

Date: June 15, 2018

To: Martha Venn, Deputy Vice Chancellor for Academic Affairs, University System of Georgia

From: Michael Galchinsky, Associate Provost for Institutional Effectiveness, Georgia State University

Cc: Risa Palm, Senior Vice President for Academic Affairs and Provost, Georgia State University

Re: Comprehensive Program Review

This memorandum explains the reporting mechanism used by Georgia State University for the purpose of Comprehensive Program Review in 2018.

The following Georgia State University programs underwent Comprehensive Program Review (CPR) using the System's CPR reporting vehicle in Spring 2017:

Bachelor of Arts with a major in Applied Linguistics (16010201)

Bachelor of Arts with a major in Economics (45060100)

Bachelor of Arts with a major in History (54010100)

Bachelor of Arts with a major in International Economics and Modern Languages (45060501)

*Bachelor of Business Administration with a major in Business Economics (52060101)

Bachelor of Business Administration with a major in Hospitality Administration (52090105)

Bachelor of Science with a major in Criminal Justice (43010401)

Bachelor of Science with a major in Economics (45060100)

Bachelor of Science with a major in Physics (40080101)

Bachelor of Science in Nursing (51380101)

Bachelor of Science in Nursing, RN to BSN (51380105)

Master of Arts with a major in Applied Linguistics (13140101)

Master of Arts with a major in Economics (45060100)

Master of Arts with a major in History (54010100)

Master of Global Hospitality Administration (52090101)

Master of Heritage Preservation (30999901)

*Master of Science with a major in Business Economics (52060101)

Master of Science with a major in Criminal Justice (43010401)

Master of Science with a major in Nursing (51380105)

Master of Science with a major in Physics (40080101)

*Master of Laws (22020101)

*Juris Doctor (22010100)

Doctor of Nursing Practice (51380101)

Executive Doctorate in Business (52029901)

Doctor of Philosophy with a major in Applied Linguistics (13140101)

Doctor of Philosophy with a major in Astronomy (40020100)

Doctor of Philosophy with a major in Criminal Justice and Criminology (43010401)
Doctor of Philosophy with a major in Economics (45060100)
Doctor of Philosophy with a major in History (54010100)
Doctor of Philosophy with a major in Nursing (51389901)
Doctor of Philosophy with a major in Physics (40080101)

In all but four cases (those indicated with an asterisk), these CPR reports were used as inputs in the preparation of self-study study reports by units as part of the comprehensive Academic Program Review (APR) process during the past year.

The following units successfully completed the APR process in 2018:

Department of Applied Linguistics and English as a Second Language
Department of Criminal Justice and Criminology
Department of Economics
Department of History
Department of Physics and Astronomy
School of Hospitality Administration
School of Nursing

In addition, the Executive Doctorate in Business program, which is not located within any single department, completed the APR process.

Unlike CPR, APR at Georgia State University involves the entire unit in which the program is based. Thus, in APR, a department's bachelor's, master's, doctoral, and other programs are all reviewed as part of a holistic evaluation of the unit's viability, quality, and productivity. The robust APR process involves data collection, a self-study, an external review by disciplinary specialists, an internal review by the University Senate, an action plan, and a series of implementation reports. The units must demonstrate their contribution to the University's Mission and Strategic Plan, and must articulate a series of goals aimed at continuous quality improvement.

Consequently, in lieu of a CPR reporting vehicle for each program, we are submitting the following documents for those programs housed in units that conducted APR in 2017-2018 on a unit by unit basis:

- 1) For each program in the unit, the signed final page of the CPR vehicle, attesting that the program "meets" the institutional criteria for retention
- 2) The unit's self-study report
- 3) The report of the external reviewers for the unit
- 4) The report of the University Senate's Academic Program Review Committee for the unit
(The action plans will be developed over the summer and are not yet available)

As noted above, four programs were not covered by the APR process. For two of these programs (BBA with a major in Business Economics, MS with a major in Business Economics), we are submitting an updated CPR reporting vehicle. The two other programs (Master of Laws, Juris Doctor) are scheduled to undergo APR in 2020.

Please let me know if you have any questions. Thank you for your consideration.

SENIOR VICE PRESIDENT OF ACADEMIC AFFAIRS AND PROVOST
Office of the Provost

Mailing Address:
PO Box 3999
Atlanta, GA 30302-3999

Phone: 404-413-2574
Fax: 404-413-1301



June 15, 2018

To whom it may concern:

I hereby certify that each of the programs scheduled for Comprehensive Program Review at Georgia State University in 2018 MEETS the institution's criteria for retention. I have designated Michael Galchinsky, the Associate Provost for Institutional Effectiveness, as the signatory for the individual reports.

Sincerely,

A handwritten signature in cursive script that reads "Risa Palm".

Risa Palm
Senior Vice President for Academic Affairs and Provost

Comprehensive Program Review
Instructions, Reporting Vehicle, and Definitions

Reporting Vehicle

Institution: Georgia State University

Academic Program Name: Bachelor of Science in Nursing

CIP Code: 51380101

College or School and Department: Byrdine F. Lewis School of Nursing and Health Professions - School of Nursing

Date of Last Internal Review: 2005-2006

Outcome of Previous Program Review (brief narrative statement):

Current Date: June 2018

Program Reviewed at the Institution for this report: Bachelor of Science in Nursing

Comprehensive Program Review
Instructions, Reporting Vehicle, and Definitions

Provost/VPAA Categorical Summation:

Check any of the following to categorically describe action(s) the institution will take concerning this program.

Program MEETS Institution's Criteria

Program is critical to the institutional mission and will be retained.

Program is critical to the institutional mission and is growing or a high demand field and thus will be enhanced.

Program DOES NOT MEET Institution's Criteria

Program will be placed on a monitoring status.

Program will undergo substantive curricular revisions.

Program will be deactivated.

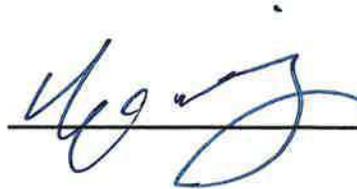
Program will be voluntarily terminated.

Other (identify/add text): _____

Provost/VPAA Signature and Date: _____

----- OR -----

Provost/VPAA's Designee Signature and Date:

 6/14/2018

Comprehensive Program Review
Instructions, Reporting Vehicle, and Definitions

Reporting Vehicle

Institution: Georgia State University

Academic Program Name: Bachelor of Science in Nursing, RN to BSN

CIP Code: 51380105

College or School and Department: Byrdine F. Lewis School of Nursing and Health Professions - School of Nursing

Date of Last Internal Review: 2005-2006

Outcome of Previous Program Review (brief narrative statement):

Current Date: June 2018

Program Reviewed at the Institution for this report: Bachelor of Science in Nursing, RN to BSN

Comprehensive Program Review
Instructions, Reporting Vehicle, and Definitions

Provost/VPAA Categorical Summation:

Check any of the following to categorically describe action(s) the institution will take concerning this program.

Program MEETS Institution's Criteria

Program is critical to the institutional mission and will be retained.

Program is critical to the institutional mission and is growing or a high demand field and thus will be enhanced.

Program DOES NOT MEET Institution's Criteria

Program will be placed on a monitoring status.

Program will undergo substantive curricular revisions.

Program will be deactivated.

Program will be voluntarily terminated.

Other (identify/add text): _____

Provost/VPAA Signature and Date: _____

----- OR -----

Provost/VPAA's Designee Signature and Date: _____

[Handwritten Signature] 6/14/2018

**Comprehensive Program Review
Instructions, Reporting Vehicle, and Definitions**

Reporting Vehicle

Institution: Georgia State University

Academic Program Name: Master of Science with a major in Nursing

CIP Code: 51380105

College or School and Department: Byrdine F. Lewis School of Nursing and Health Professions - School of Nursing

Date of Last Internal Review: 2005-2006

Outcome of Previous Program Review (brief narrative statement):

Current Date: June 2018

Program Reviewed at the Institution for this report: Master of Science with a major in Nursing

Comprehensive Program Review
Instructions, Reporting Vehicle, and Definitions

Provost/VPAA Categorical Summation:

Check any of the following to categorically describe action(s) the institution will take concerning this program.

Program MEETS Institution's Criteria

Program is critical to the institutional mission and will be retained.

_____ Program is critical to the institutional mission and is growing or a high demand field and thus will be enhanced.

Program DOES NOT MEET Institution's Criteria

_____ Program will be placed on a monitoring status.

_____ Program will undergo substantive curricular revisions.

_____ Program will be deactivated.

_____ Program will be voluntarily terminated.

_____ Other (identify/add text): _____

Provost/VPAA Signature and Date: _____

----- OR -----

Provost/VPAA's Designee Signature and Date: _____

 6/14/2018

Comprehensive Program Review
Instructions, Reporting Vehicle, and Definitions

Reporting Vehicle

Institution: Georgia State University

Academic Program Name: Doctor of Nursing Practice

CIP Code: 51380101

College or School and Department: Byrdine F. Lewis School of Nursing and Health Professions - School of Nursing

Date of Last Internal Review: 2005-2006

Outcome of Previous Program Review (brief narrative statement):

Current Date: June 2018

Program Reviewed at the Institution for this report: Doctor of Nursing Practice

Comprehensive Program Review
Instructions, Reporting Vehicle, and Definitions

Provost/VPAA Categorical Summation:

Check any of the following to categorically describe action(s) the institution will take concerning this program.

Program MEETS Institution's Criteria

 X Program is critical to the institutional mission and will be retained.

 Program is critical to the institutional mission and is growing or a high demand field and thus will be enhanced.

Program DOES NOT MEET Institution's Criteria

 Program will be placed on a monitoring status.

 Program will undergo substantive curricular revisions.

 Program will be deactivated.

 Program will be voluntarily terminated.

 Other (identify/add text): _____

Provost/VPAA Signature and Date: _____

----- OR -----

Provost/VPAA's Designee Signature and Date: _____

 6/14/2018

**Comprehensive Program Review
Instructions, Reporting Vehicle, and Definitions**

Reporting Vehicle

Institution: Georgia State University

Academic Program Name: Doctor of Philosophy with a major in Nursing

CIP Code: 51389901

College or School and Department: Byrdine F. Lewis School of Nursing and Health Professions - School of Nursing

Date of Last Internal Review: 2005-2006

Outcome of Previous Program Review (brief narrative statement):

Current Date: June 2018

Program Reviewed at the Institution for this report: Doctor of Philosophy with a major in Nursing

Comprehensive Program Review
Instructions, Reporting Vehicle, and Definitions

Provost/VPAA Categorical Summation:

Check any of the following to categorically describe action(s) the institution will take concerning this program.

Program MEETS Institution's Criteria

Program is critical to the institutional mission and will be retained.

Program is critical to the institutional mission and is growing or a high demand field and thus will be enhanced.

Program DOES NOT MEET Institution's Criteria

Program will be placed on a monitoring status.

Program will undergo substantive curricular revisions.

Program will be deactivated.

Program will be voluntarily terminated.

Other (identify/add text): _____

Provost/VPAA Signature and Date: _____

----- OR -----

Provost/VPAA's Designee Signature and Date:

 6/14/2015

ACADEMIC PROGRAM REVIEW SELF STUDY

2017-2018

Byrdine F. Lewis College of Nursing & Health Professions

Georgia State University

December 1, 2017

Susan J. Kelley, PhD, RN, FAAN

Associate Dean and Chief Academic Officer for Nursing

Byrdine F. Lewis College of Nursing and Health Professions

Professor, School of Nursing

Director, Project Healthy Grandparents

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ACADEMIC REVIEW REPORT

1. Where is your unit now?

1.a Undergraduate education.

1.a.1 Quality of undergraduate students attracted to the unit's program. The undergraduate nursing program is limited to accepting a maximum of 144 students per year, resulting in a highly competitive admissions process. While many students declare pre-nursing as a major upon admission to the university, the SON does not accept students into the major until their sophomore year. From 2014 to 2016, college grade point averages (GPAs) for students admitted to the undergraduate major ranged from 3.74 to 3.88, with an average of 3.8 (unit level data). The average score on the standardized Test of Essential Academic Skills (TEAS) during the same time period ranged from 84.62% to 86.32%, for an average of 85.44%. (Appendix 1.a.1 - Part I). It is important to note that the average TEAS score of 85% is considerably higher than the national average of 65-75%, as reported by the test developer. (Source: <https://www.nrsng.com/resource/teas-nursing-school-entrance-exam-faq/#question-4>). Appendix 1.a.1 - Part II provides admission data on first-time freshmen for students declaring pre-nursing a major.

The undergraduate baccalaureate program has two tracks. The traditional track is a three-year program, after completion of core courses; students do not take nursing classes in the summer semester. The Achieving the Curriculum Expeditiously (ACE) track is offered to students who have completed all core requirements and want a fast-paced, rigorous course of study. This program can be completed in four consecutive semesters, including summer. In addition to the Bachelor of Science (BS) with a major in nursing, the unit offers a registered nurse (RN) to Bachelor of Science (BS) completion program; the first students were enrolled in 2014. This degree program is designed for students who have obtained their registered nurse license, most often after completion of an associate degree in nursing, and are seeking a BS in nursing. Admissions data for these students are not available on the APR dashboard. Unit level data indicate that the average GPA of students admitted to the RN to BS completion program ranged from 3.01 to 3.2 for the three-year period, with an average GPA of 3.12.

1.a.2 Support for undergraduates. The State of Georgia offers the HOPE Scholarship which is awarded to degree seeking students who meet eligibility requirements, including a cumulative 3.0 GPA. The university's Student Financial Services office also offers information on a variety of scholarships and grants with information on application and eligibility requirements. RN to BS students may also receive tuition assistance from their current employer. The SON offers over \$93,000 per year to undergraduate students in scholarship awards based on need, scholarship, and future scope of practice.

1.a.3 Student learning, success, and satisfaction.

1.a.3.1 Assessment of student learning. The Student Learning Outcome (SLO) report addresses learning outcomes for the undergraduate program. (Appendix 1.a.3.1) Outcomes include (1) Clinical decision making, (2) Registered nurse role development, (3) Advocacy, and (4) Registered Nursing Practice.

