Intercollegiate Consortium for a Master of Science in Nursing Southeastern Louisiana University, McNeese State University, University of Louisiana at Lafayette, Nicholls State University Systematic Plan for Program Evaluation – 2022

Standard I. PROGRAM QUALITY: MISSION AND GOVERNANCE

The mission, goals, and expected program outcomes are congruent with those of the parent institution, reflect professional nursing standards and guidelines, and consider the needs and expectations of the community of interest. Policies of the parent institution and nursing program clearly support the program's mission, goals, and expected outcomes. The faculty and students of the program are involved in the governance of the program and in the

ongoing efforts to improve program quality.

Component	Expected Outcome Expected Level of Achievement (ELA) Benchmark (%)	Group (s) Responsible	Frequency of Assessment	Assessment Method and Sources	Results (Analyzed, Aggregated, Trended and Use of Results)
I-A: The mission, goals, and expected program outcomes are: • congruent with those of the parent institution, and consistent with relevant professional nursing standards and guidelines (PNSG) for the preparation of nursing professionals.	(1) Intercollegiate Consortium for a Master of Science in Nursing (ICMSN) program outcomes/ competencies are clearly stated, publicly accessible, appropriate, and congruent with the mission and goals of ICMSN member institutions, colleges, and departments. Measurement criteria for outcomes and competencies are congruent with the AACN Master's Essentials (100 % compliance)	COCOM	Minimum of every 4 years and as frequently as each institution's mission and program outcomes change	Review each ICMSN institutions' Strategic Plan, as well as their respective College and Department mission and goals and ICMSN program and student outcomes for congruency, clarity, appropriateness, and consistency in university bulletin, student services documents, websites (Department of Nursing and MSN), student and faculty handbooks Review and consider all PNSGs in formulating mission, goals, and student outcomes.	
 I-B: The mission, goals, and expected student outcomes are reviewed periodically and revised, as appropriate, to reflect: professional nursing standards and 	(1) Regularly scheduled reviews are conducted of mission, and student outcomes for congruence with PNSGs and needs of communities of interest (COIs) (100% compliance)	COCOM	Annually and ongoing	Review all PNSGs used to formulate mission, and student outcomes. Review ICMSN Mission and student outcomes for congruency with needs and expectations of COIs.	

guidelines (PNSG) and • the needs and expectations of the community of interest				Obtain input/data from COIs via: o Graduate Exit Survey o Employer Survey o Alumni Survey	
I-C: Expected faculty outcomes are clearly identified by the nursing unit, are written and communicated to the faculty and are congruent with institutional expectations	(1) Policies affecting the ICMSN faculty are either congruent with those of the governing organization or rationales for policies that differ for the governing organization exist (100% compliance) (2) All ICMSN faculty are provided with job descriptions and evaluation rubrics, which are aligned with respective ICMSN university expectations for faculty, including guidelines for tenure and promotion. (100 % compliance)	DAC	Annually	Review of documents from each ICMSN institution's:	
<u>I-D</u> : Faculty and students participate in program governance.	ICMSN Graduate Faculty Organization Bylaws reflect faculty participation in program governance through committee positions: (1) All ICMSN standing committees, exclusive of the Coordinating Committee, include faculty representation from each university (100% compliance)	Dept. Heads COCOM	Ongoing	Review of: o ICMSN Bylaws o ICMSN Organizational chart o Committee Membership list o Meeting minutes o GFO minutes o Graduate Exit Survey o Student handbook o Faculty handbook	

I-E: Documents and publications are accurate. A process is used to notify constituents about changes in documents and publications.	(2) All ICMSN faculty are members of the Graduate Faculty Organization (GFO) (100% compliance) ICMSN student representation is encouraged on ICMSN committee student positions, student discussion group, university, college, and departmental committees. (3) All ICMSN standing committees, exclusive of the Coordinating Committee, have graduate student representation. (100% compliance) (1) All publications (written and electronic) are reviewed periodically for accuracy. Faculty, students, and constituents are notified of any changes via meetings, assemblies, written documentation, or a combination of the preceding, as indicated. (100% compliance)	CCCOM	Ongoing	Review for documents: O Published program materials O Websites O Catalogs (online) O Syllabi O Student Handbook Faculty Handbooks O Learning Management System (LMS) course sites	
<u>I-F</u> : Academic policies of the parent institution and the nursing program are congruent and support achievement of	(1) Respective ICMSN university, college and departmental policies are published and regularly reviewed to ensure congruence	Dept.Heads	Annually	Review of documents: o Faculty handbook o University catalogs (online) o Student handbooks	

the mission, goals, and	with the ICMSN program		 Published program 	
expected student	mission, goals and expected		materials	
outcomes. These	outcomes. Revisions are made		o Syllabi	
policies are:	as indicated (100%		 ICMSN website 	
 fair, equitable; published and accessible; reviewed and revised as 	compliance)		LMS Course sites	
necessary to foster				
program improvement.				

