Expected Outcome 1: Clinical Prevention and Population Health

SON students will demonstrate clinical prevention and population health skills as evidenced by their performance in the community intervention project and their scores on health promotion and maintenance categories on National Council Licensure Exam Registered Nurse (NCLEX-RN).

Assessment Method 1: Community Intervention Project

Assessment Method Description

In the second semester of the professional program, students in groups of 3-4 study a disease state from a broad health perspective. In the third semester (NURS 3340), students are assigned to a specific community in which they explore this same disease state through a community assessment. Based on this assessment, student groups design and implement a community intervention project. The course members grade the project and presentation based on the attached rubric. This project is 30% of the course grade. Student outcomes of this project are documented in the course notebook and reported at the annual evaluation retreat.
Findings
118 students participated in these projects, 5 faculty participated in the evaluation. Grades ranged from 94-100. In cases where points were deducted, they were generally deducted from sections on the community assessment or related to professional writing.

How did you use findings for improvement?
Faculty are discussing ways for more differentiation in grading of these projects.
Assessment Method 2: Health Promotion and Maintainence NCLEX Catetories

Assessment Method Description
The SON purchases an Annual NCLEX report from Mountain Measures Incorporated. This report gives a breakdown of AUSON graduates performance in many areas, one being Client Need Categories which includes health promotion and maintenance. Health Promotion and maintenance is defined as the nurses' ability to provide and direct client care in terms of prevention/early detection of client health problems as well as strategies to achieve optimal health. The Associate Dean receives the annual reports, reviews and discusses results across all categories with the Curriculum Committee, and when indicated with the faculty at the Annual Evaluation Retreat. The benchmark is "AUSON graduates percentile rank will be 50 or higher when compared with schools in our jurisdiction."

Findings
This year, 99 graduates were included in the Annual NCLEX Report, which includes all graduates who took the NCLEX between April 1, 2012 and March 30, 2013. The results are reported in percentile ranks, which compare our graduates to graduates in our jurisdiction. Our students scored in the 58th percentile rank on Health Promotion and Maintenance, meaning the median AUSON graduate did as well or better than 58% of graduates in our jurisdiction. Of the 8 client need categories, health promotion and maintenance was the highest, with other percentile ranks ranging from 45 (pharmacological and parenteral therapies) to 56 (Physiological Adaptation).

How did you use findings for improvement?
We will continue to emphasize health promotion and maintenance as a major component of clinical courses.

Additional Comments

Expected Outcome 2: Communication
SON students will be able to communicate effectively as evidenced by their performance on a written scholarly paper and Health Education Systems Incorporated (HESI) Exit Exam (v 1) therapeutic communication and interprofessional communication scores.

Assessment Method 1: Scholarly Paper NURS 3110

Assessment Method Description
The NURS 3110 professional paper develops written communication skills by requiring a systematic review of professional literature and organization of concepts to create a relevant professional paper. The paper is 5 double-
Course Faculty grade the paper guided by a rubric (100 point scale) that is posted via Canvas prior to the assignment due date. The rubric consists of categories on each section of the paper (see attached rubric). Through bonus points, students are encouraged to collaborate with the Miller Writing Center. Students receive informal feedback from faculty one on one as they are developing their papers and also receive guidance in class. Student outcomes are documented in the course notebook and reported at the Annual Evaluation Retreat.

The benchmark is that all student's will score 73 or higher on their paper.

### Professional Paper Rubric

<table>
<thead>
<tr>
<th>Writing Guidelines</th>
<th>Point Distribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Introduction: Include why this topic is important to Auburn University college students and the prevalence of disease/condition. 15 points</td>
<td>0 to 5 points = no or poor introduction. 6-10 points = some introduction; nothing beyond a forecast. 11-15 points = introduction grasps reader’s attention (engages the reader) and forecasts major points</td>
</tr>
<tr>
<td>2. Definitions of key concepts: Include of references and addressed from a “lay person” perspective. 15 points</td>
<td>0-5 points = no or poor articulation of thesis. 6-10 points = some articulation of thesis 11-15 points = clear articulation of thesis or argument.</td>
</tr>
<tr>
<td>3. Prevention and management of disease: Include what areas the patient could self-manage disease or condition. 15 points</td>
<td>0-4 points = little or no use of examples. 5-9 points = some use of examples or evidence, but not consistent; no examples or evidence in places where they are needed. 10-15 points = frequent or consistent use of examples and evidence; example or evidence appears whenever the reader asks, “For instance?”</td>
</tr>
<tr>
<td>4. Involvement of health professions: Include what treatments or screenings are performed by health professions and any aspects of help/assistance provided by the health professional community. 15 points</td>
<td>0-4 points = little or no use of examples. 5-9 points = some use of examples or evidence, but not consistent; no examples or evidence in places where they are needed. 10-15 points = frequent or consistent use of examples and evidence; example or evidence appears whenever the reader asks, “For instance?”</td>
</tr>
<tr>
<td>5. Summary: Summarize points made in paper and include a helpful organization or websites that would be helpful for readers to acquire more information. 10 points</td>
<td>0-3 points = no or poor conclusion or summary of argument. 4-7 points = some summary of points made, but nothing beyond summary; no broad conclusions/lessons. 8-10 points = a conclusion going beyond summary of what was written in the body of the essay.</td>
</tr>
<tr>
<td>6. References: Strict adherence to APA format and “professional” level sources in both body and reference page. 15 points</td>
<td>0-5 points = lack of adherence to APA. 6-10 points = occasional errors; repetition of errors. 11-15 points = strict adherence to APA format to support the body references and cited references.</td>
</tr>
<tr>
<td>7. Miller Writing Center: Documentation via 30 minute appointment consultation. 5 points</td>
<td>Documentation via e-mail by writing center (you have to fill the form out to request this service) YES NO</td>
</tr>
<tr>
<td>8. Library Collaboration: Documentation of detailed outline with search citations to librarian. 10 points</td>
<td>Send to: <a href="mailto:noenanc@auburn.edu">noenanc@auburn.edu</a></td>
</tr>
</tbody>
</table>

