

APPENDICES

2011-2013 *through* 2013-2014

Submitted to the Commission on Collegiate Nursing Education



RESEARCH



PRACTICE

UNIVERSITY of MARYLAND
SCHOOL OF NURSING
Innovation in Action

EDUCATION



CELEBRATING 125
1889-2014 YEARS

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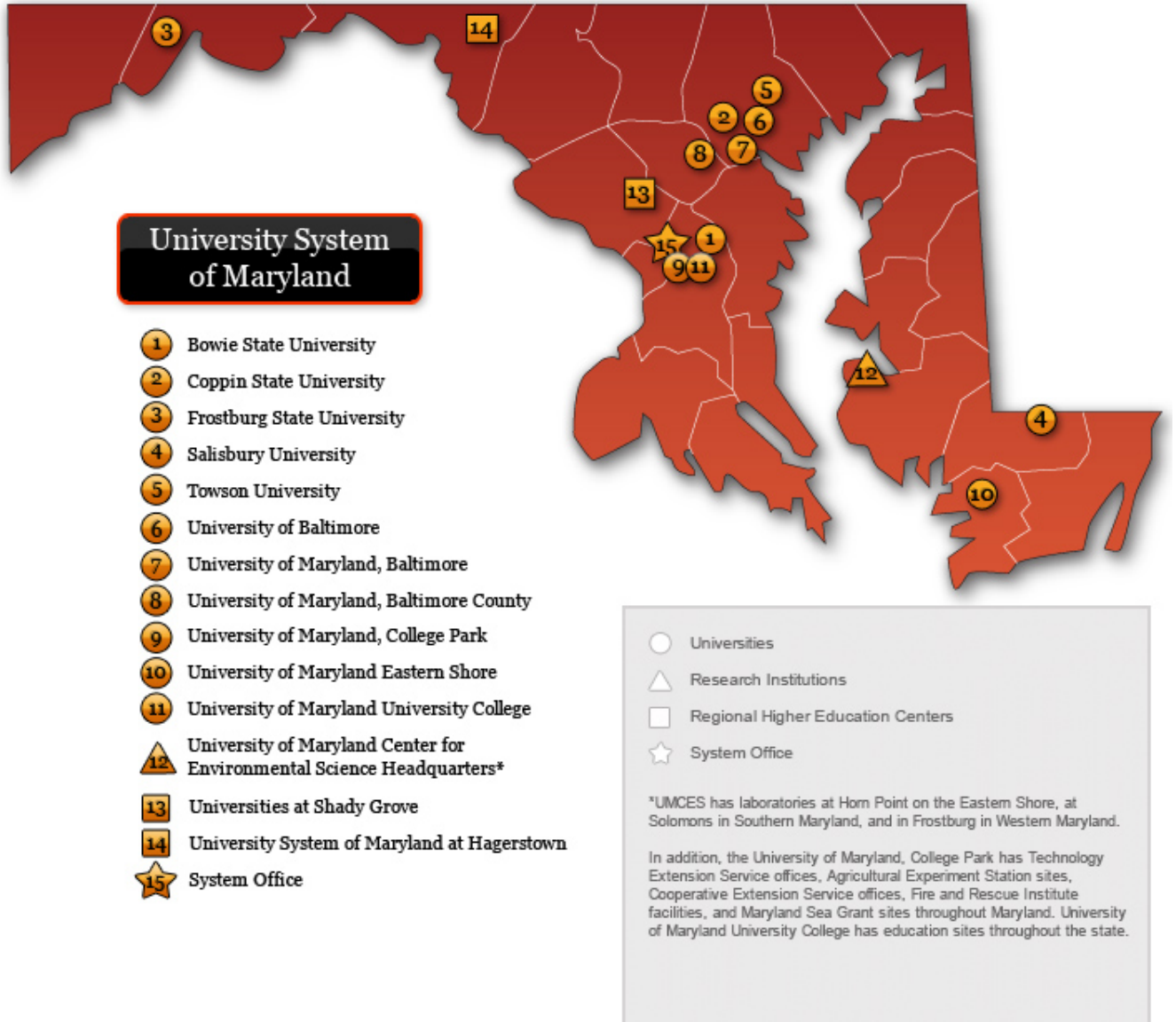
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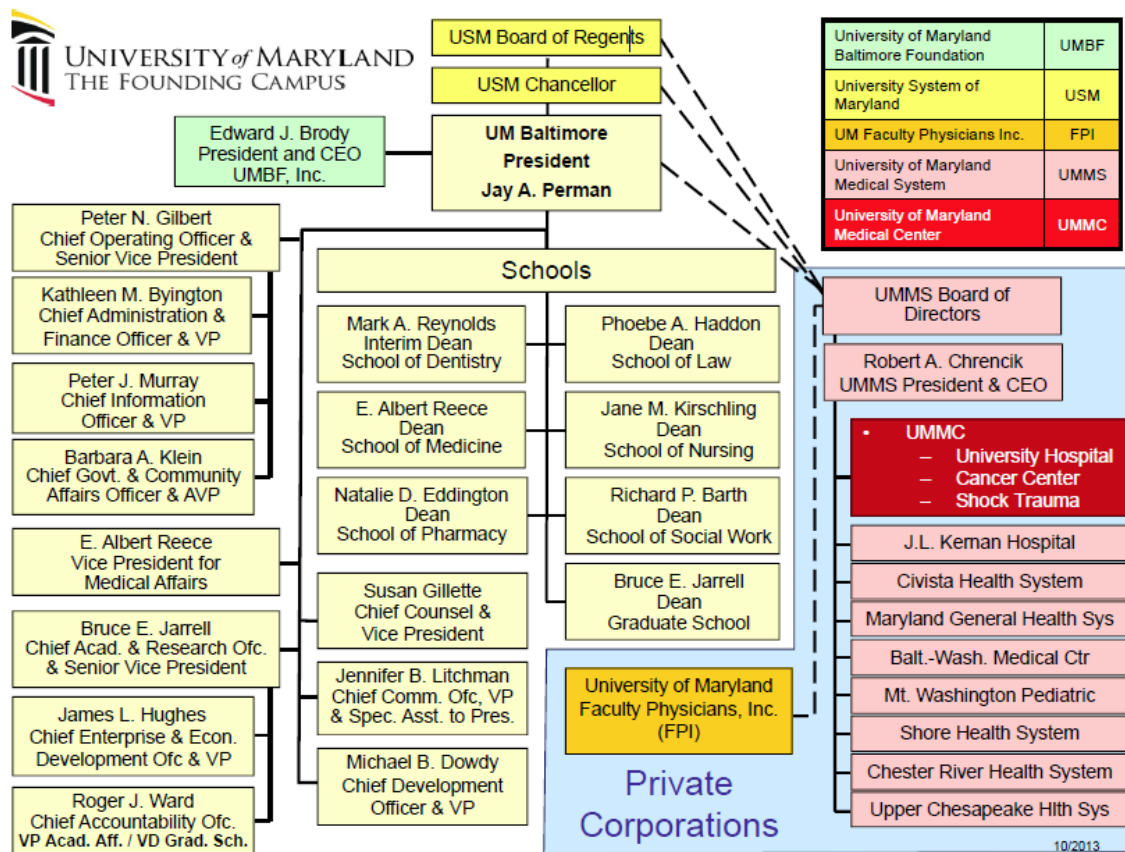
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University System of Maryland

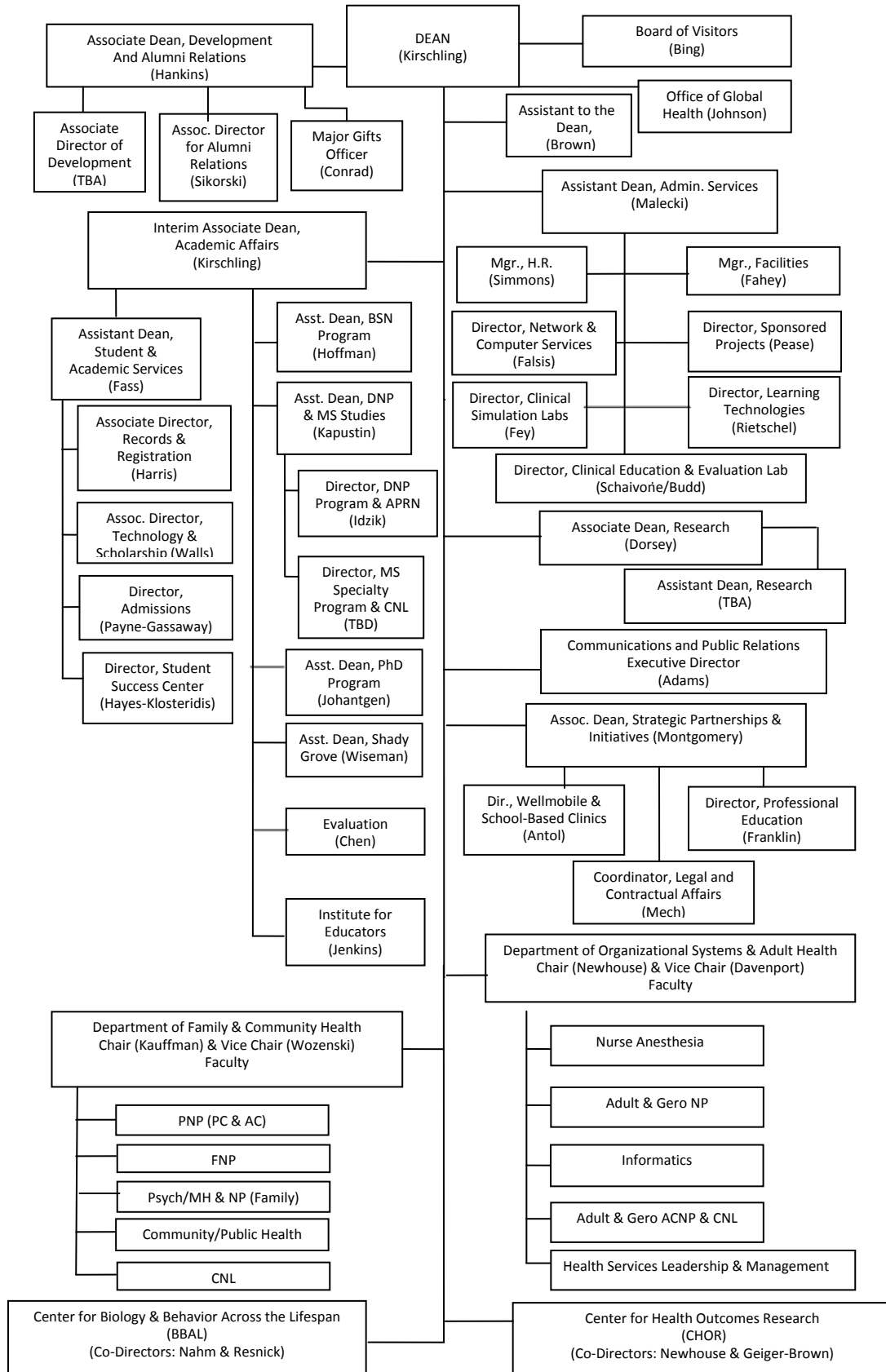


Appendix Intro-2

Organizational Chart for University of Maryland, Baltimore



Appendix Intro-3 Organizational Chart for University of Maryland School of Nursing



Appendix IA-1

Mission Statements

Mission, University System of Maryland (USM)

The University System of Maryland seeks to improve the quality of life for the people of Maryland by providing a comprehensive range of high quality, accessible, and affordable educational opportunities; engaging in research and creative scholarship that expands the boundaries of current knowledge; and providing knowledge-based programs and services that are responsive to the needs of the citizens of Maryland and the nation. The University System of Maryland fulfills its mission through the effective and efficient management of its resources and the focused missions and activities of each of its component institutions.

Mission, University of Maryland, Baltimore (UMB)

The University of Maryland, Baltimore is the state's public academic health and law university devoted to professional and graduate education, research, patient care, and public service. As a diverse community of outstanding faculty members, staff, and students, and using state-of-the-art technological support, we educate leaders in health care delivery, biomedical science, global health, social work, and the law. We emphasize interdisciplinary education and research in an atmosphere that explicitly values civility, diversity, collaboration, teamwork, and accountability. By conducting internationally recognized research to cure disease and to improve the health, social functioning, and just treatment of the people we serve, we foster economic development in the city, state, and nation. We are committed to ensuring that the knowledge we generate provides maximum benefit to society and directly enhances our various communities.

Mission, the University of Maryland School of Nursing

We shape the profession of nursing and the health care environment by developing nursing leaders in education, research, and practice.

Appendix IA-2

Congruence of the Missions of University System of Maryland (USM), University of Maryland, Baltimore (UMB), and the University of Maryland School of Nursing (UMSON)

USM Mission	UMB Mission	UMSON Mission
Provide a comprehensive range of high-quality, accessible, and affordable education opportunities	Using state-of-the-art technological support, we educate leaders in health care delivery, biomedical science, global health, social work, and the law.	We shape the profession of nursing and the health care environment by developing nursing leaders in education , research, and practice.
Engage in research and create scholarship that expands the boundaries of current knowledge.	By conducting internationally recognized research to cure disease and to improve the health, social functioning, and just treatment of the people we serve, we foster economic development in the city, state, and nation.	We shape the profession of nursing and the health care environment by developing nursing leaders in education, research , and practice.
Provide knowledge-based programs and services that are responsive to the needs of the citizens of the state and nation.	We are committed to ensuring that the knowledge we generate provides maximum benefit to society, and directly enhances our various communities .	We shape the profession of nursing and the health care environment by developing nursing leaders in education, research, and practice .

Appendix IA-3

Congruence of the Missions of University of Maryland Baltimore (UMB)
and the University of Maryland School of Nursing (UMSON)
with the Outcomes of the Bachelor of Science in Nursing (BSN), Master of Science (MS)
and Doctor of Nursing Practice (DNP) Programs

UMB Mission	UMSON Mission	Outcomes of the BSN Program	Outcomes of the MS Program	Outcomes of the DNP Program
<p>Education: Using state-of-the-art technological support, UMB educates leaders in health care delivery, biomedical science, social services, and the law.</p>	<p>Education: We shape the profession of nursing and the health care environment by developing leaders in nursing education, research, and practice.</p>	<p>Education:</p> <ul style="list-style-type: none"> • Combine theoretical knowledge from the sciences, humanities, and nursing as a foundation to professional nursing practice that focuses on health promotion and prevention of disease for individuals, families, communities, and populations • Integrate competencies in leadership, quality improvement, and patient safety to improve health and promote interdisciplinary care • Incorporate information management and patient care technology in the delivery of quality patient-centered care • Integrate knowledge of health care policy from social, economic, political, legislative, and professional perspectives to influence the delivery of care to individuals, families, communities, and 	<p>Education:</p> <ul style="list-style-type: none"> • Incorporate scientific inquiry and theoretical concepts into efforts to improve the care to individuals and communities • Participate in the design, implementation, and evaluation of health care systems to foster safety and excellence in health care delivery • Engage in ethically sound, culturally sensitive, and evidenced-based practice to promote the health of individuals and communities • Commit to lifelong learning for self and promote lifelong learning to consumers 	<p>Education:</p> <ul style="list-style-type: none"> • Initiate, facilitate, and participate in collaborative efforts that influence health care outcomes with scholars, practitioners, clinicians, and policy makers from other disciplines • Lead at the highest educational, clinical, and executive ranks • Evaluate and apply ethically sound, culturally sensitive, evidence-based practice for the improvement of education, clinical practice, systems management, and nursing leadership • Analyze and apply scientific knowledge and related skills for the highest level of nursing practice

		<p>populations</p> <ul style="list-style-type: none"> • Use principles of ethics, legal responsibility, and accountability to guide professional nursing practice across the lifespan and across the health care continuum • Accept personal accountability for lifelong learning, professional growth, and commitment to the advancement of the profession 		<ul style="list-style-type: none"> • Design, implement, manage, and evaluate patient care and organizational systems
<p>Research and Scholarship: By conducting internationally recognized research to cure disease and to improve the health, social functioning, and just treatment of the people it serves, the campus fosters economic development in the state.</p>	<p>Research and Scholarship: We shape the profession of nursing and the health care environment by developing leaders in nursing education, research, and practice.</p>	<p>Research and Scholarship:</p> <ul style="list-style-type: none"> • Use the research process through translation of evidence-based findings to advance professional nursing and the delivery of health care 	<p>Research and Scholarship:</p> <ul style="list-style-type: none"> • Incorporate scientific inquiry and theoretical concepts into efforts to improve the care to individuals and communities • Participate in the design, implementation, and evaluation of health care systems to foster safety and excellence in health care delivery 	<p>Research and Scholarship:</p> <ul style="list-style-type: none"> • Initiate, facilitate, and participate in collaborative efforts that influence health care outcomes with scholars, practitioners, clinicians, and policy makers from other disciplines • Evaluate and apply ethically sound, culturally sensitive, evidence-based practice for the improvement of education, clinical practice, systems management, and nursing leadership • Analyze and apply scientific knowledge and related skills for the highest level of nursing practice

<p>Service: UMB is committed to ensuring that the knowledge it generates provides maximum benefit to society, directly enhancing the community.</p>	<p>Service: We shape the profession of nursing and the health care environment by developing leaders in nursing education, research, and practice.</p>	<p>Service:</p> <ul style="list-style-type: none"> • Use the nursing process to manage care for individuals, families, communities, and populations integrating physical, psychological, social, cultural, spiritual, and environmental considerations • Integrate competencies in leadership, quality improvement, and patient safety to improve health and promote interdisciplinary care • Integrate knowledge of health care policy from social, economic, political, legislative, and professional perspectives to influence the delivery of care to individuals, families, communities, and populations 	<p>Service:</p> <ul style="list-style-type: none"> • Incorporate scientific inquiry and theoretical concepts into efforts to improve the care to individuals and communities • Lead evidence-based and interprofessional approaches for the design and delivery of comprehensive, culturally competent care to individuals/families, communities, and populations • Participate in the design, implementation, and evaluation of health care systems to foster safety and excellence in health care delivery • Practice advanced nursing roles in collaborative relationships across disciplines and in partnership with communities, i.e. nursing education, nursing administration, nursing informatics, advanced clinical practice, and clinical nursing leadership 	<p>Service:</p> <ul style="list-style-type: none"> • Initiate, facilitate, and participate in collaborative efforts that influence health care outcomes with scholars, practitioners, clinicians, and policy makers from other disciplines • Lead at the highest educational, clinical, and executive ranks • Evaluate and apply ethically sound, culturally sensitive, evidence-based practice for the improvement of education, clinical practice, systems management, and nursing leadership • Analyze and apply scientific knowledge and related skills for the highest level of nursing practice • Design, implement, manage, and evaluate patient care and organizational systems
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Appendix IA-4

Congruence of the American Association of Colleges of Nursing (AACN) Professional Standards with Program Outcomes

THE ESSENTIALS OF BACCALAUREATE EDUCATION FOR PROFESSIONAL NURSING PRACTICE	BSN PROGRAM OUTCOMES
Liberal Education for Baccalaureate Generalist Nursing Practice	Combine theoretical knowledge from the sciences, humanities, and nursing as a foundation to professional nursing practice that focuses on health promotion and prevention of disease for individuals, families, communities, and populations.
Basic Organizational and Systems Leadership for Quality Care and Patient Safety	Integrate competencies in leadership, quality improvement, and patient safety to improve health and promote interdisciplinary care.
Scholarship for Evidence-Based Practice	Use the research process through translation of evidence-based findings to advance professional nursing and the delivery of health care.
Information Management and Application of Patient Care Technology	Incorporate information management and patient care technology in the delivery of quality patient centered care.
Health Care Policy, Finance, and Regulatory Environments	Integrate knowledge of health care policy from social, economic, political, legislative, and professional perspectives to influence the delivery of care to individuals, families, communities, and populations.
Interprofessional Communication and Collaboration for Improving Patient Health Outcomes	Employ interprofessional communication and collaboration to ensure safe, quality care across the lifespan.
Clinical Prevention and Population Health	<p>Combine theoretical knowledge from the sciences, humanities, and nursing as a foundation to professional nursing practice that focuses on health promotion and prevention of disease for individuals, families, communities, and populations.</p> <p>Use the nursing process to manage care for individuals, families, communities, and populations integrating physical, psychological, social, cultural, spiritual, and environmental considerations.</p>
Professionalism and Professional Values	<p>Use principles of ethics, legal responsibility, and accountability to guide professional nursing practice across the lifespan and across the health care continuum.</p> <p>Accept personal accountability for lifelong learning, professional growth, and commitment to the advancement of the profession.</p>
Baccalaureate Generalist Nursing Practice	Use the nursing process to manage care for individuals, families, communities, and populations integrating

THE ESSENTIALS OF BACCALAUREATE EDUCATION FOR PROFESSIONAL NURSING PRACTICE	BSN PROGRAM OUTCOMES
	<p>physical, psychological, social, cultural, spiritual, and environmental considerations.</p> <p>Use principles of ethics, legal responsibility, and accountability to guide professional nursing practice across the lifespan and across the health care continuum.</p>

ESSENTIALS OF MASTER'S EDUCATION	MS NURSING PROGRAM OUTCOMES
Background for Practice from Sciences and Humanities	<p>Incorporate scientific inquiry and theoretical concepts into efforts to improve the care to individuals and communities.</p> <p>Participate in the design, implementation, and evaluation of health care systems to foster safety and excellence in health care delivery.</p> <p>Engage in ethically sound, culturally sensitive, and evidenced-based practice to promote the health of individuals and communities.</p>
Organizational and Systems Leadership	<p>Lead evidence-based and interprofessional approaches for the design and delivery of comprehensive, culturally competent care to individuals/families, communities, and populations</p> <p>Engage in ethically sound, culturally sensitive, and evidenced-based practice to promote the health of individuals and communities.</p> <p>Commit to lifelong learning for self and promote lifelong learning to consumers.</p> <p>Practice advanced nursing roles in collaborative relationships across disciplines and in partnership with communities, i.e., nursing education, nursing administration, nursing informatics, and advanced clinical practice.</p>
Quality Improvement and Safety	<p>Incorporate scientific inquiry and theoretical concepts into efforts to improve the care to individuals and communities.</p> <p>Lead evidence-based and interprofessional approaches for the design and delivery of comprehensive, culturally competent care to individuals/families, communities, and populations.</p> <p>Engage in ethically sound, culturally sensitive, and</p>

ESSENTIALS OF MASTER'S EDUCATION	MS NURSING PROGRAM OUTCOMES
	<p>evidenced-based practice to promote the health of individuals and communities.</p> <p>Practice advanced nursing roles in collaborative relationships across disciplines and in partnership with communities, i.e., nursing education, nursing administration, nursing informatics, and advanced clinical practice.</p>
Translating and Integrating Scholarship into Practice	<p>Incorporate scientific inquiry and theoretical concepts into efforts to improve the care to individuals and communities.</p> <p>Lead evidence-based and interprofessional approaches for the design and delivery of comprehensive, culturally competent care to individuals/families, communities, and populations.</p> <p>Engage in ethically sound, culturally sensitive, and evidenced-based practice to promote the health of individuals and communities.</p> <p>Practice advanced nursing roles in collaborative relationships across disciplines and in partnership with communities, i.e., nursing education, nursing administration, nursing informatics, and advanced clinical practice.</p>
Informatics and Health Care Technologies	<p>Incorporate scientific inquiry and theoretical concepts into efforts to improve the care to individuals and communities.</p> <p>Lead evidence-based and interprofessional approaches for the design and delivery of comprehensive, culturally competent care to individuals/families, communities, and populations.</p> <p>Participate in the design, implementation, and evaluation of health care systems to foster safety and excellence in health care delivery.</p>
Health Policy and Advocacy	<p>Lead evidence-based and interprofessional approaches for the design and delivery of comprehensive, culturally competent care to individuals/families, communities, and populations.</p> <p>Participate in the design, implementation, and evaluation of health care systems to foster safety and excellence in health care delivery.</p> <p>Engage in ethically sound, culturally sensitive, and</p>

ESSENTIALS OF MASTER'S EDUCATION	MS NURSING PROGRAM OUTCOMES
	evidenced-based practice to promote the health of individuals and communities.
Interprofessional Collaboration for Improving Patient and Population Health Outcomes	<p>Incorporate scientific inquiry and theoretical concepts into efforts to improve the care to individuals and communities.</p> <p>Lead evidence-based and interprofessional approaches for the design and delivery of comprehensive, culturally competent care to individuals/families, communities, and populations.</p> <p>Participate in the design, implementation, and evaluation of health care systems to foster safety and excellence in health care delivery.</p> <p>Engage in ethically sound, culturally sensitive, and evidenced-based practice to promote the health of individuals and communities.</p> <p>Commit to lifelong learning for self and promote lifelong learning to consumers.</p> <p>Practice advanced nursing roles in collaborative relationships across disciplines and in partnership with communities, i.e., nursing education, nursing administration, nursing informatics, and advanced clinical practice.</p>
Clinical Prevention and Population Health for Improving Health	<p>Participate in the design, implementation, and evaluation of health care systems to foster safety and excellence in health care delivery.</p> <p>Engage in ethically sound, culturally sensitive, and evidenced-based practice to promote the health of individuals and communities.</p> <p>Practice advanced nursing roles in collaborative relationships across disciplines and in partnership with communities, i.e., nursing education, nursing administration, nursing informatics, and advanced clinical practice.</p>
Master's-Level Nursing Practice	<p>Incorporate scientific inquiry and theoretical concepts into efforts to improve the care to individuals and communities.</p> <p>Lead evidence-based and interprofessional approaches for the design and delivery of comprehensive, culturally competent care to individuals/families, communities, and populations.</p>

ESSENTIALS OF MASTER'S EDUCATION	MS NURSING PROGRAM OUTCOMES
	<p>Participate in the design, implementation, and evaluation of health care systems to foster safety and excellence in health care delivery.</p> <p>Engage in ethically sound, culturally sensitive, and evidenced-based practice to promote the health of individuals and communities.</p> <p>Commit to lifelong learning for self and promote lifelong learning to consumers.</p> <p>Practice advanced nursing roles in collaborative relationships across disciplines and in partnership with communities, i.e., nursing education, nursing administration, nursing informatics, and advanced clinical practice.</p>

ESSENTIALS OF DOCTORAL EDUCATION FOR ADVANCED NURSING PRACTICE	DNP PROGRAM OUTCOMES
Scientific Underpinnings for Practice	<p>Evaluate and apply ethically sound, culturally sensitive, evidence-based practice for the improvement of education, clinical practice, systems management, and nursing leadership.</p> <p>Analyze and apply scientific knowledge and related skills for the highest level of nursing practice.</p>
Organizational Systems Leadership for Quality Improvement and Systems Thinking	<p>Initiate, facilitate, and participate in collaborative efforts that influence health care outcomes with scholars, practitioners, clinicians, and policy makers from other disciplines.</p> <p>Lead at the highest educational, clinical, and executive ranks.</p> <p>Analyze and apply scientific knowledge and related skills for the highest level of nursing practice.</p> <p>Design, implement, manage, and evaluate patient care and organizational systems.</p>
Clinical Scholarship and Analytical Methods for Evidence-based Practice	<p>Initiate, facilitate, and participate in collaborative efforts that influence health care outcomes with scholars, practitioners, clinicians, and policy makers from other disciplines.</p> <p>Evaluate and apply ethically sound, culturally sensitive, evidence-based practice for the improvement of education, clinical practice, systems management, and nursing leadership.</p>

ESSENTIALS OF DOCTORAL EDUCATION FOR ADVANCED NURSING PRACTICE	DNP PROGRAM OUTCOMES
	<p>Analyze and apply scientific knowledge and related skills for the highest level of nursing practice.</p> <p>Design, implement, manage, and evaluate patient care and organizational systems.</p>
Information Systems/Technology and Patient Care Technology for the Improvement and Transformation of Health Care	<p>Initiate, facilitate, and participate in collaborative efforts that influence health care outcomes with scholars, practitioners, clinicians, and policy makers from other disciplines.</p> <p>Design, implement, manage, and evaluate patient care and organizational systems.</p>
Health Care Policy for Advocacy in Health Care	<p>Initiate, facilitate, and participate in collaborative efforts that influence health care outcomes with scholars, practitioners, clinicians, and policy makers from other disciplines.</p> <p>Lead at the highest educational, clinical, and executive ranks.</p> <p>Analyze and apply scientific knowledge and related skills for the highest level of nursing practice.</p> <p>Design, implement, manage, and evaluate patient care and organizational systems.</p>
Interprofessional Collaboration for Improving Patient and Population Health Outcomes	<p>Initiate, facilitate, and participate in collaborative efforts that influence health care outcomes with scholars, practitioners, clinicians, and policy makers from other disciplines.</p> <p>Lead at the highest educational, clinical, and executive ranks.</p> <p>Analyze and apply scientific knowledge and related skills for the highest level of nursing practice.</p> <p>Design, implement, manage, and evaluate patient care and organizational systems.</p>
Clinical Prevention and Population Health for Improving the Nation's Health	<p>Initiate, facilitate, and participate in collaborative efforts that influence health care outcomes with scholars, practitioners, clinicians, and policy makers from other disciplines.</p> <p>Evaluate and apply ethically sound, culturally sensitive, evidence-based practice for the</p>

ESSENTIALS OF DOCTORAL EDUCATION FOR ADVANCED NURSING PRACTICE	DNP PROGRAM OUTCOMES
	<p>improvement of education, clinical practice, systems management, and nursing leadership.</p> <p>Analyze and apply scientific knowledge and related skills for the highest level of nursing practice.</p> <p>Design, implement, manage, and evaluate patient care and organizational systems.</p>
Advanced Nursing Practice	<p>Initiate, facilitate, and participate in collaborative efforts that influence health care outcomes with scholars, practitioners, clinicians, and policy makers from other disciplines.</p> <p>Lead at the highest educational, clinical, and executive ranks.</p> <p>Evaluate and apply ethically sound, culturally sensitive, evidence-based practice for the improvement of education, clinical practice, systems management, and nursing leadership.</p> <p>Analyze and apply scientific knowledge and related skills for the highest level of nursing practice.</p> <p>Design, implement, manage, and evaluate patient care and organizational systems.</p>

Appendix IA-5

Congruence of Selected Professional Standards with Program Outcomes

Competencies and Curricular Expectation for Clinical Nurse Leader (AACN, 2013)	MS Program Outcomes
<ol style="list-style-type: none"> 1. Interpret patterns and trends in quantitative and qualitative data to evaluate outcomes of care within a microsystem and compare to other recognized benchmarks or outcomes, e.g., national, regional, state, or institutional. 2. Apply concepts of improvement science and systems theory. 	<p>Incorporate scientific inquiry and theoretical concepts into efforts to improve the care of individuals and communities.</p> <p>Lead evidence-based and interprofessional approaches for the design and delivery of comprehensive, culturally competent care to individuals/families, communities, and populations.</p>
<ol style="list-style-type: none"> 1. Demonstrate a working knowledge of the health care system and its component parts, including sites of care, delivery models, payment models, and the roles of health care professionals, patients, caregivers, and unlicensed professionals. 2. Use systems theory in the assessment, design, delivery, and evaluation of health care within complex organizations. 3. Collaborate with health care professionals, including physicians, advanced practice nurses, nurse managers, and others to plan, implement, and evaluate an improvement opportunity. 	<p>Lead evidence-based and interprofessional approaches for the design and delivery of comprehensive, culturally competent care to individuals/families, communities, and populations.</p> <p>Participate in the design, implementation, and evaluation of health care systems to foster safety and excellence in health care delivery.</p> <p>Practice advanced nursing roles in collaborative relationships across disciplines and in partnership with communities, i.e. nursing education, nursing administration, nursing informatics, advanced clinical practice and clinical nursing leadership.</p>
<ol style="list-style-type: none"> 1. Use evidence to design and direct system improvements that address trends in safety and quality. 2. Implement quality improvement strategies based on current evidence, analytics, and risk anticipation. 	<p>Incorporate scientific inquiry and theoretical concepts into efforts to improve the care to individuals and communities.</p> <p>Lead evidence-based and interprofessional approaches for the design and delivery of comprehensive, culturally competent care to individuals/families, communities, and populations.</p> <p>Engage in ethically sound, culturally sensitive, and evidence-based practice to promote the health of individuals and communities.</p>

Criteria for Evaluation of Nurse Practitioner Programs (National Task Force, 2012)	DNP Program Outcomes
<p>Criterion III.B: The curriculum is congruent with national standards for graduate level and advanced practice registered nursing (APRN) education and is consistent with nationally recognized core role and population-focused NP competencies.</p>	<p>Evaluate and apply ethically sound, culturally sensitive, evidence-based practice for the improvement of education, clinical practice, systems management, and nursing leadership.</p> <p>Initiate, facilitate, and participate in collaborative efforts that influence health care outcomes with scholars, practitioners, clinicians, and policy makers from other disciplines.</p> <p>Lead at the highest educational, clinical, and executive ranks.</p> <p>Design, implement, manage, and evaluate patient care and organizational systems.</p> <p>Initiate, facilitate, and participate in collaborative efforts that influence health care outcomes with scholars, practitioners, clinicians, and policy makers from other disciplines.</p>
<p>Criterion VI.A.4: Evaluate students' attainment of competencies throughout the program.</p> <p>Criterion VI.A.5: Evaluate students cumulatively, based on clinical observation of student competence and performance by NP faculty members and/or preceptor assessment.</p> <p>Criterion VI.A.6: Evaluate clinical sites at regularly scheduled intervals.</p> <p>Criterion VI.A.7: Evaluate preceptors at regularly scheduled intervals.</p>	<p>Evaluate and apply ethically sound, culturally sensitive, evidence-based practice for the improvement of education, clinical practice, systems management, and nursing leadership.</p> <p>Analyze and apply scientific knowledge and related skills for the highest level of nursing practice</p>



