.3	3.3
Application of nursing research	3.0	2.9	3.1	3.1
Participation with health team	3.5	3.4	3.4	3.4
Average	3.4	3.4	3.4	3.4

As part of the annual alumni survey an “Employer Evaluation Form” is sent to the immediate supervisors of one year alumni who give permission to have their employer contacted. Employers rate the graduates’ attainment of nursing competencies on a 1 to 4 scale with 1 being not achieved and 4 being high level of gain. Employers also use a 1 to 4 scale to rate the graduates on an item related to the overall rating as an employee. From 2003-2007, almost all of the employers rated the graduates attainment of nursing competencies as three or four. In the same years, employers rated from 86-100% of the graduates as a 3 or

4 on the overall rating as an employee. This result exceeds the set level achievement which is 85% of the employers surveyed give a rating of 3 or 4.

Figure 1-14 CSEQ Summary of Gain/Achievement in Program Outcomes

<b>Summary of Gain or Achievement in Program Outcomes</b>	<b>Rating 2007 N=83</b>
Prepare the graduate to practice professional nursing in a variety of health care settings.	3.7
Provide the essential foundation for graduate study in nursing.	3.6
Foster the commitment to personal and professional growth and accountability.	3.6
Utilize effective, interactive communication skills in professional situations.	3.6
Utilize critical thinking for decision making in your clinical practice.	3.7
Utilize therapeutic nursing interventions to treat individuals, families and/or communities.	3.7
The nursing courses developed my ability to research and find solutions to problems.	3.4
The nursing courses helped my ability to apply nursing theory in the clinical practice of nursing.	3.5
The nursing courses improved my knowledge of nursing management issues.	3.5
The nursing courses contributed to the development of leadership in the delivery of nursing care.	3.5
The nursing courses contributed to the development of accountability in the delivery of nursing care.	3.6
The nursing courses influenced me to become more involved in political activities.	2.3
The nursing courses have improved my ability to write in a scholarly manner.	2.9
The nursing courses have developed my ability to use ethical decision making in my clinical practice.	3.3
The nursing courses have improved my ability to give oral presentations.	1.1

The MSN End of Program Portfolio results show that students have a high level of achievement on the program outcome measures. Figure 1-15 shows the mean scores for the sampled portfolios that were reviewed from the students who have graduated since 2004. Scale for five outcomes is 0 Unacceptable level to 2 Exemplary Level. Total score range possible is 0 to 10.

Figure 1-15 Mean Scores for MSN End of Program Outcomes

<b>Critical Thinking</b>	<b>Communication</b>	<b>Leadership</b>	<b>Scholarly Inquiry</b>	<b>Therapeutic Nursing Intervention</b>	<b>Total</b>
2	1.82	1.86	2	2	9.68

**1R3 Results for Processes Associated with Helping Students Learn**

Students were asked to rate their perception of the College environment emphasis on a 1 to 7 scale with 1 being emphasis and 7 being a strong emphasis. In 2007, the College demonstrated gain in all areas of student perception (Figure 1-16).

Figure 1-16 Student Perception of College Environment Emphasis

College Environment Emphasis	2003 N=57	2004 N=67	2005 N=80	2006 N=93	2007 N=	Norm
Academic/Scholarly	5.9	5.7	5.6	5.7	6.2	N=1437 6.53
Esthetic/Creative	4.9	4.5	4.5	4.3	4.6	N=1434 5.13
Critical/Analytical	6.0	5.8	5.8	6.0	6.5	N=1433 6.27
Diversity	5.3	5.0	5.1	5.2	5.7	N=1432 5.47
Information Literacy Skills	5.2	4.7	5.1	5.0	5.3	N=1431 5.27
Vocational/Occupational Competency	5.4	5.6	5.3	5.6	5.9	N=1432 3.41
Personal/Practical Relevance	5.3	5.0	5.0	5.3	5.7	N=1432 4.38

Students are asked to rate their level of satisfaction with the College on a 1 to 4 scale with 1 being very dissatisfied and 4 being highly satisfied. Satisfaction index is derived by adding the scores for like college and attend college again. The College has set the level of achievement for overall satisfaction with the College at 6 out of 8 on the CSEQ. Overall student satisfaction has met the set level of achievement 3 of the 5 years of data presented (Figure 1-17). The Satisfaction Index remains below the norm.

Figure 1-17 Student Perception of Satisfaction with College

Opinions about College	2003* N=57	2004 N=67	2005 N=80	2006 N=93	2007 N=84	Norm
Like College	--	2.7	2.7	2.7	3.1	N=1440 3.4
Attend Same College Again	--	3.3	3.1	3.3	3.4	N=1438 3.30
Satisfaction Index*	5.9	6.0	5.8	6.0	6.5	N=1437 6.7

\*Scores for “Like College” and “Attend Same College Again” were not calculated from CSEQ in 2003

The College has set the level of achievement for overall student satisfaction for MSN students as 100% of the students will give a rating of A or B (scored as a 3 or 4) on items on the MSN Curriculum Satisfaction Survey. The College has met the set level of achievement (Figure 1-18).

Figure 1-18 MSN Student Satisfaction

Survey Statement	Ratings*			
	2004	2005	2006	2007
If I could start graduate education again, I would go to this College again.	4.85	4.7	4.5	5.0
Overall, please rate your level of satisfaction with the graduate curriculum.	3.71**	3.7**	4.75	3.85**
Overall, how would you rate your online course experiences?	3.71**	3.7**	4.75	3.85**

\*Scale of 1 to 5

\*\*Scale of 1 to 4

Faculty promotion portfolios are evidence of effective teaching, showing improvements and achievements in student learning. The New Faculty Orientation was expanded to include seven sessions on effective teaching strategies, including test development, analysis of learning styles, active student learning strategies, stimulating critical thinking, and effective clinical teaching. Each session was attended by 12-15 faculty. Faculty ratings of the program were predominantly 3 or 4 on a 4-point scale.

#### **1R4 Comparison of Results with Other Institutions of Higher Education**

NCLEX-RN pass rates are compared to state and national pass rates. Figure 1-9 shows that the College pass rates for all years except 2004 are at or above the state and national pass rates. The College continues to analyze pass rates to identify strategies and activities to improve pass rates. One example is the College's implementation of the MEDS Publishing program (See 1I2).

The HESI Exit Exam provides comparative data for exam. Figure 1-12 shows the comparison of the College to HESI national means on overall exam score. Comparison data for the outcomes of critical thinking, communication, and therapeutic interventions is not provided by HESI.

The CSEQ provides norm data for the outcome measures on the instrument. The CSEQ was originally published in 1979, with revised editions in 1983, 1990, 1994, and 1998. The norm data were derived from participating individuals from select liberal arts and science Colleges. Figures 1-7, 1-16, and 1-17 present norm comparison data for CSEQ measures for the BSN students. The College needs to investigate sources of comparative data for the MSN student outcomes.

### **IMPROVEMENTS**

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#### **1I1 Improving Current Processes and Systems**

Using the standards, criteria, levels of achievement, and measures outlines in the SPEAOP, persons responsible for data collection, analysis, interpretation, and report writing are expected to present the reports to the College Senate in May. The College Senate is responsible for making decisions based on the data. The decision is assigned to the appropriate College personnel or committee for implementation.

The College committees review student assessment data and norm comparison data related to their committee function and assigned through the SPEAOP annually. The committees identify areas where student gain or perception is below the CSEQ norm, when the student licensure pass rate is below state or national levels, HESI scores are below the national comparison, or achieved levels are below set levels of achievement in the SPEAOP. The committees identify goals and target projects to improve processes related to student learning.

#### **1I2 Improvement Targets, Priorities, and Communication**

Each year, the College publishes the *Annual Report* as a means for dissemination of data. The *Annual Report* summarizes achievements of the College for the academic year, an evaluation of the strategic goals and measures of success, strategic goals and measures for the upcoming year, and SPEAOP data related to curriculum, recruitment and admissions, student services and programs, faculty and professional staff, and assessment and evaluation outcomes. Trended data for assessment outcomes for five years are presented. The *Annual Report* is distributed to all faculty, staff, College Board members, and other stakeholders.

The College reviews results of assessment data annually. The College sets improvement targets and incorporates these into the strategic measures for the upcoming year. For data obtained from the CSEQ, areas for improvement are identified as those areas whose scores drop from the previous year or are below the norm. Other areas for improvement are identified as outcome measures that are below the set level of achievement on the SPEAOP. Priorities are set by the faculty based on the Strategic Plan.

The following are examples of improvements developed to improve student learning. The improvements have been made based on decisions made after analysis of assessment and evaluation measures.

- The Peer Teaching Program was developed through the Curriculum Committee to provide assistance to undergraduate students with course work, examination preparation, review of course content, and assistance with clinical paperwork. The program uses volunteer peer teachers who receive an orientation program before becoming peer teachers. Peer teaching is done one-on-one or in small groups. The program is coordinated by faculty and was first implemented in 2006.
- The Student-At-Risk Profile was developed through faculty research and presented to College Senate by the Admissions & Progression Committee. The profile was added to the Plan of Study completed by academic advisors with their advisees. The profile allows for early identification of students who are at risk for not passing the licensure exam at the end of the program. When students are identified, additional assistance in preparing for the exam is offered.
- An AQIP Action Project in conjunction with the Curriculum and Graduate Committees developed a Simulation Plan for the College. This formalized use of simulation and simulation learning activities in both programs.
- The Graduate program added the Clinical Nurse Leader option in 2007 based on analysis of trends in nursing and a needs assessment. Feedback from students and stakeholders was also considered in the decision process. The substantive curriculum revision was a response to feedback from employers and students.

Improvements that are currently being worked on by the College using assessment data and feedback from stakeholders include:

- Through review of current nursing education literature, the CSEQ results, and HESI scores, the Curriculum Committee is spearheading a BSN curriculum revision. The group is completing the first year of the three-year revision plan. The revision is being considered based on the growing amount of nursing content, increasing technology, changes in healthcare, and characteristics and qualities identified for beginning practitioners. The College is moving toward a concept-based curriculum with the underlying philosophy of the student as an active learner.
- The Graduate Program is investigating the possibility of offering a Neonatal Nurse Practitioner Program and is preparing a report to the Higher Learning Commission for addition of the Doctor of Nursing practice option.
- The Admission and Progression committee is analyzing data from the past five years for students who have not been successful on passing the licensure examination on the first writing. This is being done to evaluate the effectiveness and need for possible revision of the Student-At-Risk Profile used by academic advisors.
- The College continues to increase opportunities for use of simulation learning experiences in clinical nursing courses. Course faculty members continue to develop simulation scenarios to incorporate into learning activities. The College plans on developing an 'efficiency apartment' area that will provide opportunity for the Community Health course to develop scenarios that simulate situations students would find in the community. A formalized plan for evaluation of the use of simulation as learning experiences needs to be finalized.
- In 2007, the College's NCLEX-RN licensure pass rate was 88%. Although this was above the state and national pass rates, it is below the level of achievement of 90% set by the College. The College plans to analyze data and develop strategies to improve student success on the examination.
- The College is exploring the use of a standardized admission examination to measure student achievement of knowledge on entry of mathematics, science, and English which includes reading and grammar. The examination also evaluates the student's learning style preference.

## Category Two: Accomplishing Other Distinctive Objectives

### **CONTEXT FOR ANALYSIS**

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#### **2C1 Other Explicit Institutional Objectives**

The Vision of the College states:

*While representing a standard of excellence, Saint Francis Medical Center College of Nursing will provide the highest quality undergraduate, graduate, and continuing nursing education programs, as well as the best clinical experiences, to obtain local, regional, and national recognition. This will in turn produce the most prepared nurses and nurse educators capable of administering the highest quality education and/or care.*

Although the primary Mission and Vision of the College focus on helping students learn by providing nursing education at the undergraduate and graduate level, the College has identified other distinctive objectives that flow from the Mission and Vision. The Distinctive Objectives are:

- Community of Caregivers – The concept of caring and community of caregivers flows from the OSF Corporate Mission and Vision. The College Mission, Values, and Philosophy flow directly from the Corporate Mission and Vision. The OSF Corporate Mission states: “In the spirit of Christ and the example of Francis of Assisi, the Mission of OSF Healthcare is to serve persons with the greatest care and love in a community that celebrates the gift of Life.” The Vision of OSF Healthcare is “Recognizing God’s great gift of life, we will be a Community of Caregivers pursuing perfection in healthcare quality, safety, service and financial integrity.” Community of Caregivers is pillar one of the College Strategic Plan and is an integral part of what the students, faculty, and staff do everyday. Caring is a thread that permeates the curricula in both the BSN and MSN programs.
- Building Student Relationships – The College recognizes that students are the primary stakeholders of the College. One of the College Core Values is Service which is made up of Integrity, Responsibility, and Accountability. In the area of Service, the values statement says: “These values (service and integrity) provide a foundation for the institution in its practices and relationships and are essential in the College’s commitment to high standards of institutional and individual integrity.”
- Personal and professional growth - This objective flows from the Mission and College Goals which discuss the College’s commitment to personal and professional growth. The Mission states “The College offers opportunities for the personal and professional development of the student. The College encourages the participation of the faculty and students in scholarly activities that contribute to learning, nursing, and health care.” A priority for the College is the personal and professional growth of the students, faculty and staff.
- Service to the Community- The Mission and Philosophy recognize that faculty, staff, and students provide services to community and professional organizations as representatives of the College. The Mission states: “The College serves the community by providing competent entry level and advanced practitioners responsive to the changing health needs of society and the health care system. The College serves the community through participation in health-related activities and organizations.”

#### **2C2 Alignment of Other Distinctive Objectives with Mission, Vision, and Philosophy**

The distinctive objectives identified in 2C1 flow directly from the Mission, Vision, Philosophy, and Core Values of the College of Nursing. The Core Values of the College are: Personal and Professional Development encompassing learning, caring, leadership and personal worth and dignity; Service encompassing integrity, responsibility, and accountability; Quality encompassing excellence; and Agility encompassing future focused, forward thinking. These are in alignment with the Four Pillars of the Strategic Plan which are focused on Community of Care Givers; Public Accountability;

Quality, Service, and Safety; Financial Stewardship; and Service Line Development: Education Programs.

### **2C3 How Other Objectives Support the Objective of Helping Students Learn**

The Core Values flow from the Mission, Vision and Philosophy and permeate all aspects of the College. The purpose of the College of Nursing Core Value Statements are to support the Mission and Philosophy, provide direction for the day-to-day activities and decisions, specify how individuals should behave, and provide meaning to each person's work. The four distinct objectives provide either direct or indirect support for helping students learn. Examples of programs or services that are in alignment with the objectives and support student learning include: Caring in Action, SOS (Students Offering Support), Peer Teaching Program, and faculty development programs on improving teaching. The College Senate has the oversight to ensure that other distinctive objectives support student learning.

## **PROCESSES**

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### **2P1 Determining the Institutions' Other Distinctive Objectives**

The faculty and staff determined the other distinctive objectives. The distinctive objectives flow from the College Mission and Values. Through discussions in standing committee meetings and at College Senate, the objectives emerged as a focus for the College. The strategic planning process discussions also contributed to the identification of the other distinctive objectives for the College. The distinctive objectives are a component of the Four Pillars of the Strategic Plan (Category Eight).

### **2P2 Communicating the Institution's Expectations Regarding These Objectives**

The College catalogs and Viewbook communicate the College's Mission, Vision, Philosophy and Goals. The Website also provides information on the College. The website is <http://www.sfmcon.edu>. The strategic goals and objectives are published in the College's Strategic Plan which is shared with the College Board, faculty, staff and other stakeholders. A review of achievement of the goals for the current year and the goals for the upcoming year is also found in the minutes of the College Senate and the College's Annual Report. The Annual Report provides data on the accomplishments for the year related to the distinctive objectives. The Annual Report is shared with faculty, staff, and stakeholders. The finalized Strategic Plan and minutes of the College Senate are available to all faculty and staff online at the College's shared drive. "Caring in Action" is a monthly online publication that is sponsored by the Student Senate that recognizes nominated students for their caring behaviors the previous month.

### **2P3 Determining Faculty and Staff Needs Relative to These Objectives**

All faculty and staff and the College Board are involved in the College's strategic planning process. Once the faculty and staff determine the strategic direction of the College, the plan is presented to the College Board Long-Range Planning Committee and then on to the College Board for approval. Assigned College teams develop plans to achieve the specific objectives and identify resources needed. The Dean solicits direct input from all faculty and staff in development of the annual College budget and in requests for capital fund projects to be submitted.

### **2P4 Assessing, Reviewing, and Adjusting These Objectives**

The College reviews the status of the strategic goals annually. Leaders of each tactic submit written reports to the Dean which are shared College wide. The Strategic Plan is reviewed by the Leadership Team, faculty, staff and College Board annually. The Strategic Plan is submitted to OSF Healthcare upon completion. Every other year, the College holds a meeting off campus for all employees and a College Board representative to review the AQIP projects and discuss the strategic direction and goals of the College. A report of this meeting is available to all faculty and staff online.

**2P5 Measures for Accomplishing Other Distinctive Objectives**

The College regularly collects and analyzes data related to the College’s distinctive objectives using multiple measures such as the Survey of Student College Services, Mid-curricular and end of program surveys, Alumni Survey, and College Student Experiences Questionnaire (CSEQ). All measures are identified in the SPEAOP. The plan is reviewed regularly by the Evaluation Committee and updated as needed.

**RESULTS**

**2R1 Results of Accomplishing Other Distinctive Objectives**

*Community of Caregivers*

Curriculum objective 2 for the BSN program states: “Express caring in professional interactions.” Students rate their perception of achievement of this objective on the CSEQ (formerly known as the Curriculum Satisfaction Survey). Results indicate a high number of students who rate achievement of the objective at either A or B which on a four point scale with A being highly achieved and D being not achieved (Figure 2-1).

Figure 2-1 Perception of Achievement of Objective 2 Related to Caring – BSN Students

<b>Year/Number of Respondents</b>	<b>Number Rating at Either at A or B</b>	<b>Percent</b>
2002-2003 N=44	44	100
2003-2004 N=63	63	100
2004-2005 N=83	82	98.8
2005-2006 N=83	82	98.8

“Caring in Action” is a monthly online newsletter sent to all students and College employees. “Caring in Action” is part of the Student Senate and highlights students for caring behaviors demonstrated during the month. Students are nominated by peers or faculty. Examples of caring behaviors which students are nominated for include: participation in new student orientation, support during a personal crisis, assistance with studying or other assignments, helping with student activities, and being there when a friend was needed.

*Building Student Relationships*

The CSEQ asks students to rate their perceptions of the supportiveness of relationships in the College using a 1 to 7 scale with 7 being the highest. Figure 2-2 shows mean BSN student ratings of relationships in comparison to the norm.

Figure 2-2 Student Perceptions of Supportiveness of Relationships

<b>Relationships</b>	<b>2003 n=57</b>	<b>2004 n=67</b>	<b>2005 n=80</b>	<b>2006 n=93</b>	<b>2007 n=83</b>	<b>Norm</b>
<b>Among students</b>	6.0	6.0	5.2	5.8	6.1	N=1433 5.67
<b>Between students/faculty</b>	5.6	5.3	5.2	5.4	4.8	N=1434 5.93
<b>Administrative Personnel</b>	5.1	5.3	4.8	5.04	6.1	N=1430 4.96

The Survey of Student College Services – BSN Program is given annually to all BSN students. The survey asks students to rate student service areas on a number of factors related to building student relationships. The survey was revised in 2008 with new questions and areas added. The rating scale is

1 to 5 with 1=Very Dissatisfied and 5= Very Satisfied. For this table, 4’s and 5’s were recorded together. Results related to relationships with faculty, college services staff, and administrators are in 6R1. The student support service staff and administration continue to improve processes and services in an effort to improve the student satisfaction ratings for relationships in these areas.

The MSN program enrolled the first students in 2001. Since the program is new there are only results since 2004 when the first graduation of students occurred. The MSN Program Curriculum Satisfaction Survey asks students to rate satisfaction on three questions related to Building Student Relationships. The responses are on a 1 to 5 scale with 1 being very dissatisfied and 5 being very satisfied. Mean scores are reported in Figure 2-3.

Figure 2-3 MSN Program Curriculum Satisfaction

<b>Statement from Satisfaction Survey</b>	<b>2004</b>	<b>2005</b>	<b>2006</b>	<b>2007</b>
The faculty to student interaction was appropriate.	4.71	3.7	4.75	5.0
The faculty to student interaction enhanced new learning.	4.71	4.3	4.75	5.0
The feedback on assignments and projects was effective and timely.	3.85	4	4.75	5.0

The *Academic Advisement Handbook* was developed in 2006 as a result of an AQIP Project related to improving communication and advising processes. This was developed from a strategic initiative related to evaluation of processes related to student services. All faculty received a copy of the Handbook to use during the advisement process. Figure 2-4 shows BSN student satisfaction with Academic Advisement which is a component of building student relationships. The set level of achievement is 80% of students will give a satisfaction rating of 3 or 4.

Figure 2-4 BSN Student Satisfaction with Academic Advisement

<b>Academic Advisement</b>	<b>2003</b>		<b>2004</b>		<b>2005</b>		<b>2006</b>		<b>2007*</b>	
	<b>n</b>	<b>%</b>	<b>n</b>	<b>%</b>	<b>n</b>	<b>%</b>	<b>n</b>	<b>%</b>	<b>n</b>	<b>%</b>
<b>Availability of Faculty</b>	149	76	132	81	152	86	183	79	76	86
<b>Helpfulness of Advisor</b>	149	76	130	80	146	83	183	79	76	83

\*Survey completed online rather than in class impacted number of surveys completed.

*Personal and Professional Growth*

Two College goals measure achievement of personal and professional growth. College goal 2 states: “Provide the essential foundation for graduate study in nursing.” College goal 3 states: “Foster the commitment to personal and professional growth and accountability.” The CSEQ asks students to rate their achievement of the College goals. Figure 2-5 shows the student perception of their achievement of the two College goals. Achievement for 2005-2006 is rated on a 1 – 5 scale with 1 = not achieved and 5 = highly achieved. Data is presented in percent of students who rated either a 4 or 5 indicating high achievement of the goals. This data was first collected starting in fall 2005. In 2007, the questions were incorporated into the CSEQ and the rating scale changed to 1 to 4 with 4 being highly achieved.

The CSEQ asks students to rate their perception of gain in nursing characteristics. Students rate characteristics on a 1 to 4 scale with 4 being high gain. Figure 2-6 shows mean scores for students’ perceptions of gain or progress in nursing characteristics.

Figure 2-5 Student Perception of Achievement of College Goals

Goal	2005-2006 n=99	2006-2007* n=84
Provide the essential foundation for graduate study in nursing.	94.5%	3.6
Foster the commitment to personal and professional growth and accountability	92.5%	3.6

\* Rating scale 1 to 4.

Figure 2-6 Student Perceptions of Gain/Progress in Nursing Characteristics

Characteristic	2003 N=57	2004 N=66	2005 N=80	2006 N=80	2007 N=84
Developing Values	3.4	3.5	3.5	3.4	3.4
Role Development	3.4	3.3	3.4	3.4	*

\*2006-2007 survey revised. No data for this year.

The CSEQ also asks students to rate their substantial progress toward educational objectives of the College. Norm data is also provided. Students rate their progress on a 1 to 4 scale with 1 being no progress and 4 being substantial progress. Mean scores are reported in Figure 2-7.

Figure 2-7 Progress Toward Education Objectives of College

Education Objective	2003	2004	2005	2006	2007	Norm
Career information	3.3	3.5	3.3	3.4	3.7	N=1427 2.9
Developing values/ethical standards	2.9	3.0	3.0	2.9	3.1	N=1428 3.24
Basis of advanced education	2.9	3.2	3.1	3.1	3.5	N=1429 3.22
Vocation	3.3	3.5	3.3	3.5	3.8	N=1432 2.34

The MSN Program Curriculum Satisfaction Survey asks students to rate their satisfaction with two statements that are related to personal and professional growth. The responses are on a 1 to 5 scale with 1 being very dissatisfied and 5 being very satisfied. Mean scores are reported in Figure 2-8.

Figure 2-8 MSN Program Curriculum Satisfaction

Statement from Satisfaction Survey	2004	2005	2006	2007
The preceptors I had contributed to my role development as an APN or educator.	4.85	5.0	4.75	4.85
The clinical experiences facilitated my development toward the clinician or educator role.	4.85	5.0	4.75	4.85

The College support of personal and professional growth of the faculty is evidenced by the financial support for the faculty development. The Dean budgets money annually for faculty and staff development. Evidence of use of the funds can be seen in the listing of development programs attended by faculty and staff published in the *Annual Report*. Faculty are supported for doctoral study both financially and with workload adjustments when possible. Currently there are five faculty enrolled in doctoral programs, four faculty actively investigating programs, and four faculty who earned doctorates in the last three years.

## Saint Francis Medical Center College of Nursing

### *Service to the Community*

Students participate in a variety of service and fund raising projects for the community. Examples of projects in 2006-2007 include: Susan G. Komen Race for the Cure, South Side Mission, Peoria Rescue Ministries, NICHE project for elderly in local nursing homes, and adoption of a family through the OSF Saint Francis Giving Tree project at Christmas. Projects for 2005-2006 include: Susan G. Komen Race for the Cure, Catholic Relief Services, Children's Hospital of Illinois, Hurricane Katrina fundraising, Christmas in April, South Side Mission, Peoria Rescue Ministries, Habitat for Humanity, Heart of Illinois Special Recreation Association, collection of school supplies for children in need in area school district, and adoption of two families through OSF Saint Francis Giving Tree project.

Students in the community health course complete a population-based service project as a course requirement. The project was developed to meet the course objective "Implementation of the nursing process in the community to assist in meeting the needs for health promotion and maintenance." The service projects are conducted with populations of varying ages. Examples of projects include: preventing dating abuse, bicycle helmet safety, maturation for 5<sup>th</sup> grade boys, nutrition and the food pyramid, bullying, dental hygiene, and smoking prevention. Graduate students as a learning activity in the health promotion course develop and provide a health promotion activity in the community. Examples of projects that have been presented include: airbag safety, bicycle helmet safety, prevention of childhood obesity, reduction of teen motor vehicle accidents, and a physical fitness program aimed at Hispanic women with diabetes mellitus. In 2001 and 2002, The Airbag Safety Program was submitted for the Secretary's Award through the American Association of Colleges of Nursing. It was advanced through two reviews into the final projects; but it was not selected for the award.

Faculty and staff are actively involved in a variety of organizations within the community. Employees serve as members on boards in the community. Examples of boards are: YMCA, Tri County Urban League, Peoria Economic Development Council, Cancer Center for Healthy Living, Peoria Area Civic Chorale, Peoria Community Institutional Review Board, 4<sup>th</sup> District Judicial Board on Elder Abuse, Mental Health Association of Central Illinois, Peoria City/County Health Department Children and Family Health Advisory Council, Susan G. Komen For the Cure Peoria Memorial Affiliate, and Friends of Friedrichshafen Youth Exchange.

### **2R2 Comparison of Results with Other Institutions of Higher Education**

The College has limited benchmark data for comparison. The measures utilized from the CSEQ provide norm data for comparison with other colleges and universities. In this area, the College has used limited benchmark data for comparison to other institutions of higher education. Norm data is available from the CSEQ to make comparisons of College of Nursing students with other college students. Figure 2-1 presents comparison data for Community of Caregivers. Figure 2-2 and Figure 2-3 present comparison data for Building Student Relationships. Figure 2-6 and Figure 2-7 present comparison data for Personal and Professional Growth.

### **2R3 How Results Strengthen the Institution and Relationship with Community**

The results strengthen the institution by demonstrating the College is achieving the distinctive objectives that were identified. The results also provide direction as to the development of AQIP projects. The Academic Advisement AQIP project which developed the Academic Advisement Handbook helped to build student relationships by providing faculty (particularly new faculty) with correct information for students during academic advisement. The collaborative arrangement that the College has with Illinois Central College and the use of its Learning Lab to provide remediation in math, English and writing for students shows strengthening of community relationships. Faculty and

student participation in community activities fulfills the Mission and Vision of the College and makes the College an active participant in the Peoria community.

