



Office of the Acting Vice President  
For Academic Affairs

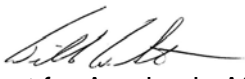
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## MEMORANDUM

**TO:** Dr. Marcella Griggs  
Chair, School of Nursing

**FROM:** Wilbur W. Stanton   
Acting Vice President for Academic Affairs

**SUBJECT:** Undergraduate Nursing Program Review

**DATE:** 21 August 05

**COPY:** Dr. Paul Sale, Chair of the Academic Program Review Committee  
Academic Program Review Committee Members  
Penelope W. Kyle, President  
Dr. Karma Castleberry, Dean, Waldron College of Health and Human Services

### Introduction

Academic program review is designed to assure regular examination of the University's curricula and academic structure and guide recommendations for improving academic quality. In addition, the process guides the effective allocation of resources, encourages continuous faculty and program development, and provides a rationale for making decisions about maintaining, enhancing, reconfiguring, or phasing out programs as required by the State Council of Higher Education for Virginia and/or as indicated through other analyses and by other criteria. Further, the Program Review process provides a tool for working with departments and academic programs to implement the University's Strategic Plan. For the process to be fully effective, departments and programs must commit themselves to following through after the initial self-study and analysis by responding to the recommendations and/or required actions of the Academic Program Review Committee (APRC), the appropriate dean, and the Vice President for Academic Affairs.

During the 2004-2005 academic year, the APRC and the academic programs under review worked with program review criteria that were approved in April 2003. I commend the Academic Program Review Committee for the diligent, thoughtful review of academic programs and for the

report detailing its study and recommendations. Moreover, I commend each of the academic programs that undertook the self-study required to develop and present reports that allowed the APRC to complete its work.

This memorandum completes the first stage of the Academic Program Review process. Included in this memorandum are the APRC's specific program recommendations for the Nursing Program. Also included are the APRC's overall recommendations.

### **Observations Pertaining to All Programs in General**

I have several general observations that come from the reading of all the program review materials:

1. Programs were encouraged to work with the QEP implementation team in the preparation of this year's reports. Those that did so had superior documentation compared to those that did not work with the team. We need to work together to ensure that programs clearly report results of the implementation of the program's Quality Enhancement Plan. Outcomes should be reported in measurable terms and changes made based upon those outcomes should be noted in the program review reports (see Quality Enhancement Plan Template column "Evidence of Improvements"). To that end, I have asked Ms. Bethany Bodo, in her role as Director of Academic Assessment, to provide, in the form of a fictitious department report, how outcomes can be reported and utilized to enhance programs. When this document has been created, I will make it available to all programs.
2. We need to continue efforts to collect alumni data. For example, helpful information may include alumni employment data, satisfaction with the program, and recommendations for improvement. This information is burdensome for individual programs to collect and maintain. Therefore, I am working with the Division of Institutional Research to enhance University coordination with programs and thus facilitate centralization of the data for program use during review processes. The APRC committee recommended that this information be gathered in possibly 1, 3, and 5 year intervals. While this would be robust and useful for program enhancement, the ability for the university to implement this will be dependent upon faculty workloads and the capacity for Institutional Research to design, gather, analyze, and disseminate resulting data. At a minimum, however, this must be part of every program review cycle meaning that alumni data must be collected once every five years as part of the self-study.
3. Finally, programs continue to make good cases for faculty and staff needs. It will remain increasingly important in a continuing environment of constrained resources that Radford University use the academic program review process to contribute to the determination of how to most effectively deploy available resources. We will continue to use the state's rubric (Schedule M) as a major determinant of workload expectations, but this metric alone cannot fully capture the uniqueness of a program and its centrality or contribution to the mission of the University. During the next academic year, I will work with the Council of Deans to explore a more inclusive set of workload criteria while retaining the state's workload principles.

## Observations for the Nursing Program

The following observations, recommendations, and conclusions are based on my review of APRC's analysis and Program Review Report, the self-study of the Undergraduate Nursing Program submitted by the School of Nursing, and the comments and recommendations submitted by Dean Castleberry.

It should be noted at the outset that the QEP Implementation Plan submitted by the School of Nursing as part of its program review materials was exceptional. The School has clearly developed a thorough plan to even more extensively engage students who are already among the most engaged on the RU campus.

The Undergraduate Nursing Program has made both a significant and positive contribution to the Waldron College of Health and Human Services and to the University as a whole. The Program is strong as evidenced by

- a marked increase in lower division (pre-nursing) majors, from 197 students in Fall 2000, to 391 students in Fall 2004;
- being nationally accredited with no compliance concerns (granted full accreditation in 2004 through 2014);
- being fully approved by the Virginia State Board of Nursing through 2008;
- graduation rates (82%) in a highly-demanding program;
- employment rates (nearly 100% in nursing positions); and
- accomplishments of graduates are outstanding

I appreciated the extent to which the Undergraduate Nursing Program addressed the recommendations resulting from the previous program review. As reported by the APRC, the School addressed recommendations from the previous Program Review as follows:

- a) Space needs for faculty and the program were addressed with the completion and occupation of Waldron Hall on RU's campus and with the move to Higher Education Center for the Roanoke program.
- b) The curriculum was revised to reflect the recommendations made. It is now community based and emphasizes experiential learning to a greater extent.
- c) Course content in the curriculum has been mapped.