| TOTAL POINTS POSSIBLE: 100 |
| TOTAL POINTS: |

Comments:
**Findings**
Fall Semester 2012 (64 students) and Spring Semester 2013 (54 students) scores ranged from 74%-100%. Categories on the rubric varied slightly in the two semester cohort groups. The fall semester cohort students scored lower (4-8 points/10 points) on documentation of detailed outline with search citations. Spring cohort students scored lower on APA guideline adherence (2-5 points/15 points). Modal scores were 84-86 and 90-92 respectively.

**How did you use findings for improvement?**
Improvements were made in modifying the rubric and shifting weight measures of point distribution for the different rubric categories. Additional faculty support was given to providing examples of APA sources and changing delivery style of the librarian exercise. The rubric is evaluated each semester to modify and improve related to student feedback and performance.

**Additional Comments**

**Assessment Method 2: Exit exam communication scores**

**Assessment Method Description**
In their final semester, every student is required to take the HESI exit exam, a nationally normed exam that predicts NCLEX success. This is a 150 item test that includes questions that assess student competency in many areas including therapeutic communication and interprofessional communication. The Curriculum Committee tracks and trends data related to student outcomes on the exit exam and reports findings at the Evaluation Retreat.

A average HESI Score (a statistically calculated score that indicates readiness for the NCLEX) of 850 is the SON benchmark for the communication scores.

**Findings**
In Spring of 2013 54 students took the exit exam. The interprofessional communication score was 969 (27 items) and the therapeutic communication score was 957 (17 items).

In Summer of 2013 47 students took the exam. The interprofessional communication score was 1010 (62 items) and the therapeutic communication score was 938 (17 items)

**How did you use findings for improvement?**
These end of curriculum test scores indicate students are developing skills in communication. A communication lab was implemented two years ago in response to lower scores.

**Additional Comments**
Expected Outcome 3: Critical Thinking and Clinical Judgment

Nursing students will be able to apply critical thinking/clinical judgment in the care of patients as evidenced by findings on the AUSON Clinical Evaluation Tool (CET) and the results in the nursing process categories reported in the annual NCLEX Program Report.

Assessment Method 1: Clinical Evaluation Tool

Assessment Method Description
In every clinical course, students are evaluated by their clinical instructor with the AUSON Clinical Evaluation Tool (CET). The CET has 7 behaviors directly related to Critical Thinking and Clinical Judgment that students are evaluated with every clinical rotation. Clinical instructors rate students on a 0-3 scale (with 0 meaning does not meet standards, and 3 meaning exceeds expected standards). The results of this tool are reported to the course leader and reviewed by course members at team meetings that take place at the end of every semester. The course team summarizes findings, which are reviewed by all faculty at the annual evaluation retreat.

Further, this year, the associate dean randomly selected 1/3 of the graduating class and compared ratings in the 7 critical thinking/clinical judgment behaviors on the CET of the first semester to the CET of the final semester. Qualitative comments were also reviewed for themes or patterns.

The expected benchmark is: "Overall, analysis of the CETs will demonstrate a progressive improvement in clinical judgment/critical thinking in both the scoring of behaviors and in analysis of qualitative comments."

Findings
Course summaries reported at the evaluation retreat in August of 2013 suggested progressive improvement in critical thinking and clinical judgment as students advance through the curriculum.

The analysis of the results of the CETs from the first semester compared to the CETs from the final semester supported improvement in the skills area of critical thinking/clinical judgment. For this analysis, the associate dean randomly pulled the files of 33 students that graduated in 2013. (There were 100 graduates total).

A review of the qualitative comments related to critical thinking and
clinical judgment on these 33 CETs revealed in general a lack of comments from instructors related to this outcome. The few comments made revealed that in the first semester, student critical thinking revolved around asking questions and assessment skills. In the final semester, comments focused on student's ability to apply knowledge at the bedside.

The rating on each of the behaviors was recorded with the following results:

**Critical Thinking and Clinical Judgment**

The student will:

<table>
<thead>
<tr>
<th></th>
<th>Practice critical thinking and clinical judgment in the delivery of safe, high quality care for individuals and their families across the health-illness continuum across the lifespan as evidenced by:</th>
</tr>
</thead>
<tbody>
<tr>
<td>a.</td>
<td>Identifies action and rationale for prescribed medications and treatments.</td>
</tr>
<tr>
<td></td>
<td>In the first semester, 31 students scored &quot;2&quot; meets expectations, 2 scored &quot;3&quot; exceeds expectations</td>
</tr>
<tr>
<td></td>
<td>In the final semester 16 scored &quot;2&quot; and 17 scored &quot;3&quot;</td>
</tr>
<tr>
<td>b.</td>
<td>Performs skills and assessment correctly maintaining client and nurse safety.</td>
</tr>
<tr>
<td></td>
<td>First semester 32 scored '2', 1 scored '3'</td>
</tr>
<tr>
<td></td>
<td>Final semester 10 scored '2', 23 scored '3'</td>
</tr>
<tr>
<td>c.</td>
<td>Gathers appropriate data for assessment.</td>
</tr>
<tr>
<td></td>
<td>First semester all students scored '2'</td>
</tr>
<tr>
<td></td>
<td>Final semester 11 scored '2', 22 scored '3'</td>
</tr>
<tr>
<td>d.</td>
<td>Identifies appropriate nursing diagnoses, goals, and outcome criteria.</td>
</tr>
<tr>
<td></td>
<td>First semester all students scored '2'</td>
</tr>
<tr>
<td></td>
<td>Final semester 10 scored '2', 23 scored '3'</td>
</tr>
<tr>
<td>e.</td>
<td>Recognizes pathological processes and problems when they arise, and intervenes appropriately.</td>
</tr>
<tr>
<td></td>
<td>First semester all students score '2'</td>
</tr>
<tr>
<td></td>
<td>Final semester 11 students scored '2', 22 students scored '3'</td>
</tr>
<tr>
<td>f.</td>
<td>Calculates medication dosages by all routes accurately.</td>
</tr>
<tr>
<td></td>
<td>First semester 25 students scored '2', 2 students score '3', 6 students N/A</td>
</tr>
<tr>
<td></td>
<td>Final semester 11 students scored '2', 22 students scored '3'</td>
</tr>
<tr>
<td>g.</td>
<td>Administers medications by all routes safely and efficiently.</td>
</tr>
<tr>
<td></td>
<td>First semester 26 students scored '2', 1 student scored '3', 6 students N/A</td>
</tr>
<tr>
<td></td>
<td>Final semester 14 students scored '2', 19 scored '3'</td>
</tr>
</tbody>
</table>
See Appendix A for Clinical Evaluation Tool.

**How did you use findings for improvement?**
The comparison of the first and final semesters of the CETs of a random 1/3 of 2013 graduates confirmed what has been our impression based on course summaries for many years, i.e. the outcome skills in critical thinking and clinical judgment improve as students progress through the curriculum.

The weakest area was "Identifies action and rationale for prescribe medications and treatments". This finding was discussed with faculty and clinical instructors, the consensus being that this is a high level skill that is more difficult for students to attain.

However, based on the finding that there were very few comments specifically addressing this skill, the CET will be revised to have a section for comments following each outcome area.

**Additional Comments**

**Assessment Method 2:** Nursing Process Categories Reported on NCLEX Program Reports

**Assessment Method Description**
The SON purchases an Annual NCLEX report from Mountain Measures Incorporated. This report gives a breakdown of AUSON graduates performance in many areas, one being Nursing Process Categories. The Nursing Process is the traditional method utilized in teaching critical thinking at the bedside. The Associate Dean receives the annual reports, reviews and discusses results across all categories with the Curriculum Committee, and when indicated with the faculty at the Annual Evaluation Retreat.

The benchmark is "AUSON graduates percentile rank will be 50 or higher in all categories of the nursing process when compared with schools in our jurisdiction."

**Findings**
This year, 99 graduates were reported on in the Annual NCLEX report, which includes all graduates who took the NCLEX between April 1 2012- March 30 2013. The results are reported in percentile ranks, which compare our graduates to graduates in our jurisdiction.

The five categories of the Nursing Process results were:
Assessment- 44th percentile rank, meaning: In this time period, the median AUSON graduate did as well or better than 44% of the graduates in our jurisdiction.
Analysis- 32nd percentile rank
Planning- 42nd percentile rank  
Implementation- 47th percentile rank  
Evaluation- 41st percentile rank  

These findings fell short of our benchmark in all categories and are lower than results for 2012 which were 58,66,64,53,55. This percentile ranking system is one where higher percentile rank suggests a better performance.

**How did you use findings for improvement?**
The graduates in this reporting period had a 100% NCLEX pass rate, so these results are being studied for meaning as well as possible causes and appropriate responses.

**Additional Comments**

**Expected Outcome 4: Diversity**
School of nursing students will demonstrate knowledge related to human diversity in delivering patient care as evidenced by results reported on the exit survey from Educational Benchmarking Incorporated (EBI) and performance reported in the senior electronic portfolio (e-portfolio).

**Assessment Method 1:** Exit Survey

**Assessment Method Description**
The AUSON utilizes the services of a national benchmarking corporation, EBI to assess many components of student learning, including diversity (viewed as a professional value). The EBI Exit Survey is administered to students prior to graduation during the last day of class. It is an online survey. Exit surveys are collected twice a year by the Evaluation Committee Chair (Spring and Summer graduating classes) and analyzed in aggregate in May of each year. In 2013, there were 96/98 (98%) respondents. Results are analyzed by the Evaluation Committee and reported at the Annual Evaluation Retreat.

Two questions on the EBI exit survey are examined by the Evaluation Committee to assess students ability to apply concepts of cultural diversity. Those two questions focus on the student’s perceptions of their ability to provide culturally competent care and cultural diversity as part of understanding the global health care environment. They are:
Findings
The AUSON benchmark is: AUSON student's mean will be higher than the mean of the select 6 comparison group. The select 6 is a group of aspirant institutions; the aggregated results of these 6 institutions is reported as the select 6 mean. Student respond to questions on a scale of 1= not at all, to 7= extremely.