## **IMPROVEMENTS**

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### **2I1 Improving Current Processes and Systems**

Each of the College committees and departments review data on student surveys to determine strengths and areas for improvement. The College compares the College results on the CSEQ to the norm data and determines areas that need improvement. Areas for improvement are incorporated into the College's planning process for the upcoming year. Results of student surveys were also used to develop AQIP projects. For example, one AQIP project focused on development of an *Academic Advisement Handbook* for faculty to improve the advisement process which contributes to building student relationships. Administrators and managers also use the results to set personal goals for the upcoming year that are in alignment with the College's strategic goals.

### **2I2 Improvement Targets, Priorities, and Communication**

The results for achievement of the other distinctive objectives of the College are published in the *Annual Report* as a means for dissemination of data. Trended data for achievement of specific outcomes for five years are presented. The *Annual Report* is distributed to all faculty, staff, College Board members, and other stakeholders. Findings are also communicated in College Board meetings and discussed at College Senate.

The following are examples of improvements that have been targeted based on decisions made after analysis of assessment and evaluation measures. The targeted improvements were identified to achieve distinctive objectives of the College.

- An AQIP Action Project examined the processes related to student services as a means to improve and build relationships. The *Academic Advisement Handbook* was developed. The Action Project group continues to study streamlining and improving processes related to the student information system and use for online registration.
- As a component of personal and professional development of faculty, a group of faculty headed by the Associate Dean of the Graduate Program is working on a process and plan to increase participation in scholarly activities amongst the faculty. The faculty workload in relation to release time for scholarly activity is being studied in conjunction with this.
- As a component of personal and professional growth of the faculty and staff, a team of faculty are developing a formal mentoring program for new faculty as a means of strengthening the New Employee Orientation program.
- Results show that the College is below its set level of achievement for 80% of students giving a satisfaction rating of 3 or 4 on relationships with faculty, student support staff, and administration (6R1). An AQIP Action Project is focusing on improving student services processes and communication processes in an effort to improve relationships with students.

**Category Three: Understanding the Needs of Students/Stakeholders**

**CONTEXT FOR ANALYSIS**

**3C1-3C2 Students and Stakeholders, Requirements and Expectations**

The Mission of the College states that “the College provides nursing education programs at the undergraduate and graduate level” making students our primary stakeholders. Figure 3-1 summarizes key stakeholders and their requirements and expectations.

Figure 3-1 Key Stakeholders Requirements and Expectations

<b>Key Stakeholder Groups</b>	<b>Key Requirements and Expectations</b>
<b>Current students</b>	Quality programs and faculty; affordable education; success on licensure exam and certification exams; employment following graduation; caring environment; safe, secure environment; learning resources and technology; online graduate program offerings; responsive student services; choice of classes
<b>Prospective students</b>	Clear and timely program and financial aid information; affordable education; programs with excellent reputation and successful graduates; personal attention
<b>Parents, spouses, families</b>	Clear and timely program and financial aid information; quality educational programs; affordable education; safe, secure environment
<b>College Board</b>	Relationship with College; timely, accurate information for Board-level decisions; ethical, fiscally sound management; quality programs and institution reputation; accountability; maintenance of accreditation and enrollment; success in student learning
<b>Alumni/Friends</b>	Maintain relationship with College; networking opportunities; support the College; participate in College and other activities; utilization of gifts; acknowledgement of gifts; positive image
<b>Area high schools</b>	Program and financial aid information; information on nursing as a career
<b>Feeder colleges and universities</b>	Program and financial aid information; communication related to programs; transfer ease
<b>Employers</b>	Competent graduates with appropriate job skills; good communication skills; appropriate decision making and priority setting skills; ability to work as a healthcare team member
<b>Accrediting agencies</b>	Compliance with accreditation criteria; quality programs; ethical, fiscally sound institutions
<b>Government</b>	Compliance with state and federal regulations; ethical, fiscally sound audits
<b>Catholic Church/Diocese</b>	Relationship with College; students and graduates who represent Judeo Christian values
<b>Community</b>	Quality programs; successful graduates; competent nurses; involvement with community activities

**PROCESSES**

**3P1 Identifying Changing Needs of Student Groups**

The College uses a variety of methods to identify needs of student groups. The College surveys students annually with the Survey of Student College Services – BSN Program. Each semester, BSN and MSN graduates are surveyed at the end of the program related to their satisfaction with the programs. Annual alumni surveys are sent to graduates from both programs at 1, 5, and 10 years from graduation. Results of the surveys are forwarded to the appropriate standing committees for action.

The results of surveys are also presented to the College Senate by the Associate Dean of Institutional Research. The Associate Dean of Institutional Research and Dean meet with individual student service departments to share results. The results are discussed by the faculty and student service departments, opportunities for improvement are identified, and plans for improvement are developed. Anecdotal information is collected from one-to-one interactions with students.

Students have representation on the following standing committees of the College Senate: Admission & Progression, Curriculum, Educational Resources, Evaluation, and Graduate. Input from the students during meetings provides insight into student needs and areas for improvement at the College. Through participation in the committees, students have input into policy, course, and program development.

### **3P2 Building and Maintaining Relationships with Students**

The College recognizes building and maintaining relationships with students as a distinctive objective (Category 2). The College and Admissions office begin building relationships with students during the inquiry process prior to their acceptance as students. The College holds two Open Houses each year, visits high school and college campuses, visits area hospitals and healthcare facilities, participates in career fairs, and hosts visits from prospective student groups at the College. High school and feeder school counselors are invited to a luncheon and program at the College to develop relationships for student referral. Inquiries and phone calls are answered promptly to build a solid foundation for the relationship. Once accepted, the relationship is further strengthened through the early assignment of an academic advisor. The academic advisor contacts the student to begin the process of developing the program of study plan. Students in the graduate program may also be assigned a mentor.

New Student Orientation is scheduled each semester for the BSN and MSN programs. During this time, students are introduced to student services personnel who will provide services and assistance to them while at the College. MSN students have the opportunity to meet face-to-face and interact with faculty and other students and recent graduates of the MSN program prior to starting the online program. Students in online programs are encouraged to interact via email or telephone with their advisor or faculty in the program. This personal meeting helps to build relationships for students who are not on campus regularly. The student-faculty relationship is important to student satisfaction. Faculty, staff, and administration have an ‘open-door’ policy related to availability to meet with and assist students. Students are encouraged to phone or email advisors or course faculty with concerns or problems. The *Student Connection* is published twice a year and provides students with information related to the College and student-life.

The College has a Retention program that is a component of building relationships. Retention is facilitated through positive student interactions with faculty in supportive, caring relationships. Faculty strives to be actively interested, approachable, available and accessible to students. Frequent meetings with academic advisors provide opportunities to develop supportive faculty/student relationships, solicit student feedback regarding concerns, and direct students to resources available for academic or personal assistance. Student involvement with faculty, professional staff, and administration promotes an environment conducive to learning, and fosters the development of self-esteem and self-actualization. The Retention Program is published in the student handbooks and the *Academic Program Handbook*. The *Student Handbook* is distributed to all students and published on the website. The entire faculty receives copies of the *Student Handbook* and *Academic Program Handbook*.

Student organizations strengthen student relationships once the student is enrolled. These organizations provide students the opportunity to develop relationships with peers, faculty, and the

College. The Resident Assistants (RAs) provide leadership on the floors of the Residence Hall. Students Offering Support (SOS) is a group of upper classmen who mentor incoming students helping them to start off well in the program.

### **3P3 Identifying Changing Needs of Stakeholders**

The needs of stakeholders are identified by contact with the stakeholders. The College meets with educators and managers of the primary clinical agency to identify employer perceptions of needed skills for graduates. The Associate Dean Undergraduate Program meets monthly with the Chief Nursing Officer and the nurse recruiters from the primary clinical agency and primary employer of graduates. The meetings are to identify needs and facilitate clinical learning experiences for students. The Associate Dean Graduate Program meets monthly with the Advanced Practice Nursing group at OSFSFMC. The meetings are to remain current on topics related to advance practice nursing and to identify stakeholder needs. Feedback from employers is received annually and analyzed to identify stakeholder needs. Data is shared with standing committees to use to make program changes.

Beginning in 2006, the College Board is surveyed annually to identify needs. Results are tabulated and shared with the Board. Suggestions and comments are used to provide assistance and information as identified. For example, the 2007 survey identified a need to have more information on college student service departments. Based on this request a presentation from the Student Finance Office was provided for the Board at the February 2008 meeting and the Associate Dean of the Undergraduate Program presented information on clinical site placement at the April meeting.

### **3P4 Building and Maintaining Relationships with Stakeholders**

The College recognizes that building and maintaining relationships with stakeholders is important. *Notes from Greenleaf* is the College and Alumni newsletter that is published quarterly. Distribution of the newsletter to alumni and friends provides a mechanism to build and maintain connection with the College. Distribution of the College's *Annual Report* is another mechanism to maintain connection with stakeholders.

Employee rounding is a mechanism that helps to identify needs of faculty and staff. The Dean and Associate Deans do rounds quarterly on employees that are direct reports. As a component of the employee rounding, one question that is asked relates to having the materials, training, and information needed to do their job. This process helps to identify areas for improvement at the College.

### **3P5 Determining New Students and Stakeholders**

The identification of new student groups or stakeholder groups is done by the faculty and administration. In the strategic planning sessions, market trends, employer needs, assessment data, SWOT (Strengths, Weaknesses, Opportunities, Threats) analysis, and input from community groups provide data to identify new students and stakeholders. The Strategic Plan identifies the goals, strategies, and individual or department that is responsible for meeting established targets. Input from alumni and employers was a motivating factor in the College's decision to develop the graduate nursing program with its various options. The MSN program began online course offerings in response to student and faculty feedback. In 2003, the strategic planning process identified potential new students as registered nurses at other OSF facilities. A tactic on the strategic plan focused on recruitment strategies targeted at this prospective population.

### **3P6 Collecting Complaint Information from Students and Stakeholders**

The College has a formal complaint process for students and stakeholders. The College has set a level of achievement that 100% of signed complaints are kept on record and are addressed. Complaints and

issues that are raised are shared with faculty, staff, or departments as appropriate for resolution of the issue. A formal complaint log is maintained in the Dean's office.

Students have the right to appeal grade reports, course or clinical grades that result in academic probation or dismissal from the College, or decisions where there is reason to believe that they are capricious, discriminatory, arbitrary, or in error. The Appeal Procedure for students was developed to provide a mechanism for the fair resolution of disagreements. The Appeal Procedure is published in the BSN and MSN Student Handbooks which are given to all students and are posted on the website. When issues arise, students are encouraged to attempt to resolve the issue with the course faculty first, and then to go to the Associate Dean. Unresolved issues at this point are taken to the Admission & Progression Committee for academic issues or the Judicial Board for violations of the Professional Conduct/Professional Standards. The Appeal Process has specific time limits set to ensure that issues are resolved in a timely manner. The administration and faculty have an 'open door' policy for students and staff that foster early resolution of problems or complaints.

### **3P7 Student and Stakeholder Satisfaction**

The College uses a number of methods to measure student and stakeholder satisfaction. The College Services Survey is administered annually and measures satisfaction and relationships with student support services and faculty. Other measures the College uses include student feedback, student complaints, alumni surveys, employee surveys, and student end of program and curriculum satisfaction surveys. In 2006-2007, a survey of College Board members was completed to receive feedback (See 3P3). Data related to enrollment, attrition, retention, and graduation rates are also measures of satisfaction and building of relationships. The data are shared at the appropriate standing committees and at College Senate. Trend data on satisfaction results are published in the *Annual Report*.

## **RESULTS**

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### **3R1 Results for Student Satisfaction with College Services**

Results for student satisfaction are reported in Category 2 under results for other Distinctive Objectives related to Building Relationships (See 2R1 and 6R1). Student satisfaction with College Services is below the set level of achievement identified by the College. The completion of the Academic Advisor Handbook was a result of an AQIP Action Project targeting improving processes related to student support services. It is the hope that improving student services will contribute to improved student relationships.

Positive interactions with faculty members contribute directly to student persistence in obtaining their degrees. The retention rates for BSN students at the College are consistently high (Figure 3-2). Figure 3-3 shows the attrition and retention rates for the MSN students. The College recognizes that attrition rates for the MSN students were high early in the program. The students who withdrew were typically working full-time and attending school on a part-time basis. Withdrawals were due to time limitations and increasing family and work commitments. In response to this, the College strengthened its advisement process at the time of admission. Students meet with the Associate Dean of the Graduate Program for a discussion related to time commitments in graduate school.

### **3R2 Results for Building of Relationships with Students**

The CSEQ results for building relationships show that relationships among students and between students and administrators are above the norm except for 2005. The student faculty relationship rating is below the norm and provides an area for improvement (2R1, Figure 2-2). At the graduate level, students rated the student faculty relationship high (2R1, Figure 2-4). Relationships between students and staff from admissions, student finance, and library are varied (2R1, Figure 2-3) providing another area for improvement.

Figure 3-2 Attrition and Retention Rates BSN Program

Semester of Entry	Number New Full-time BSN students	College Attrition Rate (%)	College Retention Rate (%)
Fall 2002	46	4	96
Spring 2003	40	5	95
Fall 2003	52	0	100
Spring 2004	46	2	98
Fall 2004	52	2	98
Spring 2005	46	7	93
Fall 2005	50	0	100
Spring 2006	72	1	99
Fall 2006	80	4	96
Spring 2007	68	0	100
Fall 2007	77	3	97

Figure 3-3 Attrition and Retention Rates MSN Program

Semester of Entry	Number New MSN students Full-time	Part-time	Attrition Rate (%)	Retention Rate (%)
Fall 2002		11	54.5	45.5
Spring 2003		4	50	50
Fall 2003		13	38	62
Spring 2004		4	50	50
Fall 2004	1	16	41	59
Spring 2005	1	12	46	64
Fall 2005	2	25	30	70
Spring 2006		6	33	67
Fall 2006		29	17	83
Spring 2007		9	22	78
Fall 2007		39	13	87

### 3R3 Results for Stakeholder Satisfaction

Prospective students are primary stakeholders for the College. Due to the increased number of qualified applicants, in 2004 the College changed from a rolling admission policy to an application deadline process for the 2005-2006 year to ensure that the College selected quality applicants. Due to increased numbers of qualified applicants seeking admission to the BSN program and the nursing shortage, the College made the decision to increase student enrollment to 90 BSN students each semester from 54 students beginning in spring 2006. The desired enrollment for new students in the MSN program is 40 per year. The application and enrollment numbers show that relationships are built early with the MSN group and that there is a high level of satisfaction with the programs offered at the College. The College's reputation of quality and excellence of programs and graduates contributes to the increasing number of applications and enrollments (Figure 3-4).

Figure 3-4  
Applications and Enrollments

Semester	BSN Applications	BSN Enrollment*	BSN FTE**	MSN Enrollment*
Fall 2002	149	154	133	27
Spring 2003		174	158	29
Fall 2003	252	183	164	38
Spring 2004		201	182	37
Fall 2004	135	220	191	52
Spring 2005		223	203	47
Fall 2005	148	223	196	59
Spring 2006	113	243	219	55
Fall 2006	139	270	239	77
Spring 2007	132	301	274	75
Fall 2007	170	329	289	105

\*Headcount

\*\*Full-time equivalent based on Illinois Board Higher Education formula

### 3R4 Results for Building Relationships with Key Stakeholders

In 2005, the Alumni Association of the College was reactivated. The Centennial Celebration of the College along with key faculty and alumni leaders contributed to the reactivation. Since its reactivation, membership has grown to 90 active members. The Alumni Association participates in Senior Send-off presenting graduating students with a gift and providing information on the Alumni Association. The Alumni Association offered its second continuing education program in February 2008 with over 110 participants. This is an increase from the 40 participants who attended the first program offered in February 2007.

The Graduate Program partnered with the Turner Center for Entrepreneurship at the Foster College of Business Administration at Bradley University. The College's application for the partnership was selected. A student group worked with the College to collate and analyze data from a needs assessment related to development of additional graduate programs. A formal report was completed by the students at the Center and submitted to the College. This needs assessment was used to examine the need for additional graduate programs at the College.

### 3R5 Comparison of Results with Other Institutions and Community

The College has limited comparison data for measuring building relationships with students and stakeholders. The CSEQ provides norm data for comparison. Minimal measures related to student and stakeholder needs and processes are measured on the CSEQ. The data from the CSEQ shows that student satisfaction with the College is below the norm (Figure 1-16). The Evaluation Committee is investigating measures of student satisfaction that will provide additional norm comparison data such as the Noel Levitz Student Satisfaction Inventory or the American Association of Colleges of Nursing (AACN)/Educational Benchmarking, Inc. (EBI) Undergraduate Nursing Education Exit Assessment.

National League for Nursing (NLN) surveys nursing programs in the United States annually and publishes the NLN Nursing Data Review for the Academic Year. The Nursing Data Review, Academic Year 2005-2006, reports that the participating nursing colleges reported an overall 8.7% decrease in applications to all types of nursing programs. At the baccalaureate level, applications were down by 12.4%. This is in contrast with the College where the number of applications from qualified applicants has continued to rise over the last several years.

NLN also reported that in 2005-2006, the retention rate for students in BSN programs was 90% in comparison to only 72% in four-year US undergraduate institutions. The College retention rate for students in the BSN program exceeds this national rate in the previous 6 years (Figure 3-2).

## **IMPROVEMENTS**

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### **3I1 Improving Current Processes and Systems**

Assessment data is used to drive strategic planning and quality improvement for student services. College administration and Student Service areas analyze the assessment data and identify strengths and areas for improvement. The need for improvement in student services and processes is being addressed through AQIP Action Projects. Improvement in the student and stakeholder processes contributes to student learning.

### **3I2 Improvement Targets, Priorities, and Communication**

Improvement targets are set during the strategic planning process and by faculty and staff on the SPEAOP. Assessment data is published in the *Annual Report* and shared with students, faculty, and other stakeholders. Communication with MSN and BSN students occurs through the use of eCollege Community. This is an online course that students are enrolled in which provides an all College mechanism of online communication via postings or email.

The following are examples of improvements that have been targeted after analysis of assessment and evaluation measures. The improvements were identified and selected to improve identifying needs and building relationships with students and stakeholders.

- The registration process was one area consistently rated low by the BSN students on the Survey of College Services. Based on the trend results, the Registrar worked with the Associate Dean of Undergraduate Program and developed a process for providing students with computer generated random numbers for registration. Students could submit their registration forms to the Registrar's office after meeting with their academic advisor. This removed the need for students to line up for over 24 hours to register for hard to get into class and clinical sections. Each of the semesters the student registers he or she receives a new number. As part of an AQIP Action Project, the College continues to study and move toward online registration.
- The College is formalizing a process for students to use when organizing a new student group. This process was used in 2007-2008 by the students who started the Minority Student Group. The Student Senate is revising Bylaws and processes to incorporate additional student groups and to provide funding for the groups with use of student activity fees.
- The Strategic Plan identified an outcome to increase enrollment of registered nurses in the program. This stakeholder group was targeted with increased recruitment strategies. Based on the recruitment and advertisement, the registered nurse enrollment in fall 2007 was 29 which is the highest enrollment of this group to-date.
- The College recognizes the need to identify and select additional standardized measures of student satisfaction. Additional measures will provide comparison data against other higher education institutions for the College to use to improve services for students and other stakeholders.

## Category Four: Valuing People

### **CONTEXT FOR ANALYSIS**

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#### **4C1 Organization of Work Environment**

The College of Nursing organizes its work activities into academic and support services with job classifications that support each service area and create an environment conducive to student learning. Faculty has primary responsibility for student learning. The support services are admissions, registration, student finance, financial aid, library, health, counseling, clerical, housing, and administrative. All work together to ensure student learning and professional success. The support staff recruit, enroll, and retain students; college support representatives have responsibility for student housing, faculty provide program instruction in the form of development, implementation, and evaluation of learning activities; and administration provide leadership and provision of resources.

The workload for full time faculty is 21-25 credits per academic year. Full time faculty have 10-month agreements and have the opportunity to teach summer courses. The College does not offer tenure. Following hiring and a 90-day appraisal, faculty appointments are continuous. Contracts are renewed annually. In cases of termination, faculty is entitled to due process. The College has a policy developed that provides criteria for faculty promotion. Part-time faculty teach clinical sections as needed which assists to accommodate the increased enrollment. The College hires students to work as assistants in the library and graduate assistants for the professional lab, and as graduate assistants to extend the availability of academic services.

Administrative and support services staff have 12-month contracts. Job descriptions for administrative and support staff are developed by the College and communicated on the OSF Saint Francis Medical Center (OSFSFMC) Intranet. Administrative and faculty job descriptions are published in the *Faculty Handbook*.

The strategic planning, AQIP, and committee work activities require participation from all employees, including academic and support service areas. All employees participate on one or more of the work activities.

#### **4C2 Key Institutional and Geographic Factors**

The key institutional and geographic factors impacting work environment, job classification, and the use of part-time faculty are: the organizational sponsorship of the College of Nursing; national, state, and local need for nurses; student enrollment, and the nurse faculty shortage.

One positive and important institutional factor impacting work and job classification is that the College is sponsored by OSFSFMC. The sponsorship allows the College to utilize the human resources, purchasing, accounts payable and information system services at the OSFSFMC while the College maintains the academic administration and leadership, ownership and responsibilities. A factor critical to the capacity to increase enrollment is that the OSFSFMC provides funds for facility needs, offers full tuition waivers for its employees at the College up to 18 semester hours per year, and affords the College first priority for clinical experiences for the students enrolled at the College

The Illinois Nurse Practice Act requires all nurse faculty to have a Master of Science (MSN) degree in Nursing and that nursing programs have a 1:8 faculty student ratio for clinical sections. The Association of Colleges of Nursing (AACN) strongly recommends that nurse faculty have doctorate degrees. When full-time faculty have reached the maximum teaching load (21-25 credits/year), the College hires qualified part-time nurse faculty, with an MSN degree, to teach clinical course sections. Placing part-time faculty in clinical positions helps to maintain the 1:8 faculty to student clinical ratio and 1:45 student classroom ratio. Graduate assistants teach in the professional laboratories assisting students in developing

nursing skills. Part time support staff helps to ensure timeliness and flexibility of services, which are recognized needs as enrollment increases.

**4C3 Demographic Trends**

Over the next ten years, the College will continue to review the following demographic trends to analyze workforce needs: shortage of nurses, student enrollment, faculty shortage, faculty and staff incomes and credentials. The steady growth of enrollment at the College is related to the nurse shortage and the anticipated increased health care needs of the aging baby boomers. In 2006, the College decided to increase BSN student enrollment 36% to provide more nurses for the workforce in Central Illinois. The College set a goal of 500 students by 2010. The enrollment expansion plan included hiring additional full-time and part-time nurse faculty and support staff positions (Figure 4-1). Thirty-five percent of the current faculty were hired since 2004. This change is due to increased enrollment not faculty turnover.

Figure 4-1 Faculty and Staff

Academic Year	Number of Students	Full-time Faculty	Part-time Faculty	Administrative	Professional Staff/Support Staff	Graduate Assistant	Library Assistants
2007-2008	411	29	19	5	20	2	2
2006-2007	376	21	15	5	19	0	2
2005-2006	298	21	9	5	19	0	2
2004-2005	272	19	8	5	18	0	1
2003-2004	238	16	7	5	18	0	1

The maturing of faculty is another consideration in assessing workforce needs for the next ten years. Although there are no scheduled retirements, the dean will lead a process to develop a succession plan to ensure smooth transition when retirements occur and a way to utilize skills of retired employees.

The College’s strategic planning process includes the gathering and analyzing of demographic and professional trends to determine workforce capabilities and educational needs for now and the future.

**4C4 Training Initiatives**

The College is committed to providing professional development for both faculty and staff. The current and future training initiative for faculty will continue to be pedagogical workshops relating to teaching and learning strategies and online instruction. The Curriculum Committee is leading a BSN curriculum revision, which will require educational sessions on integrated curriculum and active learning to support the curriculum revision process. The Faculty Affairs Committee is responsible for planning on campus training. The graduate program uses consultants and consultations as a major educational method as program changes occur. Staff receive training to enhance job competencies and skills through computer training at OSFSFMC, external vendors, and attendance at workshops and conferences.

New College employees have two orientation sessions. The New Employee Orientation to OSFSFMC introduces employees to key administrative staff, policies, and benefits relating to the OSFSFMC. The New Employee Orientation to the College of Nursing introduces the employees to the College services, policies, and curricula. Both sessions provide periodic follow-up sessions.

The College offers funding to send faculty and staff to national and local conferences and workshops to enhance personal and professional growth. In 2007, faculty had a stipend of \$500 to use for conferences. Webinars are provided for both support staff and faculty. The Faculty Affairs committee plans an annual workshop related to educational topics that is offered to all College faculty. The workshop is open to educators from other area nursing programs for a fee. In 2007-2008, the College began a series of

programs on educational topics for faculty development. Five programs on test development, evaluation, effective clinical teaching, promoting critical thinking in students, and active learning strategies were offered. Administrators participate in the Leadership Training Session at OSFSFMC which consists of five sessions each year on developing new leadership initiatives. Future training initiatives will be planned to support the future leadership succession plan.

## **PROCESSES**

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### **4P1 Identifying Specific Credentials, Skills, and Values**

College faculty and administration work together to determine the credentials and skills for faculty based on the requirements from the Illinois Department of Financial and Professional Regulation, National League for Nursing Accrediting Commission, the American Association of Colleges of Nursing, and the College's curricula needs. Faculty and staff job descriptions identify the credentials and skills required for the position. Job descriptions are developed and approved by the College Senate and the College Board.

Credentials, skills, and values for associate and assistant deans are developed by the administrative group and approved by the College Senate and College Board. The identification of the dean's qualifications and the selection are done by the College Board. Staff participates with the Dean in determining their respective job description including qualifications. Each group uses literature and Internet research to study the job credentials and tasks to ensure that job descriptions are in line with other colleges and trends in higher education.

### **4P2 Recruiting, Hiring, and Retaining**

The College of Nursing collaborates with Human Resources (HR) Department at the OSFSFMC to recruit, hire, and retain qualified employees.

The Recruitment Process includes College Administration:

- Exploring enrollment and program factors to determine the need for additional FTEs.
- Seeking approval from the OSFSFMC FTE Committee to add the new position or replace an existing position.
- Posting the approved position on the online Hiring Manager System and in the College of Nursing.
- Advertising the opening first internally, then in the local newspaper and selected cities within a 50-90 mile radius. The College has had many qualified applicants seek out employment, thus not requiring a more expansive search.

The Hiring Process includes:

- Establishing a Selection Committee based on College policy. For faculty there is a Faculty Selection Committee which is made up of the Dean, Associate Deans, and four faculty members. For staff positions the Dean appoints a search committee of staff members led by the supervisor of the position. The Committee uses an in-house developed survey to interview and rate each candidate.
- Selecting of candidates for interview is done by the Selection Committee.
- Requesting HR to conduct an initial interview and provide a salary recommendation is done by the Dean.
- Interviewing prospective candidates conducted by the Selection Committee.
- Recommending the selected candidate for both faculty and staff positions to the Dean.
- Implementing the HR procedures for hiring the faculty and staff positions. The Dean collaborates with HR for salary quote and requests that HR conduct a reference check of the selected candidate.

HR offers the position to the selected candidate upon the request of the Dean. When the position is accepted HR arranges for the physical exam, background checks, and New Employee Orientation.

