

The University of Tennessee Health Science Center
College of Nursing



Addendum to the Accreditation Self-Study
for
DNP Program and Post-Graduate APRN Certificate Program
Submitted to:
The Commission on Collegiate Nursing Education (CCNE)
January 29, 2024

Standard I: Program Quality – Mission and Governance

I-A. The mission, goals, and expected program outcomes are:

- congruent with those of the parent institution; and
- reviewed periodically and revised as appropriate.

Elaboration: The program's mission, goals, and expected program outcomes are written and accessible to current and prospective students, faculty, and other constituents. Program outcomes include student outcomes, faculty outcomes, and other outcomes identified by the program. The mission may relate to all nursing programs offered by the nursing unit, or specific programs may have separate missions. Program goals are clearly differentiated by level when multiple degree/certificate programs exist. Expected program outcomes may be expressed as competencies, objectives, benchmarks, or other terminology congruent with institutional and program norms.

There is a defined process for periodic review and revision of program mission, goals, and expected program outcomes that has been implemented, as appropriate.

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The mission, goals, and expected outcomes of the DNP program and the Post-Graduate APRN Certificate program reflect current trends in nursing education, the nursing profession, and the health care delivery system. They are congruent with those of the university and consistent with *The Essentials of Doctoral Education for Advanced Practice Nursing (AACN, 2006)*. The mission, goals, and expected outcomes of the DNP program and the Post-Graduate APRN Certificate program are reviewed annually according to the CON Evaluation Manual, Timeline, and Master Evaluation Plan (MEP) (See CON Evaluation Manual, Appendix D). If the annual review indicates a need for revision, those revisions are made as appropriate.

The CON has one [mission statement](#) for the BSN, DNP program, and the Post-Graduate APRN Certificate program that is available on the [CON website](#) and page 4 of the [DNP Program and Post-Graduate APRN Certificate Program Student Handbook](#).

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DNP program and the Post-Graduate APRN Certificate program Outcomes

The CON DNP program and the Post-Graduate APRN Certificate program outcomes are the same, with the exception the Post-Graduate APRN (MSN) Adult Gerontology Acute Care Nurse Practitioner (AGACNP) Certificate, and define the graduate of the program as one who will be able to:

1. Demonstrate proficient clinical reasoning in advanced nursing practice.
2. Lead within health care systems to deliver safe, quality care for diverse populations.
3. Disseminate findings from evidence-based practice and research for optimal healthcare outcomes.
4. Integrate health information and patient care technologies to transform healthcare outcomes across the lifespan.
5. Advocate for social justice and equity through strategic initiatives to influence public policy.
6. Lead interprofessional teams to improve patient and population health outcomes.
7. Integrate concepts of social determinants of health, epidemiology, and ethics to improve population health.
8. Design, implement, and evaluate quality care based on science to facilitate optimal patient outcomes.

Added to Pg 4

As the outcomes for both the DNP program and the Post-Graduate APRN Certificate program are the same, with the exception of the Post-Graduate APRN (MSN) AGACNP Certificate, the CON DNP Program Director and the Concentration Coordinators perform a gap analysis for all post-masters students. For the post DNP, their earned DNP Degree is used as evidence of meeting DNP outcomes.

The program outcomes for the Post-Graduate APRN (MSN) AGACNP Certificate are:

1. Synthesize nursing and other scientific knowledge, with contemporary clinical knowledge, for the assessment and management of health and illness states of adult-gerontology patients.
2. Demonstrate advanced levels of nursing practice including health promotion, health protection, disease prevention, treatment, and referrals for the acute, critical, and chronically ill or injured patient.
3. Engage in advocacy, modeling and teaching to advance health outcomes of complex acute, critical, or chronically ill patients.
4. Develop collaborative professional relationships.
5. Provide leadership for the delivery of clinical services within an integrated system of health care.
6. Analyze practice outcomes to foster quality healthcare practices and improve patient outcomes.
7. Integrate professional values and ethical decision-making in advanced nursing practice.

The Post-Graduate APRN (MSN) AGACNP Certificate outcomes are different because enrolled students are masters prepared nurse practitioners seeking another specialty in acute care. This certificate was developed specifically at the request of one of our largest clinical partners, Methodist Le Bonheur Hospital Systems. A gap analysis is completed for these students to ensure that the core nurse practitioner courses were completed.

Table 1.1a: University and College Mission, Vision & Goals Statements and selected Post-Graduate APRN Certificate Program and Post-Graduate APRN (MSN) AGACNP Certificate Outcomes			
UTHSC Mission Statement	CON Mission Statement	Post-Graduate APRN Certificate Program Outcomes	Post-Graduate APRN (MSN) AGACNP Certificate Outcomes
Transforming lives through collaborative and inclusive education research/scholarship, clinical care, and public service.	<i>To prepare exceptional nurse leaders to meet the health needs of the people of Tennessee, the nation, and to improve health care...</i>	6. Lead interprofessional teams to improve patient and population health outcomes	2. Demonstrate advanced levels of nursing practice including health promotion, health protection, disease prevention, treatment, and referrals for the acute, critical, and chronically ill or injured patient.
...through collaborative and inclusive research/scholarship ...	<i>To prepare exceptional nurse leaders to meet the health needs of the people of Tennessee, the nation, and beyond through cultivating creativity and passion to improve health care, leading scientific innovations</i>	3. Disseminate findings from evidence-based practice and research for optimal healthcare outcomes.	6. Analyzes practice outcomes to foster quality healthcare practices and improve patient outcomes.

Table 1.1a: University and College Mission, Vision & Goals Statements and selected Post-Graduate APRN Certificate Program and Post-Graduate APRN (MSN) AGACNP Certificate Outcomes

UTHSC Mission Statement	CON Mission Statement	Post-Graduate APRN Certificate Program Outcomes	Post-Graduate APRN (MSN) AGACNP Certificate Outcomes
...through collaborative and inclusive clinical care ...	<i>To prepare exceptional nurse leaders to meet the health needs of the people of Tennessee, the nation, and beyond through cultivating creativity and passion to improve health care, leading scientific innovations and clinical practice...</i>	2. Lead within health care systems to deliver safe, quality care for diverse populations.	5. Provides leadership for the delivery of clinical services within an integrated system of health care.

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The [CON values](#) are also available on page 4 of the [DNP Program and Post-Graduate APRN Certificate Program Student Handbook](#). Expected DNP program and Post-Graduate APRN Certificate Program outcomes are available to students via the [UTHSC College of Nursing website](#) and in the [Academic Bulletin](#).

Table 1.2a. demonstrates the relationship between the CON mission, philosophy, and selected Post-Graduate Certificate program outcomes.

Table 1.2a: Relationship between the College of Nursing Mission and Philosophy and Selected Post-Graduate APRN Certificate Program Outcomes and the Post-Graduate APRN (MSN) AGACNP Certificate Outcomes

CON Mission Statement	CON Philosophy	Post-Graduate APRN Certificate Program Outcomes	Post-Graduate APRN (MSN) AGACNP Certificate Outcomes
<i>To prepare exceptional nurse leaders to meet the health needs of the people of Tennessee, the nation, and to improve health care...</i>	Nursing must provide leadership in influencing the organizational, social, economic, legal, and political factors within the healthcare system and society.	6. Lead interprofessional teams to improve patient and population health outcomes .	5. Provides leadership for the delivery of clinical services within an integrated system of health care.
<i>To prepare exceptional nurse leaders to meet the health needs of the people of Tennessee, the nation, and beyond through: cultivating creativity and passion to improve health care, leading scientific innovations...</i>	Nursing care requires sensitivity as well as critical, logical, and analytical thinking to effect changes in clients and the health care system	3. Disseminate findings from evidence-based practice and research for optimal healthcare outcomes	6. Analyzes practice outcomes to foster quality healthcare practices and improve patient outcomes
<i>To prepare exceptional nurse leaders to meet the health needs of the people of Tennessee, the nation, and beyond through cultivating creativity and passion to improve health care, leading scientific innovations and clinical practice...</i>	Health is viewed as a dynamic state arising from a process of continuous change in the person and environment	2. Lead within health care systems to deliver safe, quality care for diverse populations.	3. Engage in advocacy, modeling, and teaching to advance health outcomes of complex acute, critical, or chronically ill patients.

I-B. The mission, goals, and expected program outcomes are consistent with relevant professional nursing standards and guidelines for the preparation of nursing professionals.

Elaboration: The program identifies the professional nursing standards and guidelines it uses. CCNE requires, as appropriate, the following professional nursing standards and guidelines:

- The Essentials of Baccalaureate Education for Professional Nursing Practice [American Association of Colleges of Nursing (AACN), 2008];
- The Essentials of Master’s Education in Nursing (AACN, 2011);
- The Essentials of Doctoral Education for Advanced Nursing Practice (AACN, 2006); and
- Criteria for Evaluation of Nurse Practitioner Programs [National Task Force on Quality Nurse Practitioner Education (NTF), 2016].

