**NEW**

PROGRAM PROPOSAL

WEBER STATE UNIVERSITY

**Submission Date:**

February 16, 2015

**Submitter Name and Phone:**

Susan Thornock (801)626-6134

Kathy Culliton (435)730-4466

Monte L. Roberts (801)792-6204

**College:**

Dumke College of Health Professions

**Department**:

School of Nursing

**Program Title:**

MSN Family Nurse Practitioner Program

**1. Complete Program Description**

Family nurse practitioners provide primary health and illness care to individual patients across the lifespan, families, and communities. The Weber State University, School of Nursing Family Nurse Practitioner program prepares registered nurses to diagnose and manage acute and chronic health problems, prescribe medications, plan treatments, and teach patients to promote and maintain health.

**2. Purpose of Degree**

*Summarize why the institution should offer this degree and the expected outcomes.*

Career opportunities for family nurse practitioners are expected to increase across the country. There has been a decrease nationally in interest in family medicine, which has led to a decrease in the number of primary care physicians, or general practice physicians graduating from medical schools. This fact coupled with health care reform (more people with insurance) has increased the need and opportunities for family nurse practitioners. Family nurse practitioners work in a multitude of community settings such as clinics, private practice, schools businesses, and specialty offices, to increase access for patients of all ages. Qualified local BSN prepared registered nurses may become nurse practitioners in their own community.

**3. Institutional Readiness**

*Describe how the existing administrative structures support the proposed program and identify new organizational structures that may be needed to deliver the program. Describe how the proposed program will or will not impact the delivery of either undergraduate or lower-division education.*

The School of Nursing has an existing MSN program. The current program has a core curriculum with Nurse Educator and Nurse Administrator tracks. Although the Family Nurse Practitioner program is a new program it is aligned with selected courses in the current MSN core coursework and will continue to align with the MSN core coursework. The current MSN core courses are foundational for advanced nursing education and are taught by faculty experts. The additional coursework required\* as core for the MSN Family Nurse Practitioner Program is being developed in concert with the current MSN coursework to ensure that all accreditation mandates are met for all programs.

Clinical placement recruitment, educating precepting physicians and nurse practitioners, monitoring student performance, legal logistics, and evaluating the effectiveness of placements is beyond the usual clinical placement and preceptor placement of students in the School of Nursing. These tasks may require a 50% administrative role.

In anticipation and preparation for these placement challenges, Intermountain, as part of the support that they have expressed for this program, has offered local and rural placements for students.

\*ACEN Accreditation Standards

**4. Faculty**

*Identify the need for additional faculty required in each of the first five years of the program. State the level of preparedness of current faculty and the level of preparedness that will be needed by the fifth year. Clearly state the proportion of regular full-time, tenure track faculty to part-time and non-tenure contract faculty. Describe the faculty development procedures that will support this program. See Requirements in the Institutional Readiness Section.*

The School of Nursing currently has 12 faculty prepared with either a PhD or DNP. Four faculty members are Family Nurse Practitioners, 3 are DNPs and one will complete the DNP in May. Two faculty members are Pediatric Nurse Practitioners, one with a DNP and one with a MS. One faculty member is a Gerontological Nurse Practitioner with MS preparation. These faculty resources along with community support, demonstrate that the School of Nursing has the resources to support this program.

The current model of teaching assignments in the School of Nursing is not level specific. Faculty are assigned teaching responsibilities based on their expertise and level of education. Faculty teaching in the MSN program also teach courses in the BSN and ADN programs. Currently, 8 faculty teach in the MSN Program. In 2014, fall and spring semesters, faculty assignments varied

1 fulltime faculty member taught 4 MSN courses 12 credits= 16 credit workload or 66% time

1 part time faculty member taught 4 MSN courses 12 credits= 16 credit workload or 66% time

2 full time faculty member taught 3 MSN courses 9 credits= 12 credit workload or 50% time

2 full time faculty member taught 2 MSN courses 6 credits= 8 credit workload or 33% time

1 full time faculty and one adjunct faculty team taught a course 1.5 credits=2 credits workload or 8% time

The proposed MSN Family Nurse Practitioner Program will require:

**First Semester**

One full time equivalent for three- 3 credit courses

**Second Semester**

One full time equivalent for three- 3 credit courses

One half time equivalent for assessment and skills lab

**Third Semester**

2/3 time equivalent for 2 courses = 5 credits

One half time equivalent to manage 2 clinical courses

**Fourth Semester**

2/3 time equivalent for 2 courses = 5 credits

One half time equivalent to manage 2 clinical courses

One half time equivalent to manage the skills lab

**Fifth Semester**

1/3 time equivalent for one- 3 credit course

One half time equivalent to manage clinical practicum

Through semester 3, 4, and 5. Students will identify a nursing faculty member to chair their project committee. The faculty members are paid a stipend for working with the student. There would be a faculty member assigned to the 4 credit MSN Project Development course over the 3 semesters.

Over the 5 semesters of the program, the maximum faculty load added to the School of Nursing would be 2 FTE (this would include the MSN Project load 3rd and 4th semester).

The proposal is that this program will admit students after the first group graduates so no overlapping of 1st and 2nd cohorts will occur. Projecting out 5 years: if the cohorts are sequential and not overlapping the faculty needs would not change. Changes in the MSN core requirements\* or the decision to accept a cohort before the other has graduated would alter this projection.

\*ACEN Accreditation Standards

**5. Staff**

*List all additional staff needed to support the program in each of the first five years; e.g., administrative, secretarial, clerical, laboratory aides/instructors, advisors.*

MSN secretarial staff would have to increase by 25-50% to manage the increased students and clinical placements.

Hourly staff would need to be budgeted to support the 2nd and 4th semester labs along with open labs for practice. Projected 10-20 hours a week.

**6. Library and Information Resources**

*Describe library resources required to offer the proposed program. Does the institution currently have the needed library resources?*

Current access to Medline, CINAHL, Access Pro and Eric through Stewart Library will be the major resource for this program.

**7. Admission Requirements**

*List admission requirements specific to the proposed program.*

The Family Nurse Practitioner program will adhere to the current admission policies of the MSN program the following reflect the current approved policies.

Policies Related to MSN Program Admission

Family Nurse Practitioner Program Admission Policies

Family Nurse Practitioner Program candidates must meet the general admission requirements of the University as outlined in the current Weber State University Catalog (http://weber.edu/admissions/). In addition, Family Nurse Practitioner Program candidates must meet the specific admission requirements of the School of Nursing MSN Family Nurse Practitioner Program. Below are the URLs for admissions, applications and checklists.

http://www.weber.edu/Nursing/degrees\_and\_programs/master/admissions.html

**Application Process**

The MSN Family Nurse Practitioner Program utilizes an online application process.