The SLOs were measured using a variety of classroom and clinical assignments, clinical rotation activities, and National Council Licensure Exam (NCLEX) results. The targets for all SLOs for 2016 were met with the exception of SLO #4 which involved NCLEX results. While the 2016 first-time pass rate of 85.5% was above state and national averages, it was below the SON target of 90%. Pass rates for the review period are discussed subsequently in section 1.a.3.4.

The SON implemented the following strategies to improve NCLEX scores. Faculty attended training by an expert on test-item writing which was based on the NCLEX 2016 test plan provided by the National Council of State Boards of Nursing (NCSBN). Course exams were reviewed for rigor, reliability, and validity. Simulation lab activities tied to each clinical course were re-evaluated and improved upon to capture the necessary critical thinking and clinical judgment needed for success on the NCLEX, as well as in the provision of safe patient care. To improve student learning, those enrolled in their final clinical practicum courses were taught by an SON faculty member instead of a clinical agency preceptor, as was done in the past. This year faculty were re-trained on the optimal usage of standardized testing services to supplement classroom materials and test taking strategies for students. These efforts appear to have been effective, as NCLEX scores are at a 93% success rate for the first half of 2017.

1.a.3.2 Recruitment rates and advisement procedures. The BS in nursing is one of highest demand undergraduate majors at the university. It is, therefore, not necessary to engage in extensive recruitment activities for this program—as there are approximately 700 students who have declared pre-nursing as a major. This number includes freshman, sophomores, and any other students that have declared pre-nursing as a major but are not enrolled in the nursing program. The SON holds open houses during the academic year to provide further information to students interested in the nursing major. Pre-nursing students are advised by the University Advisement Center (UAC). Once students reach the point of eligibility for application to the SON, they are then advised by an assigned nursing adviser.

It is important to note that the CNHP has recently created a pre-health meta-major to assist students who want to major in nursing, but who are unlikely to be admitted, find other health-care related majors within CNHP. To facilitate this effort, additional sections of pre-health learning communities have been implemented this year. Also as part of this effort, the CNHP redirected an academic professional position to a new clinical faculty position to lead this initiative.

1.a.3.3 Undergraduate retention rates and graduation rates. The retention and graduation rates of pre-nursing students will be discussed separately from those in the nursing major (also referred to as pre-licensure nursing students) for several reasons. First, because pre-nursing students are not yet accepted into the major, they are generally not taught or advised by nursing faculty. Another reason for discussing the two groups of students separately is that pre-licensure nursing students are not accepted into the major until their sophomore year—which complicates the data and prevents making meaningful comparisons. Furthermore, comparable data for the two groups are not available on the APR dashboard data for six-year retention and graduation rates for first-time, full-time pre-licensure students/students accepted into the major for two out of the three years covered in this review period.

For pre-nursing students, the six-year retention and graduation rates for first-time, full-time pre-nursing students from Fall 2008 through Fall 2010 averaged 48.66% (range = 45% to 52.2%) for retention, and 41.4% (range 37.1% to 45%) for graduation over the three-year review period. The four-year average retention and graduation rates for the three junior cohorts was 44.07% (range = 43.62% to 44.8%) and 30.22% (range = 29.41% to 30.85%), respectively.

According to APR dashboard data, the four-year average retention and graduation rates for the three junior cohorts of pre-licensure students/students enrolled in nursing major was 88.33% (range = 80.77% to 100%) for retention and 87.04% (range = 76.92% to 100%) for graduation. The average number of students in the three cohorts reported in the APR dashboard are low (average of 20.33 students per year) compared to SON data which indicate that an average of 72.6 students were admitted into the major during these three fall semesters. This discrepancy is likely related to that fact that while students are typically admitted into the major in their sophomore year, others may have enough credit hours to be categorized as juniors or seniors and, therefore, not included in the APR dashboard data. We believe the graduation rate for students admitted to the major is higher than the 87.04% reported on the APR dashboard; however, these data are not available by cohort at the unit level due to the complexity of the data. Unit level data indicate that the average number of students who graduated each year during this review period was 127, with a range of 126 to 141. (Appendix 1.a.3.3)

The retention and graduation rates for RN to BS completion students are not available on the APR dashboard. As such, the information presented here is based on unit level data. For the 2014 cohort, seven students enrolled and seven graduated in Spring 2015, for a graduation rate of 100%. The 2015 cohort included 31 students, of which 17 have graduated and 14 are currently enrolled. The 2016 cohort included 25 students, of which three have graduated, three have withdrawn, and 19 are currently enrolled. For the three cohorts, average time-to-completion was 2.5 years for those who graduated. Given the recent enrollment of students in cohorts 2015 and 2016, overall graduation rates are not reported.

1.a.3.4 Output quality metrics: According to the Georgia Board of Nursing, first-time pass rates on the national NCLEX exam for 2014 to 2016 ranged from 85.5 % to 94.14%, with an average of 90.6%. (Source: [http://sos.ga.gov/PLB/acrobat/Forms/38%20Reference%20-%20Nursing%20Education%20Program%20Results%20\(NCLEX\).pdf](http://sos.ga.gov/PLB/acrobat/Forms/38%20Reference%20-%20Nursing%20Education%20Program%20Results%20(NCLEX).pdf)).

Regarding placement rates and/or acceptance into advanced degree programs, alumni surveys (n=102, 19% response rate) indicate that of those who graduated in AY 2008, 16.8% were currently enrolled in a graduate program; of these, most were seeking a master's degree. In regard to employment, 92.2% reported that they were currently employed. Of those employed, 95% were employed in medicine/nursing, 2% in counseling/mental health, 1% in higher education, 1% in hospitality/tourism, and 1% other. Anecdotally, we know that most undergraduate students have job offers before graduation. Appendix 1.a.3.4 provides data on 2008 graduates who have earned additional degrees.

1.a.3.5 Enrollment by program, gender, and race. The total number of enrolled undergraduates remains constant, except for a decrease in pre-nursing students and an increase in RN to BS students. In Fall 2016, Black (African American) students represented the largest percentage

(44%) of undergraduate students with Caucasian students second (26%), and Asian students third (19%). Multiracial, Native Hawaiians, and Native Americans represent a smaller percentage (7%). Nursing continues to be challenged by under-representation of males. Currently, males comprise only 13% of the undergraduate student body. It is important to note that the RN to BS program began with eight students and increased to 26 students by the third year. (Appendix 1.a.3.5)

1.a.3.6 Level of financial need. There was an increase in unmet need for financial aid by pre-licensure nursing students and pre-nursing students during 2014 to 2016. The average unmet financial need for students in the nursing major was \$6,750 in 2014 compared to \$8,118 in 2016. For pre-nursing students, the average unmet demand was \$8,432 in 2014 compared to \$10,818 in 2016. The unmet financial need for RN-BS completion students varied across the same three years, with an overall decrease from 2014 to 2016. (Appendix 1.a.3.6)

1.a.3.7 Student surveys. SON undergraduate student survey results indicated general satisfaction with the program. Program outcomes were rated as providing a significant contribution to their overall education. Students strongly agreed that instructors stress high-quality work and the program is academically challenging. Students rated “opportunities to do research-related activities with faculty” lower than other statements, although the rating was higher than the GSU average. Areas of concern included in the comments section related to the clinical placement process, underutilization of class time, and length of the traditional program. (Appendix 1.a.3.7)

1.a.3.8 Degree requirements and program changes, if any. Students are admitted to the undergraduate nursing program in their sophomore or higher year. Degree requirements include completion of pre-requisites and core nursing courses. Students are assigned an advisor on admission to the nursing program and are expected to meet with their advisor at least twice a year. RN to BS completion students meet with their advisor at orientation and then on an as-needed basis due to the shortened duration of the curriculum.

1.a.3.8.b List of courses. (Appendix 1.a.3.8.b)

1.a.3.9 Contribution to the core curriculum. This does not apply to the SON.

1.a.4 Signature experiences. Students participate in signature courses that make learning come alive and provide real-world engagement in content. Course examples include NURS 4440/Directed Readings and NURS 4510/Community Health Nursing. Students enrolled in these courses collaborate with faculty to determine goals and objectives. In NURS 4510, students participate in an interprofessional disaster management simulated classroom shooting. This simulation includes setting up an emergency department in the lab, creating simulated patient injuries, and having students serve in various health profession capacities. Students in this course also have an opportunity to spend time with a state legislator to learn more about advocacy and the legislative process.

1.a.4.1 Research practicum. Students enrolled in N4040 have the option to engage in research activities with faculty to gain “hands-on” experience in the research process.

1.a.4.2 Urban service learnings programs. Students who enroll in the community health courses NURS 4510 and NURS 4910 perform their clinical hours in a variety of locations in the urban environment such as homeless shelters, long-term living communities, and schools for students with special needs.

1.a.4.3 Internships. Students do not participate in traditional internships due to the nature of the clinical requirements for each nursing course. Clinical requirements are comparable to internships in other disciplines. Undergraduate students may be hired as externs in summer programs which often continue during the academic year.

1.a.4.4 Study abroad. The CNHP sponsors an annual study abroad trip to Central America during Maymester. A Global Concepts course was offered in the past, which included a didactic and clinical component that proved to be very successful. Going forward, nursing faculty will work closely with the CNHP study abroad coordinator to reinstitute experiences similar to the Nicaragua trip that DNP and undergraduate students previously participated in.

1. a.4.5 Domestic field schools. The SON does not participate in domestic field schools.

1.a.5 Honors College.

1.a.5.1 Honors courses and honors add-ons taught by faculty. The undergraduate program currently does not have specific courses that are designated as honors courses. If requested, students may add an honors component to a non-clinical nursing course. We plan to enhance our relationship with the Honors College to develop and offer courses that meet the criteria for an Honors course. (Appendix 1.a.5.1)

1.a.5.2 Honors faculty fellows. The SON does not have any honors faculty fellows.

1.a.5.3 Honors theses produced by students in the major. The undergraduate program does not require an honors thesis. Individual students have participated in a directed readings course with individual faculty members to complete an honor theses.

1.a.5.4 Student participation in the GSU Undergraduate Research Conference. Undergraduate students collaborate with tenure track faculty to gain direct experience in the research process, as well as present findings in poster and podium presentations at the Undergraduate Research Conference. In addition, we hosted two undergraduate university scholars during the review period. One student worked with Dr. Aycock, resulting in the co-authorship of a forthcoming article in *Western Journal of Nursing Research*.

1.a.6 Undergraduate programs within the GSU context.

1.a.6.1 Programs undertaken jointly with other units at GSU. Because of the streamlined nature of the undergraduate nursing program, there is very little opportunity for joint program undertaking. The mandatory introductory nursing research course is taught in an interdisciplinary format once per year, with instructors from both the SON and CNHP. (Appendix 1.a.6.1)

1.a.6.2 Areas of substantial overlap/redundancy with other units at GSU. Due to the specificity of the undergraduate program, there is no overlap or redundancy with other units.

1.a.7 Number of students enrolled in fully online and hybrid courses. The BS program offers a limited number of courses in the online format. Currently NURS 2010 Health and Human Development, a pre-requisite course, is offered in an online format with 254 students enrolled. NURS 3300 Policy and Planning is offered as an online option or as a web-enhanced course with 155 students enrolled, while NURS 3200 Clinical Nutrition is also offered as an online offering with 120 students. The RN to BS program is offered as a fully online program with 26 students currently enrolled. The students are only required to come to campus for a one-day orientation. (Appendix 1.a.7)

1.a.8 Undergraduate degrees conferred by fiscal year. The average number of degrees per fiscal year is 134, which has remained consistent over the review period. (Appendix 1.a.8)

1.b Graduate education.

The SON offers three graduate degrees, the Master of Science (MS), Doctor of Philosophy (PhD), and Doctorate in Nursing Practice (DNP), which began enrolling students in 2014. In addition, we offer post-master's certificates (PMC) for nurses holding master's degrees and are seeking qualifications as advanced practice nurses (e.g. nurse practitioners).

1.b.1 Quality of graduate students attracted to the unit's programs. The SON attracts well-qualified applicants to its graduate programs. Over the self-study period, the average GPA across all graduate programs was 3.29. It is important to note that the average GPA for doctoral students is generally higher than for master's students (data source: iPort). In regard to GRE percentiles, the three-year average verbal and quantitative scores were 46 and 31, respectively. Because our graduate students have typically been out of their undergraduate programs for at least 5-10 years, they do not perform as well on the GREs as more recent graduates. Our admissions process is selective, with one-third of applicants having been denied admission during this review period. (Appendix 1.b.1).

1.b.2 Expanding support for graduate programs. Graduate students often have the opportunity to work as graduate teaching and research assistants. However, because our graduate students are practicing nurses, it is often challenging to offer stipends that are competitive with their current employers (e.g. hospitals, universities). Furthermore, many receive tuition reimbursement from their employers, thereby reducing the incentive to hold an assistantship that includes tuition. Nonetheless, additional resources would allow us to increase the number of assistantships offered.

To supplement our own resources, we have successfully secured outside support for doctoral students through entities such as the Jonas Foundation, which has awarded funding to two PhD and three DNP students over the past three years. With SON matching funds, each student received approximately \$10,000 per year for two years. Additional external support includes the funding for the past 10 years from the University System of Georgia (USG) to support our PhD students who teach at other USG universities through the Supporting Technology Enhanced PhD Studies (STEPS) funding program. Although the STEPS amount varies each year, we have

received \$2.25 million since 2010 for this program. This funding allows GSU to fund the PhD students' home institution for course release to allow for full-time PhD enrollment. Funds also support scholarly activities such as attending regional and national conferences.