A program may select additional standards and guidelines that are current and relevant to program offerings.

A program preparing students for certification incorporates professional standards and guidelines appropriate to the role/area of education.

Program Response:

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The mission, goals, and expected outcomes of the DNP program and Post-Graduate APRN Certificate program are consistent with *The Essentials of Doctoral Education for Advanced Nursing Practice (AACN, 2006)* and the *Criteria for Evaluation of Nurse Practitioner Programs [National Task Force on Quality Nurse Practitioner Education (NTF), 2016]*.

Three of the four APRN roles (nurse practitioner, nurse anesthiologist, and nurse midwife) are represented in the DNP program and the Post-Graduate APRN Certificate. Each DNP program and Post-Graduate APRN Certificate program concentration has a specific population focus, as evidenced in Table 1.3 and 1.3a.

Table 1.3a: Post-Graduate APRN Certificate Program and Post-Graduate APRN (MSN) AGACNP Certificate with their Population Foci

Role	Population Focus
Family Nurse Practitioner	Across the Life Span
Psych Mental Health Nurse Practitioner	Across the Life Span
Pediatric Acute Care NP	0-18 Years
Pediatric Primary Care NP	0-18 Years
Adult Gero Acute Care NP (Post-DNP and Post-Masters students)	13 Years- Death

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DNP program and Post-Graduate Certificate program Outcomes are consistent with *The Essentials of Doctoral Education for Advanced Nursing Practice (AACN, 2006)*. Table 1.45, 1.4a and 1.4b provides a comparison between DNP Essentials and Post-Graduate Certificate program outcomes.

Table 1.4a: Comparisons between DNP Essentials and Post-Graduate APRN (DNP) Certificate Program Outcomes

DNP Essentials	Post-Graduate APRN (DNP) Certificate Program Outcomes
<i>DNP I. Scientific Underpinnings for Practice</i>	1. Demonstrate proficient clinical reasoning in advanced nursing practice. 3. Disseminate findings from evidence-based practice and research for optimal healthcare outcomes.

Table 1.4a: Comparisons between DNP Essentials and Post-Graduate APRN (DNP) Certificate Program Outcomes

DNP Essentials	Post-Graduate APRN (DNP) Certificate Program Outcomes
<i>DNP II. Organizational and Systems Leadership for Quality Improvement and Systems Thinking</i>	2. Lead within health care systems to deliver safe, quality care for diverse populations. 5. Advocate for social justice and equity through strategic initiatives to influence public policy. 6. Lead interprofessional teams to improve patient and population health outcomes.
<i>DNP III. Clinical Scholarship and Analytical Methods for Evidence-based Practice</i>	1. Demonstrate proficient clinical reasoning in advanced nursing practice. 3. Disseminate findings from evidence-based practice and research for optimal healthcare outcomes.
<i>DNP IV. Information Systems/Technology and Patient Care Technology for the Improvement and Transformation of Health Care</i>	4. Integrate health information and patient care technologies to transform healthcare outcomes across the lifespan.
<i>DNP V. Health Care Policy for Advocacy in Health Care</i>	5. Advocate for social justice and equity through strategic initiatives to influence public policy.
<i>DNP VI. Interprofessional Collaboration for Improving Patient and Population Health Outcomes</i>	6. Lead interprofessional teams to improve patient and population health outcomes.
<i>DNP VII. Clinical Prevention and Population Health for Improving the Nation's Health</i>	7. Integrate concepts of social determinants of health, epidemiology, and ethics to improve population health.
<i>DNP VIII. Advanced Nursing Practice</i>	1. Demonstrate proficient clinical reasoning in advanced nursing practice. 2. Lead within health care systems to deliver safe, quality care for diverse populations. 3. Disseminate findings from evidence-based practice and research for optimal healthcare outcomes. 4. Integrate health information and patient care technologies to transform healthcare outcomes across the lifespan. 5. Advocate for social justice and equity through strategic initiatives to influence public policy. 6. Lead interprofessional teams to improve patient and population health outcomes. 7. Integrate concepts of social determinants of health, epidemiology and ethics to improve population health. 8. Design, implement, and evaluate quality care based on science to facilitate optimal patient outcomes.

Table 1.4b: Comparisons between DNP Essentials and Post-Graduate APRN (MSN) AGACNP Certificate Outcomes

DNP Essentials	Post-Graduate APRN (MSN) AGACNP Certificate Outcomes
<i>DNP I. Scientific Underpinnings for Practice</i>	1. Synthesize nursing and other scientific knowledge, with contemporary clinical knowledge, for the assessment and management of health and illness states of adult-gerontology patients. 6. Analyzes practice outcomes to foster quality healthcare practices and improve patient outcomes.
<i>DNP II. Organizational and Systems Leadership for Quality Improvement and Systems Thinking</i>	5. Provides leadership for the delivery of clinical services within an integrated system of health care.

<i>DNP III. Clinical Scholarship and Analytical Methods for Evidence-based Practice</i>	6. Analyzes practice outcomes to foster quality healthcare practices and improve patient outcomes.
<i>DNP IV. Information Systems/Technology and Patient Care Technology for the Improvement and Transformation of Health Care</i>	2. Demonstrate advanced levels of nursing practice including health promotion, health protection, disease prevention, treatment, and referrals for the acute, critical, and chronically ill or injured patient.
<i>DNP V. Health Care Policy for Advocacy in Health Care</i>	3. Engage in advocacy, modeling and teaching to advance health outcomes of complex acute, critical, or chronically ill patients.
<i>DNP VI. Interprofessional Collaboration for Improving Patient and Population Health Outcomes</i>	4. Develop collaborative professional relationships.
<i>DNP VII. Clinical Prevention and Population Health for Improving the Nation's Health</i>	2. Demonstrate advanced levels of nursing practice including health promotion, health protection, disease prevention, treatment, and referrals for the acute, critical, and chronically ill or injured patient.
<i>DNP VIII. Advanced Nursing Practice</i>	<p>1. Synthesize nursing and other scientific knowledge, with contemporary clinical knowledge, for the assessment and management of health and illness states of adult-gerontology patients.</p> <p>2. Demonstrate advanced levels of nursing practice including health promotion, health protection, disease prevention, treatment, and referrals for the acute, critical, and chronically ill or injured patient.</p> <p>3. Engage in advocacy, modeling and teaching to advance health outcomes of complex acute, critical, or chronically ill patients.</p> <p>4. Develop collaborative professional relationships.</p> <p>5. Provides leadership for the delivery of clinical services within an integrated system of health care.</p> <p>6. Analyzes practice outcomes to foster quality healthcare practices and improve patient outcomes.</p> <p>7. Integrate professional values and ethical decision-making in advanced nursing practice.</p>

The *Criteria for Evaluation of Nurse Practitioner Programs Documentation Checklist*, (See Appendix E), demonstrates the consistency of the mission, goals, and DNP program and Post-Graduate APRN Certificate program Outcomes with the National Task Force (NTF) criteria.

I-C. The mission, goals, and expected program outcomes reflect the needs and expectations of the community of interest.

Elaboration: The community of interest is defined by the nursing unit. The needs and expectations of the community of interest are considered in the periodic review of the mission, goals, and expected program outcomes.

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Internal communities of interest include students, faculty, and the university at large. Faculty seek to be responsive to ways in which students best learn. As adult learners, DNP program and Post-Graduate APRN Certificate program students tend to be goal-oriented, self-directed, and problem-centered.

I-D. The nursing unit's expectations for faculty are written and communicated to the faculty and are congruent with institutional expectations.

Elaboration: Expectations for faculty are congruent with those of the parent institution. The nursing unit's expectations for faculty, whether in teaching, scholarship, service, practice, or other areas, may vary for different groups of faculty (full-time, part-time, adjunct, tenured, non-tenured, or other).

No changes

I-E. Faculty and students participate in program governance.

Elaboration: Roles of the faculty and students in the governance of the program, including those involved in distance education, are clearly defined and promote participation. Nursing faculty are involved in the development, review, and revision of academic program policies.

No changes

I-F. Academic policies of the parent institution and the nursing program are congruent and support achievement of the mission, goals, and expected program outcomes. These policies are:

- fair and equitable;
- published and accessible; and
- reviewed and revised as necessary to foster program improvement.

Elaboration: Academic policies include, but are not limited to, those related to student recruitment, admission, retention, and progression. Policies are written and communicated to relevant constituencies. Policies are implemented consistently. Differences between the nursing program policies and those of the parent institution are identified and support achievement of the program's mission, goals, and expected outcomes. A defined process exists by which policies are regularly reviewed. Policy review occurs, and revisions are made as needed.

