

Rutgers School of Business-Camden

Assurance of Learning

AY2021-2022 Report

Supported By

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RSBC's Assurance of Learning & Continuous Improvement
Committee

Rutgers School of Business-Camden

Assurance of Learning

The following is a list of all Rutgers School of Business-Camden (RSBC) programs. Learning goals and objectives have been established and assessment plans developed and implemented for all these programs to support continuous improvement and address accreditation requirements as guided by the Association to Advance Collegiate Schools of Business (AACSB). RSBC is an AACSB accredited business school.

Table 1: RSBC Programs and Assessment Cycles

Name of Program	Normal delivery mode	Number of learning goals*	Timing of assessment cycle
Bachelor of Science (BA)	On-campus	7	Every 3 semesters
Bachelor of Arts in Business Administration (BBA)	Online/off-campus	7	Every 3 semesters (based on course offerings)
Master in Business Administration (OMBA)	Online	7	Every 3 semesters
Master in Business Administration (TMBA)	On-campus	7	Every 3 semesters (based on course offerings)
Master in Business Administration (PMBA)	Off-campus	7	Over 4 semesters due to PMBA cycle of courses
Master of Accountancy (MAcc)	Online	4	Every 4 semesters (program started Fall 2021)
Master of Science in Business Analytics (MSBA)	Online	3	Every 4 semesters (program started Fall 2021)
Master of Science in Finance – Wealth Mgmt. (MSFWM)	Online	3	Every 4 semesters (program started Fall 2022)

*See listing of learning goals by program in Appendix A

I. LEARNING GOALS

Background

RSBC's learning goals were originally established through the external benchmarking of 34 peer, aspirant and competitive schools and through a series of workshops conducted by the faculty to identify themes in learning assessment. The exercise translated into school/program learning goals and objectives that focus on measurable competency goals. Rubrics were created to assess the level of demonstrated proficiency with a specific skill, knowledge, or other attribute. Measured deficiencies lead to the identification of adjustments that are then proposed for curricular and/or process improvements.

Process to Review and Update Learning Goals

RSBC's learning goals are reviewed and updated continually through multiple governance mechanisms as defined by the following:

- Undergraduate Curriculum committee,
- Graduate Curriculum committee,
- Assurance of Learning & Continuous Improvement (AoLCI) committee
- Dean's Cabinet (comprised of area heads, the Director of Academic Administration, and the Dean), and
- Faculty area meetings

During regular reviews by faculty through the above committees, learning goals/objectives are revisited for relevance and appropriateness. In this process, learning goals are examined by course but also, as per AACSB guidance, are reviewed in the context of an entire degree program. Final approval of any learning goal changes rests with the Dean's cabinet.

Learning goals are also reviewed and updated whenever a new course/program is added, or curriculum is adjusted. This update/review is done through several venues - the appropriate degree program committee (UG or Graduate), as a recommendation by Dean's Cabinet, and/or in the faculty area meetings. Discussion of any change or updates will also take place during meetings of the AoLCI Committee. Once additions or changes are identified, they go through the process noted in the paragraph above for consideration and, if appropriate, approval.

Learning Goals RSBC Website:

The school has ensured that the learning goals and the AoL process are visible on the school's website: <https://business.camden.rutgers.edu/>

Click "About" on the top toolbar. Then click "Assurance of Learning". An Assessment Overview is available as well as links to: Undergraduate/Graduate Program Learning Goals, Objectives and Course Mapping.

2021-22 Learning Goals Update:

- The RSBCs AoLCI Committee has reviewed all learning goals and objectives for the various programs and has made changes based on this review. The changes resulted in no elimination of learning goals. The phrasing of some learning goals was updated to reflect current trends in business schools. For instance, the learning goal titled Global Mindset was changed to **Global Perspective** and Ethics was changed to **Ethical Reasoning**. Finally, some learning goals were streamlined as per emergent standards (e.g. collapsing Financial Ethics and Ethics & Social Responsibility to one learning goal: **Ethical Reasoning**, collapsing Oral and Written Communications into the goal **Effective Communication Skills** to represent discussions, written materials, and oral presentations).
- Learning goals and objectives for the recently launched degree programs of *Master of Accountancy (MAcc)* (launched Fall 2021) and *Master of Science in Business Analytics (MSBA)* (launched Fall 2020) were determined by the discipline area and director of each program and approved by the appropriate faculty committees including the Dean's cabinet (see listing of learning goals in Appendix A). It was determined that these two 30-credit masters programs, built around a focused learning model, appropriately would have fewer learning goals than the higher-credit MBA program (3 for the MSBA and 4 for the MAcc).
- In Spring 2022, the UG Curriculum Committee began a review of the entire UG curriculum (BS and BBA programs). The committee is taking into consideration the learning goals and objectives for the BS and BBA programs in their review to ensure identification of any proposed changes to learning goals/objectives that might emerge from curriculum changes. Any learning goal changes will be further reviewed and implemented following the normal process as outlined earlier. The curriculum review is expected to be completed by Spring 2023 with implementation to be phased in starting Fall 2023.
- A graduate curriculum review took place in Fall 2020. Changes have already been adopted and learning goal/objectives adjusted accordingly. No changes in learning goals were proposed. Only some course mapping changed due to add/deletion of specific courses.
- The new degree program, *Master of Science in Finance – Wealth Management Track*, was approved during AY 2021-22. The learning goals and objectives were identified and approved as part of the program approval process (see Appendix A for a listing of the learning goals). These goals will be scheduled for assessment starting in AY2022-23.

Mapping of Learning Goals:

RSBC underwent an extensive survey exercise in Fall 2020 to map learning goals and objectives to specific courses. The survey included all faculty who taught courses in Fall 2020 (graduate and undergraduate) asking them to identify all the learning goals and objectives they recognized as applying to their respective courses. The exercise also asked

faculty to rate the level at which they felt the learning goal/objective was being applied using a scale of 1 to 3:

Learning goal/objective applied at the **Introductory Level = 1**

Learning goal/objective applied at the **Reinforced Level = 2**

Learning goal/objective applied at the **Mastery Level = 3**

Summary results of this exercise are noted below:

- In some instances, faculty identified that they were applying learning goals at levels that were above/below their intended level. For example, the learning goal **Critical Thinking** was identified as being applied at a level 2 or 3 (reinforced or mastery) in the introductory course *Principles of Accounting* (a 100 level course). It is expected that this would be a 1-Introductory level application of the learning goal **Critical Thinking**.

Another example is a rating of 1 given for the learning goal application of **Technology Fluency** for a 300 Level course of *IT & Project Management* course [the course has *Introduction to Computing* as a prerequisite].

- In some instances, faculty did not identify expected learning goals. For example, **Technology Fluency** was not identified for a *Marketing Research* course offering or **Ethical Reasoning** in a *Multinational Business* course.
- The survey revealed some inconsistency in the identification of learning goals across different sections of the same course. For instance, a faculty teaching section 01 of *Operations Management* identified the learning goals **Critical Thinking** and **Technology Fluency**, but the faculty teaching section 02 of the same course identified only the learning goal of Technology Fluency. Similar cases were identified for **Ethical Reasoning** and **Communication** as these learning goals are embedded in several courses but were not identified consistently as being applied.

These and other results have been shared with area heads and the AoLCI Committee with plans for change already being implemented. This is especially so regarding the consistency issue where discipline areas are currently working on defining consistent course objectives as well as common learning goals for core courses. Details of the mapping exercise will be shared with all faculty in a faculty retreat in Fall 2022 that will highlight the AoL process.

The mapping exercise is being reviewed by the AoLCI Committee and Academic Administration department for improvements to the scope and instructions to allow for more effective results. A repeat of the survey exercise is scheduled for late Fall 2022.

II. ASSESSMENT PLAN, STRUCTURE, AND PROCESS

Assessment Overview

RSBC is committed to the assurance of student learning through rigorous and meaningful assessment processes. The school has developed, maintained, and updated its assessment practices and procedures through input from individual faculty, academic departments,

undergraduate and graduate curriculum committees, the school's AoLCI Committee, the dean's cabinet, and external resources such as the school's accreditation body (AACSB), and the Rutgers University Assessment Council.

Each year the assessment plan and process, learning goals, assessment measures and benchmarks are reviewed for all programs, all locations, and all modes of delivery (undergraduate, graduate, online, off-campus and hybrid). Assessment results are reviewed and discussed using a continuous improvement mindset which considers indirect observations and feedback from faculty and other stakeholders.

RSBCs improvements in assurance of learning are based on results of quantitative and qualitative assessments that can be direct or indirect. Improvements include changes to assessment techniques and tools and, importantly, curriculum changes leading to the process of "closing of the loop," which entails further assessment of learning goals to measure effectiveness of adopted changes.