Appendix IA-6

Master Evaluation Plan

Element	Instrument (Data)	Data Source (Who)	Frequency (When)	Benchmark (When Applicable)	Summary Report Prepared By	Summary Report Received by	Official Data Housed
<i>Academic Programs</i>							
Mission Statement, Philosophy	Internal Community of Interest, Document Review	Faculty and Staff	Every 5 Years		Strategic Plan Committee	Faculty, Staff, UMB, and External Stakeholders	Office of the Dean
Course Evaluation	Summative Results of All Course Evaluations	Students	Annually		Director of Evaluation	Interim Associate Dean for Academic Affairs	Office of Evaluation
Technology Related Needs	Faculty, Staff, Administration Inputs	Faculty, Staff, Students	Annually		Technology Advisory Committee	Assistant Dean of Administrative Services	Technology Advisory Committee
Physical Facilities	Review of Needs and Resources	Faculty, Staff, Students	Ongoing		Manager of Facilities Support Services	Assistant Dean of Administrative Services	Manager of Facilities Support Services
Clinical Simulation Laboratory	METI Simulation Effectiveness Tool	Students/ Faculty	Semester/Yearly		Director of Clinical Simulation Laboratory	Interim Associate Dean for Academic Affairs	Director of Clinical Simulation Laboratory
Clinical Education and Evaluation Lab	Clinical Education and Evaluation Lab Survey	Students/ Faculty	Semester/Yearly		Director of Clinical Education and Evaluation Lab	Interim Associate Dean for Academic Affairs	Director of Clinical Education and Evaluation Lab

Student Services	Admission and Advising Services Survey	Students	Semester		Assistant Dean for Student and Academic Services	Interim Associate Dean for Academic Affairs	Assistant Dean of Student and Academic Services
Faculty Training and Development Needs	Faculty Survey	Faculty	Determined by Faculty Council		Faculty Council	Department Chairs and Dean	Faculty Council
Staff Training and Development Needs	Staff Survey	Staff	Determined by Staff Council		Staff Council	Dean	Staff Council
<i>Undergraduate Program</i>							
<i>Goals and BSN Outcomes</i>							
BSN Program	Course Evaluation Questionnaire (CEQ)	BSN Students	End of Every Semester	3.5 or higher on a 5-point scale	Director of Evaluation	Faculty, Department Chair and Vice Chair, Assistant Dean for BSN Program, Assistant Dean for UMSON Program at Shady Grove	Office of Evaluation
	Faculty Evaluation Questionnaire (FEQ)	BSN Students	End of Every Semester	3.5 or higher on a 5-point scale	Director of Evaluation	Faculty, Department Chair and Vice Chair, Assistant Dean for UMSON Program at Shady Grove	Office of Evaluation
	Program Assessment Questionnaire (PAQ)	BSN Students	End of Last Semester	2.5 or higher on a 4-point scale	Director of Evaluation	Assistant Dean for BSN Program	Office of Evaluation
	Advisory Board	Stakeholders/Community of Interest	Every Year		Assistant Dean for BSN Program	Entry-Level Curriculum Committee	Assistant Dean for BSN Program
	Clinical Site Evaluation	BSN Students	End of Every Clinical Course		Clinical Coordinator, Director of Evaluation	Course Director, Entry-Level Curriculum Committee, Assistant Dean for BSN Program	Office of Evaluation

	Clinical Site Evaluation	BSN Clinical Instructors	End of Every Clinical Course		Clinical Coordinator	Course Director, Department Chair and Vice Chair, Assistant Dean for UMSON Program at Shady Grove, Assistant Dean for BSN Program	Clinical Coordinator
	Clinical Instructor Evaluation	BSN Students	End of Every Clinical Course		Clinical Coordinator, Director of Evaluation	Course Director, Department Chair and Vice Chair, Assistant Dean for UMSON Program at Shady Grove	Office of Evaluation
	Preceptor Evaluation	BSN Students	End of Last Semester		Course Faculty	Course Director, Department Chair and Vice Chair, Assistant Dean for UMSON Program at Shady Grove	Course Director
	Employment Survey	BSN Recent Graduates	Within 12 Months After Graduation	70% of the employment rate from the returned responses	Registration Office, Director of Evaluation	Assistant Dean for BSN Program	Office of Evaluation
	Alumni Survey	BSN Graduates	Every 3 Years	70% or higher rated "good" or "excellent" on program quality items from the returned responses	Director of Evaluation, Alumni Office	Assistant Dean for BSN Program	Office of Evaluation

Graduate Program

Goals and MS/CNL Outcomes

MS Program CNL	Course Evaluation Questionnaire (CEQ)	MS Students	End of Every Semester	3.5 or higher on a 5-point scale	Director of Evaluation	Faculty, Department Chair and Vice Chair, Assistant Dean/ Directors for the MS and DNP Programs	Office of Evaluation
	Faculty Evaluation Questionnaire (FEQ)	MS Students	End of Every Semester	3.5 or higher on a 5-point scale	Director of Evaluation	Faculty, Department Chair and Vice Chair	Office of Evaluation
	Program Assessment Questionnaire (PAQ)	MS Students	End of Last Semester	2.5 or higher on a 4-point scale	Director of Evaluation	Assistant Dean for the MS and DNP Programs	Office of Evaluation
	MS Specialty Evaluation	MS Specialty Directors	Every 3 Years		MS/DNP Curriculum Committee	Assistant Dean for the MS and DNP Programs	MS/DNP Curriculum Committee Minutes
	■ Advisory Board	Stakeholders/ Community of Interests	Every Year		Specialty Directors	MS/DNP Curriculum Committee, Assistant Dean for the MS and DNP Programs	MS/DNP Curriculum Committee Minutes
	■ MS Clinical Site/Preceptor Evaluation	MS Students	End of Every Clinical Course		Faculty	Specialty Directors	Specialty Directors
	■ MS Clinical Site/Preceptor Evaluation	Faculty	End of Every Clinical Course		Faculty	Specialty Directors	Specialty Directors
	■ CNL Clinical Site Evaluation	CNL Students	End of Every Clinical Course		Clinical Coordinator, Director of Evaluation	Course Director, Entry-Level Curriculum Committee	Office of Evaluation

	■ CNL Clinical Site Evaluation	CNL Clinical Instructors	End of Every Clinical Course		Clinical Coordinator	Course Director, Department Chair and Vice Chair	Clinical Coordinator
	■ CNL Clinical Instructor Evaluation	CNL Students	End of Every Clinical Course		Clinical Coordinator, Director of Evaluation	Course Director, Department Chair and Vice Chair	Office of Evaluation
	■ CNL Preceptor Evaluation	CNL Students	End of Last Semester		Course Faculty	Course Director	Course Director
	Employment Survey	MS Recent Graduates	Within 12 Months After Graduation	70% of the employment rate from the returned responses	Director of Evaluation	Assistant Dean for the MS and DNP Programs	Office of Evaluation
	Alumni Survey	MS Graduates	Every 4 Years	70% or higher rated "good" or "excellent" on program quality items from the returned responses	Director of Evaluation, Alumni Office	Assistant Dean for the MS and DNP Programs	Office of Evaluation
Post-MSM APRN Certificate Program Outcomes	Program Assessment Questionnaire (PAQ)	Post-MS Certificate Program Students	End of Last Semester	2.5 or higher on a 4-point scale	Director of Evaluation	Assistant Dean for the MS and DNP Programs	Office of Evaluation
	Employment Survey	Post-MS Certificate Program Recent Graduates	Within 12 Months After Graduation	70% of the employment rate from the returned responses	Director of Evaluation	Assistant Dean for the MS and DNP Programs	Office of Evaluation
	Alumni Survey	Post-MS Certificate Program Graduates	Every 4 Years	70% or higher rated "good" or "excellent" on program quality items from the returned responses	Director of Evaluation, Alumni Office	Assistant Dean for the MS and DNP Programs	Office of Evaluation

Goals and DNP Outcomes							
DNP Program	Course Evaluation Questionnaire (CEQ)	DNP Students	End of Every Semester	3.5 or higher on a 5-point scale	Director of Evaluation	Faculty, Department Chair and Vice Chair, DNP Program Director, Assistant Dean for the MS and DNP Programs	Office of Evaluation
	Faculty Evaluation Questionnaire (FEQ)	DNP Students	End of Every Semester	3.5 or higher on a 5-point scale	Director of Evaluation	Faculty, Department Chair and Vice Chair	Office of Evaluation
	Program Assessment Questionnaire (PAQ)	DNP Students	End of Last Semester	2.5 or higher on a 4-point scale	Director of Evaluation	DNP Program Director, Assistant Dean for the MS and DNP Programs	Office of Evaluation
	DNP Curriculum Evaluation	DNP Program Director	Every 3Years		MS/DNP Curriculum Committee	Assistant Dean for the MS and DNP Programs	MS/DNP Curriculum Committee Minutes
	■ Advisory Board	Stakeholders/Community of Interests	Every Year		DNP Program Director	MS/DNP Curriculum Committee, Assistant Dean for the MS and DNP Programs	MS/DNP Curriculum Committee Minutes
	■ Practicum Site Evaluation	DNP Students	End of Every Practicum Course		Course Faculty	Practicum Course Coordinators, DNP Program Director, Assistant Dean for the MS and DNP Programs	Office of Evaluation
	■ Practicum Site Evaluation	Faculty	End of Every Practicum Course		Course Faculty	Practicum Course Coordinators, DNP Program Director, Assistant Dean for the MS and DNP Programs	Office of Evaluation

	Employment Survey	DNP Recent Graduates	Within 12 Months After Graduation	70% of the employment rate from the returned responses	Registration Office, Director of Evaluation	DNP Program Director, Assistant Dean for the MS and DNP Programs	Office of Evaluation
	Alumni Survey	DNP Graduates	Every 4 Years	70% or higher rated "good" or "excellent" on program quality items from the returned responses	Director of Evaluation, Alumni Office	DNP Program Director, Assistant Dean for the MS and DNP Programs,	Office of Evaluation
Goals and PhD Outcomes							
PhD Program	Course Evaluation Questionnaire (CEQ)	PhD Students	End of Every Semester	3.5 or higher on a 5-point scale	Director of Evaluation	Faculty, Department Chair and Vice Chair, Assistant Dean for PhD Program	Office of Evaluation
	Faculty Evaluation Questionnaire (FEQ)	PhD Students	End of Every Semester	3.5 or higher on a 5-point scale	Director of Evaluation	Faculty, Department Chair and Vice Chair	Office of Evaluation
	Program Assessment Questionnaire (PAQ)	PhD Students	End of Last Semester	2.5 or higher on a 4-point scale	Director of Evaluation	Assistant Dean for PhD Program	Office of Evaluation
	PhD Evaluation of Curriculum	Assistant Dean for PhD Program	Every 7 Years	Time to completion; rate for completion	External Review Committee	Assistant Dean for PhD Program, Dean	Assistant Dean for PhD Program
	Employment Survey	PhD Graduates	Within 12 Months After Graduation		Registration Office, Director of Evaluation	Assistant Dean for PhD Program	Office of Evaluation
	Alumni Survey	PhD Graduates	Every 4 Years		Director of Evaluation, Alumni Office	Assistant Dean for PhD Program	Office of Evaluation

<i>Students</i>							
Completion Rates	Student Records	Students	Yearly	70% of the students graduated within 5 years of their first enrollment	Assistant Dean of Student and Academic Services	Assistant Dean for BSN Program, Dean, Assistant Dean for the MS and DNP Programs, Assistant Dean for PhD Program	Office of Student and Academic Services
BSN	Final Course Evaluation/ Grade	BSN Students	Every Semester		Faculty	Office of Student and Academic Services	Office of Student and Academic Services
	Standardized Testing	BSN Students	Every Semester		Assistant Dean for BSN Program	Assistant Dean for BSN Program	Assistant Dean for BSN Program
	NCLEX	BSN Students	After Graduation	80% or greater	National Council of State Boards of Nursing	Assistant Dean for BSN Program	Assistant Dean for BSN Program
MS Specialties	Certification Exam	MS Specialty Students Post-MS Certificate Program Students	After Graduation	80% or greater	Nursing Certification Board	Assistant Dean for the MS and DNP Programs	Assistant Dean for the MS and DNP Programs
CNL	Final Course Evaluation/ Grade	CNL Students	Every Semester		Faculty	Office of Student and Academic Services	Office of Student and Academic Services
	Standardized Testing	CNL Students	Every Semester		CNL Program Director	CNL Program Director, Assistant Dean for the MS and DNP Programs	Assistant Dean for the MS and DNP Programs
	NCLEX	CNL Students	After Graduation	80% or greater	National Council of State Boards of Nursing	CNL Program Director, Assistant Dean for the MS and DNP Programs	Assistant Dean for the MS and DNP Programs

	Certification Exam	CNL Students	After Graduation	80% or greater	Nursing Certification Board	CNL Program Director, Assistant Dean for the MS and DNP Programs	Assistant Dean for the MS and DNP Programs
MS/DNP	Final Course Evaluation/ Grade	MS/DNP Students	Every Semester		Faculty	Office of Student and Academic Services	Office of Student and Academic Services
PhD	Final Course Evaluation/ Grade	PhD Students	Every Semester		Faculty	Office of Student and Academic Services	Office of Student and Academic Services
Faculty							
Performance Review	Annual Review	Faculty	Yearly		Department Chair, Assistant Dean for UMSON Program at Shady Grove	Human Resources, Dean	Human Resources, Department Chair
Reappointment (Adjunct/ Contractual)	Annual Review	Adjunct/Contractual Faculty	Yearly		Course Director	Department Chair, Assistant Dean for UMSON Program at Shady Grove, Human Resources, Dean	Human Resources, Department Chair
Reappointment (Non-Tenured)	Annual Review	Non-Tenured Faculty	Yearly		Department Chair, Assistant Dean for UMSON Program at Shady Grove	Human Resources, Dean	Human Resources, Department Chair
Promotion	APT Documents	Faculty	Per APT Guideline or Policy		Department Chair, Assistant Dean for UMSON Program at Shady Grove, APT Committee	Human Resources, Dean, President	Human Resources, Department Chair
Faculty Activity	Faculty Progress and Productivity Report (FPPR) and Teaching Workload	Faculty	Yearly		Department Chair, Director of Evaluation	Dean, Office of Institutional Research and Accountability	Office of Evaluation

Governance							
Dean	Comprehensive Materials Review of Leadership	Dean	Every 5 Years		Dean	President	President's Office
Associate Deans	Comprehensive Review	Associate Deans	Annually		Associate Deans	Dean	Office of the Dean
Department Chairs/Assistant Dean for UMSON Program at Shady Grove	Comprehensive Review	Department Chairs/ Assistant Dean for UMSON Program at Shady Grove	Annually		Department Chairs/ Assistant Dean for UMSON Program at Shady Grove	Dean	Office of the Dean
Assistant Deans/ Directors	Comprehensive Review	Assistant Deans/ Directors	Annually		Assistant Deans/ Directors	Dean	Office of the Dean
Faculty Organization	Review of Bylaws	Faculty Council	Every 2 Years		Chair of Faculty Council and Faculty Assembly	Faculty Council, Dean	Office of the Dean
Strategic Partnerships and Initiatives							
Professional Education	ANCC and OPE Annual Report	Continuing Nursing Education Documents and Participants	Annually		Associate Dean for Strategic Partnerships & Initiatives	Dean	Office of Strategic Partnerships and Initiatives
Clinical Enterprise	Annual Report	Clinical Enterprise Documents	Annually		Associate Dean for Strategic Partnerships & Initiatives	Dean	Office of Strategic Partnerships and Initiatives
Strategic Partnership	Review of Strategic Partnership	Strategic Partnership Portfolio /Goals	Annually		Associate Dean for Strategic Partnerships & Initiatives	Dean	Office of Strategic Partnerships and Initiatives

Appendix IC-1

Congruence of University of Maryland School of Nursing Mission with Appointment, Promotion, and Tenure Policy and Procedures

UMSON Mission	UMSON Appointment, Promotion and Tenure Policy and Procedures (2013)
<p>We shape the profession of nursing and the health care environment by developing leaders in education, research, and practice.</p>	<p>Excellence in teaching is basic to fulfilling the School's mission. Therefore, demonstrated excellence in teaching should accompany the appointment at or promotion to any rank and tenure. In the case of initial appointment, reasonable promise of excellent teaching is expected.</p>
<p>We shape the profession of nursing and the health care environment by developing leaders in education, research, and practice.</p>	<p>Excellence in research is fundamental to the School's mission of advancing the science of nursing and maintaining excellence in its educational programs. Research productivity is defined as conducting research, participating in collaborative or interdisciplinary studies, being the principal investigator on a peer-reviewed externally funded study, presenting research results at scholarly forums, publishing research methods and results and activities that result in the generation and application of intellectual property through technology transfer, and service. Therefore, consideration of research productivity should accompany the award of tenure or promotion at any rank in the Tenure Track. In the case of initial appointment without tenure, reasonable promise of excellence and productivity in research is expected.</p>
<p>We shape the profession of nursing and the health care environment by developing leaders in education, research, and practice.</p>	<p>Excellence in practice is fundamental to the School's mission of achieving excellence in educational programs and providing leadership in interdisciplinary, collaborative, and innovative nursing practice. Therefore, consideration of practice productivity should accompany appointment or promotion at any rank. Practice is broadly defined to include clinical, educational, research, theory, technological, leadership, administrative, historical, policy, or other activities that are related to the discipline of nursing.</p> <p>The SON is committed to serving the University, the nursing profession, and the community. A significant contribution in the area of service is expected of all faculty members. For appointment at or promotion to any rank and tenure, a continuing and relevant record of service should be demonstrated.</p>

Appendix IC-2



UMSON Faculty Workload and Responsibilities

Responsible Administrators: Academic Department Chairs

Sponsoring Unit: Academic Departments

Effective Date: June 23, 2009

Last Reviewed: December 12, 2012

Next Scheduled Review: December 12, 2015

Inactivated Date: N/A

POLICY STATEMENT

All full-time UMSON faculty members are expected to participate in teaching, scholarly activity, and service to the community, the University, and the School. The relative distribution of workload among this triad may vary according to the type of appointment and the nature of the assignment. In addition, this distribution may change as an outcome of discussions between a faculty member and the department chair during a faculty member's annual evaluation/assessment meeting. Faculty members are expected to meet their responsibilities independently and in full accord with both institutional expectations and established tenets of academic freedom. A substantial difference between actual and standard workload expectations for any basic workload element (instruction, research/scholarship, and service) will be balanced by compensatory changes in the other basic workload elements. Reductions in faculty effort in research/scholarship and/or service/practice will be balanced by a corresponding increase in instruction. Exceptions to UMSON's standard workload expectations may be granted by the department chair.

Standard workload expectations for tenured and tenure track faculty members are as follows:

<i>Instruction</i>	<i>Research/Scholarship</i>	<i>Service/Practice</i>
45-55 percent	35-45 percent	10-20 percent
10 month appt.: 4.2 - 5.0 Course Units/WLUs		
12 month appt.: 5.0 - 6.0 Course Units/WLUs		

Standard workload expectations for non-tenure track faculty members (UMSON faculty ranks and research faculty ranks) are as follows:

<i>Instruction</i>	<i>Research/Scholarship</i>	<i>Service/Practice</i>
65-75 percent	5-20 percent	5-30 percent
10 month appt.: 5.8 - 6.6 Course Units/WLUs		
12 month appt.: 7.0 - 8.0 Course Units/WLUs		

RATIONALE

The purpose of this workload policy is to promote optimal performance by UMSON faculty members in meeting the needs and expectations of students and other clienteles, and to provide mechanisms that will ensure accountability for that performance. Because faculty members are the primary providers of the University System of Maryland's instruction, research/scholarship, and service, the policy must

encourage and support faculty in applying their creativity, ingenuity, initiative, knowledge, experience, and professional skills in performing many diverse functions.

SCOPE

This policy applies to the following:

1. All persons holding tenure and tenure-track positions who are classified as faculty members (instructional, research, and clinical/public service) and are reported to the Maryland Higher Education Commission (MHEC) through the employee data system.
2. All persons who, regardless of occupational classification, hold faculty rank and perform administrative duties at the level of the academic department or equivalent academic unit, including chairs, vice chairs, directors, etc.
3. All persons who, while neither tenured nor on the tenure track, are employed full-time, i.e., 50 percent or more, by UMSON; are classified as instructional faculty and are reported to MHEC through the employee data system.
4. All persons who, while neither tenured nor on the tenure track, are employed full-time, i.e., 50 percent or more, by UMSON; are classified as research faculty and are reported to MHEC through the employee data system; and whose salaries are supported, in whole or in part, by state funds.

This policy does not apply to the following:

1. All persons who hold faculty rank but who are assigned to administrative duties outside UMSON.
2. All persons who are classified as research faculty but whose salaries are fully supported by non-state funds, e.g., federal research grants or other grants and contracts.

WEBSITE/ SERVER ADDRESS FOR THIS POLICY

R:/All Users/SON Policies and Resources/Faculty Policies and Resources

RELATED POLICIES, PROCEDURES, STATUTES, AND REGULATIONS

UMSON Policies and Procedures	Resources/Policy - UMSON Compensation for Instructional Overload
Policy on Compensation for Instructional Overload (R:/ALL USERS/SON Policies and Resources/Faculty Policies & Resources/Policy - UMSON Compensation for Instructional Overload)	University of Maryland, Baltimore (UMB) II-1.25 (A) Policy on Faculty Workload and Responsibilities http://cf.umaryland.edu/umpolicies/usmpolicyInfo.cfm?polid=43
	University System of Maryland (USM) II-1.25 Policy on Faculty Workload and Responsibilities http://www.usmd.edu/regents/bylaws/SectionII/II125.html
	UMB II-3.10 (A) - Policy on Professional Consulting and Other External Activities http://cf.umaryland.edu/umpolicies/usmpolicyInfo.cfm?polid=62
	USM II-3.10 - Policy on Professional Commitment of Faculty http://www.usmd.edu/regents/bylaws/SectionII/II310.html

CONTACTS

Questions regarding the general policy, applicability, procedures, and guidelines should be directed to the chair of the relevant academic department.

DEFINITIONS

Course Unit: For the purposes of defining standard instructional workload expectations, a course unit, i.e., a Work Load Unit (WLU), is defined as follows:

1. One course unit/WLU is equivalent to a three-credit didactic course (45 contact hours).
2. One course unit/WLU is equivalent to a two-credit clinical practicum (90 contact hours).
3. One course unit/WLU is equivalent to a two-credit laboratory experience (90 contact hours).
4. Faculty members whose instructional load includes other than three-credit courses will have their standard instructional load expectations defined accordingly.

Instructional Effort: Instructional effort includes, in addition to classroom or clinical instruction time, all concomitant activities necessary for the preparation, delivery, and evaluation of instruction and learning, including student advisement and additional assignments such as specialty and course coordination.

RESPONSIBILITIES

Academic Department Chair

- In collaboration with each faculty member, annually reviews workload distribution requirements based on their rank and type of appointment and identifies the resources needed to promote success
- Develops and implements procedures for monitoring faculty compliance with workload policy requirements and the need for changes in a faculty member's workload distribution
- Determines each faculty member's teaching assignments consistent with instructional workload guidelines
- Maintains records of faculty instructional workload
- In the event of instructional overload, submits compensation recommendations to the dean, per the Policy on Compensation for Instructional Overload
- Submits annual report of instructional workload to the dean or the dean's designee

Faculty

- In collaboration with the department chair, annually reviews workload distribution requirements based on their rank and type of appointment and identifies the resources needed to promote success
- Notifies department chair of changes in one or more areas of responsibility that may impact other areas of workload responsibilities
- Provides input regarding desired teaching assignments to course or specialty directors and department chair

PROCEDURES

Academic Department Chair

- Meets with each faculty member annually to review current and proposed workload and determines what modifications, if any, need to be made to the faculty member's workload distribution for the upcoming academic year

- Consults with individual faculty members, course directors, specialty directors, and other administrators regarding instructional needs and other factors that may have workload consequences for individual faculty members
- Applies guidelines for calculating instructional workload units when determining teaching assignments
- Modifies instructional workload based on percentage of faculty time supported by external funding, e.g., grants, contracts, professional service agreements, etc., or other assignments/responsibilities
- Monitors faculty workload throughout the academic year and makes adjustments as needed
- Maintains records of faculty workload
- Compiles annual report itemizing each faculty member's instructional workload for use in preparing UMSON's annual report to the campus president

WORKLOAD GUIDELINES

A. Determining Instructional Work Load Unit (WLU) Assignment

Instruction: 45-55% for tenured and tenure track faculty
65-75% for non-tenure track faculty

WLUs are assigned each semester and accrued over the 12-month period spanning the summer, fall, winter, and spring semesters/sessions, unless stated otherwise. Dependent on factors such as course presentation style and/or method of testing, the WLU for class size and course coordination can/will be adjusted in consultation with the Department Chair.

1. Didactic Courses (classroom and online):

- 1 course unit/WLU = 3-credit didactic course (45 contact hours/semester)
- If more than one faculty member teaches a didactic course or a section, the WLUs will be divided proportionately. WLUs will be adjusted proportionately for courses greater or less than 3 credits, e.g., 2 credit course = 0.67 WLUs; 5 credit course = 1.66 WLUs
- Didactic courses with large enrollments:
 - 1-50 students: WLUs assigned as per course credit allocation, e.g., 3-credit course = 1 WLU; 5 credits = 1.66 WLUs
 - 51-100 students: 0.5 additional WLUs
 - 101-150 students: 0.5 additional WLUs
 - 151-200 students: 0.5 additional WLUs
 - Example: 4-credit course with 140 students: 1.33 WLU + .5 + .5 = 2.33 WLUs
 Courses taught in a primarily didactic fashion with multiple choice assessments will not be credited with additional workload for students greater than 150.
- Online courses: Enrollment will be capped at 25 students per section with the option of increasing the number with the instructor's permission
- Courses with two levels of students: WLUs will be allocated for courses that include undergraduates and Clinical Nurse Leaders (CNL).

2. Courses with Simulation Lab Components:

- 1 course unit/WLU = 2-credit laboratory component (90 contact hours/semester)
- WLUs will be adjusted proportionately for courses greater or less than 2 credits, e.g., 1-credit lab component (45 contact hours) = 0.50 WLUs
- WLUs will be adjusted proportionately for courses greater or less than 2 credits, e.g., 1-credit lab component (45 contact hours) = 0.50 WLUs

3. **Clinical Practica - Entry-level Programs:**

- 1 course unit/WLU = 2-credit clinical practicum component (90 contact hours/semester)
- WLUs will be adjusted proportionately for courses greater or less than 2 credits, e.g., 3-credit clinical course = 135 hours/semester = 1.5 WLUs; 4-credit clinical course = 180 hours/semester = 2.0 WLUs

4. **Precepted Clinical Emphasis Practica: NURS 487/523 (6-8 credits):**

- NURS 487: 4-hour, entry-level precepted practicum (1.33 WLUs) and a 2-hour seminar (.67 WLUs) = 2.00 WLUs.
- NURS 523: 6-hour, entry-level (MS-CNL) precepted practicum (2 WLUs) and a 2-hour seminar (.67 WLUs) = 2.67 WLUs.
- Full workload credit is based on 15 students per section, which is considered the optimal section size for these courses.
- Sections within departments can be combined when enrollment in one or more sections is low.
- Seminar WLUs are prorated proportionally if more than one faculty member is assigned.
- Practica WLUs are prorated for sections with fewer than 15 students. However, no less than 1 WLU will be assigned to faculty members teaching a section of NURS 487 or NURS 523.

5. **Clinical Practica - MS Specialty Programs:**

- 1 course unit/WLU = 2-credit clinical practicum.
- WLUs will be adjusted proportionately for courses greater or less than 2 credits, e.g., 3-credit clinical course = 1.5 WLUs; 4 credit clinical course = 2.0 WLUs; 5-credit (or greater) clinical course = 2.5 WLU.
- WLU allocation reflects faculty effort associated with establishing and overseeing graduate student-preceptor dyads, National Task Force on Quality Nurse Practitioner Education (NTF) guidelines or direct, on-site instruction by the faculty member in a clinical setting.
- Workload adjustments may be made to reflect special circumstances such as those related to large numbers of students or sites, travel times to practice sites for the purpose of monitoring student-preceptor dyads, and/or number of site visits per semester.

6. **Course Coordination:**

WLUs for course coordination of graduate core courses, undergraduate courses with didactic and clinical components, or other multi-section courses, e.g., didactic, simulation laboratory, or clinical practicum):

- 1-100 students: 0.5 WLUs
- 101-150 students: 0.25 additional WLUs
- More than 150 students: 0.25 additional WLUs
- Example: 4-credit course with 170 students = 0.5 WLUs + 0.25 + 0.25 = 1.0WLU

7. **Doctoral Programs:**

- Doctoral Comprehensive Exam Chair: 0.5 WLUs in semester when exam is administered with the WLU divided at the discretion of the Doctoral Comprehensive Exam Chair

- Dissertation Committee Chairs and members, following consultation with the assistant dean for the PhD Program and the department chairs, will allocate and distribute the number of credits assigned per faculty member throughout the dissertation process. WLUs will be calculated according to the Independent Study guidelines. (See next section.)
- Research Rotations: The assistant dean for the PhD Program will provide department chairs with the names of faculty working with students on research rotations. WLUs will be calculated according to the Independent Study guidelines (See next section.)
- Capstone III & IV projects: The Capstone Chair will receive 0.2 WLUs for Capstone III & IV, or determine and distribute WLUs to committee members if indicated.

8. Independent Study:

The following formulas will be used to convert graded instructional experiences that do not follow the traditional course format, e.g., independent study, supervision of dissertation research, etc., to WLUs:

<u>Course Level</u>	<u># of Credits = 1 Course Unit/WLU</u>
800-899 (Dissertation and doctoral level independent studies)	5 credits = 1 CU = 1 WLU
500-798 (Graduate level independent studies)	10 credits = 1 CU = 1 WLU
300-499 (Undergraduate level independent studies)	15 credits = 1 CU = 1 WLU

Independent study credits are accumulated within a semester across all of a faculty member's independent study students and then converted to WLUs, which will be used to adjust the instructional workload in the next semester. NOTE: WLUs accumulated in the spring semester will be applied in the next academic year.

9. Other Teaching Workload Considerations:

- Major revisions to an existing Web-based or face-to-face course: 1.0 WLU/3 credits. WLUs will be adjusted proportionately for courses greater or less than 3 credits.
- Major revisions encompass widespread changes to course objectives, content, and/or teaching modalities that may require approval by the appropriate curriculum committee.
- Dual numbered courses, e.g., NURS 333/NURS 505; NDNP 804/NURS 840, will be treated as one course for the purpose of calculating WLUs. If the combined courses have different credit allocations, WLUs will be based on the course with the higher credit allocation.
- WLU allocations may be adjusted per the department chair's discretion to reflect extraordinary circumstances, e.g., faculty member's WLU allocation for teaching a required course that has a low enrollment, specialty director's WLU allocation for low enrollment programs, etc.
- WLUs may be assigned per the department chair's discretion for the preparation of external funding proposals, mentoring pre- and post-doctoral fellows, preparation of accreditation reports, or other special projects.
- WLUs may be assigned per the department chair's discretion to reflect new or continuing faculty member's preparation time to teach a didactic course, for the first time, which they did not develop.

B. Administrative, Research and Scholarship, Service, and Practice Adjustments to Standard Workload Expectations

Exceptions to UMSON's standard workload expectations for instruction, research/scholarship, and service are granted by the department chair and may be based on the following factors:

1. Administration:

Assumption of responsibility for the functions of associate or assistant dean, department chair, department vice chair, program director, or special departmental projects may require reduction of expectations for service, research/scholarship, or instruction. The reduction shall be dependent on the scope of administrative responsibilities.

Program directors for master's specialties:

- WLUs may be decreased to reflect the workload associated with directing small programs
- WLUs are prorated proportionally if two or more faculty members serve as co-program directors

2. Research and Scholarship:

Research and Scholarship: 35-45% for tenured and tenure track faculty
5-20% for non-tenure track faculty

Training Grants. Faculty members who receive salary support from externally funded training or service grants, for the purpose of teaching a course, do not qualify for release time or reduction in workload expectations for instruction, research/scholarship, and service. Instructional WLUs will be assigned according to the guidelines in Section IV.

Departmental and Sponsored Research Projects. Assignment of additional time for research can be supported by either departmental or external funds and with the approval of the department chair and dean; a reduction of expectations for instruction and/or service may be authorized. In those instances where the research is supported by externally funded grants and/or contracts, the accompanying reduction of expectations for instruction and/or service should mirror the replacement of departmental salary by externally funded salary support.

- Externally funded research grants or contracts provide release time as stated in the grant. Example: Faculty member receives grant funding to support 20 percent of salary: workload expectations for instruction and service are reduced to 80 percent of the expected workload.
- Faculty members with 100 percent external funding are still expected to contribute to the teaching mission.

3. Service and Practice:

Service and Practice: 10-20% for tenured and tenure track faculty
5-30% for non-tenure track faculty

- Chairs of standing school-wide committees and curriculum subcommittees: 1.0 WLU per academic year
- Chair of Faculty Council: 2 WLUs per academic year

Public and professional service is expected of all faculty members, however, there are certain instances for which this expectation may require unusual commitments. Assignment of additional service time and the consequent reduction of expectations for instruction and/or research/scholarship should be directly related to the duration and the extent of the commitment.

Faculty members with clinical practice contracts (practice service agreements) will receive release time to conduct their practice. The instructional workload expectation will be prorated based on the percentage of contracted time. Example: clinical practice contract for two days a week (40 percent of salary) would reduce the instructional workload to 60 percent of the expected level.