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The academic policies of UTHSC, the DNP program and the Post-Graduate APRN Certificate program are congruent and support the achievement of the mission, goals, and expected program outcomes. General academic policies for UTHSC are found in the UTHSC [Academic Bulletin](#), are revised annually, and are available online. All new students are oriented at the beginning of their programs regarding the expectation that they access the university student handbook and bulletin and become knowledgeable about its contents. Additionally, students access the student handbook (CenterScope) via the Internet. Policies specific to the DNP program and Post-Graduate APRN Certificate program and all programs offered at UTHSC are in the Academic Bulletin and are reviewed and revised annually (See DNP Program Policies in Section III. DNP College of Policies (pages 41-47), Section IV. DNP Clinical Policies (pages 48-53) of the [DNP Program and Post-Graduate APRN Certificate Program Student Handbook](#) and the Academic Bulletin [schedules](#), Virtual Resource Room).

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The CON's DNP program and the Post-Graduate APRN Certificate program policies establish nursing students' [admission, retention, progression, graduation, and completion requirements](#).

I-G. The program defines and reviews formal complaints according to established policies.

Elaboration: The program defines what constitutes a formal complaint and maintains a record of formal complaints received. The program's definition of formal complaints includes, at a minimum, student complaints. The program's definition of formal complaints and the procedures for filing a complaint are communicated to relevant constituencies.

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A formal complaint concerning the College of Nursing is a written student complaint utilizing the [College of Nursing Student Complaint Form](#) and addressing matters not otherwise covered under UTHSC-published Student Policies and Guidelines in university documents such as the [College of Nursing \(CON\) website](#), on page 22 of the [DNP Program and Post-Graduate APRN Certificate Program Handbook](#), [UTHSC CenterScope: Administration of the Statement of Student Rights and Responsibilities](#) and/or statements from the [Office of Inclusion, Equity and Diversity](#). This policy applies to all students enrolled in any program within the CON, including the DNP program and Post-Graduate APRN Certificate program students.

I-H. Documents and publications are accurate. A process is used to notify constituents about changes in documents and publications.

Elaboration: References to the program's offerings, outcomes, accreditation/approval status, academic calendar, recruitment and admission policies, grading policies, degree/certificate completion requirements, tuition, and fees are accurate. Information regarding licensure and/or certification examinations for which graduates will be eligible is accurate. For APRN education programs, transcripts or other official documentation specify the APRN role and population focus of the graduate.

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Documents and publications accurately reflect the DNP program and the Post-Graduate APRN Certificate program offerings, outcomes, accreditation/approval status, academic calendars, admission policies, grading policies, and degree completion requirements. Tuition and fees information is found on the [Bursar's website](#). Information about the CON can be found on the [CON website](#), in the [UTHSC Academic Bulletin](#), and college documents including brochures, and recruiting materials that are published online and in hard copy. Information regarding the DNP program and the Post-Graduate APRN Certificate program is listed in university and CON documents is accurate and congruent.

Standard II: Program Quality – Institutional Commitment and Resources

II-A. Fiscal resources are sufficient to enable the program to fulfill its mission, goals, and expected outcomes. Adequacy of fiscal resources is reviewed periodically, and resources are modified as needed.

Elaboration: The budget enables achievement of the program's mission, goals, and expected outcomes. The budget supports the development, implementation, and evaluation of the program. Compensation of nursing unit personnel supports recruitment and retention of faculty and staff.

A defined process is used for regular review of the adequacy of the program's fiscal resources. Review of fiscal resources occurs, and modifications are made as appropriate.

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Fiscal resources are sufficient to enable the DNP program and Post-Graduate APRN Certificate program to fulfill its mission, goals and expected outcomes.

II-B. Physical resources and clinical sites enable the program to fulfill its mission, goals, and expected outcomes. Adequacy of physical resources and clinical sites is reviewed periodically, and resources are modified as needed.

Elaboration: Physical space and facilities (e.g., faculty and staff work space, classrooms, meeting areas) are sufficient and configured in ways that enable the program to achieve its mission, goals, and expected outcomes. Equipment and supplies (e.g., computing, laboratory, and teaching-learning materials) are sufficient to achieve the program's mission, goals, and expected outcomes. The program is responsible for ensuring adequate physical resources and clinical sites. Clinical sites are sufficient, appropriate, and available to achieve the program's mission, goals, and expected outcomes.

A defined process is used to determine currency, availability, accessibility, and adequacy of resources (e.g., clinical simulation, laboratory, computing, supplies, and clinical sites), and modifications are made as appropriate.

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UTHSC CON physical resources and clinical sites are sufficient to enable the DNP program and Post-Graduate APRN Certificate program to achieve the mission, goals, and expected outcomes.

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The adequacy of physical resources is evaluated on an annual basis via an institutional effectiveness survey completed by students as well as through Skyfactor© Exit Assessment data. Students evaluate their satisfaction with the administration and support services in the DNP program. Table 2.2. shows the quality of the DNP program's clinical sites and classroom spaces. The Skyfactor© Exit Assessment is only done for students who are graduating with a diploma, not for certificate completers. Post-Graduate APRN Certificate program students do not complete Skyfactor© Exit Assessments because of their small numbers and very limited ability for responses to be anonymous, but they complete clinical site and preceptor evaluations for every clinical and didactic course. Post-Graduate APRN Certificate program students are invited to qualitative focus groups where they can provide anonymous feedback about didactic, clinical, and all other experiences in the program. Because there are so few Post-Graduate APRN Certificate program students (average number of students is anywhere from 1 to 4), we depend on the DNP Program student evaluations of administrative and support services as the courses taken are the same and we intend to protect the anonymity of student evaluations.

II-C. Academic support services are sufficient to meet program and student needs and are evaluated on a regular basis.

Elaboration: Academic support services, which may include library, technology, distance education support, research support, and admission and advising services, foster achievement of program outcomes. A defined process is used for regular review of academic support services, and improvements are made as appropriate.

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Student Academic Support Services & Inclusion (SASSI), provided for all students in the CON, **including the DNP program and Post-Graduate APRN Certificate program students**, has a primary goal of promoting student progress in the various programs offered by the University of Tennessee Health Science Center.

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Additional academic support services (e.g., library, technology, distance education support, admission, and advising services) are sufficient for all students, **including the DNP program and Post-Graduate APRN Certificate program students**, to meet program requirements and to achieve the mission, goals, and expected program outcomes regardless of geographic location.

II-D. The chief nurse administrator of the nursing unit:

- **is a registered nurse (RN);**
- **holds a graduate degree in nursing;**
- **holds a doctoral degree if the nursing unit offers a graduate program in nursing;**
- **is vested with the administrative authority to accomplish the mission, goals, and expected program outcomes; and**
- **provides effective leadership to the nursing unit in achieving its mission, goals, and expected program outcomes.**

Elaboration: The administrative authority of the chief nurse administrator is comparable to that of chief administrators of similar units in the institution. He or she consults, as appropriate, with faculty and other communities of interest to make decisions to accomplish the mission, goals, and expected program outcomes. The chief nurse administrator is an effective leader of the nursing unit.

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[Dr. Wendy Likes](#), dean of the CON, holds both practice (DNSc) and research doctorates in nursing (PhD). She is academically and experientially qualified to lead the college, **including the DNP program and Post-Graduate APRN Certificate program**, in accomplishing the mission, goals, and expected student and faculty outcomes.

II-E. Faculty are:

- **sufficient in number to accomplish the mission, goals, and expected program outcomes;**
- **academically prepared for the areas in which they teach; and**
- **experientially prepared for the areas in which they teach.**

Elaboration: The faculty (full-time, part-time, adjunct, tenured, non-tenured, or other) for each degree and post-graduate APRN certificate program are sufficient in number and qualifications to achieve the mission, goals, and expected program outcomes. The program defines faculty workloads. Faculty-to student ratios provide adequate supervision and evaluation and meet or exceed the requirements of regulatory agencies and professional nursing standards and guidelines.

Faculty are academically prepared for the areas in which they teach. Academic preparation of faculty includes degree specialization, specialty coursework, or other preparation sufficient to address the major concepts

included in courses they teach. Faculty teaching in the nursing program have a graduate degree. The program provides a justification for the use of any faculty who do not have a graduate degree.

Faculty who are nurses hold current RN licensure. Faculty teaching in clinical/practicum courses are experienced in the clinical area of the course and maintain clinical expertise. Clinical expertise may be maintained through clinical practice or other avenues. Faculty teaching in advanced practice clinical courses meet certification and practice requirements as specified by the relevant regulatory and specialty bodies. Advanced practice nursing tracks are directly overseen by faculty who are nationally certified in that same population-focused area of practice in roles for which national certification is available.