2021-22 Update:

Based on review by the AoLCI Committee and the Dean, the number of assessments conducted each semester was modified. In prior years we felt it necessary to measure all goals for all programs every academic year. However, based on AACSB guidelines and best practices of peers and aspirant institutions, RSBC has shifted to a measurement cycle that will result in a full assessment of our learning goals over a 3-semester cycle (Fall and Spring only) for the BS, BBA and MBA degree programs and a 4-semester cycle for the PMBA, MACc, MSBA, and MS in Finance degree programs.

III. ASSESSMENT, TOOLS, MEASURES, AND RESOURCES

Measures/Tools: Direct and Indirect Assessment Tools

Demonstration of a student's achievement of the learning goals/objectives is the approach used for the school's assessment. The assessment process uses a variety of qualitative and quantitative methods to measure student achievement across several aspects, as defined by the RSBCs faculty-authored rubrics.

For direct assessment, standardized tools, such as multiple choice exams or case-studies developed specifically for AoL, are primarily used in assessment of undergraduate program learning goals – ***general knowledge, ethics, and writing effectiveness***. Embedded assessments, such as exams or class assignments, are applied toward quantitative and qualitative assessment of learning goals in both undergraduate and graduate courses. These relate to ***critical thinking, teamwork, leadership, and technology fluency***.

A faculty-authored Common Body of Knowledge multiple choice exam that covers nine discipline areas was developed in 2010, and is continually updated by faculty to measure the BS and BBA learning goal ***general knowledge***. Students take the assessment in their senior year. This exam covers accounting, finance, operations management, organizational behavior, information technology, and marketing. Ethics and social responsibility will be added to the exam in AY22-23.

In compliance with recommendations from AACSB, RSBC also uses the following indirect/direct assessment tools:

- Faculty reviewers evaluate student deliverables, presentation materials and documents on an ongoing basis
- Pre- and post-test assessments in the Professional Skills courses assess students' preparedness for learning and professional engagement
- Peer reviews of team projects provide secondary measures for teamwork
- Grading rubrics are integral to our AoL process. The grading rubric is shared with faculty seeking to reinforce skills and knowledge throughout the educational process as part of RSBC's teaching effectiveness initiative
- Roundtables with industry partners identify trends and updates that may affect learning goals
- Internship surveys of employers and provide feedback on how our students are exemplifying our learning goals
- Feedback from the Dean's Leadership Council (alumni and corporate partners) capturing trends and learning goals for future leaders.

Direct Resources Utilized in the AoL Process:

a. Assurance of Learning & Continuous Improvement Committee

The charge of the AoLCI Committee is to evaluate graduate and undergraduate program delivery in regard to learning objectives and to develop strategies for, and implementation of, *closing the loop* activities associated with assurance of learning. This committee partners closely with graduate and undergraduate committees. Members of this committee represent their discipline areas and will be responsible for updating and engaging their colleagues in AoL processes. For AY2021-22, members of the committee were:

Dr. David Dwertmann – OB/Leadership
Dr. Andrei Nikiforov – Finance
Dr. Robert Schindler – Marketing
Dr. Deeksha Singh – International Business/Strategy
Dr. Yuliya Strizhakova – Marketing
Dr. Shankar Sundaresan – Operations Management/MIS
Carla Mandell – Staff Academic Administration
Nathan Levinson – Staff Academic Administration
Dr. Oscar Holmes IV – Assoc. Dean for UG Programs (Ex Officio)
Dr. Sney Banerjee – Assoc. Dean for Grad Programs (Ex Officio)

b. Office of Academic Administration

The Office of Academic Administration facilitates the beginning, middle, and end of the assessment process in cooperation with faculty. This office also collects, manages, and

distributes data and narrative of the AoL process and associated results to appropriate committees and faculty.

IV. BENCHMARKS AND STANDARDS

As required for AoL, RSBC has a benchmark noted for each learning objective. These benchmarks are at the aggregate level, applying to all rubric or test items added or averaged together. To understand results of benchmarking, RSBC uses both internal (e.g., historical trends) and external (e.g., other AACSB institutions of similar size and scope) comparatives. A review of AoL results does not always rely strictly on benchmarking but also utilizes individual trait scores relative to others in order to identify areas of improvement.

Benchmarks are the decision of faculty as they determine the learning goals and the level at which these goals should be met. Based on research from our peers and aspirant institutions, the benchmarks we use are similar, if not the same. For undergraduate learning, goals lie between 70% and 80% meeting and exceeding expectations except for *general knowledge* goals which are between 50% and 60%. For graduate learning goal assessment benchmarking, the range is 80-85% meeting and exceeding expectations. Indirect assessment results (partial list in Section III) are integrated into our benchmarking as deemed appropriate.

2021-22 Update: There were no updates to the benchmarking or standards for this time period.

School of Business-Camden
Assessment Council on Learning Outcomes (ACLO)
AY2021-22 Report {DRAFT}

**Prepared by: Nathan Levinson, Director Academic Administration
and Carla Mandell, AoL Coordinator**

1. Describe any changes made in the past year to school-wide learning outcome assessment plans or its leadership and articulate any changes in program- or department-wide learning outcome assessment processes. Please explain why any changes were made.

RSBC continues to have faculty and staff dedicated to the assurance of learning (AoL) process for all of its eight programs - BS, BBA, MBA/on-campus, MBA/online, PMBA, MAcc, MSBA and MS in Finance. A list of learning goals by program are included in Appendix A. The Assurance of Learning & Continuous Improvement (AoLCI) Committee, UG Curriculum Committee, Grad Curriculum Committee as well as administrative support by the Academic Services Department staff provide a continuing focus on AoL at RSBC. To support their efforts and communicate out to all faculty, a Canvas site has been created as a dedicated repository - it includes all learning goals and objectives for each program, tools used to measure assessments, rubrics for grading assessments, benchmarking ranges, assessment results, as well as general AoL educational materials.

During AY2021-22, based on an evaluation of peer and aspirant accredited institutions, the Dean proposed that RSBC shift to a more efficient and focused cycle of assessment versus the “test all goals for all programs each academic year” that we have followed in the past. Thus, a proposal was brought forth to the AoLCI Committee and the Dean’s cabinet that we rotate the cycle of assessments to complete the BS, BBA, and MBA within a 3-semester cycle and the PMBA, MAcc, MSBA and MS in Finance in a 4-semester cycle. This change will give faculty an opportunity to fully implement changes recommended from our AoL cycle and deliver more meaningful assessments. Further, our lightly staffed Academic Administration unit which facilitates data collection, analysis, and dissemination could also conduct its processes more thoroughly. The change is within the guidelines of our peers, aspirants, and the Association to Advance Collegiate Schools of Business (AACSB), our accreditation body.

Two new programs were launched in Fall 2021 - Master of Accountancy (MAcc) and a Master of Science in Business Analytics (MSBA). Learning goals and objectives for both had been identified and approved by the Graduate curriculum committee and the AoLCI committee. Assessments cycles for both programs were initiated in Fall 2021 and will be fully instituted in Fall 2022 as the number of matriculated students in each degree program reaches a measurable level.

Another new program was approved during AY2021-22, the Master of Science in Finance – Wealth Management Track. The learning goals and objectives for this program were

identified within the proposal approved by the Board of Governors. The program launches in Fall 2022 and learning goal assessment will begin in earnest in AY23-24.

2. Describe any changes made in school-wide learning goals in the past year, and why such changes were made. Please provide examples if any program- or department-wide learning goals were changed, and the reasons for doing so.

RSBCs AoLCI Committee has reviewed all learning goals and objectives for the various programs and have made changes based on this review. No learning goals were removed. The phrasing of some learning goals was updated to reflect current trends in business schools (e.g., the learning goal titled Global Mindset was changed to **Global Perspective**, Ethics was changed to **Ethical Reasoning**). In addition, some learning goals were streamlined as per emergent standards (e.g. collapsing Financial Ethics and Ethics & Social Responsibility to one learning goal - **Ethical Reasoning** and collapsing Oral and Written Communications into the goal **Effective Communication Skills** to represent discussions, written material and oral presentations). Two new goals have been proposed: **Social Responsibility** and **Professional Skills**. Research for consideration is being conducted on these proposed goals by the AoLCI Committee.

In Spring 2022, the UG Curriculum Committee began a review of the entire UG curriculum (BS and BBA programs). The committee is taking into consideration the learning goals and objectives for the BS and BBA programs in their review to ensure identification of any proposed changes to learning goals/objectives that might emerge from curriculum changes. Any learning goal changes will be further reviewed and implemented following the normal process as outlined earlier. The curriculum review is expected to be completed by Spring 2023 with implementation to be phased in starting Fall 2023.

The new degree program, Master of Science in Finance – Wealth Management Track, was approved during AY 2021-22. The learning goals and objectives were identified and approved as part of the formal university program approval process (see Appendix A for a listing of the learning goals). These goals will be scheduled for assessment starting in AY2023-24.

3. Describe any measured changes in student performance in achieving desired learning outcomes during the past year. Describe which assessment results were used to motivate the changes, especially results from direct assessment of student learning. If applicable to your unit, please include licensing examination results. Please describe how these measured changes will be addressed, either through efforts to improve any declines that have been detected, or to build upon any improvements noticed.