1.b.2.1 Total number of graduate students by year, degree program, and concentration in the period of self-study. The average number of graduate students was approximately 310 per year. The master's degree program has the largest average enrollment with an annual average of 245. Within the master's degree program, the family nurse practitioner concentration consistently had the largest enrollment. It is important to note that enrollment in the MS degree decreased, going from 255 to 223 students from 2014 to 2016—a 13% decrease. During this same time frame, DNP enrollment increased from 11 to 20 students—an 82% increase. DNP enrollment continues to expand with a Fall 2017 enrollment of 29 students. PhD enrollment decreased from 27 students in 2014 to 21 in 2016, reflecting a national trend as more nurses enroll in DNP programs instead of PhD programs. (Appendix 1.b.2.1)

1.b.2.2 Percentage of graduate students compared to total number of students in the department. During this review period, graduate students (total = 1210 over three years) comprised approximately half (50.5%) of students taught by nursing faculty, while undergraduate students (total = 1185 over three years) comprised slightly less than half (49.5%). Because pre-nursing students are typically not taught by nursing faculty, they are not included in these percentages. (Appendix 1.b.2.2)

1.b.2.3 Graduate student financial support by type. The SON supported between 13 and 17 MS graduate assistants per fiscal year (Appendix 1.b.2.3). Students may obtain information regarding availability of other grants and loans from the university's financial aid office. The SON also has a limited number of scholarships available from outside donations totaling approximately \$12,000 per fiscal year. Students are also encouraged to seek scholarship support from professional nursing organizations and local healthcare facilities. Many students use tuition reimbursement programs from their employers; however, the unit does have data on this.

The SON has several sources of research funding available for dissertation support. Twenty-seven of the 33 PhD graduates (82%) between 2010 and 2015 received some level of support for their dissertation research. The USG provided \$16,000 in the last two years for dissertation support for PhD students who serve on faculty at USG schools of nursing. Furthermore, the Kaiser Foundation provided \$7,000 per year from 2010 to 2016 to support dissertations. Students have also received smaller awards (\$500-\$2,000) from the Georgia Nursing Leadership Coalition.

PhD students who are also faculty members in schools of nursing in the USG have tuition waived through the state Tuition Assistance Program (TAP). In addition to tuition, for the last 10 years, the USG has provided funding for nursing faculty through the Supporting Technology Enhanced PhD Studies (STEPS) program. Although the amount varies each year, we have received \$2.25 million since 2010 for this program. This funding allows GSU to reimburse the PhD students' schools of nursing for the cost of part-time faculty, in order to release the PhD students from their academic clinical responsibilities during doctoral course work. Funds also

support additional academic activities such as travel to regional and national conferences. Graduates are expected to teach in their home USG schools of nursing for at least two years after program completion.

1.b.2.4 Ratio of graduate students to TT faculty. The number of doctoral students to TT faculty ranged from 4.2 to 5.1, with a three-year average of 4.7. In regard to master's students, the numbers ranged from 27.9 students per TT faculty to 35.4 students, with a three-year average of 30.5. (Appendix 1.b.2.4)

1.b.2.5 Internships, service learning programs, research practica, field placements. Over 300 clinical sites are used to provide clinical experiences for advanced practice registered nurse (APRN)/MS students. DNP students are required to develop clinical projects that are implemented at major healthcare agencies. PhD students are required to participate in at least three scholarly activities (e.g. journal articles, poster and podium presentations) that serve as residency requirements.

1.b.3 National reputation in professional degree programs. The 2017 U.S. News and World Report ranked our master's and DNP degree programs; however, they do not rank PhD programs. The MS program is ranked #112 (tied) out of 292 ranked programs; it is important to note there are a total of 532 nationally accredited MS programs. This ranking was a significant move up from #146 the prior year. The DNP program was ranked #131 (tied) out of 186 programs; there are currently 303 nationally accredited DNP programs. Given that the DNP program is a relatively new program and that this was the first time it was ranked, we expect it to move up in ranking as the program is further established.

1.b.3.1 Number of graduate students in a professional degree program by year with % of growth. These data are not collected for nursing by OIE.

1.b.3.2 Pass rates on national credentialing examinations. MS and PMC students take the same national certification exams and have extremely high first-time pass rates. For example, adult-gerontology primary care nurse practitioner students averaged close to 100%, family practice students averaged 96%, and pediatric primary care students averaged 94% over the reporting period. Up until 2015-2016 data was reported as aggregate for both the MS and PMC students. Beginning with the 2016 report, exam scores were reported separately for the two groups. (Appendix 1.b.3.2)

1.b.4 Student learning, success, and satisfaction.

1.b.4.1.a Assessment of student learning. Student Learning Outcomes (SLOs) for each program are found in Appendix 1.b.4.1.a.

MS program: During AY 2015, the MS program met all learning outcomes except for one activity—first-time pass rates on the FNP and PMHNP concentrations.

The MS Program has five student learning outcomes (SLO). In general, SLOs are being consistently met. For this report timeframe, only one activity was identified for improvement—first-time national certification exam pass rates for family nurse practitioner (FNP) (89% pass

rate) and psychiatric mental health nurse practitioner (PMHNP) (80% pass rate) graduates for fiscal year 2015. The target goal for this SLO is 90% of master's and PMC students who take a certification exam in their area of specialization and pass the exam on the first attempt. The Master's Program Committee (MPC) discussed the results with the various national certifying bodies for the FNP and PMHNP specialty tracks and found that on the national level, post-master's certificate (PMC) students were typically not passing the exams on the first, and sometimes second, attempt. The MPC put in place several strategies to ensure success for the PMC students. Today, course administrators alert academic advisors about students that are at-risk for failing a course. Furthermore, students are encouraged to improve study habits, work with the university counselling and testing center to improve test taking skills, and meet with their instructors. The success of this approach over the past year will be evaluated in December 2017 for PMC graduates.

DNP program: For the 2015 and 2016 cohorts, all students successfully defended their DNP projects. All outcome objectives were fully met. The DNP committee will continue to work to maintain this level of performance and will continue to monitor and assess stated learning objectives.

PhD program: Student writing was identified as an area needing improvement in the 2015-2016 report. Three strategies were implemented in May 2017 and will be evaluated in one year. They included re-introduction of the course Writing for Publication/NURS 8250; facilitating writing skills during twice-yearly intensive sessions; and providing an annual graduate student "Write-In" session where students receive feedback on writing skills from the faculty.

1.b.4.1.b Courses taught. Courses taught are listed in Appendix 1.b.4.1.b.

1.b.4.2. Recruitment rates, admission requirements and procedures, and advisement. Admission requirements for each graduate program are described in Appendix 1.b.4.2.

Attracting graduate applicants is accomplished by recruiting at local, regional, national and international conferences; advertising in nursing journals; participating in recruitment fairs at clinical agencies and hospitals; through virtual open houses held via WebEx; and via the SON website. Faculty also target the brightest SON undergraduate and master's students for recruitment into our graduate programs, especially those with GPAs of 3.5, or higher. In regard to advisement, all graduate students are assigned a faculty advisor at the time of enrollment.

MS program: Admissions criteria are the same for each specialty program, with the exception of the GRE requirement—which is waived for applicants with a previous master's degree and who are seeking to complete a post-master's certification program.

DNP program: Effective recruitment strategies have led to significant enrollment increases in the DNP program since its recent inception. Faculty actively recruit nurse leaders from the 300 healthcare agencies with which the SON has contracts. Students are expected to meet with their advisors on a regular basis to ensure that key program deliverables are met on time. DNP project committees are comprised of a minimum of two faculty.

PhD program: During the first year a Doctoral Advisory Committee is formed to assist the student in planning and approving an appropriate program of study, selecting residency activities, and administering and evaluating the preliminary examination. Dissertation committees are comprised of a minimum of three faculty: the chair who is an SON faculty member, one additional committee member from the SON, and one non-SON faculty committee member. The outside faculty member may be from another unit within GSU, or a nursing or non-nursing faculty member from another institution.

1.b.4.3 Retention rates, graduation rates, and output quality metrics. For the three-year review period, the master's degree five-year graduation rate averaged 81%, with a range of 80% to 82%. For the 2009 cohort, the 55.56% of PhD students graduated in six years. APR dashboard data are not available for the 2008 and 2010 PhD cohorts, as well as for DNP students. SON data indicate that the first cohort of DNP students enrolled in 2013 and included six students. Of these, 100% graduated in 2015. Of the 20 students who enrolled between 2013 and 2016, 16 had graduated by 2017 resulting in an 80% four-year graduation rate. To date, we have a 100% retention rate. (Appendix 1.b.4.3; see sections 1.b.2.1, 1.b.4.10, and 1.b.7 for additional information).

1.b.4.4 Placement rates. Due to limited resources, we are unable to systematically track placement rates of our graduates. Therefore, we will describe our understanding of job placements based on anecdotal information. The majority of graduate students are employed as nurses or educators during enrollment at GSU; therefore, gaining new employment immediately upon graduation is not a major issue. Nonetheless, MS and PMC students will usually seek advanced practice positions upon graduation with the majority employed in their specialty area within a year of graduation. The majority of PhD students are employed in full-time faculty positions at other USG colleges and universities while enrolled in the program; most will continue in these positions upon graduation. DNP students are generally employed throughout their enrollment in the program. Upon graduation, they either remain in their current job position or are promoted to a higher level position. Thus, 100% are typically employed at time of graduation. Placement data found in Appendix 1.b.4.4 is based on graduate level students who graduated in Academic Year 2008 (Fall 2007, Spring 2008, Summer 2008) and continued graduate studies.

1.b.4.5 Enrollment by program, gender, and race. Nursing continues to be a female dominated profession with the proportion of male graduate students averaging 8.7% during the review period. Students self-reported race as follows: white, 50%; black (African American), 33%; Asian, 9%; and multi-racial, 3%. The remaining students (5%) did not report this information. (Appendix 1.b.4.5)

1.b.4.6 Level of financial aid. During this review period, the average unmet need for graduate students was \$7,305 per fiscal year and the average gross need was \$14,548. (Appendix 1.b.4.6)

1.b.4.7 Student surveys. According to survey results, current students and alumni are satisfied with the programs and report that they are well prepared in both clinical and scholarly areas. Particular areas of satisfaction were knowledge of ethical practice, the ability to collaborate

effectively, and cultural diversity. MS students continue to express concerns about the availability of clinical practicum sites. (Appendix 1.b.4.7)

1.b.4.8 Student publications and presentations. Students in the DNP and PhD programs are expected to disseminate scholarly knowledge. At the master's level, this is not an expectation.

DNP program: Students present their doctoral project findings at statewide conferences such as the Georgia Nursing Leadership Coalition Doctoral Symposium, as well as at Sigma Theta Tau Honor Society conferences. They also present their DNP project findings at CNHP Graduate Research Day.

PhD program: During this review period, PhD students presented research findings at local, state, regional, national, and international conferences. Students also published journal articles and book chapters. Of current students, four recently submitted manuscripts for publication and 100% completed a scholarly poster presentation. Examples of student conference presentations and publications can be found in Appendix 1.b.4.8.

1.b.4.9 Student accomplishments: exams, theses, dissertations, projects, grants, prizes, and awards.

MS program: A thesis is not required for completion of the MS degree. However, students are encouraged to participate in scholarly endeavors.

DNP program: Despite being a young doctoral program, DNP students have achieved considerable accomplishments. Three students have received funding totaling almost \$24K from the Jonas Foundation, a philanthropic organization whose mission is to advance the nursing profession. These funds support leadership development, scholarship, and annual attendance at national meetings. All DNP students are required to complete a scholarly project that combines students' clinical practice experience with concepts and principles learned throughout the program. The project may involve program evaluation, a quality improvement project, or an evaluation of a practice model at a health agency selected by the student. Between Fall 2013 and Summer 2016, six students completed their DNP final projects.

PhD program: PhD students have also received national awards. For example, two students were awarded the John A. Hartford Geriatric scholarship of over \$160,000 in total. Another PhD student received an Oncology Nursing Foundation Award of \$9,000. Furthermore, the Jonas Foundation awarded funding to two PhD students in the last two years totaling approximately \$10,000 per year for each full-time student for two years. Between Fall 2013 and Summer 2016, nine students completed their dissertations. Of the 36 students completing dissertation research in the last five years, one-third studied health disparities in racial and other minorities.

1.b.4.10 Doctoral students' time-to-degree. During this three-year review period, the average time-to-degree (from first term of program to graduation term) for DNP students was 2.3 years based on six students. The average time-to-degree for PhD students was six years based on nine students. As subsequently noted in Objective 2.b, we will implement strategies to reduce PhD student time-to-degree. (Appendix 1.b.4.10).

From 2009 to 2017, the PhD program graduated an average of five students per year (range 0-9) and time-to-degree averaged four years. Also during this timeframe, greater than 75% of PhD students completed their degrees in five years or less. (Data provided by unit.)

1.b.4.11 Student outcomes after graduation: admission into the further graduate education, postdoctoral fellowships, employment.

Master's program: While knowledge of job placement is dependent on self-report by graduates, anecdotal information indicates that most graduates find employment in advanced practice nursing. It is expected that 85% of MS graduates will be practicing in their area of master's specialization within one year of graduation. Feedback from graduates indicates most employers are very satisfied with the characteristics/skills of the graduates. As previously noted in section 1.b.3.2, MS graduates have extremely high pass rates on national certification exams.

DNP program: After graduation, students achieve a 100% employment rate. Many of the graduates obtain promotions to leadership positions within their current institution or transition to a new employer for a leadership position at some of the top healthcare agencies, locally and nationally. Approximately 10-20% of DNP graduates obtain faculty positions.

PhD program: The majority of PhD students are employed either part-time or full-time in academic and clinical settings while in the program. Upon graduation, students hold faculty appointments within the USG, as well as at private universities in Georgia. Others are hired by public and private universities across the country. PhD graduates are also employed in healthcare systems in Georgia (e.g. Grady Health System, Piedmont Health System) and across the country.

1.b.5 Graduate programs within the GSU context.

1.b.5.1 Programs undertaken jointly with other GSU units, list of cross-listed courses. None. Appendix 1.b.5.1 includes a list of courses cross-listed within the SON.

1.b.5.2 Areas of overlap/redundancy with other GSU units. We do not currently offer any joint degree programs or cross-list courses with other units. A list of courses that are cross-listed within the unit are found in Appendix 1.b.5.2.