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Faculty are sufficient in number to accomplish the mission, goals and expected student outcomes of the DNP program and Post-Graduate APRN Certificate program. There are 58 full-time and 3 part-time qualified faculty in the CON. A total of 31.73 FTEs are devoted to teaching in the CON and 16.40 FTEs are devoted to teaching in the DNP program and Post-Graduate APRN Certificate program; the same courses and clinical experiences are taken at the same time, with both DNP program and Post-Graduate APRN Certificate program students, taught by the same faculty.

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DNP program and Post-Graduate APRN Certificate program workload assignments ensure that the following recommended ratios are met:

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Faculty are academically and experientially qualified to teach in the DNP program and Post-Graduate APRN Certificate program as required by CCNE and the Tennessee Board of Nursing (See College of Nursing Faculty Profile, Appendix H). Nursing courses are taught and/or coordinated by faculty. All faculty who teach in the DNP program and Post-Graduate APRN Certificate program hold a terminal degree. The college provides [professional development opportunities](#) to enable faculty to maintain clinical currency. The Instructors of Record (IORs) in the DNP program and Post-Graduate APRN Certificate program have a minimum of a doctoral degree.

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All nursing faculty have sufficient nursing experience to demonstrate professional competence. All nursing faculty hold current licensure as professional nurses in Tennessee. All advanced practice nursing faculty who teach in the DNP program and Post-Graduate APRN Certificate program hold an APRN license in Tennessee or a compact state and have national certification in their respective advanced practice specialties. To ensure practice competency for faculty that teach in clinical courses, the CON developed a faculty practice plan that provides sites and adequate time for faculty practice.

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All DNP program and Post-Graduate APRN Certificate program faculty members are on 12-month contracts with workload assignments modified based on the needs of the college.

Should faculty wish to express specific requests or concerns, they contact their department chair to schedule attendance at a weekly meeting with the Executive Associate Dean of Academic and Student Affairs, department chairs, and program directors for the purposes of collaborating on solutions for requests or concerns (see [2021-2024 DNP Program and Post-Graduate APRN Certificate Program Teaching List](#), virtual resource room).

II-F. Preceptors (e.g., mentors, guides, coaches), if used by the program as an extension of faculty, are academically and experientially qualified for their role.

This key element is not applicable to a degree or certificate program that does not use preceptors.

Elaboration: The roles and performance expectations for preceptors with respect to teaching, supervision, and student evaluation are:

- *clearly defined and communicated to preceptors;*
- *congruent with the mission, goals, and expected student outcomes;*
- *congruent with relevant professional nursing standards and guidelines; and*
- *reviewed periodically and revised as appropriate.*

Preceptors have the expertise to support student achievement of expected outcomes. The program ensures that preceptor performance meets expectations.

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DNP **program and Post-Graduate APRN Certificate program** preceptors are selected for their areas of professional experience, with special emphasis on how that experience and/or clinical site will complement and extend the skills and knowledge of the DNP **program and Post-Graduate APRN Certificate program** students. Preceptors have a minimum of one year's experience, but the majority have several years of experience, in addition to state licensure and national certification in their areas of specialization.

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UTHSC CON has graduated over 1,000 individuals with the practice doctorate degree. Many of these graduates serve as preceptors for DNP **program and Post-Graduate APRN Certificate program** students.

II-G. The parent institution and program provide and support an environment that encourages faculty teaching, scholarship, service, and practice in keeping with the mission, goals, and expected faculty outcomes.

Elaboration: Institutional support is available to promote faculty outcomes congruent with defined expectations of the faculty role (full-time, part-time, adjunct, tenured, non-tenured, or other) and in support of the mission, goals, and expected faculty outcomes.

- *Faculty have opportunities for ongoing development in teaching.*
- *If scholarship is an expected faculty outcome, the institution provides resources to support faculty scholarship.*
- *If service is an expected faculty outcome, expected service is clearly defined and supported.*
- *If practice is an expected faculty outcome, opportunities are provided for faculty to maintain practice competence.*
- *Institutional support ensures that currency in clinical practice is maintained for faculty in roles that require it.*

No Changes

Standard III: Program Quality – Curriculum and Teaching Learning Practices

III-A. The curriculum is developed, implemented, and revised to reflect clear statements of expected student outcomes that:

- are congruent with the program’s mission and goals;
- are congruent with the roles for which the program is preparing its graduates; and
- consider the needs of the program-identified community of interest.

Elaboration: Curricular objectives (e.g., course, unit, and/or level objectives or competencies as identified by the program) provide clear statements of expected learning that relate to student outcomes. Expected outcomes relate to the roles for which students are being prepared.

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The DNP program and Post-Graduate APRN Certificate program prepare nurses who hold BSN and MSN degrees for advanced levels of nursing practice. The DNP program and Post-Graduate APRN Certificate program curricula were developed and are being implemented according to the standards set by the American Association of Colleges of Nursing in *The Essentials of Doctoral Education for Advanced Practice Nursing* (AACN, 2006). These essentials are foundational outcome competencies that are inclusive of and expand upon master’s level competencies. Additionally, competencies defined by the specific specialty organizations, as well as guidelines of certifying and accrediting bodies, guide faculty preparation, student expectations, content, and supervision and evaluation of clinical experiences for each DNP program and Post-Graduate APRN Certificate program specialty concentration.

Add to Pg. 43

The CON DNP program and Post-Graduate APRN Certificate program outcomes are the same, with the exception the Post-Graduate APRN (MSN) Adult Gerontology Acute Care Nurse Practitioner (AGACNP) Certificate, and define the graduate of the program as one who will:

Added to Pg 43

As the outcomes for both the DNP program and Post-Graduate APRN Certificate program are the same, with the exception the Post-Graduate APRN (MSN) AGACNP Certificate, the CON Program Director and the Concentration Coordinators perform a gap analysis for all post-masters students. For the post DNP, we use their earned DNP Degree as evidence of meeting DNP outcomes.

The Program Outcomes for the Post-Graduate APRN (MSN) AGACNP Certificate are:

1. Synthesize nursing and other scientific knowledge, with contemporary clinical knowledge, for the assessment and management of health and illness states of adult-gerontology patients.
2. Demonstrate advanced levels of nursing practice including health promotion, health protection, disease prevention, treatment, and referrals for the acute, critical, and chronically ill or injured patient.
3. Engage in advocacy, modeling and teaching to advance health outcomes of complex acute, critical, or chronically ill patients.
4. Develop collaborative professional relationships.
5. Provides leadership for the delivery of clinical services within an integrated system of health care.
6. Analyze practice outcomes to foster quality healthcare practices and improve patient outcomes.
7. Integrate professional values and ethical decision-making in advanced nursing practice.

The Post-Graduate APRN (MSN) AGACNP Certificate outcomes are different than the other Post Graduate APRN certificates because enrolled students are masters prepared nurse practitioners seeking another specialty in acute care. This certificate was developed specifically at the request of one of our

largest clinical partners, Methodist Le Bonheur Health Care System. A gap analysis is completed for these students to ensure that the core nurse practitioner courses were completed.

Add to Pg. 44

Table 3.1a below demonstrates the relationship between DNP program and selected Post-Graduate APRN Certificate outcomes and the CON mission, philosophy.

Table 3.1a: Relationship between the College of Nursing Mission and Philosophy and Selected Post-Graduate APRN Certificate Program Outcomes and the Post-Graduate APRN (MSN) AGACNP Certificate Outcomes

CON Mission Statement	CON Philosophy	Post-Graduate APRN Certificate Program Outcomes	Post-Graduate APRN (MSN) AGACNP Certificate Outcomes
<i>To prepare exceptional nurse leaders to meet the health needs of the people of Tennessee, the nation, and to improve health care...</i>	Nursing must provide leadership in influencing the organizational, social, economic, legal, and political factors within the healthcare system and society.	6. Lead interprofessional teams to improve patient and population health outcomes.	5. Provides leadership for the delivery of clinical services within an integrated system of health care.
<i>To prepare exceptional nurse leaders to meet the health needs of the people of Tennessee, the nation, and beyond through: cultivating creativity and passion to improve health care, leading scientific innovations...</i>	Nursing care requires sensitivity as well as critical, logical, and analytical thinking to effect changes in clients and the health care system	3. Disseminate findings from evidence-based practice and research for optimal healthcare outcomes	6. Analyzes practice outcomes to foster quality healthcare practices and improve patient outcomes
<i>To prepare exceptional nurse leaders to meet the health needs of the people of Tennessee, the nation, and beyond through cultivating creativity and passion to improve health care, leading scientific innovations and clinical practice...</i>	Health is viewed as a dynamic state arising from a process of continuous change in the person and environment	2. Lead within health care systems to deliver safe, quality care for diverse populations.	3. Engage in advocacy, modeling, and teaching to advance health outcomes of complex acute, critical, or chronically ill patients.