The following *closing-of-the-loop* activities have been implemented based on our assessments:

- The learning goals **Technology Fluency** and **Critical Thinking** are measured through RSBC's IT & Project Management, Equity Investments, and Marketing Research courses. Results of the assessments of these learning goals met the

benchmarks as set by our faculty. **Critical thinking** had mixed results and is being addressed in our UG curriculum review scheduled for AY22-23.

- However, in a review specifically done by RSBC's Accounting area, it was noted that very little technology was introduced or reinforced specific to the areas accounting/auditing courses. This review was based on indirect assessments provided by internship employers (surveys) as well as research of our peers and aspirants, and industry trends. When the **Technology Fluency** and **Critical Thinking** learning goals were measured specific to the Auditing course, the results were not at the benchmark set by the Accounting faculty. As such, the faculty developed a new course titled *Auditing Analytics* (now required for the UG accounting degree). This course, first offered in Spring 2022, required *Concepts of Auditing* as a co-requisite. Assessments of the students in the course found a significant increase in application/traits associated with the learning goals **Technology Fluency** and **Critical Thinking**. Another course, *Accounting Information Systems*, was also added to the UG accounting curriculum and is scheduled for assessment in FY2022. On the graduate side, the MAcc program will offer in Spring 2023 an *Accounting Analytics* course. This course has already been established as part of the required curriculum and which will be measured as the course launches.
- RSBC has had a mixed history of direct assessment results regarding **Communication-Impact & Effectiveness** as well as **Teamwork**. The demand for online courses has challenged the assessment of this learning goal as well as the faculty's ability to address them in their teaching. Upon sharing the results with faculty, a faculty member identified a unique method to engage students, thereby promoting that faculty to exemplify the communication learning goal. This faculty's course, *Talent Management*, requires students to conduct research on various companies. Instead of writing out the results, the students are assigned by the faculty to teams which develop a podcast to report the results. The outcome was a very impressive showing of communications skills as well as teamwork. Assessments on the assignment (including a peer review of the team effort, which is our direct assessment measure for the learning goal of **Teamwork**) showed very high results in the rubric traits of developing and delivering information (**Communication**) and the traits of Contribution, Cooperation, and Initiative (**Teamwork**). This same effort is being considered for adoption by the graduate-level course *Talent Management* as well as other courses that have these goals incorporated.

The above is not considered a curriculum change but a teaching effectiveness adoption that results in a closing of the loop of a deficiency in supporting a learning goal. These "synchronous moments" in our online programs are key to the integrity of our AoL efforts.

Another effort to measure the **Impact & Effectiveness of Communication (Oral)** was advanced in the new course Professional Development Skills which is required for all RSBC students. As part of this course, students learn to give effective presentations and are assigned two short oral presentations with immediate faculty feedback which is designed to improve the final project, which is another oral presentation. Pre- and post-assessments

have shown notable improvements. This assessment is being further formalized for data capture and possible implementation in other courses.

The graduate MAcc program is available to students with or without an accounting background i.e., a baccalaureate degree in accounting or accounting professional experience is not necessary for admission to the program. The program faculty recognized that a learning deficiency that might occur in the first accounting course of the program due to this flexible acceptance policy. To address this, they created a zero-credit course in Canvas titled *Financial Accounting-Knowledge Seminar* which is required for all first year MAcc students. The course is also made available to MBA students who may the need for an accounting refresher before starting their degree program. Similarly, a zero-credit MAcc *Tax Knowledge Seminar* and an *Audit Knowledge Seminar* have also been developed.

The finance area has taken a similar approach by creating a zero-credit seminar course to assist students in their entrance to *Financial Management*, the first graduate finance course for MBA and MS Finance students.

4. *Has the availability of syllabi and learning goals on school, program, and/or departmental web sites been maintained over the past year? If not, please provide an explanation.*

Syllabi and learning goals/objectives have been updated on the school's websites:

<https://business.camden.rutgers.edu/about/accreditation/assurance-of-learning/>

<https://business.camden.rutgers.edu/undergraduate/academic-services/undergraduate-syllabi/>

APPENDIX A – LEARNING GOALS

Program	Learning Goals	Learning Objectives
Bachelor of Science/ Bachelor of Arts in Business Administration	General Management Knowledge	Students will demonstrate an understanding of the basic functions of business and functional area concepts
	Critical Thinking	Students will be able to critically use information and data to analyze, interpret and solve business problems.
	Teamwork and Interpersonal Relations	Students will develop interpersonal skills and demonstrate the ability to work effectively in teams.
	Effective Communication Skills	Students will demonstrate the ability to communicate complex ideas effectively and accurately in a range of contexts.
	Global Perspective	Students will demonstrate an ability to identify and analyze global factors (political economic, culture, legal, demographic) that impact the management of business operations in the global environment.
	Ethical Reasoning	Students will realize that organizations and their actions affect different stakeholders; they will demonstrate the ability to identify and weigh the ethical implications of these actions.
	Technology Fluency/IT Literacy	Students will demonstrate conceptual knowledge and practical application of information technology.
Master of Business Administration/PMBA	Critical Thinking and Analytical Decision Making	Students will be able to critically interpret and synthesize information and data to solve business problems.
	Teamwork and Interpersonal Relations	Students will develop interpersonal skills and demonstrate the ability to work effectively in teams.
	Effective Communication Skills	Students will demonstrate the ability to communicate complex ideas effectively and accurately in a range of contexts.
	Global Perspective	Students will demonstrate an ability to understand and evaluate diverse business environments in which firms operate globally.
	Ethical Reasoning	Students will realize that organizations and their actions affect different stakeholders; they will demonstrate the ability to identify and weigh the ethical implications of these actions.

Program	Learning Goals	Learning Objectives
	Technology Fluency/IT Literacy	Students will demonstrate conceptual knowledge and practical application of information technology.
Master of Science in Business Analytics	Discipline Specific Knowledge	Students will demonstrate knowledge of techniques for extracting, cleaning, describing, segmenting, modeling, predicting and reporting data
	Critical Thinking Skills	Students will demonstrate the ability to interpret, evaluate, and synthesize information leading to solutions which leverage analytics to achieve business outcomes.
	Effective Communication Skills	Students will demonstrate the ability to communicate complex ideas effectively and accurately in a range of contexts.
Master of Accountancy	Professional Competency & Ethical Reasoning	Students will demonstrate professional competency in the various areas of accounting and within that competency recognize and respond appropriately to professional, ethical and regulatory issues.
	Analytical and Critical Thinking Skills	Student will demonstrate the ability to interpret, evaluate, and synthesize information leading to decision making and problem solving integrating as required the appropriate accounting/tax/auditing standards, concepts and applications.
	Technology and Analytics Fluency	Students will demonstrate conceptual knowledge and practical application of information technology as well as the ability to apply data analytic techniques to solve problems and achieve business outcomes.
	Effective Communication Skills	Students will demonstrate the ability to communicate complex ideas effectively and accurately in a range of contexts.
Master of Science in Finance – Wealth Management	Discipline Specific Knowledge	Students will demonstrate knowledge of financial markets, financial products, and financial decision making
	Critical Thinking Skills	Student will demonstrate the ability to interpret, evaluate, and synthesize information to recommend solutions to complex financial problems
	Ethical Reasoning	Students will demonstrate knowledge of the effects of financial decisions on individuals, groups, and society at large

Rutgers University-Camden
Faculty of Arts and Sciences

A program review:

- Ensures that the department contributes to the College's mission of providing high quality academic and nonacademic programs;
- Links programmatic planning, budgeting, outputs and assessment with University and College's mission, strategic goals, and institutional effectiveness;
- Is a collaborative process involving a broad spectrum of faculty, staff, students and alumni, as appropriate;
- Occurs in a positive and collegial environment that fosters cooperation and improvement. In no instance will the results of program review be used in a punitive manner for personnel.

Program Review Outcomes

A program review affords the opportunity for a comprehensive evaluation of program goals, objectives and learning outcomes building upon the information shared in annual outcomes assessment reports and departmental annual reports. After the program review is complete, the department should have a more comprehensive understanding of programmatic components.

- *Description.* Obtain and provide information about the current status of the program.
- *Analysis.* Clearly identify program strengths and weaknesses, including those external and internal to the University.
- *Organizational linkages.* Provide information about how the program is linked to other programs and services within the institution.
- *Process efficiencies.* Understand the efficiencies and resource utilization of the program, including faculty loads, class sizes, and facilities use.
- *Program outcomes.* Provide data and analysis demonstrating program outcomes, e.g., student learning, as well as areas where desired outcomes are not being achieved.
- *Key issues and institutional priorities.* Describe and analyze how the program is responding to key organizational issues and priorities; e.g., diversity, technology.