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STANDARD II. PROGRAM QUALITY: INSTITUTIONAL COMMITMENT AND RESOURCES

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

Component	Expected Outcome Expected Level of Achievement Benchmark	Group (s) Responsible	Frequency of Assessment	Assessment Method	Results (Analyzed, Aggregated, Trended and Use of Results)
II-A. Fiscal and physical resources are sufficient to enable the program to fulfill its mission, goals, and expected outcomes. Adequacy of resources is reviewed periodically and resources modified as needed.	(1) Adequate fiscal resources are consistently available (2) Adequate physical resources exist for student/faculty needs	Deans	Annually and ongoing	Review of institutions': Nursing unit operating budget Equipment allocation funds Research funding Grants Travel funding and expenditures Teaching assignments Personnel budget and assignments Classroom space, labs, offices, and storage space Library resources Obtain data from: Student Evaluation of Instruction (SEI) Graduate Exit Survey	
<u>II-B.</u> Academic support services are sufficient to ensure quality and are	Academic support services are adequate to meet program and student needs	Deans	Annually and ongoing	Review of: O University and departmental budgets	

evaluated on a regular basis to meet program and student needs.	(1) \geq 80% of Graduate Exit Survey respondents will indicate <i>strongly agree</i> or <i>agree</i> that library resources supported student learning needs (item # 16)			SEIGraduate Exit Survey	
II-C. The chief nurse administrator: Is a registered nurse (RN); Holds a graduate degree in nursing; Holds a doctoral degree if the nursing unit offers a graduate program in nursing; Is academically and experientially qualified to accomplish the mission, goals, and expected student and faculty outcomes; Is vested with the administrative authority to accomplish the mission, goals, and expected program outcomes; and	(1) The institution's Chief Nurse Administrator must continue to hold necessary qualifications (100% compliance)	DAC	Upon hire and annually	Review of documents:	
Provides effective leadership to the nursing					

unit in achieving its mission, goals, and program outcomes.					
II-D. Faculty are: • Sufficient in number to accomplish the mission, goals, and program outcomes; • Academically prepared for the areas in which they teach; and Experientially prepared for the areas in which they teach.	Sufficient numbers of qualified faculty with role and functional preparation in the area of teaching (1) ICMSN faculty have role and functional preparation in area of teaching assignment and adhere to Louisiana State Board of Nursing (LSBN) rules and regulations (100% compliance)	Dept. Heads	Ongoing	Review of: Faculty vitae Faculty transcripts Teaching assignments CE records Licensure Certification	
II-E. Preceptors, when used by the program as an extension of faculty, are academically and experientially qualified for their role in assisting in the achievement of the mission, goals, and expected student outcomes.	(1) ICMSN preceptors are academically and experientially qualified with role and functional preparation in the area of teaching (100% compliance)	Directors of NP concentrations	Annually and ongoing	Review of: O Preceptor Vitae O Preceptor Letter of Agreement O Student evaluation of preceptor O Faculty evaluation of preceptor	

II-F. The parent institution and program provide and support an environment that encourages ongoing faculty learning, engagement & scholarship. II-F. The parent institution provide and support we environment that encourages ongoing faculty learning, engagement & scholarship. II-F. The parent institution provide and support we environment that encourages ongoing faculty learning, engagement & scholarship. II-F. The parent institution provide and supportive environment that encourages ongoing faculty learning, engagement & scholarship. II-F. The parent institution provide and supportive environment that encourages ongoing faculty vitae Promotion and tenure applications