Other strengths noted by the APRC and Dean Castleberry included:

1. The Program's faculty hold appropriate credentials, are active in the various facets of the program, engage in clinical practice, and maintain a reasonable professional activity.

2. Only highly qualified candidates are admitted to the program.
3. The School of Nursing has carefully and thoroughly set, operationalized and assessed learning goals and objectives. These goals and objectives are continuously reviewed and revised.
4. The program provides meaningful clinical and service learning experience for its students.
5. Upper division students are served in one of two sites—the Radford University campus or the Roanoke Higher Education Center—so that students and communities are better served with educational opportunities and the added value of nursing students placed in a variety of community agencies.
6. Throughout the curriculum, students are actively engaged in a community-based curriculum that reflects current health care trends and emphasizes supervised clinical experiences (855 hours per graduate) in a variety of settings.
7. Faculty members are active, committed practitioners, scholars, and educators who initiate ventures that serve the community and provide innovative opportunities for the education of professional nurses. Over \$3 million in grant funds obtained by faculty (since 2000) have enriched the School and College.

As noted by the Committee, there are four areas that raised some concern and questions, and I concur with these.

1. Between 2001 and 2004 there has been an increase of almost 100% in the number of pre-nursing majors. The program has increased the number of students admitted each year from 80 to 100, which is the program's current capacity. However, the percentage of qualified applicants that can be accepted has been reduced, with about as many qualified applicants being rejected as are accepted.
2. Schedule M shows that the total number faculty needed (assuming the use of adjuncts to teach 20% of student credit hours generated) is 20.74. There are currently 18 full-time faculty as reported by the School. This represents a lower number than were on staff in 2000.
3. The School continues to support multiple sections of NURS 111, a service course used to meet general education requirements. This accounts for 27% of the credit hours offered by the School. These courses are taught only by adjunct faculty, which is a major cause of only 64% of total student credit hours generated in the program being taught by full-time faculty.
4. Some critical teaching and staff positions are supported through grants, with no apparent provision for continuing such positions upon expiration of the grants.
5. NCLEX-RN pass rates for graduates are lower than the expectations set by the School.

## Recommendations and Conclusions for the Undergraduate Nursing Program

The APRC made several recommendations.

1. The Committee noted that enrollment demands have stretched faculty resources and recommend that current enrollment and staffing issues must be addressed. I concur. The Undergraduate Nursing Program is encouraged to develop a long-term staffing plan based on "Schedule M" credit hour production data. The percentage of student credit hours generated by part-time faculty should be decreased. The primary area where this needs to be addressed is in NURS 111. The percentage of credit hours generated by adjuncts in upper level nursing courses should be tracked separately. Last year I worked with Dean Castleberry to begin to address the need for more faculty in Nursing. In addition, I have authorized Dean Castleberry to open a search for additional faculty members to begin in the fall of 2006. Demand for nursing education will likely continue to increase during the next decade. I encourage you to monitor the trends carefully, and to work with your dean to proactively address faculty and related staffing needs.
2. Continue to develop and implement plans to increase NCLEX-RN pass rates.
3. Continue to seek additional funding from the state to support increased enrollment to meet current and future employment needs within the state.

I commend the APRC for making recommendations whose intentions are clearly to strengthen the undergraduate program in the School of Nursing.

It is essential that that faculty in the Undergraduate Nursing Program immediately undertake the work required to secure these improvements. In doing so, the School Director and the faculty members in the Undergraduate Nursing Program should work collaboratively and persistently with the Dean of the College to make the changes and improvements that are recommended.

Following the Program Review Guidelines, "the Department Chair or Program Coordinator will submit a report to the Vice President for Academic Affairs and appropriate Dean(s) on or before April 1 [2006], indicating how the program has addressed recommendations of the Academic Program Review Committee and any recommendations from the Dean(s) or Vice President for Academic Affairs."

This document should include findings and results from the initial implementation of the Quality Enhancement Plan (QEP) and an updated QEP table (see page 3 of the Program Review Guidelines) that includes a completed "evidence of improvement" column. Programs are expected to discuss methodologies utilized and any challenges encountered during the process. They should also elaborate on ways in which they utilized the findings for program improvement and note programmatic decisions that have been made as a result of the implementation. All programs should document the QEP implementation process and keep this information, including any pertinent data, on file and accessible.

In conclusion, the Undergraduate Nursing Program is strong and well exceeds SCHEV guidelines for enrollment and graduation of students. It is then recommended that RU report to SCHEV that the Undergraduate Nursing Program (BSN) should be maintained.