It is critical that all parts of the application process be completed and submitted. Incomplete applications will not be considered. Please go to this page: Applications & Checklists to access the information related to the application process.

MSN applications are reviewed by the School of Nursing Admissions and Advancement Committee.

**Deadlines**

Applications become available in October the year prior to the program start date*.* For the Family Nurse Practitioner Program applications will be available October 2015 for Fall 2016 admission. The Family Nurse Practitioner program is planned to complete one cohort before starting another cohort. Applications will be ready October 2017 for Fall 2018 admission.

Priority application deadline is March 1st of each academic year

**Checklist for Applicants:**

http://www.weber.edu/Nursing/degrees\_and\_programs/master/checklist.html

Approximately ten to twelve positions are available for each program of study. Applicants will be ranked according to a selection point system established by the School of Nursing Admissions and Advancement Committee. Applicant ranking will include: GPA, Advanced Writing course completed, work experience as an RN, recommendations, vita/resume, writing ability, personal interview (not all applicants may be interviewed), veteran status, preceptor for the WSU School of Nursing Associate Degree (RN) program during the last year (March 1 to March 1) and potential for scholarly work/leadership.

**Application Requirements:**

1] Cumulative GPA of 3.0 or higher (on a 4.0 scale): includes all college level course work.

Transfer courses must be from a “Regionally Accredited College or University that transfers to Weber State University.”

2] Earned BS Degree with a major in nursing from an accredited baccalaureate program (ACEN or CCNE) Please note: Students who speak English as a second language must have a Minimum TOEFL score of 600.

3] Current Utah unencumbered license to practice as a registered nurse or eligible to obtain licensure without restrictions to practice as a registered nurse in Utah.

4] Preferred one year of current work experience as an RN. The graduate admissions committee will evaluate applicants work experience on an individual basis.

5] Submission of all documents, letters of recommendation, curriculum vitae/resume, goal statement per request in the application packet.

6] Completion of an Advanced College Writing course with a “C” or better grade. Strongly encouraged to be done by the Priority Application deadline or during the summer prior to starting the program. (At WSU English 3210 or English 3100. Must gain approval from the MSN Enrollment Director or the MSN Director for approval of courses taken at other schools - other than the ones listed on the “transfer guide” before taking a course. Applicants that have an advanced writing course completed by the March 1 “Priority Application” deadline will be awarded extra points in the applicant ranking process.

Applicants will be ranked according to a selection point system established by the School of Nursing Admissions and Advancement Committee.

Applicant ranking will include: GPA, Advanced Writing course completed, work experience as an RN, recommendations, vita/resume, writing ability, personal interview, minority, veteran status, preceptor for the WSU School of Nursing Associate Degree (RN) program during the last year (March 1 to March 1) and potential for scholarly work/leadership.

The application process is competitive.

Students seeking admission to the MSN Family Nurse Practitioner Program apply to both the University and the MSN Program. Application and MSN Program brochures are available electronically as well as through the SON Student Admissions office. Program information is provided by the SON Enrollment Director who is available by phone, e-mail, or face-to-face on the WSU Campus, located in the Marriott Allied Health Building.

The MSN Family Nurse Practitioner Program faculty and staff implement admission and progression policies and procedures to ensure that size and academic qualifications of the MSN Family Nurse Practitioner Program student cohort are consistent with both the SON resources and program outcomes. WSU School of Nursing Family Nurse Practitioner program has selective admissions and therefore has the flexibility to maintain admission standards deemed acceptable and necessary for the achievement of program outcomes. Admission to the MSN Program is competitive.

**Selection Notification**

Students are notified of acceptance into the program by May 1 for Fall admission.

**8. Student Advisement**

*Describe the advising procedure for students in the proposed program.*

**ADVISEMENT POLICY & PROCESS**

1. Students will be assigned a graduate program advisor upon entry into the program. The MSN Department secretary will provide the name of the assigned advisor to students.

2. Students will access the graduation evaluation through the e-Weber portal, student area. Guidelines are provided to access personal degree evaluation and/or transcripts

3. Students will print two copies of the Degree Evaluation from Cat tracks. They will keep one copy for their personal records and will give one copy to their academic advisor. Students will sign the copy that they will give to their advisor.

4. On or before week three of the semester, students will email their advisor stating that they have completed the review and detailing any identified problems. Each student will make an appointment to meet with an advisor on campus or by phone each semester.

5. When attending the assigned face-to-face class meeting on campus each semester, students will leave a signed copy of their graduation evaluation form with their advisor. Students may also give the advisement form to the department secretary (room 420b). Faculty will compare the completed form to the records in the student file. The faculty advisor will then contact students by phone or email regarding any issues.

6. For any consultation, students should make an appointment to meet in person, by phone, or virtual interview, with their advisor.

7. Students are strongly encouraged to complete a “Degree Evaluation” each semester until graduation.

8. The MSN student is ultimately responsible to ensure that all MSN program requirements are fulfilled.

**9. Justification for Graduation Standards and Number of Credits**

*Provide graduation standards. Provide justification if number of credits or clock hours exceeds 63 for AA or AS, 69 for AAS, 126 credit hours for BA or BS; and 36 beyond the baccalaureate for MS.*

Nurse Practitioner Education, like our current School of Nursing Programs, is accredited by Accreditation Commission for Education in Nursing (ACEN) (the other accreditation option is Commission on Collegiate Nursing Education, CCNE). Both accrediting bodies have worked with the Nurse Practitioner credentialing organizations, American Nurses Credentialing Center (ANCC) and American Academy of Nurse Practitioners (AANP), and the National Organization of Nurse Practitioner Faculty (NONPF) to set education standards that meet all of the criteria of these separate organizations.

The clinical hour requirement is very high with a minimum of 500 hours required. The average number of hours for Family Nurse Practitioner programs across the country varies but averages around 700 hours. Our program proposal has 660 clinical hours.

The program length is 5 semesters and 53 credit hours.

**10. External Review and Accreditation**

*Indicate whether any external consultants, either in- or out-of-state, were involved in the development of the proposed program, and describe the nature of that involvement. For a career and technical education program, list the members and describe the activities of the program advisory committee. Indicate any special professional accreditation which will be sought and how that accreditation will impact the program. Project a future date for a possible accreditation review; indicate how close the institution is to achieving the requirements, and what the costs will be to achieve them.*

We will be seeking accreditation by the Accreditation Commission for Education in Nursing (ACEN). Within the standards of this accrediting body, they will make a site visit for accreditation purposes the last semester of the first graduating class. This visit will be scheduled for spring semester 2018. The preparation for the planned accreditation visit has already started with the alignment of all aspect of the program development with the ACEN criteria for accreditation. The formal self-study will be submitted in the summer of 2017. The cost of the accreditation process and visit will depend on the number of reviewers and if the decision is made (by the School of Nursing) to have this accreditation visit encompass all of the MSN programs, or even the whole School of Nursing. Projection of $5,000-7,500 would be a conservative estimate of the cost of the accreditation process including an accreditation visit to just the review the Family Nurse Practitioner Program.