Approved Dean Kirschling, May 18, 2013

Appendix ID-1

UMSON Faculty Council, Committees, Faculty Senate & Judicial Board Representatives

1. Faculty Council

Charlotte Seckman (Chair)
Kathleen Michael (Chair Elect)

Secretary

Kristin Rawlett

Associate or Assistant Dean Representative

Janice Hoffman

FCH Department Representatives

Jeffery Johnson
Yolanda Ogbolu
Rosemarie Satyshur
Patricia Zimberg

OSAH Department Representatives

Bimbola Akintade
Susan Bindon
Rebecca Brotemarkle
Margaret Hammersla

2. Entry Level Curriculum Committee

Course Directors

Nina Trocky (Chair)
Jana Goodwin

FCH Department Representatives

Robyn Gilden
Victoria Selby

OSAH Department Representatives

Kelley Wilson (Chair Elect)
Suzanne Sherwood

Shady Grove Representative

Vivian Koroknay

3. Masters/DNP Curriculum Committee

FCH Department Representatives

Elaine Bundy
Alison Davis
Patricia McLaine
Karen Scheu

OSAH Department Representatives

Lyn Murphy (Chair)
Veronica Amos
Elizabeth Galik
Margaret Hammersla

4. PhD Curriculum Committee

FCH Department Representatives

Alison Trinkoff (Chair)
Yulan Liang
Yolanda Ogbolu
Debra Scrandis

OSAH Department Representatives

Erika Friedmann
Kathleen Griffith
Eun-Shim Nahm
Debra Wiegand

5. Appointments, Promotion, and Tenure (APT) Committee

Non-Tenured Associate Professor

Arpad Kelemen
Joseph Pellegrini

Tenured Associate Professor

Beth Galik
Lynn Oswald

Non-Tenured or Tenured Professor

Carla Storr (Chair)
Louise Jenkins
Eun-Shim Nahm
Carolyn Waltz

6. Technology & Simulation Advisory Committee

Mary Fey (Chair)

FCH Department Representatives

Kathleen Buckley
Belinda Clifford

OSAH Department Representatives

Karen Clark
Rachel Onello

7. Student Affairs Committee

FCH

Debra Scrandis (Chair)
Amy Daniels

OSAH

Susan Bindon
Vanessa Fahie

Shady Grove

Mary Pat Ulicny

8. Judicial Boards

Susan Wozenski (Chair)

BSN Judicial Board

Blanche Brown
Victoria Selby
Regina Twigg
Fran Valle
Janet Wulf

Masters Judicial Board

Ana Duarte
Gail Lemaire
Michele Michael
Lyn Murphy
Joseph Pellegrini

DNP Judicial Board

Veronica Amos
Linda Costa
Nancy Lerner
Jacqueline Mitchell
Rosemarie Satyshur

9. Faculty Senate Representatives

Nina Trocky (President)
Karen Clark (Faculty Council Rep)
Jeanne Geiger-Brown
Jane Lipscomb
Joseph Proulx



UMSON Student Organizations

American Assembly for Men in Nursing (AAMN), Maryland Chapter

The purpose of the Maryland Chapter of AAMN is to encourage men of all ages to become nurses and join together as colleagues to strengthen and humanize health care. The Maryland Chapter accomplishes this by supporting men who are nurses to grow professionally and demonstrate to each other and to society the increasing contributions made by men within the nursing profession. AAMN also advocates for continued research, education, and dissemination of information about men's health issues, men in nursing, and nursing knowledge at the state and national levels.

Doctoral Student Organization (DSO)

The mission of the Doctoral Student Organization (DSO) is to support and enhance the learning, knowledge, and professional development of doctoral students in both the PhD and DNP Programs. The organization is committed to making a difference in health care by promoting evidence-based practice, scholarship, and professional collaboration within UMSON and the community at large.

Graduate Nursing Association (GNA)

The purpose of the GNA is to advocate for all masters'-level nursing students through encouraging good fellowship, creating a sense of community, and facilitating communication between faculty, staff, and students at UMSON. The GNA inspires professional growth by providing programs representative of fundamental and emerging trends in the field of nursing and promotes a dynamic and diverse student body dedicated to the highest quality of health care.

Nurses for Global Health (NGH)

NGH promotes global health awareness and activities at UMSON by building collaborations, creating networks, and being a resource for global health opportunities in nursing. There are monthly meetings, film presentations, and an annual global health conference organized by the group, which provide opportunities for interprofessional collaboration among students and faculty members.

Nursing Student Government Association (NSGA) (BSN only - Baltimore)

The purpose of the NSGA is to encourage fellowship among students, faculty, and staff by creating an atmosphere of collaboration and understanding at the UMSON. The NSGA inspires professional growth by providing programs representative of fundamental and emerging trends in the field of nursing and promotes a dynamic and diverse student body dedicated to the highest quality of health care.

Students United for Policy, Education, and Research (SUPER)

SUPER, a UMSON student chapter of AcademyHealth, is a student group whose members strive to educate themselves and others on current health care research, development and policy practices. SUPER's parent organization, AcademyHealth, is a premier advocate for health services research and policy advancement. With their guidance, SUPER hosts legislators and other policy makers from the local, state, and national levels; health services researchers; and those working within the health care system in non-governmental roles to share their experiences with the University of Maryland population. SUPER also participates in state health care advocacy events, such as the School of Nursing's Advocacy Day in Annapolis, allowing students to apply what they have learned about health services policy.

University of Maryland Association of Nursing Students (UMANS) (BSN only - Shady Grove)

This chapter of the National Student Nurses Association (NSNA) is based at the Shady Grove site. UMANS' mission is to organize, represent, and mentor nursing student preparing for initial licensure and BSN completion programs, convey professional standards, promote skill development, advocate for high-quality health care, and contribute to advancing nursing education. UMANS involves students in community volunteering, speaks to young people about nursing and health, and raises funds for various projects. UMANS participates in the annual NSNA convention.

CAMPUS-WIDE STUDENT ORGANIZATIONS

Graduate Student Association (GSA)

GSA is student-run organization serving and representing all graduate students at UMB. It acts as a liaison to the Graduate School, communicates student concerns and ideas, supports graduate student research interests, and provides a platform for discussion on matters that affect graduate student life.

University Student Government Association (UGSA)

UGSA is a campus-wide student government that represents all UMB students. It is comprised of student senators elected annually to represent each school at monthly meetings (usually the second Wednesday of each month). Its main purpose is to enhance the quality of student life by promoting the free exchange of ideas, advocating for student rights, and financial co-sponsorship of events and activities, e.g. Fall Fest, social nights, educational programs, etc.

UMB has three additional campus-wide student groups: the **International Student Organization** (with several ethnic and national subgroups), **Muslim Student and Scholars Association**, and the **United Students of African Descent**. Information is available at: http://www.umaryland.edu/studentleadership/studentgroups/find_org.html#university

Appendix IIA-1

UMSON Capacity and Audiovisual Capabilities - Baltimore

Classrooms

Room	Seats	PowerPoint/ Projector	Document Camera	DVD	VCR	IVN*
130	470	X	X	X	X	
140	142	X	X	X	X	X
150	54	X	X	X	X	
W202	48	X	X	X	X	
W208	70	X	X	X	X	
245	25	X	X	X	X	
259	40	X	X	X	X	
304	50	X	X	X	X	
307	48	X	X	X	X	
400	15	X	X	X		
450	26	X	X	X	X	
460	30	X	X	X	X	X
470	32	X	X	X	X	
580	24	X	X	X	X	
730	60	X	X	X	X	
*IVN - Interactive Video Network						

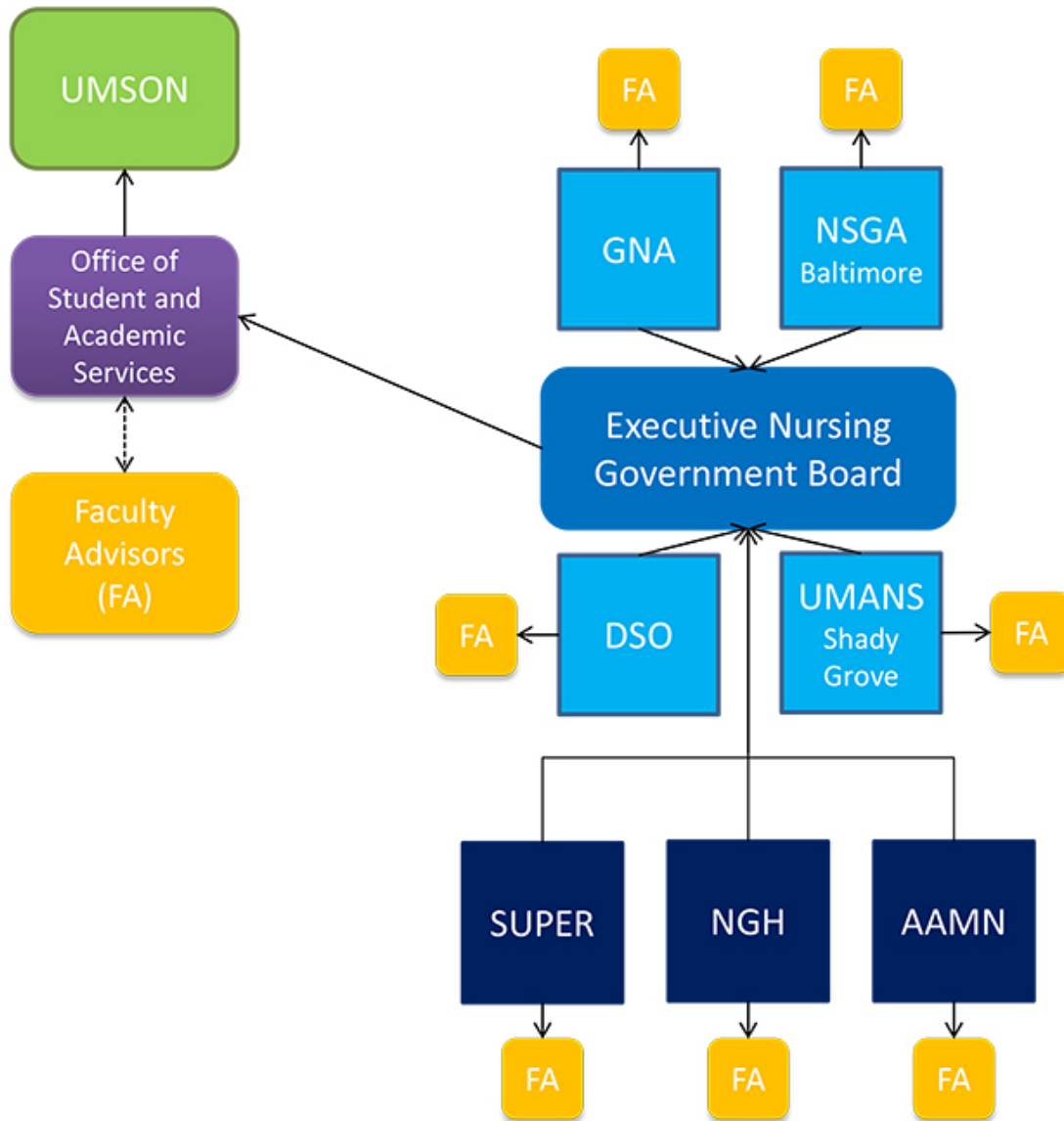
Conference and Seminar Rooms

Room	Seats	PowerPoint/ Projector	Document Camera	DVD	VCR
285	10		X		
318	15	X	X	X	X
335	15	X	X	X	X
418	15	X	X	X	X
435	15	X	X	X	X
503	20	X	X	X	X
535	15	X	X	X	X
618	15	X	X	X	X
635	15	X	X	X	X

Appendix IIB-1



Nursing Student Organizational Structure



AAMN - American Assembly for Men in Nursing
 DSO - Doctoral Student Organization
 FA - Faculty Advisors
 GNA - Graduate Nursing Association
 NGH- Nurses for Global Health
 NSGA - Nursing Student Government Association
 SUPER - Students United for Policy, Education, & Research
 UMANS - University of Maryland Association of Nursing Students
 UMSON - University of Maryland School of Nursing

Appendix IIB-2

Counseling Support Services at the Universities at Shady Grove (USG)

From: SG Staff List [<mailto:SG-STAFF@LISTSERV.UMD.EDU>] On Behalf Of Ilona Faulks

Sent: Friday, February 07, 2014 11:56 AM

To: SG-STAFF@LISTSERV.UMD.EDU

Subject: Students of Concern

On behalf of Robyn Dinicola-Wagle:

Dear Faculty and Staff at USG,

As we begin the Spring semester I am writing to inform everyone about the resources available on- and off-campus to help in dealing with students who may be distressed, disruptive, or even threatening. As the people who have the closest interactions with the students, you are likely the first line of awareness when it comes to recognizing when a student may be in distress. The sooner a student can get help, the better chance of a successful outcome for both the student and the campus community. Recent events, both national and local, should help us realize that we all are, and need to be, part of the USG community of care. It is also good to know that when there are situations beyond your expertise, there are trained colleagues able to help. Please take a few moments to review the Indicators of Concern and resources below, and keep this document handy for those situations where you may need it.

Indicators of Concern Include:

- Student remains distressed despite repeated attempts to help
- Increasing isolation, irritability, lack of personal care
- Deteriorating academic or social success
- Behavioral Concerns:
 - Disruptive, disorderly, or destructive acts
 - Verbal or physical aggression
 - Threats of, or actual instances of, violence or harm
 - Harassment or stalking of others
 - Possession of, or ready access to, a weapon

While you may not be aware of all of these factors, knowledge of any of these indicators is a good sign that the student should be referred for help and/or review. Again, the earlier the intervention, usually the less intrusive it needs to be, and the more successful the outcome.

Mental Health and Behavioral Resources for Faculty and Staff

Every situation is different, and each may require a different set of interventions. The following is a guide to where to refer when you are dealing with a student having difficulties. Don't get caught up in trying to diagnose the situation on your own and making the perfect decision. It is more important the student gets the help they need, and that further action can be taken, if needed.

- Emotionally Upset or Psychologically Overwhelmed - When a student is having trouble coping with the circumstances of their life, they often will act more emotionally than usual, or may cut themselves off from others. Feelings of helplessness or hopelessness may be exhibited. Changes in the ability to function are likely to appear.
 - Contact and/or walk the student over to the USG Center for Counseling and Consultation (CCC; 301-738-6273). The CCC is located at III-1134, on the left-most wall as you walk into

the Priddy Library. Free and confidential psychological services are available for those in need. The CCC is open Monday-Thursday 10am - 7pm and Friday 10am - 2pm.

Psychiatric Concerns - When a student's level of distress or disruption is more significant and you feel that they may need more immediate attention, or possibly hospitalization:

- Contact the USG Center for Counseling and Consultation (CCC; 301-738-6273) for referral for psychiatric services.
- If the situation occurs when the CCC is closed, please contact the Montgomery County Crisis Center at 240-777-4000. The Crisis Center is open 24/7 and offers free phone and walk-in services for persons in an "immediate crisis situation." For those in need, the Crisis Center offers translation services in more than 20 different languages. The Crisis Center also provides a "Mobile Crisis Team" (MCT) for situations that require immediate on-site clinical intervention and is available 8am - Midnight.
- You can also contact USG Public Safety (301-738-6065) to facilitate the student's getting the help they need.

Disruptive, Disorderly, and/or Destructive Acts - If the student of concern is creating a nuisance by their actions, or is defacing/destroying property (campus or individual):

- Contact USG Public Safety (301-738-6065) to report the situation if you feel immediate intervention is needed.
- Refer the situation to the USG Behavioral Assessment Team (BAT) by contacting either of the co-chairs:
 - John Brandt, USG Public Safety Coordinator (jbrandt@umd.edu, 301-518-4907)
 - Robyn Dinicola-Wagle, USG Chief Student Affairs Officer (rdwagle@umd.edu, 301-738-6073)

Threat of Immediate Harm - If the student is making verbal threats of violence, or acting in a way that leads you to believe that such harm is imminent:

- Remove yourself from the harmful situation and contact 911 to report the situation and ask for help. Also call USG Public Safety (301-738-6065) to alert them to the situation.

Unsure of How to Proceed/Behavioral Assessment Team (BAT) - Many situations are complex and do not lend themselves to easy decisions about how to proceed. Straight-forward circumstances, such as cases of immediate threat of violence or harm needing a 911 call, or a student dealing with psychological concerns (e.g., anxiety, depression, grief, relationship issues) being referred to the CCC, are relatively easy to handle. When you are unsure of what your next step is, please contact the USG Behavioral Assessment Team (BAT). BAT is designed to deal with situations that have no easy answers and may require multiple levels of intervention.

To refer someone to BAT, or if you have any questions about the Team, please contact either:

- John Brandt, USG Public Safety Coordinator (jbrandt@umd.edu, 301-518-4907)
- Robyn Dinicola-Wagle, USG Chief Student Affairs Officer (rdwagle@umd.edu, 301-738-6073)

Please don't hesitate to contact me for additional information or with any questions at rdwagle@umd.edu or 301-738-6073. Thank you for your time and continued efforts given for the safety and wellness of our campus community.

Robyn Dinicola-Wagle, USG Chief Student Affairs Officer

Appendix IIB-3

Organized Research Centers

Center for Biology and Behavior Across the Lifespan

The Biology and Behavior Across the Lifespan (BBAL) Center was initially proposed by Drs. Susan Dorsey and Barbara Resnick in 2012 and recognized by the University of Maryland, Baltimore as a Center of Excellence during that same year. BBAL, currently directed by Drs. Barbara Resnick and Eun-Shim Nahm, serves as an important melting pot of research ideas with regard to clinically focused questions. Research questions are based on management of disease and optimization of health and the ways in which biological findings can influence disease prevalence and progression. Bringing together individuals with specific expertise in different areas, center activities facilitate discussion around ways to expand the science in a particular area, e.g., exercise adherence. Such cross-fertilization and discussion allows increased funding options and opportunities and encourages team development beyond the limited scope of a single investigator or investigative group. Further, the center has established a wealth of resources and the structure to ensure such things as the banking of blood samples for future use by center members and the sharing of supplies, e.g., gait assessment tools, actigraphy and successful intervention and measurement tools and approaches.

In addition to pooled resources and expertise as described above, BBAL facilitates the translation of animal-based findings to humans. The center maintains a strong clinical orientation by virtue of the clinical expertise of members, and while the research questions are driven from the clinical setting, they include questions that must first be explored and answered at the bench. In an appropriate process, bench findings get translated back to real world settings. Within BBAL, we have a range of clinical and research expertise, and center members serve as mentors for students and faculty members in bench to bedside research and understanding this full spectrum of research in all of the work that they do.

Dissemination of the research is important to the development of science and is ethically important with regard to the humans and animals that are involved in research-related endeavors. Our bench to bedside focus and increased awareness of the combination of biology and behavior in all areas of disease development and progression allows for dissemination of findings across multiple venues. The pure science-related materials are disseminated to appropriate journals, and the translation and clinical significance of this work is disseminated to journals and meetings relevant to those most likely to use these findings in clinical work and research. Further, center members have expertise in dissemination of findings into real world settings at the community level. We use a Reach, Effectiveness, Adoption, Implementation and Maintenance (RE-AIM) perspective to routinely evaluate our dissemination endeavors. This brings in our work and expertise in use of technology and other types of dissemination approaches as well as the evaluation of those approaches.

BBAL has structured activities to support our research training, service, and discovery mission.

Examples include:

- Research incubator that facilitates access to pilot funds and mentored proposal development.
- Seminars—Each semester we hold an interdisciplinary seminar and encourage participation UMB graduate students to take this seminar as an Independent study for two credits. Curriculum varies and will span relevant issues from research-related to topics of relevance to biology and behavior across the lifespan.
- Invited professorships/lectureships.
- Regular monthly meetings; Monthly Brown Bag Research presentations; A Monthly Doctoral Study Brown Bag with focused presentations to aide in research development; A grant writing seminar for development of pre-doctoral and post-doctoral research focused and/or training grants.

Center for Health Outcomes Research

The Center for Health Outcomes Research (CHOR) builds capacity to improve health outcomes. CHOR's vision is to become a thriving interprofessional group of scientists for whom a complex health outcomes model inspires contextually rich research. Our center has strengths in epidemiology, psychosocial environment assessment, participatory action research methods, survey research, multisite intervention studies, informatics, secondary data analysis, economics, outcomes studies, and policy analysis. By leveraging these strengths, center investigators generate knowledge about the complex causal influences that affect health and safety outcomes of patients and families and patient preferences for treatments, and disseminate results that can change policy and practice.

The overall aims of CHOR are:

Aim1. Advance interprofessional science of health outcomes by identifying phenomena that enhance or encumber better outcomes for people (individuals, families, and communities) and systems, and that are modifiable through active interventions.

Aim 2. Improve the health of populations by translating research findings into solutions that can be broadly applied in a variety of settings.

Appendix IIB-4

UNIVERSITY OF MARYLAND SCHOOL OF NURSING STRATEGIC IMPLEMENTATION PLAN FOR THE STRATEGIC PLAN (2012 - 2017)			
GOAL 1: Prepare leaders to shape and influence the nursing profession and the health care environment			
Champions: Janice Hoffman, Rebecca Wiseman, Jennifer Hayes-Klosteridis			
APPROACH: In alignment with the UMB Strategic Plan, UMSON will: <ul style="list-style-type: none"> • Increase inter-professional initiatives and expand opportunities for faculty, staff and students to engage in research, practice, health policy, advocacy, the scholarship of teaching and learning, and professional development activities • Increase the academic progression of students by marketing and recruiting doctoral students and creating seamless transition plans for educational advancement 			
OBJECTIVE 1.1 Increase opportunities for faculty, staff and students to engage in education, research, and practice			
YEAR 1 (2012-2013) TACTICS/ACTION ITEMS	WHO	TIMELINE	FUNDING
Tactic 1: Identify and implement a research agenda for the scholarship of teaching and learning Deliverable(s): Key team members responsible for establishing a research agenda for scholarship of teaching and learning identified	Goal 1 Implementation Team	May, 2013	
Tactic 2: Increase opportunities for student practice, research, policy, clinical, and inter-professional experiences Deliverable(s): Key team members responsible for creating opportunities for student practice, research, policy, clinical, and inter-professional experiences identified	Goal 1 Implementation Team	May, 2013	
Tactic 3: Develop a student organizations newsletter that highlight student research and practice experiences Deliverable(s): Student Organization Newsletter developed	Office of Student and Academic Services	May, 2013	
YEAR 2 (2013-2014) TACTICS/ACTION ITEMS	WHO	TIMELINE	FUNDING
Tactic 1: Identify and implement a research agenda for the scholarship of teaching and learning Deliverable(s): Research agenda for the scholarship of teaching and learning identified	Institute for Educators in Nursing and Health Professions	May, 2014	
Tactic 2: Increase opportunities for student practice, research, policy, clinical, and inter-professional experiences Deliverable(s): 2a) Accessible repository for current student practice, research, policy, clinical, and inter-professional experiences developed 2b) Identify gaps in existing opportunities for discussion at Deans and Chairs	Assistant Deans for Academic Programs	May, 2014	

Tactic 3: Develop a student organizations newsletter that highlight student research and practice experiences Deliverable(s): Student Organization Newsletter implemented	Office of Student and Academic Services	Ongoing	
YEAR 3 (2014-2015) TACTICS/ACTION ITEM	WHO	TIMELINE	FUNDING
Tactic 1: Identify and implement a research agenda for the scholarship of teaching and learning Deliverable(s): Research agenda for the scholarship of teaching and learning implemented	Institute for Educators in Nursing and Health Professions	May, 2015	
Tactic 2: Increase opportunities for student practice, research, policy, clinical, and inter-professional experiences Deliverable(s): Opportunities for student practice, research, policy, clinical, and inter-professional experiences implemented	Course Directors	May, 2015	
Tactic 3: Develop a student organizations newsletter that highlight student research and practice experiences Deliverable(s): Student Organization Newsletter implemented	Office of Student and Academic Services	Ongoing	
OBJECTIVE 1.2 Provide professional development and learning opportunities for faculty and staff			
YEAR 1 (2012-2013) TACTICS/ACTION ITEMS	WHO	TIMELINE	FUNDING
Tactic 1: Align with the recommendations of the Mentoring Task Force and develop a plan for faculty development Deliverable(s): Mentoring task force recommendations for faculty development adopted	Administrative Council and Faculty Council	May, 2013	
Tactic 2: Align with the campus strategic plan and develop a plan for staff development Deliverable(s): Campus strategic plan recommendations identified	Goal 1 Implementation Team	May, 2013	
Tactic 3: Provide opportunities for staff development (cross training, webinars, continuing education) Deliverable(s): Key members of a team responsible for developing a plan to increase opportunities for staff development identified	Goal 1 Implementation Team	May, 2013	
Tactic 4: Build a staff expertise list Deliverable(s): Key members of a team responsible for developing a staff expertise list identified	Goal 1 Implementation Team	May, 2013	
Tactic 5: Build a faculty expertise list Deliverable(s): Key members of a team responsible for developing a comprehensive list of faculty expertise identified	Goal 1 Implementation Team	May, 2013	

YEAR 2 (2013-2014) TACTICS/ACTION ITEMS	WHO	TIMELINE	FUNDING
Tactic 1: Align with the recommendations of the Mentoring Task Force and develop a plan for faculty development Deliverable(s): Mentoring task force recommendations for faculty development adopted and plan developed	Dean, Administrative Council	May, 2014	
Tactic 2: Align with the campus strategic plan and develop a plan for staff development Deliverable(s): Campus strategic plan adopted and staff development plan developed	Assistant Dean Administration, Human Resources, Staff Council	May, 2014 HOLD	
Tactic 3: Build and disseminate staff expertise list Deliverable(s): 3a) Determine mechanism for searching expertise 3b) Staff expertise list disseminated	Office of Communications Staff	May, 2014 HOLD	
Tactic 4: Build and disseminated faculty expertise list Deliverable(s): Comprehensive list of faculty expertise disseminated and individual faculty web pages updated	Office of Communications	May, 2014	
YEAR 3 (2014-2015) TACTICS/ACTION ITEMS	WHO	TIMELINE	FUNDING
Tactic 1: Align with the recommendations of the Mentoring Task Force and develop a plan for faculty development Deliverable(s): Faculty development plan implemented	Administrative Council and Faculty Council	May, 2015	
Tactic 2: Provide opportunities for staff development (cross training, webinars, continuing education) Deliverable(s): Plan to increase opportunities for staff development implemented	Staff Council	May, 2015	\$\$
Tactic 3: Build and disseminate staff expertise list Deliverable(s): Staff expertise list disseminated	Office of Communications Staff	Ongoing	
Tactic 4: Build and disseminated faculty expertise list Deliverable(s): Comprehensive list of faculty expertise disseminated and individual faculty web pages updated	Office of Communications Staff and Faculty	Ongoing	
OBJECTIVE 1.3 Advance change through leadership in health policy and advocacy			
YEAR 1 (2012-2013) TACTICS/ACTION ITEMS	WHO	TIMELINE	FUNDING
Tactic 1: Promote participation of faculty, staff, and students in professional organizations and policy activities Deliverable(s): Identify team members responsible for developing a plan for the participation and communication of key points of professional and policy activities	Goal 1 Implementation Team	May, 2013	

Tactic 2: Expand the health policy and advocacy focus of all official communications (i.e., newsletter, UMSON magazine) Deliverable(s): Team members responsible for increasing the health policy and advocacy focus for all official communications (i.e., newsletter, UMSON magazine) identified	Goal 1 Implementation Team	May, 2013	
YEAR 2 (2013-2014) TACTICS/ACTION ITEMS	WHO	TIMELINE	FUNDING
Tactic 1: Promote participation of faculty, staff, and students in professional organizations and policy activities Deliverable(s): A plan for the participation and communication of key points of professional and policy activities developed	Deans and Chairs, Office of Communications Staff, Faculty and Staff Council	May, 2014 HOLD	
Tactic 2: Expand the health policy and advocacy focus of all official communications (i.e., newsletter, UMSON magazine) Deliverable(s): Health policy and advocacy focus to all official communications (i.e., newsletter, UMSON magazine) expanded	Office of Communications	Ongoing	
YEAR 3 (2014-2015) TACTICS/ACTION ITEMS	WHO	TIMELINE	FUNDING
Tactic 1: Promote participation of faculty, staff, and students in professional organizations and policy activities Deliverable(s): Plan for the participation and communication of key points of professional and policy activities implemented	Deans and Chairs, Office of Communications Staff, Faculty Council and Staff Council	May, 2015	
Tactic 2: Expand the health policy and advocacy focus of all official communications (i.e., newsletter, UMSON magazine) Deliverable(s): Health policy and advocacy focus in all official communications (i.e., newsletter, UMSON magazine) expanded	Office of Communications	Ongoing	
OBJECTIVE 1.4 Emphasize the academic progression across all programs			
YEAR 1 (2012-2013) TACTICS/ACTION ITEMS	WHO	TIMELINE	FUNDING
Tactic 1: Implement a bridge program for BSN's who hold a MS degree outside nursing to enable admissions to the post-masters DNP Deliverable(s): Working group to develop a bridge program for BSN's who hold a MS degree outside nursing to enable admissions to the post-masters DNP established	MS to DNP Curriculum Committee	May, 2013	
Tactic 2: Design and implement a post-BSN to DNP curriculum Deliverable(s): Post- BSN to DNP curriculum designed	Post-BSN to DNP Committee and MS/DNP Curriculum Committee	May, 2013	
Tactic 3: Review and revise options for post-BSN to PhD Deliverable(s): Current Post-BSN to PhD options reviewed	PhD Curriculum Committee and Assistant Dean for the	May, 2013	

	PhD Program		
Tactic 4: Design and implement a revised RN to BSN curriculum that includes a detailed plan of study and specific courses geared toward this population Deliverable(s): Key members of team responsible for revising the RN to BSN curriculum identified	Goal 1 Implementation Team	May, 2013	
Tactic 5: Develop and implement a revised BSN curriculum Deliverable(s): BSN curriculum developed	Assistant Dean for the BSN Program, BSN Curriculum Revision Taskforce, and Entry Level Curriculum Committee	May, 2013	
Tactic 6: Develop and implement a revised CNL curriculum within the MS Program Deliverable(s): Key team members responsible for revising the CNL curriculum identified	Goal 1 Implementation Team	May, 2013	
YEAR 2 (2013-2014) TACTICS/ACTION ITEMS	WHO	TIMELINE	FUNDING
Tactic 1: Implement a bridge program for BSN's who hold a MS degree outside nursing to enable admissions to the post-masters DNP Deliverable(s): Bridge program for BSN's who hold a MS degree outside nursing to enable admissions to the post-masters DNP developed	MS to DNP Curriculum Committee	May, 2014 COMPLETED	
Tactic 2: Design and implement a post-BSN to DNP curriculum Deliverable(s): Post -BSN to DNP curriculum implemented	Post-BSN to DNP Task Force and MS/DNP Curriculum Committee	Fall 2014	
Tactic 3: Review and revise options for post-BSN to PhD Deliverable(s): Current post-BSN to PhD options revised	PhD Curriculum Committee and Assistant Dean for the PhD Program	May, 2014	
Tactic 4: Design and implement a revised RN to BSN curriculum that includes a detailed plan of study and specific courses geared toward this population Deliverable(s): RN to BSN curriculum revised	Assistant Dean for the BSN Program, Assistant Dean for Shady Grove, and Entry Level Curriculum Committee	Fall, 2014	
Tactic 5: Develop and implement a revised BSN curriculum Deliverable(s): BSN curriculum implemented	Assistant Dean for the BSN Program, BSN Curriculum Revision Taskforce, and Entry Level Curriculum Committee	Fall 2014	

Tactic 6: Develop and implement a revised CNL curriculum within the MS Program Deliverable(s): CNL curriculum implemented	Assistant Dean for the Masters and DNP Programs, Assistant Dean for the BSN Program, Director of the CNL Program	Fall, 2014	
YEAR 3 (2014-2015) TACTICS/ACTION ITEMS	WHO	TIMELINE	FUNDING
Tactic 1: Implement a bridge program for BSN's who hold a MS degree outside nursing to enable admissions to the post-masters DNP Deliverable(s): Bridge program for BSN's who hold a MS degree outside nursing to enable admissions to the post-masters DNP implemented	MS to DNP Curriculum Committee	May, 2015	
Tactic 2: Design and implement a post-BSN to DNP curriculum Deliverable(s): Post -BSN to DNP curriculum implemented	Post-BSN to DNP Committee and MS/DNP Curriculum Committee	Ongoing	\$\$
Tactic 3: Review and revise options for post-BSN to PhD Deliverable(s): Current post-BSN to PhD options revised and implemented	PhD Curriculum Committee and Assistant Dean for the PhD Program	May, 2015	
Tactic 4: Design and implement a revised RN to BSN curriculum that includes a detailed plan of study and specific courses geared toward this population Deliverable(s): Revised RN to BSN curriculum implemented	Assistant Dean for the BSN Program, Assistant Dean for Shady Grove, and Entry Level Curriculum Committee	May, 2015	
Tactic 5: Develop and implement a revised BSN curriculum Deliverable(s): Revised BSN curriculum implemented	Assistant Dean for the BSN Program, BSN Curriculum Revision Taskforce, and Entry Level Curriculum Committee	Ongoing	
Tactic 6: Develop and implement a revised CNL curriculum within the MS Program Deliverable(s): CNL curriculum redesigned and new curriculum implemented	Assistant Dean for the BSN, Masters and DNP Programs, Director of CNL Program	May, 2015	
OBJECTIVE 1.5 Develop interprofessional initiatives and collaborations with other UMB and USM schools, including USG			
YEAR 1 (2012-2013) TACTICS/ACTION ITEMS	WHO	TIMELINE	FUNDING
Tactic 1: Adopt the campus definition of inter-professional initiatives for faculty, staff and students			

Deliverable(s): Campus definition adopted	Dean, Associate Dean of Academic Affairs and Curriculum Committee Chairs	May, 2013	
Tactic 2: Develop a plan for collaboration by faculty, students and staff within the School, institution, and throughout UMS. Deliverable(s): Key team members responsible for developing a plan for collaboration by faculty, students and staff within the School, institution, and throughout the UMS identified	Goal 1 Implementation Team	May, 2013	
Tactic 3: Collaborate with other schools to develop, implement and evaluate inter-professional didactic, clinical courses and simulation experiences Deliverable(s): 3a) Collaborators for didactic course developers identified 3b) Collaborators for clinical course development identified 3c) Collaborators for simulation experience identified	Goal 1 Implementation Team	May, 2013	
YEAR 2 (2013-2014) TACTICS/ACTION ITEMS	WHO	TIMELINE	FUNDING
Tactic 1: Adopt the campus definition of inter-professional initiatives for faculty, staff and students Deliverable(s): Alignment with campus model continued	Dean, Curriculum Committee Chairs	Ongoing	
Tactic 2: Develop a plan for collaboration by faculty, students, and staff within the School, institution, and throughout UMS. Deliverable(s): 2a) Collaboration Plan developed HOLD 2b) Excellence Awards established for teaching implemented	Faculty Council	May, 2014	
Tactic 3: Collaborate with other schools to develop, implement and evaluate inter-professional didactic, clinical courses and simulation experiences Deliverable(s): 3a) Participate in IPE Day 3b) Engage in other IPE Center activities 3c) Broadly disseminate IPE opportunities 3d) Broaden understanding and build on current IPE activities	Dean, Assistant Deans for Academic Programs, Director CSL	May, 2014	
YEAR 3 (2014-2015) TACTICS/ACTION ITEMS	WHO	TIMELINE	FUNDING
Tactic 1: Adopt the campus definition of inter-professional initiatives for faculty, staff and students Deliverable(s): Alignment with campus model continued	Dean, Associate Dean of Academic Affairs and Curriculum Committee Chairs	Ongoing	