Although there is no formal retention plan, processes are in place to assist with retention:

- Ensuring comparative salaries and benefits. The process for salary adjustments is discussed in 4P7.
- Assigning faculty workload through mutual discussion and agreement with faculty with the goal of staffing all course and clinical sections. The Associate Deans meet annually with faculty to discuss workloads for the coming academic year. Through mutual agreement the faculty and Associate deans determine the faculty's workload.
- Recognizing and rewarding outstanding work and accomplishments through special awards and appreciation letters sent to the employee's home. Each administrative staff is expected to acknowledge four employees per month using either WOW (What Outstanding Work) awards or appreciation letters.
- Administrators round on the employees that directly report to them once each quarter. The purpose of the rounding is to receive feedback from employees on what is working well, employees that should be recognized for outstanding work, issues that need addressing, and whether the employee has the materials needed to do the job. Rounding also provides administrators an opportunity to coach employees on behaviors that may need addressing.
- Implementing OSFSFMC policies for tuition reimbursement and waivers, which allow funding for education. Faculty receive a total of \$15,000 to assist with funding doctoral study. Staff receives tuition reimbursement for 18 credits each year.

Planning for changes in personnel includes assessments of enrollment numbers, anticipation of new programs, and anticipated resignation and retirements. See 4P2 for adding new employees. There is a need for a study of policy and process for reducing employees should there become an unanticipated decrease in student enrollment. Changes in personnel have also occurred related to reorganization of the staff for housing and receptionists and a reduction in one secretary.

#### **4P3 Ensuring Processes and Activities Contribute to Communication and Ethical Practices**

Shared governance with administrative oversight ensures that work processes and activities contribute to communications, cooperation, high performance, innovation, empowerment, organizational learning, skill sharing, and ethical practices. Through the College Senate, faculty, and staff participate in decision and policy making about academic and student support services related to the strategic plan and the systematic program evaluation. The College Senate Committee structure empowers committees to carry out the assigned functions and to bring policies to the College Senate. The College Senate promotes inclusion rather than exclusion which serves to strengthen communication and decision-making between groups. The Dean holds a Communication Forum every month which facilitates open communication.

The strategic planning process serves to enhance cooperation, high performance, and innovation. Faculty, staff, and the College Board meet to conduct an analysis of the College strengths, weaknesses, opportunities and threats (SWOT). Out of this process, goals, strategies and tactics are planned centered around recruitment, operational effectiveness, curriculum, financial stewardship, and facility. From 2004-2006, the College had both the strategic planning groups and groups working on AQIP projects. Recognizing the duplication of tasks, in 2006 the College combined the strategic planning and AQIP projects into the 2010 Strategic Plan (See Category Eight). To further organize the planning process, in 2007, the strategic plan was categorized into four pillars (See 8C1). Work groups were reorganized and the responsibilities were assigned to designated leadership staff members to implement and maintain the strategic tactics. The recommendations from all groups are communicated to and acted upon by College

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Senate. The organization of the Strategic Plan ensures communication and involvement of employees in the various aspects of the College processes.

As the College establishes projects, training is provided to support projects. The major projects are curricula revisions, simulation learning, and fund raising. The workshops and webinars attended related to curriculum revision were active learning, simulation learning, and concept-based nursing curriculum. Staff participates in Webinars related to fund raising, conflict of interest, and safety and security issues. Several faculty and administrative staff have attended Six Sigma training.

Employees meet in groups or individually to share their knowledge and skills. Three faculty members shared their respective dissertations with their colleagues. The topics, student evaluation, use of case studies in student learning, and active learning strategies, related directly to student learning. A student tutoring process was an outcome of the sharing of skills among faculty. Student support staff share important policy compliance issues with faculty and other staff members.

Ethical practices are ensured through the joint development of the College Core Values. The purposes of the Core Values statements are to: support the Mission and Philosophy, provide direction for the day-to-day activities and decision; specify how individuals should behave; and provide meaning to each person's work. The next step is to tie the Core Values formally to decisions made during the College Senate. Faculty attend an annual Ethics workshop sponsored by OSFSFMC. All employees attend the annual Mission Integration program sponsored by OSFSFMC. The program consists of a video, discussion, and completion of online activities. The programs have focused on the concepts of being a part of the Community of Caregivers and caring for yourself and others. This year's program focuses on decreasing workplace violence and promoting a culture of mutual respect.

The College believes that employees who perceive they are treated fairly and have avenues and opportunities to discuss work-related problems will function more effectively. An employee may use the Fair Treatment Policy and Appeal Procedure Policy for any work-related problem or condition which the employee member believes to be unfair, inequitable, discriminatory, or a hindrance to effective performance. The Faculty Handbook includes a Promotion, Disciplinary Action or Termination Appeals Policy for faculty to appeal a decision regarding promotion, disciplinary action, or termination, if the individual has reason to believe the decision was arbitrary and capricious, discriminatory, or that established procedure was not followed.

### **4P4 Developing Faculty, Staff, and Administration and Reinforcing Development**

As explained above, the workshop attendance, webinars, and courses for credits are used to accomplish training and development. Operational and foundation funds are allocated annually to ensure that all employees have opportunities to select national and regional conferences, workshops and webinars that relate directly to College projects and job responsibilities. A process is in place that provides financial support for faculty pursuing doctoral education. The leadership staff participates in Leadership Development Series presented by OSFSFMC. They attend professional meetings to remain updated in changes in nursing and higher education. Training is reinforced by faculty and staff sharing the knowledge gained with others and by discussing how the knowledge may be applied to their job or to a College project.

Training is reinforced by involving the employee in projects after attending workshops. For example, a team was sent to a conference on the Doctor of Nurse Practice (DNP), the group is now involved in studying the feasibility of a DNP program at the College. Another group was sent to learn about revisions the standards related to Master of Science in Nursing (MSN). They are now involved in the revising of the MSN program. Another group was sent to learn about simulation learning and are working to ensure

the simulation is integrated across the curricula. Two faculty members received Six Sigma training and used the training to lead a project to enhance the BSN national licensure pass rate.

#### **4P5 Methods for Determining Training and Development Needs**

Training and development needs are determined by self reports, College projects, and during annual appraisal. Faculty and staff job descriptions identify the needed credentials and skills for the position. At the time of the annual appraisal, faculty and staff are required to set goals for the year and identify the resources needed to accomplish the goals. Goals set by employees are expected to be in alignment with the College goals and strategic initiatives and promote personal and professional development of the employee based on skills and training needed for their job. Employees inform the Dean of the specific training sessions desired. The Dean approves attendance based on available funds. There is a need for formal process for determining training and development needs.

#### **4P6 Designing and Using Personnel Evaluation System**

The process for personnel evaluation for faculty and staff is as follows:

- The faculty student evaluation process is designed by the Evaluation Committee which reviews the student involvement in faculty evaluation. The process and form are approved by College Senate.
- The Annual Appraisal form is designed to include job tasks as described on the employee's job description, a listing of individual developmental goals for the upcoming year and an evaluation of the goals from the prior year. Faculty and staff are asked to write goals that connect the College's strategic plan to their development needs. Each supervisor is responsible to ensure that faculty and staff goals connect to the College's Strategic Plan.
- All employees are evaluated annually and are required to complete and submit to their supervisor a self evaluation using the Annual Appraisal Form. Each employee meets with their supervisor to discuss both their self evaluation and supervisor evaluation.
- Each employee has the option to meet with their supervisor to discuss their performance at anytime during the year.
- Feedback on employee performance is provided to employees during the annual evaluation session and periodical evaluation relating to job performance. New employees received a 90-day evaluation and thereafter become a part of the annual evaluation process.

The process for personnel evaluation for administrative staff is as follows:

- The administrative staff, Dean, Associate and Assistant Deans, are evaluated on their performance on leadership standards identified by OSFSFMC along with goals and strategies that are identified by the leader. College Administrative staff participates in the Leader Evaluation Manager (LEM) online system which allows each leader to write goals, strategies, target performance levels, and timelines relating to the College Strategic Plan and distinctive goals. This plan is established annually in November and is evaluated every 90 days and at the end of the fiscal year. The results of the leader performance are available to the supervisor throughout the year and are a basis for salary adjustment and bonus.
- The Dean receives faculty evaluations of the Associate Deans, which are used to complete the Associate Deans' evaluation.
- In October, the end of the fiscal year, the administrative staff completes the final update of the LEM in the system. The Dean evaluates each of the administrative staff based on the outcomes observed in the annual evaluation.
- Administrators have the opportunity to participate in 360° Evaluation as a method of input that would allow supervisor, peers, and direct reports to provide feedback on how they perceive the leadership skills and behaviors of the individual. The feedback can be used by administrators to enhance their personal development plans.

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- The Dean's performance is evaluated by the Administrator of the OSF Saint Francis OSFSFMC and the College Board using data from the LEM.

The faculty evaluation system aligns with Category One, Helping Students Learn, in that the:

- Faculty's responsibilities for student learning are described in their job descriptions.
- The faculty annual appraisal form consists of responsibilities relating to establishing learning objectives, designing and implementing courses, assessing student learning, academic advising, and developing and implementing the curriculum, teaching and learning, which are taken from their job description. The criteria are consistent with IP6 as the method to determine and document effective teaching and learning. Faculty's job descriptions are published in the Faculty Handbook. The following is a link to a copy of the Faculty Evaluation Form [www.sfmcon.edu/faculty/staff/FacultyHandbook](http://www.sfmcon.edu/faculty/staff/FacultyHandbook).
- Students annually provide feedback on faculty performance. Student feedback is provided to faculty and to the Associate Dean. The latter uses the data in the faculty's annual evaluation, as a component of the documentation of teaching performance. The following link to the Faculty Handbook provides the process for students participating in the evaluation of faculty. See [www.sfmcon.edu/faculty/staff/FacultyHandbook](http://www.sfmcon.edu/faculty/staff/FacultyHandbook).

The personnel evaluation system aligns with Category Two, Accomplishing other distinctive objectives. The evaluation system include personnel's performance related to the Strategic Plan, personal and professional growth, and to service to the community. Employees are rated on the distinctive objectives and have an opportunity to discuss their past and future performance with their supervisor.

### **4P7 Designing Recognition, Reward, and Compensation System**

The designing of recognition, reward, and compensation is done through collaboration between the College with the HR Department. The College has the autonomy to review OSFSFMC reward and recognition strategies to identify the fit of the processes and procedures within the college environment as opposed to a healthcare environment. As discussed in 4P2 the College approved the use of OSFSFMC strategies of giving WOW awards, employee rounding, and sending letters of appreciation to the employees' home address as techniques to retain employees by giving recognition. When the College identifies concerns relating to recognition, reward, and compensation, administration prepares a proposal identifying the issues, background relating to the issue, and a recommendation. The College meets with the HR department of OSFSFMC to discuss and reach a decision about the proposed issue.

Any College personnel can recommend to an administrative staff person to give another College employee special recognition for outstanding services. The administrator can either give the person a WOW Award or send a letter of appreciation to the employee's home. The administrative staff then recommends the employee to the OSFSFMC Administrator, who in turn sends a letter of appreciation to selected employee's home also in appreciation of outstanding performance. A WOW award is a gift certificate recognizing quality service, exceeding of expectations, or financial stewardship. Any employee can recommend to the administrative staff another employee for recognition and/or rewards. The Human Resource (HR) department authorizes the administrative staff to give WOW Awards.

Employees receive a Service Award for every 5 years of service. The HR Department plans a free dinner for the honoree and guests and gives the employee a gift commensurate with the number of years of service. The recognition dinner is held annually. Administrators are invited to attend to recognize their own employees.

The Dean and the academic Associate Deans work with the Human Resource Department to collect data to evaluate current market salaries for each job classification to determine the faculty's annual

compensation package. The annual salary adjustments are based on current market compensation for each position, current financial status of the OSFSFMC, and satisfactory performance of the employees. The staff compensation decision is made in November, following the submission of all personnel annual evaluation. Salary adjustments for staff are made in December. Faculty annual adjustments are made in March, to be effective the next academic year. Full-time employees are eligible for an annual Team Award which is based on achievement of set targets by the OSFSFMC.

The College has a process in place for faculty promotion. The Faculty Promotion policy enhances the quality and effectiveness of education by upholding the highest standards of teaching, community service, and scholarly activity. Faculty submit requests to the Faculty Promotion committee which reviews the submitted materials, acts on the requests and makes a recommendation to the Dean. The Dean then reviews the materials, acts on the request and makes a recommendation to the College Board who makes the final approval. Faculty may also use the established policy to request a sabbatical in order to enable them to pursue academic interests that contribute to the educational goals of the College. The Faculty Sabbatical Policy outlines the process for requesting a sabbatical. Both the Faculty Promotion and Faculty Sabbatical Policies are published in the *Faculty Handbook*.

Faculty and staff receive health and life insurance and retirement benefits. As discussed, the OSFSFMC offers tuition reimbursement for faculty and staff for 18 credits annually for course work available through the Human Resource Department. Tuition waivers are available for employees to attend the College at no cost for tuition. After acceptance into a doctoral program, faculty receives \$5,000 each year for three years to provide support for doctoral studies. The professional benefits align with Categories One and Two by giving financial support for faculty and staff to learn more about enhancing student learning and how to implement strategies to support student learning.

#### **4P8 Determining and Selecting a Course of Action for Key Issues Relating to Motivation**

Although there is no institutional procedure for dealing with issues relating to motivation, the College Senate with its multiple standing and ad hoc committees provide collegial atmosphere for employees to participate in planning activities and to discuss issues of concern, including motivation. The Dean conducts an employee communication forum every other month. The Associate Deans meet with faculty teaching junior and senior courses and graduate courses two to three times each semester. A student support services group, which is a non College Senate group, meets regularly to determine key issues related to the implementation of support services policies or procedures. Strategic planning groups are working on processes relating to mentoring, diversity, research, and workload reduction for scholarly activities which were identified during the strategic planning process. These groups provide communication channels for employees to study issues, prepare processes, and propose courses of actions for resolution of issues. When concerns are discussed and formal actions are needed, the actions are carried forward through the shared governance structure (Category Five).

Supervisors are responsible for recognizing and handling motivational issues relating to job performance. Job coaching is the primary approach used, with the possibility for disciplinary action.

#### **4P9 Providing and Evaluating Employee Satisfaction, Health and Safety, and Well-Being**

Every two years all personnel participate as a department of OSFSFMC in an employee satisfaction survey. Employees rate, on a five-point scale with five being the highest, their perception of the performance of the College in the areas of organization, manager, and employee. They also rate the importance of each item. The Associate Dean of Institutional Research presents the survey results for discussion in a College Senate meeting. The group discusses the strengths and weaknesses from the survey results, identifies issues for improvement, and makes recommendations for consideration by administration.

The Organization domain of the Employee Satisfaction survey provides information on safety, health, and well being of employees. The College provides periodic ergonomic assessments to ensure safety and health of employees. As part of the Employee Rounding process, employees are asked if they have the needed tools for their job. As a component of health and safety, the College employs a Health Nurse whose duties and responsibilities include:

- Coordinating fire prevention through regular fire inspections, fire drills, evacuation coordination, and follow-through with resolution of any issue found.
- Providing information to ensure health and well being in the form of print materials and sponsored programs at the College which are open to employees and students.
- Coordinating with OSFSFMC TB immunization requirements and wellness screening events.

Other health and safety strategies provided by OSFSFMC to all employees:

- Comprehensive Medical and Dental plan available through OSF Health Plans. Rates are determined based on the enrolled plan and are paid through payroll deduction.
- Behavioral Health Advantages Employee Assistance Program, which provides consultation, individual, couple and family counseling.
- Weight reduction programs.
- Smoking cessation programs.
- Evaluation of office, classroom, and hallway lighting and office ergonomic issues .

The Dean works with a group responsible for various aspects of safety to provide a safe and healthy environment for students, employees, and visitors. The goal is to develop policies and procedures for campus alerts, dealing with campus emergencies, and building safety. Campus security is an issue for continued improvement. Any employee can report health and/or safety issues to any member of administration, in the communication forum, by letter, or through email.

Another process to provide for the safety and well-being of employees is through the process of employee completion of mandatory educational programs on specific topics. Annually employees are required to complete online educational programs related to fire safety, infection control, hazardous materials, and emergency management.

#### **4P10 Measuring Valuing People**

The College collects and analyzes data relating to valuing people from: (1) Employee Satisfaction Survey, which measures the College as a department of OSFSFMC in the following domains: commitment, and satisfaction with coworkers, manager, and organization; and (2) information on participation in training and development programs collected annually and reported in the *Annual Report*. The College needs an employee satisfaction survey that allows the College to compare itself with other colleges.

### **RESULTS**

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#### **4R1-4R2 Reporting Results in Valuing People**

Figure 4-2 shows the results of the commitment score and satisfaction with coworkers, manager, and the organization.

The 2007 Employee survey results identified the following strengths, which are defined as high performance and high importance:

- The facility is respected in the Community.
- Benefits compare favorably with other employers.
- Would like to remain at OSF for at least the next three years.
- My work conditions are safe.

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- Proud to tell people I work for this organization.
- I like the kind of work that I do.

Figure 4-2 College of Nursing Employee Commitment Indicator Compared to OSFSFMC

	2003		2005		2007	
	CON	OSF SFMC	CON	OSF SFMC	CON	OSF SFMC
<b>Total Commitment Score</b>	4.41	4.26	4.49	4.00	4.08	4.09
<b>Employee Satisfaction with coworkers</b>	4.11	3.81	4.25	3.83	3.94	3.92
<b>Employee Satisfaction with Manager</b>	3.90	3.82	4.17	3.74	3.85	3.84
<b>Employee Satisfaction with the Organization</b>	3.79	3.54	4.03	3.63	3.73	3.74

Ratings on a 1 to 5 scale with 5 being high

The 2007 Employee Satisfaction results revealed the following areas of concern, which are defined as low performance and high importance:

- I respect the abilities of the person to whom I report.
- The person I report to cares about my job satisfaction.
- Management is providing the leadership necessary for our facility’s continued success.
- The person I report to involves me in the decision that involves my work.
- There is open and honest communication.
- I am satisfied with the recognition I receive for doing a good job.
- There is effective communication within my work unit.

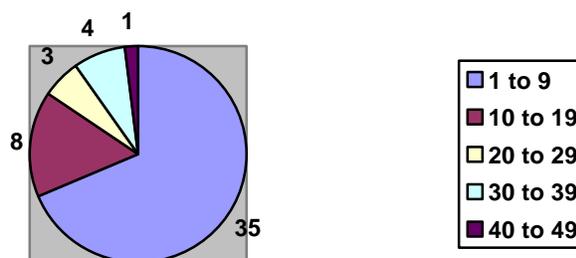
Annually, faculty and staff report on the workshops and conferences attended. Figure 4-3 shows employee participation in development programs. Beginning in 2006, dedicated funds were provided for professional development.

Figure 4-3 Professional Development and Advancement

	2002-2003	2003-2004	2004-2005	2005-2006	2006-2007
<b>Faculty Workshops Attended</b>	88	47	85	83	66
<b>Faculty Attended</b>	16	20	14	21	16
<b>Professional Staff Workshops</b>	6	0	5	4	7
<b>Professional Staff Attended</b>	3	0	3	5	1
<b>Faculty Promotion</b>	0	0	0	3	2

Another measure reflecting employee satisfaction is years of continuing service. The average length of employment for 32% of the employees is 23 years. Sixty-eight percent of the employees are new to the College over the past ten years in response to the increase in enrollment (Figure 4-4). Of the full-time employees who have worked at the College for one to nine years, 16 (46%) have been at the College for five or more years.

Figure 4-4 Number of Full-Time Employees' Years of Service



Another indicator of valuing people is the high retention rate of employees at the College (Figure 4-5). Over the last five years, six of the part-time faculty and two graduate assistants have transitioned into full-time faculty positions. The reasons for individuals leaving have been the unexpected deaths of both the Dean and the Director of Student Services in 2003-2004, reorganization of housing and building hours, change in job descriptions, acceptance of directorship at another institution, and retirement.

Figure 4-5 Retention Rates of College Employees

Year	Administrators	Full-time Faculty	Professional Staff & Staff
2003	100%	100%	100%
2004	80%*	100%	94%*
2005	100%	100%	100%
2006	100%	90%	85%
2007	80%	100%	90%

\*Unexpected death

#### 4R3 Evidence of Productivity and Effectiveness

A primary indicator of productivity and effectiveness is the overall growth of the College. Student enrollment in both programs has increased 73% in the past three years. In 2001, the College enrolled the first students in the new graduate program. Since that time, two additional graduate programs were added. Over the past five years, 433 BSN and 31 MSN students have graduated. At a time when there is a critical shortage of nurse faculty, the College attracted eight qualified full-time faculty and hired five additional staff members. Additionally, qualified part-time adjunct clinical faculty have increased to 14. Since 2002, faculty and staff turnover has been low. One full-time faculty member, one administrative staff, and three staff members have resigned from the College. Over 150 WOW awards were given and 30 appreciation letters were mailed to employees for outstanding service to the College. Another indicator of effectiveness is that since 2002, of the current 21 full-time faculty, 5 (24%) have completed an earned doctorate. Those faculty members have remained at the College contributing to its productivity and growth. An additional 5 (24%) faculty are currently enrolled in doctoral programs. Three of those are projected to graduate in 2008.

#### 4R4 Reporting Comparison Data

The College tracks faculty salaries to use as data for making competitive faculty salary proposals. Figure 4-6 shows average salary data by rank from 2007 IPEDS Feedback Report comparing the College to the selected comparison group. The data shows that by 2007 College of Nursing salaries exceeded those at same ranks in the IPEDS comparison group.

Figure 4-6 Faculty Salaries and Comparison Group

Fiscal Year	2005		2006		2007	
	College	IPEDS	College	IPEDS	College	IPEDS
<b>Professor</b>	*	59,602	*	54,705	62,716	42,956
<b>Associate Professor</b>	53,360	53,654	53,761	55,000	61,672	60,655
<b>Assistant Professor</b>	50,329	46,993	53,566	49,955	56,354	54,022
<b>Instructor</b>	40,677	41,315	48,343	42,180	50,912	42,872

\* No faculty at professor rank; Only three years of data are available.

The Employee Satisfaction Survey was compared with OSFSFMC. See Figure 4-3, which shows a close comparison between the College and the OSFSFMC on all measures. As stated in 4P10 the College needs a comparison survey to benchmark employee satisfaction against other Colleges.

Over the last four years that the Mission Integration program has been offered to employees, the participation rate for the College employees has been 96% or greater. For completion of the educational programs online related to health and safety issues, the programs were completed by 97% or greater of all employees.

## **IMPROVEMENTS**

### **4I1 Improvement of Current Processes**

The College improves processes by identifying the need for change through meetings, the communication forums, and feedback from students, faculty, staff, and surveys from graduates, alumni, and employers. The College also identifies a need for process changes during the strategic planning process. These changes become a part of the strategic plan. One AQIP Project is currently working on a mechanism for process change and for communication, implementation, and maintenance of changes. When issues are identified, the administrative staff delegates the issues to the appropriate group for research, benchmarking, and recommendations. Recommendations related to policies and procedures are sent to the College Senate for approval, then to the College Board.

### **4I2 Improvement Targets, Priorities, and Communication**

Each year, the College publishes the *Annual Report* as a means for dissemination of data. The *Annual Report* summarizes achievements of the faculty and staff in relation to scholarly activities and presentations to professional groups, participation in development programs, and service to the community. The *Annual Report* is distributed to all faculty members, staff, College Board members, and other stakeholders.

The College reviews results of measures of Valuing People annually. The College sets improvement targets and incorporates these into the strategic measures for the upcoming year. Priorities are set by the faculty and staff based on the Strategic Plan. These priorities are then assigned to the appropriate standing or ad hoc committee for action. The following are examples of priority improvement targets identified that are related to improving valuing people.

- While the College has informal activities in place for succession planning, no formalized succession plan exists. The College is targeting developing a formalized succession plan (Category Five).

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- The results from the 2007 Employee Satisfaction Survey showed that the employees rated “I am satisfied with the recognition I receive for doing a good job” as a low performance and high importance item. Based on analysis of the survey results, the College recognizes the need to expand the processes for recognizing employees for outstanding work.
- The results from the 2007 Employee Satisfaction Survey which showed that the employees rated “There is open and honest communication and there is effective communication within my work unit” as low performance and high importance items. Based on analysis of the survey results, the College recognizes the need to expand methods to ensure open and honest communication. The first step in this process was the initiation of the communication forums held by the Dean starting in 2007.
- Recognizing the need to provide development for new faculty, the College is developing a formal mentoring program. Components of the mentoring program include training and development programs for the mentors and new faculty. A Mentoring Handbook is also being developed. The program is targeted to begin for the 2008-2009 year.
- Currently the College does not have a formal process for dealing with key issues relating to motivation. Developing a formal plan for dealing with key issues relating to motivation will provide the College a mechanism to enhance employee performance.
- Expanding the campus security procedures, i.e. campus alert system, campus emergencies, and building safety
- At the present time, the Employee Satisfaction Survey which is used provides comparison data only for the College as a unit in comparison to OSFSFMC as a whole. The College recognizes the need to explore an employee satisfaction survey with the capability for comparison data to provide the College benchmarks of other institutions of higher education.
- The College recognizes the need for full and part-time faculty will fluctuate as enrollment numbers change. Therefore, there is a need to develop a policy to address reduction of faculty and staff based on possible future declines in enrollment.
- Currently the College has an informal process for identifying training and development needs of faculty and staff. Developing a formal process for determining training and development needs will better ensure that the needs of faculty and staff and that adequate funding is available.

## Category Five: Leading and Communicating

### **CONTEXT FOR ANALYSIS**

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#### **5C1 Leadership and Communication Systems**

Under the auspices of OSFSFMC, the College has rights to serve as the parent institution in the area of governance. The Board of Directors authorized the establishment of the College Board of the College of Nursing. According to the Bylaws, the College Board has as its primary concern the general well-being of the College and is responsible for policies necessary to accomplish the College's Mission and Goals. The College Board has the authority and responsibilities with respect to the day-to-day business and affairs of the College as set forth in the Bylaws. The College has the overall responsibility and authority for the nursing education unit.

The College Board is composed of 15 members who represent the community at large, OSF Healthcare System, and OSFSFMC. Community members have expertise in business, finance, higher education, and nursing. One member is an alumnus of the College. The Dean, Associate Deans, and Assistant Dean are ex-officio members of the College Board. The Bylaws for the College Board delineate its specific functions and responsibilities. There is a standing committee structured outlined with the Bylaws. The Standing Committees are: Finance, Educational Affairs, Long-Range Planning, Marketing and Development, and Nominating. The College Board meets five times per year.

The College has five full-time administrators, the Dean, Associate Dean Graduate Program, Associate Dean Undergraduate Program, Associate Dean Institutional Research, and Assistant Dean of Student Services. The College functions organizationally under the direction of the Dean, who is both the Chief Executive Officer and the Chairperson of the College Senate. The Associate Deans of the Graduate and Undergraduate Programs function as the Chief Academic Officers. All faculty and staff report to the Dean through the respective Associate Dean (Organizational Chart in Overview O1).

The current administrative structure was put in place in 2004-2005. The need for an expanded administrative and leadership structure was recognized as the student enrollment increased and demands on and responsibilities of the College's two administrators also increased. Under the leadership of the previous Dean, the investigative process began to explore and develop a change in the organizational structure to the current administrative structure. After the unexpected death of the Dean in 2004, the College Board approved the newly created administrative structure. The structure was put in place to enable the College to continue operations and growth. During 2004-2005, additional changes took place with the formation of the Leadership Team (see below).

The administrators, faculty, professional staff, and students participate in the governance of the College. The governance structure is through the College Senate which meets two times per semester. The College Senate operates under a set of Bylaws that are published on the shared drive and in the Faculty Handbook print and online version at [www.sfmcccon.edu/faculty/staff/FacultyHandbook](http://www.sfmcccon.edu/faculty/staff/FacultyHandbook). The College Senate provides the structure that allows faculty, staff, and students to participate in a shared governance environment. The purposes of the College Senate are: to provide a framework to achieve the objectives of the College through the efforts of all faculty and professional staff members; promote professional growth of its members; and promote participation in the development of the policies and programs of the College and in fulfilling the Mission of the College. The Standing Committees are the principal mechanism for conducting the work of the College Senate. The College Senate Standing Committees are shown in Figure 5-1.