**11. Projected Enrollment**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Year | Student Headcount | # of Faculty | Student-to-Faculty Ratio | Accreditation Req’d Ratio |
| 1 | 12-15 | 2 FTE | 1:10 | 1:10 |
| 2 | 12-15 | 2 FTE | 1:10 | 1:10 |
| 3 | 12-15 | 2 FTE | 1:10 | 1:10 |
| 4 | 12-15 | 2 FTE | 1:10 | 1:10 |
| 5 | 12-15 | 2 FTE | 1:10 | 1:10 |

**12. Expansion of Existing Program**

*If the proposed program is an expansion or extension of an existing program, present enrollment trends by headcount and by student credit hours (if appropriate) produced in the current program for each of the past five years for each area of emphasis or concentration.*

**Need**

**13. Program Need**

*Clearly indicate why such a program should be initiated.*

Career opportunities for family nurse practitioners are expected to increase. Family nurse practitioners work in a multitude of community settings such as clinics, private practice, schools, businesses, and specialty offices, to increase access for patients of all ages. Qualified local BSN prepared registered nurses may become nurse practitioners in their own community.

**14. Labor Market Demand**

*Include local, state, and national data, and job placement information, the types of jobs graduates have obtained from similar programs. Indicate future impact on the program should market demand change.*

Career opportunities for family nurse practitioners are expected to increase. Family nurse practitioners work in a multitude of community settings such as clinics, private practice, schools, businesses, and specialty offices, to increase access for patients of all ages. Qualified local BSN prepared registered nurses may become nurse practitioners in their own community.

**15. Student Demand**

*Describe evidence of student interest and demand that supports potential program enrollment.*

Weber State University’s School of Nursing graduates 400+ BSN prepared registered nurses per year. Many of these students are seeking advanced degrees in nursing.

**16. Similar Programs**

*Are similar programs offered elsewhere in the state or Intermountain Region? If yes, cite justifications for why the Regents should approve another program. How does the proposed program differ from similar program(s)? Be specific.*

Currently the only masters prepared nurse practitioner programs are private universities.

**17. Collaboration with and Impact on Other USHE Institutions**

*Describe discussions with other USHE institutions that are already offering the program that have occurred regarding your institution’s intent to offer the proposed program. Include any collaborative efforts that may have been proposed. Analyze the impact that the new program would have on other USHE institutions.*

Weber State University Family Nurse Practitioner Program graduates would align with USHE MS-DNP degree program guidelines at the University of Utah, College of Nursing.

**18. Benefits**

*State how the institution and the USHE benefit by offering the proposed program.*

Weber State University’s Proposed Family Nurse Practitioner program provides more opportunity for placement of students seeking graduate level nursing education.

**19. Consistency with Institutional Mission**

*Explain how the program is consistent with and appropriate to the institution’s Regents’ approved mission, roles, and goals.*

Weber State University has a long and successful history of educating nurses to the level of community need.

**Program and Student Assessment**

*Program assessment and performance standards information, which is required for Regents’ review, will serve as information only during University Curriculum Committee review.*

**20. Program Assessment**

*State the goals for the program and the measures that will be used in the program assessment procedure to determine if goals are being met.*

**WSU SCHOOL OF NURSING COMPETENCIES**

The WSU School of Nursing has adopted the following competencies for its undergraduate and graduate programs. These competencies are adopted from the Quality and Safety Education for Nurses Initiative (QSEN). Under each competency is the MSN Core Competencies then the Family Nurse Practitioner Competencies.

**1. Patient-centered Care**

SON-Recognize the patient or designee as the source of control and full partner in providing compassionate and coordinated care based on respect for patient’s preferences, values, and needs.

MSN Core-Create and direct collaborative patient care environments that promote the development of nursing expertise that includes the patient perspective.

FNP- Patient-Direct primary patient care focused on the holistic needs of patients and families within communities across the lifespan.

**2. Teamwork and Collaboration**

SON-Function effectively within nursing and inter-professional teams, fostering open communication, mutual respect, and shared decision-making to achieve quality patient care.

MSN Core- Apply advanced communication strategies to support high functioning interdisciplinary teams that support high quality, safe patient care.

FNP-Collaborate with diverse health care providers to support best outcomes for patients and families.

**3. Evidence-based Practice**

SON- Integrate best current evidence with clinical expertise and patient/family preferences and values for delivery of optimal health care.

MSN Core- Evaluate available evidence, expert opinion, and patient preferences to determine best practice. Evaluate the feasibility and appropriate evaluation methods for planned EBP interventions.

FNP- Operationalizes practice guidelines supported by evidence.

**4. Quality Improvement**

SON- Use data to monitor the outcomes of care processes and use improvement methods to design and test changes to continuously improve the quality and safety of health care systems, including participating in healthcare policy.

MS Core- Develop policies and processes based on identification of best practice that improve the quality and safety of nursing care provided by health care systems.

FNP- Anticipate clinical variables and adjust practice to assure quality and safety.

**5. Safety**

SON- Minimize risk of harm to patients and providers through both system effectiveness and individual performance.

MSN Core- Incorporate patient safety principles into the development of comprehensive patient safety

goals and safety education for nurses.

FNP- Develop a culture of safety by incorporating national patient safety guidelines in advanced practice environments.

**6. Informatics**

SON- Use information and technology to communicate, manage knowledge, mitigate error, and support decision-making.

MSN Core- Formulate policies, processes, and/or educational plans that leverage information technology to optimize information management, reduce errors, and support clinical decision-making.

FNP- Use information technology to manage documentation, reduce error, support clinical decision-making, and improve health care delivery.

**Purpose for Systematically Evaluating the MSN Program**

Currently, the evaluation activities of the Master of Science in Nursing (MSN) faculty are undertaken for the purpose of continuous program improvement. This purpose is accomplished by: 1) ascertaining the extent to which the faculty, administrators, staff, and students / alumni are achieving the ACEN standards and criteria; 2) monitoring the program’s ability to support the achievement of both the program outcomes and student learning outcomes / competencies; 3) providing a mechanism for faculty, students, administrators, alumni, and employers to have input into the program; and, 4) to ensure a systematic and timely process for revisions of curriculum, educational processes, and operational processes.