<p>Tactic 2: Develop a plan for collaboration by faculty, students, and staff within the School, institution, and throughout UMS.</p> <p>Deliverable(s): 2a) Collaboration Plan implemented 2b) Excellence Awards established for research and practice implemented</p>	Curriculum Committees and Faculty Council	Ongoing	
<p>Tactic 3: Collaborate with other schools to develop, implement and evaluate inter-professional didactic, clinical courses and simulation experiences</p> <p>Deliverable(s): 3a) Plan for inter-professional didactic course development implemented 3b) Plan for inter-professional clinical course development implemented 3c) Plan for inter-professional simulation experiences implemented</p>	Curriculum Committees and Academic Assistant Deans	May, 2015	

GOAL 2: Optimize health through discovery and translational science			
Champions: Susan Dorsey, Robin Newhouse, Amanda Wozniak			
APPROACH:			
<ul style="list-style-type: none"> • Create venues for investigators to network with other disciplines to foster interdisciplinary research (UMSON & Campus) • Enhance publicity/exposure of ORCs through utilization of website, printed materials, and Office of Communications • Enhance professional development of UMSON researchers through engagement in ORC 			
OBJECTIVE 2.1 Build programs of research through new collaboration in discovery, translation, and implementation projects			
YEAR 1 TACTICS/ACTION ITEMS	WHO	TIMELINE	FUNDING
<p>Tactic 1: Identify an evaluation subgroup to 1) create and implement measurable metrics; 2) set regular reporting periods; 3) evaluate strategic plan outcomes and identify new target opportunities for collaborations external to UMSON. Deliverable(s): Evaluation subgroup identified</p>	UMSON Evaluator	December, 2013	
<p>Tactic 2: Conduct first-year strategic plan evaluation. Deliverable(s): Strategic plan evaluated</p>	UMSON Evaluator	December, 2013 (ongoing)	
YEAR 2 TACTICS/ACTION ITEMS	WHO	TIMELINE	FUNDING
<p>Tactic 1: Identify and implement two strategies to enhance interprofessional research (i.e. Grand Rounds). Deliverable(s): 1a) Strategies to enhance interprofessional research identified 1b) Strategies to enhance interprofessional research implemented</p>	Center Directors	June, 2014	

Tactic 2: Forge new collaborations external to UMSON that is innovative and synergistic with existing strengths in our ORCs that will lead to new extramural funding and publications expeditiously. Deliverable(s): Two external interprofessional research teams formed	Executive Research Council	December, 2014	
Tactic 3: Expand the number of research collaborations with the UMMS system. Deliverable(s): One UMMS/UMSON interprofessional research teams formed	Executive Research Council	December, 2014	
OBJECTIVE 2.2 Promote greater visibility of extramurally funded research			
YEAR 1 TACTICS/ACTION ITEMS	WHO	TIMELINE	FUNDING
Tactic 1: Designate communications subgroup and develop and implement internal/external communication plan to communicate research excellence and programs of research with impact and dissemination of results. Deliverable(s): 1a) Communication subgroup designated 1b) Communication plan developed 1c) Communication plan implemented	Office of Communications with Office of Research	May, 2014	
Tactic 2: Researchers regularly contribute to UMSON and campus publications. Deliverable(s): Researchers contributed to publications.	Office of Research	December, 2013 (ongoing)	
YEAR 2 TACTICS/ACTION ITEMS	WHO	TIMELINE	FUNDING
Tactic 1: Describe baseline research activities, create a list of potential research related nominations, and make recommendations to nominate faculty for campus and system research related committees and awards. Deliverable(s): 1a) Baseline research activities described 1b) List of potential research related nominations created 1c) Recommendations made to nominate faculty for committees and awards	Associate Dean of Research	May, 2014 (ongoing)	
Tactic 2: Request an annual meeting with Board of Visitors and Associate Dean of Development. Deliverable(s): Meeting requested	Associate Dean of Research with Office of Development	January, 2014	
OBJECTIVE 2.3 Grow two Organized Research Centers			
YEAR 1 TACTICS/ACTION ITEMS	WHO	TIMELINE	FUNDING
Tactic 1: Develop a position and budget for a dedicated a doctoral recruiter in the Office of Student and Academic Services. Deliverable(s): Position and budget for recruiter developed	Assistant Dean for Student and Academic Services	August, 2013	

<p>Tactic 2: Center directors and senior research faculty will develop individual professional development plans for tenure-track faculty to move to tenured ranks within the time limit of the APT guidelines, assign mentors, and monitor outcomes.</p> <p>Deliverable(s): 2a) Professional development plans developed and mentors assigned 2b) Outcomes monitored (ongoing)</p>	Center Directors	August, 2013 (ongoing)	
<p>Tactic 3: Recruit and retain of mid- to senior-level extramurally funded (R01) scientists. May include need to work with development to increase endowed chairs</p> <p>Deliverable(s): Mid- to senior-level extramurally funded scientists recruited <i>NOTE: Need to increase number of endowed chairs</i></p>	Associate Dean for Development and Executive Research Council	December, 2013	
YEAR 2 TACTICS/ACTION ITEMS	WHO	TIMELINE	FUNDING
<p>Tactic 1: Increase UMSON faculty and staff extramural research funding (e.g., greater than \$100K/year in direct) and number of high impact (e.g., IF greater than 1) publications.</p> <p>Deliverable(s): 1a) Faculty and staff extramural research funding increased 1b) High impact publications increased</p>	Associate Dean of Research	December, 2014	
<p>Tactic 2: Recruit and retain PhD and DNP students with research or clinical interests closely aligned with ORCs.</p> <p>Deliverable(s): PhD and DNP students with research interests aligned with the ORCs recruited</p>	Assistant Dean of PhD and Director of DNP in collaboration with Center Directors	December, 2014	

GOAL 3: Create a robust and enduring financial model			
Champions: Walter Malecki, Laurette Hankins, Patricia Adams, Kathryn Montgomery			
APPROACH: In alignment with the UMB Strategic Plan, UMSON will: <ul style="list-style-type: none"> • Work with Administrative Services and Strategic Partnerships and Initiatives • Work with UMSON Board of Visitors, Alumni Council and UMB's Office of Development/Alumni Relations to increase fundraising dollars • Incorporate the tactics from Theme 6, Drive Economic Development, Goals 1 and 3 of the campus Strategic Plan • Strengthen current relationship with UMB Office of PR and Communications; Strengthen current relationship with UMSON Development and Alumni Relations • Incorporate tactics from Theme 7, Create an Enduring and Responsible Financial Model for the University, Goal 3 of the campus Strategic Plan • Map each partnership, identifying the various components of the relationship (e.g. clinical placement through to joint ventures & research). Once mapped identify overlaps and opportunities for expansion and further integration with UMSON programs and faculty expertise etc. • Incorporate tactics from Theme 4, Excel at Interdisciplinary Research and Interprofessional Education, Clinical Care and Practice, and Public Service, Goal 2 of the campus Strategic Plan 			
OBJECTIVE 3.1 Increase external funding			
YEAR 1 (2012-2103) TACTICS/ACTION ITEMS	WHO	TIMELINE	FUNDING
Tactic 1: Develop tactics and deliverables for objective Deliverable(s): Tactics and deliverables were developed	Assist. Dean Administrative Services, Assoc. Dean Strategic Partnerships & Initiatives	May, 2013	
Tactic 2: Engage BOV in fundraising efforts 2a) Recruit two additional philanthropic individuals to Board of Visitors (BOV), being cognizant of diversity (geographic, gender, and race) Deliverable(s): Two additional individuals recruited 2b) Hold a Board of Visitors Retreat Deliverable(s): Retreat held	Assoc. Dean for Dev. & Alumni Relations Assoc. Dean for Dev. & Alumni Relations, Major Gifts Officer	June, 2013 June, 2013	 \$\$
Tactic 3: Engage UMSON Alumni to increase philanthropic giving 3a) Recruit three additional alumni to Alumni Council, factoring in diversity (geographic, gender, and race) Deliverable(s): Three additional alumni recruited	Assoc. Dean for Dev. & Alumni Relations, Assoc. Director of Alumni Relations, Major Gifts Officer	June, 2013	

<p>3b) Increase by 3% the number of individuals who have joined the Legacy Society (UMSON included in their estate plans) Deliverable(s): Increased by 3% the number of individuals who have joined the Legacy Society</p>	<p>Assoc. Dean for Dev. & Alumni Relations, Major Gifts Officer</p>	<p>June, 2013</p>	
<p>3c) Increase paid phonathon contacts to new alumni and non-donors Deliverable(s): Paid phonathon contacts to new alumni and non-donors increased</p>	<p>Major Gifts Officer and UMB's DAR Office</p>	<p>June, 2013</p>	
<p>3d) Hold two regional "Meet the New Dean" Alumni events Deliverable(s): Two regional events held</p>	<p>Assoc. Director of Alumni Relations, UMSON DAR Office</p>	<p>June, 2013</p>	<p>\$\$</p>
<p>3e) Increase BSN and CNL Reunion Class giving participation by 3% (via personal solicitations and direct mail) Deliverable(s): Reunion Class giving participation increased by 3%</p>	<p>Assoc. Dean for Dev. & Alumni Relations, Major Gifts Officer, Assoc. Director of Alumni Relations</p>	<p>June, 2013</p>	
<p>Tactic 4: Form a committee to strategize re: fundraising and PR opportunities related to UMSON's 125th Anniversary Deliverable(s): Committee is formed</p>	<p>Dean, Assoc. Dean for Dev. & Alumni Relations, Executive Director of Communications</p>	<p>April, 2013</p>	
<p>YEAR 2 (2013-2014) TACTICS/ACTION ITEMS:</p>	<p>WHO</p>	<p>TIMELINE</p>	<p>FUNDING</p>
<p>Tactic 1: Create professional faculty practice structure that addresses: incentive, market rates and changes involved in health care reform Deliverable(s): Faculty Practice structure recommendation and implementation plan</p>	<p>Assist. Dean for Administrative Services & Assoc. Dean Strategic Partnerships</p>	<p>March, 2014</p>	
<p>Tactic 2: (ONGOING) Engage BOV in fundraising efforts 2a) Recruit two additional philanthropic individuals to Board of Visitors (BOV), being cognizant of diversity (geographic, gender, and race) Deliverable(s): 2a) Two additional philanthropic individuals recruited as members, being cognizant of diversity (geographic, gender, and race)</p>	<p>Assoc. Dean for Dev. & Alumni Relations</p>	<p>June, 2014</p>	

<p>2b) Persuade BOV Member to host a regional Alumni event in Virginia to meet new Dean Deliverable(s): 2b) Regional Alumni event in Richmond hosted by BOV member to meet the new Dean</p>	<p>Assoc. Dean for Dev. & Alumni Relations, Assoc. Director of Alumni Relations, Major Gifts Officer</p>	<p>June, 2014</p>	<p>\$\$</p>
<p>Tactic 3: (ONGOING) Engage UMSON Alumni to increase philanthropic giving</p> <p>3a) Increase number of alumni gifts by 2% Deliverable(s): Number of alumni gifts increased by 2%</p> <p>3b) Increase by 3% the number of individuals who have joined the Legacy Society (UMSON included in their estate plans) Deliverable(s): Increased by 3% the number of individuals who have joined the Legacy Society</p> <p>3c) Hold two additional regional Alumni events Deliverable(s): Two regional Alumni events held</p> <p>3d) Increase BSN and CNL Reunion Class giving participation by 3% (via personal solicitations and direct mail) Deliverable(s): Reunion Class giving participation increased by 3%</p> <p>3e) Survey alumni who graduated in past 10 years to learn how to better engage them Deliverable(s): Alumni who graduated in past 10 years surveyed</p> <p>3f) Hold a "Recent Alumni" Networking Event Deliverable(s): "Recent Alumni" Networking Event held</p>	<p>Assoc. Dean for Dev. & Alumni Relations, Major Gifts Officer</p> <p>Assoc. Dean for Dev. & Alumni Relations, Major Gifts Officer</p> <p>Assoc. Dean for Dev. & Alumni Relations, Major Gifts Officer, Assoc. Director of Alumni Relations</p> <p>Assoc. Dean for Dev. & Alumni Relations, Major Gifts Officer, Assoc. Director of Alumni Relations</p> <p>Assoc. Director of Alumni Relations</p> <p>Assoc. Director of Alumni Relations, UMSON DAR Office</p>	<p>June, 2014</p> <p>June, 2014</p> <p>June, 2014</p> <p>June, 2014</p> <p>June, 2014</p> <p>June, 2014</p>	<p></p> <p></p> <p>\$\$</p> <p></p> <p></p> <p>\$\$</p>
<p>Tactic 4: Implement recommendations of the UMSON 125th Anniversary Committee Deliverable(s): Recommendations of the 125th Anniversary celebration are implemented</p>	<p>Dean, Assoc. Dean for Dev. & Alumni Relations, Executive Director of Communications and Committee</p>	<p>June, 2014</p>	<p>\$\$</p>

<p>Tactic 5: Increase # of major gifts solicitations by 4% Deliverable(s): Major gifts solicitations increased by 4%</p>	<p>Assoc. Dean for Dev. And Alumni Relations and Major Gifts Officer</p>	<p>June 30, 2014</p>	
<p>YEAR 3 (2014-2015) TACTICS/ACTION ITEMS</p>	<p>WHO</p>	<p>TIMELINE</p>	<p>FUNDING</p>
<p>Tactic 1: Create professional faculty practice structure that addresses: incentive, market rates and changes involved in health care reform Deliverable(s): Faculty Practice structure recommendation</p>	<p>Assist. Dean Administrative Services & Assoc. Dean Strategic Partnerships & Initiatives</p>	<p>June, 2015</p>	
<p>Tactic 2: (ONGOING) Engage BOV in fundraising efforts 2a) Recruit two additional philanthropic individuals to Board of Visitors (BOV), being cognizant of diversity (geographic, gender, and race) Deliverable(s): Two additional philanthropic individuals recruited as members 2b) Persuade BOV Member to host external event to introduce the Dean to unaffiliated audience Deliverable(s): BOV member hosts external event to introduce the Dean to unaffiliated audience</p>	<p>Assoc. Dean for Dev. & Alumni Relations Assoc. Dean for Dev. & Alumni Relations, Assoc. Director of Alumni Relations, Major Gifts Officer</p>	<p>June, 2015 June, 2015</p>	<p> \$\$</p>
<p>Tactic 3: Engage UMSON Alumni to increase philanthropic giving 3a) Recruit three additional alumni to Alumni Council, factoring in diversity (geographic, gender, and race) Deliverable(s): Three new alumni recruited to the Alumni Council 3b) Increase by 3% the number of individuals who have joined the Legacy Society (UMSON included in their estate plans) Deliverable(s): Increased by 3% the number of individuals who have joined the Legacy Society 3c) Increase paid phonathon contacts to new alumni and non-donors Deliverable(s): Paid phonathon contacts to new alumni and non-donors increased</p>	<p>Assoc. Dean for Dev. & Alumni Relations, Assoc. Director of Alumni Relations, Major Gifts Officer Assoc. Dean for Dev. & Alumni Relations, Major Gifts Officer for Dev. & Alumni Relations Gifts Officer Dev. & Alumni Relations & UMB DAR Office</p>	<p>June, 2015 June, 2015 June, 2015</p>	

3d) Hold two regional Alumni events Deliverable(s): Two regional Alumni events held	Assoc. Director of Alumni Relations, UMSON DAR Office Major Gifts Officer for Dev. & Alumni Relations, Assoc. Dean for Dev. & Alumni Relations, Assoc. Director of Alumni Relations, UMB Annual Fund Office	June, 2015	\$\$
3e) Increase number of alumni gifts by 3% Deliverable(s): Alumni gifts increased by 3%	Assoc. Dean for Dev. & Alumni Relations, Major Gifts Officer,	June, 2015	
3f) Increase overall number of donors by 2% Deliverable(s): Overall number of donors increased by 2%	Assoc. Director of Alumni Relations	June, 2015	\$\$
Tactic 4: Implement plans for fundraising and PR opportunities related to UMSON's 125 th Anniversary Deliverable(s): Plans implemented re: fundraising and PR opportunities related to the UMSON's 125 th Anniversary	Dean, Assoc. Dean for Dev. & Alumni Relations, Exec. Dir. Of Communications	April, 2015	\$\$
Tactic 5: Increase # of major gifts solicitations by 3% Deliverable(s): Major gifts solicitations increased by 3%	Assoc. Dean for Dev. And Alumni Relations and Major Gifts Officer	June, 2015	
OBJECTIVE 3.2 Communicate and demonstrate UMSON's capacity and value			
YEAR 1 (2012-2013) TACTICS/ACTION ITEMS	WHO	TIMELINE	FUNDING
Tactic 1: Develop tactics and deliverables for Communications Deliverable(s): Tactics and deliverables developed	Executive Director Communications & Communications Team	May, 2013	
YEAR 2 (2013-2014) TACTICS/ACTION ITEMS	WHO	TIMELINE	FUNDING
Tactic 1: Develop comprehensive Strategic Plan for Communications; Define strategies (e.g., increase media hits) for Communications Strategic Plan Deliverable(s): 1a) Conduct assessment of current marketing/communications materials 1b) Develop key messages 1c) Redesign and launch new website 1d) Increase media hits	Executive Director Communications & Communications Team	March, 2014	\$\$

1e) Redefine purpose of magazine editorial board; Send out bid for new magazine contract			
Tactic 2: Infuse strategies into Communications Strategic Plan Deliverable(s): Strategic Plan completed; pillars defined; continue to have targets for increased visibility for UMSON work unified and purposeful	Executive Director Communications & Communications Team	June, 2014	
YEAR 3 (2014-2015) TACTICS/ACTION ITEMS	WHO	TIMELINE	FUNDING
Tactic 1: Strategic Plan for Communications activated and improvement is seen in all aspects of communications for UMSON. Deliverable(s): UMSON communications improved via methods adopted from Strategic Plan.	Magazine Editorial Board, Executive Director of Communications, and Communications Team	June, 2015	
OBJECTIVE 3.3 Create integration opportunities and collaborations with the UMMS and other organizations and partners			
YEAR 1 (2012-2013) TACTICS/ACTION ITEMS	WHO	TIMELINE	FUNDING
Tactics 1: Develop tactics and deliverables for strategic partnerships Deliverable(s): Tactics and deliverables developed	Associate Dean Strategic Partnership	May, 2013	
YEAR 2 (2013-2014) TACTICS/ACTION ITEMS	WHO	TIMELINE	FUNDING
Tactics 1: Conduct gap analysis to identify partnerships needed to support UMSON's new Strategic Plan Deliverable(s): Analysis conducted and strategic partnerships identified and prioritized. Next steps toward exploration and relationship building for new partnerships and realignment of existing ones defined.	Associate Dean Strategic Partnership & UMSON Administrative Council	June, 2014	
YEAR 3 (2014-2015) TACTICS/ ACTION ITEMS	WHO	TIMELINE	FUNDING
Tactics 1: Formal initiation or realignment of new or existing partnerships. 2-3 major strategic partnerships are formally initiated as appropriate from gap analysis Deliverable(s): Realignment of existing partnerships as identified from the analysis is initiated by formal memorandum of understanding or other appropriate documentation.	Associate Dean Strategic Partnership & UMSON Administrative Council	June, 2015	

GOAL 4: Embrace a culture that embodies the School's Core Values: Accountability, Civility, Collaboration, Diversity, Excellence, Knowledge, Leadership			
Champions: Dave Drebing, Vanessa Fahie, Lori Harris, Karen Kauffman			
APPROACH: In alignment with the UMB Strategic Plan, UMSON will: <ul style="list-style-type: none"> • Increase awareness among faculty, staff, and students about UM's Core Values • Recognize and reward faculty and staff for excellence in embodying core values. • Increase faculty, staff, and student awareness and support of diversity and inclusion. • Align with the campus strategic plan Gather feedback from faculty, staff, and students on UMSON's perceptions of the UM embodiment of the core values			
OBJECTIVE 4.1 Recruit and retain faculty, staff, and students who embody UM's Core Values			
YEAR 1 (2012-2013) TACTICS/ACTION ITEMS	WHO	TIMELINE	FUNDING
Tactic 1: Add core values to identified recruitment materials for faculty, staff, and students Deliverable(s): Recruitment materials are identified.	Web master, OSAS, Faculty Council, Staff Council	Not Met. See Tactic 5	
Tactic 2: Add core values to course syllabi Deliverable(s): Course evaluations include core values	Curriculum committees, Vanessa Fahie, Office of Evaluations	Not Met. Fall 2014	
Tactic 3: Offer civility workshops to supervisors, faculty, and staff with a pre-assessment. Deliverable(s): Civility training workshops scheduled for faculty and staff throughout the next four years.	Goal 4 Champions	Done	
Tactic 4: Collaborate with School of Law to develop and offer faculty and staff training sessions for civility and conflict resolution Deliverable(s): Civility and conflict resolution training workshops scheduled for faculty and staff throughout the next four years.	Dean, Goal 4 Champions, School of Law	Done, 2014	
Tactic 5: Align UMSON core values with University's core values Deliverable(s): Support campus efforts and leverage campus activities and promotions of core values.	Strategic Planning Committee, Goal 4 Champions	November, 2013	
YEAR 2 (2013-2014) TACTICS/ACTION ITEMS	WHO	TIMELINE	FUNDING
Tactic 1: Create a UMSON standing committee for Diversity and Inclusion comprised of faculty, staff, and students Deliverable(s): 1a) Blueprint for committee bylaws. 1b) Faculty and Administrative Councils approval.	Faculty Council, Staff Council, Student organizations, Diversity Task	June, 2014	

	Force		
Tactic 2: Add core values to course syllabi Deliverable(s): Course evaluations include core values	Curriculum committees, Vanessa Fahie, Office of Evaluations	Not Met. Fall 2014	
Tactic 3: Establish an award to recognize excellence in teaching among faculty. Deliverable(s): Award criteria and voting process established.	UMSON Student Affairs Committee, Faculty Council	Done, 2013	
Tactic 4: Identify a means to recognize excellence in staff performance Deliverable(s): Staff of the Quarter renamed Staff Excellence Award	Goal 4 Champions, Staff Council	Done, 2013	
Tactic 5: Enact awareness of Civility as a core value Deliverable(s): A schedule for delivery of monthly bulletins/events to increase awareness and demonstrate commitments of School to foster a civil environment by developing a committee to create deliverables.	Goal 4 Champions	January, 2014	
Tactic 6: Increase collaboration between the Faculty and Staff Councils Deliverable(s): Design an all School meeting that is informative to faculty and staff co-chaired by Faculty and Staff Council Chairs.	Faculty, Staff and Admin Council	Ongoing	
YEAR 3 (2014-2015) TACTICS/ACTION ITEM	WHO	TIMELINE	FUNDING
Tactic 1: Develop a toolkit to inform faculty, staff, and students about diversity and inclusion Deliverable(s): Tool kit of resources developed, including the HRSA and CRM video sessions, available for all to use.	Goal 4 Champions, Student Organizations, Standing Committee for Diversity and Inclusion when approved	June, 2015	
OBJECTIVE 4.2 Foster a positive work environment by creating and implementing feedback systems that promote accountability and professionalism.			
YEAR 1 (2012-2013) TACTICS/ACTION ITEMS	WHO	TIMELINE	FUNDING
Tactic 1: Collect feedback from civility workshop and film event participants. Deliverable(s): Create and send survey via email.	Dean's office	Done, 2013	
YEAR 2 (2013-2014) TACTICS/ACTION ITEMS	WHO	TIMELINE	FUNDING
Tactic 1: Create focus groups comprising of faculty, students and staff to solicit input on methods group feels would support increasing awareness and practice of the core values Deliverable(s): Data to develop additional strategies to create environment to support objective 4.1	Goal 4 Champions	February, 2014	

YEAR 3 (2014-2015) TACTICS/ACTION ITEM	WHO	TIMELINE	FUNDING
Tactic 1: Create a survey for faculty, staff, and students to evaluate how well the School embodies the core values Deliverable(s): Survey Created	Faculty Council, Staff Council, OSAS, Web Master, Office of Evaluation	August, 2015	
Tactic 2: Administer Survey Deliverable(s): Survey Administered	Web master, Office of Evaluation	October, 2015	
Tactic 3: Analyze survey data and make recommendations for the coming year Deliverable(s): Recommendations to proceed for the coming year	Goal 4 Champions, Strategic Planning Implementation team, Faculty Council, Staff Council	November, 2015	

GOAL 5: Leverage technology to enhance and expand education, research, and practice			
Champions: Kathleen Buckley, Matt Rietschel, Brian Walls			
APPROACH: In alignment with the UMB Strategic Plan, UMSON will:			
<ul style="list-style-type: none"> Align goals, tactics and deliverables with the UMB campus strategic plan Work with internal and external stakeholders to understand the current landscape of technologies at UMSON Enlist the aid of the UMSON community to identify future technology needs, trends and resources. Strengthen relationships with UMSON and Campus offices to improve the use of technology to provide meaningful services and data for decision making. 			
Objective 5.1 Implement a school-wide technology strategic plan involving faculty, staff and students			
YEAR 1 (2012-2013) TACTICS/ACTION ITEMS	WHO	TIMELINE	FUNDING
Tactic 1: Form a UMSON school-wide technology strategic plan task force Deliverable(s): 1a) Identified and recruited faculty, staff and students to serve on the task force 1b) Formed task force with representation from faculty, staff and students.	Administrative Council Deans and Chairs Committee Faculty Council Chair of Technology and Simulation Advisory Committee Member External to UMSON	August, 2013 September, 2013	

<p>Tactic 2: Identify and prioritize the current and future technology initiatives and investments critical to the UMSON education mission</p> <p>Deliverable(s): 2a) Generated a report on the current integration of technology with curricula and instruction, educator preparation opportunities, and infrastructure for technology 2b) Developed a prioritized list of future technology initiatives, investments, and needs</p>	<p>Associate Dean for Academic Affairs Assistant Deans for each program, Key Faculty</p>	<p>October, 2013</p>	
<p>Tactic 3: Identify and prioritize the current and future technology initiatives and investments critical to the UMSON research mission</p> <p>Deliverable(s): 3a) Generated a report on the current integration of technology with curricula and instruction, educator preparation opportunities, and infrastructure for technology 3b) Developed a prioritized list of future technology initiatives, investments, and needs</p>	<p>Technology Strategic Plan Task Force Associate Dean for Research, Key Researchers</p>	<p>January, 2014</p>	
<p>Tactic 4: Identify and prioritize the current and future technology initiatives and investments critical to the UMSON practice mission</p> <p>Deliverable(s): 4a) Generated a report on the current integration of technology with curricula and instruction, educator preparation opportunities, and infrastructure for technology 4b) Developed a prioritized list of future technology initiatives, investments, and needs</p>	<p>Technology Strategic Plan Task Force Associate Dean for Strategic Partnerships & Initiatives, Key faculty involved in practice</p>	<p>March, 2014</p>	
<p>Tactic 5: Identify and prioritize current administrative processes that can be more efficient through the use of technology (e.g., electronic timesheets, electronic submission of grades)</p> <p>Deliverable(s): Identified and prioritized administrative processes that are more efficient through use of technology</p>	<p>Technology Strategic Plan Task Force</p>	<p>April, 2014</p>	
<p>Tactic 6: Create a UMSON school-wide technology strategic plan</p> <p>Deliverable(s): Developed a two-year school-wide technology strategic plan</p>	<p>Technology Strategic Plan Task Force</p>	<p>March, 2014</p>	
<p>YEAR 2 (2013-2014) TACTICS/ACTION ITEMS</p>	<p>WHO</p>	<p>TIMELINE</p>	<p>FUNDING</p>
<p>Tactic 1: Educate the UMSON community on the technology strategic plan</p> <p>Deliverable(s): 1a) Disseminated technology plan with the UMSON community 1b) Met with groups to clarify the plan and the roles of each UMSON member</p>	<p>Technology Strategic Plan Task Force</p>	<p>January, 2014 March, 2014</p>	

<p>Tactic 2: Identify the necessary resources to implement the technology strategic plan's high priority items Deliverable(s): Developed a business plan</p>	<p>Technology Strategic Plan Task Force, Technology and Simulation Advisory Committee, Assistant Dean of Administrative Services</p>	<p>February 2014</p>	
<p>Tactic 3: Implement the Strategic plan's high priority items Deliverable(s): 3a) Formed implementation teams to proceed with implementing the strategic plan 3b) Completed deliverable for each high priority item</p>	<p>Technology Strategic Plan Task Force, Members of faculty, staff, students</p>	<p>June-December, 2014 June-December, 2014</p>	
<p>Objective 5.2 Employ technology to expand innovative educational delivery models</p>			
<p>YEAR 1 (2012-2013) TACTICS/ACTION ITEMS</p>			
	<p>WHO</p>	<p>TIMELINE</p>	<p>FUNDING</p>
<p>Tactic 1: Conduct a needs assessment and gap analysis with faculty and students to identify current technology use and needs for effective delivery of nursing curricula Deliverable(s): Administered needs assessment survey, tabulated results tabulated, and communicated to faculty, staff and student body</p>	<p>Technology and Simulation Advisory Committee</p>	<p>October, 2013</p>	
<p>Tactic 2: Inventory available School instructional technologies, resources, and areas of support for those technologies. Deliverable(s): Completed inventory, tabulated results, and communicated to faculty, staff and student body</p>	<p>Learning Technologies Office</p>	<p>October, 2013</p>	
<p>Tactic 3: Develop a plan to move all faculty toward utilizing Blackboard, the School's Learning Management System, to provide services to both face-to-face and online learners. Deliverable(s): 3a) Submitted a two-year-plan for moving all courses toward utilizing Blackboard to the administration 3b) Created more learning opportunities for faculty and staff via online resources, webinars, and in person instructional forums</p>	<p>Technology and Simulation Advisory Committee Learning Technologies Office</p>	<p>May, 2013 June-December, 2013</p>	
<p>Tactic 4: Develop UMSON specific standards for the delivery of online course content via Blackboard, the Learning Management System, that are consistent with best practices as defined by Quality Matters™ and current evidence. Deliverable(s):</p>			

4a) Designed a template for all courses incorporating Quality Matters standards 4b) Incorporated the template in all Blackboard courses	Learning Technologies Office	April, 2013 June - December, 2013	
Tactic 5: Create an interprofessional simulation work group dedicated to providing students and faculty with lifesaving decision making and advanced skill intervention. Deliverable(s): 5a) Recruited members of work group 5b) Held first meeting	Technology and Simulation Advisory Committee of Faculty Council - Simulation Advisory Council	March, 2013 April, 2013	
YEAR 2 (2013-2014) TACTICS/ACTION ITEMS	WHO	TIMELINE	FUNDING
Tactic 1: Educate all faculty members on the benefits of using web conferencing for teaching and other support for their courses and programs and incorporate web conferencing technology. Deliverable(s): 1a) Designed and developed faculty workshops 1b) Delivered initial workshop to faculty 1c) Drafted evaluation process and tools	Learning Technologies Office, Institute for Educators	January, 2014	
Tactic 2: Carry out training sessions to update faculty on use of currently technologies Deliverable(s): 2a) Created a basic technology competencies that all faculty should have 2b) Offered online and face-to-face training sessions on currently used technologies	Learning Technologies Office	March, 2014	
Objective 5.3 Use technology to enhance the student experience from recruitment to graduation			
YEAR 1 (2012-2013) TACTICS/ACTION ITEMS	WHO	TIMELINE	FUNDING
Tactic 1: Conduct a review of currently employed technology used for recruitment/registration and identify needed improvements for future recruitment and registration efforts. Deliverable(s): 1a) Completed review of currently employed technology 1b) Conducted needs assessment and shared with participants/contributors	OSAS, UMSON Network Services, Learning Resources, Center for Information Technology Services	December, 2013	
Tactic 2: Conduct an assessment of currently available technology to identify unused or under-utilized technology to be used for future recruitment and registration efforts and			

<p>explore other potential technology that may be needed.</p> <p>Deliverable(s): 2a) Completed assessment and shared with OSAS staff 2b) Identified new technologies and shared with OSAS for consideration</p>	OSAS, Center for Information Technology Services, UMSON Network Services, Learning Resources	December, 2013	
<p>Tactic 3: Survey UMSON faculty and staff to determine what information currently stored in Banner or additional information captured during recruitment and enrollment would provide meaningful data to improve decision-making</p> <p>Deliverable(s): 3a) Completed survey of UMSON faculty and staff 3b) Held meeting with all faculty and staff groups to clarify and solidify data needs identified in survey</p>	Office of Student and Academic Services UMSON faculty and staff Center for Information Technology Services	May, 2013 October, 2013	
YEAR 2 (2013-2014) TACTICS/ACTION ITEMS	WHO	TIMELINE	FUNDING
<p>Tactic 1: Develop business plan to implement currently available technology to enhance the recruitment and registration processes</p> <p>Deliverable(s): 1a) Recruited representatives for committee 1b) Developed business plan to utilize existing technology in recruitment/registration functions</p>	Office of Student and Academic Services Center for Information Technology Services Learning Resources	September, 2014	
<p>Tactic 2: : Develop business plan to implement new technology to enhance the recruitment and registration processes</p> <p>Deliverable(s): 2a) Created report of additional needed hardware/software and shared with OSAS, UMSON Network Services and Administrative Services 2b) Developed budget for additional hardware/software needs</p>	Office of Student and Academic Services Center for Information Technology Services Learning Resources	September, 2014	
<p>Tactic 3: Re-develop “Banner Reports” to reflect input from faculty and staff to provide meaningful data used to make decisions</p> <p>Deliverable(s): 3a) Developed and tested new Banner Reports 3b) Loaded new “Banner Reports” onto PCs of all eligible faculty and staff 3c) Completed training of all faculty and staff to use “Banner Reports”</p>	Office of Student and Academic Services Center for Information Technology Services	November 2014	

Appendix IIC-1

CURRICULUM VITAE

Jane Marie Kirschling, PhD, RN, FAAN
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EDUCATIONAL PREPARATION

Completed	College/University or Program	Degree
2000-2003	Robert Wood Johnson Foundation Executive Nurse Fellows Program	-
June 2001	Harvard Institutes for Higher Education, Harvard Graduate School of Education, MLE Management and Leadership in Education	-
1984	Indiana University School of Nursing, Indianapolis, IN Specialty: Psychiatric/Mental Health Nursing Original degree DNS, IU granted PhD equivalent 2010	PhD
1982	Indiana University School of Nursing Specialty: Community Mental Health Nursing	MSN
1980	Viterbo College, LaCrosse, WI	BSN

PROFESSIONAL EXPERIENCE

Academic Appointments

Date(s)	Position/University/Health Care Agency/Location/Responsibilities
2013-present Tenured, Graduate Faculty	Professor and Dean, School of Nursing and University Director of Interprofessional Education University of Maryland, Baltimore, MD. Serve as chief academic officer of the School of Nursing, which includes undergraduate and graduate nursing programs located on two campuses - Baltimore and at the Universities at Shady Grove. In addition, serve as the Director of the Center for Interprofessional Education.
2006-2012 Tenured, Graduate Faculty	Professor and Dean University of Kentucky College of Nursing, Lexington, KY. Served as chief academic officer of the College of Nursing, which included undergraduate and graduate nursing programs.
1999-2006 Tenured, Graduate Faculty	Professor of Nursing and Dean University of Southern Maine College of Nursing and Health Professions, Portland, ME. Served as chief academic officer of the College of Nursing and Health Professions, which included undergraduate and graduate nursing programs on the Portland and Lewiston-Auburn campuses and undergraduate programs in health sciences, radiation therapy, recreation and leisure, and sports medicine.
1996-1999, Tenured	Professor and Associate Dean for Academic Affairs

Date(s)	Position/University/Health Care Agency/Location/Responsibilities
1998-1999	Ruth Miller Brody and Bernard B. Brody Professor University of Rochester School of Nursing, Rochester, NY. Provided academic oversight for baccalaureate, master's, post-master's, and doctoral nursing programs; oversight of student affairs and office of evaluation; recruitment of academic and clinical track teaching faculty; and evaluation of assigned faculty.
1984-1996	Professor (1995-1996), Associate Professor (1988-1995, tenured 1989) Assistant Professor (1984-1988)
1994-1996	Associate Dean for Graduate Studies Oregon Health Sciences University School of Nursing, Portland, OR. As Associate Dean provided academic oversight for the statewide graduate program, including master's, post-master's, and doctoral nursing programs. As a faculty member provided instruction to baccalaureate, master's, and doctoral nursing students in the area of family and gerontological nursing.
1981-1984	Research Assistant for Angela Barron McBride, RN, Ph.D., FAAN Indiana University School of Nursing, Chairperson, Psychiatric Mental Health Nursing Graduate Program, Indianapolis, IN. Collected and analyzed research data and evaluation materials for the graduate program, and library searches.
January 1983- May 1983	Clinical Faculty - Part-Time Indiana University School of Nursing, Indianapolis, IN. Provided clinical supervision of baccalaureate students on inpatient psychiatric units at the Veterans Hospital.
Spring 1982	Clinical Faculty - Part-Time Indiana Central College, Indianapolis, IN. Provided clinical supervision of diploma students on a general medical unit at St. Francis Hospital.