To what degree did the nursing program teach you to: provide culturally competent care? AUSON- 6.22 (Select 6- 5.92)

To what degree did the nursing program teach you to: understand the global health care environment? In this question, students ranked themselves at 5.96 (Select 6-5.42)

Ranges of AUSON means on other components in this survey were 5.31-6.22.

How did you use findings for improvement?
Although outcomes are met, diversity is an important concept for nurses and nursing, therefore program improvements are evolving such as increasing student exposure to diverse patient groups in community/population health courses and simulated environments. AUSON has also continued to seek additional international experiences with Africa, Ecuador, and Bolivia. National experiences include caring for the veteran population and for people in rural settings.

Additional Comments

Assessment Method 2: Senior e-portfolio

Assessment Method Description
As part of the senior e-portfolio, students write a reflective narrative, typically 250 – 500 words for each one of the six outcome skills areas: (Communication and Collaboration, Critical Thinking and Clinical Judgment, Scholarship for Evidence Based Practice, Clinical Prevention and Population Health, Diversity, and Leadership).

The specific outcome objectives related to Diversity are which students address in their reflective narrative are:
Nursing students will:
1) Demonstrate a wide range of knowledge, skills and attitudes including cultural awareness, humility, sensitivity and competency.
2) Incorporate holistic assessments, awareness of values and spiritual beliefs in the delivery of quality patient and family centered, evidence-based care of diverse and vulnerable populations.
The faculty teaching NURS 4920 Senior Preceptorship evaluate the portfolios with the attached rubric and also analyze the narrative statements for themes and patterns in each of the 6 outcome areas including diversity. Results are summarized in the course notebooks and the Evaluation Retreat.

Findings

Benchmarks include all students will score 80 or higher on the portfolio and that qualitative analysis will reveal themes suggesting development of diversity skills in our graduates.

Six faculty analyzed the eportfolios Spring Semester, four faculty analyzed the eportfolios for summer semester.

For the curricular outcome Diversity Skills, one consistently recurrent theme is sharing of communication challenges with patients who do not have English as the 1st language. The students must use available resources and also rely on their own critical thinking skills to find ways to communicate with the patient and families. Students learn how resourceful they are and how important it is to communicate clearly and concisely, even with patients who do not speak their language. Another emerging pattern among the reflective writing is evidence of student development of cultural sensitivity and awareness. Students interact with a wide range of cultures and socioeconomic levels and write about how the experiences open their eyes to a world beyond what they have experienced thus far. Students may visit rural health clinics, senior health centers or public schools and through their reflection of the experience, we note they recognize the importance of cultural competency in order for them to provide evidence-based care.

Strength: It is apparent that many students recognize that “diversity” goes beyond a person’s skin color or ethnicity. Students attach a variety of documents within their ePortfolio that include experiences and/or assignments related to underserved populations (e.g., community assessment, low-income housing authority, rural school systems), international experiences (e.g., service learning in Ecuador, Malawi), and sharing individual experiences related to taking care of patients/families from diverse religious, cultural, and social belief systems that may deviate from their previous experiences and personal beliefs.

Weakness: While the eportfolio attachment provides documentation of the student’s example of how they achieved the Diversity Outcome Ability, it is their narrative reflection that provides a deeper level of understanding of their ability to connect the experience with genuine growth in attaining the diversity skills required in professional nursing. This reflective connection is often missing or poorly communicated among some students. Thus, faculty assessment must also include a multi-level approach to assessing student attainment of diversity skills that go beyond content alone, but to identify the student’s ability to connect personal relevance to the essence of diversity.
skills that will continue throughout their professional career.

**How did you use findings for improvement?**
Under the leadership of senior faculty, the faculty in this course have met to discuss ways to help students go beyond content alone to identify their ability to connect personal relevance to the essence of diversity skills and how this will continue throughout their professional career.

**Additional Comments**

**Expected Outcome 5: Leadership**
SON students will demonstrate leadership abilities as evidenced by their performance on the nursing unit assessment project and the results from the employer survey on questions related to leadership skills.

**Assessment Method 1: Nursing Unit Assessment Project**

**Assessment Method Description**
In NURS 4810 Leadership in Microsystems student teams present a Nursing Unit Assessment. This project reflects understanding of application of various leadership principles such as conflict resolution and national patient safety goals. The presentation is graded by the course faculty using the Nursing Unit Assessment and Presentation Guide and by the team members using Nursing Unit Assessment Team Evaluation Guide. (See attached Rubrics). The presentations are evaluated by the course leader. The presentation is 10 % of the course grade.
# Nursing Unit Assessment & Presentation Grade Tool

**Facility:**

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## Criteria

<table>
<thead>
<tr>
<th>FOR YOUR UNIT:</th>
<th>Possible Points</th>
<th>Points Earned</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Identify mission/vision/goals; describe unit CULTURE</td>
<td>5</td>
<td></td>
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<tr>
<td>Give example of ONE conflict resolution strategy utilized by the nurse manager</td>
<td>10</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Describe ONE National Patient Safety Goal targeted on the unit and provide data.</td>
<td>10</td>
<td></td>
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<tr>
<td>Identify financial issues currently facing the unit</td>
<td>10</td>
<td></td>
<td></td>
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<tr>
<td>Identify one need for change on the nursing unit. Identify driving and restraining forces. Identify challenges facing the Unit</td>
<td>10</td>
<td></td>
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<tr>
<td>Describe how nurses assure 'patient centered care'</td>
<td>10</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Identify 'continuous quality improvement' measures</td>
<td>10</td>
<td></td>
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<tr>
<td>Describe how the unit manager's leadership skills influence team building and management.</td>
<td>10</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Current recruitment and retention efforts Identify attrition rates; Describe staffing process (nursing workforce)</td>
<td>10</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Team Presentation
Grade tool filled out and submitted Interesting, concise, within time limit. Professional appearance & behaviors. Technology appropriately utilized

### Learning Team Evaluations
Deterministic: 5

---

**Team**

1. 
2. 
3. 
4. 
5. 
6.

