

CNM ANNUAL STUDENT LEARNING ASSESSMENT REPORT

Due to the Student Academic Assessment Committee by October 15



PART 1: REPORT INFORMATION

| Report Year and Contact Information | | | |
|-------------------------------------|----------------------------|---------------------|----------------------|
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| Academic Year | Contact Person | CNM Email | CNM Office Extension |

| Subject of this Report |
|--------------------------------|
| HWPS--NURS_AAS--Nursing Degree |

PART 2: CONTEXT IN WHICH THE ASSESSMENT TOOK PLACE

| Program/Area Highlights and Successes (Wherever applicable, include course completion rates, job placement outcomes, and licensing examination pass rates. See the program information dashboard at https://livecnm.sharepoint.com/sites/Dashboards/SitePages/Program%20Information%20Dashboard.aspx (access restricted to CNM employees) and other reports at https://www.cnm.edu/depts/opie .) | | | |
|---|---|---------------------------------------|-----------------------------|
| Licensure Exam Pass rates: | | | |
| For the past three years and measured each calendar year, graduate performance on the NCLEX-RN nursing licensure exam has been steadily rising. Below, please review the CNM first time licensure pass rates with n values. The national average is also included in parentheses (data from NCSBN.org). | | | |
| 2018, all AASN grads: 88.52% n=244 | 2018 AASN only: 86.83%, n=205, (85.11%) | 2018 AASN/BSN: 97.44%, n=39, (91.57%) | |
| 2017, all AASN grads: 85.54%, n=249 | 2017 AASN only: 83.72%, n=215, (84.24%) | 2017 AASN/BSN: 97.06%, n=34, (90.04%) | |
| 2016, all AASN grads: 84.42%, n=199 | 2016 AASN only: 80.77%, n=156, (81.68%) | 2016 AASN/BSN: 96.67%, n=43, (87.80%) | |
| Program Completion: | | | |
| Program completion in the nursing program is also impressive, but on a decline over the past three years. Data measurement is for 150% of program length, measured from the term where the first nursing course is taken after successful application through coordinated program entry. | | | |
| AY 2017-18 AASN aggregate: 78.22% | 63 | AY 2017-18 AASN only: 78.02% | AY 2017-18 AASN/BSN: 85.42% |
| AY 2016-17 AASN aggregate: 82.89% | | AY 2016-17 AASN only: 84.39% | AY 2016-17 AASN/BSN: 73.91% |
| AY 2015-16 AASN aggregate: 89.59% | | AY 2015-16 AASN only: 89.02% | AY 2015-16 AASN/BSN: 93.18% |

In comparison, drawing data from the 2017 Accreditation Commission for Education of Nurses (ACEN) report to constituents, the average program completion for ACEN accredited associate degree nursing programs is 73.69%. While we are above the national average, the program is looking at multiple factors that may impact student success in hopes of improving program retention rates. Unfortunately, the ACEN no longer reports an aggregate benchmark for retention.

While these numbers are in decline, other factors exist that impact these numbers. First off, non-competitive entry has been in place for five (5) years. The culture has shifted from highly competitive ranked entry to a more open process where 95% of students are accepted into the program on their first or second attempt. This has significantly decreased the number of unused credits upon graduation and has improved diversity such that the student population mirrors that of the Tri-County area that CNM serves. An expected consequence of a more open entry process is that students are not as emotionally and intellectually committed to the program as they previously were. This is evident in the first two terms of the nursing program. For AY 17-18, the program had 72 students leave the program: 58 (18.4% of initial cohort) succumbed to academic failure, 13 (4.1%) voluntarily left the program for personal reasons, and three (3) students died.

The following courses experience the highest attrition rates by level: L1 = NRSB 1010 (NMNC 1110), L2 = NRSB 1530 (NMNC 1230), L3 = NRSB 2010 (NMNC 2310), and L4 = NRSB 2515 (NMNC 2435). Looking at next level success between these courses reflects the following retention patterns using aggregated enrollment data that includes AY 15/16, 16/17, and 17/18:

| Term | Enrollment | Passed | Pass Rate |
|---------|------------|--------|-----------|
| Level 1 | 916 | 886 | 96.72% |
| Level 2 | 922 | 778 | 84.38% |
| Level 3 | 729 | 720 | 98.77% |
| Level 4 | 721 | 709 | 98.34% |

The above data reflects that the second semester of the program, Level 2, experiences the highest levels of attrition but that students that successfully complete the courses enjoy high levels of program completion. The program continues to implement process improvement strategies to identify high risk students early, to bring those students into faculty office hours, and to connect them with the resources they need in order to be successful.