In 2004-2005, the organizational structure of the College was reviewed and restructured. A Leadership Team consisting of administrators and key professional staff leaders was developed. The purpose of the Leadership Team is to contribute to the tradition of excellence in nursing education at the College by

supporting the operation of the College processes and programs and providing direction and feedback to College Senate and standing committees, and staff relating to the processes for the implementation, accountability and communication of policy changes, program options, and strategic directions. The team meets monthly. The roles and responsibilities of the team include: coordinating efforts to integrate students support and academic services from inquiry through alumni; exploring trends in health care, nursing, and education, to monitor whether the College is current and make recommendations for change to College Senate; reviewing the success of the Strategic Plan and SPEAOP and making recommendations to the College Senate as needed to effectively deal with areas in need of improvement; and assisting the Dean in defining administrative and strategic direction for the College, faculty, and staff.

Figure 5-1 College Senate Standing Committees

<b>Standing Committees</b>	<b>Summary of Committee Functions</b>
Admission and Progression	Evaluates, implements, and recommends policies for admission, progression, and graduation for the BSN program.
Curriculum	Uses evaluation and assessment data to develop, maintain, and revise BSN curriculum. Review BSN curriculum and courses. Facilitates the implementation of the BSN curriculum.
College Research	Reviews studies developed by College students or that request use of College data.
Educational Resources	Assesses and evaluates the educational resources and makes recommendations for additions and deletions. Formulates policies related to educational resources.
Evaluation	Coordinates the activities for program evaluation. Reviews and makes recommendations for Systematic Evaluation Plan.
Faculty Affairs	Recommends faculty policies and procedures. Plans and provides education programs for faculty.
Faculty Appeal	Hears and acts on complaints in accord with the “Fair Treatment and Appeal Procedure” policy.
Faculty Promotion	Reviews faculty promotion requests and makes recommendations to the Dean.
Faculty Selection	Reviews job applications for faculty positions, interviews, and makes recommendations to the Dean.
Graduate	Evaluates, implements, and recommends policies for curriculum, admission, progression, graduation, and evaluation for the graduate program.

The Core Values statement on the value of Caring states, “The College values open and honest communication, which fosters trusting relationships among ourselves and those we serve.” The College uses a variety of formal and informal communication mechanisms. New ideas, strategies, and concerns are communicated to the College Board through the leadership structure. If a major change is being proposed, the change is presented to the appropriate College Board committee. The final step is the Board as a whole reviews the proposed change and votes as a whole. The method, frequency, purpose and intended audience for formal and informal communication mechanisms are identified in Figure 5-2.

Figure 5-2 Communication Mechanisms

<b>Formal Verbal Communication Systems</b>			
<b>Method</b>	<b>Frequency</b>	<b>Purpose</b>	<b>Audience</b>
Communication Forums	Monthly	Communication information; brainstorming and exchange of ideas concerning College issues and concerns	Faculty and staff
Leadership Team meetings	Monthly	Communication information; brainstorming and exchange of ideas concerning College issues and concerns, strategic planning	Leadership Team
Student Services Support Group	Every other month	Communication information; brainstorming and exchange of ideas concerning issues and concerns related to students	Professional staff and key staff working in Student Services areas
College Senate	Twice per semester	Conduct formal business of College; communication information on mission, values, expectations; brainstorming and exchange of ideas related to College issues, concerns, and operation; act on recommendations from standing committees	All full- and part-time faculty and staff members as identified in Bylaws
Junior/Senior Meetings	2-3 meetings per semester	Discuss issues related to courses within level; communication information; brainstorming and exchange of ideas related to teaching	Junior or senior course members led by Associate Dean Undergraduate Program
Student Communication Forums	Twice each semester	Communication information; brainstorming and exchange of ideas related to student issues	All students
One-on-one interviews	Annual Performance Appraisals	Structured input related to past performance, performance expectations and goal setting	All employees
Committee meetings	As needed	Formed in a variety of ways for the accomplishment of specific tasks related to College business	All employees
Strategic Planning Group meetings	As needed	Analyze trends and data to set the strategic direction for the College	All employees, College Board members, key stakeholders
<b>Formal Written Communication Systems</b>			
<b>Method</b>	<b>Frequency</b>	<b>Purpose</b>	<b>Audience</b>
College Catalogs	Revised bi-annually	Communicate academic information	Current and prospective students
Handbooks	Revised bi-annually	Communicates policies and information	Students, employees
Committee Minutes	As needed	Communicates and summarizes committee business	Faculty and staff as appropriate

Notes from Greenleaf	Three times per year	Communicate information on College; highlight accomplishments and recent events; employee and alumni recognition	Employees, alumni, external stakeholders
Student Connection	Two times per year	Communicate information from student service areas; information on new policies	Students, employees
Email, OSF Community through eCollege, and written communication to all employees	As needed	Communicate matters affecting the College	All employees and students
<b>Information Communication System</b>			
<b>Method</b>	<b>Frequency</b>	<b>Purpose</b>	<b>Audience</b>
Voice Mail, Ad Hoc Meetings, Bulletin Boards, Conversations/ Casual Setting	As needed	Varied	Varied based on message purpose

**5C2 Alignment of Leadership System with Practices and Views of the Board**

The Dean has the responsibility to ensure that the Strategic Plan is the mechanism that aligns practices with the institutional Mission, Vision, and direction and that the Plan is implemented. The Strategic Plan was developed by members of the College Board, administration, faculty, staff, and other stakeholders. The College Board Long-Range Planning Committee aligns the future direction of the College with the Strategic Plan. The Dean and Associate Deans serving as ex-officio members of the College Board provide another mechanism to ensure that leadership is in alignment with the views of the Board. This also promotes communication between the College Board and the faculty, staff, and students.

The Performance Appraisal system for faculty and staff promotes this alignment by requiring individuals to set personal goals and objectives that are congruent with the College goals. Annually, the individual meets with their supervisor to discuss achievement of personal as well as College goals.

**5C3 Institutional Values and Expectations Regarding Ethics and Equity, Social Responsibilities, Community Service and Involvement**

The institutional values and expectations of the College regarding ethics and equity, social responsibilities, and community service and involvement are found in the College’s Mission, Philosophy, and Core Values. The Mission, Philosophy, and Core Values of the College are congruent with the Corporate Philosophy and Corporate Mission of The Sisters of the Third Order of St. Francis and are in accord with Catholic philosophy. The Mission states, “The College will also serve the community by providing qualified practitioners, and participating in health-related activities and organizations.” The Philosophy which flows from the Mission, speaks to caring and ethics. The College believes that “caring permeates all areas of nursing practice and facilitates the achievement of nursing goals. Caring is a helping relationship which is influenced by cultural, spiritual values and which promotes growth and self-actualization of the client and nurse.” The Philosophy further states that “Judeo-Christian tenets underlying the nursing educations promote values essential for the development of a personal and professional philosophy of God and humankind. These values, inculcated throughout the curriculum, guide the learner to evolve into an ethical and accountable professional nurse.” The Core Values flow

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from the Mission and Philosophy. The Core Values are: Personal & Professional Development (which includes Learning, Caring, Leadership, Personal Worth & Dignity), Service (which includes Integrity, Responsibility, Accountability), Quality (which includes Excellence), and Agility. The College has a nondiscriminatory policy that is published in catalogs, handbooks, and on the website.

The College promotes ethical and professional behavior. The Student Handbooks contain a Professional Code of Conduct and Academic Honesty policies which all student are expected to follow. Disciplinary action is taken as warranted when a violation occurs. The College has a Judicial Board made up of faculty and students who hears violations of the Code of Conduct. The College follows the American Nurses' Association *Code of Ethics* and the *Ethical and Religious Directives* published by the Catholic Church in its practices and teaching of content. The *Faculty Handbook* and employee handbook contain policies on ethical behavior standards and other guidelines for professional conduct. Annual programs on Mission Integration and ethics are held to keep employees aware of ethical behaviors.

Service to the College and service to the profession and community are expectations of faculty. Statements related to service to the College, assumption of leadership positions on committees, service to student organizations, and participation in professional and community organizations are found on faculty and staff job descriptions. This service component is a part of the faculty annual appraisal. Service of faculty is also evaluated during the faculty promotion process. Educational programs of the College connect the students to the communities through clinical and practicum experiences and development and implementation of service learning projects. Students are also encouraged to participate in professional and community service through Student Senate and other student organizations. The College's belief in the importance of service is evidenced by the reporting of faculty, staff, and student service annually in the *Annual Report*.

All students are provided an annual notice of their data privacy rights under FERPA. This is published in the *Student Handbooks*. Students and faculty are provided education regarding the confidentiality of protected healthcare information and the Health and Information Portability and Accountability Act (HIPAA). All BSN students sign a HIPAA and OSF HealthCare Confidentiality Agreement annually. The signed agreements are kept on file in the office of the Associate Dean Undergraduate Program. Employees also sign a Confidentiality Agreement at the time of employment.

### **PROCESSES**

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#### **5P1 Setting Directions that Align with Mission, Vision, and Values**

The Mission, Vision, Core Values of the College, and internal and external environmental factors are the driving forces that leadership uses to set direction for the College. These are continually considered during strategic planning sessions as guides for the development of objectives and goals for the College. The College has identified "A continuing tradition of excellence in nursing education" as its brand and keeps it in the forefront when setting direction and making decisions. Improvement plans are generated by tactic groups through the strategic planning process. Once improvement plans are identified, resources are allocated through the budgeting process. The Dean has the responsibility for the day-to-day operation of the College and is the leader for the future direction of the College. The Dean works with the College Board, other administrators, faculty, and staff to ensure that the College provides "a continuing tradition of excellence in nursing education." Faculty, staff, and student participation in the governance structure at the College ensure that the needs and expectations of these stakeholders are included in the decision making and direction of the College.

Leadership also considers the needs and expectations of students and key stakeholders when setting directions. Feedback from these groups is gathered through regular surveys with the groups. BSN students complete the CSEQ and College Services Survey annually. MSN students complete the graduate survey at the end of the program of study. Data is analyzed to determine gaps and levels of achievement

that are below the College's established levels of achievement. Results from the surveys are shared with the appropriate personnel and used to identify goals and areas for improvement. For example, the College Services Survey consistently showed that students were unsatisfied with the registration process. The College has made this a priority by investigating ways to use SONISWEB (See Category Six and Seven) to enable students to register online.

Leadership has also used the College's involvement in AQIP as a mechanism to set direction. Through the all College meetings held to make the decision to become an AQIP institution and the subsequent all College meetings to sustain the process, all employees have been involved in discussion and decision making related to the College and the strategic direction it should take. The AQIP projects are in alignment with the Mission and Core Values in that the projects focus on improving service to the students, helping students learn, increasing funding to provide additional opportunities for education, such as scholarships, and improvements for students such as facility renovation. One example is the AQIP Action Project that focused on improving student learning. This action project is in alignment with the Strategic Plan Pillar Four. The Action Project resulted in the development of the \$1 million dollar state-of-the-art Nursing Resource Center (LRC). The LRC contains four laboratories for student learning with state-of-the-art equipment for simulation learning activities. The funding for the development of the Nursing Resource Center was obtained through capital budget funds and donations from the first College Phon-A-Thon. The Action Project also resulted in a "Simulation Across the Curricula" program which has developed and implemented simulation learning experiences across both the BSN and MSN programs. The simulation program was approved by the Curriculum and Graduate Committees with final approval coming through College Senate. As a component of the program, workshops on use of simulation in nursing and product demonstrations were provided for faculty. Six faculty traveled to a regional program on simulation development and usage.

The decision to improve student learning by the development of courses within existing programs or the revision of current programs or courses is made based on data gathered from studying trends and the literature in nursing, higher education, and the healthcare industry. A needs assessment is conducted by surveying current students, alumni, potential employers, and prospective students, to gather data to determine the interest and need for a new program such as in determining the need for the Doctor of Nursing Practice. The faculty use the Course Proposal Guidelines policy to develop new courses for an existing program. Course objectives need to be in alignment with the program objectives. The proposal is taken to the Curriculum Committee if the new course is for the BSN program and to the Graduate Committee for a course for the graduate program. Revisions in course content are submitted to the Curriculum or Graduate committee for initial action. The committee recommendations are taken to the College Senate for final approval. Decisions related to revision of content or addition of a course are made considering the impact that these changes will have on other courses and a rationale for how the change will improve student learning.

### **5P2 Seeking Future Opportunities and Building and Sustaining a Learning Environment**

Building and sustaining a learning environment for students are evident in the College Mission, Vision, Philosophy, and Core Values. Leadership, faculty, and staff are committed to student learning which is evident in Pillar Four of the Strategic Plan 2005-2010 which is focused on Service Line Development: Educational Programs (Category Eight). AQIP action projects are another mechanism for building and sustaining a learning environment. One project focused on the improving academic advisement and resulted in the development of the *Academic Advisement Handbook*. Another AQIP project focused on developing a state-of-the-art Nursing Resource Center and developing and implementing a plan to incorporate simulation learning activities across the curricula of both programs. The third AQIP project focuses on increasing non-tuition revenue for the purpose of sustaining and improving the learning environment at the College. Minutes from the AQIP action project group meetings are posted on the intranet for access for all College personnel.

The College Board through the recommendations of the Long-Range Planning Committee provides leadership for future opportunities for the College by helping to set the strategic direction of the College. The College Board, whose members are leaders in nursing, education, healthcare, and finance, are active in advising and directing the College. The College Board also participates in the formal strategic planning process that occurs every other year.

### **5P3, 5P4 Decision-Making Processes and Using Information and Results in Decision-Making Processes**

The College is committed to making data driven decisions. During the strategic planning process, data from student surveys, SPEAOP measures, environmental scans and SWOT analysis are analyzed. The analysis results are used to make decisions for the strategic direction of the College and to identify specific objectives, tactics, and measures for the Strategic Plan. Through the strategic planning process, the College sets annual goals and expectations. These goals and expectations are implemented by faculty and staff. Faculty and staff volunteer to work as a member of a group to implement the strategies and tactics of the Strategic Plan. The groups report their findings and recommendations each semester. Using the group reports, the Dean prepares an annual evaluation of the Strategic Plan and presents recommendations for change to the College Senate. They are also posted in the Strategic Plan on the intranet to provide access to all employees. Key leaders at the College complete 90-Day Action Plans that are submitted to the Dean. The 90-Day Action Plans are based on the goals that the leader is responsible for from the Strategic Plan.

The College has become more involved in using the Six Sigma process for decision making related to select projects. The College used the Define Measure Analyze Implement Control (DMAIC) methodology in decision making related to implementation of the HESI standardized examinations to help improve student learning. Through the Six Sigma process, the team gathered data on several standardized nursing examinations, analyzed the data, and then recommended the HESI exams to College Senate for approval. The College is also involved in a Six Sigma DMAIC project to study a possible merger of the College of Nursing Library with the OSF Medical Library. The College is currently involved in a Six Sigma project that is studying the loss of potential undergraduate students from acceptance to presence in class when the school year begins.

The College uses a variety of other mechanisms to collect data for decision making. The type of data gathered and data gathering process are dependent on the decision to be made. The SPEAOP identifies sources of data gathered to measure accomplishment of program goals and objectives and accreditation standards. Other data used to make decisions is gathered through employee surveys, student satisfaction surveys, end of program surveys, and financial stability. The data is analyzed and compared to established levels of achievement. Data on many institutional measures is reported and shared with stakeholders in the College's *Annual Report*.

The formal decision making structures are the College Board and the College Senate. The decision making process often starts with the standing committees who develop recommendations based on suggested changes or in areas identified by functions in the Bylaws. The standing committees use data collected from measures identified in the SPEAOP. The data is analyzed and compared to the established level of achievement. When data show that the College is below the level of achievement, recommendations for new processes or policies may be developed. The recommendations from the standing committees are then taken to the College Senate. The recommendation is acted on by the voting members of the College Senate. Decisions from the College Senate are then taken to the College Board for final action and approval as identified in the College Board Bylaws. Examples of decisions made with the formal decision making process include curriculum development and approval, student policies, admission standards, and personnel policies.

Informal decision making processes exist within the College. Informal decisions are made by groups that are formed under the direction of the Dean or through a standing committee for a specific intent or are dedicated to a specific task within established College policies. Membership of the groups consists of faculty, staff, and students with expertise or interest in the focus of the group. Informal decisions made by groups that are formed are taken back to the appropriate standing committee or Dean for approval. Examples of informal decision making processes include event planning such as graduation or alumni weekend, recruitment strategies, identification of target dates for student services activities, and hours of operation of the College offices and buildings.

#### **5P5 Communication Between and Among Institutional Levels**

As stated in 5C1, the College values open and honest communication. The lines of communication on the Organizational Chart (Overview O1) show how communication occurs at the College. The College Senate is integral to downward, upward, and two-way communication. Information conveyed during the College Senate meeting is taken back to departments and shared with members who do not attend the Senate Meetings. Minutes from the College Senate and all standing committees are kept and posted on the shared drive where they are accessible to all faculty and staff. The regularly scheduled Communication Forums led by the Dean provide a mechanism for communication for all employees. Figure 5-2 shows the formal and informal communication mechanisms at the College.

In 2007, the College began studying the use of the SBAR as a formal communication mechanism. SBAR stands for Situation, Background, Assessment, and Recommendation. Any committee or individual recommending a change, new policy, etc. completes an SBAR to communicate the data and information in a formalized, standardized process. As part of the AQIP Action Project related to student processes and communication, the use of SBAR is being formalized and taken to College Senate for approval.

#### **5P6 Communicating Mission, Vision, Values and High Performance Expectations**

Communicating a shared Mission, Vision, Core Values, and performance expectations are part of developing and implementing the Strategic Plan (Category Eight). All faculty, staff, Board members, and select students were part of the all College strategic planning process last held in 2006. Leaders also communicate this information through formal communications, electronic communications, campus-wide meetings such as the all employee strategic planning and AQIP Update meetings, and through meetings of the standing committees and College Senate (See Figure 5-2). The College posts its Mission, Cores Values and Strategic Direction and Goals as a framed document throughout the College facilities as a mechanism to communicate these and keep them in the forefront of students, employees, stakeholders, and visitors minds. They are found in all College catalogs and handbooks and on the website. Another mechanism for communicating values to employees and students in the College is through the practice of beginning all meetings and classes with a reflection or prayer.

#### **5P7 Encouragement, Development, and Strengthening of Leadership Abilities**

Leadership abilities are encouraged, developed, and strengthened among employees in a variety of ways. Faculty and staff participation in committees and projects provides a mechanism for development of leadership abilities. In 2007, the College Senate approved the development of a co-chairman position for the major standing committees. This provides an opportunity to informally mentor the co-chair to improve their ability to accept chairmanship of the committee for the following term. When the College was developing its AQIP Steering Group and putting together a team to attend the Strategy Forum, it sought individuals from administration, faculty, and staff to become involved and develop as leaders of the quality improvement movement at the College. One of the AQIP projects focusing on student service processes is co-chaired by two of the professional staff members.

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The members of the Leadership Team attend quarterly sessions on development of leadership abilities through OSFSFMC. These programs focus on developing skills, leadership potential and talents of employees; having difficult conversations with employees; positive discipline and coaching; employee reward and recognition; and improving retention of employees. Assignments are given and behaviors learned are incorporated into daily activities. For example, quarterly rounding on employees was implemented at the College after the Leadership Development program. Rounding provides the leader/manager with the opportunity to meet with individuals to find out what is working well and what processes need improvement. At this time, employees are able to identify other employees who should be recognized for outstanding work.

The Learning Academy of OSFSFMC provides programs for development of leadership skills to all employees. Programs are offered throughout the year on a variety of topics such as: conflict management; development of operational and capital budgets; communication skills; Six Sigma process; and recognition, reward, mentoring, hiring and retention of employees.

Faculty and staff are encouraged to attend national conferences and workshops and participate in professional organizations to keep current with changes in their field and in higher education. Through attendance and networking, faculty and staff bring back ideas to improve processes at the College. These ideas are shared with faculty and staff at committee meetings and College Senate. The individual employee often assumes leadership of the movement to change or improve policies and processes. This process is supported financially by the College as evidenced by the line item on the budget for attendance at national conference, education and training. Through this mechanism, the College is able to change and adapt to changes in healthcare and higher education.

The annual appraisal process is also used to develop leadership skills. During this process, the individual establishes career and personal goals. At this time, individuals discuss career goals for developing leadership and management skills. Resources to assist the individual are provided as possible such as funding for certification examinations.

### **5P8 Ensuring that Mission, Vision, and Values are Passed On**

There is currently no formal leadership succession plan for the College. However, the College recognizes the need for a formal plan and discussion related to a plan has begun. Attempts are made to provide opportunity for the new leader to spend time with the outgoing leaders to ease the transition into the new role. Also, new leaders are provided the opportunity to work with other leaders at the College to transition the new leader into their position as well as the history, Mission and Vision of the institution, its practices and procedures. New hires for leadership positions participate in pre-hiring interviews with administration, faculty, and staff to ensure institutional fit.

Administration and leaders of the College participate in the Ministry Development program of OSFSFMC. This program ensures that the Mission of The Sisters of Third Order of St. Francis, owners of the College, is shared with leaders so that the Mission will be carried on throughout the Corporation. The program consists of an initial three day session that focuses on Mission, values, and leadership. Each year, participants return for a 1 ½ day program that develops leadership abilities within the Mission. The focus of this year's program is on "A Culture of Respect for Others." Leaders return to their work units using what is learned at Ministry Development.

For selection of College Board members, the College Board identifies those members whose terms are complete and other vacancies on the Board that may have occurred. The composition of the Board is considered as the College Board makes recommendations regarding member selection and succession. As a component of developing College Board members, new Board members are invited to a College Board Orientation. In 2006-2007, the College Board developed an emeritus board position to invite past Board

members to remain involved with the Board once their term of membership has been reached. This provides continued input from strong community leaders. A College Board Manual has also been developed.

**5P9 Measures of Leading and Communicating**

Administrators are evaluated through a formal 360° evaluation every other year. This survey includes questions about the individual’s relationship to leadership and professional improvement. It also provides an opportunity for invited evaluators to identify areas needing improvement. Faculty evaluated the Associate Deans annually. The Employee Satisfaction Survey is administered every two years and asks questions related to management. Broad measures of leading and communicating are the College’s success in carrying out its Mission, Vision, Core Values, and Goals and the satisfaction and retention rates of employees.

**RESULTS**

**5R1 Results for Leading and Communicating Processes and Systems**

Results related to employee retention and satisfaction are found in 4R1-4R2. The Employee Satisfaction Results for satisfaction with their manager and satisfaction with the organization are found in 4R1-4R2. Additional results for items related to leadership and managers are found in figure 5-3 which shows the College scores in comparison to the OSFSFMC scores. Scores are based on a 1 (strongly disagree) to 5 (strongly agree) scale. The 2007 survey shows that none of the items listed below were identified as a concern for the College. Concerns are identified as items that have a low performance score and a higher percentage of unfavorable responses in relation to the comparison group. The only item in this category that was identified as an area of concern was “I am satisfied with the recognition I receive for doing a good job.”

Figure 5-3 Results of Employee Satisfaction Survey Related to Manager

	2003		2005		2007	
	CON*	OSF SFMC	CON	OSF SFMC	CON	OSF SFMC
<b>The person I report to encourages teamwork.</b>	4.25	---	4.25	3.89	4.21	4.01
<b>The person I report to treats me with respect.</b>	4.33	---	4.33	3.98	4.23	4.09
<b>The person I report to involves me in making decisions.</b>	3.80	---	3.80	3.45	4.04	3.56
<b>I am satisfied with the recognition I receive for doing a good job.</b>	3.83	---	3.83	3.36	3.49	3.45
<b>The person I report to communicates important information in a timely manner.</b>	4.08	---	4.08	3.61	4.00	3.70
<b>The person I report to cares about my job satisfaction.</b>	4.34	---	4.34	3.61	3.96	3.74
<b>I am satisfied with my involvement in decisions that affect my work.</b>	3.83	---	3.83	3.42	3.85	3.52
<b>The person I report to emphasizes the importance of providing great service to those we serve.</b>	4.40	---	4.40	4.11	4.30	4.24
<b>I respect the abilities of the person to whom I report.</b>	4.58	---	4.58	3.91	4.13	3.99

\*No comparison data available for 2003

Years of service and retention rates of employees are presented in 4R2. Results related to the College achievement of its Mission and Goals are found in the students' achievement and satisfaction results in 1R1, 1R2, 1R3, and 2R1.

The results from the 360° evaluation process are used by the individual administrator to prepare their annual appraisal and identify areas for improvement. The faculty and staff ensure that their personal goals on their Annual Appraisal are in alignment with the College goals and expectations.

### **5R2 Comparison of Results with Other Institutions of Higher Education**

Comparison data for student achievement and satisfaction, where available, are found in 1R1 through 1R4 and in 2R1 and 2R2. As mentioned in Category Three, the College is investigating use of standardized student satisfaction surveys to provide comparison data to the College in these key student support areas. The College continues to seek additional sources of comparative data within higher education and nursing education.

Comparison data is available for employee satisfaction with leadership and managers through the Employee Survey. The College is compared to other units within the OSFSFMC organization. In all areas in 2005 and 2007, the College had higher satisfaction scores than OSFSFMC.

## **IMPROVEMENTS**

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### **5I1 Improving Current Processes and Systems**

The College's movement into AQIP and a focus on quality improvement contributed to the College's review of processes for improvement. AQIP Action projects were formed based on processes identified that needed improving. This focus on quality improvement is carried through in the strategic planning process. The College Senate and standing committees work together to establish goals that are in alignment with the strategic goals. The leadership at the College is committed to "the continuing tradition of excellence in nursing education" that was started over 100 years ago. A major component of improving processes in leading and communicating was the revision of the organizational structure of the College and the formation of the Leadership Team (5C1).

### **5I2 Improvement Targets, Priorities, and Communication**

Improvement targets and priorities are established through the strategic planning process as a collaborative effort of the College Board, administration, faculty and staff. Recommendations from AQIP Action project teams and standing committees as well as analysis of assessment data and feedback from students are used by the College Senate to establish improvement targets as priorities. The targets and priorities are in alignment with the College Mission and Core Values.

Communication of priorities and improvements is done through verbal and written reports to the College Board, faculty and staff. The Dean shares information with employees during the Communication Forums and College Senate meetings. Communication with students is done through Student Communication Forums and through Student Senate. Updates are also communicated to students and alumni in the *Student Connection* which is published twice a year and in *Notes from Greenleaf*, the alumni newsletter that is published four times per year. Publication of achievement of annual goals and established goals for the upcoming year is published in the College's *Annual Report*. Changes and updates are also communicated to undergraduate and graduate students through eCollege.

The following are examples of improvements that have been made and priorities that have been set based on decisions made after analysis of target performance measures. The improvements and priorities were developed to improve leading and communicating processes that support the Mission and Vision of the College.

## Saint Francis Medical Center College of Nursing

- Analysis of the Employee Satisfaction Survey indicated that communication was identified by employees as an issue. As a result, the Dean initiated the communication forums for faculty, staff and students.
- The College recognizes the need to develop a formalized succession plan to ensure continued strong leadership at the College to further grow and advance the College.
- The College recognizes the need to develop faculty and staff. Funding for development and attendance at national workshops and conferences will be increased in the next budget year to promote development of employees.
- Recognizing the need for additional comparative data, the College will continue to investigate sources of comparative data in this category.
- The College is planning a formalized review and update of the strategic plan. SWOT analysis and data from an environmental scan will be utilized to review the current plan, revise the plan as needed, and set new strategic goals for the College.

**Category 6: Supporting Institutional Operations**

**CONTEXT FOR ANALYSIS**

**6C1 Key Student and Administrative Support Service Processes**

Figure 6-1 list key administrative and student support service processes. Support processes sustain institutional operations from the standpoint of academic, non-academic and administrative departments and offices with a focus of ensuring that the services extend to the students enrolled in online courses.