Program Review Timeline and Responsibilities

The dean's office will maintain a timeline for academic program reviews and assist departments with the steps involved in the process. A department tasked with carrying out a program review will be notified of an upcoming review the summer prior to the academic year the review is scheduled to take place. Special issues for the review will be identified in advance and agreed upon (e.g., alignment with specific school or institutional goals, or special issues relating to a particular program or department). Relevant information (e.g., enrollment and degrees awarded, etc.) for that department will be distributed in a data packet from the Dean's office.

Academic Program Review Report

The program review document should contain a cover page, the six parts described below, and exhibits as appropriate.

Cover: Name of Program
Chairperson
Names of those participating in the program review process

Part I: Introduction

The purpose of the introduction is to describe the program to individuals, such as members of the Assessment Council on Learning Outcomes, who are unfamiliar with the program. The introduction also serves to describe the process used to conduct the review and the internal and external context within which the program operates.

- What does the program do (description)? This may include a history of the program, program objectives, characteristics of students and other information that informs internal and external reviewers.
- What process was used in doing the program review? The University encourages broad-based participation in the program review process, including involvement of full-time and part-time faculty, staff, administrators, advisory committees, professional organization representatives if appropriate, and others. Clearly each program will have its own set of individuals who might participate in the program review process.
- What major changes over the past several years, both external and internal to the College and the University, have affected the program?

Examples of external changes include:

- Changes in the labor market
- Changes in or new licensure or accreditation requirements
- Receptivity of transfer institutions
- Pool of students and potential students
- State transfer initiatives

Examples of internal changes include:

- Retention of students in program
- Enrollment changes
- Revisions, additions and deletions of curricula and courses
- Technology as it impacts teaching, learning and course delivery
- Changes in faculty and staff
- Facilities
- Budget additions and/or deletions

Part II: Need for the Program

The purpose of this section is to explain why the program is needed at Rutgers University-Camden and how it supports Rutgers University-Camden's mission. Instructional programs often use evidence such as enrollments by majors and non-majors, curricula or courses fundamental to the University's mission and labor market need.

Part III: Quality

The purpose of this section is to provide a narrative and indicators of quality for the program from both an internal and an external review. The program should present a "pattern of evidence" regarding quality. Reviews should include the following data, if relevant, as well as additional data and information germane to the specific program:

- Student enrollment data over five years
- Degrees / certificates awarded over seven years
- Satisfaction of students, graduates and employers
- Advisory committee members and activities if any
- Number and credentials of full and part-time faculty and their achievements
- Quality of equipment and facilities
- Support from external agencies such as accrediting bodies or advisory committees
- Innovative activities or services
- Course and overall curriculum development and revision
- Summary of assessment findings
- Linkages with external organizations
- External grants or other awards
- Results of course syllabus review conducted by department to ensure syllabi are current

Assertions of quality need to be supported with documented evidence such as survey results, lists of faculty presentations/publications, etc. Sources of data should be noted as well. Multiple measures of quality should be used. These may be quantitative, qualitative, or a combination. There are no uniform criteria or formulas or indicators of quality that are applicable to all programs.

The quality section in its final form should also contain a summary of the findings from the external reviewer and departmental responses to external review recommendations.

In a program review of this nature, discussions of program weaknesses and challenges are also appropriate. Recognizing areas for improvement is as much a part of the program review process as identifying areas of strength.

Part IV: Program Outcomes Assessment

The purpose of this section is to summarize annual assessment report findings and the use of assessment results to improve learning within the program. The department's process for reviewing assessment findings should also be discussed here.

This section builds upon the already defined academic program goals and objectives and has identifying measures to be used to assess expected outcomes. Academic departments report annually on assessment of program-level student learning outcomes. The annual assessment reports should form the basis for the comprehensive review of assessment findings.

Part V: Learning and Recommendations

The purpose of this section is twofold: a) to describe what faculty and staff of the program have learned through the program review process, and b) to describe what is planned as a result of what was learned. Recommendations and a timeline for specific actions to improve or sustain quality and to address weaknesses over the next five years should be clearly stated in this section. Include a plan for a continuous improvement process, any marketing strategies to increase enrollment, and how the program will address issues of retention and graduation rates as appropriate.

Exhibits

Programs may add exhibits to amplify and enhance the report. Please note that each item presented in an exhibit should be referenced in a discussion within the body of the report itself; the reader should know why the exhibit is important and what it adds to understanding.

Examples of exhibits are:

- Enrollment
- Degrees and certificates awarded
- Cost / revenue data
- Results from student surveys
- Annual student learning assessment reports (including results)
- Labor market data
- Advisory committee rosters, meeting agendas and minutes
- Informational and marketing literature
- Descriptions of innovative projects or activities
- Other relevant materials

External Review Standards

Choosing a Reviewer

At the time the program is notified that it will be conducting a program review, departmental leadership should develop a list of names of possible reviewers. This reviewer must be external to the University. External reviewers should be distinguished scholars/teachers/practitioners in the field and be familiar with campuses that are similar to Rutgers University-Camden or the department undergoing review. It is also helpful for external reviewers to have had experience with program administration. The Department Chair recommends three external reviewers to the Dean, who in conjunction with the Provost, will then select the most qualified reviewer. Contractual funds to support external reviews will be budgeted via the Department, Dean's Office and/or Provost's Office.

Instructions and Materials for the External Review Team

Thirty days prior to the scheduled campus visit, information from the program internal review and other relevant materials are sent along with a charge by the faculty conducting the program review. The reviewer should compile a report that includes observations, strengths, weaknesses, and recommendations based on evidence.

External Review Visit and Report

The review visit typically lasts for one day, during which time the review committee members meet with department faculty, academic advisors, students, and select administrators. The reviewer typically takes part in an exit interview just prior to concluding its departmental visit. An exit interview template is included in this manual to guide this portion of the external review process.

External reviewers are expected to submit their written evaluation to the campus program review committee within several weeks of the visit. The written evaluation should include a review of strengths and challenges, resource allocation and program viability, and suggestions for improvement. Upon submission of the report, external reviewers receive a previously agreed upon stipend and travel expense reimbursement (to be determined by the department under review, in consultation with the dean's office).

As soon as the program receives the report from the external review team, it is distributed to the department. The department is typically asked to review the report (within a brief time period) for factual inaccuracies and misperceptions. To maximize the effectiveness of program review, the findings and resulting decisions will be shared with stakeholder groups. Such sharing of findings generates buy-in to the program's and/or institution's goals and creates an opportunity for all stakeholders to review the program review results.

External Review Report Template

Program: _____ Date of Review: _____

		Exemplary	Satisfactory	Needs Improvement	Unclear at this time
1. Curriculum					
1.1	The current curriculum <i>content</i> is appropriate to the level and purpose of the program.				
1.2	The <i>design</i> of the curriculum is adequate (required depth and breadth of study, flow of courses, frequency of course offerings, overall coherence, alignment with desired learning outcomes, etc.) to enable students to develop the skills and attain the outcomes needed for graduates of this program.				
1.3	The program clearly outlines program requirements to ensure timely completion of the program.				
Do you recommend any changes to enhance the curriculum (content, design, course availability, etc.)? If so, please explain and advise.					
2. Program Outcomes					
2.1	The program student learning outcomes reflect the most important skills, knowledge, and values of the discipline/profession.				
2.2	The criteria and standards of achievement for the program student learning outcomes adequately match disciplinary and professional standards.				
2.3	Based on your review of student work samples and annual learning results reports, student achievement of the program student learning outcomes is adequate for the degree and discipline.				
2.4	The assessment plan is appropriate and the assessment practices are yielding the needed information to determine how well students are learning the program student learning outcomes.				
Do you recommend any changes to enhance student achievement or program assessment of the program outcomes? If so, please explain and advise.					

		Exemplary	Satisfactory	Needs Improvement	Unclear at this time
3.	Student Experiences and Learning Environment				
3.1	Students are satisfied with the overall quality of their learning experience.				
3.2	Students are adequately supported through the curriculum and advising to ensure their learning success.				
3.3	Class size levels are appropriate to enable student learning.				
3.4	The program provides adequate opportunities for internships, field experiences, and undergraduate research, as appropriate.				
3.5	Student support services are adequate and supportive.				
3.6	Do you recommend any changes to improve student experiences and learning environment? If so, please explain and advise.				
4.	Faculty Quality				
4.1	Faculty competencies/credentials are appropriate for the discipline and degree.				
4.2	Faculty specialties correspond to program needs and to the concentrations in which they teach.				
4.3	The system for evaluating teaching practices facilitates continuous improvement of teaching and learning throughout the program.				
4.3	Faculty are adequately supported and engaged in ongoing professional development necessary for staying current in their field and continuously updating their courses/curriculum.				
4.5	Do you recommend faculty changes (qualifications, expertise, teaching practices, professional development, etc.) to enhance program quality and student learning? If so, please explain and advise.				
5.	Diversity				
5.1	The program demonstrates a commitment to diversity in its curriculum, and student and faculty composition.				
5.2	Do you recommend changes to the commitment to diversity? If so, please explain.				
6.	Program Administration and Support				
6.1	The library and student support resources are current and adequate to meet student and faculty needs.				
6.2	The laboratory facilities and support are adequate to meet student and faculty needs.				
6.3	The program has accurately identified and prioritized the program's most pressing resource needs.				
6.4	The program's student recruitment and retention processes are adequate.				
6.5	Overall program administration is efficient and effective and meets professional standards.				