III-B. Baccalaureate curricula are developed, implemented, and revised to reflect relevant professional nursing standards and guidelines, which are clearly evident within the curriculum and within the expected student outcomes (individual and aggregate). Baccalaureate program curricula incorporate *The Essentials of Baccalaureate Education for Professional Nursing Practice* (AACN, 2008).

This key element is not applicable if the baccalaureate degree program is not under review for accreditation. Elaboration: The baccalaureate degree program incorporates professional nursing standards and guidelines relevant to that program and each track offered. The program clearly demonstrates where and how content, knowledge, and skills required by identified sets of standards are incorporated into the curriculum.

No changes/NA

III-C. Master's curricula are developed, implemented, and revised to reflect relevant professional nursing standards and guidelines, which are clearly evident within the curriculum and within the expected student outcomes (individual and aggregate).

- **Master's program curricula incorporate professional standards and guidelines as appropriate.**
 - a. **All master's degree programs incorporate *The Essentials of Master's Education in Nursing* (AACN, 2011) and additional relevant professional standards and guidelines as identified by the program.**
 - b. **All master's degree programs that prepare nurse practitioners incorporate *Criteria for Evaluation of Nurse Practitioner Programs* (NTF, 2016).**
- **Graduate-entry master's program curricula incorporate *The Essentials of Baccalaureate Education for Professional Nursing Practice* (AACN, 2008) and appropriate graduate program standards and guidelines.**

This key element is not applicable if the master's degree program is not under review for accreditation.

Elaboration: The master's degree program incorporates professional nursing standards and guidelines relevant to that program and each track offered. The program clearly demonstrates where and how content, knowledge, and skills required by identified sets of standards are incorporated into the curricula.

Master's degree APRN education programs (i.e., clinical nurse specialist, nurse anesthesia, nurse midwife, and nurse practitioner) incorporate separate comprehensive graduate-level courses to address the APRN core, defined as follows:

- *Advanced physiology/pathophysiology, including general principles that apply across the lifespan;*
- *Advanced health assessment, which includes assessment of all human systems, advanced assessment techniques, concepts and approaches; and*
- *Advanced pharmacology, which includes pharmacodynamics, pharmacokinetics, and pharmacotherapeutics of all broad categories of agents.*

Additional APRN core content specific to the role and population is integrated throughout the other role and population-focused didactic and clinical courses.

Master's degree programs that have a direct care focus but are not APRN education programs (e.g., nurse educator and clinical nurse leader) incorporate graduate-level content addressing the APRN core.

These programs are not required to offer this content as three separate courses.

No changes/NA

III-D. DNP curricula are developed, implemented, and revised to reflect relevant professional nursing standards and guidelines, which are clearly evident within the curriculum and within the expected student outcomes (individual and aggregate).

- **DNP program curricula incorporate professional standards and guidelines as appropriate.**
 - a. **All DNP programs incorporate *The Essentials of Doctoral Education for Advanced Nursing Practice* (AACN, 2006) and additional relevant professional standards and guidelines if identified by the program.**
 - b. **All DNP programs that prepare nurse practitioners incorporate *Criteria for Evaluation of Nurse Practitioner Programs* (NTF, 2016).**
- **Graduate-entry DNP program curricula incorporate *The Essentials of Baccalaureate Education for Professional Nursing Practice* (AACN, 2008) and appropriate graduate program standards and guidelines.**

This key element is not applicable if the DNP program is not under review for accreditation.

Elaboration: The DNP program incorporates professional nursing standards and guidelines relevant to that program and each track offered. The program clearly demonstrates where and how content, knowledge, and skills required by identified sets of standards are incorporated into the curricula. DNP APRN education programs (i.e., clinical nurse specialist, nurse anesthesia, nurse midwife, and nurse practitioner) incorporate separate comprehensive graduate-level courses to address the APRN core, defined as follows:

- *Advanced physiology/pathophysiology, including general principles that apply across the lifespan;*
- *Advanced health assessment, which includes assessment of all human systems, advanced assessment techniques, concepts and approaches; and*
- *Advanced pharmacology, which includes pharmacodynamics, pharmacokinetics, and pharmacotherapeutics of all broad categories of agents.*

Additional APRN core content specific to the role and population is integrated throughout the other role and population-focused didactic and clinical courses.

Separate courses in advanced physiology/pathophysiology, advanced health assessment, and advanced pharmacology are not required for students enrolled in post-master's DNP programs who hold current national certification as advanced practice nurses, unless the program deems this necessary.

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The DNP program and Post-Graduate APRN Certificate program curricula prepare graduates and completers for advanced levels of nursing practice. The curricula build on a baccalaureate and/or master's foundation, depending on the level of entry of the student. The DNP program and Post-Graduate APRN Certificate program incorporate *The Essentials of Doctoral Education for Advanced Nursing Practice* (AACN, 2006), *The Essentials of Master's Education in Nursing* (AACN, 2011) and additional relevant professional standards and guidelines for each specialty area. The DNP program and Post-Graduate APRN Certificate program also incorporate the Criteria for Evaluation of Nurse Practitioner Programs (NTF, 2016) for those students who are pursuing advanced practice certification as nurse practitioners (See Criteria for Evaluation of Nurse Practitioner Programs Documentation Worksheet, Appendix E). Because the DNP program and Post-Graduate APRN Certificate program prepare advanced practice nurses (APRNs), they prepare students to meet eligibility requirements for national specialty APRN certification. The DNP program and Post-Graduate APRN Certificate program use the Standards for Nurse Anesthesia Education for those students who are pursuing advanced practice certification as nurse anesthesiologists.

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The DNP program and Post-Graduate APRN Certificate program concentrations meet the needs of the community by preparing APRNs to practice at a high level and conduct continuous quality improvement. Students learn that every person deserves the best evidence-based care, and they do that by learning to conduct continuous quality improvement and teaching others how to do quality improvement. DNP program and Post-Graduate APRN Certificate program concentrations are extraordinary. DNP program concentrations include dual concentrations in Family Nurse Practitioner/Psychiatric Mental Health Nurse Practitioner, Family Nurse Practitioner/Adult- Gerontology Acute Care Nurse Practitioner, Pediatric Acute Care/Pediatric Primary Care Nurse Practitioner. Illustration of the relationship of the DNP Essentials to DNP program and Post-Graduate APRN Certificate outcomes is in [Table 1.4a and 1.4b](#) (located in Standard I) and in the Virtual Resource Room. National specialty standards are compared with DNP program and Post-Graduate APRN Certificate course outcomes by specific concentration in Table 3.2. Please note that the outcomes for each concentration are the same for the DNP and Post-Graduate APRN Certificate Program, with the exception of the Post-Graduate APRN (MSN) AGACNP Certificate. Examples are also located in Standard I (See DNP Essentials Mapped with Courses, Appendix J).

III-E. Post-graduate APRN certificate program curricula are developed, implemented, and revised to reflect relevant professional nursing standards and guidelines, which are clearly evident within the curriculum and within the expected student outcomes (individual and aggregate). Post-graduate APRN certificate programs that prepare nurse practitioners incorporate *Criteria for Evaluation of Nurse Practitioner Programs* (NTF, 2016).

This key element is not applicable if the post-graduate APRN certificate program is not under review for accreditation.

Elaboration: The post-graduate APRN certificate program incorporates professional nursing standards and guidelines relevant to that program and each track offered. The program clearly demonstrates where and how content, knowledge, and skills required by identified sets of standards are incorporated into the curricula. APRN education programs (i.e., clinical nurse specialist, nurse anesthesia, nurse midwife, and nurse practitioner) incorporate separate comprehensive graduate-level courses to address the APRN core, defined as follows:

- *Advanced physiology/pathophysiology, including general principles that apply across the lifespan;*
- *Advanced health assessment, which includes assessment of all human systems, advanced assessment techniques, concepts and approaches; and*
- *Advanced pharmacology, which includes pharmacodynamics, pharmacokinetics, and pharmacotherapeutics of all broad categories of agents.*

Additional APRN core content specific to the role and population is integrated throughout the other role- and population-focused didactic and clinical courses.

Separate courses in advanced physiology/pathophysiology, advanced health assessment, and advanced pharmacology are not required for certificate students who have already completed such courses, unless the program deems this necessary.

No changes

III-F. The curriculum is logically structured to achieve expected student outcomes.