**Figure 6-1 Key Student and Administrative Support Services and Processes**

<b>Key Process Area</b>	<b>Support Services</b>
Learning Support	Computer labs, academic advising, simulation labs. technology, Meds publishing, HESI testing, Institutional research, online learning, at risk student assistance/Peer Teaching; test anxiety help, study skill tutorial; NCLEX-RN Review course
Admissions/Registrar	Registration, transcript; deferment forms; inquiry; application processing; grades and grade report distribution; Dean’s list; graduation application/process; maintenance of academic files & student record; SONISWEB
Student Finance Office	Financial aid (Pell, MAP, Loans) processing/awarding; institutional and private scholarship; Veteran’s Affairs; billing; tuition waiver processing; Satisfactory Academic Progress; maintenance of student records; SONISWEB; business and cashiering servicing
Student Life (Housing, Counseling, Student Health, Security)	Provision of housing; support with dorm life; individual counseling; Students Offering Support (SOS); voter registration information; substance abuse prevention; referral services; undergraduate orientation; Resident Assistant program; access to health information and health services; consistent, fair enforcement of policies in Residence hall; programs on wellness, safety, and security; publication of campus crime statistics
Library	Call Number Responsibility Report – results in suggestion to develop library collection; Information Literacy Tutorials emphasizing the Cumulative Index to Nursing & Allied health (CINAHL); Online searching for research; APA writing style workshops; I-Share online public access catalog; distribution of textbook lists and ensuring availability of textbooks at external bookstores
Recruitment/Outreach	Open House; Website; recruiting; individual/group tours; Professional Staff (recruit RN’s) Counselors Luncheon (high schools and colleges); Hospital Fairs/Outreach; SONISWEB; Preceptor Appreciation Day
Administrative Support	Facilities; new clinical labs, renovation of classrooms; living areas; maintenance; housekeeping; new/universal signage; student information management system
Student Leadership	Student Senate, Minority Student Organization, Resident Assistant, College of Nursing Lab Assistant, Student Nurse Association; membership on College standing committees; Graduate Assistant positions

**6C2 Key Student and Administrative Support Services Reinforcing Processes and Systems**

The student support services provide support to students as they are learning by using student survey data to improve services. These services also facilitate the College’s achievement of one of its other distinctive objectives which focuses on development of student relationships through exchange of ideas and issues in

the Student Services Support Group (Category Two). Within the last four years, the Admissions offices and offices for Student Finance have been relocated and all are within close proximity of each other to improve communication and provision of service to the students. One of the goals in the Strategic Plan for the College is improving internal processes. This tactic became the goal of one of the AQIP Action projects in 2005. Flowcharts for admissions, student finance, library, housing, student health records, counseling, and student safety were prepared, analyzed, and used. Based on the results of these flowcharts, recommendations for changes in the process flow were made and processes were streamlined. In March 2007, the AQIP Project team retired the process improvement flowcharts and gave ownership back to the appropriate student service area to keep their flowcharts accurate and updated.

With administrative support, the College has established processes which lead to student learning and achievement of College goals and program objectives. The construction of the Nursing Resource Center (LRC) which consists of four state-of-the-art laboratories was one of the College’s AQIP Action projects. The facility was developed to improve student learning in decision making, critical thinking, clinical reasoning, and priority setting. The simulation labs provide learning experiences for students in a non – threatening environment. All of College classrooms and small conference rooms have been renovated to be “Smart” rooms to provide additional learning strategies that can be used during class time. The College building and facilities are being remodeled to be modernized and handicap accessible.

**PROCESSES**

**6P1 Identifying Support Service Needs of Students**

Data from a variety of informal and formal sources (Figure 6-2) is collected and analyzed in order to identify the student service needs of the students. The results of the surveys are compiled and recommendations are discussed by each student service group, the Leadership Team, or the appropriate standing committees to improve performance, streamline processes, and reevaluate current processes. Faculty and staff attendance at national workshops, meetings, and conferences and review of higher education and college services literature provide other sources for identification of student needs. Recommendations for policy revisions or new processes are developed by a student service group or standing committees. The recommendations for revisions or new policies are presented to College Senate for discussion, approval, and oversight for implementation and evaluation.

Figure 6-2 Sources of Data to Identify Student Service Needs

Source of Data	Frequency	Responsibility
College Services Satisfaction Survey	Annually	Evaluation Committee, Graduate Committee
Student Senate Meetings	Monthly	Administration, Faculty
Student Membership on standing college committees	Annually	Administration
Student Communication Forums	Every Semester	Dean, Associate Deans
CSEQ/Curriculum Satisfaction Survey	Every semester at end of student program	Curriculum Committee, Graduate Committee
Alumni Survey	1,5,10 years	Evaluation Committee
Mid-Curricular Satisfaction Survey	Every semester	Evaluation Committee
Formal Student Complaints	As needed	Appropriate committee
Strategic Planning Process	Annual	Administration
College Senate	4 meetings/year	Faculty, Administration, Staff
AQIP Action Project Teams	Annually	College Senate
Student Services Support Group	Bi-monthly	Administration, student service directors/coordinators

**6P2 Identifying Administrative Support Service Needs**

Data from a variety of sources is collected and analyzed (Figure 6-3) in order to identify the administrative support service needs of faculty, staff, and administrators. Administrators at the College conduct employee rounding quarterly. One of the questions asked during the rounding process is if you have the tools you need to do your job. This process provides employees the opportunity to identify support services that are needed. The analysis of current trends in nursing and healthcare, literature review, and benchmark data from other peer nursing education colleges is routinely performed in order to offer our students the best administrative support services.

Figure 6-3 Sources of Data to Identify Administrative Support Service Needs

Source of Data	Frequency	Responsibility
College Senate	4 meetings/year	Faculty, Administration, Staff
College Board	5 meetings/year	Stakeholders
Student Communication Forums	Every semester	Dean, Associate Deans
Employee Communication Forums	Monthly	Dean
Standing Committees	4 meetings/year	Faculty, staff, students
Morehead Employee Satisfaction Survey	Every other year	OSF Healthcare, OSF Saint Francis Medical Center
Professional Conferences	As needed	College personnel
Strategic Planning Process	Annual	College personnel, OSF Saint Francis Medical Center
AQIP All College Meeting	Annual	College personnel, key stakeholders
Leadership Team Meetings	Monthly	Administrative personnel
Student Services Support Group	Bi-monthly	Administration, student service directors or coordinators

With the College’s strategic focus on public accountability – service is a goal of the College’s AQIP Action projects to develop and implement a formal communication/dissemination plan in order to unify the method of communication with the College. The project is evaluating the use of SBAR as a communication mechanism (Category Five).

**6P3 Managing Key Student and Administrative Support Service Processes**

The Strategic Plan provides the overall direction for the College and identifies the long and short-term College goals. The overall operations of the College are managed by the Dean. Managing day-to-day operations with student service needs is the responsibility of the directors and coordinators within each department supported by the Leadership Team and Administration. Employees are given work related assignments to complete. The job descriptions for each position spell out the specific duties and responsibilities for each position. Student concerns and issues are addressed as they arise. If the situation warrants further intervention, the appropriate channels are followed to help resolve the issue. The recognition and resolution of these issues with students help drive improvements with student and administrative support service processes.

The Dean of the College and the Associate Deans maintain an open door policy as a method to encourage feedback from all stakeholders. Students, faculty, and staff are encouraged to communicate issues and concerns regarding key processes whenever necessary. All issues are assessed. Those that affect the college as a whole are taken to the appropriate standing committee or student services department. The recommendations from the standing committees or student services groups are taken to College Senate for discussion and approval. The College Senate maintains oversight for implementation and evaluation of new policies and procedures.

The Student Support Services Work Group which consists of administration plus student service directors or coordinators meets bi-monthly. This group develops target and activity dates by which information is distributed to all students and activities related to student support services are completed in a consistent, timely manner. Another purpose of this group is to share problems, concerns, and achievements in order to improve internal processes and communications within the student support areas of the College. Recommendations from this group are taken to the Leadership Team, standing committee or College Senate as appropriate. College Senate approves new policies that are developed through this group. Minutes from the meetings are posted on the Intranet for communication and sharing of discussion topics.

#### **6P4 Using Information and Results to Improve Support Areas and Services**

Data from the Satisfaction Surveys are used to improve student and administrative support areas and services both on a formative and summative level. The Associate Dean of Institutional Research and Dean discuss survey results and findings with the appropriate student service area. Based on the results, processes are reviewed or revised by individual departments to improve service. Concerns are frequently brought to the Student Support Services Work Group for discussion. New policies or processes that are developed are taken to the Leadership Team for input. Final approval for new policies is given by College Senate. For example, students were experiencing difficulty with online registration.

As the result of the Student Support Services Work meetings, a mechanism was developed to improve stakeholder satisfaction with the process of accurate and timely charging of the graduation fee to students. A graduation fee is charged to students who are enrolled in their last semester. The list of students graduating was not always accurate often missing the part-time RN to BSN student. Therefore, it was a challenge to collect graduation fees from these students. Communication with the Student Support Services Work Group resulted in a process where the student would submit an application for graduation when they registered for their final semester. This application then serves as the indication for all departments of the student's intent to graduate, thus improving the accuracy of the graduation list.

Other examples of improvements in student or administrative support services include:

- As a result of discussions and input from the Student Services Support Group, the MSN and RN to BSN portfolio process was developed and implemented to facilitate processing of the portfolios to ensure that Student Finance and the Registrar had accurate records.
- All College personnel had an ergonomics evaluation to determine needs related to work stations to ensure safe working environments for employees. Needed equipment was obtained or is being planned for in future budgets.
- Universal Signage planning process was developed. Universal signage was obtained for the College building as a component of a strategic initiative related to the development of a brand for the College. This also improved student and stakeholder service by providing increased visibility of student service areas.
- The College's annual appeal letter provided funding that resulted in upgrades to dormitory facilities and equipment for the Nursing Resource Center laboratories.
- An AQIP action project resulted in the development of the Nursing Resource Center and state-of-the-art simulation labs.

The College gathers information and uses methods within the Strategic Planning process to make changes and plan improvements in support service areas to best serve the students. The College evaluates the strategic plan goals that have been accomplished along with strategic goals for the upcoming year and incorporates changes in order to make those goals a reality.

#### **6P5 Measures of Support Service Processes**

As described in 6P1, the College uses a number of methods to gather information on student services and satisfaction. In addition to the Student Services survey, the College Student Experiences Questionnaire

(CSEQ), Curriculum satisfaction survey, and the summary of alumni and employer surveys results are shared with the appropriate standing committees to improve and measure support service processes. The SPEAOP sets levels of achievement for outcomes related to student support services for the surveys mentioned above. OSF Saint Francis Medical Center administers the Morehead Employee Satisfaction survey every two years. Results are tabulated for each department and for the Medical Center as a whole. The College of Nursing uses the results of these surveys to improve employee satisfaction, identify administrative and employee needs, and identify areas to target for improvement.

The Library and Nursing Resource Center collect data on student usage. The Library collects data on headcount, circulation, and interlibrary loans. The Nursing Resource Center collects data on student usage of the scheduled practice laboratory times. More formal data is collected on these services through the College Services Satisfaction Survey to provide feedback to specific student service departments.

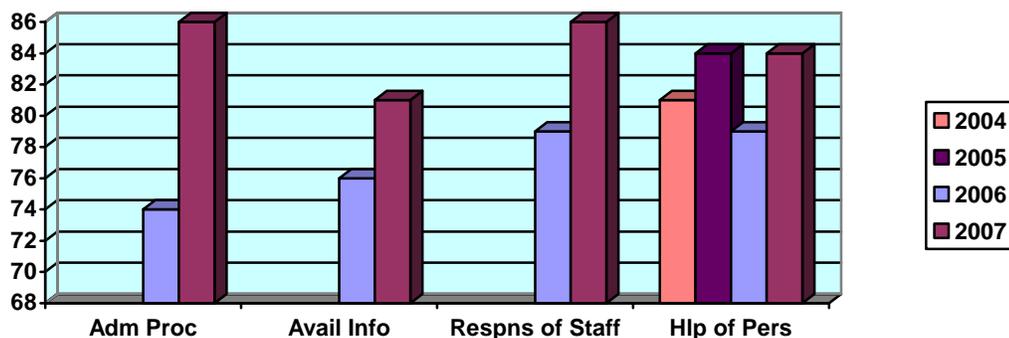
**RESULTS**

**6R1 Results for Student Support Service Processes**

The Survey of Student College Services – BSN Program is given annually to all BSN students. The survey asks students to rate student services areas on a number of factors related to building student relationships. The survey was revised in 2008 with new questions and areas added. The rating scale is 1 to 5 with 1=Very Dissatisfied and 5= Very Satisfied. The results are noted by combining “very satisfied” with “satisfied” responses together. The College set the level of achievement for satisfaction with students services as 80% of the students will give a rating of “very satisfied” or “satisfied.”

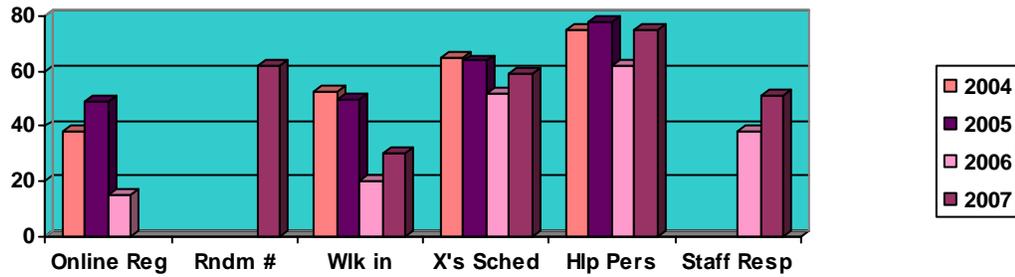
The results of student Satisfaction with Admissions/Recruitment Office are shown in Figure 6-4. The students were asked to rate their satisfaction with the admissions procedure, availability of information, responses of the staff to inquiries and helpfulness of admissions/recruitment personnel.

Figure 6-4 Satisfaction with Admissions/Recruitment Office



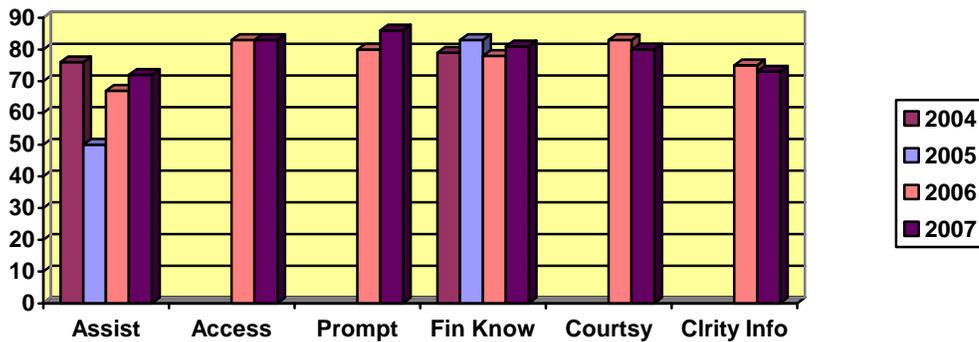
The results of student satisfaction with the Registration Process are shown in Figure 6-5. The students were asked to rate their satisfaction with online registration, random number use in registration process, walk in registration, times scheduled for classes/clinical/labs, helpfulness of personnel, and staff’s response to any registration problem.

Figure 6-5 Satisfaction with the Registration Process



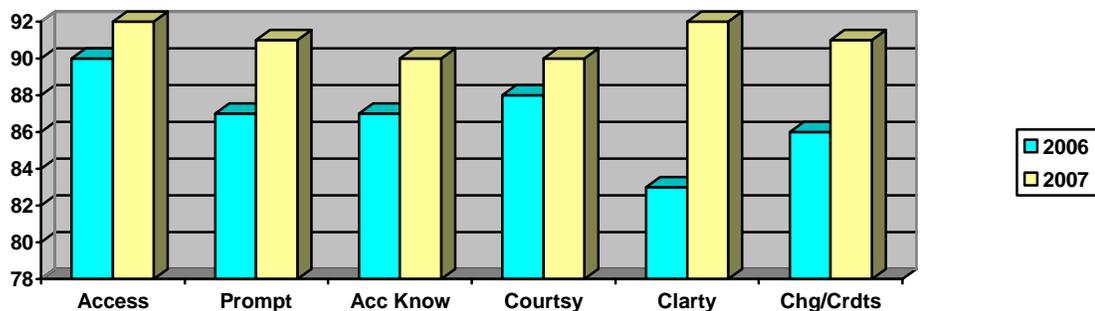
The results of student satisfaction with financial assistance are shown in Figure 6-6. The students were asked to rate their satisfaction with assistance with application, accessibility of staff, prompt responses of the staff, financial knowledge of staff, courtesy/willingness of staff to help, and clarity of written information.

Figure 6-6 Satisfaction with Financial Assistance



The results of student satisfaction with student accounts are shown in Figure 6-7. The students were asked to rate their satisfaction with accessibility of staff, prompt responses of the staff, account knowledge of staff, courtesy/willingness of staff to help, clarity of written information, and charges and credits being handled efficiently and accurately.

Figure 6-7 Satisfaction with Student Accounts



The results of student satisfaction with the learning resources' services are shown in Figure 6-8 and 6-9. The students were asked to rate their satisfaction with availability of resources, assistance with services, helpfulness of personnel, adequacy of hours, availability of computer resources, use of library policies,

ability to take library concerns to Student Senate Representative of the Educational Resources committee, and acquisition of books/supplies in the collection.

Figure 6-8 Satisfaction with the Library

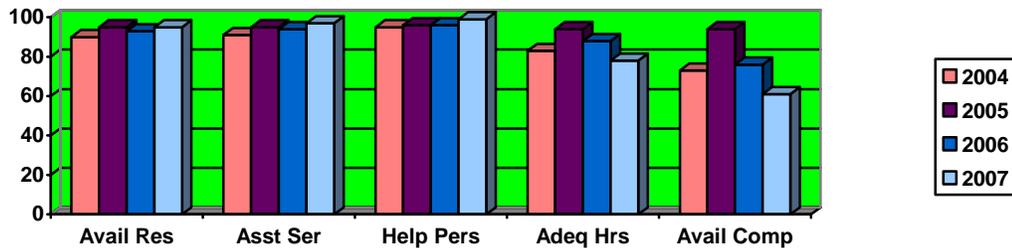
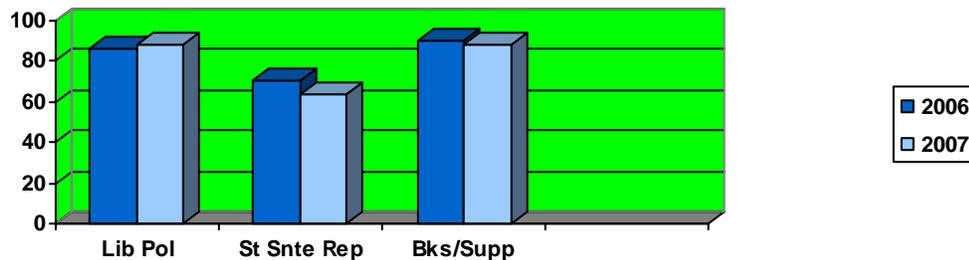
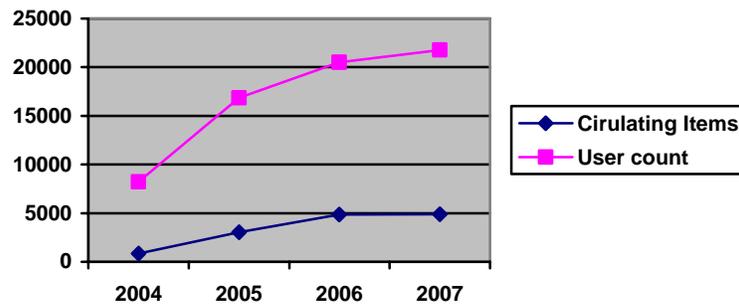


Figure 6-9 Satisfaction with the Library



In 2003-2004, the Library began collecting detailed circulation information monthly. A year end report is generated and shared with the Educational Resources committee and the Dean. The results are used in planning for the upcoming year. Figure 6-10 shows the growth in use of library services over the last four years. Interlibrary loan requests have grown from 376 in 2003-2004 to 609 in 2006-2007. This increased growth has prompted the College to hire additional part-time staff and student helpers for the Library.

Figure 6-10 Detailed Circulation Data for Library



The results of student satisfaction with Residence Facilities/Services are shown in Figures 6-11 and 6-12. The students were asked to rate their satisfaction with adequacy of size of facilities, cleanliness of hallways and bathrooms, attractiveness of facilities, equipment in working order, adequate temperature control, adequacy of recreational equipment, helpfulness of College Support Representatives, helpfulness of housekeepers, responsiveness to concerns and availability of services and facilities. The College has set the level of achievement at 90% of students will rate satisfaction with the resources accessible to faculty and students at either “very satisfied” or “satisfied”. The College has used this feedback and is in the process of modernizing and updating the building.

Figure 6-11 Satisfaction with Residence Facilities/Services

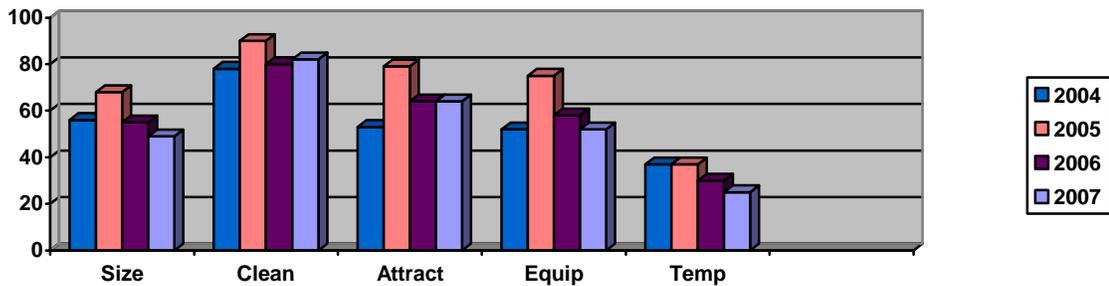
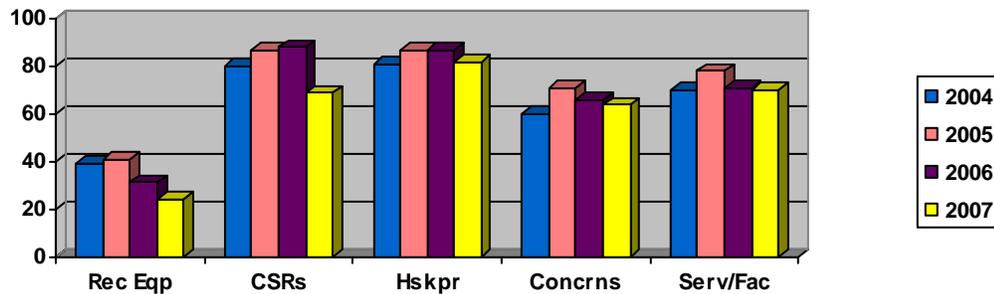
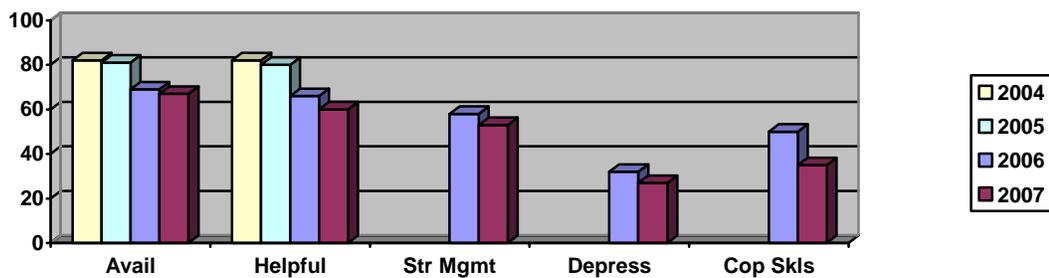


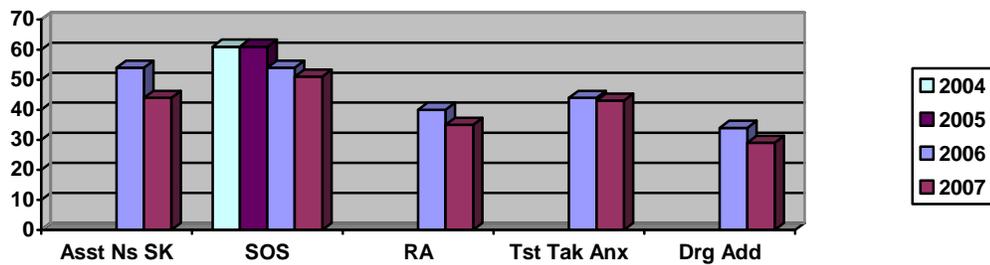
Figure 6-12 Satisfaction with Residence Facilities/Services



The results of student satisfaction with Counseling Services are shown in Figure 6-13. The students were asked to rate their satisfaction with availability of the Counselor, helpfulness of Counselor, helpfulness with stress management, helpfulness with depression recovery, assistance with healthy coping skills, assistance with adjusting to nursing skills, Students Offering Support (SOS) program, Resident Assistants (RA) program, assistance in coping with test taking anxiety, and helpfulness with drug addiction program.

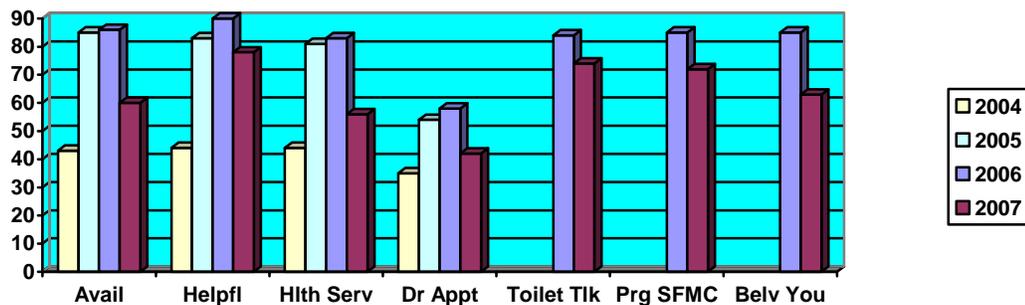
Figure 6-13 Satisfaction with the Counseling Services





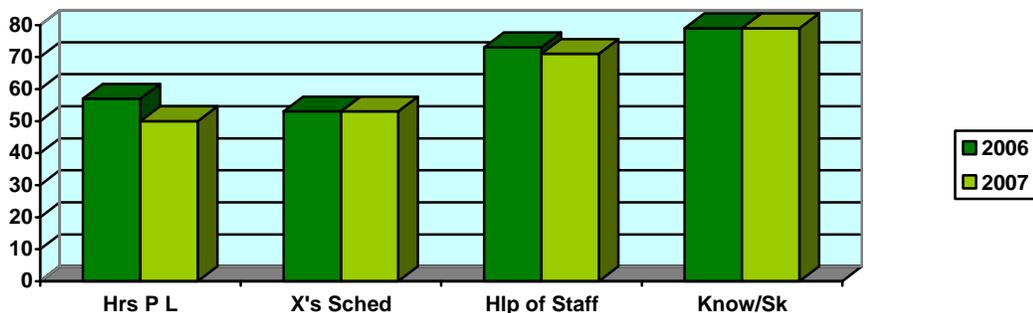
The results of student satisfaction with the Student Health Nurse are shown in Figure 6-14. The students were asked to rate their satisfaction with availability of the Student Health Nurse, helpfulness of the Student Health Nurse, availability of health services, assistance with doctor’s appointments, “Toilet Talk”, programs made available to the College through OSF SFMC (Clean Hands Campaign, Car and Campus Safety, Fire, Tornado, Natural Disaster Safety), Believe In You Programs.