1.b.6 Number of students enrolled in fully online or hybrid courses. The MS program utilizes a hybrid format with a combination of monthly on-site and synchronous online classes. The program enrollment averages 250-290 students for the hybrid courses. The DNP program is currently online, with one mandatory on-site day per semester. There are 30 students enrolled in the online courses. In Fall 2017, the PhD program transitioned to a distance-accessible format. Courses include limited on-campus meetings, with most classes taught on a web-based learning management system. Prior to Fall 2017 the program was a hybrid format, combining online synchronous and asynchronous weekly classes with monthly class meetings on campus. (Appendix 1.b.6)

1.b.7 Graduate degrees conferred by fiscal year. Over this review period, the SON averaged 105 graduate degrees conferred per year. The number of MS degrees awarded remained steady with an average of 83 degrees per year, which is approximately 85% of current capacity. The DNP

program, which began enrolling students in 2014, had its first graduates in 2016 at which time there were six graduates, followed by 10 the following year—for an average of eight graduates per year since 2016. This represents approximately 90% of current capacity. Given the growing DNP enrollment, we anticipate the number of graduates will continue to increase. The PhD program graduated an average of four students per year; this represents approximately 95% of current capacity given the number of tenure track faculty. Plans for increasing graduate enrollment are subsequently discussed in relation to goal 2. (Appendix 1.b.7).

1.c Research.

1.c.1 Success of the unit's research culture.

The SON strives to contribute to the research mission of the university by addressing the strategic plan's goal of becoming a leading public research university, and by tackling the most challenging issues of the 21st century. As such, we are fully committed to conducting funded research that is interdisciplinary, as well as discipline-specific, with an emphasis on addressing urban health disparities. During this review period one faculty member (Aycock) was successful in securing NIH funding, the most competitive source of funding in our discipline.

1.c.1.1 2CI hires, Regents Professors, Alumni Distinguished Professors, eminent scholars, and endowed professors. Dr. Melissa Faulkner holds the Lewis Distinguished Chair in Nursing.

1.c.1.2a Levels of external and internal funding: grants, fellowships, and other awards. Faculty members were awarded a total of almost \$2.5M in external funding during this review period (July 1, 2014-June 30, 2017) for an average of \$826,623 per year (Appendix 1.c.1.2a). This includes grants awarded to the GSU Research Foundation (GSURF), as well as to the GSU Foundation (GSUF). Grants awarded to GSUF were from foundations that support Project Healthy Grandparents—a community-based research and service program. Grants from federal sources include National Institutes of Health (NIH) and Health Resources and Services Administration (HRSA) funding. According to the Blue Ridge Institute for Medical Research, in 2016 the SON ranked #63 in the nation for NIH funding in Schools of Nursing. Source: http://www.brimr.org/NIH_Awards/2016/NIH_Awards_2016.htm

During this review period, the unit received a total of \$44K in competitive intramural grants from the university and CNHP, with a mean of \$14,667 per year. (Appendix 1. c.1.2a)

1.c.1.2.b Ratio of proposals submitted to grants. SON faculty submitted 90 external grant proposals of which 48 were successful at a rate of 53.33% during fiscal years 2015 to 2017. (Appendix 1.c.1.2.b)

1. c.1.3 National/international rankings of the unit. As stated above, the SON is ranked #63 in the nation for Schools of Nursing NIH funding. There are no additional national research rankings for SONs. (Appendix 1.c.1.3)

1.c.1.4 Research productivity that furthers the strategic goals of the university. SON research addresses multiple areas of the university's strategic plan, with health-related research at its core. This is in close alignment with initiative 1 of Goal 3 that specifically addresses health and

medical research. Within health-related research, our focus on urban health disparities speaks to initiative 1 of Goal 4 that specifically identifies urban well-being and health disparities as a priority.

1.c.1.4.a Quantity and quality of disseminated research. The quantity and quality of disseminated research are reported separately for tenure tract (TT) and non-tenure tract (NTT) faculty for two reasons. First, there are substantially fewer TT faculty in relation to NTT faculty. Second, NTT faculty have considerably higher instructional and service loads than TT faculty, resulting in proportionately less time to devote to scholarship. Please note that the data reported below are derived from individual faculty CVs, as opposed to APR dashboard data which may have included some errors. For instance, the APR dashboard data indicate that faculty published four books during this review period, when there were actually none. These errors could be the result of information incorrectly entered into Digital Measures. It should also be noted that the number of faculty publications based on review of CVs produced a count of 90 publications by both TT and NTT faculty, instead of a total count of 97 publications based on APR dashboard data. This discrepancy may be the result of the unit counting only scholarly publications, instead of also including publications categorized as “other”.

During this review period, for TT faculty there was a total of 68 scholarly publications by a mean of 8.66 TT faculty members per year. The total TT publications over the three-year period included 59 peer-reviewed journal articles, five non-peer reviewed journal articles, and four book chapters. The three-year mean for scholarly publications by TT faculty members was approximately 23 per year, or an average of 2.61 publications per faculty member per year; the vast majority of these publications were data-based articles in peer-reviewed journals (Appendix 1.c.1.4.a).

For NTT faculty, during this review period there was a total of 22 scholarly publications authored by an average of 23.3 NTT faculty members per year. The total publications over the three-year period included 20 peer-reviewed journal articles and two non-peer reviewed journal articles. The three-year mean for scholarly publications by NTT faculty was approximately 7.4 per year, or an average of 0.31 publications per NTT faculty member per year. (Appendix 1.c.1.4.a)

Faculty publish in top ranked nursing journals (rankings from Social Science Citation Index of 114 nursing journals based on journal impact factor); examples include *European Journal of Cardiovascular Nursing* (2nd), *Journal of Cardiovascular Nursing* (9th), *Rehabilitation Nursing* (19th), *Oncology Nursing Forum* (20th), and *Research in Nursing & Health* (22nd). They also published in interdisciplinary journals such as *Stroke* (17th/194 Clinical Neurology), *Journal of Environmental Medicine* (82nd/176 Public, Environmental & Occupational Health), and *Journal of Clinical Psychology* (50th/121 Psychology Clinical).

1.c.1.4.b Impact of research on relevant disciplines, including analyses of citations of work of individual faculty members. Three examples of faculty impact are: 1) research and expertise in hazardous drug handling in oncology where Polovich has been involved in publishing of Oncology Nursing Society (ONS) Guidelines (latest 2016) that are considered nationally and internationally as the standard of care for safe administration of chemotherapy, and used

extensively by inpatient and outpatient cancer centers. Polovich was invited to Japan for the release of these guidelines in Japanese in 2017. Her ongoing scholarly contribution to improve safety and quality of care with chemotherapy administration was recently recognized by the ONS awarding her the Rose Mary Carroll-Johnson Distinguished award for Consistent Contribution to Nursing Literature; 2) Clark has been co-author on two scientific statements from the American Heart Association (AHA)/American Stroke Association (ASA) with the most recent statement including a systematic analysis of interventions for stroke survivors and caregivers that received the 2015 Stroke Article of the Year Award from the AHA Council on Cardiovascular and Stroke Nursing; 3) Spratling has been lead author of the published Research Agenda for National Association of Pediatric Nurse Practitioners (NAPNAP), the largest pediatric advanced practice nursing organization. These examples illustrate the influence of our faculty on research and clinical practice.

Additional evidence of the impact of faculty research is supported by analyses of journal citations which demonstrate that faculty are having a significant impact in nursing, as well as in related disciplines. A Google Scholar citation search conducted by GSU librarian specialist Ina Martinez, on select faculty publications from January 1, 2000 to October, 24, 2017, revealed the following: Our full professors are very well-cited. Clark's 2010 publication on behalf of the AHA Council on Cardiovascular and Stroke Nursing in the journal *Stroke* has been cited 394 times. Furthermore, a 2005 publication by Clark in *Stroke* was cited 402 times, and a 2008 article in *Lancet Neurology* was cited 281 times. Faulkner's 2007 article related to childhood diabetes in the *Journal of Pediatric Nursing* has been cited 93 times, while a 2003 article in *Heart & Lung: The Journal of Acute and Critical Care* was cited 82 times. Kelley's research related to the health and psychological well-being of grandparents raising grandchildren in a 2000 article in *Child Abuse & Neglect: The International Journal* has been cited 247 times, while her article in *Health & Social Work* has been cited 168 times. Furthermore, an article in *Child Welfare* has been cited 128 times. It is noteworthy that the unit's sole and recently promoted Associate Professor (Aycock), demonstrates the impact of her stroke-related research. For instance, her 2004 publication in *Nursing Research* and her 2009 article in *Maternal and Child Health Journal* have each been cited 92 times. The publications of our assistant professors are also showing a broad influence. For instance, Polovich's 2013 article in *Oncology Nursing Forum* has been cited 168 times, while a 2009 article in the same journal has been cited 151 times. (Appendix 1.c.1.4.b)

Furthermore, Dr. Aycock has had two published abstracts (2014, 2016) selected in the top 10% of abstracts submitted to the ASA International Conference, resulting in invitations to present her work at the AHA Scientific Session; this further demonstrates the impact of her stroke-related research.

1.c.1.5 Success in recruitment and retention of top faculty in the field. The SON recruited Dr. Melissa Faulkner in 2016 to assume the Lewis Distinguished Chair in Nursing. This hire was especially critical given her strong record of NIH funding and other scholarly accomplishments in the area of childhood diabetes. While we were successful with this key hire, it is important to note that the recruitment of senior faculty is impeded by the national shortage of PhD-prepared nurse researchers. According to the American Association of Colleges of Nursing (AACN), a

recent national survey of nursing programs revealed a 7.9 percent faculty vacancy rate (*Special Survey on Vacant Faculty Positions, AACN, October 2016).

1.c.1.6.a Number of faculty promoted and/or tenured since 2007. Since FY 2010, two tenure track faculty at the rank of assistant professor were promoted to the rank of associate professor and awarded tenure (Aycock and S. Lee). In addition, one faculty at the rank of associate professor was awarded tenure (Moloney). During this time, three faculty were hired at the rank of professor with tenure (Faulkner, Fisher, and Wilmoth). Drs. Fisher and Wilmoth have since left GSU. Currently, the school has five faculty members in tenure track positions at the rank of assistant professor (Chen, Epps, Helvig, Polovich, and Spratling). Of these five, one (Spratling) is currently under review for promotion and tenure. During the same period, seven clinical (non-tenure track) faculty members at the rank of clinical instructor were promoted to rank of clinical assistant professor (Bates, Casseus, Cranwell-Bruce, Gordon, Kirkendoll, Long, and Sims). In addition, one faculty member at the rank of clinical assistant professor was promoted to clinical associate professor (Horne) and one (Cranford) at the rank of clinical associate professor was promoted to clinical professor. (Appendix 1.c.1.6.a)

1.c.1.6.b Average time in rank, recruiting/hiring history. Recruitment of faculty at the assistant professor rank is also highly competitive given the national nursing faculty shortage. However, in the past four years we successfully recruited and retained four, well-qualified tenure track assistant professors (Chen, Epps, Helvig, Polovich). (Appendix 1.c.1.6.b)

1.c.1.7 Faculty participating in exchanges where applicable to the unit. SON faculty did not participate in any exchanges during the review period.

1.c.1.8 Faculty surveys. Faculty surveys demonstrated satisfaction with the unit and programs. Areas of strength were faculty being proud of the school's local and national standing, individual career goals were consistent with the school's expectation, and adequate resources such as technology, labs, and library. Areas with lower scores were funding for research, time for scholarly research, and lack of support for non-tenure track faculty scholarship and research. (Appendix 1.c.1.8)

1.c.2 Faculty partnerships and professional service.

1.c.2.1 Faculty participation in research centers and clusters at GSU. Numerous faculty participate in research centers and clusters at GSU. Dr. Susan Kelley currently participates with the CEHD's Center on Adult Literacy (CAL) and the SPH's Partnership on Urban Health Research (PUHR). She also holds a joint faculty appointment with the SPH. Drs. Chen and Clark collaborate with the Gerontology Institute and Dr. Aycock with the PUHR and CAL. In addition, Dr. Spratling works with the neurodevelopment training program and the Andrew Young School of Policy Studies.

1.c.2.2 National and international research collaborations and partnerships. Dr. Kelley has extensive national and international collaborations and partnerships. Examples include research collaborations with Case Western University School of Nursing, University of Hong Kong, and Hong Kong Polytechnic University. Dr. Faulkner has collaborated with Yale University School of Nursing, Chungnam National University School of Nursing in Daejeon, South Korea, and the

Technion Israel Institute of Technology and Rappaport School of Medicine in Haifa, Israel. She also collaborates on research with faculty at Emory University and the University of Pittsburgh. Dr. Aycock collaborates with faculty at the NIH funded Center for Stroke Disparities Solutions housed at New York University and has served as a mentor for their scholars. Dr. Clark is a co-mentor on a NIH K23 award with a physical therapy faculty at Emory University. Dr. Epps collaborates with faculty at Loyola University and Emory University's School of Nursing. Other research collaborations include Dr. Spratling's work with Duke University's School of Nursing and Professor Kirkendoll's work with Hampton University.

1.c.2.3 Evidence of interdisciplinary research. Dr. Kelley participates in research with the School of Social Work, Emory University School of Medicine, and CEHD. Dr. Faulkner and Dr. Helvig participate in research with Emory University's NIH-funded Georgia Diabetes Translation Research Center. Dr. Faulkner has also participated with the University of Pittsburgh's School of Public Health. Dr. Aycock has an NIH grant that involves both medicine and public health. Dr. Clark has participated in research involving medicine, social work, and gerontology. Dr. Spratling has participated in research involving the Centers for Disease Control and the AYSPS's Georgia Health Policy Center.