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

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

Component	Expected Outcome Expected Level of Achievement Benchmark	Group(s) Responsible	Frequency of Assessment	Assessment Method	Results (Analyzed, Aggregated, Trended and Use of Results)
III-A. The curriculum is developed, implemented, and revised to reflect clear statements of expected individual student learning outcomes that are congruent with the program's mission, goals, and with the roles for which the program is preparing its graduates.	(1) Measurement criteria for student learning outcomes and competencies are congruent with: -Essentials of Master's Education in Nursing (AACN, 2011) -Criteria for Evaluation of Nurse Practitioner Programs (NTF, 2016) -Core Competencies for Nurse Educators (NLN, 2013) -Nurse Executive Competencies (AONE, 2015) -Graduate Quality and Safety Education for Nurses (QSEN) Competencies (AACN, 2012) 100% compliance	CUCOM	Annually and ongoing	Review of: ICMSN Mission & Goals ICMSN Program Outcomes ICMSN Student Learning Outcomes Course syllabi SEI End of Course (EOC) evaluations	
III-B. Curricula are developed, implemented, and revised to reflect	(1) Measurement criteria for the MSN curricula are congruent with:	CUCOM	Annually and ongoing	Review of: o Program outcomes o Student learning outcomes	

relevant professional	-Essentials of Master's		o Curriculum	
nursing standards and	Education in Nursing		o Course syllabi	
guidelines, which are	(AACN, 2011).			
clearly evident within the	- Professional Nursing			
curriculum and within	Standards and Guidelines			
the expected student	(PNSG):			
outcomes (individual and	-Scope and Standards of			
aggregate)	Practice (ANA, 2015)			
	-Scope and Standards of			
Master's program	Practice for Psychiatric -			
curricula incorporate	Mental Health Nursing (ANA,			
professional standards	2014)			
and guidelines as	-LSBN Rules and Regulations			
appropriate.	-Graduate Quality Safety			
	Education for Nurses (QSEN)			
A. All master's	(AACN, 2012)			
programs	-Nurse Practitioner Core			
incorporate The	Competencies (NONPF, 2017)			
Essentials of	Nurse Executive Competencies			
Master's Education	(AONE, 2015)			
in Nursing (AACN,	-Criteria for Evaluation of			
2011) and	Nursing Practitioner			
additional relevant	Programs (NTF, 2012)			
professional				
standards and	100 % compliance			
guidelines as				
identified by the				
program.				
B. All master's degree				
programs that				
prepare nurse				
practitioners				
Criteria for				
Evaluation of Nurse				
Practitioner				

п	T		
Programs (NTF,			
2012).			
C. Graduate-entry			
program curricula			
incorporate <i>The</i>			
Essentials of			
Baccalaureate			
Education for			
Professional Nursing			
Practice (AACN,			
2011) and			
appropriate graduate			
program standards			
and guidelines			
D. Post-graduate			
APRN certificate			
programs that			
prepare nurse			
practitioners			
incorporate Criteria			
for Evaluation of			
Nurse Practitioner			
Programs (NTF,			
2012).			

III-C. The curriculum is logically structured to achieve expected student outcomes. • The baccalaureate curriculum builds upon a foundation of the arts, sciences, and humanities. Master's curriculum build on a foundation comparable to baccalaureate level nursing knowledge	The MSN curricula build on prior baccalaureate and/or master's foundational knowledge, depending on the level of entry of the student. (1) >80 % of Graduate Exit Survey respondents will indicate <i>strongly agree</i> or <i>agree</i> that the Master's curriculum built upon baccalaureate education (item # 10)	CUCOM	Ongoing and Annually	Review of: Syllabi Curriculum plans Program outcomes Student learning outcomes Graduate Exit Survey SEI & EOC	
III-D. Teaching-learning practices and environments support the achievement of expected student outcomes.	Teaching-learning practices in online and clinical settings support achievement of expected student learning outcomes. (1) For aggregated End of Course evaluations, ≥80% respondents will indicate strongly agree or agree that course activities facilitated student learning (item # 5) (2) For all aggregated End of Course evaluations, ≥80% respondents will indicate	CUCOM	Annually and ongoing	Review of: O Graduate Exit Survey SEI & EOC Preceptor evaluations Clinical site evaluations One-Year Alumni Survey	