Clinical Positions

1991	Psychiatric Nurse - On Call (during sabbatical). Visiting Nurse Association, Portland, OR. Provided care for clients and their families in a psychiatric home care program.
1984-1987	Staff Nurse - On Call. Visiting Nurse Association Hospice, Portland, OR. Provided care for the terminally ill and their families in a home care hospice program.
1983-1984	Staff Nurse - Part-Time. Tri-County Mental Health Inpatient Unit, Indianapolis, IN. Provided direct care as well as supervised the care provided by the psychiatric attendants and milieu therapists.
1983-1984	Staff Nurse - Part-Time. St. Vincent Stress Center, Indianapolis, IN. Provided direct care as a pool nurse for the psychiatric inpatient unit, chemical dependency unit, hospice unit, and home care program.
1982-1983	Staff Nurse II - Part-Time. St. Vincent Stress Center, Indianapolis, IN. Provided direct care for the terminally ill and their families on the inpatient unit and managing a 10-15 patient caseload in the home care program.
1980-1982	Staff Nurse - Part-Time. St. Vincent Hospital and Health Care Center, Indianapolis, IN. Provided direct care, as well as supervised the care provided by nurse aides and licensed practical nurses, on a medical oncology unit.
1980 (summer)	Staff Nurse - Full-Time. Wood County Nursing Home, Port Edwards, WI. Provided direct care, as well as supervised the care provided by nurse aides and licensed practical nurses, to residents of the nursing home.

PUBLICATIONS

Research-Based Publications

- Kirschling, J.M., & Pierce, P.K. (1982). Nursing and the terminally ill: Beliefs, attitudes, and perceptions of practitioners. *Issues in Mental Health Nursing, 4*, 275-286
- Kirschling, J.M. (1985). Support utilized by caregivers of terminally ill family members. *The American Journal of Hospice Care, 2*(2), 27-31
- Kirschling, J.M., & Akers, S. (1986). Group experience for the recently widowed. A bereavement follow-up study. *The American Journal of Hospice Care, 3*(5), 24-27
- Kirschling, J.M., & Austin, J.K. (1988). Assessing support - the recently widowed. *Archives of Psychiatric Nursing, 2*, 81-86
- Kirschling, J.M., & McBride, A.B. (1989). Effects of age and sex on the experience of widowhood. *Western Journal of Nursing Research, 11*, 207-218
- Kirschling, J.M. (1989). Analysis of Bugen's model of grief. *The Hospice Journal, 5*(1), 55-75.
- Kirschling, J.M., & Pittman, J.F. (1989). Measurement of spiritual well-being: A hospice caregiver sample. *The Hospice Journal, 5*(2), 1-11
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- Kirschling, J.M., & Luce, L. (1992). Oregon Hospice Association: State-wide data set. *The Hospice Journal, 8*(3), 35-44
- Harvath, T.A., Archbold, P.G., Stewart, B.J., Gadow, S., & Kirschling, J.M. (1994). Establishing partnerships with family caregivers. Local and cosmopolitan knowledge. *Journal of Gerontological Nursing, 20*(2), 29-35
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- Kirschling, J.M., Stewart, B.J., & Archbold, P.G. (1994). Family caregivers of post-hospitalized older persons and persons receiving hospice: Similarities and differences. *Home Health Care Services Quarterly, 14*(4), 117-140
- Archbold, P.G., Stewart, B.J., Miller, L., Harvath, T.A., Greenlick, M.R., VanBuren, L., Kirschling, J.M., Valanis, B., Brody, K., Schook, J., & Hagan, J. (1995). The PREP system of nursing interventions: A pilot test with families caring for older members. Preparedness (PR), enrichment (E) and predictability (P). *Research in Nursing and Health, 18*, 3-16
- Kirschling, J.M., Fields, J., Imle, M., Mowery, M., Tanner, C.A., Perrin, N., & Stewart, B. (1995). Evaluating teaching effectiveness. *Journal of Nursing Education, 34*, 401-410
- Raudonis, B.M., & Kirschling, J.M. (1996). Family caregivers' perspectives on hospice nursing care. *Journal of Palliative Care, 12*(2), 14-19
- Anderson, C.M., Raudonis, B.M., & Kirschling, J.M. (1999). Hospice and palliative nursing role delineation study: Implications for certification. *Journal of Hospice and Palliative Nursing, 1*(2), 45-54
- Messecar, D.M., Archbold, P.G., Stewart, P.J., & Kirschling, J.M. (2002). Home environmental modification strategies used by caregivers of elders. *Research in Nursing and Health, 25*, 357-370
- Kirschling, J.M., Colgan, C., & Andrews, B. (2011). Predictors of registered nurses' willingness to remain in nursing. *Nursing Economic\$, 29*(3), 111-117

Other Publications

- Kirschling, J.M. (1986). The experience of terminal illness of adult family members. *The Hospice Journal, 2*(1), 121-138
- Gabriel, R.M., & Kirschling, J.M. (1989). Assessing grief among the bereaved elderly: A review of existing measures. *The Hospice Journal, 5*(1), 29-54

- Hall, J.E., & Kirschling, J.M. (1990). A conceptual framework for caring for families of hospice patients. *The Hospice Journal*, 6(2), 1-28
- Kirschling, J.M., & Osmont, K. (1992). Bereavement network: A community based group. *Omega*, 26, 119-127
- Raudonis, B., & Kirschling, J.M. (1992). Hospice research: The importance of program participation. *The American Journal of Hospice and Palliative Care*, 9(4), 21-25
- Suzuki, S., Kirschling, J.M., & Inoue, I. (1993). Hospice care in Japan. *The American Journal of Hospice and Palliative Care*, 10(4), 35-40
- Sigma Theta Tau International (1998). *The Woodhull Study on Nursing and the Media Health Care's Invisible Partner Final Report*. Co-authored final report with Bill Watson. Indianapolis, IN: Center Nursing Press Sigma Theta Tau
- American Association of Colleges of Nursing. (November 2001). *Indicators of Quality in Research-Focused Doctoral Programs in Nursing*, AACN Position Statement. Co-authored statement as member of Task Force, chaired by Dr. Sandra Edwardson. Washington, DC: Author
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- Kirschling, J.M. (2002). Hospice. In D.J. Ekerdt, R.A. Applebaum, K.C. Holden, S.G. Post, K. Rockwood, R. Schultz, R.L. Sprott, & P. Uhlenberg (Eds.), *Encyclopedia of Aging*. New York, NY: Macmillan Reference USA
- Kirschling, J.M., Conover, L., Curley, D., Ernest, P., Girard, T., Kuhrt, S., Philbrook, P., Samia, L., Sinclair, C., Smith, N., Stuchiner, K., & Whitehead, B. (2002). *Report from the Maine Nursing Summit - Maine Health Care: Colleagues in Caring Nursing Workforce Initiative*. Portland, ME: University of Southern Maine College of Nursing and Health Professions. Available at http://usm.maine.edu/sites/default/files/School%20of%20Nursing/NursingSummit2001_0.pdf
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- Kirschling, J.M. (2002). View from the Board - HPNA position statements: Speaking on behalf of our membership and Association News - Excellence in hospice and palliative care nursing. *Journal of Hospice and Palliative Nursing*, 4(2), 64-65, 68
- Kirschling, J.M. (2002). View from the Board - America's nursing shortage: Fact or fiction? *Journal of Hospice and Palliative Nursing*, 4(3), 124-126
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- Kirschling, J.M. (2003). View from the Board - Expanded educational and networking opportunities for end-of-life nursing care. *Journal of Hospice and Palliative Care Nursing*, 5(3), 11
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- Morin, K., & Kirschling, J.M. (2004). Invited editorial: Whither the leadership. *Journal of Nursing Education*, 43(11), 483
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- Kirschling, J.M., & Rodgers, M. (2005). Succession planning: When an academic merger occurs. *Nursing Leadership Forum*, 9, 87-91
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- Kirschling, J.M. (2010). End-of Life Care: Nursing Leadership Remains Critical. Editorial, *Journal of Nursing Education*, 49(4), 179-180
- Kirschling, J.M., and Ives-Erickson, J. (2010). The STTI Practice-Academe Innovative Collaboration Award: Honoring Innovation, Partnership, and Excellence. *Journal of Nursing Scholarship*, 42(3), 286-294
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- Kirschling, J.M., & Bednash, G. (2013). Recognizing the value of nursing. *The Advisor The Journal of the National Association of Advisors for the Health Professions*, 33(4), 11-12
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- Bednash, G., Breslin, E., Kirschling, J.M., & Rosseter, R. (in press). Building the research enterprise in the academic environment: A view from the United States. *Quality Advancement in Nursing Education*
- Bednash, G., Breslin, E., Kirschling, J.M., & Rosseter, R. (in press). To PhD or DNP? Planning Your Doctoral Nursing Education. *Nursing Science Quarterly*

Book Chapters

- Kirschling, J.M. (1987). Intervening with middle-aged families and terminal cancer. In M. Leahey & L. Wright (Eds.), *Families and Life Threatening Illness* (pp. 297-309). Springhouse, PA: Springhouse
- Kirschling, J.M. (1987). The interface between terminally ill elderly, their families and hospice. In T.H. Brubaker (Ed.), *Aging Health and Family Long-term Care* (pp. 216-231). Beverly Hills, CA: Sage
- Ryan, S., Kirschling, J.M., Botelho, R.J., Bennett, N.M., & Schmitt, M. (1998). Medicine, nursing, and public health: Partnering to improve the community's health (pp. 384-388). In E.C. Cohen & V. DeBack (Ed.), *Collaboration in Case Management*. St. Louis, MO: Mosby
- Kirschling, J.M. (2005). From the outside looking in: Considering whether to be an external applicant for a Dean's position. *Academic Leadership in Nursing: Making the Journey* (pp. 33-38). Washington, D.C.: American Association of Colleges of Nursing
- Kirschling, J.M. (2008). Faculty roles and expectations. In B.K. Penn (Ed.), *Mastering the Teaching role: A Guide for the Nurse Educator* (pp. 515-529). Philadelphia: F.A. Davis
- Kirschling, J.M., Connaughton, M.J. (2013) First Lessons: Know Yourself and Your Values. In C. Hall (Ed.), *Accelerate Your Career in Nursing*. Indianapolis, IN: Sigma Theta Tau International

Commentaries, Book Reviews, and Film Reviews

- Kirschling, J.M. (1990). Commentary on M.J. Bull's article, Factors influencing family caregiver burden and health. *Western Journal of Nursing Research*, 12, 772-773
- Kirschling, J.M. (1992). Book review *Counseling the Bereaved* by R.A. Dershimier. *The Hospice Journal*, 8(4), 76-78
- Kirschling, J.M. (1994). Book review *The Year Before Death* by C. Seale & A. Cartwright. *Progress in Palliative Care An International Journal*, 2, 158-159
- Kirschling, J.M. (1996). Book review *Hope for Families Caring for Loved Ones at Home* by S. Ulmer. *National Hospice Organization*
- Kirschling, J.M. (1996). Film review *The Way We Die* by J. Mednick. *National Hospice Organization*
- Kirschling, J.M. (1998). Book review *Living through Loss a Manual for those Working with Issues of Terminal Illness and Bereavement* by F.W. Jacobsen, M. Kindlen, & A. Shoemark. *Journal of Interprofessional Care*, 12(1), 111
- Kirschling, J.M. (1998). Book reviews *I'm Here to Help A Guide for Caregivers, Hospice Workers, and Volunteers* and *I'm With You Now A Guide Through Incurable Illness for Patients, Families, and Friends* by M.C. Ray. *The American Journal of Hospice and Palliative Care*, 15(3), 187
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- Kirschling, J.M. (1999). Book review *Coping with Loss* by S. Nolen-Hoeksema & J. Larson. *The American Journal of Hospice and Palliative Care*, 16, 684
- Kirschling, J.M. (2000). Book review *Pain: Clinical Manual* (2nd Ed.) by M. McCaffery & C. Pasero. *The American Journal of Hospice and Palliative Care*, 17

PRESENTATIONS

National and International Presentations

- Kirschling, J.M., & Akers, S. (1983, October). *A group experience - the recently bereaved*. Paper, 6th Annual Conference of the Forum for Death Education and Counseling, Chicago, IL. Abstracted in conference proceedings
- Kirschling, J.M. (1985, November). *An exploratory study of support utilized by the recently widowed*. Roundtable presentation, National Council of Family Relations Meeting, Dallas, TX
- Kirschling, J.M. (1985, December). *Support and coping in the recently widowed*. Poster, American Nurses Association Council of Nurse Researchers Annual Conference, San Diego, CA. Abstracted in Summary of Presentations *Nursing Research: Integration into the Social Structure*
- Kirschling, J.M. (1986, November). *An exploratory study with active and bereaved family caregivers of terminally ill adults*. Paper, The National Hospice Organization Annual Meeting and Symposium, Denver, CO
- Kirschling, J.M. (1989, September). *Images of care within the family: A panel discussion*. Invited panelist with Patricia Archbold and Sheila Kodadek, National Conference on Family Nursing, Family Nursing Continuing Education Project, Oregon Health Sciences University Department of Family Nursing, Portland, OR
- Kirschling, J.M., Gilliss, C., & Members of the Research Proposals Special Interest Group, Family Nursing Continuing Education Project (1989, September). *Persons who describe themselves as family nurses: Who they are, where they practice and what they do*. Poster, National Conference on Family Nursing, Family Nursing Continuing Education Project, Oregon Health Sciences University Department of Family Nursing, Portland, OR. Abstracted in conference proceedings
- Kirschling, J.M., Gilliss, C., & Members of the Research Proposals Special Interest Group, Family Nursing Continuing Education Project (1989, September). *The practice of family nursing: Survey results*. Paper, National Conference on Family Nursing, Family Nursing Continuing Education Project, Oregon Health Sciences University Department of Family Nursing, Portland, OR. Abstracted in conference proceedings
- Kirschling, J.M., Gilliss, C., & Members Research Proposals Special Interest Group, Family Nursing Continuing Education Project (1991, May). *Family nurses from throughout the world: Who they are, where they practice, and what they do*. Poster, 2nd International Family Nursing Conference, Portland, OR. Abstracted in conference proceedings
- Kirschling, J.M., Stewart, B.J., & Archbold, P.G. (1991, October). *Family caregivers of older persons and persons receiving hospice: Similarities and differences*. Paper, American Nurses Association Council of Nurse Researchers 1991 International Nursing Research Conference, Los Angeles, CA. Abstracted in conference proceedings
- Raudonis, B., & Kirschling, J.M. (1993, November). *Family caregivers' perspective of hospice care*. Poster, Annual Meeting of the Gerontological Society of America, New Orleans, LA
- Kirschling, J.M., Stewart, B.J., Archbold, P.G., Raudonis, B.M., Harvath, T.A., & Miller, L.L. (1994, April). *Bereaved family caregivers of post-hospitalized older persons*. Paper, Association for Death Education and Counseling, 16th Annual Conference, Portland, OR
- Kirschling, J.M., Stewart, B.J., Archbold, P.G., Raudonis, B.M., Harvath, T.A., & Miller, L.L. (1994, June). *Bereaved family caregivers of post-hospitalized older persons*. Poster, 4th International Conference on Grief and Bereavement in Contemporary Society, Stockholm, Sweden
- Raudonis, B., & Kirschling, J.M. (1994, June). *Individualized family based palliative care: An outcome of hospice nursing*. Paper, 5th National Conference for the Theory of Modeling and Role Modeling, Arcata, CA
- Kirschling, J.M. (1996, June). *The next decade in doctoral education*. Invited speaker, Annual Forum on Doctoral Education in Nursing "Lessons from the Past - Visions for the Future," Columbus, OH. The Ohio State University College of Nursing. Paper published in its entirety in conference proceedings

- Kirschling, J.M. (1997, November). *Analysis and perspectives on hospice nursing research and Issues in hospice caregiving: Families and nurses*. Invited keynote speaker, The Catholic University, Seoul, Korea. Conference entitled "The Development of Hospice / Palliative Care," organized by the WHO Collaborating Centre for Hospice/Palliative Care. Papers printed in entirety in English and Korean in conference proceedings
- Anderson, C., & Kirschling, J.M. (1998, November). *Results of hospice and palliative care nurses' role delineation study*. Paper, National Hospice Organization, 20th Annual Symposium and Exposition, Dallas, TX
- Anderson, C., & Kirschling, J.M. (1999, February). *Results of hospice and palliative care nurses role delineation study*. Paper, Hospice and Palliative Nursing Association Educational Conference "The Future is Now", Clearwater Beach, FL
- Kirschling, J.M. (1999, November). *Grief and bereavement: How the underlying conceptualization is evolving in the west; Research on care of dying persons and for bereaved persons: A view from the United States; and Trends in bereavement care in the United States*. Invited keynote speaker, The Catholic University, Seoul, Korea. Conference entitled "Hospice Care for the Dying and the Bereaved," organized by the WHO Collaborating Centre for Hospice/Palliative Care. Papers printed in entirety in conference proceedings
- Kirschling, J.M. (2000, March). *The experience of a small school without access to a development officer*. Invited speaker, AACN 2000 Executive Development Series "Development Activities: Building the Base", Washington, D.C.
- Kirschling, J.M. (2001, August). *Higher education and the nursing profession*. Invited presentation at the Leadership Initiative for Nursing Education (LINE), Leadership Institute, Freeport, ME
- Kirschling, J.M. (2002, February). *Observations on Master's education* (summary comments from conference as chairperson of the planning committee). 2002 Master's Education Conference Contrasts and Decision Points: Models for Innovation Master's Education. American Association of Colleges of Nursing, Amelia Island, FL
- Kirschling, J.M., & Dorrity, C. (2003, April). *Maine's statewide initiative to recruit elementary school children into health careers*. Poster, Taking the Long View: A Gathering of State Nursing Workforce Centers, Raleigh, NC
- Kirschling, J.M. (2003, June). *Ethical and compassionate end of life care*. Invited presentation for the 30th Anniversary Infusion Nurses Society (INS) Annual Meeting and Industrial Exhibition. Nashville, TN
- Rodgers, M., & Kirschling, J.M. (2004, February). *Mastering the Master's faculty role*. Invited panel presentation for 2004 Master's Education Conference. American Association of Colleges of Nursing, Scottsdale, AZ
- Kirschling, J.M. (2004, September). *Professional organization membership*. Invited presenter for Hospice and Palliative Nurses Association Professional Development Continuing Education Series Web Teleconference, Pittsburgh, PA
- Kirschling, J.M. (2007, 2008 and 2009, January). *RWJ Executive Nurse Fellows Program: Advanced leadership development*. Coordinated panel presentation and presented for American Association of Colleges of Nursing 2007 and 2008 Doctoral Education Conference, Captiva Island, FL and Coronado, CA
- Kirschling, J.M. (2006, March). *The 5 year trek: Maine's nursing workforce legislative initiatives*. Invited presenter for the American Association of Colleges of Nursing Semi-Annual Dean's Meeting, Washington, DC
- Kirschling, J.M. (2007, 2008, 2009, August). *What are we, collectively able to create? (Jaworski, 1996) [2007 and 2008], Essential qualities of Professional Nursing Organizations that Lead [2009]*. Invited presenter for the National Alliance Leadership Academy, Louisville, KY
- Kirschling, J.M., Howard, P., M. Wiggins, M., & Sepples, S. (2008, February). *Highlights and Pitfalls: Transitioning Toward the CNL and DNP (University of Southern Maine and University of Kentucky Experiences)*. American Association of Colleges of Nursing 2008 Master's Education Conference, Newport Beach, CA
- Kirschling, J.M. (2008, June). *Focus on the nursing workforce: Today's issues and challenges*. Invited closing plenary, 2008 LEAD Summit Center for American Nurses, Washington, DC

- Kirschling, J.M. (2009, February). *How important is scholarship to the faculty role?* Invited plenary, 2009 American Association of Colleges of Nursing Faculty Development Conference, Savannah, GA
- Kirschling, J.M. (2009, April). *Leveraging our individual and collective power: Patient and family centered care.* Invited plenary, 2009 Pediatric Endocrinology Nursing Society, Newport, RI
- Breslin, E., & Kirschling, J.M. (2009, July). *Getting started: Colleges of Nursing "Treks" Towards Inclusiveness.* Invited presenters, Cultural Proficiency Institute, Los Angeles, CA
- Kirschling, J.M. & Grinspum, D. (2009, December). *Globally advancing the profession of nursing: Clinical and education partnerships.* Invited presenters, 3rd Annual Nurse Faculty Nurse Executive Summit, Scottsdale, AZ
- Carlson, E., Hudson, S.B., Holloman, P., Kirschling, J., Montalvo, I., & Newman, C. (2010, June). *Pay for quality principles.* Invited panelist, American Nurses Association House of Delegates, Washington, DC
- Bouvier, J.R., Diebold, C.M., & Kirschling, J.M. (2010, October). *UHC/AACN Nurse Residency Program™, presented A dean's perspective.* Invited presenters, American Association of Colleges of Nursing 2010 Fall Semiannual Meeting, Washington, DC
- Kirschling, J.M. (2010, November). *AACN's response to the IOM Report on the Future of Nursing.* Invited speaker, Nursing Organization Alliance™, The Alliance 2010 Fall Summit, Portland, OR
- Blue, A., Kirschling, J.M., Schmitt, M., & Viggiano, T. (2011, February). *Interprofessional Team-Based Competencies, IPEC Expert Panel Presentation.* Invited panelist, invitational meeting on "Interprofessional Team-Based Competencies: Building a Shared Foundation for Education and Clinical Practice," sponsored by HRSA, Josiah Macy Jr. and Robert Wood Johnson Foundations, and ABIM Foundation in Partnership with Interprofessional Education Collaborative (IPEC), Washington, DC
- Potempa, K., & Kirschling, J.M. (2011, May). *AACN Strategic Planning & the IOM Report.* American Association of Colleges of Nursing Membership Webinar
- Kirschling, J.M., Kern, D., & Meyer, S. (2011, October). *Integrating Interprofessional Competencies into the Curriculum.* American Association of Colleges of Nursing Faculty Webinar
- Kirschling, J.M., Edwardson, S., & Haber, J. (2011, October). *Interprofessional Education in Nursing Education.* American Association of Colleges of Nursing Semi-Annual Meeting
- Burkhart, P.V., & Kirschling, J.M. (2011, November). *Implementing Interprofessional Education for Pre-licensure Students.* American Association of Colleges of Nursing 2011 Baccalaureate Education Conference, Transforming Nursing Education: Addressing Critical Challenges, St. Louis, MO
- Kirschling, J.M., Hodges, A.L., & Lamb, G. (2012, January). *Interprofessional Education at the Doctoral Level.* American Association of Colleges of Nursing 2012 Doctoral Education Conference, Naples, FL
- Kirschling, J.M. (2012, February). *Nursing Faculty Participation in Interprofessional Education: Implications for Teaching Productivity, Workload and Satisfaction.* Robert Wood Johnson Foundation "Evaluating Innovations in Nursing Education" Webinar
- Kirschling, J.M. (2012, June). *AACN's Strategic Response to the IOM Report.* The Alliance for Excellence in Hospice and Palliative Nursing, Thought Leader Summit, Pittsburgh, PA
- Kirschling, J.M. (2013, January). *Current State of the Nurse Faculty Shortage and Designing DNP Programs to Meet Required Competencies - Context for the Conversation.* American Association of Colleges of Nursing 2013 Doctoral Education Conference, San Diego, CA
- Kirschling, J.M. (2014, January). *Reflections on the Future of Doctoral Programs in Nursing.* American Association of Colleges of Nursing 2014 Doctoral Education Conference, Naples, FL
- Kirschling, J.M. (2014, April). *Diversifying the Nursing Workforce: Local and National Perspectives.* American Association of Nurse Anesthetists, Diversity and Inclusion in Nursing Education Summit, Arlington, VA
- Kirschling, J.M. (2014, April). *Nurses as the Nation's Largest Health Professions Workforce - Responding to the Clarion Call for Interprofessional Collaborative Practice and Education.* EB 2014, American Society for Pharmacology & Experimental Therapeutics, San Diego, CA
- Kirschling, J.M. (2014, June). *The Diversity in Nursing's Future: Is Nursing Education Prepared?* National Strategy Alliance, Leadership Institute VII: Legacy of Leadership - Preparing for Tomorrow, Leadership for Enhancing Diversity. Winston-Salem, NC (delivered via distance

technology)

State and Regional Presentations

- Kirschling, J.M., & Austin, J.K. (1982, November). *An investigation of support and the recently widowed from cancer*. Paper, Indiana State Nurses' Convention, Indianapolis, IN
- Kirschling, J.M., & Austin, J.K. (1983, April). *An investigation of support and the recently widowed from cancer*. Paper, 7th Annual Midwest Nursing Research Society Conference in Iowa City, IA Abstracted in conference proceedings *Nursing Research, Policy Impact Issues*
- Kirschling, J.M., & Adix, W.F. (1985, January). *Spiritual and cultural aspects of pain*. Paper, "Pain Relief During the Last Phases of Life", Conference for Health Professionals presented by Hospice Assistance Program, Portland, OR
- Kirschling, J.M. (1985, May). *Social and coping in the recently widowed*. Paper, 18th Annual Communicating Nursing Research Conference, Seattle, WA. Abstracted in conference proceedings *Influencing the Future of Nursing Research through Power and Politics*
- Kirschling, J.M., & Pittman, J.F. (1988, May). *Spiritual well-being and coping of family caregivers*. Paper, 21st Annual Communicating Nursing Research Conference, Western Institute of Nursing, Salt Lake City, UT. Abstracted in conference proceedings *Nursing: A Socially Responsible Profession*
- Kirschling, J.M. (1988, September). *Hospice care for aging families: An opportunity to promote family well-being*. Invited keynote speaker, Family Nursing Workshop III: Nursing and the Promotion/Protection of Family Health, Oregon Health Sciences University Department of Family Nursing, Portland, OR. Paper published in its entirety in conference proceedings
- Kirschling, J.M. (1989, May). *Hospice family caregivers: Evaluation of a measure of social support*. Paper, 22nd Annual Communicating Nursing Research Conference, Western Institute of Nursing, San Diego, CA. Abstracted in conference proceedings *Choices Within Challenges*
- Kirschling, J.M. (1989, June). *Family as the caregiver*. Invited keynote speaker, Oregon Chapter of the Oncology Nursing Society Annual Banquet, Portland, OR
- Garland, M., & Kirschling, J.M. (1994, July). Facilitators training: Oregon Health Decisions and Oregon Hospice Association -- *How will you vote? Community meetings to identify Oregonians values about end-of-life decisions*. Portland, OR
- Garland, M., & Kirschling, J.M. (1994, August). Community meeting reporting: Oregon Health Decisions and Oregon Hospice Association -- *How will you vote? Community meetings to identify Oregonians values about end-of-life decisions*. Portland, OR
- Kirschling, J.M. (1994, September). *The physician-assisted death initiative: Implications for palliative nursing care*. Facilitated panel discussion, CNE: Thursdays for Nurses, Oregon Health Sciences University School of Nursing, Portland, OR
- Kirschling, J.M. (1995, April). *Responding to Measure 16: Physician assisted suicide*. Invited panelist, "Catch the Wave of Change Striving for Excellence in Home Care and Hospice," Oregon Association for Home Care, Oregon Hospice Association, Gleneden Beach, OR
- Kirschling, J.M. (2000, September). *The nursing workforce*. Invited speaker, Annual Conference Organization of Maine Nurse Executives, Camden, ME
- Kirschling, J.M. (2000, December). *Health care workforce: Best practices in recruitment and retention - a National snapshot*. Invited speaker, 5th Annual Critical Issues Conference, "Best Practices in Continuing Care," Sponsored by Maine Hospital Association, Maine Health Care Association, Maine Chapter Healthcare Financial Management Association, Home Care Alliance of Maine, Augusta, ME
- Kirschling, J.M. (2001, May). *Expert testimony "Resolve to establish a commission to study the health care workforce shortage"*, provided on behalf of the Organization of Maine Nurse Executives, Maine Legislature - Health and Human Services Committee, public hearing
- Kirschling, J.M. (2001, May). *Stewardship: Nursing's commitment to our communities and our selves*. Invited speaker, 6th Primary Care Update for Nurse Practitioners, sponsored by Maine Nurse Practitioner Association, Rockland, ME
- Kirschling, J.M. (2001, December). Member of opening plenary panel: *Maine's changing demographics and the relationship between health care and economic community development*.