The current School of Nursing and MSN-Systematic Plan for Evaluation (MSN-SPE) reflects, for each component of the ACEN standards and criteria, the expected level of achievement (ELA), frequency of assessment, assessment methods, results of the most recent academic year, and the program’s response and/or actions for program development / maintenance / revision for the upcoming academic year (MSN-SPE). Included in the SPE are the data related to program outcomes, program competencies and role specific MSN residency competencies which will be the practicum competencies for the Family Nurse Practitioner students.

The School of Nursing and the specific MSN-SPE is a living document shared with the SON Chair, MSN Program Director, School of Nursing faculty, and SON Curriculum and Evaluation committees; and through the SON Annual Report, shared with the nursing advisory board and the DCHP Dean.

**Current MSN Program Evaluation**

The purpose of the MSN Program evaluation process is to oversee the development and implementation of the MSN-SPE as well as review and participate in entire SON evaluation activities. All members of the MSN Program faculty team serve as contributors to the MSN Program evaluation process. Every monthly MSN faculty meeting has a section of time devoted to evaluation. The meetings include reports and updates from the SON Evaluation Committee, review of MSN program evaluation surveys and forms, and discussions on data returned to the program.

**Aggregation and Trending of Data Supports Program Decision-Making**

In support of the MSN-SPE assessment and program improvement processes, currently, the MSN Program faculty employs several evaluative processes. These include the administration of formal evaluation tools, the tracking and trending of program outcomes, the students’ final course grades as they progress through the program, the students’ achievement of the core and program competencies. These same processes will apply to the Family Nurse Practitioner program.

**Formal Evaluation Tools**

The administration of formal evaluation tools occurs during a two-week period at the end of each semester. These documents are available electronically and require a student password to access. Faculty do not receive the aggregated report of the quantitative and qualitative evaluation data until course grades have been posted. Using this aggregate data, the MSN faculty makes decisions relative to the program’s development, maintenance, and/or revision. The tools gather the following types of information:

* Student achievement of core program competencies
* The student achievement of the Nurse Administrator Track / Nurse Educator Track competencies .
* The students’ perceived effectiveness of the course
* The students’ perceived effectiveness of the course faculty
* The students’ perceived overall quality of the MSN Program curriculum to prepare the student to perform the advanced role of a nurse administrator or nurse educator.

Current tools used in the MSN program will be applied or adapted for use with the Family Nurse Practitioner program.

The current formal evaluation tools used throughout the MSN program of study are as follows:

* MSN Course Evaluation: Core courses and individual track
  + MSN Course Evaluation: Residency
* MSN Faculty Performance
  + MSN Faculty Performance
  + MSN Faculty Performance: Residency Handbook
* Residency Course Evaluation
  + Student Evaluation of Residency Preceptor
  + MSN Faculty Evaluation of Residency Preceptor
  + Residency Preceptor Evaluation of MSN Faculty
  + MSN 6400 Nurse Administrator Residency: Student Performance Evaluation
  + MSN 6700 Nurse Educator Residency: Student Performance Evaluation
* End of Program
  + Final Evaluation of MSN Nurse Administrator Program of Study
  + Final Evaluation of MSN Nurse Educator Program of Study
* MSN Program Alumni Survey six months post-graduation
* MSN Program Employer Satisfaction Survey 6-12 months post-graduation
  + Survey Monkey (established 2013)
  + Survey of Advisory Board (paper/pencil, established 2013)

All formal evaluation tools have been administered to the students and graduates. The data derived from these evaluation tools reflect that the students not only perceive that the MSN courses are supporting their achievement of the program’s learning outcomes / competencies, they judge the MSN faculty as being effective in facilitating their learning experience.

**Tracking and Trending of Final Course Grades**

The Family Nurse Practitioner program has been designed and the current MSN program curriculum and coursework to support the student achievement of the accreditation and certification standards. Upon completion of the existing MSN Nurse Educator and Administrator track curriculum, the successful student has demonstrated mastery of the knowledge and skills required to function in the advanced roles. The MSN faculty evaluate each student’s mastery of the course learning outcomes/competencies through a variety of learning strategies and associated evaluation methods. One metric that is considered is course grades. In order to advance in the MSN Program, the student must achieve, in each course, a minimum final grade of a B-minus. When the program was being developed, the faculty decided that a B- grade demonstrated above average work and that this would be the standard indicating that the student meets acceptable preparation for education and healthcare service. This is the standard grading policy throughout the SON. To date, all MSN students have earned a final course grade of a B-minus or higher. The Family Nurse Practitioner program will follow this same standard.

**Tracking and Trending of Student Satisfaction Outcomes**

The following two tables, 1 & 2, outline the current competencies associated with the Nurse Administrator and Nurse Educator program tracks for 2011-2012, and 2012-2013. These serve as examples of how the School of Nursing and the MSN Program evaluated competencies and outcomes and trend these over time. MSN *Core Competencies* (differentiated from the ADN and RN-BSN level competencies) and new role-specific track competencies, (educator and administrator), were developed by the MSN faculty in 2013, the Family Nurse Practitioner program role specific competencies have been developed and approved by the School of Nursing curriculum committee.

Table 1 **Student Achievement of Educator Track Competencies**

|  |  |  |
| --- | --- | --- |
| End of Program Survey | 2013  N=11 | 2012  N=10 |
| 1. Facilitate student learning in an interdisciplinary environment, across multiple settings and with diverse populations. | 4.40/5.0 | 4.6/5.0 |
| 2. Facilitate learner development and socialization into professional nursing. | 4.56/5.0 | 4.6/5.0 |
| 3. Apply educational theories and evidence-based concepts and strategies to facilitate student learning | 4.30/5.0 | 4.5/5.0 |
| 4. Design nursing curriculum that reflects contemporary healthcare trends and environment. | 4.20/5.0 | 4.2/5.0 |
| 3. Assess and evaluate program and student outcomes. | 4.44/5.0 | 4.6/5.0 |
| 6. Engage in continuous self-evaluation and role enhancement | 4.70/5.0 | 4.6/5.0 |
| 8. Function within the educational environment | 4.30/5.0 | 4.2/5.0 |
| 7. Engage in scholarly activities. | 4.30/5.0 | 4.6/5.0 |
| 5. Function as a professional change agent and leader | 4.50/5.0 | 4.6/5.0 |
| Average | **4.41** | **4.61** |

Table 2 **Student Achievement of Administrator Track Competencies**

|  |  |  |
| --- | --- | --- |
| End of Program Survey | 2013  N=9 | 2012  N=6 |
| 1. Perform a scholarly and reflective system-wide assessment of quality and effectiveness of nursing services, nursing practice, and the safe delivery of care. | 4.11 | 3.4 |
| 3. Seek ongoing professional development and quality improvement in advanced role. | 4.22 | 3.4 |
| 4. Apply leadership / management theories to analyze, interpret, and determine relevant problems and evidence-based solutions. | 3.89 | 3.4 |
| 5. Establish a professional practice environment that promotes desired professional and organizational outcomes within an interdisciplinary context. | 4.11 | 3.4 |
| 6. Develop, maintain, and evaluate organizational systems to facilitate planning, implementation, and evaluation of the delivery of safe and quality nursing care across the continuum. | 4.11 | 3.4 |
| 8. Facilitate ethical, legal, and evidence-based practices across multiple settings and with diverse populations. | 4.11 | 3.4 |
| 10. Facilitate the conduct of research and establishment of an evidence-based practice environment. | 4.0 | 3.4 |
| Average | **4.66** | **3.4** |

The revised competencies were introduced in 2013. Table 3, 4, and 5 shows these results.