1.c.2.4 Significant professional service. The faculty provides extensive professional service to nursing and interdisciplinary professional organizations at the local, state, and national levels. Some examples include Dr. Spratling's service as president of the state's National Association of Pediatric Nurse Practitioners (NAPNAP) chapter, as well as her service on the national board of NAPNAP; Dr. Nelson's role as president of the United Advanced Practice Registered Nurses of Georgia, and Dr. Epps's role as a member of the Board of Directors for Louisiana Enhancing Aging with Dignity through Empowerment and Respect. Other examples include Dr. Kelley's service on the national boards of Prevent Child Abuse America and the Academy on Violence and Abuse, as well as her service on the board of directors of Mercy Care in Atlanta.

1.c.3 Recognition of scholarly excellence.

1.c.3.1 Recipients of GSU faculty fellowships and other internal rewards. Dr. Kelley was the recipient of the 2013 Carl V. Patton President's Outstanding University Program Award for Project Healthy Grandparents—a research and community outreach initiative in its 22nd year. Drs. Aycock, Chen, Helvig, and Spratling have each received a CNHP intramural research grant. Furthermore, Dr. Aycock was a recipient of a highly competitive, university-level Research Initiation Grant (RIG).

1.c.3.2 External awards, honors, prizes, and fellowships. During this review period, there were four faculty (Clark, Faulkner, Kelley, Wilmoth) who were Fellows in the American Academy of Nursing (AAN). According to the AAN, the "Academy's Fellows are nursing's most accomplished leaders in education, management, practice and research". Two faculty (Aycock, Clark) were Fellows in the American Heart Association.

1.c.4 Unit infrastructure for supporting research.

The CNHP research support team, comprised of an Associate Dean for Research and a Grants and Contracts Officer, provides research support to the SON. Please refer to Appendix 1.c.4 for an overview of the unit infrastructure for research support.

1.c.4.1 Unit level research and travel grants. At the college level, there are two competitive, intramural research grant opportunities available to junior, tenure track faculty. The first grant opportunity which is for \$7,000, is available each semester, with a total of five awards granted annually. The second grant initiative, the Lewis Foundation Award, is an annual \$10,000 award which is given to one faculty per year. As part of hiring packages for tenure track assistant professors, faculty are provided with up to \$10,000 in faculty development funds from the college to support initial research endeavors. In addition to CNHP-level research support, the SON provides travel support for faculty to make scholarly presentations at national and regional conferences. The typical award amount is \$1,300 for travel expenses, with registration fees covered separately. Most TT faculty are funded for two conferences a year, while NTT faculty receive travel funding for one conference.

1.c.4.2 Grant support: writing, administration. Grant support is centralized in the CNHP and comes under the auspices of the Associate Dean for Research. One administrative staff member assists with pre- and post-award grants and contracts. The SON business manager also assists with post-award management. Funds are available for grant writing consultants.

1.c.4.3 Facilities, equipment, technical support, and other administrative support. The SON provides funding for graduate research assistants, grant writing consultants, and professional editors. The unit also assigns clinical research offices for faculty who are collecting clinical data from research participants to assure privacy. Technical support for research is provided by the CNHP's IT unit. Also, see section 1.c.4 for infrastructure.

1.c.4.4 Research information resources. Nursing faculty are mentored primarily by two senior faculty members (Drs. Clark and Faulkner), each with extensive research expertise. Funding for grant consultants is available from the college's Associate Dean for Research, as well as from the SON. The university provides grant-writing workshops and funding announcements frequently.

1.c.5 Contributions to science and health/medicine education. Numerous faculty have contributed to health-related research. Examples include Drs. Clark and Aycock's research on stroke and cardiovascular disease, Dr. Chen's work with healthy aging in the Asian American population, Dr. Epps' work with caregivers of persons with dementia, and Dr. Faulkner's research with pediatric diabetes. Other contributions include Dr. Kelley's research on the health of grandparents raising grandchildren and Dr. Spratling's research with technology dependent children.

1.d Contributions to cities.

Many of the activities of the SON contribute to the university's current strategic goal of being a leader in understanding the complex challenges of cities; we plan to build further on this area as presented later in the SON's Goal 4. As previously noted, the SON is committed to interprofessional education reflecting the "real world" of health care in which teams representing various health professions (e.g. nurses, respiratory therapists, physical therapists) partner in

providing care for patients. Therefore, many of our contributions are intentionally designed to be interprofessional at the college level, rather than discipline-specific.

1.d.1 Activities with the council for the progress of cities. Not applicable.

1.d.2 Contributions to the arts and media.

1.d.2.1. Speaker's series. The CNHP's annual signature event, the Haverty Lecture, features prominent national speakers on a number of health topics significant to urban health issues. For instance, the college's most recent Haverty Lecture featured a speaker who is a nationally prominent expert on urban health disparities. In addition, the CNHP hosts scholars on a variety of topics often relevant to urban health issues through the monthly Lewis College Seminar Series. Launched in 2015, it features noted scholars from a variety of national and local entities (e.g. CDC, Emory University, Loyola University).

1.d.3 Field-specific contributions to cities. The SON makes significant contributions to developing effective solutions to urban health disparities through research, teaching, and community service. The SON partners with leading urban healthcare facilities (e.g. Grady Memorial Hospital, Atlanta Medical Center, Piedmont Hospital, Children's Healthcare of Atlanta) for "hands-on" undergraduate and graduate clinical experiences. Our undergraduate students also learn about urban health disparities through their community health clinical experiences in settings such as homeless shelters. Through the long-standing SON Health and Wellness Nursing Collaborative, faculty and students address urban health disparities by the provision of healthcare to underserved urban populations (e.g. Head Start, domestic violence shelters).

A number of faculty conduct research related to urban health disparities. For instance, Dr. Dawn Aycock is the principal investigator of an NIH-funded study testing a stroke risk counseling intervention with urban-dwelling, African American, young adults. Dr. Faulkner conducts research in pediatric diabetes—a significant urban health problem. Another faculty member (Kelley) conducts intervention research related to improving the health of urban-dwelling grandparents raising grandchildren; this intervention model has been replicated or adapted in five U.S. cities, as well as in Harbin, China. Dr. Epps conducts research on African American caregivers of patients with dementia.

During this report period, faculty members were active affiliates of the SPH's Partnership for Urban Health Research Studies (Aycock, Kelley), the Gerontology Institute (Chen, Clark, Epps), and the CEHD's Adult Literacy Center (Aycock, Chen, Kelley, Lee, J.) where there is an emphasis on health literacy—a significant factor in urban health disparities.

1.e. Globalizing the university.

1.e.1 Critical issues for global cities (partnerships with other universities on challenges facing cities). Dr. Kim Hires is working with faculty at the University of Kwa-Zulu-Natal in Durban, South Africa on health promotion and management of chronic disease. In 2016, Dr. Susan Kelley served as co-investigator on a grant submitted by Dr. Edward Chan at the University of Hong Kong related to the role of grandparents in preventing child maltreatment in in Hong Kong. In

addition, Dr. Polovich is working with faculty at the Seoul National University on research related to oncology nursing.

1.e.2 Funded research on challenges facing emerging nations. None.

1.e.3 Establishment of GSU as an international center.

1.e.3.1 Faculty international exchanges, speakers, cultural events, visiting scholars, etc. The SON hosted a number of visiting scholars from 2014-2017 (Appendix 1.e.3.1). For example, Dr. Carina Bertero, a visiting professor from Sweden, presented a series of seminars on conducting qualitative research. Professor Yuxia Cui, a former visiting scholar from China (S. Lee, faculty sponsor), successfully secured three years of funding from the Chinese Educational Department to adapt an intervention developed by an SON faculty (Kelley) for grandparents raising grandchildren in China. Another former visiting scholar from China, Professor Hui Zhang, also received a national research grant after her research experience with the SON (S. Lee, faculty sponsor). Dr. Margaret Moloney (Associate Professor Emerita) presented seminars for faculty on how to become a Fulbright Scholar based on her Fulbright fellowship in Sweden.

1.e.3.2 International forums. SON faculty frequently travel outside of the United States to present research findings at international meetings, give invited lectures, and participate in conferences. Please see Appendix 1.e.3.2 for a list of these activities.

1.e.3.3 Programs for foreign students. In 2013 SON faculty (S. Lee) developed SNHP 3050 *Communication and Cultural Diversity in Health Care System*, a course primarily for nursing students from Asia, as part of the university's Office of International Initiatives (OII) Summer Institute. Due to Dr. S. Lee's departure from GSU, it is now coordinated by a faculty member from Physical Therapy (Dr. Yu-Ping Chen); however, the vast majority of students enrolled continue to be international nursing students from Asia. SON faculty (Aycock, Breslin, DeMars, Evans, Horne, J. Lee) served as guest lecturers in the course from 2014 through 2017. Collectively GSU's partner institutions (Taipei Medical University, China Medical University, Hungkuang University, and Hong Kong Baptist University) have sent a total of 57 students during the time period covered in this report (Source: OII/iPort).

1.e.3.4 Programs coordinated with the university's international initiatives. As noted above, the SON participates in the OII Summer Institute. Faculty also participate on university strategic country task forces (South Africa: Hires, Killian, Kirkendoll; Korea: Grantham).

1.e.4 Enhancement of global competency.

All undergraduate nursing students are required to take Communication and Cultural Competency (CNHP 3000) in which topics are explored from a global perspective with an emphasis on cultural competency, communication, and service delivery to diverse populations. As such, this course is officially designated as a university Global Scholars Distinction course. Health and Human Development Across the Lifespan (NURS 2010), another required course for nursing students, places a strong emphasis on cross-cultural and global issues as they relate to human development and health.

1.e.4.1 Contribution to international studies. Two faculty members have served as visiting professors at international universities: one (Kelley) at the University of Sydney in Australia and the other (S. Lee) at Harbin Medical University in China.

1.e.4.2 Number of students enrolled in study abroad programs. During 2014-2016, a total of 41 undergraduate nursing students enrolled in study abroad programs; the country visited most often was Nicaragua (Source: iPort). (Appendix 1.e.4.2)

1.e.4.3 Global leadership certificate programs for undergraduates. None.

1.e.4.4 Language programs with learning outcomes and success measures. None.

1.e.4.5 Courses/programs with learning outcomes and success measures. None.

1.e.4.6 Contribution of global/multicultural perspectives to core and other major courses. Please refer to Appendix 1.e.4.6 for a listing of SON courses with significant global/cultural content.

1.e.4.7 Contribution to global competency for staff. Staff members are encouraged to participate in the OII sponsored International Week and other educational opportunities with a global focus.

1.e.4.8 Success in recruiting top international faculty and students. In regard to international students, we have 22 students that are classified as non-resident aliens, including one PhD student (Source: CNHP Office of Academic Assistance). In addition to the non-resident aliens, a significant proportion of our students are children of immigrants born outside of the U.S. These students add rich diversity to the learning environment and represent the diverse immigrant population in greater Atlanta. As graduates, they are in high demand given their fluency in their native languages, as well as and their in-depth understanding of their family of origin's culture.

1.f Overall assessment of the unit.

The School of Nursing rates highly in productivity, quality, and viability; it is also central to the university's strategic mission and strategic plan. With regard to scholarly productivity, faculty maintain active research programs as evidenced by our publication and extramural funding records. In regard to quality, the undergraduate major in nursing is one of the most competitive undergraduate degree programs at the university, allowing the unit to be very selective in the students admitted. Our graduate programs are also competitive as evidenced by our admissions data. The high quality of our programs is also substantiated by our undergraduate and master's degree programs' high first-time pass rates on national licensure and certification exams.

The unit has been innovative in seeking new opportunities for generating credit hours through the extensive offering of online courses. The master's degree program utilizes a hybrid format with approximately 75% of course content delivered online. Recently, the PhD and DNP programs transitioned to distant-accessible programs, with all course content offered online either synchronously or asynchronously. Course content is augmented by on-campus intensive sessions designed to enhance student socialization into the role of a scholar. This form of program delivery will position us to attract more doctoral students beyond Georgia. The unit's viability is underscored by its large enrollments at the undergraduate and graduate levels. During

the course of this three-year review period, the unit increased its credit hour productivity by six percent. Faculty make steady progress moving through the ranks, whether in tenure or non-tenure track positions. The high level of diversity among students and faculty is another noteworthy strength.

Despite these accomplishments, the unit faces several challenges as described in previous and subsequent sections. The national shortage of PhD-prepared faculty hinders our ability to hire tenure track faculty. As a result, we have a large proportion of NTT faculty compared to TT faculty. While NTT faculty contribute greatly to the teaching and service mission of the unit, we need more tenure track faculty to support our PhD program, as well as to significantly increase scholarly productivity. Currently, we have three open tenure tract positions which we are aggressively attempting to fill. Other limitations include length of time taken to complete the PhD program and the relatively small number of undergraduate students who participate in the Honor's College, as well as study abroad programs. In regard to diversity, males are underrepresented in our student body which is consistent with national demographics in nursing.

2. How adequate are your unit's resources?

2.a Faculty resources.

Faculty resources have become increasingly challenging. Because our undergraduate students are supervised by faculty in hospitals and other clinical settings each semester, we rely heavily on part-time instructors (PTIs). One of the reasons for this is that AACN, our national accreditation body, as well as the Georgia Board of Nursing, mandates a maximum student to faculty ratio of ten-to-one for clinical instruction. However, hospitals often have more stringent requirements regarding student-to-faculty ratios, with some limiting the number of students to six per faculty due to patient safety concerns.

2.a.1 Faculty composition. As of Fall 2016 (latest APR dashboard data available), the faculty is comprised of 36 full-time members. Of these faculty, 22 are white, 12 are black, and two are Asian; the vast majority are female. In addition, there is one partial-contract faculty member who is white. While the APR dashboard indicates six part-time instructors (PTIs), department records indicate 47. Of these PTIs, 25 are black, 19 are white, and three are unknown; 46 are female. As previously noted, we have a large number of NTT faculty compared to TT faculty. Of the 36 full-time faculty in 2016, there were only nine tenure track faculty; as of Fall 2017, we are down to 8. Currently, there are three tenure track openings that we plan to fill. The overall faculty composition for Fall 2017 is very similar to Fall 2016, with the exception of one less tenured faculty member. (Appendix 2.a.1)

2.a.2 Student/faculty ratio data. Over the last several years, the undergraduate student faculty ratios have varied within a fairly narrow range, averaging 8.3 (range = 7.6 to 8.8) for students in the nursing major. It is important to note that the student-faculty ratio reported for undergraduate students do not take into account a fairly heavy reliance on PTIs. As previously noted, in Fall 2016, 47 PTI's were utilized for undergraduate clinical instruction; this reliance on PTIs is related to the fact that many clinical facilities require a student faculty ratio of 6:1 for undergraduate students. The graduate student-faculty ratio average was 8.6, with a range of 7.5 to 9.6. (Appendix 2.a.2)

2.a.3 Credit hour generation data by faculty, by fiscal year.