- Maine Rural Health Association Conference, "Building Vibrant Communities - Linking Rural Health and Economic Development, Rockland, ME
- Kirschling, J.M. (2003, March). *Testimony "LD735 An Act to Increase Faculty in Maine Nursing Education Programs"*, provided on behalf of the Organization of Maine Nurse Executives and University of Southern Maine, Maine Legislature - Business, Research and Economic Development Committee, public hearing
 - Kirschling, J.M., & Harvey-MacPherson, L. (2004, March). Presentation of *2003 Overview of Maine's Nursing Graduate Capacity Report*, provided on behalf of the Organization of Maine Nurse Executives, Maine Legislature - Joint Standing Committee on Education and Cultural Affairs, public hearing
 - Kirschling, J.M. (2004, April). *Maine's Nursing Workforce*. Invited presentation, 3rd Annual Maine Nursing Summit, Augusta, ME
 - Kirschling, J.M. (2005, April). *Testimony "LD263 An Act to Support and Expand Nursing Education Opportunities at Maine's Public Universities"*, provided on behalf of the University of Maine System and University of Southern Maine, Maine Legislature - Joint Standing Committee on Appropriations and Financial Affairs, public hearing
 - Kirschling, J.M., & Colgan, C. (2005, May). *Update on Maine's workforce initiatives*. Invited presentation, 4th Annual Maine Nursing Summit, Augusta, ME
 - Kirschling, J.M. (2006, February). *Testimony in Support of Appropriation for Nursing Education Expansion in Maine*, provided on behalf of the University of Maine System and the University of Southern Maine, Maine Legislature - Joint Standing Committees on Appropriations and Financial Affairs and Education and Cultural Affairs, public hearing
 - Kirschling, J.M. (2006, February). *Update on Maine's Nursing Workforce*. Invited presentation, OMNE Nursing Leaders of Maine, Augusta ME
 - Kirschling, J.M. & Harvey-MacPherson, L. (2006, March). *The 5 Year Trek: Maine's Nursing Workforce legislative Initiatives*. Invited presentation, 5th Annual Maine Nursing Summit, Augusta, ME
 - Val Palumbo, M. & Kirschling, J.M. (2006, May). *Our Aging Nurse Workforce: A Northern New England Perspective*. Invited presentation, Northern New England Home Care and Hospice Conference, South Portland, ME
 - Kirschling, J.M. (2006, September). *What are the Challenges to Maintaining Healthy Nursing Communities*. Invited panelist, Sigma Theta Tau Omicron Delta Chapter University of Phoenix. Annual Conference, Santa Ana Pueblo, NM
 - Kirschling, J.M. & Woodring, B. (2008, February). *What an Administrator/Dean Looks for in a Clinical Researcher/Faculty Candidate*. Doctoral Student Pre-conference, 22nd Annual SNRS Research Conference, Birmingham, AL
 - Kirschling, J.M. (2008, April). *Through the Lens of Evidence: Making a Difference in the Quality of Nursing Care*. 2nd Annual Evidence Based Conference "Renewing the Spirit of Nursing by Embracing Evidence Based Practice". Bangor, ME
 - Addison, A., Gabbard, W., Kerr, E., Walker, C., Norton, J., Kirschling, J., & Perman, J. (2009, April). Panel discussant - *"Growing Our Own" Partnering to Develop the Next Generation of Health Practitioners*. University of Kentucky AHEC Community-based Faculty Program, Lexington, KY
 - Kirschling, J.M. (2009, May). *Current and Future Nursing Trends - Highlighting AACN New Essentials of B.S.N. Education*. 5th Annual Faculty Development Workshop: Focus on Evidence, Collaboration, and Civility, University of Kentucky College of Nursing Continuing Education, Lexington, KY
 - Kirschling, J.M. (2009, December). *Bridging the Gap: Easing the Transition from School to Work*. Arizona Nurses Association Chapter 6, Phoenix, AZ
 - Kirschling, J.M. (2010, March). *Initiatives in Kentucky as well as the Nation that are Impacting Our Future Nursing Workforce*. Kentucky Public Health Association Conference "KPHA: The New Face of Public Health 2010", Louisville, KY
 - Kirschling, J.M. (2010, May). *Current Trends and Issues in Nursing Education*. 6th Annual Faculty Development Workshop: Cutting Edge Nursing Education for the 21st Century, University of Kentucky College of Nursing Continuing Education, Lexington, KY
 - Kirschling, J.M. (2010, October). *KNCC: Overview and KNCC initiatives*. Nursing Education: Moving

- Kentucky Into the Forefront of Tomorrow, Bowling Green, KY
- Kirschling, J.M. (2011, April). *The Evolving Picture of Nursing in the United States*. Invited keynote, 2011 Maine Nursing Summit, Augusta, ME
- Kirschling, J.M., Spector, N., & Tagliareni, E. (2011, April). Invited panelist, CCNA Webinar Northeast Education Progression, AACN: *Advancing Higher Education in Nursing*
- Kirschling, J.M., Dees, K., Sutherland, B. (2011, May). *The Future of Nursing: Kentucky's response to the 2010 IOM Report*. Kentucky Hospital Association 82nd Annual Convention, Lexington, KY
- Kirschling, J.M. (2011, May). *The IOM Future of Nursing Report: Implications for educators*. 7th Annual Faculty Development Workshop: Using Technology to Increase Teaching Effectiveness. University of Kentucky, College of Nursing, Lexington, KY
- Kirschling, J.M. (2011, September). *Doing Care Differently - Nursing's Role*. 2011 Howard L. Bost Memorial Health Policy Forum "Rural Innovations for a Healthy Kentucky", Foundation for a Healthy Kentucky, Somerset, KY
- Kirschling, J.M. (2011, September). *Kentucky Nursing Capacity Consortium*. Kentucky Nurses Association HealthCare Summit 2011, Morehead, KY
- Brennan, D., Kirschling, J.M., & Tracy, T. (2011, October). *Deans Panel: Tips, Tricks and Survival Skills*. Southern Conference Academic Consortium Academic Leadership Development, Lexington, KY.
- Kirschling, J.M. (2012, May). *The Future of Nursing Education*. 8th Annual Faculty Development Workshop: Increasing Effectiveness through Innovation in Nursing Education, University of Kentucky, College of Nursing, Lexington, KY.
- Kirschling, J.M. (2013, April). *IOM Future of Nursing Report and Beyond: Interprofessional Education and Practice*. University of Alabama Joint Doctor of Nursing Practice Intensive, "Shaping the Future: Implementing the IOM Report," Huntsville, AL.
- Kirschling, J.M. (2013, July). *Evolution of Nursing Education: Looking at the Horizon*. Nursing Grand Rounds, UMMC, Baltimore, MD.
- Kirschling, J.M. (2013, October). *Nursing: Expanding Horizons for Better Outcomes*. Keynote Speaker, Maryland Nurses Association Awards Luncheon, Annapolis, MD.
- Kirschling, J.M. (2013, October). *Interprofessional Care and Teamwork*. Partnership Excellence in Nursing Education - Interprofessional Collaboration, UTMB, Galveston, TX.
- Kirschling, J.M. (2013, November). *Actualizing the IOM's Call for Interprofessional Education and Practice: A Decade in the Making*. Keynote, 8th Annual Nurse Practitioner & Physician Assistant Clinical Workshop, University of Maryland Medical Center, Baltimore, MD.

Local Presentations

- McBride, A.B., Casey, M.M., Kirschling, J.M., Evans, S.A., & Gale, E.J. (1982, November). *New mothers' perceptions of labor-delivery experience*. Paper, 9th Annual Patient Care Research Colloquium, Indiana University School of Nursing, Indianapolis, IN
- Kirschling, J.M., & Austin, J.K. (1982, November). *An investigation of support and the recently widowed from cancer*. Paper, 9th Annual Patient Care Research Colloquium, Indiana University School of Nursing, Indianapolis, IN
- Kirschling, J.M., & Pierce, P. (1983, November). *Salient beliefs - providing nursing care to the terminally ill*. Paper, 10th Annual Patient Care Research Colloquium, Indiana University School of Nursing, Indianapolis, IN
- McBride, A.B., & Kirschling, J.M. (1983, November). *How psychiatric nursing students perceptions of their competencies change over the course of graduate work*. Poster, 10th Annual Patient Care Research Colloquium, Indiana University School of Nursing, Indianapolis, IN
- Kirschling, J.M. (1984, June). *Experience in bereavement and the use of support groups*. Paper, advanced hospice workshop "A Hospice Indicator: Process for Ethical Decision Making" sponsored by St. Vincent Hospice, Indianapolis, IN
- Kirschling, J.M. (1985, October). *Support utilized by caregivers of terminally ill family members*. Paper, "Nursing Research: Changing Health Care," sponsored by the Oregon Health Sciences University School of Nursing Alumni Association, Beta Psi Chapter of Sigma Theta Tau, and Portland

- Veterans Administration Medical Center, Portland, OR
- Kirschling, J.M. (1989, April). *Developing a program of research: Hospice family caregivers*. Invited keynote speaker, Spring Research Conference and Induction Ceremony, Baccalaureate Nursing Honor Society of Boise State University, Boise, ID
 - Raudonis, B., & Kirschling, J.M. (1993, April). *Family caregivers' perspective of hospice nursing care*. Poster, 10th Annual Student Research Forum, Oregon Health Sciences University, Portland, OR
 - Raudonis B., & Kirschling, J.M. (1994, October). *Family caregivers perspectives*. Poster, Challenges of Acute Care within the Continuum of Care for Older Adults, Texas Christian University, Fort Worth, TX
 - Kirschling, J.M. (1997, January). *Evaluation within the context of nursing education: Are vision and virtue essential in these rapidly changing times?* Invited keynote speaker, annual Self-Evaluation Day, University of Rochester School of Nursing, Rochester, NY
 - Kirschling, J.M. (1997, February). *Nursing for the year 2000 and beyond - your leadership and involvement are essential*. Invited speaker, Sigma Theta Tau Epsilon Xi Chapter Induction Ceremony, Rochester, NY
 - Kirschling, J.M. (1998, February). *Being in the right place at the right time: Measurement as a common thread*. Invited speaker, University of Rochester School of Nursing, Research Exchange 1997-1998 Series, Rochester, NY
 - Kirschling, J.M. (1998, May). *Nursing educational programs: State and national trends*. Invited speaker, 3rd Annual Graduate Preceptor Workshop, University of Rochester School of Nursing, Rochester, NY
 - Kirschling, J.M. (1998, November). *Breaking bad news - the role of nurses*. Invited panelist with Sherwin Nuland, sponsored by University of Rochester Cancer Center, Rochester, NY
 - Kirschling, J.M. (2000, April). *Professional leadership: Shaping the future*. Invited speaker, Sigma Theta Tau Kappa Zeta Chapter-at-Large Induction Ceremony, Gorham, ME
 - Kirschling, J.M. (2000, August). *The nursing workforce: Is the shortage real?* Invited speaker, Brunswick Rotary, Brunswick, ME
 - Kirschling, J.M. (2001, June). Interviewed by USM School of Business faculty Joel Goal on WMPG, Financially Speaking, focus on interview nursing and the nursing shortage
 - Kirschling, J.M. (2002, April). *The worldwide nursing shortage*. Invited speaker, CHANS - Community Health and Nursing Services Annual Meeting. Brunswick, ME
 - Kirschling, J.M. (2002, October). *Strengthening research partnerships to enhance nursing practice*. Invited speaker, Maine Medical Center Research, 2002 Nursing Research Conference "Exploring Best Clinical Practice". Portland, ME
 - Kirschling, J.M. (2003, May). *Envisioning the future of nursing in Maine: A mosaic of opportunities*. First Annual Nursing Summit, Mid Coast Hospital, Brunswick, ME
 - Kirschling, J.M. (2003, July). *Nursing labor market*. Invited speaker, MaineHealth Nursing Executive Council Meeting, Portland, ME
 - Kirschling, J.M. (2003 and 2004, August). *Professional leadership: You are our future*. Invited remarks at Sigma Theta Tau, International, Kappa Zeta Chapter Induction Ceremony, Portland, ME
 - Kirschling, J.M. (2004, January). *Infusion nurses' role in high quality care at the end of life*. Invited presentation to Pine Tree State Chapter of the Infusion Nurses Society, Portland, ME
 - Kirschling, J.M. (2006, October). *Life long learning: Investing in your future*. Invited speaker, Nursing Grand Rounds Chandler Medical Center, University of Kentucky, Lexington, KY
 - Kirschling, J.M. (2007, May). *The future of graduate nursing education*. Invited speaker, Bluegrass Community and Technical College Associate Degree Nursing Class of 2007 Graduation Luncheon, Lexington, KY
 - Kirschling, J.M. (2007, May). *Disruptive innovation: A challenge for nursing with graduate degrees*. Invited speaker, 2006-2007 Graduates of the Master's, Post-Master's Clinical Scholars, Doctor of Philosophy, and Doctor of Nursing Practice Programs - University of Kentucky, Lexington, KY
 - Kirschling, J.M. (2007, October). *The nursing workforce: Is the shortage real?* Invited presentation to the Advisory Committee of Fairfield University School of Nursing, Fairfield, CT
 - Kirschling, J.M. (2007, December). *Nursing leadership - the future is now*. Invited presentation at the Christmas Clinical Council Celebration. St. Joseph's Hospitals, Lexington, KY

- Kirschling, J.M. (2008, October and December). *Improving power and influence: Nurses are essential for high quality care*. Invited presentation at University of Kentucky College of Nursing Continuing Education Workshop "Develop Inspiring and Meaningful Leadership Qualities". Presented at Jenny Wiley State Report Park (October) and General Butler State Park (December), KY
- Kirschling, J.M. (2008, October). *Changes in nursing - they are here to stay*. Invited presentation at the Danville Study Club, Danville, KY
- Kirschling, J.M. (2008, December). *Focus on the nursing workforce: Today's issues and challenges*. University of Kentucky Nursing Grand Rounds, Lexington, KY
- Kirschling, J.M. (2011, March). Induction speaker, *Leadership*. Kappa Theta Chapter, Western Kentucky University, Bowling Green, KY
- Adkisson, D., Kay, S., Kirschling, J., & Schuster, S. (2011, April). Panel participant, UK College of Communications & Information Studies, *What health literacy is and how to improve it - health and well-being made simple*. Lexington, KY
- Aschenbrener, C., Kirschling, J.M., Maine, L., Robinson, M.J., & Rouse, L. (2012, November). *Interprofessional education panel*. University of Missouri Kansas City Health Science Schools, Kansas City, MO
- Kirschling, J.M. (2012, November). *National issues related to nursing education and practice*. University of Missouri Kansas City School of Nursing, Kansas City, MO
- Baquet, C.R., Barth, R.P., Haddon, P.A., Kirschling, J.M., Mitchem, S.Y., Tinanoff, N., & Tucker-Mann, J. (2013, March). Panelist *Henrietta Lacks' Legacy - The Dignity of Difference in Professional Practice*. The 2nd Biennial Henrietta Lacks Symposium, University of Maryland Baltimore, Baltimore, MD
- Kirschling, J.M. (2013, September). *Team-Based Health Care: Are Today's Health Care Professions Students Going to be the Tipping Point?* President's Symposium, Interprofessional Education. Baltimore, MD.
- Kirschling, J.M. (2013, December). *Address to the Graduates*. The Johns Hopkins University School of Nursing Academic Degree Completion Ceremony. Baltimore, MD.

RESEARCH ACTIVITIES

- Kirschling, J.M., Evans, S.A., & Presslor, A.R. *A milieu study of a psychiatric in-patient unit*. Indiana University School of Nursing, December 1981
- Kirschling, J.M. *An investigation of support and the recently widowed from cancer*. Master's study, Indiana University School of Nursing, July 1982
- McBride, A.B., & Kirschling, J.M. *How psychiatric nursing students' perceptions of their competencies change over the course of graduate work*. Indiana University School of Nursing, 1980-1984
- Kirschling, J.M., & Pierce, P. *Salient beliefs - providing nursing care to the terminally ill*. Indiana University School of Nursing, 1982-1983
- Kirschling, J.M. *An investigation of support utilized by adults who are experiencing a terminal illness and/or death of a significant other and A group experience for the recently bereaved*. Doctoral Internship, St. Vincent Hospice Home Care and Bereavement Programs, Summer 1983
- Kirschling, J.M. *Social support and coping in the recently widowed*. Dissertation, May 1984
- Kirschling, J.M. *Providing care for a terminally ill relative: An inductive approach*. Biomedical Research Support Grant, Oregon Health Sciences University, funded April 1986, approximately \$3,000
- Kirschling, J.M. *Evaluation of measures of well-being for family caregivers to terminally ill relatives*. Component Study in Research Emphasis Grant, Center for Nursing Research, funded September 1986-August 1987, approximately \$12,000
- Kirschling, J.M. *Refinement of measures for family caregivers*. Oregon Health Sciences University, Foundation Award, funded October 1988-June 1989, approximately \$2,500
- Kirschling, J.M., Gilliss, C., et al. *Family nursing survey*. Research conducted as part of the Oregon Health Sciences University Department of Family Nursing Continuing Education Project, 1987-1991
- Kirschling, J.M., Fields, J., Imle, M., Mowery, M., Tanner, C., Perrin, N., & Stewart, B.J. *Evaluation of teaching effectiveness instrument*. Oregon Health Sciences University School of Nursing, 1989-1992

Kirschling, J.M., Luce, L., et al. *State wide data set on hospice deaths: Oregon Hospice Association*, 1988-1995 funded by Oregon Hospice Association, financial support for graduate assistant

Kirschling, J.M., Luce, L., et al. *Annual hospice program data*. Oregon Hospice Association, 1991-1995 funded by Oregon Hospice Association, financial support for graduate assistant

Raudonis, B.M., & Kirschling, J.M. *Family caregivers perspectives of hospice nursing care*. Oregon Health Sciences University School of Nursing, 1992-1993

Dostal, M., & Kirschling, J.M. *The role of nurse practitioners in hospice care*, Oregon Health Sciences University School of Nursing, 1992-1993

Consultant on Bereavement Issues to Archbold, P.G., Stewart, B.J., Greenlick, M.K., Valanis, B.V., & Harvath, T.A., *Evaluation of a Caregiver Support Program*, funded by National Center for Nursing Research, #RO1 NR02088, 1990-1993

Kirschling, J.M. *Maine's active nursing workforce*, 2001-2006, funded \$60,000, RWJ Executive Nurse Fellows Project

Kirschling, J.M. *Maine's nursing educational programs: Descriptive information*, 2001-2006

Kirschling, J.M. *Nursing Summit: Prioritizing strategies*, 2002

FUNDED GRANT ACTIVITIES

Archbold, P.G. (Program Director). *Research training: Nursing care of older people*. NINR 1 T32 NR07048, 1988-1994, 1995-2000. Role: Core Faculty Member (5%). Grant supported pre- and post-doctoral training program in gerontological nursing, Oregon Health Sciences University, 1992 \$136,191

Tilden, V. (Program Director). *Families in health, illness and transition*. NINR 1 T32 NR07061, 1990-1995, 1995-2000. Role: Program Faculty (2%). Grant supported pre- and post-doctoral training in the area of nursing health care delivery to families in health, illness and transition, Oregon Health Sciences University, 1992 \$171,68

Katz, P. (Project Director). *The expansion of home care in to academic medicine*. Funded by John A. Hartford Foundation, Nurse Liaison to Project, 1997-1998

The Woodhull study on nursing and the media. Funded by Sigma Theta Tau International. Course Faculty, Advisory Committee Member, and Co-author Final Report with Bill Watson, 1997, approximately \$6,000

Kirschling, J.M. (Project Director). *Professional nurse traineeship*, funded by Division of Nursing, University of Rochester School of Nursing, 1997-1998 \$102,695, 1998-1999 \$93,580

Botelho, R.J. (Project Director). *Community-based quality improvement education: An interdisciplinary approach to motivating behavior change*. Health Resource and Services Administration, Institute for Healthcare Improvement. Local Improvement Team Faculty Member, 1997-1999

Corless, I.B. (Project Director). *Graduate education in palliative care initiative*. Representative of University of Rochester at September 11, 1998 grant writing session (funded by the Robert Wood Johnson Foundation)

Kirschling, J.M. Rewrote Department of Health and Human Services Grant Basic Nurse Education and Practice Program, Satellite Expansion of USM's Generic BSN Program. M. Rodgers (Project Director). Approved and funded 2002-2005, \$796,389

Kirschling, J.M. Building Infectious Disease Surveillance Capacity. Cooperative Agreement with Department of Human Services, Maine Bureau of Health, 2002-2004 \$1,134,688; 2004-2005 \$849,289; 2005-2006 \$557,912

Kirschling, J.M. Maine Nursing Summit. Maine Health Access Foundation, 2004 \$2,500 and 2005 \$2,000

Kirschling, J.M. Federal Earmark for Renovation to Masterton Hall to Enhance Use of Simulation in Nursing Program. HRSA Health Care and Other Facilities Awards, 2005-2010 \$245,516

Kirschling, J.M. Federal Earmark for Nursing Building Student Space Fit-up. HRSA Health Care and Other Facilities Awards, Phase I, 2009-2012 \$1,883,970 and Phase II, 2010-2012 \$1,287,000

Kirschling, J.M., Bauman, C., Baker, C., Dees, K., Hill, K., Mainous, R., Page, C., Prevost, S., Stefaniak, K. Supporting Transition to Practice in Rural Kentucky. Robert Wood Johnson Foundation Executive Nurse Fellows Alumni Association (University of California San Francisco). 2010-2012 \$10,000

AWARDS AND HONORS

Who's Who is American Universities and Colleges, Viterbo College, 1980
Admitted to membership in Sigma Theta Tau, Alpha Chapter, Spring 1982
Awarded National Institute Mental Health traineeship (MH 15348-05). Indiana University School of Nursing, August 1980-June 1983
Who's Who Among Students in American Universities and Colleges, Indiana University for work at the Master's level, 1982
Admitted to Phi Lambda Theta, Iota Chapter, Spring 1983
Awarded Indiana University School of Nursing Alumni Association Student Research Award, 1983-1984
Awarded Nurses' Scholarship and Fellowship Award for doctoral study, 1981-1984
Awarded Lucy C. Perry Memorial Scholarship for doctoral study, 1983-1984
Who's Who Among Students in American University and Colleges, Indiana University, for work at the Doctoral level, 1983
Admitted as an Associate Member in Sigma Xi (Scientific Research Society), Indiana University Medical Center Chapter, 1984
Faculty Marshall, Oregon Health Sciences University School of Nursing, 1988, selected by Graduate Students
Outstanding Alumni Award for Education, Viterbo College, 1991
Recipient of the Beth Wessinger Award, Oregon Hospice Association, 1995
Forty under Forty, The Business Journal, Portland, OR, 1996
Indiana University School of Nursing Alumni Association, Distinguished Alumna Award, 1996
Indiana University School of Nursing, Top 100 Alumni Legacy Leader, 2014
Kappa Zeta Chapter-at-Large, Sigma Theta Tau International Honor Society of Nursing, Recognition Award, for Devotion and Leadership in Nursing, 2003
OMNE Leadership Achievement Award, OMNE Nursing Leaders of Maine, 2003
Hospice and Palliative Nurses Association, 2006 HPNA Leading the Way Award, awarded to Past Presidents
The Agnes E. Flaherty Leadership Award, ANA-Maine, 2006
American Academy of Nursing, inducted 2009
Kentucky Nurses Association co-recipient, with Elizabeth Partin, 2010 Nurse of the Year Award
Inducted Phi Kappa Phi (PKP), 2011
Kentucky Nurse Practitioner Advocate of the Year, The American Academy of Nurse Practitioners State Award for Excellence, 2011
Hospice and Palliative Nurses Association 2013 Leading the Way Award
Lucie S. Kelly Mentor Award from Sigma Theta Tau International Society of Nursing, 2012.

PROFESSIONAL ACTIVITIES AND PROFESSIONAL SERVICE

Consultant Activities

- Consultant, The Heritage Place Senior Companions, Indianapolis, IN, focused on the psychosocial needs of the elderly, Spring 1982
- Consultant, Neighborhood House, Portland, OR, needs assessment on day care for the frail elderly, Fall 1984
- Nurse Researcher Consultant, Veterans Medical Center Portland Division, Portland, OR, development of a program of research for the Nursing Home Care Unit in Vancouver, WA, July 1985-November 1985
- Consultant, Clackamas Health Care Consortium Hospice Program, Milwaukie, OR, development of policy and procedure manual, September 1984-January 1985
- Consultant, Senior Health Plus Program Rockwood Medical Center, Portland, OR, focused on effective communication within the agency and between the nurse practitioners; strategies for evaluation of the nurse practitioners' practice, and psychosocial aspects of aging, March 1984-

March 1986

- Consultant, Friends of the Elderly Project Catholic Family Service, Portland, OR, focused on effective communication within the agency and between the nurse coordinators, and strategies for evaluation of the nurse coordinators' practice, December 1985-September 1986
- Consultant, Nursing Home Care Unit Veterans Administration Medical Center, Menlo Park Division, Palo Alto, CA, focused on research strategies for the hospice bereavement program. Presented in-service to hospice staff on family caregiving of terminally ill adults, September 21, 1987
- Faculty Consultant, Oregon Health Sciences University, University Hospital and Clinics, Portland, OR, consultation on refinement of the hospital's bereavement program 1991
- Consultant, Legacy Visiting Nurse Association, Portland, OR, 4 hours consultation per week to psychiatric home care nurses on case management and care plan development, 1992-1995
- Consultant, Kaiser Center for Health Research, Portland, OR, interfacing with bereaved older research subjects, November 3, 1993 and December 1, 1993
- Consultant, Adelphi University School of Nursing, Garden City, NY, programmatic approval and faculty development/mix, April 21, 1998
- Consultant, University of Kentucky School of Nursing, Lexington, KY, nursing degree options for individuals with a bachelor's degree in another discipline, March 5, 2002
- Consultant, Long Island University, New York, NY, Interprofessional Education with Dr. Susan Meyer and Dr. Kevin Lyons, January 10, 2012
- Consultant, Northern Kentucky University, College of Health Sciences, Highland Heights, KY, Interprofessional Education, DNP Education, and APRN Consensus Model, March 17, 2012

Community Service Activities

- Fayette County Cancer Society Leadership Council, Lexington, KY, 2009-2010
- Lexington-Fayette Urban County Government, Work Team community visioning process Destination 2040-Choosing Lexington's Future, April 28-29, 2008
- Androscoggin Home Care & Hospice Board of Directors, Lewiston, ME, member 2005-2006; Professional Advisory Committee, member 2005-2006
- Bereavement Network, Northwest Oregon and Southwest Washington, Convener 1986-1992. Workshop Planner, "Grief: Realities and resources". Sponsored by the Bereavement Network and Hospice House, February 1991; Steering Committee Chairperson, Oregon Chapter of the Association for Death Education and Counseling 1992-1993 and Past President 1993-1995
- Catholic Family Service Portland, OR, member Board of Directors 1985-1989; Board representative to the Friends of the Elderly Project 1985-1986; Chairperson Search Committee for an Executive Director 1987; Member Personnel Committee 1987-1988; First Vice-President Board of Directors 1988-1989; Chairperson, Program Committee 1988-1989
- Clackamas Health Care Consortium Hospice Program, Milwaukie, OR, Volunteer Bereavement Coordinator 1985-1987
- Committee to Advise the Office of Public Health Emergency Preparedness, State of Maine, Department of Human Services, Bureau of Health, member 2002-2006
- Health Care Workforce Leadership Council, Maine State Legislature, member 2003-2004
- HIV Mental Health Coordinating Group, Portland, OR, member 1994
- Hope Center Board of Directors, Lexington, KY, member 2006-2012
- Maine Center for Public Health Board of Directors, Augusta, ME, member 2001-2006; Finance and Fundraising Committees, member 2003-2006; Search Committee for President, 2004-2005
- Maine Health's Women's Wellness Day Planning Committee, Portland, ME, member 2000-2004
- Maine Hospice Council Board of Directors, Augusta, ME, member 2000-2004; Nominating Committee, member 2004; Human Resources Committee, chairperson 2003-2004
- Maine Hospital Association, Maine Health Care Workforce Tracking Committee, Augusta, ME, Co-convener with staff 2001-2002
- Maine Health Nurse Executive Council, Portland, ME, member 2003-2006
- Maine Medical Center Board of Directors, Portland, ME, member 2003-2006; Joint Conference Committee, member 2000-2003 (non-Board member); Education and Research Committee, member

- 2003-2006; Performance Improvement Committee, member 2003-2006
- Maine Medical Center Working Group on Palliative Care, Portland, ME, member 2000-2001
- Maine Quality Forum Advisory Council Provider Group, Augusta, ME, appointed member 2004-2006
- Maine Statewide AHEC Advisory Committee, member 2002
- Maine Turning Point Project, Augusta, ME, member Steering Committee 1999-2001
- Morehead State University, ADN/Advisory Committee, Morehead, KY, member 2007-2012
- Oregon Health Decisions and Oregon Hospice Association, Steering Committee: Request for physician-assisted death: How will you vote? Community meetings to identify Oregonians' values about end-of-life decisions, member 1993-1994
- Oregon Medical Association, End of Life Task Force, Portland, OR, member 1994
- Partnership for Healthy Aging Board of Directors, Portland, ME, member 2001-2003
- Southern Maine Community College: Respiratory Therapy Program Advisory Committee, member 2000-2006; Nursing Program Advisory Committee, member 2004-2006
- St. Vincent Home Care Hospice Program, Indianapolis, IN, home care and bereavement volunteer 1981-1982
- Women Leading Kentucky Board of Directors, Lexington, KY, member 2007-2009; Advisory Committee 2009-2012

Current Professional Service Activities

- Serve as evaluator for American Nurses Association Leadership Institute, 2013-present
- Serve as reviewer for:
 - *American Journal of Hospice and Palliative Medicine (renamed 2004)*, previously *American Journal of Hospice and Palliative Care*, 1985-present
 - *Issues in Mental Health Nursing*, 1988-present
 - *Advances in Nursing Science*, 1989-present
 - *Journal of Professional Nursing*, 1994-present
 - *Home Health Care Management & Practice*, 2011-present
 - *Research in Nursing and Health*, 2009-present
- Serve as member, Association of American Medical Colleges Advisory Panel on Medical Information, 2013-present.

Previous Professional Service Activities

- Appraiser of Research Applications Ontario Ministry of Health 1989-1995
- Peer Reviewer, Department of Health and Human Services, Division of Nursing, Advanced Nurse Education Program, February 1991
- University of Rochester School of Nursing representative, Council of Deans of Nursing Senior Colleges and Universities in New York State, 1997-1999
- Served as reviewer for:
 - *Families, Systems & Health*
 - *Home Healthcare Nurse*
 - *Journal of Hospice and Palliative Nursing*; member of Editorial Board 2000-2001
 - *Journal of Nursing Education*, 1991-2012
 - Co-editor with Karen Morin, special issue on Leadership in Nursing Education, Fall 2004
 - Co-editor with Alexia Green, special issue on Nursing Faculty Shortage, Winter 2007
 - Award Selection Committee, JNE Top Teaching Tools, 2009, 2010, and 2011
 - *Journal of Psychosocial Nursing*
 - *Journal of the American Psychiatric Nurses Association*, November 2007 invited reviewer manuscript on end-of-life care and psychiatric nurses
 - *Nursing and Health Care Perspective*
 - *Progress in Palliative Care An International Journal*
 - *The Hospice Journal*
 - Co-Editor with Marcia Lattanzi-Litch and Stephen Fleming, Special Issue on Bereavement Care: A New Look at Hospice and Community Based Services, 5(2), 1989

- Editor, Special Issue on Family Based Palliative Care, *6(2)*, 1990 and *10(1)*, 1995
 - *Western Journal of Nursing Research*
- Invited participant, VHA New England Nurse Executive Meeting, May 2, 2001, to comment on a white paper entitled "Mitigating the trouble ahead: Assuring a qualified and sufficient workforce that can provide high quality and cost effective patient care services", Manchester, NH
- Reviewed book proposal for F.A. Davis Company, Philadelphia, PA, *Nursing at the End-of-Life*, author J. Zerwekh, June 1, 2002; reviewed three chapters - Strategies to Stay Healthy, Grief and Mourning, and Cross Cultural Competency at the End of Life, November 9, 2003
- Invited participant, Robert Wood Johnson Promoting Excellence in End-of-Life Care, Advanced Practice Nursing, July 9-10, 2001, Philadelphia, PA; member of white paper writing group
- Member of the Advisory Committee and faculty for the Leadership Initiative for Nursing Education (LINE), University of California San Francisco Center for the Health Professions, funded by the Helene Fuld Health Trust. The Leadership Institute held August 9-13, 2001 in Freeport, ME
- Reviewed book proposal for F.A. Davis Company, Philadelphia, PA, *Quick Reference to Palliative, Terminal and Hospice Care*, author C. Ayers, May 23, 2003
- Coordinated and filmed, in collaboration with the Maine State Attorney General's Office Healthcare Crimes Unit and the Maine State Board of Nursing, 70 minute video on Drug Diversion in Health Care for use in Maine's 13 nursing programs, 2005
- Convener, Maine Nursing Summit, December 2001, December 2002, May 2004, and co-convener May 2005 and April 2006; Augusta, ME
- Member Lexington-Fayette County Health Department School Health Model Work Group, 2007
- Abstract reviewer, 4th NETNAP International Nursing Education Conference (2012), October 2011
- External reviewer, State University of New York Upstate, DNP Proposal, October 2011

MEMBERSHIPS IN PROFESSIONAL ORGANIZATIONS/SOCIETIES AND SERVICE

Current

- American Association of Colleges of Nursing
 - Member, Board of Directors, 2003-2007, 2007-2010 (Secretary), 2010-2012 (President-elect), 2012-2014 (President)
 - Chairperson, Government Affairs Committee, 2003-2007
 - Chairperson, Search Committee Chief Executive Officer, 2013-2014
 - Member, RAND Project Advisory Committee
 - Member, Nominating Committee 204-present
 - Member, Planning Committee Doctoral Conference 1999 and 2000
 - Member, Task Force to Revise Quality Indicators for Doctoral Education 1999-2001
 - Member, Program Committee 2001-2003
 - Chairperson, Planning Committee Master's Conference 2001-2003
- Reviewer, AACN and The John A. Hartford Foundation, Creating Careers in Geriatric Advanced Practice Nursing, August 2004
- Representative to American Nurses Association Congress on Nursing Practice and Economics, 2006-2010
- Representative to American Nurses Association Organizational Affiliates Meeting, July 2010, April 2012-March 2014
- Nursing representative, September 27, 2006 Health Professions and Nursing Education Coalition Hill Day
- Representative to Department of Veterans Affairs, Health Services Research and Development Service, Health Professions Education Research Advisory Committee, January 11, 2008
 - Reviewed concept papers in response to Request for Proposals: Research on Educational Interventions for Health Professionals, August 5, 2008
 - Reviewed grants focused on Research on Educational Interventions for Health Professions, November 17-18, 2008

- Representative to the American Nurses Association House of Delegates, 2008 and 2010
 - Member, Liaison Committee for AACN with the Veteran's Health Administration of the U.S. Department of Veterans Affairs, 2009-2012; co-chairperson, 2012-2014
 - Representative to the Tri Council, 2010-2014
 - Representative to GANES Global Alliance for Leadership in Nursing Education and Science, 2010-present
 - Representative to Expert Panel which developed *Core Competencies for Interprofessional Collaborative Practice*, sponsored by the Interprofessional Education Collaborative, released May 2011, available at: <http://www.aacn.nche.edu/education-resources/IPECReport.pdf>
 - Representative to the Oncology Nurses Association Leadership Forum, April 11, 2011
 - Representative to the 2013 National Nursing Research Roundtable *The Science of Chronic Illness Self-Management* March 7-8, 2013
- American Association of Nurse Executives
 - Kentucky Organization of Nurse Leaders, member, 2006-2012
- American Nurses Association
 - Member, Kentucky Nurses Association, 2006-2012
- Hospice and Palliative Nurses Association
 - Board of Directors, 2000-2005; Vice-president 2001; President 2002-2003
 - Member, Planning and Resource Committee, 2005
 - Board liaison, Public Policy Association Committee, 2005
 - Member, Education and Research Subcommittee, 2000-2003
 - Member, Research Subcommittee, 2001-2003
 - Member, Professional Relations Subcommittee, 2000, 2002-2004
 - Member, Governance Committee, 2001-2003
 - Member, Finance Committee, 2002-2004
 - Member, Continuing Education Advisory Committee 1999-2002; Chairperson 2002
 - Representative to the American Academy of Hospice and Palliative Medicine's Annual Assembly Steering Committee, 2000-2002
 - HPNA Board Representative to Coalition for Hospice and Palliative Care, 2002-2003
 - HPNA Board Representative to Alliance for Excellence in Hospice and Palliative Nursing, 2002-2003
 - Co-Chairperson, Transitions Task Force 2004
- Maryland Action Coalition, Co-Convener with Dr. Patricia Travis, 2013-present
- Sigma Theta Tau International
 - Alpha Chapter 1982-1984
 - Beta Psi Chapter 1984-1997
 - Co-Chairperson Research Awards Committee 1985-1986; Chairperson, Research Awards Committee 1986-1987; Member, Membership and Eligibility Committee 1984-1985, 1985-1986; President-elect 1987-1988; Acting Chairperson, Membership and Eligibility Committee, January 1988-March 1988; President 1988-1989; Past-President and Newsletter Editor 1989-1990
 - Epsilon Xi Chapter, 1997-1999
 - Kappa Zeta Chapter-at-Large 1999-2006
 - Chairperson, Bylaws Committee 2003-2006
 - Delta Psi Chapter, 2006-2012
 - Pi Chapter, 2013-present
 - Collateral Reviewer, Sigma Theta Tau Research Grants Program 1988-1991
 - Member, Region I Dissertation Award Judging Committee 1992
 - Abstract Reviewer, International Research Congress in Madrid Spain (1993) 1992
 - Member, Nominations Committee 1998-1999
 - Listed in 1999 Media Guide to Health Care Experts
 - Member, Program Committee 2000-2003
 - Chairperson, Melanie C. Dreher Dean's Award Subcommittee 2000-2002, included serving on judging committee
 - Member, Distinguished Lecturer Subcommittee 2000-2002, Chairperson, 2002