Table 3 **Student Achievement of New Core Competencies 2014**

|  |  |  |
| --- | --- | --- |
| Core competencies | Educators  N=9  100% | Administrators  N=11  100% |
| 1. Patient-centered Care:  Competency Definition: Create and direct collaborative patient care environments that promote the development of nursing expertise that includes the patient perspective. | 4.78/5.0 | 5.0/5.0 |
| 2. Teamwork and Collaboration:  Competency Definition: Apply advanced communication strategies to support high-functioning interdisciplinary teams that support high quality, safe patient care. | 4.78/5.0 | 5.0/5.0 |
| 3. Evidence-based Practice:  Competency Definition: Evaluate available evidence, expert opinion, and patient preferences to determine best practice. Evaluate the feasibility and appropriate evaluation methods for planned EBP interventions. | 4.78/5.0 | 5.0/5.0 |
| 4. Quality Improvement:  Competency Definition: Promote development of policies and processes based on identification of best practice that improve the quality and safety of nursing care provided by health care. | 4.78/5.0 | 4.91/5.0 |
| 5. Patient Safety:  Competency Definition: Incorporate patient safety principles into the development of comprehensive patient safety goals and safety education for nurses. | 4.78/5.0 | 4.82/5.0 |
| 6. Informatics:  Competency Definition: Formulate policies, processes, and/or educational plans that leverage information technology to optimize information management, reduce errors, and support clinical decision-making. | 4.78/5.0 | 4.82/5.0 |

Table 4 **2014 MSN 6400 Administrator Core Competencies**

|  |  |  |  |
| --- | --- | --- | --- |
| **MSN 6400 Residency Evaluation** | | | |
| **Questions 7-12** | **Mean** | **ELA** | **N** |
| Patient-centered Care | 4.8 | 3.0 | 10 |
| Teamwork and Collaboration | 4.8 | 3.0 | 10 |
| Evidence-based Practice | 4.7 | 3.0 | 10 |
| Quality Improvement | 4.8 | 3.0 | 10 |
| Patient Safety | 4.7 | 3.0 | 10 |
| Informatics | 4.7 | 3.0 | 10 |

Table 5  **2014 MSN 6700 Educator Core Competencies**

|  |  |  |  |
| --- | --- | --- | --- |
| **MSN 6700 Residency Evaluation** | | | |
| **Questions 7-12** | **Mean** | **ELA** | **N** |
| Patient-centered Care | 4.75 | 3.0 | 8 |
| Teamwork and Collaboration | 4.88 | 3.0 | 8 |
| Evidence-based Practice | 4.78 | 3.0 | 9 |
| Quality Improvement | 4.78 | 3.0 | 9 |
| Patient Safety | 4.78 | 3.0 | 9 |
| Informatics | 4.78 | 3.0 | 9 |

Another example of aggregated data “ Overall effectiveness of the course to support achievement of course learning outcomes in MSN courses”, measured as a question on the End of Program (EOP) surveys demonstrates a high level of perceived achievement with all MSN courses as reported for each semester.

Table 6 **MSN Course Evaluations: Achievement of Course Learning Outcomes**

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| All MSN  Courses | Fall 2011 | | Spring 2012 | | Fall 2012 | | Spring 2013 | | Fall 2013 | | Spring 2014 | |
| **Combined score (CS)** | **Percent Response** | **CS** | **Percent**  **Response** | **CS** | **Percent**  **Response** | **CS** | **Percent**  **Response** | **CS** | **Percent**  **Response** | **CS** | **Percent**  **Response** |
| 5.0 | 73.6% | 5.0 | 73% | 4.49 | 94% | 4.34 | 99% | 4.80 | 84.8% | 4.54 | 100% |

Figure 1  **MSN Course Evaluation Graph: Achievement of Course Learning Outcomes**

**Summary of Criterion**

The MSN faculty are cognizant of the value of program evaluation and continue to adapt to changes in the SON that affect the MSN program and adopt innovative ways to evaluate those changes. The aggregation and trending of program data will continue to be a valuable source of program growth.

21. Expected Standards of Performance

*List the standards and competencies that the student will have met and achieved at the time of graduation. How or why were these standards and competencies chosen? Include formative and summative assessment measures you will use to determine student learning*.

WSU SCHOOL OF NURSING COMPETENCIES as outlined in question 20 address the standards set by the Accreditation Commission for Education in Nursing (ACEN) the Nurse Practitioner credentialing organizations, American Nurses Credentialing Center (ANCC) and American Academy of Nurse Practitioners (AANP), and the National Organization of Nurse Practitioner Faculty (NONPF).

The individual courses address these national competencies:

**Family Nurse Practitioner Program Competency Map**

| Competency Area | | NP Core Competencies | | Family/Across Lifespan  NP Competencies | |
| --- | --- | --- | --- | --- | --- |
| Scientific  Foundation  Competencies | | 1. Critically analyzes data and evidence for improving advanced nursing practice.  2. Integrates knowledge from the humanities and sciences within the context of nursing science.  3. Translates research and other forms of knowledge to improve practice processes and outcomes.  4. Develops new practice approaches based on the integration of research, theory, and practice knowledge. | |  | |
| Leadership  Competencies | | 1. Assumes complex and advanced leadership roles to initiate and guide change.  2. Provides leadership to foster collaboration with multiple stakeholders (e.g. patients, community, integrated health care teams, and policy makers) to improve health care.  3. Demonstrates leadership that uses critical and reflective thinking.  4. Advocates for improved access, quality and cost effective health care.  5. Advances practice through the development and implementation of innovations incorporating principles of change.  6. Communicates practice knowledge effectively, both orally and in writing.  7. Participates in professional organizations and activities that influence advanced practice nursing and/or health outcomes of a population focus. | | 1. Works with individuals of other professions to maintain a climate of mutual respect and shared values.  2. Engages diverse health care professionals who complement one's own professional expertise, as well as associated resources, to develop strategies to meet specific patient care needs.  3. Engages in continuous professional and interprofessional development to enhance team performance.  4. Assumes leadership in interprofessional groups to facilitate the development, implementation and evaluation of care provided in complex systems. | |
| Quality Competencies | | 1. Uses best available evidence to continuously improve quality of clinical practice. 2. Evaluates the relationships among access, cost, quality, and safety and their influence on health care. 3. Evaluates how organizational structure, care processes, financing, marketing and policy decisions impact the quality of health care. 4. Applies skills in peer review to promote a culture of excellence. 5. Anticipates variations in practice and is proactive in implementing interventions to ensure quality. | |  | |
| Practice Inquiry Competencies | | 1. Provides leadership in the translation of new knowledge into practice. 2. Generates knowledge from clinical practice to improve practice and patient outcomes. 3. Applies clinical investigative skills to improve health outcomes. 4. Leads practice inquiry, individually or in partnership with others. 5. Disseminates evidence from inquiry to diverse audiences using multiple modalities. 6. Analyzes clinical guidelines for individualized application into practice. 7. Collaborates in planning for transitions across the continuum of care. | |  | |
| Ethics  Competencies | | 1. Integrates ethical principles in decision making. 2. Evaluates the ethical consequences of decisions. 3. Applies ethically sound solutions to complex issues related to individuals, populations and systems of care. | |  | |
| Independent  Practice  Competencies | | 1. Functions as a licensed independent practitioner. 2. Demonstrates the highest level of accountability for professional practice. 3. Practices independently managing previously diagnosed and undiagnosed patients. 4. Provides the full spectrum of health care services to include health promotion, disease prevention, health protection, anticipatory guidance, counseling, disease management, palliative, and end-of-life care. 5. Uses advanced health assessment skills to differentiate between normal, variations of normal and abnormal findings. 6. Employs screening and diagnostic strategies in the development of diagnoses. 7. Prescribes medications within scope of practice. 8. Manages the health/illness status of patients and families over time. 9. Works to establish a relationship with the patient characterized by mutual respect, empathy, and collaboration. 10. b. Creates a climate of patient-centered care to include confidentiality, privacy, comfort, emotional support, mutual trust, and respect. 11. c. Incorporates the patient’s cultural and spiritual preferences, values, and beliefs into health care. 12. d. Preserves the patient’s control over decision making by negotiating a mutually acceptable plan of care. | | 1. Obtains and accurately documents a relevant health history for patients of all ages and in all phases of the individual and family life cycle using collateral information, as needed. 2. Performs and accurately documents appropriate comprehensive or symptom-focused physical examinations on patients of all ages (including developmental and behavioral screening, physical exam and mental health evaluations). 3. Identifies health and psychosocial risk factors of patients of all ages and families in all stages of the family life cycle. 4. Identifies and plans interventions to promote health with families at risk. 5. Assesses the impact of an acute and/or chronic illness or common injuries on the family as a whole. 6. Distinguishes between normal and abnormal change across the lifespan. 7. Assesses decision-making ability and consults and refers, appropriately. 8. Synthesizes data from a variety of sources to make clinical decisions regarding appropriate management, consultation, or referral. 9. Plans diagnostic strategies and makes appropriate use of diagnostic tools for screening and prevention, with consideration of the costs, risks, and benefits to individuals. 10. Formulates comprehensive differential diagnoses. 11. Manages common acute and chronic physical and mental illnesses, including acute exacerbations and injuries across the lifespan to minimize the development of complications, and promote function and quality of living. 12. Prescribes medications with knowledge of altered pharmacodynamics and pharmacokinetics with special populations, such as infants and children, pregnant and lactating women, and older adults. 13. Prescribes therapeutic devices. 14. Adapts interventions to meet the complex needs of individuals and families arising from aging, developmental/life transitions, co-morbities, psychosocial, and financial issues. 15. Assesses and promotes self-care in patients with disabilities. 16. Plans and orders palliative care and end-of life care, as appropriate. 17. Performs primary care procedures. 18. Uses knowledge of family theories and development stages to individualize care provided to individuals and families. 19. Facilitates family decision-making about health. 20. Analyzes the impact of aging and age-and disease-related changes in sensory/perceptual function, cognition, confidence with technology, and health literacy and numeracy on the ability and readiness to learn and tailor interventions accordingly. 21. Demonstrates knowledge of the similarities and differences in roles of various health professionals proving mental health services, e.g., psychotherapists, psychologist, psychiatric social worker, psychiatrist, and advanced practice psychiatric nurse. 22. Evaluates the impact of life transitions on the health/illness status of patients and the impact of health and illness on patients (individuals, families, and communities). 23. Applies principles of self-efficacy/empowerment in promoting behavior change. 24. Develops patient-appropriate educational materials that address the language and cultural beliefs of the patient. 25. Monitors specialized care coordination to enhance effectiveness of outcomes for individuals and families | |
|  | |
| Policy  Competencies | | 1. Demonstrates an understanding of the interdependence of policy and practice. 2. Advocates for ethical policies that promote access, equity, quality, and cost. 3. Analyzes ethical, legal, and social factors influencing policy development. 4. Contributes in the development of health policy. 5. Analyzes the implications of health policy across disciplines. 6. Evaluates the impact of globalization on health care policy development. | |  | |
| Health Delivery  System  Competencies | | 1. Applies knowledge of organizational practices and complex systems to improve health care delivery. 2. Affects health care change using broad based skills including negotiating, consensus-building, and partnering. 3. Minimizes risk to patients and providers at the individual and systems level. 4. Facilitates the development of health care systems that address the needs of culturally diverse populations, providers, and other stakeholders. 5. Disseminates evidence from inquiry to diverse audiences using multiple modalities. 6. Analyzes clinical guidelines for individualized application into practice. | |  | |
| Technology and  Information Literacy Competencies | | 1. Integrates appropriate technologies for knowledge management to improve health care. 2. Translates technical and scientific health information appropriate for various users’ needs. 3. Assesses the patient’s and caregiver’s educational needs to provide effective, personalized health care. 4. Coaches the patient and caregiver for positive behavioral change. 5. Demonstrates information literacy skills in complex decision making. 6. Contributes to the design of clinical information systems that promote safe, quality and cost effective care. 7. Uses technology systems that capture data on variables for the evaluation of nursing care. | |  | |

Population-Focused Nurse Practitioner Competencies Task Force (2013) Population-focused nurse practitioner competencies: Family/across the lifespan. Retrieved from the NONPF.ORG website navigate to Education and NP Competencies