Figure 6-14 Satisfaction with the Student Health Nurse



The results of student satisfaction with the Professional Skills Lab are seen in Figure 6-15. At the time of the survey this was the name of the former lab operated by the College before the Nursing Resource Center was completed and opened. The students were asked to rate their satisfaction with the number of hours scheduled for extra practice, times scheduled for extra practice, helpfulness of faculty/staff and knowledge/skills of the faculty.

Figure 6-15 Satisfaction with the Professional Skills Lab



Category Two (2R2) presents results related to student satisfaction with academic advisement.

**6R2 Results for Administrative Support Service Processes**

One indicator of institutional health and viability is the growth of the College evidenced by increasing student enrollment, credit hours generated, financial assistance awarded and revenue generated for

## Saint Francis Medical Center College of Nursing

College. Figure 6-16 shows the total headcount for the College over the last five years. Figure 6-17 shows credit hours generated. Figure 6-18 shows the financial assistance awarded by program. Figure 6-19 shows the revenue generated. The College budget is developed for a \$0 balance of revenue over expenses. Overhead expenses (e.g. depreciation, benefits, maintenance) are not included in the statement of revenues, appropriations, and direct expenses.

Figure 6-16 Headcount of Students

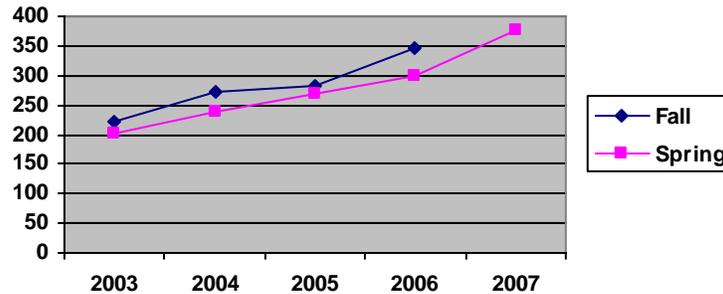


Figure 6-17 Total Credit Hours Generated

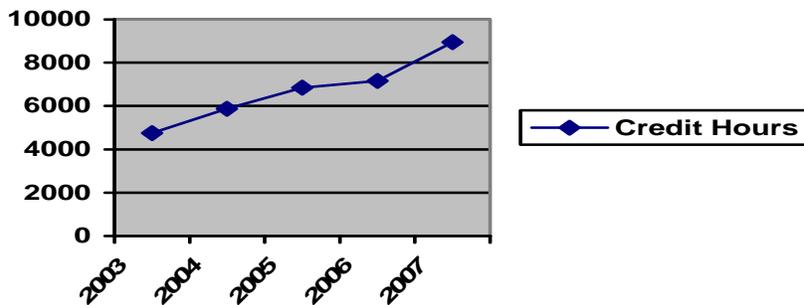


Figure 6-18 Total Financial Assistance Awarded

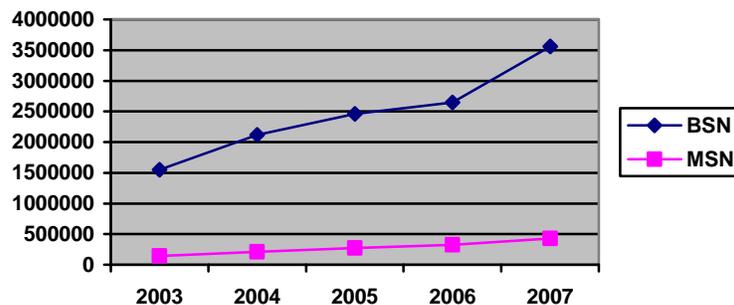
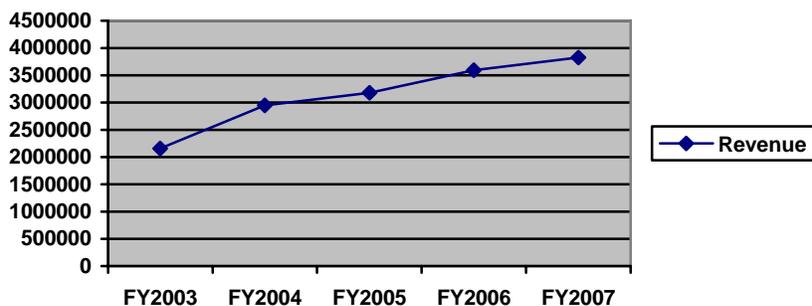


Figure 6-19 Total Revenue Generated by College



Further evidence of the institutional health of the College is the support of the College by OSFSFMC. Over the last two fiscal years, the College has received approximately \$2 million in capital funds and \$5,916.42 from employee contributions in the ‘Above and Beyond’ annual campaign for projects. These projects have focused on student learning and student satisfaction. Funds were used for the development of the state-of-the-art laboratories, new computer laboratories, and remodeling and modernization of the facility.

Another measure for administrative support service processes is the results of the Curriculum Satisfaction survey. For the questions below, students used a 5-point scale for Fall 2005 (1=strongly disagree, 5=strongly agree). Answers 4 and 5 were combined. Students used a 4-point scale for Spring 2006 with A=strongly disagree to D= strongly agree. Answers C and D were combined. With these results the curriculum committee evaluates the curriculum and makes recommendation for change to College Senate (See Figure 6-20).

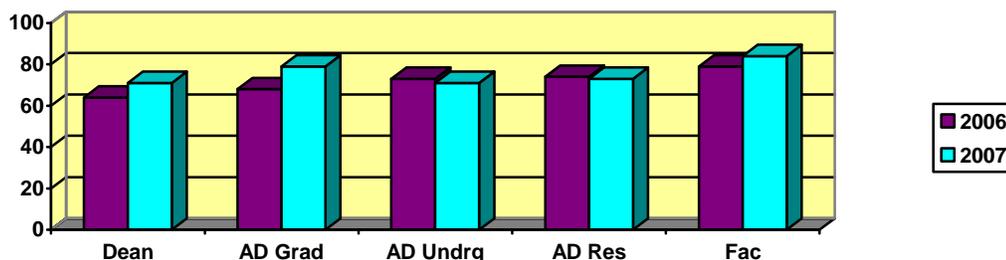
Figure 6-20 Results from Curriculum Survey

Questions	Fall 2005	Spring 2006	Fall 2006	Spring 2007
Technology at the College was accessible when I needed it.	84%	65%	41%	85%
Technical support was available when I needed it at the College.	71%	76%	58%	36%

The College uses this data along with data collected from the Student Services survey to initiate change to the College. For example, the facilities within the College have seen a drastic change to enhance our technology services to students (See 7R1).

The results of student satisfaction with Administrative/Faculty Services are seen in Figure 6-21. The students were asked to rate their satisfaction with the Dean, Associate Dean of the Graduate Program, Associate Dean of the Undergraduate Program, Associate Dean of Institutional Research and Faculty. Additional results of relationships are found in 2R1.

Figure 6-21 Satisfaction with Administrative Services/Faculty Services



The 2007 Morehead Employee Opinion Survey identifies strengths and concerns for the work unit. Concerns are considered areas for improvement. Strengths and concerns are determined through an analysis that considers the performance score, the difference in performance from the organization average, and the percentage of favorable responses. The Morehead Employee Satisfaction survey rating scale is 1 to 5 with 1=Strongly Disagree, 2=Disagree, 3=Neutral, 4=Agree, and 5= Strongly Agree. The results of the Morehead Survey for College Strengths are shown in Figure 6-22 and College Concerns are shown in Figure 6-23.

Figure 6-22 Identified Strengths from Employee Satisfaction Survey

College of Nursing Strengths	2003	2005		2007	
	CON	CON	OSFSFMC	CON	OSFSFMC
I am a member of a work unit that works well together	4.23	4.36	3.86	4.55	3.95
Members of my work unit accept responsibility for their performance	4.05	4.06	3.59	4.23	3.68
My job makes good use of my skills and abilities	---	4.28	3.94	4.30	4.04
I am proud to tell people that I work for this organization	---	4.64	4.22	4.47	4.30

Figure 6-23 Identified Concerns from Employee Satisfaction Survey

College of Nursing Concerns	2003	2005		2007	
	CON	CON	OSFSFMC	CON	OSFSFMC
My pay is fair when compared with similar positions at other employers in the area	3.60	3.92	3.36	2.96	3.39
I get the tools and resources to do my job	3.10	4.06	3.74	3.70	3.83
I am offered the appropriate amount of training and development in my present job	3.48	3.92	3.79	3.70	3.46
Our facility has adequate recognition programs for employees who exceed expectations.	3.22	3.40	3.40	3.40	3.46

### 6R3 Comparing Results

The College recognizes the need for comparative results, but has a limited amount of comparative data. Comparative data from the CSEQ on areas related to student support services is found in 2R1. In the category Relationships with Administrative personnel, the College is above the national norm comparison group. The comparative data on the Employee Satisfaction survey shows the College to be higher than

OSFSFMC on all areas in 2005 and 2007. The College is planning to investigate additional tools to provide this information, such as Noel-Levitz Student Satisfaction Inventory.

## **IMPROVEMENTS**

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### **6I1 Improvement of current processes and systems**

Each of the College committees and departments review data on student surveys to determine strengths and areas for improvement by identifying gaps between the actual performance in an area and the set performance target or indicator. The College compares the College results on the CSEQ to the norm data and determines areas that need improvement. Areas for improvement are incorporated into the College's planning process for the upcoming year. Results of student surveys were also used to develop AQIP projects. For example, one AQIP Action Project is currently reviewing student service processes to better align the processes and improve communication between departments.

Other mechanisms that are used to improve processes are new regulation requirements or changes in requirements from federal, state or other agencies that impact financial aid processes, trends in higher education, upgrades to the SONISWEB student data management system, and changes in technology. Departments regularly review processes and consider improvements when current processes are no longer effective or efficient. Feedback from stakeholders is also considered when improving processes. An example of this is the use of student feedback to change the registration process. Additionally, recommendations from Administration and the Leadership team are used to improve processes related to student service and student learning.

### **6I2 Targets, Improvement Priorities, Communications**

Improvement targets and priorities are established through the strategic planning process as a collaborative effort of the College Board, administration, faculty and staff. Recommendations from AQIP Action project teams and standing committees as well as analysis of assessment data and feedback from students are used by the College Senate to establish improvement targets as priorities. The targets and priorities are in alignment with the College Mission and Core Values. For example, the College used the analysis of student trend data to make a decision to hire additional staff in the library, Student Finance Office, and Admissions office to improve delivery of student support services.

Communication of priorities and improvements is done through verbal and written reports to the College Board, faculty and staff. The Dean shares information with employees during the Communication Forums and College Senate meetings. Communication with students is done through Student Communication Forums and through Student Senate. Updates are also communicated to students and alumni in the *Student Connection* which is published twice a year and in *Notes from Greenleaf*, the alumni newsletter that is published four times per year.

The results for achievement of the other distinctive objectives of the College are published in the *Annual Report* as a means for dissemination of data. Trended data for achievement of specific outcomes for five years are presented. The *Annual Report* is distributed to all faculty, staff, College Board members, and other stakeholders. Findings are also communicated in College Board meetings and discussed at College Senate.

Following are targeted improvement priorities set forth in the College of Nursing's Strategic Plan. The College Senate meets annually to discuss what tactics have been accomplished and ready to be retired and those that are scheduled to be implemented within the next fiscal year. The entire College meets every two years to review current AQIP Action Project committee member standings and communicate the newest projects.

## Saint Francis Medical Center College of Nursing

- Results of student satisfaction with technology and both formal and informal feedback from students was used to develop a second computer lab for students. 7R1 details the improvements in computers and wireless access for students.
- A safety and security intervention work group composed of administration and staff has been formed to work on the strategic tactic of ensuring safety on campus based on the current campus issues in higher education. The group is working with the director of security of OSFSFMC to develop an intervention response team and process in case of a campus emergency. A component of this is the investigation of a process for communicating emergencies to students and employees.
- The AQIP Action Project group is focusing on developing a systemized approach of communication needs where issues of concerns with SONISWEB can be consistently communicated to all users of the system and/or representatives of the vendor. A component of the project is to provide additional training and education to student services personnel to improve usage of the system and to determine alignment of processes with the functionality of the system.
- The Admissions/Registrar offices are working with SONISWEB to develop an efficient and effective online course registration system for students. The initial testing of the system hosted in the vendor's server yielded positive results. The College will work on developing a process for online registration.
- Funding was obtained through discretionary and capital funds of OSFSFMC for purchase of new dormitory equipment. The College purchased 30 rooms of new furniture. Sinks and lighting are being replaced in all dormitory rooms with completion of the project anticipated in August 2008. Remodeling and modernization of the bathrooms on the west end of the building occurred in summer and fall of 2007. Remodeling and modernization of the bathrooms on the east end of the building will be completed in August 2008.

## Category Seven: Measuring Effectiveness

### **CONTEXT FOR ANALYSIS**

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#### **7C1 Collection, Storage and Accessibility of Information and Data**

The College uses SONISWEB (Scholastic Online Information System) which is an internet system for admissions, recruitment, finance, and academic data collection. See figure 7.1 below. This is a centralized system which allows for collection and storage of data, but also is decentralized as it allows for select access to data for prospective students, applicants, students, and alumni. The SONISWEB system is comprehensive and most useful and relevant to student learning outcomes. The collection of data begins at different transaction points. It usually starts with the application process and payment. This data is entered into SONISWEB. Then information using EdExpress, software sponsored by the United States Department of Education is used for financial aid processing. Files from FAFSA (Free Application for Federal Student Aid) transmission product from EDconnect are downloaded. The faculty academic information access on SONISWEB is for advisee data and course rosters. The faculty enters grades for courses taught. Data on the academic side includes a student biography, academic status, course enrollment data, and academic success from admission to graduation. It also provides a data base related to potential applicants with the option to generating timed letters. Grade reports and transcripts are able to be generated. On the Finance side, the SONISWEB system contains student financial records which include billing, payments, awards, and financial aid data. All financial information is stored in SONISWEB electronically for five years. A hard copy is maintained in each student's file in locked file cabinets for a period of five years at which time the records are destroyed by property control. The academic records are retained for seven years and then microfilmed and kept in a fireproof safe. Access to data is limited to those who have a user profile (Figure 7-1).

The SONISWEB system has improved over the years as the College administration, admissions and finance personnel have worked closely with the company to share institutional and departmental needs for additional data which has resulted in improved processes.

#### **7C2.Key Institutional Measures for Tracking Effectiveness**

The College has a comprehensive Systematic Program Evaluation and Assessment of Outcomes Plan and an extensive *Annual Report* which includes the report of assessment of the graduate and undergraduate curricula and outcomes of the programs. Data reports are distributed at meetings such as undergraduate Admissions, Graduate and Senate Committees. The faculty review number of inquiries, mean prenursing grade point average on enrollment, headcount per semester, per course. The *Annual Report* has course grade point averages, semester grade point averages, retention and withdrawal rates per semester, graduation rates and average length of time to complete the programs and student perception of satisfaction with the College in keeping with set expected levels of achievement. The AQIP action project 1 resulted in the creation of flow charts which strengthened the systematic plan as it clarified the flow of admission, finance and support processes which has improved student satisfaction in these areas. The annual financial audits is another key measure of institutional effectiveness and the default rates as reported by Department of Education has been less than 1% for over two years.

### **PROCESSES**

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#### **7P1 Selection, Management, and Use of Information and Data**

The College Senate and the College Board establish the College of Nursing Strategic Plan which provides direction for the College. This plan flows from the Mission of the College and was combined with the Academic Quality Improvement Program (AQIP) and uses the four Pillars which reflect a fit for the College and its alignment with the OSF Corporation. AQIP has improved the efficiency and effectiveness of the planning process. The Pillars are the Community of Caregivers, Public Accountability, Financial Stewardship and Service Line Development (See Category Eight). This five year plan organized by the Pillars contains goals, objectives, tactics, target dates, measures, specific targets, baseline data, and

accountable persons. The various groups such as the Dean, Associate Deans, and Admissions, Finance and Marketing and others establish goals and plans for goal achievement. This plan provides for a continuous feedback loop from the various groups which allows for an assessment of the strategic plan. The College has a continuous history of gathering, aggregating and using data for improvements. The selection of data from specific evaluative measures is used to determine the achievement of specific criteria in the systematic evaluation plan. Data is collected and analyzed against the specific baseline and the planned targets. The analysis is reported at committees, Senate and to the College Board and other stakeholders. This data is used to determine decisions affecting the program, policy decisions, development, actions, revisions or maintenance.

There are several examples where the College has used ongoing evaluation and data to improve processes and practices. One is the use of the SBAR which stands for the Situation, Background, Assessment and Recommendations for proposing a change in practice. The SBAR was used to determine the proposal for using MEDS Publishing; another is the proposal for a joint faculty appointment for teaching Ethics, and for coordinating the proposed neonatal program.

Figure 7-1 SONIS User Profile

<b>Group/Individual</b>	<b>Access to Records</b>
<b>Administration- Dean</b>	All data
<b>Associate Deans</b>	All data related to academics and course management and enrollment, enter grades for courses taught. Data can be retrieved for research purposes.
<b>Assistant Dean of Support Services</b>	Is the SONIS administrator and liaison to the SONIS vendor. Has access to all records and data.
<b>Admissions</b>	Data related to academics-student characteristics, inquiry, enrollment, academic status, grade reports, alumni data, course offerings
<b>Finance</b>	Financial Aid: view statements, post awards. Student accounts: access billing statements, and generates reports.
<b>Faculty</b>	Post grades for courses taught, view advisee records and view course enrollment.
<b>Students</b>	Each student is able to access academic, financial, and some personal information according to College policy.
<b>College Support Representatives</b>	Data entry for potential student and applicant characteristics.
<b>Coordinator for Development, Alumni and Marketing</b>	Alumni data base. Can enter data related to alumni.

**7P2 Determining Need and Priorities Related to Information and Data**

The needs of the College related to data collection, storage and accessibility are primarily determined from committee actions and recommendations. The committees study issues, program and institutional needs and then assess the data needed to improve existing processes, review existing policies and then form a new or revise the existing policy, and establish priorities. The selection of storage of such records as admission data follows the guidelines set forth by the American Association of Collegiate Registrars and Admissions Officers (AACRAO). Storage of the Finance records follows the process from the United States Department of Education regarding access by students. Otherwise access is determined by the need to know for the committees and the Associate Dean of Institutional Research.

**7P3 Determining Needs and Priorities for Comparative Information and Data**

The College has a practice of seeking comparative data when doing program, institutional, and policy review for effective data driven decisions and change. The specific priorities for comparative data has related to determining salaries, tuition and fees, faculty benefits such as funding for development, teaching load, and technology and institutional improvements. The priorities are established through the strategic planning process. The College has obtained comparative information and data from the National League for Nursing, The American Association of Colleges of Nursing (AACN), The National Association of Clinical Nurse Specialists (NACNS) and the National Council of State Boards of Nursing and the State of Illinois Department of Financial and Professional Regulations. The other data source is Integrated Postsecondary Education Data System (IPEDS) which provides a standardized comparative data on nearly all institutions with other institutions of higher education and nursing. The need to use comparative data has been selected for salary comparisons with AACN and AAUP. When planning the graduate program for the Clinical Nurse Specialist the data was obtained from NACNS. IPEDS provides information related to tuition. Therefore, when key or vital information is desired, such as salary data the College uses published data. In addition the College does contact many Colleges and Universities when planning to use a system such as SONIS, eCollege and planning program changes for enrollment data and graduation rates. Data such as NCLEX-RN results is usually not shared between institutions or made public.

In addition the College created a position of Associate Dean of Institutional Research in recognition of the need to collect and aggregate data to measure effectiveness and determine areas needing improvement. This position was designed to centralize processes for coordination of data collection, management, reporting and use of information sources to identify trends and emerging issues. Further this position provides for updates, quality, and improvement measures for data collection, analyses, and reporting of the Systematic Program Evaluation and Assessment of Outcomes Plan (SPEAOP) to meet College needs. The Associate Dean of Institutional Research directs the preparation and publication of the College Annual Report and other consumer information and surveys.

### **7P4 Analysis and Sharing of Institutional Level Information and Data**

At the institutional level, the College Senate members participate in review and analysis of data related to achievements of the College and its programs as well as graduates success on licensure, certification pass rates, enrollment, satisfaction, graduation rates, employment data and alumni and employer evaluations. The College publishes its *Annual Report*. A comprehensive report is shared with stakeholders, the College Board, OSF Healthcare System, Saint Francis Medical Center and Faculty and staff. A modified *Annual Report* is also published annually and shared with students, alumni, donors, the College Board, the Corporation and a variety of other stakeholders. This report is also available on the website. Each semester the College announces its enrollment data and graduation information in the *Student Connections*; the Medical Center publication, the *Connection*; and the College publication, *Notes From Greenleaf*.

### **7P5 Ensuring Unit and Department Information Alignment with Categories 1 and 2.**

Student learning objectives and the distinctive objectives are the primary drivers of the strategic planning process. The Strategic Plan clearly provides direction and influences the activities of the leaders of the College and the committee actions. The strategic plan requires that responsible individuals and groups work to achieve targets. Reports of achievements toward the set targets are shared at the Senate meetings and at the College Board. Data alignment with the goals for student learning is studied and committee actions are shared. The Strategic Plan targets helping students learn as it addresses tactics to strengthen faculty orientation, development and mentoring. These are a few of the planned activities designed to review and prepare faculty regarding critical thinking, test design, classroom and clinical evaluation and interactive teaching strategies. All of these strategies are designed and evaluated to help faculty facilitate student learning.

### **7P6 Ensuring Effectiveness of Information System and Processes**

The College is part of the Information Systems (IS) network of OSFSFMC which provides hardware and software system support and upgrades. This system has technology support available to the College for any computer issues with the intranet and storage or other technology concerns. The materials stored on the shared drive is backed up every night and stored per Medical Center policy for two years. In the event of lost data the IS department has been able to retrieve it. The College uses eCollege for online instruction and this service provides technology support 24/7 through the use of a toll free telephone number for its users and students. The College has had the benefit of eCollege providing personnel to come on site to help with learning to use eCollege and has provided additional seminars and online materials for any changes. The College has a faculty person dedicated as the administrative person for technology issues related to eCollege and other technology issues. The College has conducted surveys of its students to determine satisfaction with the College technology, and specifically, the graduate program students' ratings report satisfaction with technology. Faculty continue to participate in webinars to strengthen the use of technology. The College has a policy for students and employees governing the security of information and data.

### **7P7 Measuring and Analyzing Systems and Processes of Measuring Effectiveness**

Each semester the College admissions department provides data to the College Senate related to enrollment, retention, graduation rates, and demographics which includes age, gender and ethnicity. The graduate program specifically tracks incompletes, leaves of absence, and stop outs (students who choose not to reenroll for a semester). The graduate program faculty and advisors have worked closely with these students to facilitate success in the program and retention has increased. Categories 3R1 through 3R5 describe data collected on a regular basis.

## **RESULTS**

### **7R1 Results for Measuring Effectiveness**

The evidence that the system of measuring effectiveness meets the College's needs is evidenced by the success of our graduates, increased student enrollment, expansion of the graduate program effective recruitment of faculty and staff, improvement in physical facilities, implementation of simulated and active student learning. The College determined the need to use computer generated student evaluations of course faculty and is currently using *Select Survey ASP*. This survey provides student ratings for each faculty teaching a course and their individual comments. The Associate Deans print the results of the evaluations and distribute the evaluations to the faculty after the semester is completed.

Additional improvements have included:

- All classrooms and laboratories are equipped as smart classrooms.
- The number of computers for students at the College has increased from a total of 37 to 49. Many students have their own personal computers and laptops (Figure 7-3).
- The graduate program is online with the classes meeting on campus a minimum of once to a maximum of four times per semester. ( one course meets four times)
- The College has wireless connectivity in the Nursing Resource Center, the recreation rooms and the library.
- Growth of the graduate program since spring 2002 increased from 15 to 99 in spring 2008. This increase may be due to the program being offered online and the success of the MSN graduates.
- An Information Literacy Program which began in 2004 evolved out of the Educational Resources Committee. This involved library presentations to meet the needs of the undergraduate and graduate students as they progress through the programs. The content focused on the information literacy competency standards in keeping with the Association of College and Research Libraries (ACRL). A satisfaction survey was conducted following the presentations using a rating scale of 1- 4 regarding helpfulness of the presentations with 4 being most helpful and 1 least helpful. Figure 7-4 shows the results.

Figure 7-3 Growth in Computer Resources

College of Nursing	2006-07	2007-08
<b>Student computers –</b>		
* <b>Room 214</b>	19	13
<b>East recreation room</b>	8	5
<b>West recreation room</b>	2	2
<b>Room 135</b>	0	21
<b>Library</b>	2	2
<b>Computers at bedsides in laboratories</b>	0	26
<b>Student computers – stand alone in student lounges</b>	6	6

\* The computers (6) in room 214 and the East recreation room (3) were moved to room 135 to accommodate more space for student usage.

Figure 7-4 Results of Satisfaction with Information Literacy Program

Library Presentation By Course	Total Students Responding n=	Ratings of Helpfulness n= % *
Research	16	n=15 94%
Concepts	45	n=45 100%
Child & Family	28	n=25 89%

\*Note: Ratings of 3 helpful and 4 most helpful were combined

In July of 2007, the Saint Francis Medical Center College of Nursing Library successfully completed the transition from its previous online public access catalog to the new I-Share program managed by the Consortium of Academic and Research Libraries of Illinois (CARLI). I-Share is a library catalog based out of the University of Illinois that provides information about the collections of many Illinois academic and research libraries. The College is a governing member of the I-Share community. Participating libraries are collectively referred to as the I-Share libraries. Currently, there are 71 I-Share libraries and more than 30 million library items are represented in the I-Share catalog. I-Share libraries make their collections available to individuals (such as students, faculty and staff) who have current valid affiliations with any I-Share institution. Students use a current ID from an I-Share institution to request materials from any participating library, and these items are sent to their library pickup location. Additionally, I-Share libraries work with other libraries world-wide to share materials for library users. The I-Share system particularly benefits those persons who are directly involved with the online programs that the College offers. Students can utilize and check out materials from any I-Share Library in Illinois. Those persons living outside the central Illinois area and wish to attend the masters programs at the College will have a college or university library available to them.

**7R2 Results Comparisons with Other Institutions**

The Associate Dean of Institutional Research completes national surveys from AACN, NLN, and IPEDS. The results of the College’s data such as enrollment data, withdrawals, graduation rates by program, pass rates on certification examinations and employment data are part of these surveys. These surveys also include analysis of demographics. The College information becomes part of a large data base that is used to benchmark College results against. There is an informal information sharing that occurs when other colleges contact the College or the College contacts other colleges of nursing for benchmark and best practices information. Employees are also members of list serves for their respective job and or profession.

## **IMPROVEMENTS**

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### **7I1 Improving Current Processes and Systems for Measuring Effectiveness**

The College has a history of using a variety of evaluation tools to gather data. Currently the undergraduate program uses tools, such as the CSEQ, HESI, NCLEX-RN pass rates that have normed data for comparison. The faculty and staff have also consistently benchmarked with other higher education institutions for planning processes, such as curriculum and program changes. The data is analyzed and shared with appropriate standing committees. The committees study the data and use the results to make recommendations for changes for improvements. The final approvals for changes and improvements are approved by the College Senate.

Examples include the development of the graduate program, planning for BSN and MSN curricula revisions, implementation of the eCollege online program, and more. However, the Evaluation and Graduate committees are seeking ways to use technology for a variety of evaluations. In addition, the SONISWEB system is being studied to determine opportunity to gather additional information for comparative purposes and decision making. One example is to determine a method to track graduate students from the point of entry to graduation as these students do not necessarily progress as a cohort. The other process that the College is working to improve is registration. Currently administration, admissions and SONISWEB are working to provide an effective online registration process.