- Organizer, Dean's Panel for Biennial Convention 2000-2002
- Abstract Reviewer for 36th Biennial Convention Clinical Sessions 2001
- Member, Special Invited Sessions Subcommittee, 2002-2003
- Member, Planning Committee for development of "America in Grief Nurses Responding to Tragedy", post 9/11 and "Nurses on Alert" website: www.nursingsociety.org/new/grief.html, 2001-2004
- Nursing Knowledge International, member Board of Directors, 2006-2007
- International Advisory Council of Chief Nursing Officers and Deans, co-chair October 2007-2009
- Chair International Awards Judging Committee, Practice/Academe Innovative Collaboration Award, 2009 and 2011
- Virginia Henderson Fellow and Billye Brown Fellow
- Southern Association of Colleges and Schools (SACS) Commission on Colleges
 - Off-site Reaffirmation Committee, November 2009
 - On-site Substantive Change Review Committee, August 2011 and October 2012

Previous Membership in Professional Organizations/Societies and Service

- ANA Maine, 2001-2006
- Hospice and Palliative Nurses Foundation; Member, Board of Directors, 2004-2009; Chairperson 2005-2006; Chairperson, Student Scholarship Committee, 2004; HPNF Board Representative to Alliance for Excellence in Hospice and Palliative Nursing, 2005-2009, Chairperson 2006; Hospice and Palliative Nurses Association/Hospice and Palliative Nurses Foundation Leadership Institute Planning Committee, 2010-2012
- Kentucky Association of Higher Degree Nursing Programs, Chairperson Fall 2006-Summer 2009
- Kentucky Nursing Capacity Consortium, Convener 2008-2012 (Kentucky Action Coalition)
- Maine State Nurses Association; Member, Commission on Nursing Education, 1999-2000
- National Board for Certification of Hospice and Palliative Nurses; Member, National Board for Certification of Hospice Nurses, Role Delineation Advisory Committee 1997-1998; Ex-officio member, Board of Directors, 2002-2003
- National Hospice and Palliative Care Organization, Professional Member of National Council of Hospice Professionals; Reviewer, Educational Reviews 1996-1997; Research Committee Member 1996-2002 - Research Awards Subcommittee Chairperson 1998-2002, Web Development Subcommittee Chairperson 2000-2002, and Ethics Committee Member 1997-2002
- National League for Nursing; NLN Representative to NLN and Western Institute of Nursing (WIN) Meeting to Discuss New Organization Relationships, October 1996, San Francisco, CA
- New York State Hospice Association
- New York State Nurse Association
- OMNE, Nursing Leaders of Maine; Chairperson Bylaws Committee, Member of Executive Committee, 2001-2006; Member Task Force to make recommendations to Maine Legislature in 2002 regarding nursing shortage; Member Task Force to make recommendations to Maine Legislature in 2003 regarding nursing educational programs; Member Task Force to make recommendations to Maine Legislature in 2003 regarding nursing education program in Maine
- Oregon Nurses Association; Member, Cabinet on Nursing Research and Practice 1987-1988
- Oregon Chapter Associate for Death Education and Counseling
- Oregon Hospice Association; Member, Data Collection Committee 1987-1999; Member, Education Committee 1990-1991; Member, Ethics Task Force 1993-1994
- Sigma Theta Tau International Foundation; Member, Board of Directors, 2001-2005; Chairperson, 2003-2005
- Western Society for Research in Nursing and Western Institute for Nursing; WSRN Special Interest Group: Health Behavior Research. Developed and convened a Symposium for the 22nd Annual Communicating Nursing Research Conference, San Diego, CA (May 1989); Western Institute of Nursing, Oregon Health Sciences University School of Nursing Representative, October 1990-June 1991

TEACHING ACTIVITIES

Course Assignments

Oregon Health Sciences University School of Nursing

- Gerontological Nursing, elective baccalaureate students 1984-1994
- Nursing with Aged and Intergenerational Families, elective baccalaureate students 1984-1985, 1989-1990
- Nursing Science VII (Nursing Research), baccalaureate students 1993-1995
- Master's Research Project: Proposal Development, master's students 1995-1996
- Health Protection and Promotion Strategies, Ph.D. students 1986-1987
- Measurement in Nursing, master's students 1989-1990
- Research Design and Utilization in Nursing (Family Specialty Section), master's students 1986-1987
- Families and Health Status, master's students 1992-1993
- Impact of Chronic Illness in Elderly and their Families, master's students 1990-1991
- Family Supports of the Elderly, master's students 1984-1990, 1991-1992
- Issues in Research Related to Nursing Care of Older Persons, Ph.D. students 1989-1996
- Special Problems in the Nursing Care of Older People: Bereavement, Ph.D. students 1992-1993
- Nursing Management of Common Geriatric Problems, master's and Ph.D. students 1993-1994
- Research Critique, Ph.D. students 1995-1996

University of Rochester School of Nursing

- Nursing in the Media, elective, Fall 1997 with Junior Bridge and Bill Watson
- Hospice and Palliative Care, elective, Spring 1998 with Sheila Ryan
- Nursing 2002: Care of Individuals, Families, and Community (psychiatric nursing theory), baccalaureate students, Fall 1998
- Nursing 2001: Nursing Care of Individuals and Families in the Community (psychiatric nursing theory), baccalaureate students, Spring 1998

University of Southern Maine College of Nursing and Health Professions

- End-of-life partnership course, Fall 2001 and Spring 2002
- NUR470 Leadership, Management, and Ethics, Fall and Spring semesters, beginning in 2003 through 2006 with Maggie Fournier

University of Kentucky College of Nursing

- HSM241 Health and Medical Care Delivery Systems, Fall 2007

STUDENT RESEARCH

Master's Research Projects

Advisor - Oregon Health Sciences University

- Yea-Ing Lotus Shyu, *An Investigation of Attribution Patterns and Self-Esteem: An Elderly Sample*, 1988
- Therese Rasch, *Role Strain and Perceived Needs: A Sample of Elderly Spouse Caregivers*, 1989
- Helen Elizabeth Harris, *Coping Strategies of Rural Widows: A Partial Replication*, 1989
- Ching-Tzu Yang, *Analysis of Secondary Data: Hospice Family Caregivers*, 1991

- John Pladel, *Use of Ritual and Ceremony in Persons with AIDS*, 1995

Reader - Oregon Health Sciences University

- Maggie Donius, *Gender Differences in Caregiving Role Strain Among Spouse Caregivers to Frail Older Persons*, 1985
- Sherry Chennell, *Beliefs of Preventability and Unpreventability regarding Circumstances of Death in a Disaster Bereaved Sample*, 1986
- Judith E. Alleman, *A Survey of Information Communicated to Adult Foster Care Providers in Relationship to Newly Admitted Residents*, 1987
- Sharon M. Beall, *Vulnerability and Risk Factors Associated with Self-Neglect of the Elderly*, 1987
- Georgene Siemsen, *Measuring Family Functioning in Older Families using the Feetham Family Functioning Survey*, 1989
- Margaret C. Hale, *The Experience of Coping with Huntington Disease: A Descriptive Study*, 1989
- Karen A. Suchowski, *Requesting for Anatomical Donation in Hospitals: A Descriptive Study*, 1989
- Mary L. Hazard, *Hospice Nursing Care: Persons with End-State Dementia and their Caregivers*, 1997
- Stacey Romney, *An Exploratory Study of the use of Physical and Psychosocial Techniques to Relieve Terminal Cancer Pain*, 1997

Dissertations

Chairperson - Oregon Health Sciences University

- Laura Rodgers, *The Experience of Bereavement among Older Black Widows: A Phenomenological Study*, 1995
- Mary Waldo, *Caregivers' Experience: Pain and Elders with Alzheimer's* (NINR F31, 8/1994, co-sponsor), 1996, Co-chairperson Beverly Hoeffler
- Shizue Suzuki, *Grief Experiences of Japanese Widows and Widowers*, 1997

Reader - Oregon Health Sciences University

- Peg Wagner Wros, *Behind the Curtain: Nursing Care of Dying Patients*, 1993
- Iku Inoue, *Developing the Japanese Family Caregiving Inventory*, 1995
- Rodger Galyen, *Significant Emotional Relationships between Nurses and Clients*, 1997
- Deborah Messecar, *Environmental Modification Strategies used by Caregivers* (NINR F31, 4/1994 funded, co-sponsor), 1977

Post-Doctoral and Visiting Scholar Sponsorship and Additional Student Research Committees

- Williams W. Davis, *Caregiver Characteristics, Situation Factors, Coping Style, and Personal Adjustment of Hospice Nurses*, dissertation committee member, Western Conservative Baptist Seminary, Portland, OR 1990
- Barbara Raudonis, RN, Ph.D. Post-Doctoral Fellow, August 1991-July 1993, Oregon Health Sciences University
- Sister You-Ja Ro, RN, Ph.D. Visiting Scholar from The Catholic University of Korea, August 1998-January 1999, University of Rochester School of Nursing

COMMITTEE MEMBERSHIPS: UNIVERSITY AND SCHOOL/COLLEGE

Oregon Health Sciences University

- School of Nursing (SON) representative, Senate Subcommittee - formulated recommendations on social issues considered by the Senate 1985-1986
- University Affirmative Action Committee, Member 1986-1995
 - Vice Chairperson 1990-1991
 - Chairperson 1991-1995
 - Chairperson, Budget Subcommittee 1994-1995

- Faculty Senate, SON Representative 1992-1995
 - Faculty Welfare Subcommittee, Member 1992-1993, Chairperson 1993-1994
 - Bylaws Subcommittee, Member 1992-1995
 - Elections Subcommittee, Member 1994-1995
- Facilitated development of proposal-Interdisciplinary Primary Care Education and Practice for Oregon. The Robert Wood Johnson Foundation, Partnerships for Training, April 1995. Brought together nurse practitioner, certified nurse midwifery, and physician assistant faculty to develop a proposal, received site visit, not funded
- Statewide Area Health Education Center, SON representative 1995-1996
- Facilitated development of proposal in response to W.K. Kellogg Foundation Initiative: Community Partnerships-Graduate Medical and Nursing Education, June 1995, on behalf of the primary care and nurse midwifery faculty in the Schools of Nursing and Medicine, selected for Phase I funding
- Regional Education and Services Council, Member 1995-1996
 - Subcommittee for Coordination of Primary Care Rotations, Member 1995-1996

School of Nursing

- SON/Veterans Administration Joint Venture Project, Department of Family Nursing representative 1985-1986
 - Gerontological Planning Section and Research Planning Section, Member 1985-1986
- Gerontology/Long-term Care Council, Member 1985-1993, Co-convenor 1993-1994
 - Curriculum/Program Development Work Group, Convener 1987-1988
 - Principal Investigator on Geriatric Nurse Practitioner Training Grant, submitted to Division of Nursing, April 1990, approved - not funded
 - Convener, group to develop a Gerontology Clinical Specialists Master's Program 1989-1990
- SON/Division of Nursing Committee, Department of Family Nursing representative 1985-1986
- Focal Area I Health Protection and Promotion, Member 1985-1989, Convener 1987-1989
- Committee to develop Institutional NRSA Grant, Patricia Archbold, Program Director, National Center for Nursing Research, October 1987
- External Affairs Committee, Member 1986-1987
- SON/VA Nursing Council, Member 1987-1988
 - System-wide Joint Task Force on Primary Care Issues, Member 1987-1988
- External Affairs Committee, Member 1988-1990
- Faculty Affairs Committee, Member 1987-1990, Chairperson 1989-1990
 - Student Evaluation of Faculty Task Force, 1990
 - SON Executive Committee, Member 1988-1989, 1992-1993
- Ph.D. Student Oral Exam Committees
 - Chairperson: Marie Napolitano (March 1988), James Pittman (March 1988), Renee Hoeksel (October 1988), Alyce Schultz (October 1988), Patricia Butterfield (November 1989), and Rod Galyen (June 1992)
 - Member: Laura Rodgers (June 1993)
- Ph.D. Written Comprehensive Committee, Member Summer 1988, Fall 1992, Winter 1993; Chairperson Winter 1988, Spring 1993
- Focal Area V Gerontological Nursing, Convener 1989-1990
- Advisory Board of the Benedictine Institute for Long Term Care, Department of Family Nursing representative 1989-1993
 - CE for RNs in Oregon Long-Term Care Facilities, Funded by Division of Nursing, Member Advisory Committee 1992-1993
- Lohman's Faculty Planning Committee, Member 1990-1991
- Graduate Council Ph.D. Admissions Subcommittee, Member 1991-1994
- Ballot Measure 5 Program Reduction Task Force, Chairperson January 1993
- Committee on Committees, Chairperson 1992-1993
- Statewide Nursing System: Governance Task Force, Convener 1992-1993
- Statewide Nursing System: Ballot, Convener 1992-1993
- Task Force on Cultural Diversity, Member 1993-1996, Co-convenor 1993-1995

- Mid-Coastal/Willamette Valley RN/BS TQM Program Task Force, Member 1993-1994
- NLN Accreditation - Structure and Governance Work Group, Member 1994-1995
- EDNET Teaching Evaluation, Member 1994-1995
- Administrative Council, Member 1994-1996
- Transitions Task Force, Member 1994-1996
- Home Care Task Force, Member 1995-1996
- Visions II Task Force, Facilitator 1995-1996
- Small Organizing Group of the Selected Committee on Practice, Member 1995-1996

Administration Nursing Cluster

- Member 1994-1996

Gerontological Nursing Cluster

- Convener 1994-1995

Department of Family Nursing

- Academic Affairs Committee, Member 1984-1986, 1991-1993
- Philosophy and Conceptual Framework Committee, Member 1984-1985
- Special Projects Grant Committee (Family Nursing CE Grant), Member 1984-1985
- Faculty Affairs Committee, Member 1985-1987
- Family Clinician Committee, Member 1985-1987
- Promotion and Tenure Committee, Chairperson 1986-1987, Member 1990-1991
- Advisory Board, Family Nursing CE Grant, Member 1986-1990
- Ad Hoc Student Recruitment Committee, Member 1986-1987
- Governance Workshop Committee, Member Summer 1987
- Committee on Committees, Chairperson 1987-1989
- Acting Coordinator, Aging Family Area 1987-1988
- Advisory Committee, Member 1988-1990
- Recruitment Committee, Member 1989-1990
- Resource Committee, Member 1989-1990

University of Rochester and School of Nursing

- University Council on Graduate Studies, including Steering Committee, November 1996-1999
- Edward G. Miner Library, Advisory Committee, 1998-1999
- School of Nursing Leadership Council 1996-1999
- School of Nursing Curriculum Committee 1996-1999 and Undergraduate, Master's, and Doctoral Subcommittees
- School of Nursing Student Affairs Committee 1996-1999
- School of Nursing Educational Strategic Planning Task Force, Chairperson 1999

University of Southern Maine

- Academic Council, Member 1999-present
 - Chairperson Task Force, Member 1999-2000
 - Director Task Force, Chairperson 2001-2002
 - Liaison to Honors Program to develop the budget for the Honors College 2005
 - School/College Budget and Performance Outcomes Task Force 2005
 - Public Health Planning Committee 2005-2006
- Faculty Senate, ex-officio Member 1999-2006
 - Dean representative to Bylaws Revision Subcommittee 2001-2003
- Advisory Committee Center for the Study and Prevention of Hate Violence, Member 1999-2004
- Chairperson, College of Arts and Sciences Dean's Search Committee 2000-2002

- Chairperson, School of Business Dean's Search Committee 2005-present
- Management Council 2005-2006
- Member, Honorary Degree Committee 2000-2001
- Member, Research and Development Oversight Team 2001-2002
 - Member, Strategic Plan for State Funded R&D Development Committee, 2001-2002
- Chairperson, USM Search Committee for Executive Director of Division of Community and Professional Education, 2004
- Member, Capital Campaign Case Statement Committee 2004
- Member, Earmark Committee 2004-2006
- Member, Summer Session Strategic Planning Committee 2005

College of Nursing and Health Professions (CONHP)

- CONHP Faculty Meetings, Chairperson 1999-2006
- CONHP Leadership Council, Chairperson 1999-2006
- Nursing Program Evaluation Committee, Chairperson 2002-2003

University of Kentucky

- Center for Interprofessional HealthCare Education, Research & Practice, Board of Directors, 2011-2012, Convener Interprofessional HealthCare Practice Committee, 2011-2012
- Deans Council, 2006-2012
- The FUND Board of Directors, For Advancement of Education and Research in the University of Kentucky Medical Center, member 2006-2012, Secretary 2011-2012
- Institutional Effectiveness Committee, member 2008-2010
- UKHealthCare Advisory Board 2006-present, member Executive Committee 2009-2012
- UK HealthCare Medical Staff Executive Committee, member 2006-2010; Medical Staff Operating Subcommittee, A.B. Chandler Hospital, 2010-2012 and Medical Staff Operating Subcommittee, Good Samaritan Hospital, 2010-2012
- UK HealthCare Working Group, Nurse Practitioner and Physician Assistant Providers, 2008-2010
- UK HealthCare Senior Nurse Executives, 2009-2012
- AB Chandler Hospital Nurse Executive Committee, 2008-2012
- President's Commission on Diversity, member 2007-2009
- Review Committee UKHealthCare Enterprise, Corporate Chief Nursing Officer, chair, 2008
- Search Committee for Dean of College of Social Work, co-chair 2007-2008
- United Educators, served on planning committee and co-facilitated with Steve Barker workshop entitled "Good Practice in Tenure Evaluation", February 1, 2007, University of Kentucky served as beta-testing site for workshop
- Five-year review committee Dean Steve Wyatt, 2009-2010
- University Commencement Committee, 2010-2012
- Search Committee for Dean of the College of Medicine, co-chair 2010-2111
- UK HealthCare IT Governance Committee, 2010-2012
- UK CTSA Executive Committee, 2011-2012
- Search Committee for Vice President for Administration and Finance, member 2012
- Advisory Committee, Appointment Associate Provost for Faculty Advancement 2012

University of Maryland, Baltimore and University of Maryland Medical Center

- President's Executive Cabinet, member 2013-present
- University Federal Affairs Working Group, member 2013-present
- University Strategic Plan Executive Implementation Committee, member 2013-present
- University of Maryland Medical Center Diversity Steering Committee, member 2014-present

Updated July 7, 2014

Appendix IID-1
UNIVERSITY OF MARYLAND SCHOOL OF NURSING
FULL-TIME/PART-TIME FACULTY ROSTER Spring 2014

Faculty Member	Rank	Tenure Status	Graduate Degrees	Major	School	Certifications	Teaching Assignment	%FTE
Akintade, Bimbola	Assistant Professor	Non-Tenure Track	MBA MS MS PhD	Business Administration Healthcare Administration Acute Care Nurse Practitioner/Clinical Nurse Specialist Nursing	University of Maryland University College University of Maryland University College University of Maryland Baltimore University of Maryland Baltimore	CRNP - Acute Care CCRN	MS - ACNP/CNS	100
Amos, Veronica	Assistant Professor	Non-Tenure Track	MS MS PhD	Nursing Nurse Anesthesia Policy Sciences	University of Maryland Baltimore University of Maryland Baltimore University of Maryland Baltimore County	CRNA PHCNS - BC	MS - Nurse Anesthesia	100
Antol, Susan M.	Assistant Professor	Non-Tenure Track	MS	Community Health Nursing	University of Maryland Baltimore		BSN elective - Rural Health	100
Bindon, Susan	Assistant Professor	Non-Tenure Track	MS DNP	Nursing Nursing	University of Maryland Baltimore University of Maryland Baltimore		Teaching Institute	100
Bode, Claire	Clinical Instructor	Non-Tenure Track	MS	Family Nurse Practitioner	University of Maryland Baltimore	CRNP - Family	BSN/CNL - OB emphasis	65
Boyce, Meika	Clinical Instructor	Non-Tenure Track	MS	Nursing/Nurse Anesthesia	Drexel University	CRNA	MS - Nurse Anesthesia	40
Brager, Rosemarie	Assistant Professor	Non-Tenure Track	MS PhD	Nursing Public Health	University of Maryland Baltimore Johns Hopkins University	CRNP- Gerontology	MS-ANP/GNP	100

Faculty Member	Rank	Tenure Status	Graduate Degrees	Major	School	Certifications	Teaching Assignment	%FTE
Braid, Susan	Assistant Professor	Non-Tenure Track	MPH MSN DrPH	Public Health Neonatal Nurse Practitioner Public Health	Columbia University University of Pennsylvania Johns Hopkins University	CRNP - Neonatal	N/A	100
Brotemarkle, Rebecca	Clinical Instructor	Non-Tenure Track	MSN/ MBA PhD	Nursing Health Systems/Business Administration Nursing	Johns Hopkins University University of Maryland Baltimore	CCM, ACRN	BSN/CNL Adult Health; MS-Core	100
Brown, Blanche R.	Clinical Instructor	Non-Tenure Track	MSN	Maternal Child Health - PNP	The Catholic University of America	CRNP-Pediatrics	BSN/CNL - Pediatrics; MS - PNP	100
Buckley, Kathleen	Associate Professor	Non-Tenure Track	MA MS PhD	Medical Anthropology Pediatric/Maternal-Child Nursing Medical Anthropology	The Catholic University of America University of Maryland Baltimore The Catholic University of America	IBCLC	BSN/CNL communication; MS Core; DNP	100
Bundy, Elaine	Assistant Professor	Non-Tenure Track	MS DNP	Family Nurse Practitioner Nursing	University of Maryland Baltimore University of Maryland Baltimore	CRNP - Family	MS - FNP	100
Burda, Charon	Clinical Instructor	Non-Tenure Track	MS	Nursing	University of Maryland Baltimore	CRNP-PMH, APRN	BSN-Addictions, MS -PMHNP	100
Busch, Deborah	Assistant Professor	Non-Tenure Track	MSN DNP	Pediatric Nurse Practitioner Nursing	Gwynedd Mercy College of Nursing Chatham University	CRNP - Pediatrics	MS - PNP	100
Canha, Ben	Clinical Instructor	Non-Tenure Track	MS	Addictions Nursing	University of Maryland Baltimore		BSN - Psych	100

Faculty Member	Rank	Tenure Status	Graduate Degrees	Major	School	Certifications	Teaching Assignment	%FTE
Caridha, Arthur	Assistant Professor	Non-Tenure Track	MD PhD BSN	Medicine Medicine Nursing	University of Tirana University of Tirana University of Maryland Baltimore		BSN - Adult Health; MS - Pathopharm	100
Carroll, Mary J.	Clinical Instructor	Non-Tenure Track	MSN PhD	Psychiatric Nursing Edu., Policy, Planning and Admin.	University of Maryland Baltimore University of Maryland College Park	APRN-BC, CS-P	BSN elective - Holistic Health; CNL - Psych	50
Chakravarthy, Ameera	Assistant Professor	Non-Tenure Track	MSN	Family Nurse Practitioner	University of Pennsylvania	CRNP - Family & Acute Care	MS - ACNP/CNS	100
Chen, Ling-Yin	Assistant Professor	Non-Tenure Track	MA PhD	Educational Psychology Educational Psychology	University of Texas at Austin University of Texas at Austin		DNP	100
Clark, Karen	Assistant Professor	Non-Tenure Track	MSN PhD	Advanced Clinical Nursing Nursing	George Mason University George Mason University	CCRN	BSN; MS-Core	100
Costa, Linda	Assistant Professor	Non-Tenure Track	MSN PhD	Medical-Surgical Nursing Nursing	The Catholic University of America The Catholic University of America	NEA-BC	MS - HSLM	100
Daniels, Amy	Clinical Instructor	Non-Tenure Track	MS	Health Sciences and Leadership	University of Maryland Baltimore School of Nursing		Clinical Simulation Lab	100
Davenport, Joan	Assistant Professor	Non-Tenure Track	MSN PhD	Cardiovascular Clinical Nurse Spec. Nursing	Univ. of Alabama in Birmingham University of Maryland Baltimore		BSN/CNL-Adult Health; CNL	100
Davis, Allison	Assistant Professor	Non-Tenure Track	MS PhD	Community & Public Health/ Environmental Health Nursing	University of Maryland Baltimore University of Maryland Baltimore	APRN-BC	CNL -CPH; DNP - theory	100

Faculty Member	Rank	Tenure Status	Graduate Degrees	Major	School	Certifications	Teaching Assignment	%FTE
Davis-Adjami, Mary Lynn	Assistant Professor	Non-Tenure Track	MS MBA PhD	Family Nurse Practitioner Business Pharmacy Administration	University of Southern Indiana Wake Forest University The Ohio State University	CRNP-Family	MS - HSLM	100
Diaconis, Linda	Assistant Professor	Non-Tenure Track	MS PhD	Nursing Service Administration Education Policy, Planning & Admin.	University of Maryland Baltimore University of Maryland College Park		MS - HSLM	100
Dobish, Barbara A.	Assistant Professor	Non-Tenure Track	MS	Cardiovascular Nursing	The Catholic University of America		BSN-Adult Health	100
Dorsey, Susan G.	Associate Professor	Tenured	MS PhD	Nursing Nursing	University of Maryland Baltimore University of Maryland Baltimore		DNP; PhD	100
Duarte, Ana	Clinical Instructor	Non-Tenure Track	MS	Nursing-Psychiatric CNS/NP Family	University of Maryland Baltimore	CRNP - PMH	MS - PMHNP	50
Fahie, Vanessa	Assistant Professor	Non-Tenure Track	MS PhD	Nursing Nursing	University of Maryland Baltimore University of Maryland Baltimore		BSN - Gerontology	100
Felauer, Ann	Clinical Instructor	Non-Tenure Track	MSN	Pediatric Nurse Practitioner	University of Wisconsin - Madison	CRNP - Pediatrics - AC/PC	MS - PNP	100
Fey, Mary	Assistant Professor	Non-Tenure Track	MS PhD	Nursing	University of Maryland Baltimore		Clinical Simulation Lab	100
Flannery, Kelly	Assistant Professor	Non-Tenure Track	MS PhD	Community/Public Health Nursing Nursing	University of Maryland Baltimore University of Maryland Baltimore		CNL-CPH; DNP -EBP	100

Faculty Member	Rank	Tenure Status	Graduate Degrees	Major	School	Certifications	Teaching Assignment	%FTE
Fornilli, Katherine	Assistant Professor	Non-Tenure Track	BS MPH	Nursing Public Health	Virginia Commonwealth University Virginia Commonwealth University	CARN	BSN elective BSN - CPH, MS Core	100
Fountain, Lily	Assistant Professor	Non-Tenure Track	MS	Nursing - Nurse Midwifery	Georgetown University	CNM	BSN; CNL - emphasis	50
Franklin, Patricia	Assistant Professor	Non-Tenure Track	MSN PhD	Pediatric Nurse Practitioner Nursing & Health Policy	Catholic University of America George Mason University			100
Friedman, Erika	Professor	Tenured	PhD	Biology (Behavior)	University of Pennsylvania		PhD	100
Galik, Elizabeth	Associate Professor	Tenured	MSN PhD	Nursing Education and Gero. Nursing Nursing	Villanova University University of Maryland Baltimore	CRNP-Adult	MS-ANP/GNP; PhD	100
Geiger-Brown, Jeanne	Associate Professor	Tenured	MSN PhD	Psychiatric-Mental Health Nursing Nursing	Columbia University University of Maryland Baltimore	CS-PMH	PhD; DNP	100
Gilden, Robyn	Assistant Professor	Non-Tenure Track	MS PhD	Community/Public Health Nursing Nursing	University of Maryland Baltimore University of Maryland Baltimore		BSN- elective MS - CPH Env Health	100
Gonzalez, Michelle	Clinical Instructor	Non-Tenure Track	MS MS	Nursing Oriental Medicine	DePaul University Midwestern College of Oriental Medicine	CRNA, MSOM	MS - Nurse Anesthesia	100
Goodwin, Jana M.	Clinical Instructor	Non-Tenure Track	MSN	Adult Nurse Practitioner	Temple University	CRNP-Adult	BSN- Core/Adult Health	100
Gourley, Bridgitte	Assistant Professor	Non-Tenure Track	MSN DNP	Family Nurse Practitioner Nursing	Johns Hopkins University University of Maryland Baltimore	CRNP - Family	MS- FNP	100

Faculty Member	Rank	Tenure Status	Graduate Degrees	Major	School	Certifications	Teaching Assignment	%FTE
Grant, Marian	Assistant Professor	Non-Tenure Track	MSN DNP	Nursing Nursing	Johns Hopkins University University of Maryland Baltimore	CRNP - Acute Care	MS - ACNP/CNL	100
Gregory, Jr., William	Assistant Professor	Non-Tenure Track	MA MA PhD	Counseling and Mental Health Health Science/Psychology Psychology	Antioch College Fielding Graduate Institute Fielding Graduate Institute		MS - PMHNP	50
Griffith, Kathleen	Assistant Professor	Non-Tenure Track	MS PhD	Family Nurse Practitioner Nursing	Georgetown University University of Maryland Baltimore	CRNP - Family	MS; PhD - theory	100
Gutcheil, Veronica	Assistant Professor	Non-Tenure Track	MS DNP	Psych/Mental Health Nursing Nursing	Sage Universities University of Maryland Baltimore	CRNP -Family CNS	BSN - Adult Health	100
Hairston, Donna	Assistant Professor	Non-Tenure Track	MS PhD	Nursing Admin, Trauma & Critical Care Nursing Nursing	University of Maryland Baltimore University of Maryland Baltimore		N/A	10
Hammersla, Margaret	Assistant Professor	Non-Tenure Track	MS	Adult Nurse Practitioner	University of Maryland Baltimore	CRNP - Adult	MS - AGNP	100
Haut, Catherine	Assistant Professor	Non-Tenure Track	MS DNP	Perinatal-Neonatal Nursing/Clinical Nurse Specialist/ Pediatric Nurse Practitioner Nursing	University of Maryland Baltimore University of Maryland Baltimore	CCRN CRNP- Pediatrics Primary and Acute	MS - PNP	50
Hermosura, Belinda	Assistant Professor	Non-Tenure Track	MS	Nursing Administration	Georgetown University		Clinical Simulation Lab	100
Hickman, Linda	Assistant Professor	Non-Tenure Track	MBA PhD	Business Nursing	Marymount University University of Maryland Baltimore		MS- HSLM	100

Faculty Member	Rank	Tenure Status	Graduate Degrees	Major	School	Certifications	Teaching Assignment	%FTE
Hoffman, Ann	Clinical Instructor	Non-Tenure Track	MS	HSLM Education	University of Maryland Baltimore		BSN - Pediatrics	100
Hoffman, Janice J.	Associate Professor	Non-Tenure Track	MS PhD	Nursing Education Nursing	California State University University of Maryland Baltimore	CCRN	BSN/CNL-Adult Health; MS-Teaching Institute	100
Idzik, Shannon	Associate Professor	Non-Tenure Track	MS DNP	Adult Nurse Practitioner Nursing	University of Maryland Baltimore University of Maryland Baltimore	CCRN CRNP-Adult	MS-ANP/GNP	100
Jarin, Jennifer	Clinical Instructor	Non-Tenure Track	MS	Community/Public Environmental Health	University of Maryland Baltimore		Clinical Simulation Lab	50
Jenkins, Louise S.	Professor	Non-Tenure Track	MS PhD	Nursing Nursing	University of Maryland Baltimore University of Maryland Baltimore		MS-Teaching Institute; PhD	100
Johantgen, Mary E.	Associate Professor	Tenured	MS PhD	Nursing Administration Health Services. Organization and Research	SUNY at Buffalo Virginia Commonwealth University		MS-core; PhD; DNP	100
Johnson, Jeffrey	Professor	Tenured	PhD	Social and Behavioral Sciences	Johns Hopkins University		PhD ; MS - C/PH, Global Health Certificate	100
Kapustin, Jane F.	Professor	Non-Tenure Track	MS PhD	Nursing Public Policy/Health Policy	University of Maryland Baltimore University of Maryland Baltimore County	ANCC-Adv. Diabetes Mgt., CRNP-Adult	MS-ANP/GNP	100

Faculty Member	Rank	Tenure Status	Graduate Degrees	Major	School	Certifications	Teaching Assignment	%FTE
Kauffman, Karen S.	Associate Professor	Non-Tenure Track	MSN PhD	Gerontological Nurse Practitioner Nursing	University of Pennsylvania University of Pennsylvania	CRNP- Gerontology	DNP; PhD	100
Keleman, Arpad	Associate Professor	Non-Tenure Track	MS PhD	Computer Science Computer Science	University of Szeged University of Memphis		PhD; DNP; MS- Informatics	100
Kelleher, Catherine	Associate Professor	Non-Tenure Track	MS MPH ScD	Psychiatric Nursing Health Services Nursing	University of California Harvard University Johns Hopkins University		CNL-Core; MS-Core	100
Kirschling, Jane	Professor	Tenured	MS PhD	Community Mental Health Nursing Psychiatric/Mental Nursing	Indiana University Indiana University			100
Klindinst, N. Jennifer	Assistant Professor	Non-Tenure Track	MPH MSN PhD	Social and Behavioral Sciences Comm Systems Administration Nursing	Boston University Thomas Jefferson University Emory University		MS - Gerontology	100
Koo, Laura W.	Clinical Instructor	Non-Tenure Track	MS	Community Health - Family Nurse Practitioner	Boston College	CRNP-Family	MS-ANP/GNP	80
Koroknay, Vivian	Clinical Instructor	Non-Tenure Track	MS	Gerontological Nursing	University of Maryland Baltimore	CRRN	BSN	100
Kraamer, Cara	Clinical Instructor	Non-Tenure Track	MSN	Nursing	Notre Dame of Maryland University		BSN; CNL - Peds	40
Lamm, Naomi	Assistant Professor	Non-Tenure Track	MS EdD	Maternal Child Nursing Educational Leadership	University of Maryland Baltimore West Virginia University		BSN; MS-Core	100