Program Review

	Exemplary	Satisfactory	Needs Improvement	Unclear at this time
6.6	Do you recommend any changes to strengthen the program's current administration, support, and resources (including possible reallocations of resources from current program operations to fund new budgetary priorities)? If so, please explain.			
7.	Response to Internal Review Recommendations			
7.1	The proposed changes are responsive to the program's most important needs.			
7.2	The program makes use of assessment results, institutional research data, and other information obtained from students/alumni/employers as the basis of its proposed improvements.			
7.3	Do you recommend changes to the internal review recommendations? If so please explain and advise.			
8.	Overall Program Summary			
8.1	What are the major strengths and weaknesses of the program? In your formal report, please identify and cite the evidence that supports your answer.			
8.2	What goals would you suggest the program set for the next five years (please list in order of priority, the most important goal first) and how do these comport with those identified in the self-study? In your formal report, please identify and cite the evidence that supports your answer.			
8.3	What are the most realistic and important strategies the program can use to achieve the highest priority goals?			
8.4	What goals would require additional resources? What level of resources would these goals require? How might the program secure these resources?			

SECTION I: PROGRAM AND INSTITUTION DEMOGRAPHICS

A. Degree / Certificate Level – Select all that apply and indicate the name of the degree / certificate:

- Bachelor's: _____
(BA, BS, etc.)
- Master's: _____
(MA, MS, MBA, MEd, MSN, etc.)
- Combined Master's/Doctorate: _____
(MS/Ph.D., MEd/Ed.D., MSN/DNP, etc.)
- Doctorate: _____
(Ph.D., DNP., etc.)
- Certificate: _____

B. Title of the Program reviewed:

C. Academic Department:

D. Academic College / School:

SECTION II: EXTERNAL REVIEW PROCESS

A. Year in which the program review process was completed:

B. Regional or Programmatic Accreditation Self-Study Review: _____ Yes _____ No

If Yes, indicate accrediting organization:

C. Name(s) and Affiliation of External Reviewer(s):

SECTION III: ENROLLMENTS & DEGREES AWARDED FOR EACH OF THE PAST FIVE YEARS IN THIS PROGRAM

A. Enrollment:

Undergraduate Enrollment				
2017	2018	2019	2020	2021

Graduate Enrollment				
2017	2018	2019	2020	2021

B. Degrees Awarded:

Undergraduate	Degrees Awarded				
	2017	2018	2019	2020	2021
Bachelor's					

Graduate	Degrees Awarded				
	2017	2018	2019	2020	2021
Master's Doctorate Certificates					

SECTION IV: SUMMARY OF THE INTERNAL AND EXTERNAL REVIEW

- A. Summary of internal self-study review findings.
- B. Summary of external review recommendation(s) for action. If a regional or programmatic accrediting organization provided the external review, please indicate the organization and the context in which the review occurred.

SECTION V: DEPARTMENTAL / COLLEGE OR SCHOOL / INSTITUTIONAL ACTION PLAN

- A. Summary of action plan to address recommendation(s):
 - 1. Mechanism for follow-up and assessing the progress of the recommendation(s).
 - 2. Low enrollment and low degree productivity programs: *
 - a) Identify the special circumstances that impact low enrollment and/or low degree productivity in this program;
 - b) Briefly explain why this program with low enrollment and/or low degree productivity should be continued at this time (i.e. its connection or support of another program); and
 - c) State clearly the plan and progressive timelines to increase enrollment and/or degree productivity in this program such that it remains viable.

*Please complete this information if the program has demonstrated low enrollment and/or low degree productivity during the review period.

For Reference, MHEC Definition of Low Degree Productivity:

Bachelor's: < 5 in most recent year or a total of 15 in last three years

Master's: < 2 in most recent year or a total of 6 in last three years

Doctorate: < 1 in most recent year or a total of 3 in last three years

SECTION VI: INSTITUTION SUBMISSION INFORMATION

Submitted by:

Date of Submission:

Contact Information (Name, email, office phone)

Systematic Evaluation Plan for Rutgers School of Nursing- Camden
Updated and Approved by Faculty Organization- Spring 2021

STANDARD I - MISSION AND GOVERNANCE					
<i>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 interest. Policies of the parent institution and nursing program clearly support the program's missions, 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.</i>					
Plan				Implementation	
Criterion and Specific Goals	Responsibility	Frequency of Assessment	Assessment Methods	Data and Findings	Quality Improvement
I-A The mission, goals, and expected program outcomes are congruent with those of the parent institution; and reviewed periodically and revised as appropriate.	Fac Org (faculty retreat) LRP SSR	Annually	End of year committee reports	The SNC mission, goals, and expected program outcomes are congruent with those of the parent institution; and reviewed periodically and revised as appropriate.	<u>Actions for Maintenance:</u> Report to Faculty Organization summarizing content analysis with recommendations and revisions as appropriate. Recommendations and revisions reflected in Faculty Retreat minutes. <u>Link to Results/Outcomes:</u> The SNC mission, goals and expected program outcomes reflect those of RU Camden. https://nursing.camden.rutgers.edu/strategic-plan
I-B The mission, goals, and expected program outcomes are consistent with relevant professional nursing standards and guidelines for the preparation of nursing professionals.	BCER GPP LRP Fac Org (faculty retreat) Student input: SNA, BCER, GPP	Every 3-5 years	End of year committee reports	The SNC mission, goals and expected program outcomes are reflective of professional nursing standards and guidelines for the preparation of nursing professionals.	<u>Actions for Maintenance:</u> Report to Faculty Organization summarizing content analysis with recommendations and revisions as appropriate. Recommendations and revisions reflected in Faculty Retreat minutes. <u>Link to Results/Outcomes:</u> The SNC mission, goals and expected program outcomes are reflective of professional nursing standards and guidelines for the preparation of nursing professionals. https://nursing.camden.rutgers.edu/strategic-plan
I-C The mission, goals, and expected program outcomes	Dean; Advisory Council	Periodically	Advisory meeting minutes	The SNC mission, goals, and expected program outcomes reflect the needs	<u>Actions for Maintenance:</u>

<p>reflect the needs and expectations of the community of interests.</p>		<p>Spring 2021 Faculty Retreat meeting</p>		<p>and expectations of the community of interest. RUSNC continue to encourage partnerships to assist RSNC community to meet its needs.</p>	<p>Report to Faculty Organization summarizing content analysis with recommendations and revisions as appropriate. Recommendations and revisions reflected in Faculty Retreat minutes.</p> <p><u>Link to Results/Outcomes:</u> The mission, goals, and expected program outcomes reflect the needs and expectations of the community of interest. https://nursing.camden.rutgers.edu/strategic-plan</p>
<p>I-D The nursing unit's expectations for faculty are written and communicated to the faculty and are congruent with institutional expectations.</p>	<p>Dean Associate Dean Fac Affairs & Dev</p>	<p>Annually – new hires Twice prior to submission for reappointment or promotion.</p>	<p>Faculty peer evaluations and student course and instructor evaluations Assess faculty outcomes in teaching, scholarship, and service. Assess faculty progression towards promotion and tenure by reviewing Peer Review Committee actions.</p>	<p>The nursing unit's expectations related to teaching, scholarship, and service for faculty are written and communicated to the faculty and are congruent with institutional expectations. These are published on the University's Academic Affairs WEB Site. The information is further elaborated for Clinical Track Faculty in the Faculty Handbook. Campus workshops co-sponsored by AAUP, AFT, and reports from SNC union representative.</p>	<p><u>Actions for Maintenance:</u> Assess faculty progression towards promotion and tenure by reviewing peer teaching, student evaluations and Peer Review Committee actions. Frequent monitoring of the Academic Relations website and Departmental criteria.</p> <p><u>Link to Results/Outcomes:</u> The nursing unit's expectations related to teaching, scholarship, and service for faculty are written and communicated to the faculty and are congruent with institutional expectations. https://www.camden.rutgers.edu/about/strategic-plan https://www.rutgers.edu/about-rutgers</p>
<p>I-E Faculty and students participate in program governance.</p>	<p>All faculty committees Student Nurses Association Student Handbook</p>	<p>Yearly</p>	<p>Each committee identified in the Bylaws of the Faculty Organization submits an annual report listing active faculty and student members, activities, and recommendations</p>	<p>Student and faculty participation in governance is consistent with the published Bylaws of the Faculty Organization. RSNC faculty are represented on appropriate campus and University Committees.</p>	<p><u>Actions for Maintenance:</u> On an annual basis, the Long Range Planning committee solicits interest in faculty committees and assigns each faculty member to committees. Faculty Chairs are responsible to solicit student members.</p> <p><u>Link to Results/Outcomes:</u> Faculty and students are active, contributing members of the University, campus and school community. https://camden.rutgers.edu/new/about/ https://nursing.camden.rutgers.edu/sites/nursing/files/SNC%20Student%20Handbook%202019-2021.pdf</p>