**Faculty**
Findings

101 students in teams of 3-4 were evaluated this year. The presentation scores were strong, ranging from 90-100 with a mean of 97.

How did you use findings for improvement?
The quality of presentations were excellent; various technologies were used and principles of evidence based practice were applied. Knowledge of in-depth leadership concepts was apparent.

Additional Comments
Assessment Method 2: Employer Surveys

Assessment Method Description
Employer surveys (see attached survey- Appendix B) are sent to employers of our graduates 12 months post- graduation based on information related to employment we collect from students as they graduate. Employer surveys are an internal document generated and managed by the evaluation committee chair person. These surveys include demographic information on the institution, determining the number of graduates that have been employed during the last year at the institution, the healthcare setting (acute-care, long-term care, etc.), the clinical areas the nursing graduate was hired in the last year (medical-surgical, obstetrics, mental health, pediatrics, etc.), and the status of hours, such as full-time or part-time. This survey also asks specific questions related to each of our student outcome areas including leadership. Results from the employer survey are tracked by the Evaluation Committee and reported at the Annual Evaluation Retreat.

Findings
Thirty surveys were sent this year with a return rate of 40% (12 surveys were returned).

Employers surveys benchmark is that employers of AUSON graduates will be satisfied as evidenced by 85% will rate graduates at a 4 or higher on a 1-5 scale on all questions pertaining to leadership. Scale components are 5= very well prepared; 4= satisfactorily prepared; 3=somewhat prepared; 2= poorly prepared; and 1= not prepared at all. The following three questions directly relate to leadership skills in our students.

1) Utilize management principles (such as time management, effective organizational skills, ability to complete tasks effectively and within reasonable length of time)
2) Provide leadership in client care (such as delegating appropriately, promoting team building, role modeling professional behaviors in communication with patients, staff and interdisciplinary team members, able to participate in conflict resolution)
3) Assess the effect of health care policy on health care delivery(such as HIPPA, health disparities, obesity, smoking, disability, lack of health insurance, coverage for mental health services, health care quality, etc.)

On all three of these questions, ninety-one percent of employers rated our graduates at 4 (satisfactorily prepared).

How did you use findings for improvement?
We will continue to emphasize leadership in all of its components (bedside care, health policy, organizational roles, ethical behavior and etc.) in our
We devote three courses (two theory and one clinical) to leadership concepts. Given the complexity of health care, desired outcomes require this focus on leadership.

We are exploring methods to improve response rates from employers.

Additional Comments

Expected Outcome 6: NCLEX Results
SON graduates will pass the RN-NCLEX Licensure exam. The percentages of AUSON graduates passing the exam will exceed the percentage of graduates in the state passing the exam.

Assessment Method 1: Review of NCLEX report

Assessment Method Description
The Alabama Board of Nursing tracks student performance on NCLEX for all Alabama Schools of Nursing and submits quarterly reports to each school. The Associate Dean reviews the reports and compares AUSON to the state average.

Findings
For the time frame 10/1/12-9/30/13, the Board of Nursing reports that 89 AUSON students sat for the exam and 81 students passed. No other information about student scores is given (ie the test is pass/fail, no averages or ranges etc. are included). In Alabama during this time period 3442 graduates took the exam and 2905 passed (84.4%)

How did you use findings for improvement?
For three of the last 4 years, AUSON has had a 100% pass rate, so although our students out performed students in the state and nationally, this does represent a drop for us. The NCLEX increased its passing standard, therefore faculty have attended workshops that discuss the increased rigor and ways to prepare student and are incorporating what they have learned into their teaching and testing of students. For example, faculty are including more select all that apply questions on tests, as this is something students are seeing more of in NCLEX.

Additional Comments
**Expected Outcome 7: Scholarship for Evidence Based Practice (EBP)**

SON students will demonstrate scholarship for EBP skills as evidenced by their performance in the EBP Project and HESI Exit Exam Scholarship for EBP scores.

**Assessment Method 1: EBP Project**

**Assessment Method Description**

NURS 3220 includes an evidence based practice group project where small groups of students analyze available evidence to address a specific clinical question and present their findings at a professional meeting with a professional poster. The project is 25% of the course grade (with the paper being 75% and the presentation being 25% of that grade). The paper for the project is evaluated by the course faculty and the poster presentation is evaluated by SON faculty attending the professional meeting. The attached rubrics are used to guide assessment of the EBP project. Results are reported in the course notebooks and at the annual evaluation retreat.

See Appendix C for EBP Project Rubric.

**Findings**

The SON expected outcome is that all student will score 80% or higher on the EBP project.