- **Baccalaureate curricula build on a foundation of the arts, sciences, and humanities.**
- **Master's curricula build on a foundation comparable to baccalaureate-level nursing knowledge.**
- **DNP curricula build on a baccalaureate and/or master's foundation, depending on the level of entry of the student.**
- **Post-graduate APRN certificate programs build on graduate-level nursing competencies and knowledge base.**

*Elaboration: Baccalaureate degree programs demonstrate that knowledge from courses in the arts, sciences, and humanities is incorporated into nursing practice. Graduate-entry programs in nursing incorporate the generalist knowledge common to baccalaureate nursing education as delineated in *The Essentials of Baccalaureate Education for Professional Nursing Practice* (AACN, 2008) as well as advanced nursing knowledge.*

*Graduate programs are clearly based on a foundation comparable to a baccalaureate degree in nursing. Graduate programs delineate how students who do not have a baccalaureate degree in nursing acquire the knowledge and competencies comparable to baccalaureate education in nursing as a foundation for advanced nursing education. Programs that move students from basic nursing preparation (e.g., associate degree or diploma education) to a graduate degree demonstrate how these students acquire the baccalaureate-level knowledge and competencies delineated in *The Essentials of Baccalaureate Education for Professional Nursing Practice* (AACN, 2008), even if they do not award a baccalaureate degree in nursing in addition to the graduate degree.*

*DNP programs, whether post-baccalaureate or post-master's, demonstrate how students acquire the doctoral-level knowledge and competencies delineated in *The Essentials of Doctoral Education for Advanced Nursing Practice* (AACN, 2006). If the program awards the master's degree as part of the DNP program, the program demonstrates how students acquire the master's-level knowledge and competencies delineated in *The Essentials**

of Master's Education in Nursing (AACN, 2011) and, if applicable, Criteria for Evaluation of Nurse Practitioner Programs (NTF, 2016).

The program provides a rationale for the sequence of the curriculum for each program.

No changes

III-G. Teaching-learning practices:

- support the achievement of expected student outcomes;
- consider the needs and expectations of the identified community of interest; and
- expose students to individuals with diverse life experiences, perspectives, and backgrounds.

Elaboration: Teaching-learning practices (e.g., simulation, lecture, flipped classroom, case studies) in all environments (e.g., virtual, classroom, clinical experiences, distance education, laboratory) support achievement of expected student outcomes identified in course, unit, and/or level objectives.

Teaching-learning practices are appropriate to the student population (e.g., adult learners, second language students, students in a post-graduate APRN certificate program), consider the needs of the program-identified community of interest, and broaden student perspectives.

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Teaching-learning practices and environments in the DNP program and Post-Graduate APRN Certificate program support the achievement of expected student outcomes.

Pg. 56

All DNP program and Post-Graduate APRN Certificate program students participate with students from the other UTHSC colleges during New Student Orientation.

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In just one of many examples embedded throughout our DNP program and Post-Graduate APRN Certificate program curricula, the DNP NMW faculty have developed two simulation scenarios with a woman from a diverse background and with a disability. These simulations confront issues of bias, and disparities related to diversity and disabilities. Another example involving Post-Graduate APRN Certificate Program students includes an intraprofessional OSCE that is conducted with the PMHNP and FNP students. In this OSCE, students participate in a scenario that involves postpartum depression with diverse patients affected by social determinants of health.

Pg. 57

Interactive case studies are used in all DNP program and Post-Graduate APRN Certificate program concentrations to examine patient presentations commonly seen.

Pg. 57

DNP program students in AG-ACNP, FNP, NNP, and NMW concentrations and Post-Graduate APRN Certificate Program students in FNP, and AGACNP have the following annual learning experiences in the MERI lab: deep suturing, skin biopsy, knee aspiration, chest tube insertion, and dermatology.

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The DNP program and Post-Graduate APRN Certificate program AG-ACNP concentrations use the ECG Academy that consists of video tutorials and mini “ChalkTalks.” ChalkTalks are “how to sessions” utilizing real ECGs analyzing tracings using a systematic approach.

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DNP program and Post-Graduate APRN Certificate program students have experience in rural health. As part of the Rural Health Scholars Program through the STEP UP & HELP program, DNP program and Post-Graduate APRN Certificate program students complete 10%-50% of clinical experiences on the CON Mobile Health Unit (MHU) and/or in a rural partnering clinic in rural counties in West Tennessee based on preceptor availability.

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DNP program and Post-Graduate APRN Certificate program on-campus experiences are specific for each concentration and range from one to three times a semester.

Pg. 58

Interactive case studies are used in the DNP program and Post-Graduate APRN Certificate program to examine patient presentations commonly seen in the family practice setting (See [DNP Case Studies - Samples](#), virtual resource room).

Pg. 58

DNP program and Post-Graduate APRN Certificate program students have opportunities to develop inter- and intra- professional collaboration skills.

Pg. 58

Additionally, annual interprofessional poverty simulations are held during DNP program and Post-Graduate APRN Certificate program New Student Orientation.

III-H. The curriculum includes planned clinical practice experiences that:

- **enable students to integrate new knowledge and demonstrate attainment of program outcomes;**
- **foster interprofessional collaborative practice; and**
- **are evaluated by faculty.**

Elaboration: To prepare students for a practice profession, each track in each degree program and each track in the post-graduate APRN certificate program affords students the opportunity to develop professional competencies and to integrate new knowledge in practice settings aligned to the educational preparation. Clinical practice experiences include opportunities for interprofessional collaboration. Clinical practice experiences are provided for students in all programs, including those with distance education offerings. Clinical practice experiences align with student and program outcomes. These experiences are planned, implemented, and evaluated to ensure students are competent to function as members of interprofessional teams at the level for which they are being prepared.

Programs that have a direct care focus (including, but not limited to, post-licensure baccalaureate and nurse educator tracks) provide direct care experiences designed to advance the knowledge and expertise of students in a clinical area of practice.

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The DNP program and Post-Graduate APRN Certificate program utilize a wide range of facilities including in-patient and community settings such as schools, health departments, community centers, clinics, providers’ offices, and hospitals to provide interprofessional clinical practice experiences for achievement of student and program outcomes. The CON has over 1300 active contracts with clinical agencies and develops new contracts for clinical placement as needed (See List of [Selected DNP Program](#)

[and Post-Graduate APRN Program Clinical Sites](#) and [Sample of Executed Contracts](#), virtual resource room).

Pg. 61

Reflective practice is integrated in DNP [program and Post-Graduate APRN Certificate program](#) clinical courses.

Pg. 62

All DNP [program and Post-Graduate APRN Certificate program](#) student clinical experiences are evaluated through formative and summative faculty evaluations of students ([See Faculty Evaluation of Student Clinical Experience- Sample](#), virtual resource room).

III-I. Individual student performance is evaluated by the faculty and reflects achievement of expected student outcomes. Evaluation policies and procedures for individual student performance are defined and consistently applied.

Elaboration: Evaluation of student performance is consistent with expected student outcomes. Grading criteria are clearly defined for each course, communicated to students, and applied consistently. Processes exist by which the evaluation of individual student performance is communicated to students. In instances where preceptors facilitate students' clinical learning experiences, faculty may seek input from preceptors regarding student performance, but ultimately faculty are responsible for evaluation of individual student outcomes. The requirement for evaluation of student clinical performance by qualified faculty applies to all students in all programs. Faculty evaluation of student clinical performance may be accomplished through a variety of mechanisms.

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The DNP [program and Post-Graduate APRN Certificate program](#) use formative and summative evaluation tools to evaluate student progress toward competence.

Pg. 62

DNP [program and Post-Graduate APRN Certificate program](#) faculty have the ultimate responsibility for evaluating clinical competence of graduates. DNP [program and Post-Graduate APRN Certificate program](#) students use a clinical tracking system, ProjectConcert, to track all clinical hours, codes, patient data, and patient outcomes. ProjectConcert also contains a list of preceptors, clinical sites, student's individualized plans of study, a place for preceptor and faculty evaluations of the student, and the student's evaluation of preceptors and clinical sites.

Pg. 62

Evaluation methods used to assess individual student performance are clearly stated in all DNP [program and Post-Graduate APRN Certificate program](#) course syllabi.

Pg. 63

Grading policies are identified in the UTHSC Catalog, as well as in each syllabus. The grading policy is consistently applied to all DNP [program and Post-Graduate APRN Certificate program](#) students. Only grades of "A", "B", or "C" are considered satisfactory. To be considered in good academic standing, a student must maintain a cumulative GPA of 3.0 or better. Students who do not meet progressions standards are reviewed by the Progressions Committee and an action plan is developed, if appropriate. Progressions standards for DNP [program and Post-Graduate APRN Certificate program](#) students are identified in the [UTHSC Academic Bulletin: Progression Review](#).

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Students' practicum courses are evaluated with specific assessment tools, correlated with outcomes of the course (See [Faculty Evaluation of Student Clinical Experience- Sample](#), virtual resource room).