Over the review period, credit hour generation by full-time faculty increased from 12,378 in FY 2015 to 13,069 in FY 2017. Credit hours taught by PTI's decreased from 2216 in FY 2015 to 1387 in FY 2017. No credit hours were taught by graduate teaching assistants; while they may assist faculty with instruction, they are not solely responsible for any courses taught in nursing. (Appendix 2.a.3)

2.a.4 Role of clinical faculty, if present in teaching, research, and service. Clinical/NTT faculty are expected to teach 12 credit hours, or equivalent of four courses, each semester which is equivalent to 80% of their workload; the other 20% is dedicated to scholarship and service.

2.b Administrative resources.

2.b.1 Staff support per FTE faculty member. The SON is supported by a team of nine staff members: One Business Manager III; one Administrative Specialist–Administrative, Senior; five Administrative Specialist–Administrative coordinators supporting the various programs; one Instructional Design Specialist; and one Clinical & Residency Placement Coordinator. These staff provide support to 36 full-time faculty members, as well as partial support faculty and PTIs. It is also important to note that staff are responsible for supporting five degree programs, with a total of almost 600 students.

2.c Technological resources. All full-time faculty are provided with a desktop computer and printer. Tenure track faculty are also provided with a laptop computer to support their research. SON students have access to the CNHP computer laboratory that contains 51 workstations. With the exception of an educational technology specialist funded for two years (2016-2018) by a grant to support the PhD program, the SON shares technology support and staff with the CNHP.

2.d Space resources. The SON occupies the ninth floor of the Urban Life building. This provides the school with 56 faculty and staff offices, two conference rooms, an administrative office, and access to the CNHP student computer lab. There are four additional conference rooms on the 8th and 12th floors which are available for use. In the Petit Science Center, there is one dedicated classroom, which seats 75 students and provides a full range of technology. Nursing has unique classroom scheduling needs due to undergraduate clinical requirements and master's program hybrid classes resulting in difficulty securing adequate classroom space due to the university's "clock schedule" for classroom scheduling. Several dedicated classrooms are needed to resolve this challenge.

2.e Laboratory resources. SON has dedicated state of the art skills and simulation laboratory space in the Petit Science Building. While adequate for nursing, interprofessional education activities require sharing of these resources which can be problematic. (Appendix 2.e)

2.f GSU Foundation resources and other gifts. During the past three years, the School of Nursing has received over \$255,000 in gift contributions from alumni, corporations, and foundations, giving the school the ability to provide student scholarships and faculty awards. Over the same period, the nursing foundation general operating account received donations totaling \$43,114,

which is used to support immediate needs of the SON where state dollars cannot be used (e.g. purchasing refreshments for student events).

The school has eleven endowed funds. The income from these endowments is used to provide support for student scholarships, faculty awards, funding for research, recruitment of faculty, and academic program support. As of June 30, 2017, the balance of the eleven endowments is \$2,786,711. The Byrdine F. Lewis Endowed Fund is the largest endowment. This fund also provides support for the Lewis Distinguished Chair in Nursing, which is currently held by Dr. Melissa Faulkner. (Appendix 2.f)

2.g Library resources. Based on analysis of library holdings provided by our subject librarian, the GSU Library effectively supports the curriculum and research areas of our faculty and students. In addition, a subject librarian is available to consult with students and faculty, and gives presentations on the GSU library to both undergraduate and graduate students. We subscribe to 18 of the top 20 journals (as ranked by impact factor), offering a strong collection of research journals. While most nursing departments in peer institutions have electronic access to all of the top 20 journals, the GSU Library provides print access (with desktop delivery for faculty and graduate students), and our Interlibrary Loan service quickly fills requests made for articles not available from our collection. A comparison of peer institutions shows that the GSU Library acquired the 2nd highest number of monograph titles in the last three years. For monograph titles that are not available, faculty and students have access to three interstate book-share programs and our Interlibrary Loan service. In comparison to peer institutional nursing programs, the GSU Library provides a strong collection of databases for faculty and student research including key titles (i.e. CINAHL, PubMed, and Cochrane Library). (Appendix 2.g)

3. Where does your unit want to go?

3.a Prioritized goals. As the previous sections indicate, the SON is making significant contributions to the university's current strategic plan in numerous and diverse ways. Our proposed goals recognize and build upon our existing strengths and accomplishments, as well as how we can further align our mission with that of the university. Furthermore, our goals and their respective objectives represent a logical plan to move the school forward with an emphasis on faculty growth and increased research productivity, program quality, and expansion of our doctoral programs. The goals and objectives presented below are highly interrelated and in approximate order of priority.

Goal 1: Strengthen scholarly productivity by expanding the number of tenure track faculty and increasing external funding. (Sustaining innovation)

This goal is consistent with the updated strategic plan's emphasis on enhancing a culture of research, as well as increasing contributions to health research and education. During this review period the SON was successful in hiring well-qualified faculty at the assistant professor (Chen, Epps, Helvig, Polovich) and full professor (Faulkner) levels whose scholarly interests are consistent with the university's current strategic plan. It is important to note that the recruitment of faculty at all ranks is significantly impeded by the national shortage of PhD-prepared nurse researchers, as previously noted. As tenured faculty depart, due to other academic opportunities

or retirement, it has become increasingly difficult to replace them with new tenure track faculty. For instance, we currently have three open tenure track faculty positions. Two of these positions were open last year and despite extensive recruitment efforts, we were unable to fill them. As a result, we have a disproportionate number of non-tenure track faculty compared to tenure track. While NTT faculty contribute greatly to the teaching and service mission of the unit, more tenure track faculty are needed to significantly increase scholarly productivity.

Objective 1.a: Increase number of tenure track faculty at various ranks to promote scholarly productivity. The unit currently has only three full-time tenured faculty members (two professors, one associate), as well as five assistant professors. In addition to filling the three current TT vacancies, we will seek two additional TT faculty lines. We will target the hiring of new faculty with research interests related to urban health disparities, to complement existing faculty expertise and expand on areas of excellence. Recent experience in TT faculty recruitment indicates a need to offer more attractive hiring packages that include higher base salaries, along with more generous discretionary funds for research and travel. Although retention has not been a recent issue, we will develop strategies for retaining TT faculty given the challenge in recruiting PhD-prepared faculty.

Objective 1.b: Increase external funding from private and public sources. While the SON has experienced some success in securing NIH and other funding, we would like to expand significantly in this area. Some examples of funding success include a recently tenured faculty member (Aycock) who has a three-year NIH K Award allowing 75% release time to conduct research and expand research skills, as well as Dr. Epps's recent NIH diversity supplement award to support 75% release time over the next two years in order to further develop her research skills.

In order to achieve our objective of increased external funding, we have a multi-pronged approach that includes: a) hiring consultants to provide expert guidance to both novice and experienced grant writers, as well as hiring manuscript editors to assist faculty with scholarly writing; b) providing course release or summer funding for select faculty to develop successful grant proposals; c) increasing successful applications for intramural funding from the college and university to conduct pilot studies that will lead to extramural funding; and d) increasing collaborative grant opportunities with other units. In addition to increasing research funding, we will build upon past successes with HRSA training grants.

Resources related to goal 1. In order to meet Objective 1.a, the following resources are needed. The unit will prioritize redirection of internal funds to offer more competitive TT hiring packages. We also plan to compete for funds from the university's NextGeneration initiative through collaboration with other units conducting research on urban health disparities, in order to increase the unit's number of TT faculty. While the unit could consider reallocating internal resources to convert one or more non-tenure track positions to tenure track lines, reducing the number of non-tenure track faculty would negatively impact enrollment and credit hour generation. Therefore, we will request at least one additional TT line from the college. To support Objective 1.b, unit resources will be reallocated to hire consultants as noted above and provide course release. Allocation of additional space will be necessary to accommodate grant-funded staff and new faculty.

Implementation plan for goal 1. To implement Objective 1.a, we will fill three open TT faculty positions no later than year 2 (AY 2019-2020) of the APR action plan. We will also compete for a new faculty position through GSU's NextGeneration internal funding initiative during the first three years of the action plan. A TT faculty retention plan will be developed in AY 2018-2019. To implement Objective 1.b, we will hire grant consultants in AY 2018-2019, as well as provide course release to support faculty submitting grants. During the first three years, (2018-2021), we will partner with other units to submit interdisciplinary, external funding proposals. During each year of the plan, junior TT faculty will seek internal funding through the university's Research Initiation Grants (RIG) and Lewis College grants. Furthermore, faculty will seek prominent fellowships or awards through the Georgia State Faculty Fellowship Program no later than year 3 (2020-2021). We plan to increase external funding by at least 20% in the first two years of implementation, and by 50% by year 4.

Goal 2: Expand and further strengthen our PhD and DNP programs. (Disruptive innovation)

This goal addresses the university's strategic goal to strengthen and grow distinctive graduate programs that assure development of the next generation of researchers and leaders. We seek to grow enrollment in our PhD and DNP programs to meet the national demand for doctorally-prepared nurses, especially those with the PhD. In addition to increasing enrollment in our PhD program, we plan to make changes in the program that will reduce time-to-graduation while maintaining quality.

To achieve Goal 2, we have established the following three objectives:

Objective 2.a: Continue to attract a diverse pool of well-qualified doctoral applicants while expanding regional, national, and international enrollment. We will continue to enroll well-qualified, diverse students. While current enrollment from underrepresented racial/ethnic groups is 30% for our PhD program and over 50% for the DNP program, we will seek to increase enrollment from all underrepresented groups in nursing, including men. We will also seek to become more geographically diverse, as most of our current doctoral students reside in Georgia.

Objective 2.b: Expand enrollment of doctoral students. Despite a recent national decline in applications to nursing PhD programs, applications to our PhD program recently increased with the implementation of the distance-accessible program in Fall 2017. The program received extramural funding through the State Initiation Plan with funds from AARP, Robert Wood Johnson Foundation (RWJF) and the University System of Georgia, to enhance the distance-accessible model. We plan to further increase enrollment of doctoral students, emphasizing PhD enrollment, given the national demand for research-focused nurses. We will work to reduce PhD completion times through several strategies which will, in turn, allow us to graduate more PhDs over time. We currently offer the BS to PhD and BS to DNP options, and will recruit baccalaureate nursing students and graduates to enroll directly into the doctoral programs.

Objective 2.c: Transition the existing preparation of APRNs from the MS to DNP degree. To comply with evidence-based trends in nursing education, and to be competitive among comparable SONs, master's level APRN preparation will transition to the DNP degree. With applications to the MS program in decline over the past three years, transitioning APRN education to our existing DNP program will result in better prepared APRNs, while increasing

enrollment. It is important to note that our accreditation governing body, the AACN, has set a national goal to transition APRN education from MS to DNP programs in the near future. This transition to a clinical doctorate in nursing is comparable to what the physical therapy (PT) profession did, when they transitioned all of their MS degree programs to doctorate of physical therapy programs. The DNP builds on the MSN degree with an expanded focus on evidence-based practice, leadership, and quality patient care. The transition from the MS to the DNP will be accomplished by continuing to offer two levels of admissions to the DNP program: BSN to DNP and MS to DNP. Currently, the DNP requires 48 CHs for with students with an MS degree and 81 CHs for those without an MS.

The MS degree offering will continue for non-APRN related concentrations such as the Leadership and Informatics program. We will continue to offer APRN education at the PMC level and strongly encourage BSN students and graduates to choose the DNP level of education for APRN career progression.

Resources related to goal 2. To meet Objectives 2.a and 2.b, internal resources will be reallocated for marketing our doctoral programs, as well as for transitioning the current MS APRN concentrations to the DNP. As previously noted in the resource section related to Goal 1, additional tenure track faculty positions will be requested to allow expansion of PhD enrollment. To meet Objective 2.c, we will redirect existing resources from the MS program to the DNP program, thereby making the transition resource-neutral. Regarding CH generation, the transition of MS APRN will initially be neutral, with CHs increasing once the transition is fully implemented.

Implementation plan for goal 2: During the first year of implementation, we will seek additional financial support for PhD students, and increase our marketing efforts for both doctoral programs. Also during year 1, total enrollment in the PhD program will increase from 21 to 25 students. DNP total enrollment will increase from 21 to 25 students. By the fifth year of implementation, we plan for a total of 30 students in the PhD program and 45 students in the DNP program. During the first year of implementation we will carefully devise a five-year plan for transitioning APRN education from the MS to the DNP degree. By year 6, the transition will be fully implemented.

Goal 3: Enhance the undergraduate learning experience. (Sustaining innovation)

This goal is consistent with the university's strategic plan goal of becoming a national model for undergraduate education, by demonstrating that students from all backgrounds can achieve academic and career success at high rates. Nursing graduates are required to take a licensing exam to become employed as a registered nurse. The goal of the faculty is to prepare students by providing a strong academic foundation that will lead to critical thinking. This will prepare students for the licensing exam, the role of registered nurse, and the practice of nursing. These areas are: a) facilitation of student success for better student outcomes; b) increasing undergraduate research participation based on the self-study student survey results; and c) enhancing the global competency of undergraduate nursing students. Many students have not had an experience that enhances global awareness and, as a result, are often limited to viewing the world through the lens of their immediate environment and culture. The patient population today

is very diverse and nurses must be prepared to care for patients from all backgrounds. Global experiences will enhance student ability to understand and appreciate cultural diversity.

