CNM ANNUAL STUDENT LEARNING ASSESSMENT REPORT
Due to the Student Academic Assessment Committee by October 15

CNM>
Central New Mexico
Community College

PART 1: REPORT INFORMATION

Report Year and Contact Information			
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Academic Year	**Contact Person**	**CNM Email**	**CNM Office Extension**

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

PART 2: CONTEXT IN WHICH THE ASSESSMENT TOOK PLACE

Program/Area Highlights and Successes (Wherever applicable, include course completion rates, job placement outcomes, and licensing examination pass rates. See the program information dashboard at https://livecnm.sharepoint.com/sites/Dashboards/SitePages/Program%20Information%20Dashboard.aspx (access restricted to CNM employees) and other reports at https://www.cnm.edu/depts/opie.)

Licensure Exam Pass rates:

For the past thee years, graduate performance on the NCLEX-RN nursing licensure exam has been steadily rising. In calendar year 2017, 83.80% of first-time testers passed the exam (n=216). The New Mexico Board of Nursing requested a new data point in 2018 calculating first and second attempts which raised the number to 92.81%. These are in alignment with the official NMBON end of year reports. These numbers reflect the AASN only graduates as the AASN/BSN graduates (with whom we share outcomes data) are reported separately. The dual enrollment students have a 97.06% board pass rate (n=34) for calendar year 2017. Combining the two cohorts (all are ultimately AASN grads), the cumulative calendar year pass rate is 85.23%

For AY 2017-18, the numbers are even stronger. AASN only grads enjoyed a 90.15% first time licensure pass rate while the BSNs tested with 97.62% success. Aggregating the two cohorts together (n=245), students achieved 91.43% success.

Program Completion:

Program completion in the nursing program is also impressive, but on a slow decline over the past three years. The dual enrolled AASN/BSN students (n=48) have the highest levels of retention, but cannot be calculated at 100% of program length as they earn the AASN from CNM in the fifth (5th) semester. For AY 2017-18, 89.58% of students completed the program with the dual degree, 4.17% moved from the BSN to the AASN only option, and 6.25% of these students voluntarily withrew from the program to move with their families out of state. For the AASN only students (n=234), 67.09% completed in 100% of program length and 77.78% completed in 150%. The LPN mobility students are our lowest completers, but they are also our smallest subgroup (n=23). For AY 17-18, only 65.22% graduated in 150% of time; 26.09% accrued academic failures and 8.7% withdrew voluntarily. The most common reason sited for the failures and

withdrawals for this population is work/school balance. Aggregate data for all three sub-groups (n=305) is as follows: 55.74% graduate in 100% of program length, 78.69% graduate within 150% of program length, 0.66% graduated at over 150%, 17.70% accrued a program failure, and 2.95% withdrew voluntarily for non-academic reasons.

In comparison, drawing data from the 2017 Accreditation Commission for Education of Nurses (ACEN) report to constitutents, the average program completion for ACEN accredited associate degree nursing programs is 73.69%. While we are above the national average, the program is looking at multiple factors that may impact student success in hopes of improving program retention rates.

Graduate Employment:

This is an area of significant concern. Previously, the ACEN allowed for aggregation of the rates for student employment and those students actively pursuing undergraduate degrees. This combined number placed CNM historically in the 90% range. However, this year ACEN accredited programs were asked to report these data points separately to more accurately provide data to the U.S. Department of Education as well as to the public.

The most recent graduate employment data (AASN graduate response rate 79.1% with n=185 out of 234 graduates), provided by the CNM organizational planning and institutional effectiveness (OPIE) team reflect that only 34.59% of AASN graduates were employed as nurses whereas 64.32% were delaying entry into the profession to continue their education. It should be noted that the graduate employment survey included both AASN and AASN/BSN graduates. At this time, the ACEN does not have updated national averages for comparison as the first annual reports requiring this disaggregation are being collected in Oct/Nov 2018. It should also be noted that only 1.08% of graduate survey respondants (n=2) are actively seeking employment but have not secured it.

Changes Implemented During the Past Year in Support of Student Learning

Licensure exam pass rates:

While NCLEX-RN pass rates are strong, the program is always interested in continuous process improvement. In 2017, the major electronic resources used by students underwent a significant upgrade. Nursing students take nationally benchmarked specialty exams in each of the four (4) semesters. Students are nationally benchmarked at a score of 850, but comprehensive analysis of student progression reflects a benchmark at CNM of 825. Students who do not score at or above the CNM benchmark are permitted an opportunity to take a second version of the exam. Remediation was always available to students, but with the upgrade, it is considerably easier for students to access, complete, and track their remediation. Overall CNM scores are above national benchmarks, with second time testers improving more dramatically since the new remediation was implemented.