Graduate Employment:

Much has been learned in the past several months regarding graduate employment data collection methods at CNM. Our previous low numbers from 2017 (33.59%) and 2016 (55.00%) were measured beginning at eight (8) weeks after graduation. Nursing students are encouraged to sit for the licensure examination between eight (8) and 16 weeks after graduation. Most of the clinical facilities in the tri-county area will only hire new graduates after licensure has been secured. So the numbers from the previous years reflected tremendously strong employment data considering the narrow timeline. Programmatic accreditation through the Accreditation Commission for Education of Nurses (ACEN) requires job placement data be collected within one (1) year of graduation, with most programs reporting in the six (6) to 12 month timeframe measured from the date of graduation.

The Organizational Planning and Institutional Effectiveness (OPIE) department at CNM has recently made significant changes to the data collection process. The AY 2017/18 data measurement began at four (4) months after graduation. The response rate is 100% (259/259 students) and reflects that 89% of these respondents is currently employed and 86% of these are employed in New Mexico. The program will continue to work closely with OPIE to ensure that the data collected is of the highest quality and satisfies the program and governing organization's needs.

Changes Implemented During the Past Year in Support of Student Learning

The greatest change has been targeted on problem solving the misunderstood graduate employment rate. The program director has met face to face with every graduating cohort during their capstone seminar week to discuss the importance of seeking nursing employment before or immediately following graduation. Most employers are willing to provide a provisional offer for employment contingent on licensure within a certain timeframe. CNM Job Connect presents regularly at the Student Nurse Association (SNA) meetings as well as also during the capstone seminar. Local employers are connected to students through job fairs and the weekly SNA meetings. Now understanding that the 2017 and 2016 data reflected student job placement between 2-4 months, those data reflect good outcomes. However, in order to present data that is meaningful, it needs to be consistently measured and reported. This is an ongoing process between nursing and the OPIE department.

PART 3: REPORT ON ASSESSMENT OF STUDENT LEARNING

| Assessment Method | Type of Assessment Tool | Population or Course(s) Assessed | Graduate Learning Outcome(s) Assessed | Mastery Level (E.g., "Minimum score of 3 on a rubric scaled 0-4" or "Minimum score of 75%") | Targeted % Achieving Mastery | Outcome |
|-------------------|-------------------------|--|---|--|------------------------------|----------------|
| HESI E2 Exit Exam | Direct & External | NRSG 2899 (NMNC 2445 in new numbering) | GLO – 1 Integrate diverse patient values, beliefs, and attitudes into plan of care for patients with chronic illness | At least 75% of students will achieve HESI Score of 825 or higher in GLO-1 specific categories | 63% | Target not met |
| HESI E2 Exit Exam | Direct & External | NRSG 2899 (NMNC 2445 in new numbering) | GLO – 2 Interpret and analyze factors and system contributions that impact the quality and safety of nursing practice | At least 75% of students will achieve HESI Score of 825 or higher in GLO-2 specific categories | 65% | Target not met |
| HESI E2 Exit Exam | Direct & External | NRSG 2899 (NMNC 2445 in new numbering) | GLO – 3 Integrate an evidence-based approach in the delivery and evaluation of nursing care to acutely ill patients across the lifespan | At least 75% of students will achieve HESI Score of 825 or higher in GLO-3 specific categories | 61% | Target not met |
| HESI E2 Exit Exam | Direct & External | NRSG 2899 (NMNC 2445 in new numbering) | GLO – 4 Evaluate the use of policies and procedures within the acute care setting | At least 75% of students will achieve HESI Score of 825 or higher in GLO-4 specific categories | 69% | Target not met |

| | | | | | | |
|--|-------------------|---|---|--|--------------------|-----------------|
| HESI E2 Exit Exam | Direct & External | NRSG 2899 (NMNC 2445 in new numbering) | GLO – 5 Effectively collaborate with the healthcare team in the delivery of patient care | At least 75% of students will achieve HESI Score of 825 or higher in GLO-5 specific categories | 65% | Target not met |
| HESI E2 Exit Exam | Direct & External | NRSG 2899 (NMNC 2445 in new numbering) | GLO – 6 Integrate use of appropriate technology for the delivery of nursing care to acutely ill patients | At least 65% of students will achieve HESI Score of 825 or higher in GLO-6 specific categories (lower threshold due to limited number of available questions in applicable categories). | 65% | Target met |
| Final summative clinical evaluation | Direct & Internal | NRSG 2515 (NMNC 2435 in new numbering) | GLOs 1-6 as listed above | 95% of students will attain grades of satisfactory or better in all categories of the final summative evaluation for the program. | 98% | Target met |
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Summary of Assessment Findings

Benchmarking for the HESI E2-Exit exam is set nationally at 850. In-depth, multi-year, aggregate analysis of CNM students reflects that 825 represents the score needed to predict licensure exam success. This test is not high-stakes; rather it is factored in as an exam score using the composite score (reflected as a percentage) rather than the HESI score in the gradebook. From the previous calendar year, the number of students achieving the target score of 825 has dropped by SLO by an average of 14.7%, with gaps ranging from 4%-23% by category. This assessment is conducted in the capstone class, NRSG 2899 (NMNC 2545).