To address goal 3, we have established three objectives:

Objective 3.a: Facilitate student success. In an effort to accept a larger proportion of native GSU students (defined as those who enroll at GSU as freshmen, as opposed to transfer students) into the nursing major, the admission process was recently modified at the request of the university. This resulted in a somewhat less-qualified Fall 2017 cohort, compared to past years. Because of this, a student success initiative was launched for this cohort of students. Under the direction of two highly-experienced faculty members, students who are identified as being academically “at-risk” are referred to the student success team by the course administrators based on student performance. As a result, students receive individualized assistance with study strategies, test-taking skills, writing abilities, technical nursing competencies, assessment skills, and NCLEX preparation. The success team also utilizes established services offered by the university, such as the Counseling and Testing Center, Writing Studio, the Dean of Students office, and the International Students & Scholar Services center. The long-term goal is to offer this resource to all students needing additional academic support. The success of this initiative will be evaluated based on feedback from students and faculty, subsequent performance of students in the classroom and clinical areas, as well as on NCLEX scores.

Objective 3.b: Increase undergraduate participation in research. The university’s strategic plan seeks to create undergraduate signature experiences. While the SON has done well with incorporating signature experiences in clinical courses, signature experiences in the area of research are currently limited. Students will have the opportunity to conduct research-related signature experiences by working with faculty to gain direct research experience. Subsequently they will conduct poster presentations at the university’s undergraduate research day.

Another method of increasing research participation is through increased SON involvement in the Honor’s College (HC). To date, nursing student participation in the HC has been challenging, due to the structured nature of the nursing curriculum—including the extensive required hours in healthcare settings. One way to enhance participation in the HC would be to designate a faculty member as a liaison to the HC. The SON will also increase HC opportunities in non-clinical courses such as the introductory research and directed reading courses. Students will work with faculty conducting research as part of the honors component of their course.

Objective 3.c: Enhance global competency. We plan to reintroduce a global health course previously offered to students, which included a clinical component in Nicaragua, where students provided healthcare services to an indigent population. Because students are often unable to afford study abroad programs, we plan to seek funding to increase student participation. Undergraduate students will be introduced to the university’s Global Ambassadors Program and encouraged to serve as liaisons between international students and GSU. Students will also be paired with faculty members involved in global initiatives.

Resources related to goal 3: Existing SON resources will be reallocated to support the student success initiative described in Objective 3.a; in addition, dedicated space for meeting with these

students is needed. In order to meet Objectives 3.b. and 3.c, faculty resources will be reallocated to designate an SON liaison with the HC, and to coordinate the study abroad initiative internally, as well as with OII. Funds will need to be secured in the form of scholarships or grants to assist with student and faculty travel expenses.

Implementation plan for goal 3. In year 1, we will evaluate the initial outcomes for the student success initiative described in Objective 3.a. and determine if changes are needed and whether expansion is necessary. To address Objective 3.b, we will identify research faculty and doctoral students to serve as mentors for undergraduate students involved in research activities. During year 1, designated faculty will create a study abroad experience that meets student learning outcomes in order to achieve Objective 3.c

Goal 4: Expand research and interdisciplinary collaborations related to urban health disparities. (Sustaining innovation)

As previously noted, many of the activities of the SON contribute to the university's current strategic goal of becoming a leader by focusing the complex challenges of cities, as well as developing effective solutions. Furthermore, our contributions are consistent with the objectives of the Council for the Progress of Cities related to urban well-being and health disparities; as well as poverty and inequality in cities. SON faculty will continue to focus on research related to finding solutions to urban health problems by expanding current research in select areas and populations (e.g. cardiovascular disease, diabetes, HIV/AIDS, oncology, gerontology, medically fragile children, and grandparents raising grandchildren). As we recruit new faculty, we will seek those with an interest in urban health disparities to collaborate with existing faculty.

To address Goal 4, we have established three objectives:

Objective 4.a: Build upon prior SON success in research related to urban health disparities.

Given the research focus of our faculty on urban health disparities, we will seek further collaboration with colleagues across campus, and beyond. For instance, we will expand faculty involvement in the SPH's Partnership for Urban Health Research (PUHR). We will also expand current research collaborations with other units addressing health disparities including SPH's Center of Excellence on Health Disparity Research, Gerontology Institute, CEHD Adult Literacy Center, and AYSPS's Georgia Health Policy Center. Strengthening these collaborations will lead to increased interdisciplinary scholarly productivity, especially related to external funding.

Objective 4.b: Strengthen existing collaborations with healthcare facilities serving vulnerable, urban populations. Access to top quality healthcare facilities is essential to educating our students on urban health disparities, as well as other aspects of health. We currently work with approximately 300 clinical agencies in metropolitan Atlanta. While securing clinical placements for students has always been competitive, it has become increasingly more challenging to secure clinical sites where students can gain "hands-on" clinical experiences at both the undergraduate and graduate levels. In order to secure top quality placements, we will strengthen existing partnerships through expanded collaborations in teaching and research. To do so, we propose to initially focus on several strategic healthcare systems. For example, we have recently strengthened our relationship with the WellStar Health System through adjunct faculty appointments and the hiring of a key WellStar nursing administrator to teach a health policy

course for our undergraduate students. Strengthening relationships with strategic healthcare systems will also increase the likelihood of faculty gaining access to research participants. We will form an SON advisory board comprised of nurse leaders from key healthcare facilities.

Objective 4.c: Expand faculty participation in global research related to urban health disparities and other urban health-related issues. We will expand our global initiatives by seeking Faculty International Partnership Engagement (FIPE) funding to establish global collaborations and conduct pilot studies. Two nursing faculty who recently received FIPE internal funding will establish global research agendas. For instance, Dr. Hires will seek to study health promotion and management of chronic illnesses with colleagues at the University of Kwa-Zulu Natal, as well as develop educational exchanges and joint courses for graduate students. Dr. Polovich will conduct comparative research on occupational exposures related to cancer treatment in the U.S. and Korea in collaboration with the SPH and Seoul National University College of Nursing.

Resources related to goal 4: The same resources (e.g. additional TT faculty, increased research support) described under Objectives 1.a. and 1.b. will help achieve Objectives 4.a, 4.b and 4.c. Also related to Objective 4.c, we will continue to seek funding from the university FIPE initiative for pilot work, as well as seek internal funding from the International Collaborative Urban Research grant program to develop global research opportunities related to urban health disparities. We will also work with OII to identify external funding sources to support the international work of faculty and students.

Implementation plan for goal 4. In years 1 to 4 of implementation, we will strengthen existing research partnerships related to urban health disparities with colleagues across campus, as well as develop new partnerships. On an annual basis, faculty will submit interdisciplinary grant proposals beginning no later than year 2. During the first three years, junior TT faculty will submit NIH training grants, while more senior faculty will submit NIH research grants related to urban health disparities. By year 2, we will establish an SON Advisory Board. During the first year, we will participate in the Global Partnership for Better Cities (GPBC) to identify collaborative global research opportunities. During years 1 and 2, we will seek external funding for global research initiatives.

ACADEMIC PROGRAM REVIEW

2017-2018

School of Nursing

Byrdine F. Lewis College of Nursing and Health Professions

Georgia State University

Team Report

Susan K Chase, EdD, RN, FNAP

Professor
College of Nursing
University of Central Florida
Orlando, FL

Susan J. Roberts, DNSc, ANP, FAAN

Professor
Bouve College of Health Sciences
School of Nursing
Northeastern University
Boston, Ma.

1. Contributions to the Discipline

a. To which subfields of the discipline does the department make the most significant scholarly, creative, or clinical contributions (as appropriate)?

The discipline of nursing includes research, teaching and practice in healthcare activities that minimize risk of illness, treat active processes and support restoration of highest level of function for humans across the lifespan. Georgia State University nursing faculty have particular strength in care of urban underserved populations. The program prepares practitioners of nursing at AD, BS, MS, DNP and researchers at the PhD level. The faculty who hold advanced practice nursing designation are active in maintaining their clinical practice, both to maintain their advanced credentialing, and to maintain currency for teaching. The department has developed a rich network of clinical partners in the community where teaching and research activities can occur.

b. To what extent are the faculty number and composition sufficient to support the research and educational missions of the department?

Faculty member composition is heavier in non-tenure track lines than tenure track lines. This will make it hard for research agenda to be met. Current faculty are teaching four courses per term. The clinical faculty as a group are producing 0.31 publications per year. They have the background and capacity to increase publication rate, but the workload of four courses per semester plus maintaining clinical practice for many results in no time to invest in writing or pursuing clinically based research or practice improvement.

Tenure track faculty are exceedingly successful in grant funding and in publication. They are particularly known for health of minority populations in the community, including elderly grandmothers caring for grandchildren, and minority caregivers for Alzheimer's disease patients.

Numbers of faculty will need to increase in order to support supervision of doctoral students in the DNP and PhD programs. The work of doctoral supervision needs consistent workload recognition on faculty assignments. There may be confusion about how this work is counted, but it does not sound consistent from the point of view of faculty.

c. Based on your knowledge of similar departments in the discipline, evaluate the overall strength of the department.

The school has real strength in a 50-year history in preparation of members of the discipline, and more recent success with grant funding. It has rich connections with clinical agencies throughout the Atlanta area and graduates are highly valued by practice partners. Students are well prepared and successful and repeatedly attribute their success to the investment of faculty in supporting their growth. The school is stronger than most in its teaching mission and consistent with high quality programs in meeting its research agenda.

3. Quality of the Department's Undergraduate and Graduate Programs

a. For each of the department's programs, evaluate the quality and currency of the curriculum in terms of disciplinary standards and trends.

BSN programs are academically challenging but highly valued by students. Graduate success is evident in high licensure pass rates. Recent curriculum changes have supported this increase in pass rate scoring. Students report strong levels of satisfaction in their curriculum and highly value the support of their faculty. Curricula are mapped to accreditation standards and are up to date.

Pass rates for graduate certification and licensing examinations reflect steady performance above the national average. The program has set targets higher than accreditation levels of success and have met on almost all marks for past three years. Data have led to program improvements that resulted in positive change.

The PhD program has leadership from tenure track faculty and is maintaining consistently strong enrollments and completion rates. Again, students value the support that faculty have provided them.

b. Evaluate the quality of both incoming and graduated students in the department's programs, relative to discipline-specific norms.

All programs, particularly the BSN, are sought out by students and admissions are competitive. The upper division curricula for the BSN is rigorous and requires students with both academic and personal skills in order to be successful. Applicants come from Georgia State "native" students, as well as Associates and other Bachelor's degree programs. The large pool students admitted by the university who indicate preference as "Pre-nursing" students need advisement and support to be prepared to meet admission standards. Advisement support for this group has increased in recent years to support good choices in prerequisite courses and a realistic view of their chances for admission and success in nursing. From a variety of sources, the program review team heard dissatisfaction with recent changes in the selection of the nursing major class groups. One issue relates to controlling the mix of applicants accepted and the use of analytic predictors of success to control aspects of the admission process. Assuming that all parties value admitting the best qualified candidates for the rigorous nursing program which supports timely completion and licensure examination success, increased listening and cooperation may support resolving some of these issues. Nursing faculty and administration point out the success of the model that was in place before in terms of completion and exam score passing. They note that with changes in admission policies, there is now a shrinking pool of nursing applicants and a higher need to support students for academic success.

Master's program enrollment, graduation and, if appropriate, certification success are all strong. There are a number of specialty tracks for NP preparation that have few students. These are being considered for closure to focus on the strong Family Nurse Practitioner track. The Leadership track is growing and other non-NP tracks have the potential for adding students without opening many if any new courses. To support MSN enrollment, they may be considered. The non-NP tracks required fewer faculty and clinical resources to be successful. Master's prepared students who are in advanced practice nursing tracks exceed national averages on certification examinations. The MSN program is clearly strong.

The DNP program for Post Master's students is growing and the first BSN to DNP students are in the pipeline. Certification success will be tracked when the first classes finish.

PhD students value highly the support and research training that they receive in their program. Graduates have active research careers and are taking positions in academic as well as practice settings.

c. Based on your professional experience, are the enrollment, retention, and graduation rates appropriate? If not, what changes might the department make to improve them?

Completion rates for undergraduate students include consideration of Pre-nursing students who have not yet been admitted to the school and for whom faculty or staff have limited access. GSU students who have not been admitted to the nursing major need advisement for efficient completion of pre-requisite course and admission tests. The School of Nursing does not have the goal or capacity, because of clinical practice setting access limitations, to prepare all the pre-nursing students as BSN nurses. Alternate educational pathways need to be communicated to students, and realistic communication about student likelihood of admission to the BSN needs to be available. Anecdotally, potential applicants either choose or are encouraged to change educational goals, which may be reducing the numbers of applicants to the BSN. SON faculty need to remain the decision makers for BSN enrollment given the success of the program. Completion rates are strong, particularly due to the alternate pathways available, which offer fast and slow track preparation options.

Overall, MSN completion rates are high, although enrollment in some tracks is low and these are being phased out. Completion rates have been above the school's target of 90%. MSN and DNP curricula are being adjusted for preparation of nurse practitioners with an eventual shift to DNP only preparation for nurse practitioners. This plan will support a gradual increase in numbers of DNP students needing supervision to complete programs, but will eventually also result in decreased MSN degrees.

Likewise, the PhD program is robust given the number of tenure track faculty able to teach PhD students. Completion rates are admirable, given that essentially all graduate students in nursing are working.

d. Are there appropriate resources and support structures for the department's educational programs?

Transition to DNP preparation for NP students will require faculty supervision of a greatly increased number of DNP projects. This will require more faculty with appropriate preparation to manage the load. Space continues to be a need particularly in the area of room scheduling.

The SON is a leader in the university for limited seat access programs. Most of these require some seat time, but not on a weekly basis. It seems that the room scheduling process for the university has not kept pace with the fast growth of limited seat access programs. For an urban university, limited seat access programs should be a top priority, as they allow growth in student numbers without overburdening classroom space. The management of the room resources likely needs a more sophisticated system that can accommodate multiple courses "sharing" the same room space over the semester. If the central university system cannot handle complex requests, then a block of rooms could be designated for SON use and the faculty can work out how many lie classes are scheduled and when.

e. Evaluate the potential for growth of the department's graduate programs.

