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Systematic Plan of Evaluation Part II: Assessment of Program Outcomes

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ABSTRACT

As an accrediting agency recognized by the U.S. Department of Education (USDE) and the Council for Higher Education Accreditation (CHEA), the Accreditation Commission for Education in Nursing (ACEN) has established Accreditation Standards and Criteria for the evaluation of nursing programs, including the evaluation of outcomes. This article focuses on the essential components and processes for systematic evaluation of program outcomes, including licensure examination pass rate, program completion rate, and job placement rate.

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Introduction

This article is the second in a two-part series discussing the assessment of nursing program outcomes. The assessment of outcomes for a nursing program is a major component of the 2017 ACEN Standards and Criteria, specifically Standard 6 Outcomes. A program's compliance with Standard 6 Outcomes is an essential measure of the program's quality. These outcomes demonstrate to communities of interest that the program provides quality education preparing the graduates to work in the profession of nursing. Faculty members of quality nursing programs participate in regular assessment of these outcomes to identify areas for program improvement. For ACEN-accredited programs or those seeking ACEN accreditation, this assessment requires the development and utilization of a written systematic plan of evaluation that includes the assessment details of each end-of-program student learning outcome as well as each program outcome. Part I of this article focused on the assessment of the end-of-program student learning outcomes, which are the knowledge, skills, or behaviors that the students should be able to demonstrate upon completion of the nursing program. The focus of Part II is the assessment of the program outcomes, including licensure examination pass rate, program completion rate, and job placement rate.

For a program to demonstrate compliance with Standard 6 Outcomes, the faculty must include the aforementioned program

outcomes in the systematic plan of evaluation. As a summary of the assessment of outcomes, the faculty should select appropriate assessment methods and then establish specific, measurable expected levels of achievement for each program outcome that are consistent with the assessment method and will result in meaningful data about the outcome. Faculty must also determine the frequency with which they collect, trend, and analyze these data to inform program decision-making. The plan should include documentation of this analysis and the decisions made based on the analysis of data.

This procedure for program assessment should sound familiar to nursing faculty, since it follows the nursing process. In many regards, the systematic plan of evaluation is simply a nursing care plan, but in this case, the "patient" is the nursing program. Just as a "patient" has better outcomes when the care plan is consistently utilized, the faculty can take better care of their nursing program by using a systematic plan of evaluation. The collection and analysis of data documented in a program's systematic plan of evaluation will assist faculty in making decisions about targeted strategies for improvement, when needed. Equally important in this process is documenting these actions and evaluations in the systematic plan. The Criteria for Standard 6 provide guidelines for the evidence of this faculty-driven process, and the written systematic plan of evaluation provides a record of these efforts. Finally, just as a nursing care plan should involve ongoing evaluation and revision as needed, the systematic plan of evaluation should be viewed as a document that demonstrates continual assessment and evaluation of outcomes with revisions as needed to ensure that the program's evaluation process is as effective and current as possible, and that student success is facilitated by the faculty as well as the strategies implemented.

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For nursing programs pursuing initial accreditation with the ACEN, including those that may not yet have graduates, the faculty must still develop a systematic plan of evaluation related to the end-of-program student learning outcomes and the program outcomes during the Candidacy process. Newly established programs in Candidacy must begin collecting outcomes data from the time in which Candidacy is achieved. By developing the plan in advance, the faculty are able to begin collecting and analyzing the data with the initial cohort. For nursing programs that have been in existence and are pursuing Candidacy, several years of outcomes data are often available to include in the plan, even though the data available may be incomplete as required by Standard 6.

Graduates' Achievement on the Licensure Examination (Criterion 6.2)

The first required program outcome included in the systematic plan of evaluation is licensure examination pass rate. "Licensure is the process by which a governmental agency gives affirmation to the public that the individuals engaged in an occupation or profession have minimal education, qualifications, and competence necessary to practice in a safe manner" (ACEN Accreditation Manual, Glossary, p. 3). One of the primary goals of pre-licensure nursing programs throughout the United States is to prepare students to successfully pass the licensure examination on the first attempt. While nursing educators understand that, at times, extenuating circumstances prevent graduates from being successful on their first attempt, the percentage of graduates who are successful initially is a reflection of the quality of a nursing program in preparing students for entry into professional nursing practice.