Pg 63

The CON DNP program and Post-Graduate APRN Certificate program outcomes are published in the [UTHSC Academic Bulletin](#) which is available online to all incoming students. This Bulletin clearly defines the outcomes expected from students upon graduation. DNP students evaluate how well they have met learning outcomes on the AACN/Skyfactor Benchworks© DNP Exit Survey. The Skyfactor© Exit Assessment is only done for students who are graduating with a diploma, not for certificate completers. Preceptor and faculty evaluations of clinical experiences for each Post-Graduate APRN Certificate student are used to determine that the outcomes have been met. Post-Graduate APRN Certificate program students are invited to qualitative focus groups where they can provide anonymous feedback about didactic, clinical, and all other experiences they have while in the program. Because there are so few Post-Graduate APRN Certificate Program students, anonymity cannot not be guaranteed in other evaluation methods. Additionally, indicators such as the 100% pass rate for Post-Graduate APRN Certificate students are used to establish that outcomes expected from students upon completion have been met.

III-J. The curriculum and teaching-learning practices are evaluated at regularly scheduled intervals, and evaluation data are used to foster ongoing improvement.

Elaboration: Faculty use data from faculty and student evaluation of teaching-learning practices to inform decisions that facilitate the achievement of student outcomes. Such evaluation activities may be formal or informal, formative or summative. The curriculum is regularly evaluated by faculty and revised as appropriate.

Pg. 63

The DNP program and Post-Graduate APRN Certificate program faculty participate in an annual review of all required DNP program and Post-Graduate APRN Certificate program courses consistent with the CON Evaluation Manual, Timeline, and Master Evaluation Plan.

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Additionally, DNP/Post-Graduate APRN Certificate Program concentration coordinators complete yearly concentration summaries. Course and DNP/Post-Graduate APRN Certificate Program concentration summaries are reviewed by the DNP/Post-Graduate APRN Certificate Program faculty, DNP Program Director and Executive Associate Dean for Academic and Student Affairs each year and used to make relevant curricular revisions. A yearly DNP Program/Post-Graduate APRN Certificate Program retreat provides an opportunity for sharing course summaries and recommendations for curricular changes.

Standard IV: Program Effectiveness – Assessment and Achievement of Program Outcomes

IV-A. A systematic process is used to determine program effectiveness.

Elaboration: The program (baccalaureate, master's, DNP, and/or post-graduate APRN certificate) uses a systematic process to obtain relevant data to determine program effectiveness. The process:

- *is written, is ongoing, and exists to determine achievement of program outcomes;*
- *is comprehensive (i.e., includes completion, licensure, certification, and employment rates, as required by the U.S. Department of Education; faculty outcomes; and other program outcomes);*
- *identifies which quantitative and/or qualitative data are collected to assess achievement of the program outcomes;*

- includes timelines for data collection, review of expected and actual outcomes, and analysis; and is periodically reviewed and revised as appropriate.

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The key quantitative performance indicators that are used to assess overall student performance and achievement of curriculum outcomes in the DNP program and Post-Graduate APRN Certificate program are completion rates, certification pass rates, employment rates, and program satisfaction data collected from students, graduates, and their employers. Because there are so few Post-Graduate APRN Certificate Program students, anonymity cannot not be guaranteed in other quantitative evaluation methods, like SkyFactor©. Additionally, indicators such as the 100% completion rate and 100% pass rate for Post-Graduate APRN Certificate students are used to establish that outcomes expected from students upon completion have been met.

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Qualitative data is obtained through focus groups conducted by an external consultant with students throughout the DNP program and Post-Graduate APRN Certificate program. Post-Graduate APRN Certificate program students are invited to be in the focus groups.

IV-B. Program completion rates demonstrate program effectiveness.

This key element is not applicable to a degree or certificate program that does not yet have individuals who have completed the program.

Elaboration: The program (baccalaureate, master's, DNP, and/or post-graduate APRN certificate) demonstrates achievement of required program outcomes regarding completion in any one of the following ways:

- the completion rate for the most recent calendar year (January 1 through December 31) is 70% or higher;
- the completion rate is 70% or higher over the three most recent calendar years;
- the completion rate is 70% or higher for the most recent calendar year when excluding students who have identified factors such as family obligations, relocation, financial barriers, and decisions to change major or to transfer to another institution of higher education; or
- the completion rate is 70% or higher over the three most recent calendar years when excluding students who have identified factors such as family obligations, relocation, financial barriers, and decisions to change major or to transfer to another institution of higher education.

The program identifies the cohort(s), specifies the entry point, and defines the time period to completion, each of which may vary by track; however, the program provides the completion rate for the overall degree/certificate program. The program describes the formula it uses to calculate the completion rate. The program identifies the factors used and the number of students excluded if some students are excluded from the calculation.

No changes

IV-C. Licensure pass rates demonstrate program effectiveness.

This key element is not applicable to a program that does not prepare individuals for licensure examinations or does not yet have individuals who have taken licensure examinations.

Elaboration: Programs with a pre-licensure track demonstrate achievement of required program outcomes regarding licensure. The program demonstrates that it meets the licensure pass rate of 80% in any one of the following ways:

- the NCLEX-RN® pass rate for each campus/site and track is 80% or higher for first-time takers for the most recent calendar year (January 1 through December 31);
- the pass rate for each campus/site and track is 80% or higher for all takers (first-time and repeaters who pass) for the most recent calendar year;

- the pass rate for each campus/site and track is 80% or higher for all first-time takers over the three most recent calendar years; or
- the pass rate for each campus/site and track is 80% or higher for all takers (first-time and repeaters who pass) over the three most recent calendar years.

For each campus/site and track, identify which of the above options was used to calculate the pass rate.

No changes/NA

IV-D. Certification pass rates demonstrate program effectiveness.

This key element is not applicable to a degree or certificate program that does not prepare individuals for certification examinations or does not yet have individuals who have taken certification examinations.

Elaboration: The master's, DNP, and post-graduate APRN certificate programs demonstrate achievement of required program outcomes regarding certification. For programs that prepare students for certification, certification pass rates are obtained and reported for those completers taking each examination, even when national certification is not required to practice in a particular state.

For programs that prepare students for certification, data are provided regarding the number of completers taking each certification examination and the number that passed. A program is required to provide these data regardless of the number of test takers.

A program that prepares students for certification demonstrates that it meets the certification pass rate of 80%, for each examination, in any one of the following ways:

- the pass rate for each certification examination is 80% or higher for first-time takers for the most recent calendar year (January 1 through December 31);
- the pass rate for each certification examination is 80% or higher for all takers (first-time and repeaters who pass) for the most recent calendar year;
- the pass rate for each certification examination is 80% or higher for all first-time takers over the three most recent calendar years; or
- the pass rate for each certification examination is 80% or higher for all takers (first-time and repeaters who pass) over the three most recent calendar years.

The program identifies which of the above options was used to calculate the pass rate. The program provides certification pass rate data for each examination but, when calculating the pass rate described above, may combine certification pass rate data for multiple examinations relating to the same role and population.

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Program Response:

The CON has established a benchmark of 80% for first-time combined DNP program and Post-Graduate APRN Certificate program certification pass rates. The certification pass rate for first-time certification exam takers in the combined concentrations in the DNP program and Post-Graduate APRN Certificate program exceeded the 80% benchmark for 2021-2023. The pass rate for all exam takers 2021-2023 is 100% for those concentrations in which students took the certification exam. The nurse-midwifery program will graduate the first students in spring 2024; thus, there are no certification exam pass rate data for the nurse midwifery concentration. The nurse anesthesiology program had a 75% first-time pass rate in 2023. All nurse anesthesiology graduates repeated the exam within 30 days and passed. According to the Council on Accreditation (COA) for nurse anesthesiology, if students retake the certification exam within 30 days and pass, it is considered a first-time pass rate for COA. We did not count the nurse anesthesiology certification pass rate as a first-time pass rate for the DNP program and Post-Graduate APRN Certificate program; the overall DNP program and Post-Graduate APRN Certificate program first-time pass rate for certification exams was 97%, 2021-2023. In 2021, the NNP concentration and the PNP

PC concentration had a 50% first-time pass rate. Both concentrations had two students and one student in each program failed the certification exam on the first attempt but passed on the second attempt. The postgraduate and post-DNP certificates first-time pass rate on certification exams was 100% 2021-2023. Below Table 4.3 provides 2021-2023 DNP program certification and Table 4.4 provides post-graduate APRN certificate programs pass rates by concentration.

IV-E. Employment rates demonstrate program effectiveness.

This key element is not applicable to a degree or certificate program that does not yet have individuals who have completed the program.

Elaboration: The program demonstrates achievement of required outcomes regarding employment rates.