III-E. The curriculum includes planned clinical practice experiences that: • Enable students to integrate new knowledge and demonstrate attainment of program outcomes; and are evaluated by faculty.	strongly agree or agree that upon completion of the course, the course objectives were met (item # 10) (1) Clinical practice experiences provide students opportunities for development of professional competencies. Faculty evaluation clinical sites to ensure provision of opportunities to develop student competencies (100% compliance) (2) ≥ 80% of Graduate Exit Survey respondents indicate they strongly agree or agree that practicum experiences were appropriate for meeting program objectives (item # 17)	CUCOM	Every semester	Review of: Course grades Documentation of student clinical hours (Typhon) SEI/EOCs Faculty Evaluation of Student Preceptor Evaluation of Student Faculty Evaluation of Clinical Site Student Evaluation of Preceptor Graduate Exit Survey	
outcomes; and are evaluated by	(100% compliance) (2) > 80% of Graduate Exit Survey respondents indicate they strongly agree or agree that practicum experiences were appropriate for meeting program objectives (item #			 Faculty Evaluation of Clinical Site Student Evaluation of Clinical Site Student Evaluation of Preceptor 	
	student in order to fulfill the course objectives for which the clinical rotation was organized (item # 8)				

	(4) \geq 80 % of aggregated Student Evaluation of Clinical Site respondents will rate the clinical site as excellent/satisfactory for providing adequate opportunities for growth as an advanced practice nurse (item # 1)				
III-F. The curriculum and teaching-learning practices consider the needs and expectations of the identified community of interest.	(1) The needs of COI are considered for curriculum and teaching-learning practice decisions and are appropriate to the student population. (100% compliance)	CUCOM	Ongoing and Annually	Review of: o SEI/EOCs o Graduate Exit Survey Meetings with COI conducted by Deans, Department Head, DAC	
III-G. Individual student performance is evaluated by the faculty and reflects achievement of expected student outcomes. Evaluation policies and procedures for individual student performance are defined and consistently applied.	(1) Student academic performance is reviewed every semester and reflects achievement of student outcomes. (100% compliance)	EVCOM	Every semester	Review of: Grade reports Course syllabi Faculty Evaluations of Students Preceptor Evaluations of Students Handbooks	
III-H. Curriculum and teaching-learning practices are evaluated at regularly scheduled intervals to foster ongoing improvement.	(1) Curriculum decisions are made based on trended program evaluation data to foster ongoing improvement. (100% compliance)	CUCOM	At least annually and ongoing	Review of: Syllabi SEI/EOCs Graduate Exit Survey Student Handbooks Periodic student focus groups	

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STANDARD IV. Program Effectiveness: Assessment and Achievement of Program Outcomes

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

Component	Expected Outcome Expected Level of Achievement Benchmark	Group(s) Responsible	Frequency of Assessment	Assessment Method	Results (Analyzed, Aggregated, Trended and Use of Results)
IV-A. A systematic process is used to determine program effectiveness.	(1) A defined systematic process for ongoing evaluation of the program is noted in the systematic plan for program evaluation (SPPE). (100% compliance)	EVCOM	Annually	Analysis of SPPE elements, benchmark outcomes and time table Minutes of all ICMSN Committees	
IV-B. Program completion rates demonstrate program effectiveness.	(1) Completion Rates: ≥ 70% of fulltime students will complete program within 1½ times of curriculum at point of entry (completion of 12 hours)	EVCOM	Every semester and annually	Review of: O Student records O Student transcripts	
IV-C. Licensure and certification pass rates demonstrate program effectiveness.	(1) Certification Rates: the certification pass rate for each examination is \geq 80% for first time takers for the most recent calendar year	EVCOM	Every semester and annually	Graduates self-report of certification exam 1 st time pass or fail	