In Fall of 2012, there were 54 students with a range of scores 80-99 (mean 91.2; 70% A's, 30% B's). In Spring of 2013, there were 62 students with a range of scores of 84-96 (mean of 91.3, 66% A's, 46%)

**How did you use findings for improvement?**

This finding is consistent with findings in the past, ie fall students generally out-perform spring students. Fall students are in the third semester of the curriculum when they do the EBP project, while Spring semester students are in the second semester. By third semester, students have a better understanding of applying evidence to practice. Ways to make up that gap are being considered.

**Additional Comments**

**Assessment Method 2: Hesi Exit Exam (v1) Scholarship for EBP scores**

**Assessment Method Description**

In their final semester, every student is required to take the HESI exit exam, a nationally normed exam that predicts NCLEX success. This is a 150 item test that includes questions that assess student competency in many areas including scholarship for EBP.

An average HESI Score (a statistically calculated score that indicates
readiness for the NCLEX) of 850 is the SON benchmark for Scholarship for EBP scores.

**Findings**
In the Spring of 2013, 54 students were tested, the HESI score was 984 (62 items). Of the 12 categories reported on under the heading of AACN Curriculum Categories (of which Scholarship for EBP is one), Scholarship for EBP ranked 4th from the highest (range 958-1026)

In the Summer of 2013, 47 students were tested with a HESI score of 1010 (62 items). This was the highest score in the category (range 833-1010).

**How did you use findings for improvement?**
Our new curriculum (implemented 2010) emphasizes EBP from the first semester, explaining the good performance in this category.
Appendix A

Auburn University School of Nursing Clinical Evaluation Tool

The Clinical Evaluation Tool (CET) provides for formative assessment and summative evaluation of student progress in the clinical setting. The CET specifies behaviors in the 6 skills areas identified in the AUSON curricular framework and outcomes (communication/collaboration, critical thinking/clinical judgment, scholarship for evidence based practice, clinical prevention/population health, diversity and leadership) as essential to nursing practice. The CET summative evaluation will be completed by the supervising faculty, assigned clinical associate, or preceptor at the end of each rotation. In cases where additional feedback is needed, such as extended clinical hour rotations, exceptional or borderline performance, a formative assessment will also be completed.

Clinical Rating Scale

3: exceeds expected standards—clinical performance exceeds criteria for expected standards.
2: meets expected standards—clinical performance is safe, appropriate for the level of the course and demonstrates:
   - effective communication and collaboration skills
   - critical thinking and clinical judgment in patient care consistently
   - utilization of current evidence based interventions
   - efficient teaching learning processes in health promotion and disease management
   - incorporation of awareness of diversity
   - application of ethical and legal and professional practice standards and guidelines.
1: meets minimum standards—clinical performance meets criteria of expected standards after remediation
0: does not meet standards—clinical performance is unsafe, below the appropriate level for the course and demonstrates:
   - ineffective communication and collaboration skills
   - inconsistent critical thinking and clinical judgment in patient care
   - inadequate utilization of current evidence based interventions
   - insufficient teaching learning processes in health promotion/disease management
   - lack of awareness of diversity
   - inconsistent application of ethical, legal and professional standards/guidelines.

Unsatisfactory Grade in a Clinical Course

Clinical courses are graded on a Satisfactory (S) / Unsatisfactory (U) basis. Clinical expectations increase in rigor and complexity as a student progresses through the curriculum. Therefore, there are 3 levels of clinical evaluation. Level 1 denotes courses in the 1st semester, Level 2 denotes courses in the 2nd and 3rd semesters and Level 3 denotes the courses in the 4th and 5th semester. The student will receive a “U” in a clinical course when:

I. Any critical unsatisfactory/unsafe behavior occurs:
   a) any life-threatening error or action by the student to client, staff, faculty or others
   b) implementing any action that is in violation of the course, school or agency HIPAA Privacy Rule
   c) violation of the impaired nursing student policy or
   d) disrespectful treatment of patients, colleagues, faculty or staff in the clinical setting.

II. A student scores “0—does not meet standards”:
   a) three or more times in a Level I course
   b) two or more times in a Level II course
   c) one or more times in a Level III course
   A score of 0 will result in completion of the Ineffective Clinical Behavior Form which includes a plan of action to improve the behavior and a meeting of the clinical instructor, course leader and student.

III. A student scores “1—meets minimum standards”:
   a) six or more times in a Level I course
   b) four or more times in a Level II course
   c) two or more times in a Level III course
   A score of 1 may result in completion of the Ineffective Clinical Behavior Form which includes a plan of action to improve the behavior and a meeting of the clinical instructor, course leader and student.