- *The employment rate is provided separately for each degree program (baccalaureate, master’s, and DNP) and the post-graduate APRN certificate program.*
- *Data are collected within 12 months of program completion. Specifically, employment data are collected at the time of program completion or at any time within 12 months of program completion.*
- *The employment rate is 70% or higher. However, if the employment rate is less than 70%, the employment rate is 70% or higher when excluding graduates who have elected not to be employed.*

Program Response:

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The CON has established a benchmark of 80% for employment rates of DNP program and Post-Graduate APRN Certificate program graduates within 12 months of graduation. Table 4.5 below demonstrates the achievement of this benchmark. AACN/Skyfactor Benchworks© results and student reports for 2021-2023 indicate that 100% of the graduates of the DNP program and Post-Graduate APRN Certificate program seeking employment are employed within six months of graduation. Many, if not most DNP program and Post-Graduate APRN Certificate program students have job offers well before graduation, See Table 4.5 below that gives 2021- 2023 employment rates of DNP program graduates and Post-Graduate APRN Certificate program completers.

Table 4.6: Post-graduate APRN Certificate Program Employment Rates					
Definition: Rates of employment are calculated by determining the percent of post-graduate APRN certificate program students who are employed within 12 months of completion.					
Benchmark: 80% of Post-graduate APRN certificate program graduates will be employed within 12 months of graduation.					
Source of Information:	CON Exit Contact Assessment Skyfactor DNP Exit and Alumni Personal contact with faculty	Report of the Data: Including Actual Level of Achievement			
	Assessment Method	Multiple methods			
Time/Frequency of Assessment	Month of completion, 12-months, and 3-years post-graduation	Completers 2021	Completers 2022	Completers 2023	2021-2023 Average
Location of Documentation	College of Nursing Virtual Resource Room				
Person Responsible	Asst Dean Student Affairs and Evaluation	100%	100%	100%	100%

Table 4.8: 2021-2023 Post-graduate APRN Certificate Program Student Employment Rates by Concentration

<i>Definition: Rates of employment are calculated by determining the percent of post-graduate APRN certificate program students who are employed within 12 months of completion.</i>					
<i>Benchmark: 80% of Post-graduate APRN completers will be employed within 12 months of completion.</i>					
Report of the Data: Including Actual Level of Achievement					
Graduates	AG-ACNP	FNP	PACNP	PNP	PMHNP
2021	100%	NA	NA	NA	NA
2022	NA	NA	100%	100%	100%
2023	NA	NA	100%	NA	100%
Average 2021-2023	100%	NA	100%	100%	NA
Source of Information:	CON Exit Contact Assessment Skyfactor DNP Exit and 1 year Alumni Assessment Personal contact with CON				
Assessment Method:	CON Exit Contact Assessment Skyfactor DNP Exit and 1 year Alumni Assessment				
Time/Frequency of Assessment:	Month of graduation, 12-months,				
Location of Documentation:	College of Nursing Virtual Resource Room				
Person Responsible:	Asst Dean Student Affairs and Evaluation				

IV-F. Data regarding completion, licensure, certification, and employment rates are used, as appropriate, to foster ongoing program improvement.

This key element is applicable if one or more of the following key elements is applicable: Key Element IV-B (completion), Key Element IV-C (licensure), Key Element IV-D (certification), and Key Element IV-E (employment).

Elaboration: The program uses outcome data (completion, licensure, certification, and employment) for improvement.

- Discrepancies between actual and CCNE expected outcomes (program completion rates 70%, licensure pass rates 80%, certification pass rates 80%, employment rates 70%) inform areas for improvement.
- Changes to the program to foster improvement and achievement of program outcomes, as appropriate, are deliberate, ongoing, and analyzed for effectiveness.
- Faculty are engaged in the program improvement process.

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Although the certification exam pass rates for all the concentrations in the DNP program and Post-Graduate APRN Certificate program exceed the CCNE 80% benchmark for certification exam pass rates, faculty continuously implement strategies to improve in order to attain the highest possible certification pass rates.

IV-G. Aggregate faculty outcomes demonstrate program effectiveness.

Elaboration: The program demonstrates achievement of expected faculty outcomes. In order to demonstrate program effectiveness, outcomes are consistent with and contribute to achievement of the program’s mission and goals and are congruent with institution and program expectations. Expected faculty outcomes:

- are identified for the faculty as a group;
- specify expected levels of achievement for the faculty as a group; and

- *reflect expectations of faculty in their roles.*

Actual faculty outcomes are compared to expected levels of achievement. Actual faculty outcomes are presented in the aggregate. If expected faculty outcomes vary for different groups of faculty (full time, part-time, adjunct, tenured, non-tenured, or other), actual faculty outcomes may be presented separately for each different group of faculty.

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DNP **program and Post-Graduate APRN Certificate program** faculty have been recipients of numerous teaching awards. UTHSC Student Government Excellence Teaching Award for the UTHSC College of Nursing was presented to Crystal Walker in 2023. Laura Reed, FNP Concentration Coordinator, won the award in 2022. Previous winners include Drs. Cory Wilbanks, Patricia Jones-Purdy, and Sam Maceri. Jackie Sharp, PMHNP Concentration Coordinator, received the College of Nursing 2022 Outstanding Teacher Award sponsored by the University of Tennessee Alumni Association.

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The CON's Benchmark for Faculty Clinical Practice is 85% of advanced practice faculty will practice in their specific areas of practice. All faculty with advanced practice certification are allotted time to practice in order to remain current in their specialty and mentor students in their clinical settings. Currently, approximately 90% of the DNP **program and Post-Graduate APRN Certificate program** faculty practice in their specialty. Faculty are recognized locally, nationally and internationally as leaders in their specialty areas.

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Faculty Accomplishments in Research/Scholarship: The CON's benchmark for faculty research/scholarship is: 100% of tenure track faculty participate in research/scholarship. This benchmark has been achieved as evidenced by annual APPR documents submitted to the department chairs in DM. Nursing faculty have an extensive record of grant funding and publications as illustrated in Table 4.10. below. Source data can be found in [Table 4.11.](#) and [Table 4.12.](#) in the virtual resource room. Faculty have been very successful in acquiring HRSA Advanced Nursing Education grants to support the DNP **program and Post-Graduate APRN Certificate program.**

IV-H. Aggregate faculty outcome data are analyzed and used, as appropriate, to foster ongoing program improvement.

Elaboration: The program uses faculty outcome data for improvement.

- *Faculty outcome data are used to promote ongoing program improvement.*
- *Discrepancies between actual and expected outcomes inform areas for improvement.*
- *Changes to foster achievement of faculty outcomes, as appropriate, are deliberate, ongoing, and analyzed for effectiveness.*
- *Faculty are engaged in the program improvement process.*

No Changes

IV-I. Program outcomes demonstrate program effectiveness.

Elaboration: The program demonstrates achievement of outcomes other than those related to completion rates (Key Element IV-B), licensure pass rates (Key Element IV-C), certification pass rates (Key Element IV-D), employment rates (Key Element IV-E), and faculty (Key Element IV-G).

Program outcomes are defined by the program and incorporate expected levels of achievement. The program describes how outcomes are measured. Actual levels of achievement, when compared to expected levels of

achievement, demonstrate that the program, overall, is achieving its outcomes. Program outcomes are appropriate and relevant to the degree and certificate programs offered.

No Changes

IV-J. Program outcome data are used, as appropriate, to foster ongoing program improvement.

Elaboration: For program outcomes defined by the program:

- Actual program outcomes are used to promote program improvement
- Discrepancies between actual and expected outcomes inform areas for improvement.
- Changes to the program to foster improvement and achievement of program outcomes, as appropriate, are deliberate, ongoing, and analyzed for effectiveness.
- Faculty are engaged in the program improvement process.

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The CON DNP **program and Post-Graduate APRN Certificate program** is evaluated using several outcome measures. Evaluation is completed at the course, concentration, and program level. Courses are evaluated by students which helps to inform faculty evaluation (See [DNP Course and Faculty Evaluation Templates](#), virtual resource room). At the conclusion of each course faculty complete a course summary evaluation which includes student and faculty evaluation data. Faculty review the course and consider evaluations when making recommendations for changes in the course. At the program level several outcome measures are used including annual concentration summaries that include certification pass rates and end of program evaluation assessed through Skyfactor Benchworks© (for DNP Program Students) and focus groups. The data are summarized and reported at DNP **program and Post-Graduate APRN Certificate program** meetings (See [DNP Course Summary Template](#), virtual resource room).

At the July 10, 2023, DNP **program and Post-Graduate APRN Certificate program** retreat, graduation, recruitment, and admission data for the 2022-2023 academic year were reviewed and discussed (See [DNP End of Year Report Presentation and Agenda](#), virtual resource room). The DNP Program director shared findings from student course evaluations. Findings were discussed and faculty suggested changes that could be made for program improvement based on these data. An example of a program change that was agreed upon was the establishment of monthly meetings for students and the DNP program director beginning September 2023. The meetings are held via Zoom on the last Monday of every month except December. These meetings provide students with access to the DNP **program and Post-Graduate APRN Certificate program** leadership and faculty and give students the opportunity to ask questions and seek clarification on issues of concern.