<http://c.ymcdn.com/sites/www.nonpf.org/resource/resmgr/Competencies/CompilationPopFocusComps2013.pdf>

**Program Curriculum**

**22. All Program Courses**

*List all courses, including new courses, to be offered in the proposed program by prefix, number, title, and credit hours.*

|  |  |  |
| --- | --- | --- |
| **Course Prefix & Number** | **Title** | **Credit Hours** |
| **Course Courses** |  |  |
| Pre or Co-requisite | \*Pre- or Co-requisite Advanced College Writing | 3 credits either pre or in first two semesters |
| MSN 6100 | Research Methods | 3 |
| MSN 6120 | Research and Statistics | 3 |
| MSN 6180 | Improving Patient Care and Nursing Practice through Information Systems and Technology | 3 |
| MSN 6205 | Transition to Advanced Practice | 1 |
| MSN 6210 | Advanced Pathophysiology | 3 |
| MSN 6215 | Advanced Pharmacology | 3 |
| MSN 6220 | Physical Assessment and Diagnostic Reasoning | 3 |
| MSN 6225 | Adult Skills Practicum | 1 |
| MSN 6230 | Women's Health and Pediatric Skills Practicum | 2 |
| MSN 6235 | Advanced Practice Nursing: Adult (3) | 3 |
| MSN 6236 | Advanced Practice Nursing Clinical: Adult | 3 |
| MSN 6240 | Advanced Practice Nursing: Older Adult | 2 |
| MSN 6241 | Advanced Practice Nursing Clinical: Adult and Older Adult Clinical | 1 |
| MSN 6245 | Advanced Practice Nursing Newborn - Adolescent | 3 |
| MSN 6246 | Advanced Practice Nursing Clinical: Newborn-Adolescent | 2 |
| MSN 6250 | Advanced Practice Nursing: Women's Health | 2 |
| MSN 6251 | Advanced Practice Nursing Clinical: Women's Health | 1 |
| MSN 6255 | Complex Accountabilities of Advanced Nursing Practice | 3 |
| MSN 6260 | Advanced Practice Nursing Clinical Practicum | 4 |
| MSN 6800 | MSN Project Development and Implementation | 4 |
|  | **Sub-Total** | 53 |
|  | **Total Number of Credits** | 53 |

**23. New Courses to be Added in the Next Five Years**

*List all new courses to be developed in the next five years by prefix, number, title, and credit hours. Use the following format:*

Prefix & Number Title Credit Hours

MSN 6205 Transition to Advanced Practice 1

Course Description: This course is designed to present a foundation for understanding nursing theory and the relationship of theory and research to evidence based practice and conceptual models of advanced practice nursing. Pre-requisites admission to a MSN Family Nurse Practitioner Program

MSN 6210 Advanced Pathophysiology 3

Course Description: This course is a core graduate level course. This course is designed to teach the master level nursing and nurse practitioner student frequently seen alterations in physiology. The course will focus on modifiable risk factors, exposures, physiological mutations, and presenting signs and symptoms. Students will utilize evidence-based practice and research to identify, analyze and evaluate disease pathology across the lifespan.

MSN 6215 Advanced Pharmacology 3

Course Description: This course presents the pharmacokinetics and pharmacodynamics of medication management. Nurse practitioners students are prepared to safely prescribe and monitor medication regimens for patients across the lifespan. The course will include ethical and legal parameters surrounding prescriptive practice. This course meets the basic accreditation criteria for graduate nursing pharmacology. Prerequisites: Faculty permission.

MSN 6220 Physical Assessment & Diagnostic Reasoning 3

Course Description: This course lays the groundwork for students to perform comprehensive and holistic health histories, review of systems, and physical examinations for patients across the lifespan. The nurse practitioner students will be guided in the development of the cognitive skills necessary for complex diagnostic reasoning. The classroom, nursing practice lab, and select clinical sites are used in presenting and practicing assessment and diagnostic reasoning. Prerequisites: Faculty permission.

MSN 6225 Adult Skills Practicum 1

Course Description: This laboratory course provides opportunities for the nurse practitioner student to learn and practice ambulatory care skills used to diagnose and manage adult health care issues. Prerequisites MSN 6220 Physical Assessment & Diagnostic Reasoning, Co-requisites MSN 6235 Advanced Practice Nursing: Adult, MSN 6236 Advanced Practice Nursing Clinical: Adult.

MSN 6230 Women's Health and Pediatric Skills Practicum 2

Course Description: The laboratory course provides opportunities for the nurse practitioner students to learn and practice ambulatory care skills used to diagnose and manage specific women's health and pediatric health care issues. Prerequisites MSN 6220 Physical Assessment & Diagnostic Reasoning, Co-requisites MSN 6245 Advanced Practice Nursing: Newborn- Adolescent, MSN 6246 Advanced Practice Nursing Clinical: Newborn- Adolescent.

MSN 6235 Advanced Practice Nursing: Adult 3

Course Description: This is the theory companion course to MSN 6236 Advanced Practice Nursing Clinical: Adult. This course is designed to provide advanced theoretical knowledge and emphasis on adult healthcare for the nurse practitioner student. The course will prepare the student to manage prevalent healthcare concerns encountered across the lifespan of an adult. The course will also focus on the inclusion of families in patient health promotion, assessment, intervention, follow-up and evaluation of adults in healthcare. Co-requisites MSN 6236 Advanced Practice Nursing Clinical: Adult.

MSN 6236 Advanced Practice Nursing Clinical: Adult 3

Course Description: This is the clinical companion course to MSN 6236 Advanced Practice Nursing: Adult. This course is designed for the nurse practitioner student to deliver high quality healthcare to adults. The course prepares students to apply acquired skills, magnify diagnostic reasoning through psychomotor, affective and cognitive domains. This course also requires students to diagnose and determine best practice to treat illness and prevent disease. Co-requisite MSN 6235 Advanced Practice Nursing: Adult.

MSN 6240 Advanced Practice Nursing: Older Adult 2

Course Description: This is the theory companion course to MSN 6241 Advanced Practice Nursing Clinical: Adult & Older Adult. This course is designed to provide advanced theoretical knowledge and emphasis on older adult healthcare for the nurse practitioner student. The course will prepare the student to manage prevalent healthcare concerns for older adults in the community and a variety of health care settings. The course will also focus on the various health issues for older adults, including health promotion, functional ability, chronic disease management, polypharmacy, palliative intervention, and end-of-life care. Co-requisite MSN 6241 Advanced Practice Nursing Clinical: Adult & Older Adult.