### **7I2 Improvement Targets, Priorities, Communications**

The College Senate sets targets for improvements after reviewing current levels of achievement and studying the literature, expectations from accrediting bodies and state and national norms, such as for certification and licensure norms. The target levels are published in the Systematic Program for Assessment and Evaluation Outcomes Plan and the Strategic Plan. These two documents are shared with all faculty and staff. The *Annual Report* details the improvements and data collected related to outcomes. The *Annual Report* is distributed to all faculty, staff, College Board, and other stakeholders.

The following are examples of improvements that have been made and priorities that have been set based on decisions made after analysis of target performance measures. The improvements and priorities were developed to improve leading and communicating processes that support the Mission and Vision of the College.

- The College has a history of striving toward excellence and has set achievement levels above the norm. For example the College of Nursing has set the level of achievement for licensure pass rates for BSN students at 90 %, and the national norm is 84%. The national certification result for MSN students is a pass rate of 100% and the expected level of achievement was set at 90%. Currently the number of those writing the certification examination is small n=17; therefore, the committee will continue to monitor the pass rates and as the number of those testing this will influence the decision to adjust the set level of achievement.
- SPEAOP is currently reviewed and revised to ensure that measures to assess the outcomes are current and appropriate. Achievement levels are being reviewed and revised to ensure that the College continues to strive towards excellence.
- Because of student data regarding online registration, the College has successfully migrated the College's data from the OSFSFMC servers to RJM the vendor site. The College hopes this will provide improved service and opportunity for online registration for students. The College hopes to be able to use online registration for spring and summer 2009. Additional capabilities of the SONIS system are being examined to improve College processes.

## Category Eight: Planning Continuous Improvement

### CONTEXT FOR ANALYSIS

#### **8C1, 8C2 Institutional Vision and Strategies Alignment with Mission and Values**

The College is committed to a “continuing tradition of excellence in nursing education.” The College of Nursing Vision is found in 2C1. The vision provides the foundation for the Mission of the College which is to provide nursing education programs at the undergraduate and graduate level. The Values flow from the Mission. The vision for the next five years is to continue to build on current successes; to implement the identified improvements areas from this System Portfolio process; to have successfully complete institutional and professional continuing accreditation for both programs; to implement two new graduate options: the Nurse Practitioner and Doctor of Nursing Practice; and to have an established capital fund raising campaign to support a new building.

The Mission, Vision, and Values of the College are articulated in the 2005-2010 Strategic Plan. The Strategic Plan is developed around four pillars and it identifies strategic goals, objectives, tactics, target dates, measures, target, and person who is accountable for the goal. The use of continuous quality improvement methods (AQIP strategies) are incorporated into the strategic plan. The four pillars and an explanation of each pillar are:

- **Pillar One: Community of Caregivers** – Implement a culture where employees can grow and successfully provide services to students; where employees are considered an investment, leadership skills are encouraged and service becomes a core value.
  - *Goal:* The College of Nursing will grow/recruit more BSN/MSN students and ensure adequate faculty and staff levels to maintain quality education and services – “Grow Our Own” within the designated 37 counties.
- **Pillar Two: Public Accountability: Quality, Service, and Safety** – Build a culture where quality, safety and service become the pillar of foundation for all service and where transparency is a readily accepted practice.
  - *Goal:* The College of Nursing will optimize operational effectiveness and pursue perfection.
- **Pillar Three: Financial Stewardship** – Demonstrate effective stewardship of financial resources by generating sufficient margin to meet financial goals in order to provide capital support for strategies contained within the plan.
  - *Goal: Financial* – While demonstrating effective stewardship of financial resources, the College of Nursing will generate sufficient revenue to meet and/or exceed College and Medical Center financial goals.
  - *Goal: Marketing* – The College of Nursing will research, develop, and implement a marketing plan that creates an identified “brand” and increase student admissions to BSN, RN to BSN and MSN programs.
  - *Goal: Facility* - Design and develop a College of Nursing “facility” that allows for accessibility and efficiency while promoting and accommodating both student and faculty growth.
- **Pillar Four: Service Line Development: Educational Programs** – Focus on service line development (Educational Programs) by creating value through timely, accessible, technologically advanced services to students both locally and regionally.
  - *Goal:* The College of Nursing will revise and implement a curriculum to enhance the overall educational experience for students.

In conjunction with the Strategic Plan, the College Board charged the Dean with developing a 10 year vision and plans for the College which projects for years 2016-2018. The 10- year plan builds on the four pillars and emphasizes overall growth of the College and development and implementation of

additional quality nursing programs at the baccalaureate, master’s and doctoral levels. It also focuses on curricula, faculty needs and facility planning for the increased student growth.

Figure 8-1 Example of Strategic Plan and Alignment with Mission and Values

<b>Pillar/Goal</b>	<b>Objective Example</b>	<b>Tactic Example</b>	<b>Mission</b>	<b>Value</b>
<b>Pillar One</b> Grow/recruit more students and ensure adequate faculty and staff levels to maintain quality education and services – “Grow Our Own” within the designated 37 counties	Increase student recruitment through diversity and growth of the RN to BSN option.	Focus recruitment efforts on mirroring demographics with regards to gender, race, and age (Peoria, Woodford, Tazewell counties).	The College provides nursing education programs at the undergraduate and the graduate level. The upper division at the baccalaureate level prepares men and women for the practice of professional nursing.	Personal & Professional Development: Learning, Caring, Leadership, Personal worth & dignity
<b>Pillar Two</b> The College will optimize operational effectiveness and pursue perfection.	Increase access and services to meet the needs of our identified customers while being sensitive to cultural diversity.		The primary commitment of the College is to undergraduate and graduate nursing education.	Service: Responsibility, Accountability
<b>Pillar Three</b> The College will research, develop, and implement a marketing plan that creates an identified “brand” and increases student admissions to BSN, RN to BSN, and MSN programs.	Differentiate ourselves as “the quality provider” of nursing education	Prepare a proposal for facility replacement and renovation based on the growth of the College.	The College serves the community providing competent entry level and advanced practitioners responsive to the changing health needs of society and the health care system.	Quality: Excellence
<b>Pillar Four</b> The College will revise and implement curricula to enhance the overall educational experience for students.	Enhance BSN and MSN programs.	Develop a formal plan to implement simulation across the BSN and MSN curricula.	The College provides nursing education at the undergraduate and graduate level.	Quality: Excellence  Agility

## **PROCESSES**

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### **8P1 Planning Process**

The College's planning process consists of the following steps: 1) planning an all employee strategic planning meeting including College Board members and external stakeholders for input which is led by a person with expertise in strategic planning, but not a College employee; 2) analysis of data from internal an external environmental scans and trend analysis of data; 3) a SWOT analysis to develop the plan; 4) the mission and vision are reviewed and revised as needed; 5) goals, strategies, tactics, targets are developed; 6) the faculty and staff discuss the plan, make revisions to the plan and goals, and finalize the plan after several meetings and discussions; 7) the draft of the plan is presented to the Long Rang Planning Committee of the College Board where revision are made with input from the committee; and 8) the final draft is presented to the College Board for approval.

Since the initial Strategic Plan in 2003, a SWOT analysis was used in 2005 to update the plan. In 2006-2007, the Strategic Plan was updated to its current form. At that time, the strategic goals were formatted into the Four Pillars. During this revision, the plan identified more specific measures and the person responsible for coordinating activities related to the objective and tactic. The focus on quality improvement and the AQIP Action project goals were incorporated into the Strategic Plan at this time. This was done to streamline the planning processes; efficiently use resources and personnel; improve communication; and keep the institution focused on the same direction. Once the revision was done, the Strategic Plan was presented to the College Senate, Long Range Planning Committee of the College Board, and the College Board for approval. An all College and stakeholder Strategic Planning meeting led by a planning expert is being planned for August. A SWOT analysis will be done using current data gathered from a current environmental scan.

The faculty within individual courses does strategic course planning on an annual basis. Course goals for the next year are set at the end of the academic year. Feedback from student evaluations of the course and an analysis of achievement of expected courses outcomes is used to determine upcoming course goals. Evaluation of achievement of goals from the previous year is done. The Course Report is completed annually in May by course faculty and sent to the Associate Dean. The Course Report serves as an evaluative and communication mechanism for course planning and course activities. The aggregated data from courses at the junior and senior level is shared with the faculty through the Curriculum Committee and College Senate.

### **8P2 Selection of Short- and Long-Term Strategies**

The short- and long-term strategies are identified during the strategic planning process. Timelines are established for each of the goals and objectives based on prioritization of importance of the strategy by the group. Also considered are the human and financial resources needed to accomplish the objective and the impact of the project on other current projects. The strategies in the current strategic plan are focused on areas important to the College which include increased student enrollment, increased diversity, growth of programs, excellence in program offerings, facilities growth and improvement, and increasing revenue in non-tuition dollars. The College has a priority of increasing student enrollment to help with the nursing shortage. The College has an increased number of qualified applicants for the undergraduate program that are being turned away due to current limitations. A challenge to the College is attempting to increase student enrollment through acceptance of additional qualified applicants. This increased enrollment will require additional classroom space, clinical sites for learning experiences, and faculty and staff. Plans are underway to address these issues (8P6).

### **8P3 Development of Key Action Plans to Support Strategies**

The action plans are developed based on the Strategic Plan and the identified AQIP Action projects. With the development of the Strategic Plan, groups consisting of faculty and staff were formed to work on identified tactics. The action plans were developed by the tactic groups that correlated to the Strategic Plan. Assessment data is analyzed and evaluated with recommendations for process improvements. Progress on the action plans is monitored and reported to the appropriate standing committee or College Senate. Written reports on action plans and achievement of strategic objectives are submitted to the Dean twice a year by the key person or group facilitating the action plan. The Dean communicates progress to the College Senate and Long-Range Planning Committee of the College Board and to the College Board. Progress on the action plans is communicated to students by the student representatives of the standing committees and by the Dean who attends Student Senate meetings as needed. The Dean completes an end of the year report on achievement of action plans and strategic objectives which is communicated to faculty and staff at College Senate and the College Board. The report is published in the *Annual Report*. The *Annual Report* is distributed to faculty, staff, College Board members, OSF Healthcare Board members, and key external stakeholders. A condensed version of the *Annual Report* is posted on the College website.

#### **8P4 Alignment of Planning Processes, Institutional Strategies, Action Plans**

College planning processes, initiatives and goals are developed at a number of levels. Faculty and staff identify areas for improvement and change. Standing committees identify annual goals for the committee. Student Senate and student representatives on standing committees bring feedback and offer suggestions for improvement through their participation on the committee. Feedback from stakeholders is also considered when planning for the College. All goals developed by the above groups are in alignment with the strategic plan and overall institutional initiatives. The standing committees and other individuals report back to the College Senate to communicate progress and completion of goals. Action on recommendations from the standing committee occurs at College Senate. Student representation on the committees provides a mechanism for communication of the College's strategic initiatives and plans so that students remain informed about activities at the College. Accomplishment of goals is recorded annually in committee minutes. Minutes from committees are posted online and all faculty and staff have access to the minutes. Goals set by individual courses are in alignment with overall Curriculum Committee and strategic planning goals.

#### **8P5 Selection of Measures and Performance Projections**

The measures for specific goals and level of achievement for the objectives were established by the group participating in the strategic planning process. A number of issues are considered when identifying measures and setting levels of achievement. The strategic planning group considered demographics of the target recruitment area, tuition costs and comparative costs from other institutions, graduation rates, retention rates, assessment data on specified outcomes, needed skills and competencies for nurses in a changing healthcare system, and the available resources. The Strategic Plan identifies the objective, tactic, target date, measure, and target performance. Individual course faculty identify the measures for specific goals and target performance objectives for individual courses. Figure 8- 2 shows examples of Strategic objectives, measures, and target levels of achievement.

Figure 8- 2 Example of Strategic Objectives, Measures and Target Levels of Achievement

Strategic Objective/Tactic	Measure	Target Level of Achievement
<b>Objective: BSN and MSN program enhancement</b>		
Develop student learning center	Labs in progress Student and faculty satisfaction	3 labs completed and in use 100% student and faculty satisfaction
Develop a formal plan to implement simulation across the BSN and MSN curricula	Number of courses with simulation integrated	Integrated simulation in two courses
<b>Objective: Differentiate ourselves as “the” quality provider of nursing education</b>		
Investigate scholarship funding opportunities for local students, international students, diversity focused and gender focused	Number of new funding opportunities	Report two new funding opportunities
<b>Objective: Increase student recruitment through diversity and growth of RN to BSN option</b>		
Focus recruitment efforts on mirroring demographics with regards to gender, race, and age (Peoria, Woodford, Tazewell counties)	Number of students enrolled	Increase male enrollment to match the national norm of 6% males in nursing. Enrollment to mirror county demographics: 79% White, 17% African American, 2% Hispanic, and 1% other – with less than 2% variation.

**8P6 Ensuring Appropriate Allocation of Resource Needs**

The responsibility for development and implementation of the budget lies with the Dean. As part of the planning process, faculty and staff, standing committees or Action project teams submit funding requests for strategic initiatives or action plans to the Dean in the spring. Consideration for funding is based on the overall budgetary situation at the College. Resources have been set aside to assist with scholarship funding and facilitation improvement and development. Capital funding requests are made for large scale projects such as the development of the Nursing Resource Center. Once the Dean has developed the budget, it is sent to the Finance Committee of the College Board for review and input. The budget then goes to the full College Board for approval, and then to the Fiscal Office of OSFSFMC.

An AQIP Action project was undertaken to pursue and increase the amount of non-tuition revenue opportunities for the College. This was incorporated into the Strategic Plan in 2007 when the AQIP Action projects became a formal part of the strategic planning process. As part of this process, the College has increased efforts to increase donations from the alumni and friends of the College. In 2007, donations from this group increased over 25% from the previous year. The College has started a building fund through the OSF Saint Francis Medical Center Foundation for its new projected building to be completed by 2015. As part of the fundraising, the College conducted two Phon-A-Thons, one in 2007 and another in 2008.

The Strategic Plan has identified faculty, technology and space as resources needed to continue to grow student enrollment. A facility and technology plan was developed as a part of the strategic plan. The facility and technology plan is updated based on enrollment and revisions in the Strategic Plan. As a component of this plan, the Leadership Team met with corporate architects and planners to draw up plans for a new building which has the potential completion date targeted for 2015-2016.

The Associate Deans are planning for increased student enrollment of 500 undergraduate and 120 graduate students in terms of faculty and staff. Additional class and clinical sections are being projected. Based on this projection, additional faculty and staff FTEs will be identified and approval from the College Board and OSFSFMC will be needed to proceed with planning. Budgetary implications are being considered as sections are added.

### **8P7 Ensuring Development of Faculty, Staff, and Administration**

Communication of changing institutional strategies through College Senate meetings, Communication Forums, emails, and updated copies of the plan are posted on the shared web site. During the transition to the AQIP process, all employees participated in the development sessions related to quality improvement and AQIP. In 2006, all employees underwent basic education and training in Six Sigma processes. A number of faculty and staff have been involved in Six Sigma projects further developing their knowledge and skills related to quality improvement. Annually, faculty and staff meet with their direct supervisor and develop goals and opportunities for development as part of the appraisal process.

Development needs of faculty and staff are considered during development of the annual budget. This is ensured by the creation of a line item in the budget that provides funding for faculty and staff development. The College invites faculty and staff to attend sponsored webinars, online meetings, and programs related to strategic initiatives and goals. Currently the College is investigating Student Emergency Notification Systems as a component of its strategic initiative related to safety. Category Four discusses other development opportunities for employees.

All faculty and staff are a part of the quality improvement process at the College. Intense training and development of the Steering Group occurred at the AQIP Strategy Forum. The Steering Group returned to the College and shared information with faculty and staff. This is evidenced by the composition of the AQIP Action Project teams whose memberships include faculty and staff at all levels at the College. As the College markets itself as “a continuing tradition of excellence in nursing education”, the goal of quality improvement is a priority so that the College continues to fulfill its Mission and Vision (See 4P4 and 4P5).

### **8P8 Measures of Effectiveness for Continuous Improvement**

The effectiveness of the College’s continuous improvement is measured through student success and satisfaction and the College’s ability to achieve its goals and make changes as needed and employee satisfaction. The Strategic Plan and SPEAOP identify a variety of measures that are used to measure effectiveness of continuous improvement (Category 1). Student feedback on course evaluations and other surveys are measures that are used for process, course, and program improvement. Employer and alumni surveys provide additional data the College uses for improvement. The CSEQ provides feedback that is used to improve programs and services. The effectiveness of the planning process is documented through accomplishment of plan outcomes (See 8R1).

## **RESULTS**

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### **8R1 Results of Accomplishing Institutional Strategies and Action Plans**

With the primary Mission of the College to provide educational programs in nursing at undergraduate and graduate levels, student success shows the College is accomplishing its Mission. The number of qualified applicants for the BSN program has increased, student enrollment in both programs has increased, retention of students is high for both programs, and graduation rates are high. The College believes this shows that students recognize the College’s “continuing tradition of excellence in nursing education.”

The planning process was streamlined with the incorporation of the AQIP Action Projects into the Strategic Plan. Figure 8-3 highlights other results for accomplishment of strategic initiatives and action plans.

Figure 8-3 Accomplishment of Strategic Initiative and Action Plans

<b>Strategic Plan Pillar</b>	<b>Accomplishment</b>
<b>Pillar One: Growth and recruitment</b>	<ul style="list-style-type: none"> <li>• RN to BSN enrollment increased by 20% in 2006-2007</li> <li>• Highest College enrollment of 376 students occurred in 2006-2007 which was a 26% increase over the 298 students in 2005-2006</li> <li>• Diversity of students population increased by 2% in 2006-2007</li> <li>• Diversity sensitivity program was held for all faculty and staff in 2005-2006</li> <li>• Additional faculty were hired to maintain student faculty ratios at a maximum of 1:8 in clinical sections</li> </ul>
<b>Pillar Two: Service, Quality, and Safety</b>	<ul style="list-style-type: none"> <li>• Online registration options and student information systems were investigated</li> <li>• Random number registration process was initiated for undergraduate students</li> <li>• <i>Academic Advisement Handbook</i> was published in 2006</li> <li>• The College is using the SBAR tool as a standardized communication method and for use in introducing new policies or changes</li> <li>• Curriculum Committee developed a plan for emphasizing and documenting a safety focus across the BSN curriculum</li> </ul>
<b>Pillar Three: Revenue growth, facility growth and improvement</b>	<ul style="list-style-type: none"> <li>• Total of \$1,456,250 in capital funds was received for construction of Nursing Resource Center and facility remodeling</li> <li>• Annual donations for 2007 increased over set goal of 25% increase from 2006</li> <li>• Income from tuition and fees from 2006-2007 increased 35% from 2005-2006</li> <li>• Alumni Association membership grew to 90 members with its own Governance Board, bylaws and organizational structure</li> <li>• New Nursing Resource Center with four state-of-the-art laboratories was completed in August 2007</li> </ul>
<b>Pillar Four: Program excellence and growth</b>	<ul style="list-style-type: none"> <li>• College is accredited by the Higher Learning Commission and programs are fully accredited by National League for Nursing Accrediting Commission</li> <li>• Implementation of Meds Publishing program for students to improve learning and preparation for NCLEX-RN licensure exam</li> <li>• NCLEX-RN pass rate for 2007 was 88%</li> <li>• The Clinical Nurse Leader option was added as a program option for graduate students in fall 2007</li> <li>• 100% pass rate for graduate students choosing to take the Clinical Nurse Specialist certification examination</li> <li>• “Simulation Across the Programs” plan was developed as part of AQIP Action Project</li> <li>• Grant of \$90,450 was received to purchase simulation equipment as part of “Simulation Across the Programs” plan</li> </ul>

### **8R2 Projections of Performance**

The 2005-2010 Strategic Plan identifies projections for the next one to three years. The AQIP Action projects are integral parts of the direction for the College. The focus for the College in the upcoming years remains on the Four Pillars of the plan. Projections for strategic initiatives and action plans include:

- Continuing accreditation for the graduate program;
- Student enrollment to increase to a total of 500 undergraduate students;
- Increased recruitment of minority students to increase diversity of student population;
- Hiring of additional faculty to support student enrollment;
- BSN curriculum revision to reflect current trends and knowledge required for entry level practitioners;
- Expansion of graduate offerings to include a neonatal nurse practitioner option (NNP) and Doctor of Nursing Practice (DNP) degree;
- Facility remodeling and updating;
- Increased revenue for scholarship resources for students.

### **8R3 Comparison of Results to Other Institutions**

Comparative data from the results of the strategic initiatives are found in other categories. At this time, the College does not compare its strategic plan and action plans with other college or universities. Feedback on the AQIP Action Projects is received through the required annual AQIP Action Project updates. The College needs to discuss benchmarking in this category and undertake a process to identify benchmarking opportunities.

### **8R4 Evidence that System Continuous Improvement is Effective**

The results identified in 8R1 are evidence that the College's planning for continuous improvement is effective. The College shows a positive enrollment growth, retention rate, graduation rate, and employment rate of graduates. The participation of faculty and staff in the strategic planning process and AQIP Action Projects demonstrates the importance of quality improvement to the College. Category 9R2 discusses the College's moderately high readiness for action planning that was identified in the 2007 Employee Opinion Survey. The College focus on ensuring quality of programs is evidenced by the work of the Curriculum Committee in undertaking the BSN curriculum revision and the Graduate Committee's substantive curricular changes all designed to prepare future graduates to practice in the changing healthcare system. The College's meeting or exceeding the set levels of achievement and performance targets in many measures over the last several years demonstrates the effectiveness of the improvement process.

## **IMPROVEMENTS**

### **8I1 Improving Current Processes and Systems for Planning Continuous Improvement**

The planning process that began in 2003 has become the current model for continuous improvement at the College (See 8P1). In 2003, the College improved its current process for planning continuous improvement by undertaking a formalized strategic planning process using SWOT analysis led by a consultant from the OSFSFMC Strategic Planning department. Up to that time, the College identified long and short-term goals through discussion with faculty and staff. The SWOT analysis provided a process for strategic planning that resulted in the formal 2003-2007 Strategic Plan. This plan was then updated to the current 2005-2010 Strategic Plan.

The College's participation in the AQIP process has provided a focus on quality improvement and processes. AQIP Action Project teams do annual updates to measure accomplishment of objectives. This planning by the team also ensures that objectives for the upcoming year are realistic and needed resources to accomplish the objectives are included in the planning process.

The College's use of Six Sigma process has provided another mechanism for quality improvement. In 2006, all faculty and staff received basic Six Sigma training. Two faculty went on to complete further training. After completing the training, the faculty used the Six Sigma methodology to study the use of standardized testing in the undergraduate program. Based on the project they undertook, the College now administers two standardized HESI examinations, one at the end of the junior level courses and one at the end of the senior level courses. As the College hires a new Assistant Dean of Student Services, a responsibility in the job description is for this person to attend Green Belt Training. This will provide the College with a leader with advanced skills to lead quality improvement processes at the College.

The College also developed a formalized change process that was used to present recommended changes in processes at the College. This process considered the change and its impact on other College processes and the resources needed to implement the change. Evaluation of the change was also built into the process. The foundation for continuous improvement planning has been to build on existing effective strategies and processes, integrate continuous planning processes into work teams, standing committees, faculty teams and set strategies for targeting areas of low performance.

### **8I2 Improvement Targets, Priorities, Communication**

The College sets targets for improvement of its strategic planning processes, based on analysis of current trends, availability of resources, recommendations of AQIP Action Project teams, recommendations from standing committees, assessment data, and feedback from stakeholders.

Communication of priorities and improvements is done through verbal and written reports to the College Board, faculty and staff. The Dean shares information with employees during the Communication Forums and College Senate meetings. Communication with students is done through Student Communication Forums and through Student Senate. Updates are also communicated to students and alumni in the *Student Connection* which is published twice a year and in *Notes from Greenleaf*, the alumni newsletter that is published four times per year. Publication of achievement of annual goals and established goals for the upcoming year is published in the College's *Annual Report*. Changes and updates are also communicated to undergraduate and graduate students through eCollege.

The following are examples of improvements that have been made and priorities that have been identified based on decisions made after analysis of target performance measures. The improvements were developed based on the use of quality improvement planning and processes that support the Mission and Vision of the College.

- In August 2008, the College is holding an all employee and stakeholder strategic planning meeting to review and revise the strategic plan and target measures for the College.
- The College recognizes the need to evaluate the pre-nursing courses that from feeder schools to ensure that they are providing the basis for the nursing major. The Admission & Progression committee has established this as a goal for 2008-2009. The focus of evaluating the foundational courses is linked to improving student learning.
- Two of the current AQIP Action Projects are reaching the final year of the project. The College has scheduled an all employee meeting in May to formulate two new AQIP quality improvement projects. The projects will align with the strategic direction of the College and be incorporated into the Strategic Plan. The focus of one project will be for Category One Helping Students Learn.
- Major improvements in the facility bathrooms on the west end of the building have begun with additional bathrooms on the east end of the building being remodeled and updated in

summer 2008. Plans for upgrading additional areas in the facility are being developed. The building of alternative attractive, affordable housing is being investigated for students. The College recognizes the need to develop a formalized 10 year facility and technology plan.

- Additional graduate programs and degree options are being investigated and planned.
- The development of a capital campaign to raise money for the new building is being developed.
- The RN to BSN program increased its offering of online courses and developed an opportunity for students to receive credit through portfolio review. The RN to BSN students typically are working full-time and attending classes on a part-time basis. This change in course offering and portfolio review contributed to the increased enrollment of RN to BSN students.
- The “Growing Our Own” concept in the Strategic Plan was realized when the College hired six of its own MSN graduates over the last five years as full or part-time faculty.

**Category Nine: Building Collaborative Relationships**

**CONTEXT FOR ANALYSIS**

**9C1-9C2 Key Collaborative Relationships and Mission Reinforcement**

The College enters into key collaborative relationships and partnerships that support the Mission which is to provide nursing education programs at the undergraduate and graduate levels. Figure 9-1 describes the key relationships and partnerships for the College. The figure also provides a description of how the relationships and collaborations support the Mission of the College. The relationships that contribute financial support to student education are critical in that 90% of the students in both programs received some type of financial assistance in 2006-2007.

