Kansas State Board of Nursing

Total Program Evaluation – Suggestions for Format

Board regulations require a written systematic evaluation plan for nursing programs. The plan shall provide evidence of program evaluation and effectiveness and should be used for ongoing program improvement.   Suggestions for what to include:

- Evaluative criteria – what is to be evaluated (measured to determine if there is a need for change)?
- Methodology – how will the criteria be evaluated (measured to see how it meets expectations)?

- Frequency of evaluation – how frequently will the faculty review the evaluation data for decision-making and possible revision?

- Assignment of responsibility – what individual or group is responsible to ensure that this evaluation is done and the decision is implemented?

- Indicators (benchmarks) of program and instructional effectiveness – what is the desired outcome of the evaluation?

- Data – real findings from the evaluation.

- Outcomes – decisions made by the faculty after reviewing the data and implications (decision recorded in the faculty minutes based upon the data and plan for implementing new measures).

Broad areas that should be periodically evaluated:

1) Organization and administration of the program:

    Decide what evaluations will be carried out (these are neither inclusive nor essential):

    - Effectiveness of the administration of the governing entity (communication patterns, provision of needed resources for program, budgetary process, etc.)

    - Effectiveness of the program director

    - Effectiveness of the organizational structure of the faculty organization (committees, meetings, decision-making process, implementing change, etc.)

    - Adequacy of faculty policies (adherence to policies and adequacy of policies for the success of the program)

2) Philosophy/mission and objectives/outcomes:

    These are more abstract, but it is important that the philosophy and program objectives are reviewed regularly (not necessarily frequently). They can be considered for

- Currency with present-day nursing care and practices

- Consistent with each other and with the total curriculum. Major concepts should flow from the philosophy to the program objectives, and then on to courses and course objectives.

- Programs would expect that all faculty agree that there is congruence or a decision should be made to make revisions. Revisions could be editorial, concept-based, or a total readjustment of the curriculum.

3) Program of Study, Curriculum, and Instructional Techniques:

This is an evaluation of the nursing curriculum and whether it prepares graduates for safe, competent practice and demonstrated by clinical evaluations and licensure by passing the NCLEX examination. Areas that may be included in this evaluation area are:

- Course evaluations
- Faculty evaluations
- End of program evaluations
- Employer evaluations
- NCLEX examination pass rates
- Grades of student in didactic and clinical performance
- Student satisfaction with the program
- Alumni evaluations
- Nursing accreditation, if applicable

4) Education facilities, resources, and services:

This area evaluates the adequacy of physical resources to provide an environment where the students can achieve the program objectives. Areas that may be included in this evaluation area are:

- Course evaluations (questions which focus on the education facilities, resources, and student services)
- Faculty evaluations of the educational resources and budgetary process
- Faculty satisfaction with educational resources and services

5) Affiliating agencies and clinical learning activities:

This evaluation area should be considered following each clinical rotation to ensure that the clinical learning experiences make it possible for students to meet the program and clinical

objectives, are supportive of students in the settings, and provide an environment where faculty can assist students to put didactic content into practice. Areas that may be included in the evaluation are:

- Evaluations of the clinical settings by students and faculty

- Evaluations by clinical sites of faculty and students

- Adequacy of clinical evaluation tools to provide opportunities for faculty to document students' competencies and behaviors in the clinical setting while distinguishing between student abilities or weaknesses. Interrater reliability activities with check lists to itemize areas of agreement/disagreement between faculty.

6) Students' achievements:

This evaluation area can follow individual students or cohorts to follow progress and success or weaknesses across time and in comparison with other cohorts. Evaluation might include:

- Comparison of grades across courses and among students and cohorts to gain aggregate data about students' performance
- Comparison with students nationwide if data from standardized examinations is available
- Comparison of students' clinical evaluations across time and among students to gain an aggregate picture of students' performance
- Comparison of students' performance on standardized examinations as compared to course/clinical grades in program of study

7) NCLEX performance – This could be a separate item or included in (3) or (6)

8) Graduates' nursing competence – This could be a separate item or included in (3) or (6)

9) Faculty members' performance:

The evaluation of the faculty members' instructional effectiveness might be included in (3). Faculty may be evaluated in this area for their:

- Activities to maintain clinical competence
- Professional development
- Contributions to scholarship
- Contributions to governance at the governing entity
- Contributions to the nursing program organization
- Other (these are not inclusive nor essential)

The evaluation plan itself should be reassessed periodically for its effectiveness as a tool. In addition, all methods of evaluation and tools should be reconsidered for their value in accumulating the correct data.

If used appropriately, all decisions and changes made in the nursing program will be evidence-based. New areas for evaluation can be added as needed.