IV-E. Program outcomes demonstrate program effectiveness.			Graduate self-report of employment	Every semester and annually	EVCOM	(1) Employment Rates: of those graduates who seek employment, ≥ 70% self-report being employed within 12 months of program completion.	IV-D Employment rates demonstrate program effectiveness.
who engage in scholarly inquiry (1) ≥ 80 % of One-Year Alumni Survey respondents will strongly agree or agree the program prepared them to acknowledge/demonstrate scholarship as an integral and systems. • Critically examine the literature to Exit Survey respondents • Calculate (1) ≥ 80 % of One-Year Alumni Survey respondents • Chically (1) ≥ 80 % of One-Year Alumni Survey respondents			 Graduate Exit Survey One-Year Alumni Survey		EVCOM	learning outcomes incorporate expected level of achievement and are appropriate and relevant to the program degree offered. Data analysis demonstrate that the program is achieving its outcomes. Selected	outcomes demonstrate program effectiveness. Program Outcomes (bolded) combined with Student Learning Outcomes:
using current research to improve healthcare outcomes for individuals, families, populations and systems. • Critically examine the literature to Alumni Survey respondents will strongly agree or agree the program prepared them to acknowledge/demonstrate scholarship as an integral component of practice role (question 12, item # 1) (2) ≥ 80 % of Graduate Exit Survey respondents							who engage in
research to improve healthcare outcomes for individuals, families, populations and systems. • Critically examine the literature to Critically examine the literature to		•					
healthcare outcomes for individuals, acknowledge/demonstrate scholarship as an integral component of practice role • Critically examine the literature to the program prepared them to acknowledge/demonstrate scholarship as an integral component of practice role (question 12, item # 1) (2) ≥ 80 % of Graduate Exit Survey respondents						* 1	
for individuals, acknowledge/demonstrate families, populations scholarship as an integral and systems. component of practice role • Critically (question 12, item # 1) examine the (2) ≥ 80 % of Graduate literature to Exit Survey respondents							-
families, populations and systems. • Critically examine the literature to scholarship as an integral component of practice role (question 12, item # 1) • Critically examine the literature to Exit Survey respondents							
and systems. Critically examine the literature to component of practice role (question 12, item # 1) (2) ≥ 80 % of Graduate Exit Survey respondents							,
• Critically (question 12, item # 1) examine the literature to (2) > 80 % of Graduate Exit Survey respondents							· · ·
examine the literature to (2) > 80 % of Graduate Exit Survey respondents							9
literature to Exit Survey respondents							-
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avaluata strongly garge or garge						strongly agree or agree	evaluate,
determine and they were prepared to						0.0	[]
implement critically examine the						• • •	
evidence based literature to evaluate,						•	
practice. determine and implement						,	
Apply advanced evidence based practice							-
knowledge of (item # 1)						•	

nursing and other disciplines to improve health care delivery in diverse populations and patient care settings.			
2. Practitioners, educators and leaders who engage in professional discourse through written and verbal venues. • Demonstrate professional communication skills through organization, critical thinking and dissemination of ideas through presentations and written documents.	 (1) ≥70% of students will earn a score of ≥ 85% on the NURS 595/695 Focused Scholarly Project final assignment. (2) ≥ 80 % Graduate Exit Survey respondents will indicate strongly agree or agree the program prepared them to demonstrate professional communication skills through organization, critical thinking and dissemination of ideas through presentations and written documents (item # 3) 		

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3. Nursing	(1) The second of the second of		
professionals who	(1) The aggregated average		
advance the culture of	score above 69 (fair		
nursing excellence	performance) will be achieved		
and best practices in	by NP N584 and N 593 on the		
healthcare through	Barkley Diagnostic Readiness		
professional	Tests		
achievement and			
practice,	$(2) \ge 80 \%$ of One-Year		
interdisciplinary	Alumni Survey respondents		
collaboration and	will strongly agree or agree		
lifelong learning.	the program prepared them to		
Employ health	use self-regulated thinking and		
information	sound judgement to shape		
technology to	personal, professional and		
enhance direct and	organizational decisions		
indirect patient	(Question 12, item # 4)		
care			
Exhibit advanced	$(3) \ge 80\%$ of One-Year		
nursing	Alumni Survey, will indicate		
knowledge,	strongly agree or agree the		
competence and	program prepared them to		
decision-making in	model the professional		
the delivery of	behaviors: involvement in		
culturally	professional organization;		
appropriate patient	engagement in life-long		
care in the	learning, consumer advocacy,		
advanced practice	and professional competency		
role or	(item #13).		
concentration			
Model			
professional			
11 ×			
responsibility,			
ethical practice			
and continued			
professional			

growth through lifelong learning			
4. Nursing leaders who can direct interprofessional teams in advanced practice, educational and administrative roles in healthcare systems and diverse settings to promote quality improvement and effect positive change.	(1) ≥70% of students will earn a score of ≥ 85% on the NURS 509/609 Population Based Primary Care course Population-Based Health Service Program assignment.		
Assess and evaluate the quality of health care practices and organizational effectiveness to improve healthcare outcomes and systems	(2) > 80% of Graduate Exit Survey respondents will strongly agree or agree the program prepared them to assess and evaluate the quality of healthcare practices and organizational effectiveness (item # 7)		
Utilize leadership skills and interprofessional collaboration to identify and solve practice problems and enhance patient care through the integration of	(3) > 80 % One-Year Alumni respondents will respond strongly agree or agree they were prepared to create and maintain supportive and constructive relationships with healthcare consumers, members of the healthcare team, and the community of interest (item # 12)		