Figure 9-1 Key Collaborative Relationships and Mission Reinforcement

<b>Relationships and Mission</b>	<b>Examples</b>	<b>Nature of Relationship</b>
<b>State/Federal</b> (Supports Mission to “provide nursing education programs at the undergraduate and graduate level.”)		
State of Illinois	Department of Veterans Affairs, Student Assistance Commission Monetary Award Program, Public Health Nursing	<ul style="list-style-type: none"> <li>• Financial support for student education</li> </ul>
Department of Education	Federal Pell Grant, Federal Stafford Loans, Federal Parent Loans	<ul style="list-style-type: none"> <li>• Financial support for student education</li> </ul>
<b>Educational</b> (Supports Mission to “provide nursing education programs at the undergraduate and graduate level. The primary commitment of the College is to undergraduate and graduate nursing education.”)		
Middle Schools/Area High Schools	<i>Middle Schools:</i> Blaine Sumner, Calvin Coolidge Oak Grove, Tyng, <i>High Schools:</i> Peoria Richwoods, Peoria Notre Dame, Eureka, Canton, Peoria Central, Illini Bluffs, Tremont, Washington	<ul style="list-style-type: none"> <li>• Source of prospective students</li> <li>• Counselor information sessions</li> <li>• Presentations to students on nursing profession</li> </ul>
Colleges and Universities	Illinois Central College, Heartland Community College, Spoon River College, Illinois State University, Western Illinois University	<ul style="list-style-type: none"> <li>• Source of prospective students</li> <li>• Provide liberal arts and science courses to prospective students</li> </ul>
Clinical Agencies	OSFSFMC, Methodist Medical Center of Illinois, Peoria City/County Health Department, Tazewell County Health Department	<ul style="list-style-type: none"> <li>• Provide clinical sites for student learning experiences</li> </ul>
Preceptors for MSN Students	Advanced Practice Nurses in a variety of area healthcare settings Faculty in nursing programs at area colleges and universities	<ul style="list-style-type: none"> <li>• Provide learning experiences for graduate students</li> </ul>
Peoria Educators in Nursing (PENS)	Representatives from 10 nursing programs in Central Illinois	<ul style="list-style-type: none"> <li>• Coordination of usage of clinical sites in Peoria healthcare institutions</li> <li>• Networking and</li> </ul>

		discussion related to issues and trends in nursing education
Educational Assistance	Illinois Central College	<ul style="list-style-type: none"> <li>• Educational assistance to students in areas of math, English, writing, testing</li> </ul>
<b>Community</b> (Supports Mission to “serve the community through participation in health-related activities and organizations.”)		
Community Organizations	Private Industry Council, Peoria Workforce Network, Tri-County Urban League, Susan G. Komen Foundation	<ul style="list-style-type: none"> <li>• Provide opportunities for student recruitment, education &amp; training, financial support, volunteerism and charitable giving</li> </ul>
<b>Business/Industry</b> (Supports Mission to “serve the community by providing competent entry level and advanced practitioners responsive to the changing health needs of society and the health care system.”)		
Employers	OSFSFMC, Methodist Medical Center, OSF Saint Joseph Medical Center, Human Service Center, Illinois Central College, Bradley University, Illinois Valley Community College	<ul style="list-style-type: none"> <li>• Provide opportunity for employment for graduates</li> <li>• Provide financial support for education</li> </ul>
Local Business	Barnes and Noble, Borders, Uniformly Perfect, Uniforms N More	<ul style="list-style-type: none"> <li>• Support services for educational programs</li> </ul>
<b>Donors</b> (Supports Mission to “Provide nursing education programs at the undergraduate and graduate level.”)	Alumni, Friends of the College	<ul style="list-style-type: none"> <li>• Financial support for education, equipment, and special projects</li> <li>• Student recruitment</li> </ul>

**PROCESSES**

**9P1 Creating, Prioritizing, and Building Relationships**

Collaborative relationships and partnerships are identified and developed to help fulfill the Mission of the College which is to provide nursing education to students. Potential collaborative relationships are also identified through the strategic planning process and work on AQIP Action Projects. Contractual agreements are set up with clinical agencies that provide learning experiences for students. Faculty identify and visit a potential clinical site and then complete the Clinical Site Evaluation Tool. If the site is compatible with the Mission and Philosophy and will provide a quality learning experience, the Dean sends an Agency Agreement to the healthcare agency. The Agency Agreements are signed by the College and the clinical agency. All agency agreements are reviewed and renewed annually.

The Associate Dean of the Undergraduate Program is the College representative to the Peoria Educators in Nursing (PENS) meetings which are held three times each year. The major function of the group is to coordinate usage of clinical facilities in the Peoria area. The meetings also provide

opportunity for networking within the nursing education community and discussion of topics relevant to nursing education.

The *Preceptor Handbook* is shared with individuals who serve as preceptors and provide learning experiences for the graduate students. The handbook outlines the responsibility of the preceptor and the student along with providing evaluation forms for both parties to complete. Preceptor contracts are signed and filed with the Associate Dean of the Graduate Program. Letters of agreement are sent to area colleges for those institutions providing educational experiences for graduate students in the educator option. A site evaluation is also completed on these education programs. A Preceptor Appreciation Program is being planned this spring for all preceptors. All preceptors receive a certificate recognizing their contribution to the education of the nursing students.

Through an AQIP Action Project, the collaborative relationship with the Illinois Central College Learning Lab was developed. This collaboration provides remedial help for students in the areas of math, reading, and writing. Each semester the Associate Dean receives a copy of the Learning Lab schedule from the Coordinator of the Lab. The schedule is emailed to all students and faculty. The schedule is also posted throughout the College. Faculty encourage students who are struggling with math, reading, and writing to seek assistance at the Learning Lab.

### **9P2 Meeting the Needs of Those in Relationships**

The College identifies the needs of those in collaborative relationships through open communication and periodic evaluation of the contractual and collaborative relationships. Faculty have open dialogs with administrators, managers, and staff at the clinical agencies. The College hosts a Counselor Luncheon every other year to discuss needs of counselors from area high schools and feeder institutions and provide information on the College and nursing as a profession.

The College entered into a collaborative relationship with the Illinois State University Mennonite College of Nursing in support of a Robert Wood Johnson Grant for The Illinois Prairie Community Foundation (IPCF). Mennonite College of Nursing at Illinois State University and a number of other regional education, healthcare and economic development organizations have combined forces to strengthen Central Illinois' nursing workforce. The Partners in Nursing of Central Illinois (PIN of CI) project focuses on improving nurse retention through enhanced education, faculty development and emphasis on long-term care, to provide literature to area nurses and employers regarding educational opportunities to Private Industry Council, Peoria Workforce Network. The Partners Investing in Nursing' Future program is led by the Robert Wood Johnson Foundation and the Northwest Health Foundation and encourages local foundations such as the College to act as catalysts in developing grassroots strategies to establish a stable, adequate nursing workforce (See [www.PartnersInNursing.org](http://www.PartnersInNursing.org)).

### **9P3 Creating and Building Relationships Within the Institution**

The College builds relationships with the institution in a number of ways. Category Four, Valuing People, speaks to the building of relationships within the College in more detail. The College recognizes a key factor in building internal relationships is communication. Communication is done through department, course, and College meetings, email, and faculty and staff participation at forums, strategic planning and AQIP Action Project teams. Every other year, the College hosts an all employee off-campus meeting with a focus on communication, strategic planning, and quality improvement. All employees are invited to participate and time is arranged for all to attend. The Student Services Support Group meets every other month for communication, improvement of processes related to student services, and to ensure that processes are working as needed.

Employees also participate in a number of informal mechanisms to build relationships. Employee potlucks and celebrations are held on birthdays, holidays, and other special events, such as recognition for completion of doctoral degrees. These provide an opportunity for all employees to socialize together. Acknowledgements of the College Board, Administration, faculty, staff and student awards and achievements are published in the College newsletters, the OSFSFMC publication, and on the intranet.

#### **9P4 Measures of Building Collaborative Relationships**

The College uses admission data to determine effectiveness of relationships with high schools and feeder institutions, medical center, hospitals and College of Nursing faculty. Donor and alumni contributions are monitored in relation to funding sources generated for student education and projects at the College. Ongoing renewal of contractual agreements with clinical agencies is monitored as a measure of effectiveness of the site as a learning experience. Employees of OSF Saint Francis Medical Center complete the Employee Opinion Survey every two years administered by Morehead Opinion Surveys & Consultants as one measure of building relationships within the institution.

### **RESULTS**

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#### **9R1 Results of Building Key Collaborative Relationships**

The results of the collaborative relationships are positive. The College has 57 agency agreements or letters of agreement with outside healthcare agencies and colleges and universities for clinical and practicum learning experiences. Many of these contracts have been long-term. The verbal feedback from the Coordinator of the Illinois Central College Learning Lab is positive. During 2006-2007, students used the tutors in the Learning Lab for assistance with math, English, and research paper development. Employer feedback on alumni surveys is positive (Category 2). In 2006, the College held its first for donor giving. A total of \$22,000 was donated during the Phon-A-Thon to be used towards the development of simulation laboratories. In 2007, Annual Appeal donor giving was \$37,913 which exceeded the College's strategic goal of a 25% increase over the 2006 total of \$15,000. A second Phon-A-Thon was conducted in April 2008 which generated approximately \$13,000. Internal donations through the Employee Above and Beyond giving campaign were \$5,916.42.

The relationship developed with Barnes and Noble and Borders have provided the College with visibility within the businesses via required College textbook displays. Students can use member discounts to purchase required textbooks.

#### **9R2 Comparison of Results with Other Institutions and Organizations**

At the current time, the College does not have benchmark or comparison data for outcomes related to building collaborative relationships. Anecdotal data gathered informally indicates that the relationships are appropriate and positive for all parties involved. The College plans on investigating sources of benchmark and comparison data.

Limited comparative data is available from the Employee Opinion Survey. The College compared to other units within the OSFSFMC on its identified strengths and concerns is shown in 6R2. In the area of Action Planning Readiness the College scored 83 out of 100 which indicates a moderately high readiness for action planning. This is higher than the comparison score which is 77. Scores of 70 or below indicate that the work group would benefit from assistance with the action planning process. The College score of 83 is favorable.

## **IMPROVEMENTS**

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### **9I1 Improving Current Processes and Systems**

Feedback and data collected from collaborative relationships are used to improve processes and systems. The data are used to set strategic goals and identify AQIP Action Projects for the College. This is done by first identifying deficiencies in existing processes and systems. Appropriate standing committees, departments, or AQIP Action project teams are identified that are best suited to improve the processes. The assigned group works on the project then brings the result back to College Senate for approval.

### **9I2 Improvement Targets, Priorities, Communication**

Strategic planning processes and continuous quality improvement through AQIP use the data to identify goals and long-range plans for the College. The College Board, administration, faculty and staff are involved in the strategic planning process. Priorities are set based on the Mission to provide nursing education programs. Communication of priorities is done through verbal and written reports to the Board, faculty and staff. Publication of achievement of annual goals and established goals for the upcoming year is published in the College's *Annual Report*.

The following are examples of improvements that have been made based on decisions made after analysis of assessment and evaluation measures. The improvements were developed to improve building collaborative relationships to support the Mission.

- Results of the Morehead Employee Survey were used to make several changes at the College. The Dean developed a graduated salary scale for faculty based on education and years of experience. This resulted in an increase in faculty salaries. The College Support Representative positions were developed. This position was a change from the previous Receptionist position. Job responsibilities were enhanced, clarified, and changed to be a support to all areas of the College.
- The increased number of alumni involved in the Alumni Association improves this relationship with the College. The Alumni Association has grown to a membership of 90, and has its own Governance Board, bylaws and organizational structure. The College plans on continuing to nurture this relationship to increase the number of alumni involved with the institution as a mechanism for increasing non-tuition revenue for upcoming projects.
- The PENS group is collaborating with a larger group of healthcare workers to develop a standardized agency contract and standardized student orientation program to be used by all nursing education programs and health care institutions. This will standardize the basic healthcare and safety information students need to practice in a healthcare facility, thus eliminating the need for the students to complete the same information orientation at each healthcare facility in which they have learning experiences.

**Glossary of Acronyms**

AACN	American Association of Colleges of Nursing
BSN	Bachelor of Science in Nursing
CNL	Clinical Nurse Leader
CNS	Clinical Nurse Specialist
CSEQ	College Student Experience Questionnaire
DMAIC	Six Sigma Process: Define, Measure, Analyze, Implement, Control
DNP	Doctor of Nursing Practice
HESI	Health Education Systems, Inc.
ICC	Illinois Central College
IDFPR	Illinois Department of Financial and Professional Regulation
MSN	Master of Science in Nursing
NACNS	National Association of Clinical Nurse Specialists
NCA	North Central Association
NCLEX-RN	National Council Licensure Examination for Registered Nurses
NLN	National League for Nursing
NLNAC	National League for Nursing Accrediting Commission
PENS	Peoria Educators in Nursing
OSFSFMC	OSF Saint Francis Medical Center
SONISWEB	Scholastic Online Information System – web based
SOS	Students Offering Support
SPEAOP	Systematic Program Evaluation and Assessment of Outcomes Plan
SWOT	Strengths, Weaknesses, Opportunities, Threats – Strategic Planning activity
WOW	What Outstanding Work

**Index to the location of evidence relating to the Commission's  
Criteria for Accreditation found in  
Saint Francis Medical Center College of Nursing  
Systems Portfolio**

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**Criterion One – Mission and Integrity. The organization operates with integrity to ensure the fulfillment of its mission through structures and processes that involve the board, administration, faculty, staff, and students.**

**Core Component 1a. The organization's mission documents are clear and articulate publicly the organization's commitments.**

- The Mission, Vision, and Philosophy articulate the College's provision of nursing education at both the undergraduate and graduate level. [Institutional Overview O1, 2C1, 8C1]
- The Mission and Vision reflect the College's commitment to excellence in nursing education. [Institutional Overview O1, 2C1]
- Student learning as a lifelong process is aligned with the Mission, Vision, and Philosophy. [Institutional Overview O1, 2C1]
- The Mission, Vision, and Philosophy are readily available and shared with internal and external stakeholders. [1I1, 8C1, 8C2, 8I2]

**Core Component 1b. In its mission documents, the organization recognizes the diversity of its learners, other constituencies, and the greater society it serves.**

- The Mission and Philosophy contain statements related to student learning and being prepared to function in a diverse society. [1C4]
- The College is committed to building a diverse student population. [8C1, 8P5]
- The College provides academic and student support services to meet the diverse needs of the College's learners. [4C1, 6C1, 6P1]
- Distinctive objectives of the College focus on community of caregivers, building relationships, and service to the community. [2C1, 2C2, 2R1, 3P2]

**Core Component 1c. Understanding of and support for the mission pervade the organization.**

- The Mission, Vision, Core Values, and internal and external factors are the driving forces that leadership uses to set the direction of the College. [4P3, 5P1, 5P2]
- The College clearly communicates the mission to students and new employees during Orientation. [Institutional Overview O1, 1C2, 4C4, 4P3, 5P1]
- The Strategic Plan established around the Four Pillars is in alignment with the Mission and Vision of the College. [Institutional Overview O1, 8C1]
- An understanding of the mission of the College is demonstrated through the organizational and governance structures of the College. [Institutional Overview O1, 5C1]
- Leaders communicate the Mission, Vision, and Values of the College through formal communication, electronic communication, communication forums, and formal meetings. [5C1, 5P6]

**Core component 1d. The organization's governance and administrative structures promote effective leadership and support collaborative processes that enable the organization to fulfill its mission.**

- A shared governance structure between the College Board and faculty is central to the College's strategic planning and decision-making processes. [Institutional Overview O1, 5C1]
- Faculty and administration review new programs and major curricular initiatives. New program proposal are submitted to the College Senate and then to the College Board for approval. [1P1, 1P2, 1P8]
- Faculty and administration share responsibility for the integrity of academic processes. [1C1, 1C2, 1P1]

**Core component 1e. The organization upholds and protects its integrity.**

- Ethical policies, practices, and programs are outlined in employee handbooks, Student handbooks, and personnel policies. [1C5, 3P6, 4P3]
- The College maintains a commitment to intellectual freedom, inquiry, and respect. [1C5]
- The College has a formal complaint process and makes efforts to deal with issues and complaints in a timely manner. [3P6, 5C3]
- Processes and procedures are in place to address issues of fairness and equity. [4P3, 5C3]

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**Criterion Two – Preparing for the Future. The organization's allocation of resources and its processes for evaluation and planning demonstrate its capacity to fulfill the mission, improve the quality of its education, and respond to future challenges and opportunities.**

**Core Component 2a. The organization realistically prepares for a future shaped by multiple societal and economic trends.**

- The College conducts a Strategic Planning process that has developed key action plans and tactics. One component is a focus on increasing diversity in the student and faculty demographics at the College. [1C4, 8C1, 8P1, 8P3]
- Based on current trends in higher education and input from students and faculty, the graduate program was developed as a predominantly online program. [1P7]
- The Leadership Team's roles and responsibilities include: coordinating efforts to integrate students support and academic services from inquiry through alumni; exploring trends in health care, nursing, and education to monitor whether the College is current and make recommendations for change to College Senate. [5C1]
- The strategic planning process includes effective environmental scanning. [5P3, 5P4]
- The college supports change and innovation by establishing formal processes to recommend, implement, and sustain change. [5P3, 5P4, 6I1, 7P3]

**Core component 2b. The organization's resource base supports its educational programs and its plans for maintaining and strengthening their quality in the future.**

- All of the faculty at the College are Master's prepared or above. The College also employs part time and adjunct faculty due to increased enrollment [Institutional Overview O5, 4C2, 4C3]

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- The College's strategic planning process to determine faculty capabilities and educational needs for now and the future includes gathering and analyzing of demographic and professional trends. [4C3, 4P4]
- An AQIP Action Project focused on generation of non-tuition revenue to provide additional learning resources for the College. The College also sponsored two Phon-a-Thons to increase alumni giving. [8P6, 8I2]
- Saint Francis Medical Center College of Nursing Library successfully completed the transition from its previous online public access catalog to the new I-Share program managed by the Consortium of Academic and Research Libraries of Illinois (CARLI). I-Share is a library catalog based out of the University of Illinois that provides information about the collections of many Illinois academic and research libraries. [7R1]
- The College has renovated facilities, classrooms to be all smart classrooms, and increased and improved computer technology within the last 7 years. [Institutional Overview O6, 7R1, 8P6]
- Strategic Planning has been streamlined to allow flexibility in the planning process; to efficiently use resources and personnel; to improve communication and to keep the institution focused on the same direction. [8P1]
- As part of the planning process, faculty, staff, standing committees or Action project teams submit funding requests for training initiatives for human resources, strategic initiatives or action plans to the Dean. [4C4, 8P6]

### **Core component 2c. The organization's ongoing evaluation and assessment processes provide reliable evidence of institutional effectiveness that clearly informs strategies for continuous improvement.**

- Key student and stakeholder needs are identified through surveys, standing committees, student forums and Student Senate. [3C1, 3C2, 3P1, 3P2, 4R3, 7P4]
- The Systematic Program Evaluation and Assessment Outcomes Plan (SPEAOP) identifies sources of data gathered to measure accomplishment of program goals and objectives. [5P3, 5P4, 7C2]
- The College has a continuous history of gathering, aggregating and using data for improvements. The selection of data from specific evaluative measures is used to determine the achievement of specific criteria in the SPEAOP. [(7P1, 7P4]
- The College has a comprehensive SPEAOP, an extensive *Annual Report*, and financial audits which are key measure of institutional effectiveness. [7C2]
- The College created a position of Associate Dean of Institutional Research in recognition of the need to collect aggregate data to measure effectiveness and improvement. [7P3]

### **Core component 2d. All levels of planning align with the organization's mission, thereby enhancing its capacity to fulfill that mission.**

- Strategic Planning involves all faculty, staff, Board members and select students which led to the development of the current 2005-2010 Strategic Plan. [1C5, 2P3, 5P6, 9I2]

- Administration, faculty, staff and the College standing committees are involved in both the planning and budgeting. [2P3]
- Strategic Plan is the mechanism that aligns practices with the Institutional Mission, Vision and Values. [5C2, 7P5]
- The Mission, Vision and Values of the College are documented in the Strategic Plan which involves all levels and includes long and short term planning. [8C1, 8C2, 8P2]

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**Criterion Three – Student Learning and Effective Teaching. The organization provides evidence of student learning and teaching effectiveness that demonstrates it is fulfilling its educational mission.**

**Core component 3a. The organization’s goals for student learning outcomes are clearly stated for each educational program and make effective assessment possible.**

- The College identifies student learning objectives for the undergraduate and graduate programs. Faculty create assessment plans to determine student achievement of outcomes. [1C1, 1C2, 1P1]
- Assessment of student achievement uses a variety of indirect and direct measures at both the individual and program level. [1P11, 1P13, 1R1, 1R2]
- The Systematic Program of Evaluation and Assessment of Outcomes Plan (SPEAOP) was developed by faculty. The plan identifies levels of achievement, assessment measures, and persons responsible for the measurement. [1C1, 1P1, 1P11, 1P13]
- Faculty and staff participate in development of the assessment plan through participation on the Curriculum, Graduate, and Evaluation committees. [1C2, 1P1]
- The College uses assessment data to review effectiveness of processes related to student learning and improve student learning activities. [1P11, 1P12, 1I1, 1I2]

**Core component 3b. The organization values and supports effective teaching.**

- Faculty determine course content and goals for assessment of student learning. All new programs and revised curriculum goes through a series of formalized steps before the approval of the College Senate. [1P1, 1P2, 1P8]
- Faculty are evaluated annually to ensure quality teaching, are encouraged to develop personal development goals that align with the Strategic Plan, and are recognized for quality teaching. [1C5, 4P5, 4P6]
- The College’s support of effective teaching is evidenced by the financial support for attendance at conferences and workshops and the strengthening of the faculty orientation program including a series of programs throughout the year related to improving teaching and student learning. [4C4, 4P4]

**Core component 3c. The organization creates effective learning environments.**

- The College strives to create a climate that respects the needs of learners from all backgrounds and recognizes the need for services to help students be successful. [1C4, 1P7, 1P9]
- The College has an early student contact academic advisement program to assist students in developing their plan of study. [1P5, 1P7 2R1, 3R1]

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- The College focused on developing a plan to improve learning environments by incorporating Meds Publishing across the curriculum, developing a simulation plan, and opening a new state-of-the-art Nursing Resource Center. [1P6, 1P12]
- The College continues to expand e-learning opportunities to enhance effective learning environments for students. [1C3]
- The College monitors student preparedness through results of licensure examinations and surveys after graduation. [1P13, 1R2]

### **Core component 3d. The organization's learning resources support student learning and effective teaching.**

- The Colleges' support services reinforce student learning and accomplishing other distinctive objectives because of the importance the College places on building relationships with stakeholders. [1P9, 1R3, 2C1, 2P3, 2R1]
- The Library has developed an Information Literacy program for students to provide students the skills they will need related to information literacy. The program is linked to courses and assignments. [1P9, 7R1]
- The College has support for students-at-risk through assistance with test-taking, test anxiety, Peer teaching, academic advisement, and preparation for the NCLEX-RN examination. [1C4, 1P3, 1P6, 1P9, 1I2]
- Budget priorities reflect the Mission of the College to provide undergraduate and graduate nursing education. [8P6]
- The College collaborates with a number of other institutions to provide quality learning experiences and assistance for students. [Institutional Overview O4, 9C1, 9C2, 9P1]

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### **Criterion Four: Acquisition, Discovery, and Application of Knowledge, The organization promotes a life of learning for its faculty, administration, staff, and students by fostering and supporting inquiry, creativity, practice, and social responsibility in ways consistent with its mission.**

#### **Core Component 4a. The organization demonstrates, through the actions of its board, administrators, students, faculty, and staff, that it values a life of learning.**

- A life of learning is aligned with the College Mission, Vision, Philosophy, and Goals of the College. [Institutional Overview O1, 1C2]
- Undergraduate and graduate program objectives emphasize personal and professional role development. [1C1]
- The College promotes a learning climate that encourages intellectual freedom, discussion of diverse ideas, and intellectual inquiry. [1C1, 1C4, 1C5]
- The faculty is investigating the possibility of offering a Neonatal Nurse Practitioner Program and is preparing a report to the Higher Learning Commission for addition of the Doctor of Nursing Practice option. [2C1, 4P4].
- The College received the Spalding School Award from the Catholic diocese of Peoria in recognition of its long history of providing quality nursing education in the Peoria Diocese. [Institutional Overview O1]

**Core Component 4b. The organization demonstrates that acquisition of a breadth of knowledge and skills and the exercise of intellectual inquiry are integral to its educational programs.**

- A group of faculty headed by the Associate Dean of the Graduate Program is developing a formal process and plan to increase participation in scholarly activities amongst the faculty [2I2]
- Faculty development opportunities and the sabbatical policy provide faculty the opportunity to receive a leave to focus on development of knowledge and learning. [4C4, 4P7]
- Two of the College Goals which were developed by the faculty were: to provide the essential foundation for graduate study in nursing and foster the commitment to personal and professional growth and accountability. [Institutional Overview O1, 1R1]
- The College analyzes results from multiple data sources such as the HESI Exit Exam, NCLEX-RN licensure pass rates and GPA of graduating students to determine achievement of learning outcomes, preparation for employment and further education of BSN students. [1P9, 1P13, 1R1, 1R2]
- The College integrates general education courses into the undergraduate program. The requirements of the BSN prenursing curriculum incorporate the General Education Core Curriculum adopted by the Illinois Board of Higher Education. [1P1, 1P13]
- Certification rates and employment data demonstrates that the learning outcomes of the graduate program provide the knowledge and experience needed for successful practice [1P12, 1R2]

**Core Component 4c. The organization assesses the usefulness of its curricula to students who will live and work in a global, diverse, and technological society.**

- The College prepares students for a diverse world by incorporating concepts of diversity and culture in nursing courses. Students study and provide nursing care for clients from diverse backgrounds and consider cultural, religious and ethnic backgrounds of the patients. [1C4]
- The College uses a variety of data sources to assess the needs of students and alumni. Feedback from these key groups is considered when making changes in academic programs. [1P6, 1P13, 1R1, 1R2]
- The Curriculum and Graduate committees do program review to ensure course currency and effectiveness. The programs are externally accredited by the National League for Nursing Accrediting Commission. [Institutional Overview O1 and O4, Institutional Overview O4]

**Core component 4d. The organization provides support to ensure that faculty, students, and staff acquire, discover, and apply knowledge responsibly.**

- Academic and support groups contribute to students' development of skills and knowledge by providing services within the learning environment. [6C1, 6C2]
- Ethical practices are ensured through the joint development and implementation of the College Core Values. [4P3, 5C3]
- The College created, disseminated, and enforces intellectual property rights. [1C5]
- The Research Committee provides oversight and support services to ensure integrity of research conducted by student and faculty. [5C1]

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- Learning support is provided to students through the cooperative agreement with Illinois Central College that provides students access to the Learning Lab for assistance with English, writing, and math and through the Peer Teaching program. [1P9, 9C1, 9C2]
- Money is allocated by the Dean in the annual budget for faculty and staff development. Faculty and staff are encouraged to attend national workshops and conferences. [2R1, 4C4,4P4]
- The Library provides instruction and support to faculty, staff and students through the Information Literacy program, information resources, information technology and management. The Library has become a member of the Consortium of Academic and Research Libraries of Illinois (CARLI) which provides students information and access to research libraries throughout Illinois. [1P9, 16R, 7R1]

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**Criterion Five: Engagement and Service. As called for by its mission, the organization identifies its constituencies and serves them in ways both value.**

**Core Component 5a. The organization learns from the constituencies it serves and analyzes its capacity to serve their needs and expectations.**

- Saint Francis Medical Center College of Nursing regularly solicits feedback from stakeholders and carefully considers their satisfaction when making changes. [1R2, 6I1]
- The College uses multiple methods of data collection to identify needs. [3P1, 5P3]

**Core Component 5b. The organization has the capacity and the commitment to engage with its identified constituencies and communities.**

- Saint Francis Medical Center College of Nursing actively participates in collaboration with other institutions of higher learning. [Institutional Overview O4, 9C1, 9C2]
- The College widely distributes both the campus newsletter and Annual Report to constituents. [3P4]
- The College encourages feedback from the student body. [3P, 5C1]
- Feedback from employees is regularly gathered and used to improve the institution. [2P3, 3P4, 5C1)

**Core Component 5c. The organization demonstrates its responsiveness to those constituencies that depend on it for service.**

- The College increased enrollment to meet the increasing work force needs. [Institutional Overview O3, 4C3]
- The College demonstrates its commitment to building relationships with students through the AQIP action project that targeted identified student services needs. [2C1, 2R1, 3R1]
- Curriculum changes are being driven by the needs of our constituencies. [1P2, 1P8, 8R4]
- Processes are in place to assist with employee retention as a Valuing People initiative [4P2, 4P7, 4P9, 4R1]

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- The Four Pillars of the Strategic Plan guide the College in serving our constituencies. [Institutional Overview O1,8C1,8P1, 8P2, 8P3, 8P4]

### **Core Component 5d. Internal and external constituencies value the services the organization provides.**

- Accomplishments of constituents are recognized by the organization. [2P2]
- Results of the employee satisfaction survey and retention rates of faculty and staff show a high level of satisfaction with the College. [4R1, 4R2]
- Student success shows the College is accomplishing its mission. [2R1, 4R3, 8R1]
- Results of employer surveys indicate a high degree of satisfaction with the graduates of the College of Nursing. [1R2]
- The College maintains ongoing relationships with a number of educational and healthcare institutions. [Institutional Overview O4, 9R1, 9R2]