			for the following academic year. University and campus service by faculty is listed on annual evaluations.	Long Range Planning committee collects and reviews annual reports for faculty and student participation.	SNC Committee Assignments 2019-2020 FINAL.docx
I-F Academic policies of the parent institution and the nursing program are congruent and support achievement of the mission, goals, and expected program outcomes. These policies are; fair and equitable; published and accessible; and reviewed and revised as necessary to foster program improvement.	Dean Associate Deans Program Directors	Yearly and as needed to respond to emerging situations.	Student handbook review occurs yearly, students are required to acknowledge receipt, students are notified via official email of changes.	Deans, Associate Deans and Program Directors ensure substantive review and input from faculty. Policies and procedures are published in the RSNC Handbook and are consistent with University and campus policies.	<u>Actions for Maintenance:</u> Review and revision occurs yearly, and as needed during the academic year, to maintain a fair, equitable and continuously improving academic environment. <u>Link to Results/Outcomes:</u> Student handbook online at (https://nursing.camden.rutgers.edu) https://nursing.camden.rutgers.edu/sites/nursing/files/SNC%20Student%20Handbook%202019-2021.pdf https://www.camden.rutgers.edu/information/information-faculty-staff
I-G The program defines and reviews formal complaints according to established policies.	Dean Dean of Students	All complaints are addressed within 10 working days. Incidents involving Title IX violations are addressed immediately.	The campus Dean of Students Office initially reviews all complaints and triages as appropriate to the RSNC, or other University office for resolution.	Dean of Students brings areas of concern to the Dean. Students and faculty have a robust, confidential system to report concerns. Students and faculty have access to a mechanism to report violations of community standards. The mechanism for a complaint related to a grade is clearly outlined in the Student Handbook.	<u>Actions for Maintenance:</u> Continue to collaborate with the Dean of Students Office. <u>Link to Results/Outcomes:</u> RSNC practices are published, consistent with University policy and provide a forum to address concerns and violations of community standards by any member of the University community. https://www.camden.rutgers.edu/information/information-faculty-staff https://studentaffairs.camden.rutgers.edu/

<p>I-H Documents and publications are accurate. A process is used to notify constituents about changes in documents and publications.</p>	<p>All faculty and students</p>	<p>The process for review of documents and publications is iterative to maintain currency.</p> <p>The Student Handbook is reviewed annually.</p>	<p>Faculty and students alert administrative staff and verify changes have been made.</p>	<p>RSNC website is maintained by administrative staff who work closely with administration and faculty to publish accurate information for students, faculty and the communities of interest.</p> <p>Accuracy maintained, the website and handbook are useful tools for the dissemination of information.</p>	<p><u>Actions for Maintenance:</u> Continue to review publications; notify students via official University email of changes.</p> <p><u>Link to Results/Outcomes:</u> Documents are accurate; students are notified immediately of changes. https://nursing.camden.rutgers.edu/ https://nursing.camden.rutgers.edu/sites/nursing/files/NC%20Student%20Handbook%202019-2021.pdf https://www.camden.rutgers.edu/information/information-faculty-staff</p>
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STANDARD II - PROGRAM QUALITY: INSTITUTIONAL COMMITMENT AND RESOURCES

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

Plan				Implementation	
Criterion and Specific Goals	Responsibility	Frequency of Assessment	Assessment Methods	Data and Findings	Quality Improvement
<p>II-A Fiscal resources are sufficient to enable the program to fulfill its mission, goals, and expected outcomes. Adequacy of fiscal resources is reviewed periodically, and resources are modified as needed.</p>	<p>Dean Leadership Cabinet Budget Manager</p>	<p>Annually each spring</p> <p>Periodically resources are modified as needed.</p>	<p>Review budget allocations/expenditures, student enrollments, faculty/student ratios, faculty salaries, workload and productivity, adequacy of staff, and adequacy of facilities (classrooms, conference spaces, administrative</p>	<p>The SNC ensures that fiscal resources are sufficient and adequate to enable the program to fulfill its mission, goals, and expected outcomes.</p>	<p><u>Actions for Maintenance:</u> Report to Faculty Organization all matters regarding fiscal issues with recommendations and revisions as appropriate. Recommendations and revisions are recorded in Faculty Organization minutes.</p> <p><u>Link to Results/Outcomes:</u> Faculty salaries are at or above North Atlantic Mean as reported by the American Association of College of Nursing.</p> <p>Annual report to Dean re: scholarly, teaching and service responsibilities of faculty are achieved.</p>

			offices and lab space).		
<p>II-B Physical resources and clinical sites enable the program to fulfill its mission, goals, and expected outcomes. Adequacy of physical resources and clinical sites is reviewed periodically, and resources are modified as needed.</p> <p>Student evaluations of clinical sites are at or above 3 on a scale of 1-5.</p> <p>Exit surveys of students indicate achievement of Baccalaureate Essentials.</p> <p>CARES staff complete annual evaluation indicating adequacy of resources.</p> <p>Maintenance of Simulation Laboratory Accreditation.</p>	<p>Dean Associate Deans SNC CARES Director</p>	<p>Each semester and periodically so that resources are modified as needed.</p> <p>Center for Interprofessional Education, Practice and Innovation (clinical simulation laboratory) Computer Labs, Library (policies, inventory, holdings, selected with faculty input), Student Success Center, RU-Teaching and Learning Center, Instructional Technology, and Canvas.</p>	<p>Assess availability, adequacy of physical and academic support systems to meet program outcomes.</p> <p>Student evaluations of clinical sites</p> <p>Exit surveys</p> <p>CARES staff annual evaluation</p>	<p>Physical resources and clinical sites are adequate and are reviewed periodically.</p>	<p><u>Actions for Maintenance:</u> Report to faculty organization all matters regarding fiscal issues with recommendations and revisions as appropriate. Recommendations and revisions are recorded in Faculty Organization minutes. Report to Dean regarding adequacy of resources.</p> <p><u>Link to Results/Outcomes:</u> Student evaluations of clinical sites</p> <p>Exit surveys of students</p> <p>CARES staff annual evaluation</p>
<p>II-C Academic support services are sufficient to meet program and student needs and</p>	<p>Dean Associate Deans SNC CARES Team Nursing Support Specialists</p>	<p>Annually</p>	<p>Academic progression and retention data (SSR) – committee reports</p>	<p>The academic advisement and support services provided promote attainment of the objectives of the curriculum and academic</p>	<p><u>Actions for Maintenance:</u> SSR committee report to Faculty Organization all matters regarding student progression and retention. SNC CARES reports to Faculty Organization academic support services are sufficient to meet program and student needs.</p>

<p>are evaluated on a regular basis.</p>			<p>SNC CARES assessment of resources</p>	<p>progression necessary to meet program outcomes.</p>	<p>Dean makes recommendations to Chancellor as appropriate. Statement to Faculty Organization and recorded in minutes that this report has been submitted.</p> <p><u>Link to Results/Outcomes:</u> SNC CARES staff complete annual evaluation indicating adequacy of resources.</p> <p>Exit survey of students indicates satisfaction with advisement.</p>
<p>II-D The chief nurse administrator of the nursing unit: is a registered nurse (RN); holds a graduate degree in nursing; holds a doctoral degree if the nursing unit offers a graduate program in nursing; is vested with the administrative authority to accomplish the mission, goals, and expected program outcomes; and provides effective leadership to the nursing unit in achieving its mission, goals, and expected program outcomes.</p>	<p>Dean Leadership Cabinet Advisory Council SNC Alumni Association Student Nurses Association</p>	<p>Every two years</p>	<p>Examination of SNC Dean’s qualifications and workload to permit her to carry out administrative and leadership activities.</p> <p>Position Description, Dean’s Leadership Cabinet, Dean’s Leadership Advisory Circle, SNC Alumni Association Chapter and Student Nurses Association Chapter.</p>		<p><u>Actions for Maintenance:</u> Dean makes recommendations to the Chancellor as appropriate. Statement to Faculty Organization and recorded in minutes that this report has been submitted.</p> <p><u>Link to Results/Outcomes:</u> Annual evaluation by Chancellor indicates achievement of unit objectives.</p>
<p>II-E Faculty are: sufficient in number to accomplish the mission, goals, and expected program outcomes; academically</p>	<p>Dean</p>	<p>Annually</p>		<p>The SNC faculty are: sufficient in number to accomplish the mission, goals, and expected program outcomes; academically prepared for the areas in which they teach; and experientially</p>	<p><u>Actions for Maintenance:</u></p> <p><u>Link to Results/Outcomes:</u> Yearly database of faculty assignments maintained and distributed to faculty and Dean.</p>