MSN 6241 Advanced Practice Nursing Clinical: Adult & Older Adult Clinical 1

Course Description: This is the clinical companion course to MSN 6240 Advanced Practice Nursing: Older Adult. This course is designed for the nurse practitioner student to deliver high quality healthcare to adults and older adults in a variety of community settings. The course prepares students to apply acquired skills, magnify diagnostic reasoning through psychomotor, affective and cognitive domains. This course also requires students to diagnose and determine best practice to treat illness and prevent disease. Co-requisites MSN 6240 Advanced Practice Nursing: Older Adult.

MSN 6245 Advanced Practice Nursing: Newborn– Adolescent 3

Course Description: This is the theory companion course to MSN 6246 Advanced Practice Nursing Clinical: Newborn-Adolescent. This course is designed to provide advanced theoretical knowledge centered on the unique health care needs of newborns, pediatrics, adolescents and families specific to the nurse practitioner role. The course will prepare students to manage health concerns across the pediatric lifespan associated with genetics, development and development stages. The course will focus on health promotion and disease prevention across the lifespans of the newborn, pediatric and adolescent, as well as the management of associated family. Co-requisite MSN 6246 Advanced Practice Nursing Clinical: Newborn-Adolescent

MSN 6246 Advanced Practice Nursing Clinical: Newborn-Adolescent 2

Course Description: This is the clinical companion course to MSN 6245 Advanced Practice Nursing: Newborn - Adolescent. This course is designed for the nurse practitioner student to deliver high quality healthcare to children and adolescents. The course prepares students to apply acquired skills, magnify diagnostic reasoning through psychomotor, affective and cognitive domains. This course also requires students to diagnose and determine best practice to treat illness and prevent disease. Co-requisite MSN 6245 Advanced Practice Nursing: Newborn - Adolescent.

MSN 6250 Advanced Practice Nursing: Women's Health 2

Course Description: This is the theory companion course to MSN 6251 Advanced Practice Nursing Clinical: Women’s Health. This course is designed to prepare the nurse practitioner student to gain knowledge centered on the unique health care needs of women. The course will prepare students to manage prevalent health care concerns of women, including; maturation, sexuality, family planning, contraception, perinatal care (preconception through pregnancy), and menopause. Concepts will focus on strategies for health promotion and disease prevention through the lifespan of a woman, as well as management of selected issues related to fertility, pregnancy, and aging. Co-requisite MSN 6251 Advanced Practice Nursing Clinical: Women's Health.

MSN 6251 Advanced Practice Nursing Clinical: Women's Health 1

Course Description: This is the clinical companion course to MSN 6250 Advanced Practice Nursing: Women’s Health. This course is designed for the nurse practitioner student to deliver high quality healthcare to women. The course prepares students to apply acquired skills, magnify diagnostic reasoning through psychomotor, affective and cognitive domains. This course requires students to diagnose and determine best practice to treat illness and prevent disease in the assigned women’s health care practice environment. Co-Requisite course MSN 6250 Advanced Practice Nursing in Women’s Health.

MSN 6255 Complex Accountabilities of Advanced Nursing Practice 3

Course Description: This course is designed to prepare master level nursing students for the advanced practice role. The course allow students to investigate a variety of topics that impact advanced practice nursing related to diversity, access to care for special populations, ethical and legal strains, leadership competencies, impact of public policies on healthcare, and establishing a practice.

MSN 6260 Advanced Practice Nursing Clinical Practicum 4

Course Description: This is the final clinical course of the FNP Program. This course is designed for the nurse practitioner student to evaluate individual and system effectiveness in delivery of quality healthcare to patients across the lifespan. The course evaluates the student’s ability to apply acquired skills, magnify diagnostic reasoning through psychomotor, affective and cognitive domains. This course also evaluates the student’s ability to diagnose and determine best practice to treat illness and prevent disease. Prerequisites MSN 6236 Advanced Practice Nursing Clinical: Adult, MSN 6241 Advanced Practice Nursing Clinical: Adult & Older Adult, MSN 6246 Advanced Practice Nursing Clinical: Newborn-Adolescent, MSN 6251 Advanced Practice Nursing Clinical: Women's Health.

**INFORMATION PAGE**

Did this program proposal receive unanimous approval within the Department? **YES**  If not, what are the major concerns raised by the opponents?

Explain how this program will differ from similar offerings by other departments. Also explain any effects this proposal will have on program requirements or enrollments in other departments including the Bachelor of Integrated Studies Program. In the case of similar offerings or affected programs, **you should include letters from the departments in question stating their support or opposition to the proposed program**.

This program is not currently offered at Weber State University. The interest in the Nurse Educator and Nurse Administrator programs in the graduate program in the School of Nursing could be impacted either positively by students seeking both the clinical and the education or administrative credentials or negatively by students preferring to apply for the Family Nurse Practitioner program rather than the Nurse Educator or Nurse Administrator programs.

**A Master’s Degree program** must have a **minimum of 30 credit hours with a maximum of 36 credit hours**.

This program is 53 credits which is greater than the 36 credit maximum. The curriculum has been developed with the input of nurse practitioner prepared faculty members, reviewing other accredited Family Nurse Practitioner programs across the country, and most important, meeting accreditation and certification standards.

**A Bachelor** of Arts, Bachelor of Science, Bachelor of Fine Arts, Bachelor of Music, or Bachelor of Integrated Studies must have a **minimum of 120 credit hours with a program maximum of 126 hours** (This is a state system-wide requirement). Exceptions for the maximum number of program hours are allowed if accreditation issues require a set number of courses within a given program, i.e. Dental Hygiene, Nursing, Radiology**.**

**An Associate of Arts or an Associate of Science must have a minimum of 60 credit hours with a program maximum of 63 credit hours**. **An Associate of Applied Science must have a minimum of 63 credit hours with a program maximum of 69 credit hours.**

**Major programs that require a minor will consist of not fewer than 30 credits and not more than 48** credits in the major field. **Major programs that do not require a minor** shall consist of **not more than 63 credits in the major field.**

**A minor is a program** of study generally selected to complement and strengthen a student’s major and/or enrich the student’s overall educational program. **A minor consists of not fewer than 15 credits**. Courses that are used to satisfy the general education requirements can be used as part of the minimum number of hours needed for the minor requirements, unless prohibited by a particular college or department.

**Indicate the number of credit hours** for course work within the proposed program. (Do not include credit hours for General Education, SI, Diversity, or other courses unless those courses fulfill requirements within the proposed program.) \_\_53\_\_\_\_\_\_\_\_\_\_

**After the appropriate Approvals, Email the electronic file (Microsoft Word .docx) to bstockberger @weber.edu You may scan the Approval Page with the Signatures and email it, send a hard copy to MC 1033 through campus mail or bring to the Faculty Senate Office MA210J. Send all**