Graduates of ACEN-accredited nursing programs at all levels (practical, diploma, associate, and baccalaureate) historically have performed better on the licensure examination than graduates from a non-ACEN-accredited nursing program. On average, the licensure examination pass rates for ACEN-accredited programs are 1–6% higher than the national average for associate degree graduates (See Table 1 and Fig. 1).

Using the 2017 ACEN Standards and Criteria, "the program's most recent annual licensure examination pass rate must be at least 80% for all first-time test-takers during the same 12-month period" (ACEN Accreditation Manual, 2017 Standards and Criteria, Associate, p. 6). Nursing programs are no longer reviewed on a three-year mean. The rationale for this change in the 2017 Criteria came after a review of the requirements for licensure examination pass rates for all state regulatory agencies, such as the state boards of nursing. The review demonstrated that most states have an established minimum licensure examination pass rate for the graduates of pre-licensure nursing programs within the state. State requirements for registered nursing licensure examination pass rates range from 75–85%, with the majority of states requiring the registered nursing programs' licensure examination pass rates to be at or above 80%.

The National Council for State Boards of Nursing (NCSBN) provides the national licensure examination pass rate data to state

regulatory agencies that oversee pre-licensure nursing programs. These data are based upon first-time test-takers and repeat test-takers as well as whether the individuals were U.S. educated or internationally educated (e.g., NCLEX Fact Sheet as well as NCLEX Statistics from (National Council of State Boards of Nursing, 2017a, 2017b)). The NCSBN reports include disaggregated registered nursing licensure examination pass rates by program type (e.g., associate, diploma, and baccalaureate) as well as the aggregated rate for all program types. The majority of state regulatory agencies provide nursing programs with the annual licensure examination pass rate on first-time test-takers, while some states may include subsequent attempts in the calculation of the annual licensure examination pass rate. Failure for a nursing program to maintain the licensure examination pass rate at the required level for the state may result in sanctions being placed on nursing programs by the state regulatory agency.

To demonstrate compliance with the ACEN Criterion 6.2, the program's annual licensure examination pass rate for first time test-takers should be aggregated for the program as a whole during the same 12-month period as reported by the state regulatory agency. It is important to note that state regulatory agencies utilize different reporting timeframes, such as October 1st through September 30th or January 1st through December 31st. The faculty should consider these timeframes in determining which 12-month period is utilized in the systematic plan of evaluation, since the program must report the same licensure examination data for the same 12-month period.

Collecting the aggregated data is only one component of the overall process of assessing the annual licensure examination pass rate. The systematic plan of evaluation must include a minimum of the three most recent years of licensure examination pass rates for the overall program as well as the disaggregated data. Nursing faculty should also review disaggregated data for a holistic analysis – when applicable, disaggregated data should include dates of completion (e.g., May versus December graduates), program options (e.g., pre-licensure versus LPN-to-RN; day versus evening/weekend), and location(s). The purpose in requiring disaggregated data is to analyze potential variables that may be affecting the annual licensure examination pass rate reported by the regulatory agency. The majority of state regulatory agencies provide nursing programs within the state with program-specific data regarding the graduates from that program; the frequency of when this information is provided can vary by state. Currently, the ACEN is aware of some states that do not provide individual graduate data, which could inhibit a program's ability to disaggregate its data.

Equally important to disaggregating these data is the analysis and decisions made based on the data. The faculty may need to implement strategies to improve the licensure examination pass rate or to maintain the current pass rate. Disaggregated data can assist faculty in making decisions specific to the factors which contribute to a lower aggregated licensure examination pass rate such as implementing a change at a specific location, implementing a change in a specific option, or implementing a change for a specific admission timeframe. The trend observed for the aggregated and disaggregated licensure examination pass rates must be considered holistically during the three most recent years. Faculty should ask whether the aggregated and disaggregated licensure examination pass rates are trending up, trending down, or remaining the same. Faculty may also elect to set an expected level of achievement higher than 80% based upon state requirements and/or historical data from the program.

Finally, the systematic plan of evaluation should provide evidence of the actions taken based on the collection and analysis of these data. Documentation of the overall review process in the systematic plan of evaluation is essential and follows the adage "If it was not charted, then it was not done."

Table 1
Reported NCLEX-RN® Licensure Examination Pass Rates.

Associate	2012	2013	2014	2015	2016
NCSBN Reported For First-Time, U.S. Educated Candidates	89.32%	81.43%	79.26%	82.00%	81.68%
ACEN-Accredited Programs, First-Time Examination Takers	90.79%	87.86%	84.99%	85.87%	87.46%

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