<p>prepared for the areas in which they teach; and experientially prepared for the areas in which they teach.</p>				<p>prepared for the areas in which they teach.</p>	
<p>II-F Preceptors (e.g., mentors, guides, coaches), if used by the program as an extension of faculty, are academically and experientially qualified for their role.</p>	<p>Dean Associate Deans Program Directors</p>	<p>Annually</p>	<p>Policies regarding preceptor qualifications and selection. SNC Handbook. preceptor evaluation by students and faculty. clinical site evaluations by students and faculty. licensure and certification of preceptors.</p>	<p>The SNC preceptors (e.g., mentors, guides, coaches), are used by the program as an extension of faculty, are academically and experientially qualified for their role.</p>	<p><u>Actions for Maintenance:</u></p> <p><u>Link to Results/Outcomes:</u> Preceptor database maintained and reviewed by Program Directors.</p> <p>Faculty Resources page available online and currently maintained.</p>
<p>II-G The parent institution and program provide and support an environment that encourages faculty teaching, scholarship, service, and practicing in keeping with the mission, goals, and expected faculty outcomes.</p>		<p>Annually</p>		<p>Rutgers University-Camden and SNC provide a supportive environment that encourages faculty teaching, scholarship, service, and practicing in keeping with the mission, goals, and expected faculty outcomes</p>	<p><u>Actions for Maintenance:</u></p> <p><u>Link to Results/Outcomes:</u> Qualtrics survey of faculty satisfaction</p>

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

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

Plan				Implementation	
Criterion and Specific Goals	Responsibility	Frequency of Assessment	Assessment Methods	Data and Findings	Quality Improvement
<p>III-A The curriculum is developed, implemented, and revised to reflect clear statements of expected student outcomes that: are congruent with the program's mission and goals; are congruent with the roles for which the program is preparing its graduates; and consider the needs of the program-identified community of interest.</p>	<p>BCER, GPP Dean Associate Deans Program Directors</p>	<p>Annually</p>	<p>NCLEX pass rate Job placement data Assessment of community need</p>	<p>Current NCLEX Pass Rate</p>	<p>Actions for Maintenance: NCLEX pass rate is reviewed yearly and if below 90% a plan of action must be considered. Job placement reviewed annually, and a plan of action must be considered if less than 90% of graduates have jobs within 3 months of passing NCLEX. <u>In addition to the NCLEX pass rate, faculty should look for congruence with mission and goals in course assignments and outcomes for the program (MOT).</u></p> <p><u>Link to Results/Outcomes:</u> <u>NCLEX pass rates</u> <u>Minutes of GPP and BCER</u> <u>Course evaluations posted in Box re: achievement of course outcomes (objectives)</u></p>
<p>III-B Baccalaureate curricula are developed, implemented, and revised to reflect relevant professional nursing standards and guidelines, which are clearly evident within the curriculum and within the expected student outcomes</p>	<p>BCER</p>	<p>Annually</p>	<p>Faculty review course content, assignments and syllabi for evidence of relevant professional nursing standards and guidelines. Curriculum mapping to identify location of nursing standards for each course End of course and faculty evaluations,</p>		<p>Actions for Maintenance:</p> <p><u>Link to Results/Outcomes:</u> The baccalaureate degree program incorporates professional nursing standards and guidelines relevant to that program and each track offered. Examples of course content and/or assignments clearly reflect where and how content, knowledge, and skills required by identified sets of standards are incorporated into the curriculum.</p> <p>Link to evaluations</p>

<p>(individual and aggregate). Baccalaureate program curricula incorporate The Essentials of Baccalaureate Education for Professional Nursing Practice (AACN, 2008).</p>			<p>evaluation of student and faculty clinical experiences. Review examples of clinical experiences that prepare students for interprofessional collaborative practice. Student clinical performance evaluations.</p>		<p>Box folder of syllabi with highlighted evidence of relevant professional nursing standards and guidelines and expected student outcomes (individual and aggregate).</p>
<p>III-C Master's curricula are developed, implemented, and revised to reflect relevant professional nursing standards and guidelines, which are clearly evident within the curriculum and within the expected student outcomes (individual and aggregate).</p>	<p>GPP</p>	<p>Annually</p>	<p>Faculty review course content, assignments and syllabi for evidence of relevant professional nursing standards and guidelines.</p>		<p><u>Actions for Maintenance:</u></p> <p><u>Link to Results/Outcomes:</u></p> <p>Box folder of syllabi with highlighted evidence of relevant professional nursing standards and guidelines and expected student outcomes (individual and aggregate).</p>
<p>III-D DNP curricula are developed, implemented, and revised to reflect relevant professional nursing standards and guidelines, which are clearly</p>	<p>GPP</p>	<p>Annually</p>	<p>Faculty review course content, assignments and syllabi for evidence of relevant professional nursing standards and guidelines.</p>		<p><u>Actions for Maintenance:</u></p> <p><u>Link to Results/Outcomes:</u></p> <p>Box folder of syllabi with highlighted evidence of relevant professional nursing standards and guidelines and expected student outcomes (individual and aggregate).</p>

evident within the curriculum and within the expected student outcomes (individual and aggregate).					
III-E Post-graduate APRN certificate program curricula are developed, implemented, and revised to reflect relevant professional nursing standards and guidelines, which are clearly evident within the curriculum and within the expected student outcomes (individual and aggregate). Post-graduate APRN certificate programs that prepare nurse practitioners incorporate Criteria for Evaluation of Nurse Practitioner Programs (NTF, 2016).	GPP	Annually	Faculty review course content, assignments and syllabi for evidence of relevant professional nursing standards and guidelines.		<p><u>Actions for Maintenance:</u></p> <p><u>Link to Results/Outcomes:</u></p> <p>Box folder of syllabi with highlighted evidence of relevant professional nursing standards and guidelines and expected student outcomes (individual and aggregate).</p>
III-F The curriculum is logically structured to achieve expected student outcomes.	BCER GPP	Annually	Review program of study/curricular plan for each track including syllabi and course content/assignments.	<p>The program provides a rationale for the sequence of the curriculum for each program.</p> <p>Evidence that APRN education programs</p>	<p><u>Actions for Maintenance:</u></p> <p><u>Link to Results/Outcomes:</u></p> <p>BSN curriculum</p> <p>DNP curriculum</p>

				<p>build on undergraduate courses and incorporate separate comprehensive graduate-level courses to address the APRN core.</p> <p>Curriculum mapping demonstrates logical progression.</p>	<p>(Pre-requisite courses listed in catalogs)- MOT) Minutes of curriculum leveling project for undergraduates- MOT)</p>
<p>III-G Teaching-learning practices: support the achievement of expected student outcomes; consider the needs and expectations of the identified community of interest; and expose students to individuals with diverse life experiences, perspectives and backgrounds.</p>	<p>BCER Program Directors Course coordinators</p>	<p>Annually</p>	<p>Student outcomes evaluated annually (NCLEX pass rates, grades, and any failures)</p>	<p>Students are invited to distinguished lecture, and any other lectures provided outside of classroom work. Students are provided with community engagement experiences for classes approved as engaged civic learning</p>	<p>Actions for Maintenance:</p> <p>Link to Results/Outcomes: Compendium of civic engagement activities and extra curricular learning activities</p> <p>Exemplars of assignments in course syllabi posted in Box (MOT)</p>
<p>III-H The curriculum includes planned clinical practice experiences that: enable students to integrate new knowledge and demonstrate attainment of program outcomes; foster interprofessional collaborative practice; and are</p>	<p>BCER GPP SNC CARES</p>	<p>Annually</p>	<p>Clinical evaluations reviewed by course coordinators and program directors and presented to BCER</p>		<p>Actions for Maintenance:</p> <p>Link to Results/Outcome: Link to clinical evaluations</p>

evaluated by faculty.					
<p>III-I Individual student performance is evaluated by the faculty and reflects achievement of expected student outcomes. Evaluation policies and procedures for individual student performance are defined and consistently applied.</p>	<p>BCER GPP SSR Program Directors Associate Deans</p>	<p>Annually or as needed</p>	<p>Evaluation methods reviewed annually by program directors (if revised) and presented to committee if further guidance is needed</p>	<p>SSR reviews student performance annually</p>	<p>Actions for Maintenance:</p> <p>Link to Results/Outcome: Evaluation tools available for courses Exemplars of examinations available</p> <p>Policies and procedures for remote testing available in handbook</p>
<p>III-J The curriculum and teaching-learning practices are evaluated at regularly scheduled intervals, and evaluation data are used to foster ongoing improvement.</p>	<p>BCER GPP</p>	<p>Annually</p>	<p>Curriculum and teaching learning practices are reviewed annually by program directors (if revised) and presented to committee if further guidance is needed</p>	<p>Changes in curriculum and teaching learning practices are undertaken if needed based on student performance. All faculty participate, but BCER and GPP oversee process.</p>	<p>Action for Maintenance:</p> <p>Link to Results/Outcome: Annual evaluation of faculty Results of Mountain Measurement ATI Results</p>