Program completion:

Students performance in the first semester of the nursing program is historically strong. However, the second semester of the program has proven to be challenging for our students. It is not uncommon for students to fail one (1) to two (2) classes in that term. The program has seen a significant increase in the number of students failing three (3) and four (4) classes. While some of these students are experiencing external issues outside of their control, the majority are reporting that they are not prepared for the rigors of the classes.

Rather than decrease the rigor of the second semester courses, the instructors are finding strategies to raise the bar in the first term in order to condition students better in the areas of time management and critical thinking to better mirror the expectations in the second term. This includes having students spend more time (through assignments) in their online resources and increasing the level of difficulty in exams from knowledge/understanding level questions to include more analysis/application. Attendance in the first term didactic class has been improved by offering more in-class opportunities to earn points which has also anecdotally improved student outcomes. Students are also encouraged to attend instructors' office hours earlier in the term, with instructors

providing more intrusive advisement and academic counseling. It is too early to determine if these strategies are successful or to provide valid quantitative outcomes.

Graduate employment:

In early 2018, the 2017 employment data was released by OPIE. It was early enough in the semester to allow the program director and capstone instructor to implement interventions to improve the outcomes. The program director was allowed time in the capstone seminar to address the employment issue with the current graduating classes to describe why waiting to secure the first job is not in the students' best interest. Most RN to BSN programs lack a directly supervised clinical component which means that program graduates could be a year or more removed from their most recent hands-on clinical experience when they enter the workforce. Further, these students are not availing themselves of employer funded tuition assistance programs. Finally, delaying entry to practice may find students ineligible for some employer funded transition to practice training opportunities. Senior students are provided with this information with the intent that they will use this information to enter the workforce expediently.

In addition to the classroom strategy, this information has been shared with communities of interest. The program director has spoken at the New Mexico Hosptial Association, to the New Mexico Nurses' Association, with the NMNEC leadership council, and with the program's advisory committee. Clinical partners have the opportunity to recruit students in senior levels through their participation in the Student Nurses' Association meetings which occur weekly.

It will be summer of 2019 before the ACEN releases its 2018 report to constitutents so the program can evaluate if our program is local or nationwide. If this is a nationwide issue, there will be opportunities to research and strategize on a broad scale.

PART 3: REPORT ON ASSESSMENT OF STUDENT LEARNING

Assessment Method	Type of Assessment Tool	Population or Course(s) Assessed	Graduate Learning Outcome(s) Assessed	Mastery Level (E.g., "Minimum score of 3 on a rubric scaled 0-4" or "Minimum score of 75%")	Targeted % Achieving Mastery	Outcome
HESI E2 Exit Exam	Direct & External	NRSG 2899 Capstone	GLO – 1 Integrate diverse patient values, beliefs, and attitudes into plan of care for patients with chronic illness	At least 75% of students will achieve HESI Score of 825 or higher in GLO-1 specific categories	86%	Target met
HESI E2 Exit Exam	Direct & External	NRSG 2899 Capstone	GLO – 2 Interpret and analyze factors and system contributions that impact the quality and safety of nursing practice	At least 75% of students will achieve HESI Score of 825 or higher in GLO-2 specific categories	84%	Target met

HESI E2 Exit Exam	Direct & External	NRSG 2899 Capstone	GLO – 3 Integrate an evidence-based approach in the delivery and evaluation of nursing care to acutely ill patients across the lifespan	At least 75% of students will achieve HESI Score of 825 or higher in GLO-3 specific categories	84%	Target met
HESI E2 Exit Exam	Direct & External	NRSG 2899 Capstone	GLO – 4 Evaluate the use of policies and procedures within the acute care setting	At least 75% of students will achieve HESI Score of 825 or higher in GLO-4 specific categories	78%	Target met
HESI E2 Exit Exam	Direct & External	NRSG 2899 Capstone	GLO – 5 Effectively collaborate with the healthcare team in the delivery of patient care	At least 75% of students will achieve HESI Score of 825 or higher in GLO-5 specific categories	75%	Target met
HESI E2 Exit Exam	Direct & External	NRSG 2899 Capstone	GLO – 6 Integrate use of appropriate technology for the delivery of nursing care to acutely ill patients	At least 65% of students will achieve HESI Score of 825 or higher in GLO-6 specific categories (lower threshold due to limited number of available questions in applicable categories).	69%	Target met
Final summative clinical evaluation	Direct & Internal	NRSG 2515	GLOs 1-6 as listed above	95% of students will attain grades of satisfactory or better in all categories of the final summative evaluation for the program.	98%	Target met