IV. An unsatisfactory on the Ineffective Clinical Behavior Form results in a failure.

Name ___________________________ Rotation ___________________________ Semester ___________________________
AUSON Clinical Evaluation Tool Level 1 (Semester 1)

<table>
<thead>
<tr>
<th>Communication/Collaboration</th>
<th>Formative Assessment</th>
<th>Summative Evaluation</th>
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<tbody>
<tr>
<td>1. Apply therapeutic communication skills and technologies to promote health in caring for patients across the life span AEB:</td>
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<tr>
<td>a. Collaborates with clients and their families in achieving educational goals.</td>
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<tr>
<td>b. Uses various forms of communication to disseminate information.</td>
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<tr>
<td>c. Produces clear, relevant, organized, and thorough writing.</td>
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<td>d. Exhibits legally accurate and appropriate documentation.</td>
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<tr>
<td>e. Recognizes and uses appropriate medical terminology and abbreviations.</td>
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<tr>
<td>f. Uses various forms of communication in an effort to increase understanding.</td>
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<td>g. Participates in therapeutic relationships.</td>
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<tr>
<td>h. Maintains self control &amp; dignity; responds professionally to situations, without blame</td>
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<tr>
<th>Critical Thinking/Clinical Judgment</th>
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<tbody>
<tr>
<td>2. Practice critical thinking and clinical judgment in the delivery of safe, high quality care for individuals and their families across the health-illness continuum across the lifespan AEB:</td>
<td></td>
</tr>
<tr>
<td>a. Identifies action and rationale for prescribed medications and treatments.</td>
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<td>b. Performs skills and assessment correctly maintaining client and nurse safety.</td>
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<td>c. Gathers appropriate data for assessment.</td>
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<tr>
<td>d. Identifies appropriate nursing diagnoses, goals, and outcome criteria.</td>
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<tr>
<td>e. Recognizes pathological processes and problems when they arise, and intervenes appropriately.</td>
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<tr>
<td>f. Calculates medication dosages by all routes accurately.</td>
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<tr>
<td>g. Administers medications by all routes safely and efficiently.</td>
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<tr>
<th>Evidence Based Practice</th>
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<tbody>
<tr>
<td>3. Demonstrate evidence-based interventions in the delivery of safe, high quality professional practice for healthy or acutely ill individuals and their families across the lifespan AEB:</td>
<td></td>
</tr>
<tr>
<td>a. Uses technology to obtain up to date information for patient care planning.</td>
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<tr>
<td>b. Applies relevant current evidence to patient care.</td>
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<tr>
<td>c. Makes appropriate judgments and sound decisions in the management of care, based on a clear and accurate understanding of the rationale.</td>
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<tr>
<td>d. Incorporates evidence-based findings from nursing and health-related research to improve health outcomes.</td>
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<tr>
<td>e. Applies empiric (i.e. evidence-based) knowledge of health problems to planning and/or providing comprehensive, holistic care.</td>
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<td>Name</td>
<td>Rotation</td>
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</table>

### Clinical Prevention Population Health

4. Employ clinical prevention strategies in providing safe, high quality professional nursing care for healthy or acutely ill individuals and their families across the lifespan across settings of care. AEB:

   a. Considers cognitive and psychosocial challenges of each age group through the lifespan.
   b. Integrates the principles of primary health care in the delivery of care.
   c. Utilizes teaching and learning processes to promote and maintain health.
   d. Identifies learning needs of clients and their families through appropriate assessment.
   e. Recognizes and fosters strategies for health promotion, disease prevention, and risk reduction.

### Diversity

5. Recognize the influence of diversity in providing care that respects patient and family preferences AEB:

   a. Recognizes differences in ethical beliefs, perspective, and options in health care.
   b. Models caring, culturally competent behaviors in the delivery of comprehensive nursing care.
   c. Plans & organizes care with sensitivity and compassion to individual client needs.
   d. Protects the client’s safety & privacy, and preserves human dignity while providing care.
   e. Recognizes variations in culture and human diversity.
   f. Provides culturally sensitive and appropriate care.

### Leadership

6. Exhibit basic leadership concepts and skills to provide safe, high quality nursing care to healthy or acutely ill individuals across the lifespan. AEB:

   a. Practices within the ethical, legal, and regulatory frameworks of nursing and standards of professional practice, demonstrating accountability for nursing practice.
   b. Follows the ANA “Standards of Care for Clinical Practice” and “HIPAA” regulations.
   c. Is consistently punctual and reliable.
   d. Is professional in appearance, manner, and conduct.
   e. Upholds the “ANA Ethical Code for Nurses”.
   f. Applies leadership, management, and learning theories to enhance the development of nursing practice in the diverse context of health care delivery.
   g. Organizes and prioritizes delivery of care and other nursing responsibilities and tasks appropriately.
   h. Identifies economic, legal, and political factors that influence health care delivery.
   i. Recognizes need for change (client/organization), and responds by taking appropriate initiative/action.
   j. Exhibits progressive socialization toward professional nurse status
   k. Identifies own learning needs and sets goals for learning.
CLINICAL EVALUATION TOOL NURS _________

Rotation __________ Level ____________ Semester

FORMATIVE COMMENTS (please refer to appropriate behavior by number and letter)
Instructor:

Student:

Instructor Printed Name ___________________________ Instructor Signature ___________________________ Date __________

Student Printed Name ___________________________ Student Signature ___________________________ Date __________

SUMMATIVE COMMENTS (please refer to appropriate behavior by number and letter)
Instructor:

Student:

Instructor Printed Name ___________________________ Instructor Signature ___________________________ Date __________

Student Printed Name ___________________________ Student Signature ___________________________ Date __________

Number of “0s” ____________ Number of “1s” ____________

Circle Overall Grade: Satisfactory Unsatisfactory
Appendix B

Auburn University School of Nursing  
Employer Survey

Spring 2013

Greetings from Auburn University School of Nursing. We are interested in your perceptions of how our new graduates perform in the workplace. Please take a few minutes to complete this form and return it in the envelope provided. Thank you for your time and consideration.