practice, theory and research					
5. Ethically responsible nursing leaders who advocate for health policy to improve healthcare in all populations. • Advocate for health care policy to impact nursing practice, healthcare delivery and patient outcomes	 (1) ≥70% of students will earn a score of ≥ 85% on the NURS 581/681 Business, Leadership, and Health Policy for Nurse Practitioners course <i>Policy and Advocacy Project</i> assignment. (2) ≥80 % of Graduate Exit Survey respondents will strongly agree or agree the program prepared them to advocate for health care policy model to impact nursing practice, healthcare delivery, and patient outcomes (item # 9) 				
IV-F. Faculty outcomes, individually and in the aggregate, demonstrate program effectiveness. Faculty Outcomes include: 1. TEACHING /INSTRUCTION Exhibit a commitment to excellence in teaching (emphasis on clinical reasoning and	The program demonstrates the achievement of expected faculty outcomes, individually and in aggregate. (1) ≥80 % of faculty teaching in ICMSN courses will rate an average score of ≥4 (strongly agree or agree) on the SEI that the instructor covered material consistent with the stated objectives (item# 4)	Dept. Heads	Annually and ongoing	Review for compliance: Faculty Vitae Faculty Handbook Faculty evaluation tools Promotion and Tenure applications Faculty files Annual Performance Review SEI every semester	

multiple ways of thinking)	(2) \geq 80 % of faculty teaching in ICMSN courses will rate an average score of \geq 4_(strongly agree or agree) on the SEI that the instructor encourages critical thinking (item # 12)		
2. SCHOLARSHIP Demonstrate a commitment to rigorous scholarly inquiry significant to the profession.	 (1) 100% of ICMSN faculty are engaged in some form of scholarly activity including, but not limited to, research, professional presentations, publishing, grant writing, fellowships, or leadership in professional organizations. (2) Faculty Satisfaction Survey revised 11/27/18. New benchmark item # 11: ≥ 80 % of faculty <i>very satisfied</i> or <i>satisfied</i> with the opportunity to meet scholarly goals. 		
3. SERVICE Demonstrate a commitment to the university, profession and community through active engagement in various activities.	(1) ≥90%_of ICMSN faculty will serve on a college, department, university and/or community committee each academic year. (2) Faculty Satisfaction Survey revised 11/27/18. New benchmark item # 12: ≥80 % of faculty <i>very satisfied</i> or <i>satisfied</i> with the opportunity for service within the ICMSN		

4. PRACTICE Demonstrate a commitment to practice	(1) ≥90% of ICMSN faculty will engage in a minimum of one professional development activity yearly to maintain currency in practice				
IV-G. The program defines and reviews formal complaints according to established policies.	(1) An established formal complaint process, guided by each respective institution's policies & procedures, is in place and disseminated to relevant constituencies (100 % compliance)	DAC	Ongoing	Reports of complaints received from responsible departments at each institution are reviewed in accordance with policies.	
IV-H. Data analysis is used to foster ongoing program improvement.	(1) All data obtained from surveys, evaluations, discussion groups, individual student feedback, etc. are used to evaluate the program and facilitate program improvement (100% compliance)	EVCOM	Annually	Survey dataExit interviewsMeeting minutes	

Legend:

ICMSN INTERCOLLEGIATIATE CONSORTIUM FOR A MASTER OF SCIENCE IN NURSING

PNSG PROFESSIONAL NURSING STANDARDS AND GUIDELINES

COI COMMUNITIES OF INTEREST DAC DEANS ADVISORY COUNCIL

CINC COUNCIL OF INTERCOLLEGIATE NURSING CONSORTIUM

COCOM COORDINATING COMMITTEE
CUCOM CURRICULUM CONMMITTEE
EVCOM EVALUATION COMMITTEE
CCCOM COMMUNICATION COMMITTEE
GFO GRADUATE FACULTY ORGANIZATION

Revised 02/17/2022 EVCOM; Reviewed/approved GFO 03/18/2021; 03/31/2022