STANDARD IV – PROGRAM EFFECTIVENESS: ASSESSMENT AND ACHIEVEMENT OF PROGRAM OUTCOMES

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

Plan				Implementation	
Criterion and Specific Goals	Responsibility	Frequency of Assessment	Assessment Methods	Data and Findings	Quality Improvement
<p>IV-A A systematic process is used to determine program effectiveness.</p> <p>NCLEX results >90%</p> <p>ATI Comprehensive Exam results (90% to score >65)</p> <p>Mountain Measurement reports >50 percentile in each category</p> <p>Grad surveys</p> <p>APEA Exam results >90%</p>	<p>BCER GPP</p>	<p>Annually</p>	<p>NCLEX results ATI Comprehensive exam Grad surveys SkyFactor APEA exam results</p>	<p>BCC and GPP committees ensures that APN and NCLEX-RN exam passing rates are above the national norm to determine expected outcomes and program effectiveness.</p>	<p><u>Actions for Maintenance:</u> Compare individual and group performance to national norms. Create and distribute status report to faculty.</p> <p>If NCLEX and APEA exam pass rate is below 90% in annual review, develop task force to investigate results and create a plan for improvement.</p> <p><u>Link to Results/Outcomes:</u> Results of NCLEX, etc Certification examinations Mountain Measurement</p>
<p>IV-B Program completion rates demonstrate program effectiveness.</p> <p>80% of students will graduate within 5 years for</p>	<p>BCER GPP</p>	<p>Annually</p>	<p>Attrition numbers reviewed monthly</p> <p>Review and compare enrollment and graduation lists</p>	<p>The program demonstrates evidence in achievement of completion rates.</p>	<p><u>Actions for Maintenance:</u> If completion rate less than expected, Program Directors and academic advisors to investigate attrition per course for trends/outcomes and create plan for improvement. Trend data reports shared with Admin & Faculty</p> <p><u>Link to Results/Outcomes:</u> Program completion – BSN Program completion- MSN</p>

BSN and 4 years for DNP.					Program completion - DNP
<p>IV-C Licensure pass rates demonstrate program effectiveness.</p> <p>BSN graduate success on NCLEX-RN exam is maintained at a minimum of 90% on first attempt.</p>	BCER	Annually	BSN NCLEX-RN pass rate	<p>The program demonstrates evidence in achievement of >95% NCLEX-RN passing rates on first attempt.</p>	<p><u>Actions for Maintenance:</u> If NCLEX-RN exam pass rate is below 90% in annual review, develop task force to investigate results and create a plan for improvement.</p> <p><u>Link to Results/Outcomes:</u> <u>NJ BON:</u> https://www.njconsumeraffairs.gov/nur/Pages/NCLEX-RN.aspx</p>
<p>IV-D Certificate pass rates demonstrate program effectiveness.</p> <p>DNP graduate success on exams is maintained at a minimum of 90% on first attempt.</p> <p>WOC Certification >90% School Nurse Certification >90% APN Certification >90%</p>	GPP	Annually	WOC Certification School Nurse Certification APN Certification	<p>The program demonstrates evidence in achievement of >95% APN certification rates.</p>	<p><u>Actions for Maintenance:</u> If the certification exam pass rate is below 90% in annual review, GPP committee develop task force to review passing criteria, investigate results, and create a plan for improvement.</p> <p><u>Link to Results/Outcomes:</u> APN Certification WOC Certification School Nurse Certification</p>

<p>IV-E Employment rates demonstrate program effectiveness.</p> <p>90% of all graduates are employed or enter an educational program to advance degree within one year of graduation</p>	<p>BCER GPP</p>	<p>Annually</p>	<p>Rutgers-Camden Career Center gathers alumni survey to determine employment rate</p> <p>Employer surveys, business directory listings, websites, business cards</p>	<p>Return survey results demonstrates achievement of >90% employment rates in recent years?</p>	<p><u>Actions for Maintenance:</u> If less than 90% are employed, investigate rationale as written on survey to see if it is related to anything that can be addressed by the program</p> <p><u>Link to Results/Outcomes:</u> Provided by Career Services</p>
<p>IV-F Data regarding completion, licensure, certification, and employment rates are used, as appropriate, to foster ongoing program improvement.</p>	<p>BCER GPP</p>	<p>Ongoing Annually</p>	<p>Quantitative data</p> <ul style="list-style-type: none"> -SNC reports on graduation and completion rates -NCLEX reports -Certification reports -ATI Exam scores -Employment rates -SNC Exit surveys <p>Qualitative Data:</p> <ul style="list-style-type: none"> -Analyzing trends -End of course reports -Student course evaluation data -BCER Committee minutes -Directors end of year report -Employer feedback 	<p>Review of qualitative and quantitative data, demonstrates achievement of these criteria</p> <p>Ongoing sharing of data between parties listed as responsible with suggestions for revision/update voted on by Faculty as appropriate.</p>	<p><u>Actions for Maintenance:</u> Continue to monitor quantitative and qualitative data for creating plan of program improvement</p> <p><u>Link to Results/Outcomes:</u> Minutes of GPP and BCER</p>
<p>IV-G Aggregate faculty outcomes demonstrate program effectiveness.</p>	<p>FAD Fac Org LRP</p>	<p>Annually</p>	<p>Deans and Chairs coordinate and gather the following: Internal faculty surveys solicited to evaluate faculty service (school, university and community) and</p>		<p><u>Actions for Maintenance:</u> Faculty send information to Dean for review annually Aggregate reports are created and used for CCNE, and university reports; benchmark is 100% of faculty participate in scholarship.</p>

			<p>scholarship: research, grants, publication, presentations.</p> <p>LRP establishes committee work assignments and shares annually with Deans and faculty.</p>		<p><u>Link to Results/Outcomes:</u> All elements of faculty evaluation are consistent with the policies and procedures of the University and congruent with the mission.</p>
<p>IV-H Aggregate faculty outcome data are analyzed and used, as appropriate, to foster ongoing program improvement.</p>	<p>FAD Fac Org</p>	<p>Annually and more often as indicated</p>	<p>Peer review of faculty teaching (annually or according to guidelines) -100% of eligible faculty participate</p> <p>Deans and Chairs coordinate and gather the following: Internal faculty surveys solicited to evaluate faculty service (school, university and community) and scholarship: research, grants, publication, presentations</p> <p>Benchmarks- 80% of all faculty contribute to the science of nursing via publications and/or presentations.</p> <p>100% of faculty participate in service to the school, 50% of faculty participate in local, national or international service.</p> <p>90% of Faculty have SIRS ratings higher</p>	<p>Faculty Affairs & Development Committee reviews Peer evaluation with faculty member and secures a copy in the faculty member's file in the Dean's office.</p> <p>If faculty member requires mentorship, a faculty mentor is assigned to assist with teaching strategies.</p>	<p><u>Actions for Maintenance:</u> Faculty send information to Dean for review annually. Goals are established for the upcoming AY</p> <p>Aggregate reports are created and used for CCNE, and university reports</p> <p><u>Link to Results/Outcomes:</u> Faculty Affairs minutes identify areas for improvement as needed (MOT)</p>

			than 3 on a 5 point scale.		
IV-I Program outcomes demonstrate program effectiveness.	BCER GPP	Annually and as needed	<p>SNC Graduate student and alumni surveys. Other data collected as indicated by changes in program or environment such as: Community Service accounting by University Leadership Professional service Practice</p> <p>Survey for APRN graduates: Types of employment settings; graduate school matriculation – Employer satisfaction data; service: students and graduates provide service to the community through community-based organizations and through professional association membership and leadership. Publications by students and alumni.</p>		<p><u>Actions for Maintenance:</u></p> <p><u>Link to Results/Outcomes:</u></p> <p>Skyfactor Minutes of Faculty Org, GPP and BCER</p>
IV-J Program outcome data are used, as appropriate, to foster ongoing program improvement.		Ongoing	<p>SNC Graduate student and alumni surveys analyzed. Other data collected as indicated by changes in program or environment such as: Community Service</p>		<p><u>Actions for Maintenance:</u> Findings reported to Faculty organization as needed.</p> <p><u>Link to Results/Outcomes:</u> Minutes of Faculty Org Faculty and Student Handbook reflect changes as appropriate.</p>

			<p>accounting by University Leadership Professional service Practice</p> <p>Serve as preceptors for final semester of APRN graduates</p> <p>Range of employment settings including community, long term care, acute care and a range of specialties.</p> <p>Education: Graduate school matriculation – Employer satisfaction data</p> <p>of NJ health care facilities have employed a SNC graduate within previous 5 years</p> <p>Students who travel outside of the Metropolitan University locale are successful in employment</p> <p>Service: students and graduates provide service to the community through community-based organizations and through professional association membership and leadership.</p> <p>Publications by students and alumni.</p>		
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