Final summative evaluation requires students to achieve competence in all six (6) SLOs in their last clinical course, NRSG 2515 (NMNC 2535) prior to the capstone experience. Failure to attain minimal competence results in course failure. For 2018, 98% of students achieved this milestone which is unchanged from 2017. The summative evaluation is completed by the clinical instructor from direct observation of clinical interactions and written work. Students and instructors provide examples of how the objectives were met, commiserate to graduating level expectations.

Interpretation of Assessment Findings

The program utilizes HESI standardized testing throughout the program. Students overall do well, achieving average cohort performance scores typically in the upper 800s and low 900s. However, for the Exit exam specifically, the instructors have verbalized an increasing concern that students are waiting until the last day to test and are spending less time testing. Some students admitted to squeezing in time to test during working hours (during a lunch break) or between clinical capstone shifts which provides suboptimal testing experiences.

Action Plan in Support of Student Learning (Describe changes to be made that are based at least in part on the assessment interpretation. If the assessment did not yield useful information, describe changes to be made in the assessment methodology and/or criteria.)

Anecdotal evidence suggests that students are very good at calculating the minimum number of points needed to pass any given class and have determined that they can take the Exit exam less seriously without significant impact to the grade. Strategies were implemented in Spring of 2019 that should positively impact scores and student performance, incentivizing remediation resources by making them for a grade and moving the initial Exit exam to NRSG 2515 (NMNC 2435) rather than waiting until the capstone course for the first attempt. The 2019 data should reflect a positive impact on these scores.

Please select all of the following that characterize the types of changes described in the above action plan:

- | | | |
|---|---|--|
| <input type="checkbox"/> Assessment criteria revision | <input checked="" type="checkbox"/> Assessment methodology revision | <input type="checkbox"/> Assignment revision |
| <input type="checkbox"/> Budgetary reallocation | <input type="checkbox"/> Change in teaching approach | <input type="checkbox"/> Course content revision |
| <input type="checkbox"/> Curricular Revision | <input type="checkbox"/> Faculty training/development | <input checked="" type="checkbox"/> Process revision |

Recommendations, Proposals, and/or Funding Requests

Budget Needed

No impact on budget.

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PART 4: REMAINING YEARS IN CURRENT ASSESSMENT CYCLE PLAN (including any revisions) – **OR -- UPCOMING ASSESSMENT CYCLE PLAN** (if this was the final year)

| Years of Full Cycle | Next Year's Assessment Focus (Describe how the next planned assessment is expected to provide information that can be used toward improving student learning.) |
|----------------------------|---|
| Ongoing | Evaluate interventions implemented in 2019. Continue to work with OPIE to improve the validity and reliability of employment data collected. |

| Graduate Learning Outcomes to Be Assessed | Years in which Assessment Is Planned | Population/Courses to Be Assessed | Planned Assessment Approach |
|---|--------------------------------------|---|--|
| GLO – 1 Integrate diverse patient values, beliefs, and attitudes into plan of care for patients with chronic illness | Annually | Students enrolled in NMNC 2435 and 2445 | Same as described above as this assessment plan meets all ACEN accreditation outcomes evaluation requirements. |
| GLO – 2 Interpret and analyze factors and system contributions that impact the quality and safety of nursing practice | Annually | Students enrolled in NMNC 2435 and 2445 | Same as described above as this assessment plan meets all ACEN accreditation outcomes evaluation requirements. |
| GLO – 3 Integrate an evidence-based approach in the delivery and evaluation of nursing care to acutely ill patients across the lifespan | Annually | Students enrolled in NMNC 2435 and 2445 | Same as described above as this assessment plan meets all ACEN accreditation outcomes evaluation requirements. |
| GLO – 4 Evaluate the use of policies and procedures within the acute care setting | Annually | Students enrolled in NMNC 2435 and 2445 | Same as described above as this assessment plan meets all ACEN accreditation outcomes evaluation requirements. |
| GLO – 5 Effectively collaborate with the healthcare team in the delivery of patient care | Annually | Students enrolled in NMNC 2435 and 2445 | Same as described above as this assessment plan meets all ACEN accreditation outcomes evaluation requirements. |
| GLO – 6 Integrate use of appropriate technology for the delivery of nursing care to acutely ill patients | Annually | Students enrolled in NMNC 2435 and 2445 | Same as described above as this assessment plan meets all ACEN accreditation outcomes evaluation requirements. GLO – 2 Interpret and analyze factors and system contributions that impact the quality and safety of nursing practice |
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