The School of Nursing has capacity to grow in MSN, DNP and PhD programs. As discussed above, the MSN will maintain tracks for the preparation of nurse practitioners for several years as the Post BSN

DNP track is now underway. There is still a market for both of these options. As more students move into DNP preparation, the MSN numbers will decrease. The Leadership MSN track has the potential to grow, particularly by recruiting within partner institutions regionally. As a completely online track, however, it could recruit nationally. Its unique curriculum that includes informatics content could be marketed and provide a competitive edge for the track. Additional online MSN tracks are possible to be developed with minimal effort, such as a Nurse Educator track.

The DNP will grow as it becomes the single pathway for nurse practitioner preparation. Access to clinical facilities for NP practice courses as well as for practice based projects required for the DNP degree may be a limiting factor. The need for faculty support for completion of these projects will also limit growth without the addition of additional faculty, however, the high ratio of non-tenure track to tenure track faculty, does provide many who are prepared to lead DNP projects. The transition from MSN to DNP preparation for nurse practitioners will result in increased student credit hour production even if degree numbers remains stable.

The PhD program may be at capacity given the relatively few tenure track faculty in the school. Filling empty positions will help this, but more faculty may be necessary to support PhD student growth.

4. Quality of the Department's Research Culture

a. Based on your knowledge of the discipline, what is your assessment of the quality of the department's faculty?

SON faculty are well prepared and productive. The two different tracks for faculty (tenure and tenure-track) sets up a large difference between expectation and supports for the two groups. Greater scholarly productivity could be expected with a lower course load and with consistent recognition of the workload of doctoral, particularly DNP, advisement.

Faculty are well prepared to carry on research activities and are funded in important areas. Student value the chance to participate in research activities with faculty.

b. From a disciplinary perspective, what is your assessment of the research areas in which the department is already strong, and areas with the potential for further growth?

The faculty are strong in funding related to underserved urban population and an assortment of common health concerns such as diabetes and stroke risk. Diversity of the faculty is a strength both for educational and research programs.

c. What is your assessment of the support structures for faculty and student research (e.g., grantwriting support, travel grants, laboratories, student funding, administrative support, etc.)?

The faculty would benefit from a more focused research center with data management, statistical consultation, grant management, submission, writing and librarian support among other roles. There needs to be stronger administrative support for grant review, travel. Focused Research Fellowships that are competitive and open to all ranked faculty would enhance preparation for grant submissions. Research supports are college wide and with only two staff, there is need for more well-developed research structure. Faculty note an absence of access to clinically related resources such as spaces for

clinical laboratory specimen collection and analysis. Given that the college as a whole has a number of clinical programs, this would possibly benefit multiple research programs.

The development of support for further endowed chairs that have resources to support the development of research trajectories.

d. Do you have any recommendations for improvements in the department's research culture, productivity, and results?

Use the multidisciplinary strength both in and outside the college. For example, the School of Public Health could collaborate with biostatistics. The overall college could support the research culture by offering stronger support through the Research Office. For example, competitors have research offices that contain, data managers, statisticians, librarians, separate staff for pre and post award work related to grant submissions. All schools and programs in the college could share in supporting these changes to the Research Office. Publicize programs such as a research fellowship for faculty who are preparing major grants. This could reduce the teaching load temporarily to support pilot work and further development of grants.

Support the development of a passion for research with undergraduate honors programs that engage them with active research projects.

Continue to participate in faculty cluster development either with existing faculty cross colleges and programs or by joint hiring of new faculty for specific target areas.

Continue to seek endowment support for designated Faculty Chairs for the school and college.

Develop support for PhD students to be full time students with funding so that they can participate in research and complete the degree in a shorter time.

5. Goals

a. Are the goals the department has outlined in its self-study appropriate for the unit?

Yes. Similar schools are engaged in similar activities. An additional goal for SON is to hold a successful search for a Nursing Associate Dean (or some other title) to head up the nursing program. In addition to research skills, strong experience with administration is desirable in potential candidates.

Recruitment of leadership for the school is necessary over the next year. The size and breath of activities of the school would warrant a change from an Associate Dean to a Dean of Nursing. This change would increase the chances of recruiting a leader of the stature that the institution require, particularly given the shortage of candidates for such positions in Nursing.

b. Are they in accord with disciplinary trends?

Yes. Schools with quality BSN programs are encouraging student to consider graduate school earlier rather than later. Many programs are moving from MSN to DNP preparation of advanced practice nurses. Innovations in PhD delivery and programming are happening in many settings.

c. Are the priorities reasonable?

Yes. They are expected. Research is no longer the activity of a few faculty. It permeates most programs at all degree levels and across faculty lines.

d. Are the resource needs realistic?

As more Student Credit Hours are produced it is entirely appropriate to expect addition resources to the school from the state and the university. Investment in the research infrastructure will result in increased funding from grant sources.

e. Are any changes or additions warranted?

See list below

6. Summary and Recommendations

a. Summarize the department's major strengths and challenges.

The department's main strengths are its commitments to increasing the health of person both locally and globally who disadvantaged with regard to healthcare resources. This commitment is enacted through preparing health care providers across all degree programs in nursing and also by testing models of care delivery and its improvement, and by developing new knowledge regarding care of underserved populations. It has particular strength in the diversity of its faculty and students. This may be an advantage for several funding sources.

The faculty are a strength due to their commitment to student success with innovative modes of instruction and personal connection to students in and out of classroom settings. Another strength is the result of longstanding programs, which result in partnership in community health delivery systems.

b. List your recommendations.

First of all the team offers its thanks for the gracious hospitality, the full access to all aspects of academic and research life and for the students who gave their time to provide information about programs they clearly highly value. Our recommendations come from a combination of expressed hopes, a very few areas of dissatisfaction and knowledge of trends in similar institutions.

1. Active search for next school of nursing leader must be a priority. This will support recruitment of faculty. Consider again a change in the name to Associate Dean of the College and Dean of the School of Nursing. This change will increase the chances of recruitment of a leader who is qualified to lead a school with the range of programs and activities that is present at GSU.
2. Explore clinical partnerships that provide research support to agencies with research access also to faculty. Invite professionals in partner institutions to teach part time in the school. Further development of the DNP program will benefit from taking advantage of practice partners in the community.
3. Develop a fully serviced research office. See details above. Increasing research productivity will attract other research faculty and support current faculty award of tenure and promotion. It will provide a context for student development and training.
4. Strengthen advisement staff to support prenursing and BSN students. At the same time allow nursing faculty to choose students who are likely to be successful in completing programs.

5. Engage in scholarship of teaching and learning related to learning success for first generation or educationally disadvantaged students. Georgia State is already successful. Analyze and share the success strategies in place.
6. Clarify access to classrooms for nursing courses that meet with reduced seat time. Authorize access that the school can manage to support multiple courses using the same classroom.
7. Reshaping the MSN program after NP preparation moves to DNP will free up resources for more programs that have minimal clinical content and will increase degree production to offset loss of NP students at MSN level.
8. Recognize the work of faculty who are chairing DNP and PhD student activities outside of formal courses. This work needs much attention to support students in timely completion of projects and dissertations.
9. Have scholarship expectations for all doctoral prepared faculty and reduce course load of NTT faculty to support scholarship development. Training Grants offer faculty and staff support. They should be pursued.
10. Take advantage of interdisciplinary college partners for research, practice settings and international projects. This includes the cluster hire efforts.
11. Name a leader for Honors Student programming with course release to engage in marketing, supporting and leading projects.

**Report of the Academic Program Review Committee
For the School of Nursing FY2015–FY2017
APRC approved April 24, 2018**

Overview. The School of Nursing (SON), in the Byrdine F. Lewis College of Nursing and Health Professionals (CNHP), contributes to the healthcare of urban under-served populations through faculty research, teaching, and practice. During the review period, SON had an annual average of 6.33 tenured/tenure-track (T/TT) and 34.33 full-time non-TT (NTT) faculty members with part-time instructors (PTIs) with ~600 students equally distributed in graduate and undergraduate programs. The SON offers four degrees: Bachelor of Science (BS), Master of Science (MS), Doctorate of Philosophy (PhD) and Doctorate of Nursing Practice (DNP). Faculty scholarly contributions have been impactful as evidenced by multiple achievement awards from national societies and relatively high citation rates. Student success is evidenced by graduation rates and licensure pass rates that consistently exceed national averages. SON MS program rankings in U.S. News and World Report rose over the review period from 146 to 112 out of 292. The initial ranking for the new DNP program was 181 out of 303.

Quality and productivity of research. SON faculty received \$2.22M in external research support and \$44K from competitive intramural grants. According to data provided by the unit, T/TT (NTT) faculty published an annual average of 2.3 (0.29) peer-reviewed articles in high quality nursing and interdisciplinary journals. In addition, T/TT (NTT) faculty published an annual average of 0.58 (0.03) non-peer reviewed articles. Faculty members are engaged in local, national and international collaborations and partnerships and in professional service; their influence on clinical practice is nationally recognized. The external reviewers noted that faculty numbers and composition are not adequate for sustaining SON's research mission.

Quality and productivity of teaching. The number of freshman entering the CNHP that identify as pre-nursing students was 285, but only 144 students can enroll in the BSN program annually. This results in a highly competitive BSN admissions process. The mean grade point average (GPA) and the average score on the standardized Test of Essential Academic Skills (TEAS) for students admitted into the nursing program was 3.8 and 85.44%, respectively. National averages for the latter were 70% (Appendix). A new admissions policy appears to be admitting a higher proportion of students needing support for academic success (Self Study, p. 28). External reviewers noted significant dissatisfaction with recent changes to the undergraduate program admission policies from multiple sources. The average number enrolled in the BSNC (Registered Nurse to BS completion program) per year was 22. SON majors were 87% female but ethnically diverse: 44% African American, 26% White, 19% Asian, and 11% Other. An average of 134 nursing degrees (BS+BSNC) were conferred each year between 2015-2017. Student survey results indicated general satisfaction with the program.

Between 2015-2017 yearly averages of 6929 upper and 3289 lower level undergraduate credit hours were taught. Undergraduate student learning outcomes (SLOs) were measured using a variety of classroom and clinical assignments, clinical rotation activities, and National Council Licensure Exam (NCLEX) results. All targets were met except the pass rate on the NCLEX. The assessment of learning outcomes led to re-evaluation of and changes to course exams, clinical course lab activities, and faculty training. In addition, final clinical practicum courses were taught by an SON faculty member instead of a clinical agency preceptor. As a result, all SLO targets were subsequently met in 2017.

Average annual MS, PhD and DNP enrollments were 242, 23 and 15, respectively. Enrollments by gender and race were similar to the undergraduate program. Average yearly admission GRE Verbal/Quantitative percentiles were 46/31 with mean GPA of 3.29. An average of 83 MS, 4 PhD and 6 DNP degrees were conferred each year. The average time to degree was 6 and 2.3 years for the PhD and DNP, respectively. According to survey results, current students and alumni are satisfied with the programs.

The annual average of graduate credit hours was 5,072. SLOs for the MS program were met. SLOs for

the post-master's certificate program identified a need for improvement in national certification exam pass rates. In response, course administrators now alert academic advisors about students that are at risk for failing a course and students are encouraged to improve study habits, work with the university counselling and testing center to improve test taking skills, and meet with their instructors. Student writing was identified as an area needing improvement in the PhD program, and appropriate strategies were incorporated into the program. All objectives were met for the DNP program.

Overall Viability of the Unit

Viability of the undergraduate program. The undergraduate enrollment and credit hours taught were stable over the review period. The new RN to BS on-line degree expanded the undergraduate program to a larger audience. The yearly average junior 6-year retention (48%) and graduation (46%) rates were relatively stable. On average, 7 students per year engaged in study abroad. There were approximately 100 Honors students in the department, but the undergraduate program currently does not have Honors courses or faculty fellows. Many clinical facilities require a student faculty ratio of 6:1 for undergraduate students, and 47 PTIs are utilized for undergraduate clinical instruction. The external reviewers noted a university-level problem with the management of room resources for limited seat access programs (e.g., hybrid and online courses) for undergraduate and graduate programs.

Viability of the graduate program. In accordance with national trends, enrollment in the DNP program increased by 82% over the period of the review (from 11 to 20 students) while enrollments in the MS and PhD programs decreased by approximately 13% (from 255 to 233 students) and 23% (from 27 to 21 students), respectively. Employment rates after graduation were 100% (Self Study, p.10). There are a number of nurse practitioner (NP) specialty tracks in the MS program that are under-enrolled. The external reviewers noted that as the DNP program grows, the MS program will significantly shrink in NP tracks, but that the completely online, non-practical MS leadership track has the potential to grow and that additional non-practical online tracks, such as a Nurse Educator track, should be developed to stabilize MS program enrollment. They also note that the growth of the DNP will be limited by current access to clinical facilities and faculty numbers. Reviewers noted that the PhD program is handicapped by a lack of T/TT faculty and the length of time to graduate, and suggest the program is at capacity. The reviewers also commented on the need for workload recognition for supervision of doctoral students.

Unit goals

1. Strengthen scholarly productivity by expanding the number of T/TT faculty and external funding.
2. Expand and further strengthen the PhD and DNP programs.
3. Enhance the undergraduate learning experience.
4. Expand research and interdisciplinary collaborations related to urban health disparities.

External review team recommendations

1. Teaching: Engage in more clinical partnerships and hire PTIs from partner institutions; strengthen undergraduate advisement staff; review the new undergraduate admission policy; develop the undergraduate honors program; reshape the MS and DNP programs in parallel.
2. Research: Develop a fully serviced research office, hire a Dean for the SON, hire TT faculty; recognize doctoral student advisement as part of the faculty workload; use existing interdisciplinary college partners and participate in cluster hires.

Consistency of goals and recommendations with University Strategic Plan

APRC believes the goals and recommendations discussed above are consistent with and supportive of the GSU Strategic Plan.