1. Please provide the name of the person completing this form and the name and address of this institution.

   Address:

2. How many Auburn nursing graduates have you employed during the last year?

   Which of the following settings best describes your institution?
   Hospital acute care ____
   Long term care such as rehab or nursing home ____
   Community-based setting (such as clinic, home health, etc) ____

   In which of the following areas were Auburn nursing graduates hired in the last year?
   Adult Health/ Med Surg ____
   Pediatrics ____
   Maternal-child ____
   Mental Health ____
   Gerontology ____
   Other (please specify) ____

   Which of the following best describes the hours the majority of Auburn nursing graduates work?
   Full-time ____
   Part-time ____

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3. Compared to your expectation of a new graduate to what extent does the Auburn graduate do the following? Use this scale: 5-very well prepared, 4-satisfactorily prepared, 3-somewhat prepared, 2-poorly prepared, 1-not prepared at all. (Please compare AU graduates to other new graduates in this area)

A. Use communication skills effectively
(with peers, staff and interdisciplinary team members) 5 4 3 2 1

B. Work with clients to promote health
(patient education, etc) 5 4 3 2 1

C. Integrate technology into nursing practice
(able to use computer to chart, etc) 5 4 3 2 1

D. Apply critical thinking skills in practice 5 4 3 2 1

E. Utilize the nursing process 5 4 3 2 1

F. Utilize management principles
(such as time management, effective organizational skills, ability to complete tasks effectively and within reasonable length of time) 5 4 3 2 1

G. Provide leadership in client care
(such as delegating appropriately, promoting team building, role modeling professional behaviors in communication with patients, staff and interdisciplinary team members, able to participate in conflict resolution) 5 4 3 2 1

H. Assess the effect of health care policy
on health care delivery
(such as HIPPA, health disparities, obesity, smoking, disability, lack of health insurance, coverage for mental health services, health care quality, etc.) 5 4 3 2 1

I. Appreciate cultural diversity 5 4 3 2 1

J. Practice ethical decision making 5 4 3 2 1

K. Assess their own learning needs 5 4 3 2 1

L. Utilize research findings in practice
(evaluate and/or incorporate research and clinical evidence in nursing practice) 5 4 3 2 1

Please comment on any area that is less than “4”. We use this information to improve our program.

Comments

Created 5/22/01
Appendix C

Guidelines for Evidence-based Practice Project

This project will be conducted in groups utilizing your assigned groups in NURS 3230 Professional Nursing Concepts: Acute Care Across the Life Span. Your general clinical topic will be assigned through that course. You will choose an intervention to develop your project around in this course.

The project consists of:

Written Component: (75%) – group grade - Due Nov 1

1. Write an evidence-based practice (PICO) question for your practice concern. Identify the “P” “I” “C” “O” components. Discuss the significance of this question to improvement of nursing practice (10 pts)

2. Review the evidence (research, systematic reviews, clinical practice guidelines) on your question (a minimum of 6 articles must be included). These articles must include at least 3 primary research studies, and should include systematic research review articles, or clinical practice guidelines if available. Avoid opinion articles for this project. Discuss your search strategies for finding your evidence on CINAHL, Medline and other databases. It is expected that you also search review databases such as Cochrane, Johanna Briggs, and for Practice Guidelines from AHRQ.

   (Search strategy description - 5 points)

3. Use the attached form/grid sheet to present relevant points and initial evaluation of your literature. You must turn in a copy of all articles with your project. (Grid – 20 points)

4. Write a brief synthesis summary of the findings of the articles with APA citations. This paper should be 3-4 pages long and must be a synthesis and not just a linking of abstracts.

   (Synthesis -20 points)

5. Answer the following Consistency of Evidence Questions: (10 points)
   a. Are there replications of studies with consistent results?
   b. Are the studies well designed?
   c. Are recommendations consistent among systematic reviews, evidence-based practice guidelines, and individual studies?
   d. Are there identified benefits to the patient for applying evidence-based practice recommendations? Are there identified risks?
   e. Have cost studies been done on the recommended action, intervention, or treatment?

6. List your recommendations for evidence-based practice. Evaluate the strength of evidence of each recommendation using the A, B C, D grading system.

   (Recommendations- 10 points)

Presentation: (25%) – group grade Due Nov 7

1. Content representative of paper, well organized, and clear to audience (10 points)

2. Audiovisuals for presentation are of good quality – follow good poster guidelines (10 points)

3. Professional manner, language, and dress during presentation (5 points)

Group members will provide information on what each member contributed to the final product and how well each member facilitated the groups functioning on the project. Points may be deducted for the project for inadequate group participation. Presentations will be given on Nov 7 at the STT meeting at the HRC. Group member evaluations are due at the time of the presentation. Each person should turn in a separate collaborative report.
<table>
<thead>
<tr>
<th>Authors of Article, (Yr)</th>
<th>Purpose of study/or review</th>
<th>Outline: Design, sampling method, sample size, description of interventions (if any), instruments used, and outcomes measured</th>
<th>Major findings/findings relevant to your project</th>
<th>Critique of Study/Review for your project (what makes it strong or weak evidence for you to use)</th>
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Collaborative Work Report for Evidence-based practice Project

Instructions: Please provide a summary of each member’s group work

Project title: ____________________________________________

Members of Group: ________________________________________

Group member’s name: __________________________
Work on project: _______________________________________

Group member’s name: __________________________
Work on project: _______________________________________

Group member’s name: __________________________
Work on project: _______________________________________