Summary of Assessment Findings

Students must take a standardized, commercially produced licensure predictor exam in the capstone course. Students have two (2) attempts at the test. If students score less than the CNM benchmark of 825, students must retake the test. If scores go up, the higher of the two scores is entered into the gradebook. If the score goes down, the two (2) conversion scores are averaged and that grade is entered. The benchmark was established by studying student performance on the licensure exam in comparison with their predictor exam score(s) and by the number of weeks students tested after the date of degree conferral. Using linear regression, 825 is the score that CNM students should target in order to be successful. This is below the 850 recommended by the predictor exam publishers.

The predictor exam is broken down by the publishers to report student performance in 145 different categories. Many categories are rich with questions, allowing the program to evaluate student performance over several categories with a statistically valid data pool. However, for GLO 6 (technologies), the pool has been historically shallow. To combat the lower number of items, the threshold has been set lower so that the program can continue to track student performance while seeking alternative measurement sources.

The final summative clinical evaluation used in NRSG 2515 measures student performance against levelled graduate level outcomes. Scores less than satisfactory in any category would result in a failing grade for NRSG 2515.

Interpretation of Assessment Findings

The program will continue to monitor student achievement of course and graduate level outcomes. If board pass rates or other outcomes measures dip, then the program will re-evaluate the estimated level of achievement listed for GLO measurement.

The assessment points mirror the Accreditation Commission for Education of Nurses (ACEN) Standard 6 criteria and are reported to the ACEN annually as well as how these data are communicated to communities of interest. Full inclusion on the SAAC reporting is appreciated by the program.

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

Continue to seek alternative measures for GLO 6.

Continue to measure student employment rates and seek additional interventions to promote student employment rates. This includes including instruction to senior students about the importance of seeking immediate initial employment, networking with clinical partners to ensure that messaging about job availability and training programs is clearly communicated to students, and seeking legislative changes that would permit the CNM nursing program to award the BSN degree.

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

☐ Assessment criteria revision   ☐ Assessment methodology revision   ☐ Assignment revision

☐ Budgetary reallocation   ☒ Change in teaching approach   ☐ Course content revision

☐ Curricular Revision   ☐ Faculty training/development   ☒ Process revision

Recommendations, Proposals, and/or Funding Requests	Budget Needed
No needs at this time.	N/A

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

Years of Full Cycle	Next Year's Assessment Focus (Describe how the next planned assessment is expected to provide information that can be used toward improving student learning.)
Click or tap here to enter text.	Click or tap here to enter text.

Graduate Learning Outcomes to Be Assessed	Years in which Assessment Is Planned	Population/Courses to Be Assessed	Planned Assessment Approach
GLO – 1 Integrate diverse patient values, beliefs, and attitudes into plan of care for patients with chronic illness	Annually	Students enrolled in 2515 and 2899	Same as described above as this assessment plan meets all ACEN accreditation outcomes evaluation requirements.
GLO – 2 Interpret and analyze factors and system contributions that impact the quality and safety of nursing practice	Annually	Students enrolled in 2515 and 2899	Same as described above as this assessment plan meets all ACEN accreditation outcomes evaluation requirements.
GLO – 3 Integrate an evidence-based approach in the delivery and evaluation of nursing care to acutely ill patients across the lifespan	Annually	Students enrolled in 2515 and 2899	Same as described above as this assessment plan meets all ACEN accreditation outcomes evaluation requirements.
GLO – 4 Evaluate the use of policies and procedures within the acute care setting	Annually	Students enrolled in 2515 and 2899	Same as described above as this assessment plan meets all ACEN accreditation outcomes evaluation requirements.
GLO – 5 Effectively collaborate with the healthcare team in the delivery of patient care	Annually	Students enrolled in 2515 and 2899	Same as described above as this assessment plan meets all ACEN accreditation outcomes evaluation requirements.

GLO – 6 Integrate use of appropriate technology for the delivery of nursing care to acutely ill patients	Annually	Students enrolled in 2515 and 2899	Same as described above as this assessment plan meets all ACEN accreditation outcomes evaluation requirements.