Faculty Member	Rank	Tenure Status	Graduate Degrees	Major	School	Certifications	Teaching Assignment	%FTE
Lazear, Janice L.	Assistant Professor	Non-Tenure Track	MN DNP	Nursing Nursing	University of California Los Angeles University of Maryland Baltimore	CRNP-Family, CDE	BSN; CNL - OB; DNP	100
Lee, Mei Ching	Assistant Professor	Non-Tenure Track	MS PhD	Health Sciences Nursing	Trident University University of Maryland Baltimore		BSN - Adult Health	100
Lemaire, Gail S.	Associate Professor	Non-Tenure Track	MSN PhD	Psychiatric Nursing Nursing	University of Texas Health Science Center University of Maryland Baltimore	CS-P	CNL; MS- PMHNP	100
Lerner, Nancy	Assistant Professor	Non-Tenure Track	MS DNP	Community Health Nursing Nursing	University of Maryland Baltimore University of Maryland Baltimore		BSN - Gerontology	100
Lessans, Sherrie	Assistant Professor	Non-Tenure Track	MSN PhD	Nursing Nursing	University of North Carolina at Chapel Hill University of Maryland Baltimore		BSN/CNL- Adult Health	100
Liang, Yulan	Associate Professor	Tenured	MS PhD	Applied Statistics Applied Statistics	University of Memphis University of Memphis		MS Core; PhD	100
Lipscomb, Jane	Professor	Tenured	MS PhD	Community Health Nursing Epidemiology	Boston University University of California, Berkeley		MS - CPH; PhD	100
Lynn, Margaret	Assistant Professor	Non-Tenure Track	MS/MBA PhD	Business/HSLM	University of Maryland Baltimore/University of Baltimore/University of Maryland Baltimore County	FNE-A	BSN - Adult Health; MS - HSLM	100
McCarthy, E. Jane	Visiting Professor	Non-Tenure Track	MSN PhD	Nursing Physiology	University of Tennessee USUHS		MS	40

Faculty Member	Rank	Tenure Status	Graduate Degrees	Major	School	Certifications	Teaching Assignment	%FTE
McLaine, Patricia	Assistant Professor	Non-Tenure Track	BSN MPH DrPH	Nursing Public Health Public Health	Case Western Reserve University Johns Hopkins University Johns Hopkins University		MS - CPH	100
Mech, Ann	Assistant Professor	Non-Tenure Track	MS JD	Nursing Law	University of Maryland Baltimore George Washington University		MS	100
Michael, Kathleen	Associate Professor	Non-Tenure Track	MS PhD	Nursing Nursing	Seattle Pacific University Johns Hopkins University	CCRN	BSN, ; MS	100
Michael, Michele	Assistant Professor	Non-Tenure Track	MS PhD	Nursing Human Development Education	University of Maryland Baltimore University of Maryland College Park	CRNP - Pediatrics	BSN - Research; CNL Emphasis PNP Core	100
Miller, Sarah	Clinical Instructor	Non-Tenure Track	MS	Psychiatric CNS/NP	University of Maryland Baltimore	CRNP - Psychiatric Mental Health	BSN; CNL - Psych; MS - PMHNP	100
Mills, Mary Etta	Professor	Non-Tenure Track	MS ScD	Nursing Health Care Organizations	University of Maryland Baltimore Johns Hopkins University		MS - HSLM	50
Mitchell, Jacqueline	Clinical Instructor	Non-Tenure Track	MS MS	Fitness and Health Promotion Nurse Anesthesia	George Mason University University of Maryland Baltimore	CRNA	MS - Nurse Anesthesia	100
Moen, Marik	Assistant Professor	Non-Tenure Track	MSN/ MPH	Nursing	Johns Hopkins University		BSN elective - Global Health; BSN; CNL- CPH	100

Faculty Member	Rank	Tenure Status	Graduate Degrees	Major	School	Certifications	Teaching Assignment	%FTE
Montgomery, Kathryn	Associate Professor	Non-Tenure Track	MSN PhD	Psychiatric/Mental Health Nursing	Catholic University of America University of Maryland Baltimore		DNP	100
Mooney, Lori	Clinical Instructor	Non-Tenure Track	MS	Nursing	University of Maryland Baltimore	CRNP - PMH	BSN; CNL - Psych; MS - PMHNP	60
Mueller-Burke, Dawn M.	Assistant Professor	Non-Tenure Track	MS PhD	Advanced Practice Pediatrics Nursing/ Neurophysiology	University of Maryland Baltimore University of Maryland Baltimore	CRNP- Neonatal	BSN- Research DNP - EBP	100
Murphy, Marilyn S.	Associate Professor	Non-Tenure Track	MS/MBA PhD	Nursing/Business Administration Public Policy	University of Maryland Baltimore University of Maryland Baltimore County		MS-Core; MS-HSLM	100
Murray, Linda	Clinical Instructor	Non-Tenure Track	MS	Nursing	University of Maryland Baltimore	CRNP - Pediatrics	MS - PNP	100
Nahm, Eun-Shim	Professor	Tenured	MS PhD	Nursing Nursing Informatics	University of Hawaii University of Maryland Baltimore		MS- Informatics PhD- Research	100
Newhouse, Robin	Professor	Tenured	MGA MS PhD	Health Care Administration Nursing Nursing	University of Maryland University College University of Maryland Baltimore University of Maryland Baltimore	CNA-BC, CNOR	DNP	100
Newsome-Williams, Jacqueline	Assistant Professor	Non-Tenure Track	MSN PhD	Nursing Nursing	Howard University University of Michigan	CRNP - Adult	MS - AGNP	100

Faculty Member	Rank	Tenure Status	Graduate Degrees	Major	School	Certifications	Teaching Assignment	%FTE
Njie-Carr, Veronica	Assistant Professor	Non-Tenure Track	MSN PhD	Nursing/Adult Health - Education Nursing	The Catholic University of America The Catholic University of America	ACNS - BC	BSN - Adult Health	100
Ogbolo, Yolanda	Assistant Professor	Non-Tenure Track	MS PhD	Nursing Nursing	University of Maryland Baltimore University of Maryland Baltimore	CRNP - Neonatal	BSN; MS elective Health Care and Culture; MS - PNP	100
O'Neil, Carol A.	Associate Professor	Non-Tenure Track	MA MEd PhD	Nursing Education Community Health Nursing Measurement, Evaluation & Research	Columbia University Columbia University University of South Florida	CNE	MS - Teaching Institute	100
Onello, Rachel	Clinical Instructor	Non-Tenure Track	MS	Nursing/Clinical Nurse Leader	University of Maryland Baltimore		BSN - Adult Health	50
Oswald, Lynn M.	Associate Professor	Tenured	MSN PhD	Psychiatric/Mental Health Nursing Biomedical Sciences	University of Texas Health Science Center University of Texas Health Science Center		MS Core; MS - PMHNP - Neuro	100
Owens, Denise	Clinical Instructor	Non-Tenure Track	MS	Health Services Leadership and Management	University of Maryland Baltimore	CCRN	BSN-Adult Health	100
Ozbolt, Judy	Visiting Professor	Non-Tenure Track	MS PhD	Medical-Surgical Nursing Educational Psychology	University of Michigan University of Michigan		MS- Informatics	10
Pellegrini, Joseph	Associate Professor	Non-Tenure Track	MS DNP PhD	Nurse Anesthesia Medical-Surgical Nursing Nursing	Rush University Rush University Rush University	CRNA	MS-Nurse Anesthesia	100

Faculty Member	Rank	Tenure Status	Graduate Degrees	Major	School	Certifications	Teaching Assignment	%FTE
Picot, Sandra J.	Associate Professor	Tenured	MSN PhD	Medical-Surgical Nursing Nursing Research	University of Virginia University of Maryland Baltimore		BSN -core; MS-core	100
Proulx, Joseph R.	Professor	Tenured	MS EdD	Nursing Administration Education	University of Pennsylvania Columbia University		MS-HSLM	100
Rawlett, Kristen	Clinical Instructor	Non-Tenure Track	MSN	Family Nurse Practitioner	University of South Carolina	CRNP - Family	MS FNP	100
Regan, Mary	Associate Professor	Tenured	MS PhD	Nursing Nursing	University of Minnesota University of Minnesota		MS- Informatics	100
Renn, Cynthia L.	Associate Professor	Tenured	MS PhD	Nursing Oral Craniofacial Biology	University of Maryland Baltimore University of Maryland Baltimore		MS - Adult Health; Research	100
Resnick, Barbara	Professor	Tenured	MS PhD	Nursing Nursing	University of Maryland Baltimore University of Maryland Baltimore	CRNP - Geriatric	MS - AGNP	100
Riel, Rosemary	Clinical Instructor	Non-Tenure Track	MAA	Anthropology	University of Maryland College Park			100
Rietschel, Matthew	Assistant Professor	Non-Tenure Track	MS	Instructional Design/Technology	Towson State University		N/A	100
Rogers, Valerie	Assistant Professor	Non-Tenure Track	MS PhD	Nursing Nursing	University of Maryland Baltimore University of Maryland Baltimore	CRNP - Pediatrics	MS - PNP	100
Ross, Alyson	Assistant Professor	Non-Tenure Track	MS PhD	Psychiatric Mental Health Clinical Specialist Nursing	Vanderbilt University University of Maryland Baltimore		BSN; CNL - Communications	100

Faculty Member	Rank	Tenure Status	Graduate Degrees	Major	School	Certifications	Teaching Assignment	%FTE
Satyshur, Rosemarie D.	Assistant Professor	Non-Tenure Track	MSN DNSc	Nursing of the Developing Family Maternal Child Nursing/Maternal Infant Nursing	Catholic University of America Catholic University of America		BSN - Research; MS - Core	100
Schaivone, Kathryn A.	Clinical Instructor	Non-Tenure Track	MSN	Health Care Administration	University of Southern California		Teaching Institute	100
Scheu, Karen	Assistant Professor	Non-Tenure Track	MSN DNP	Family Nurse Practitioner Nursing	Columbia University University of Maryland Baltimore	CRNP - Family	MS - FNP	100
Scott, Katherine	Clinical Instructor	Non-Tenure Track	BSN MPH	Nursing Public Health	Johns Hopkins University Johns Hopkins University		BSN; CNL - CPH	75
Scrandis, Debra	Assistant Professor	Non-Tenure Track	MS PhD	Community Health Nursing Nursing	Boston University Barry University	CRNP - Family	MS - MHNP; FNP; PhD	100
Seckman, Charlotte	Assistant Professor	Non-Tenure Track	MSN PhD	Nursing Education Nursing	University of Pittsburgh University of Maryland Baltimore		MS - Informatics	100
Seger, Celeste	Clinical Instructor	Non-Tenure Track	MS	HSLM Executive Practice	University of Maryland Baltimore		BSN - Adult Health	100
Selby, Victoria	Clinical Instructor	Non-Tenure Track	MS	Family Psychiatric APN	University of Maryland Baltimore	CRNP - Psychiatric Mental Health	BSN electives - Addictions; BSN - Psych	100
Shelley, Rebecca	Assistant Professor	Non-Tenure Track	MS PhD	Community/Public Health Nursing Environmental Health Sciences	University of Maryland Baltimore Johns Hopkins University		BSN - Research; MS - CPH	100

Faculty Member	Rank	Tenure Status	Graduate Degrees	Major	School	Certifications	Teaching Assignment	%FTE
Sherwood, Suzanne	Assistant Professor	Non-Tenure Track	MS	Trauma/Critical Care Nurse Specialist	University of Maryland Baltimore		BSN - Adult Health	100
Shumate, Pamela	Clinical Instructor	Non-Tenure Track	MSN DNP	Adult Health	The Catholic University of America University of Maryland Baltimore		BSN - Health Assessment Critical Care	100
Solaiman, Anjana	Clinical Instructor	Non-Tenure Track	MS	Health Services Leadership and Management	University of Maryland Baltimore	RNC - OB	BSN - OB	100
Spencer, Michelle	Clinical Instructor	Non-Tenure Track	MS	Community/Public Health Nursing	University of Maryland Baltimore		BSN - CPH emphasis	65
Staggers, Nancy	Professor	Tenured	MS PhD	Nursing Administration Nursing Informatics	University of Maryland Baltimore University of Maryland Baltimore		MS - Informatics	100
Storr, Carla	Professor	Tenured	MPH ScD	Public Health Mental Hygiene	University of South Florida Johns Hopkins University		MS Core; PhD	100
Trinkoff, Alison	Professor	Tenured	MPH DSc	Maternal and Child Health Mental Hygiene	University of North Carolina at Chapel Hill Johns Hopkins University		MS - CPH; PhD	100
Trocky, Nina	Assistant Professor	Non-Tenure Track	MSN DNP	Community Health DNP	The Catholic University of America Waynesburg University	CRA, NEC	MS-CRM; BSN-Core	100
Twigg, Regina	Assistant Professor	Non-Tenure Track	MS DNP	Nursing Nursing	University of Maryland Baltimore University of Maryland Baltimore		BSN/CNL- Adult Health	100

Faculty Member	Rank	Tenure Status	Graduate Degrees	Major	School	Certifications	Teaching Assignment	%FTE
Ulicny, Mary Pat	Clinical Instructor	Non-Tenure Track	MS	Health Care Administration and Management HSLM Education	University of Maryland University College University of Maryland Baltimore		BSN - Adult Health	100
Valle, Mary	Assistant Professor	Non-Tenure Track	MS DNP	Adult Nurse Practitioner Nursing	University of Maryland Baltimore University of Maryland Baltimore	CRNP-Adult	BSN/CNL- Adult Health	100
Von Rueden, Kathryn	Associate Professor	Non-Tenure Track	MS	Nursing	University of Minnesota	CNS - BC, FCCM	MS - ACNP/CNS	100
Walsh, Barbara	Assistant Professor	Non-Tenure Track	MPH MS DNP	Public Health Community Health Nursing Nursing	Virginia Commonwealth University Virginia Commonwealth University Old Dominion University		BSN, CNL CPH	100
Waltz, Carolyn	Professor	Tenured	MS PhD	Public Health Research and Evaluation	University of Maryland Baltimore University of Delaware		MS - Science Research ANP Core	100
Ward, Christopher	Associate Professor	Tenured	MS PhD	Exercise Physiology Veterinary Biomedical Sciences	Virginia Polytechnic Institute and State University Virginia/Maryland Regional College of Veterinary Medicine		MS - Nurse Anesthesia, PhD	100
Wiegand, Debra L.	Associate Professor	Tenured	MSN MBE PhD	Advanced Medical - Surgical Nursing Bioethics Nursing	Wayne State University Univ of Pennsylvania Univ of Pennsylvania	CHPN, CCRN	MS-Adult Health; PhD; Research	100
Wilson, Kelley	Assistant Professor	Non-Tenure Track	MSN	Nursing Administration	Marymount University		BSN/CNL- Adult Health	100

Faculty Member	Rank	Tenure Status	Graduate Degrees	Major	School	Certifications	Teaching Assignment	%FTE
Windemuth, Brenda	Assistant Professor	Non-Tenure Track	MSN DNP	Family Nurse Practitioner Nursing	Wilmington University University of Maryland Baltimore	CRNP - Family	MS - AGNP	100
Wiseman, Rebecca	Associate Professor	Non-Tenure Track	MSN PhD	Adult Health and Illness Education Administration	University of Pennsylvania University of Maryland Baltimore		BSN - Adult Health	100
Wozenski, Susan M.	Assistant Professor	Non-Tenure Track	MPH JD	Epidemiology Law	University of Michigan University of Connecticut		MS - C/PH; MS Core	100
Wulf, Janet	Clinical Instructor	Non-Tenure Track	MS	Clinical Nurse Leader	University of Maryland Baltimore		BSN - Adult Health	100
Zimberg, Patricia	Assistant Professor	Non-Tenure Track	JD MS	Community/Public Health Nursing Law	University of Richmond University of Maryland Baltimore		BSN - C/PH; MS - CPH	100

Appendix IIIA-1

Comparison of Revised (Fall 2014 Implementation) and Current BSN Plans of Study

	2014 Curriculum	Total	2003 Curriculum	Total
	First Semester	16		
NURS 310	Professional Role of the Registered Nurse	3	NURS 325/405	2/3*
NURS 314	Physiologic and Pharmacologic Considerations for Health Promotion	4	NURS 315	5
NURS 317	Fundamentals of Nursing Care in the Context of Older Adults	3	NURS 304/331	4/6*
NURS 316	Research and Evidenced-Based Practice	3	NURS 320	3
NURS 319	Health Assessment	3	NURS 333	3
	Second Semester	15		
NURS 324	Pathopharmacology in Adults	3	NURS 315	See above *
NURS 327	Medical-Surgical Nursing in the Adult Population	7	NURS 330	7
NURS 329	Psychiatric Mental Health Nursing	5	NURS 402	5
	Third Semester	15		
NURS 411	Infant, Child, and Adolescent Nursing	5	NURS 308	4
NURS 417	Maternity, Newborn, and Women's Health Nursing	5	NURS 407	5
NURS 414	Complex Nursing Care of Patients with Co-Morbid Conditions	3	New course	
NURS 410	Health Care Delivery System and Informatics	2	NURS 405/425	3/3
	Fourth Semester	15		
NURS 421	Public Health: Population-Focused Nursing Care	5	NURS 403	5
NURS 429	Leadership and Clinical Practicum	7	NURS 425/487	6
NURS 418	Nursing Elective	3	NURS 418	3
	Total Credits	61		
	General Education and Prerequisite Courses	59		
	Total Credits for the BSN Option	120		

BSN Curriculum for Students Enrolled Before Fall 2014

First Semester	Course	Title	Credits
	NURS 304	Introduction to Professional Nursing Practice	4
	NURS 315	Pathopharmacology	5
	NURS 320	Science and Research for Nursing Practice	3
	NURS 333	Health Assessment	3
		Total	15
Second Semester	Course	Title	Credits
	NURS 325	Context of Health Care Delivery I	2
	NURS 330	Adult Health Nursing	7
	NURS 331	Gerontological Nursing	3
	NURS 405	Informatics and Technology	3
		Total	15
Third Semester	Course	Title	Credits
	NURS 407	Nursing Care of the Childbearing Family	5
	NURS 308	Nursing Care of Infants/Children: A Family Perspective	4
	NURS 402	Psychiatric/Mental Health Nursing	5
	NURS 418	Directive Elective (if not previously completed)	3
		Total	17
Fourth Semester		Title	Credits
	NURS 403	Community Health Nursing	5
	NURS 425	Organizational Leadership and Management	3
	NURS 487	Clinical Emphasis Practicum and Seminar	6
		Total	14
	Total Credits		61
	General Education & Prerequisite Courses		59
	Total Credits for BSN Option		120

Appendix IIIA-2

Comparison of Revised (Fall 2014 Implementation) and Current RN to BSN Plans of Study

2014 Curriculum	Credits	2003 Curriculum	Credits
NURS 450 - RN to BSN Transition: Implications for Practice, Policy, and the Profession	3	NURS 325 Context of Health Delivery I	2
NURS 454 - Pathophysiologic Implications to Patient Assessment content covered in NURS 450 and NURS 454	5	NURS 333 Health Assessment	3
		NURS 331 Gerontological Nursing	3
NURS 452 - Nursing Research and Evidence Based Care for the Registered Nurse	3	NURS 320 Science and Research for Nursing Practice	3
NURS 460 - Health Informatics for the Registered Nurse	3	NURS 405 Informatics and Technology	3
NURS 467 - Public Health Nursing Essentials for the Registered Nurse	5	NURS 403 Community Health Nursing	5
NURS 462 - Nursing Leadership and Management for the Registered Nurse	3	NURS 425 Organizational Leadership and Management	3
NURS 418 Elective (3)	9	NURS 418 Elective (3)	9
Total Program of Study Credits	31		31
General Education & Prerequisite Courses	59		
Credits Awarded for Valid Nursing License	30		
Total Credits for RN to BSN Option	120		

Appendix IIIA-3
Comparison of Revised (Fall 2014 Implementation) and Current CNL Plans of Study
(Example: Fall Admission)

2014 Curriculum	Credits	2005 Curriculum	Credits
First Semester (Fall)	15	First Semester (Fall)	18
NURS 501 Pathopharmacology	5	NURS 501 Pathopharmacology	5
NURS 503 Health Assessment	3	NURS 503 Health Assessment	3
NURS 505 Introduction to Professional Nursing Practice	4	NURS 505 Introduction to Professional Nursing Practice	4
NURS 507 Introduction to Clinical Nursing Leadership	3	NURS 507 Intro to Nursing and CNL Role	3
		NURS 622 Systems: Populations	3
		NURS 625 Gerontology Nursing (Winter)	3
Second Semester	14	Second Semester (Spring)	18
NURS 514 Adult Health Nursing	6	NURS 514 Adult Health Nursing	6
NURS 790 Application of Science for EBP	3	NURS 511 Psych Mental Health Nursing	5
NURS 795 Biostatistics for EBP	3	NURS 701 Research	4
NURS 625 Gerontology Nursing	2	NURS 736 Technical Solutions: Knowledge Generation	3
Summer	10	Summer	9
NURS 509 Pediatric Nursing	5	NURS 509 Pediatric Nursing	4
NURS 517 Maternal Child Nursing	5	NURS 517 Maternal Child Nursing	5
Third Semester	15	Third Semester (Fall)	16
NURS 736 Technical Solutions: Knowledge Generation	3	NURS 508 Community Health	5
NURS 780 Population Health & Promotion	3	NURS 523 CNL Practicum	8
NURS 508 Community/ Public Health Nursing	4	NURS 525 CNL Leadership	3
NURS 511 Psychiatric Mental Health Nursing	5		
Fourth Semester (Spring)	11		
NURS 525 CNL Practicum	8		
NURS 782 Organization and Systems Leadership	3		
Total Credits	65	Total Credits	64

Note: Plan administratively approved; course titles subject to change.

Appendix IIIA-4

Comparison of Revised (Fall 2014 Implementation) and Current RN to MS Plans of Study

2014 Curriculum	Credits	2003 Curriculum	Credits
BSN Curriculum			
NURS 450: RN to BSN Transition: Implications for Practice, Policy and the Profession	3	NURS 331: Gerontological Nursing	3
NURS 452 - Nursing Research and Evidence Based Care for the Registered Nurse	3	NURS 333: Health Assessment	3
NURS 454 - Pathophysiologic Implications to Patient Assessment	5	NURS 405: Informatics and Technology	3
NURS 460 - Health Informatics for the Registered Nurse	3	NURS 320: Science and Research for Nursing Practice OR NURS 418: Directed Elective	3
NURS 467 - Public Health Nursing Essentials for the Registered Nurse	5	NURS 403: Community Health Nursing	5
NRSG 780: Health Promotion and Population Health	3	NURS 418: Directed Electives (2)	6
NRSG 782: Health Systems & Health Policy: Leadership and Quality Improvement	3	NURS 622: Systems and Population in Health Care	3
NURS 418 Elective (2)	6	NURS 659: Organizational and Professional Dimensions of Advanced Nursing Practice	3
		NURS 701: Research for Advanced Nursing Practice	4
Total Credits (BSN Portion of Degree)	31	Total Credits (BSN Portion of Degree)	33

2014 Curriculum	Credits	2003 Curriculum	Credits
MASTERS Curriculum			
NRSG 790: Application of Science for Evidence-Based Practice	3	NURS 690: Managerial Health Finance	3
NRSG 795: Biostatistics for Evidence-based Practice	3	NURS 691: Organizational Theories: Application to Health Service Management	3
NURS 690: Managerial Health Finance	3	NURS 692: Administration of Nursing and Health Care Services OR NURS XXX: Directed Elective	3
NURS 691: Organizational Theories: Application to Health Service Management	3	NURS 736: Technology Solutions for Generating Knowledge in Health Care	3
NURS 692: Administration of Nursing and Health Care Services	3	NURS XXX: Directed Electives (3) OR NURS 787: Theoretical Foundations of Teaching and Learning; NURS 791: Instructional Strategies and Assessment of Learning; NURS 792: Practicum in Teaching in Nursing and Health Professions	9
NURS 736: Technology Solutions for Generating Knowledge in Health Care	3	NURS XXX: Directed Elective	4
NURS XXX: Directed Electives (3) OR NURS 787: Theoretical Foundations of Teaching and Learning; NURS 791: Instructional Strategies and Assessment of Learning; NURS 792: Practicum in Teaching in Nursing and Health Professions	9	NURS 695: Practicum in Health Services, Leadership, and Management	5
NURS 695: Practicum in Health Services, Leadership, and Management	5		
TOTAL CREDITS	32	TOTAL CREDITS	30
TOTAL PROGRAM CREDITS	63	TOTAL PROGRAM CREDITS	63

Appendix IIIB-1

Analysis of Congruence of BSN Program Outcomes with AACN Baccalaureate Essentials

1. Combine theoretical knowledge from the sciences, humanities, and nursing as a foundation to professional nursing practice that focuses on health promotion and prevention of disease for individuals, families, communities, and populations. (Essentials* 1 and 7)
2. Use the nursing process to manage care for individuals, families, communities, and populations integrating physical, psychological, social, cultural, spiritual, and environmental considerations. (Essentials 7 and 9)
3. Integrate competencies in leadership, quality improvement, and patient safety to improve health and promote interdisciplinary care. (Essential 2)
4. Use the research process through translation of evidence-based findings to advance professional nursing and the delivery of health care (Essential 3)
5. Incorporate information management and patient care technology in the delivery of quality patient centered care. (Essential 4)
6. Integrate knowledge of health care policy from social, economic, political, legislative, and professional perspectives to influence the delivery of care to individuals, families, communities, and populations. (Essential 5)
7. Employ interprofessional communication and collaboration to ensure safe, quality care across the lifespan. (Essential 6)
8. Use principles of ethics, legal responsibility, and accountability to guide professional nursing practice across the lifespan and across the health care continuum. (Essentials 8 and 9)
9. Accept personal accountability for lifelong learning, professional growth, and commitment to the advancement of the profession. (Essential 8)

* *The Essentials of Baccalaureate Education for Professional Nursing Practice* (AACN, 2008)

Appendix IIIB-2

Analysis of Congruence of Traditional BSN and RN-BSN Courses with Baccalaureate Essentials

Traditional BSN Courses (First Year)	NURS 310	NURS 314	NURS 316	NURS 317	NURS 319	NURS 324	NURS 327	NURS 329
I. Liberal Education for Baccalaureate Generalist Nursing Practice	X	X		X	X	X	X	X
II. Basic Organizational and Systems Leadership for Quality Care and Patient Safety		X	X	X			X	X
III. Scholarship for Evidence-Based Practice	X		X					
IV. Information Management and Application of Patient Care Technology								
V. Health Care Policy, Finance, and Regulatory Environments	X							
VI. Interprofessional Communication and Collaboration for Improving Patient Health Outcomes	X	X		X	X		X	X
VII. Clinical Prevention and Population Health		X				X	X	
VIII. Professionalism and Professional Values	X	X				X	X	
IX. Baccalaureate Generalist Nursing Practice	X	X		X	X	X	X	X

Traditional BSN Courses (Second Year)	NURS 410	NURS 411	NURS 414	NURS 417	NURS 421	NURS 429
I. Liberal Education for Baccalaureate Generalist Nursing Practice		X	X	X	X	X
II. Basic Organizational and Systems Leadership for Quality Care and Patient Safety	X	X	X	X	X	X
III. Scholarship for Evidence-Based Practice						X
IV. Information Management and Application of Patient Care Technology	X	X	X	X	X	X
V. Health Care Policy, Finance, and Regulatory Environments	X					X
VI. Interprofessional Communication and Collaboration for Improving Patient Health Outcomes	X	X	X	X	X	X
VII. Clinical Prevention and Population Health		X	X	X	X	X
VIII. Professionalism and Professional Values	X	X	X	X	X	X
IX. Baccalaureate Generalist Nursing Practice	X	X	X	X	X	X

RN-BSN Courses	NURS 450	NURS 452	NURS 454	NURS 460	NURS 462	NURS 467
I. Liberal Education for Baccalaureate Generalist Nursing Practice	X	X		X	X	X
II. Basic Organizational and Systems Leadership for Quality Care and Patient Safety	X			X	X	X
III. Scholarship for Evidence-Based Practice		X				
IV. Information Management and Application of Patient Care Technology				X	X	
V. Health Care Policy, Finance, and Regulatory Environments	X	X			X	
VI. Interprofessional Communication and Collaboration for Improving Patient Health Outcomes	X		X	X		X
VII. Clinical Prevention and Population Health			X			X
VIII. Professionalism and Professional Values	X				X	
IX. Baccalaureate Generalist Nursing Practice	X		X			

Appendix IIIB-3

Analysis of Congruence of MS Core Courses with Master's Essentials

Master's Essentials	NRSG 790	NRSG 795	NRSG 780	NRSG 782
Essential I: Background for Practice from Sciences and Humanities				
1. Integrate nursing and related sciences into the delivery of advanced nursing care to diverse populations.				
2. Incorporate current and emerging genetic/genomic evidence in providing advanced nursing care to individuals, families, and communities while accounting for patient values and clinical judgment.				
3. Design nursing care for a clinical or community-focused population based on biopsychosocial, public health, nursing, and organizational sciences.			x	
4. Apply ethical analysis and clinical reasoning to assess, intervene, and evaluate advanced nursing care delivery.				
5. Synthesize evidence for practice to determine appropriate application of interventions across diverse populations.	x		x	
6. Use quality processes and improvement science to evaluate care and ensure patient safety for individuals and communities.	x			x
7. Integrate organizational science and informatics to make changes in the care environment to improve health outcomes.				x
8. Analyze nursing history to expand thinking and provide a sense of professional heritage and identity.				
Essential II: Organizational and Systems Leadership				
1. Apply leadership skills and decision making in the provision of culturally responsive, high-quality nursing care, health care team coordination, and the oversight and accountability for care delivery and outcomes.	x			x
2. Assume a leadership role in effectively implementing patient safety and quality improvement initiatives within the context of the interprofessional team using effective communication (scholarly writing, speaking, and group interaction) skills.	x			x
3. Develop an understanding of how health care delivery systems are organized and financed (and how this affects patient care) and identify the economic, legal, and political factors that influence health care.	x			x
4. Demonstrate the ability to use complexity science and systems theory in the design, delivery, and evaluation of health care.				
5. Apply business and economic principles and practices, including budgeting, cost/benefit analysis, and marketing, to develop a business plan.				x
6. Design and implement systems change strategies that improve the care environment.				
7. Participate in the design and implementation of new models of care delivery and coordination.				
Essential III: Quality Improvement and Safety				
1. Analyze information about quality initiatives recognizing the contributions of individuals and		x		x

Master's Essentials	NRSG 790	NRSG 795	NRSG 780	NRSG 782
interprofessional health care teams to improve health outcomes across the continuum of care.				
2. Implement evidence-based plans based on trend analysis and quantify the impact on quality and safety.		x		
3. Analyze information and design systems to sustain improvements and promote transparency using high reliability and just culture principles.				
4. Compare and contrast several appropriate quality improvement models.				x
5. Promote a professional environment that includes accountability and high-level communication skills when involved in peer review, advocacy for patients and families, reporting of errors, and professional writing.				
6. Contribute to the integration of health care services within systems to affect safety and quality of care to improve patient outcomes and reduce fragmentation of care.				x
7. Direct quality improvement methods to promote culturally responsive, safe, timely, effective, efficient, equitable, and patient-centered care.				
8. Lead quality improvement initiatives that integrate socio-cultural factors affecting the delivery of nursing and healthcare services.				
Essential IV: Translating and Integrating Scholarship into Practice				
1. Integrate theory, evidence, clinical judgment, research, and interprofessional perspectives using translational processes to improve practice and associated health outcomes for patient aggregates.	x			
2. Advocate for the ethical conduct of research and translational scholarship (with particular attention to the protection of the patient as a research participant).	x			
3. Articulate to a variety of audiences the evidence base for practice decisions, including the credibility of sources of information and the relevance to the practice problem confronted.	x	x	x	
4. Participate, leading when appropriate, in collaborative teams to improve care outcomes and support policy changes through knowledge generation, knowledge dissemination, and planning and evaluating knowledge implementation.	x			
5. Apply practice guidelines to improve practice and the care environment.	x		x	
6. Perform rigorous critique of evidence derived from databases to generate meaningful evidence for nursing practice.	x			
Essential V: Informatics and Health Care Technologies				
1. Analyze current and emerging technologies to support safe practice environments, and to optimize patient safety, cost-effectiveness, and health outcomes.				x
2. Evaluate outcome data using current communication technologies, information systems, and statistical principles to develop strategies to reduce risks and improve health outcomes.		x		
3. Promote policies that incorporate ethical principles and standards for the use of health and information technologies.				x
4. Provide oversight and guidance in the integration of technologies to document patient care and improve patient outcomes.				
5. Use information and communication technologies, resources, and principles of learning to teach patients and others.				

Master's Essentials	NRSG 790	NRSG 795	NRSG 780	NRSG 782
6. Use current and emerging technologies in the care environment to support lifelong learning for self and others.				
Essential VI: Health Policy and Advocacy				
1. Analyze how policies influence the structure and financing of health care, practice, and health outcomes.				x
2. Participate in the development and implementation of institutional, local, and state and federal policy.				x
3. Examine the effect of legal and regulatory processes on nursing practice, health care delivery, and outcomes.				x
4. Interpret research, bringing the nursing perspective, for policy makers and stakeholders.		x		x
5. Advocate for policies that improve the health of the public and the profession of nursing.				
Essential VII: Interprofessional Collaboration for Improving Patient and Population Health Outcomes				
1. Advocate for the value and role of the professional nurse as member and leader of interprofessional health care teams.				
2. Understand other health professions' scopes of practice to maximize contributions within the health care team.		x		
3. Employ collaborative strategies in the design, coordination, and evaluation of patient-centered care.				
4. Use effective communication strategies to develop, participate, and lead interprofessional teams and partnerships.				
5. Mentor and coach new and experienced nurses and other members of the health care team.				
6. Functions as an effective group leader or member based on an in-depth understanding of team dynamics and group processes.				
Essential VIII: Clinical Prevention and Population Health for Improving Health				
1. Synthesize broad ecological, global, and social determinants of health; principles of genetics and genomics; and epidemiologic data to design and deliver evidence-based, culturally relevant clinical prevention interventions and strategies.			x	
2. Evaluate the effectiveness of clinical prevention interventions that affect individual and population-based health outcomes using health information technology and data sources.			x	
3. Design patient-centered and culturally responsive strategies in the delivery of clinical prevention and health promotion interventions and/or services to individuals, families, communities, and aggregates/clinical populations.			x	
4. Advance equitable and efficient prevention services, and promote effective population-based health policy through the application of nursing science and other scientific concepts.			x	
5. Integrate clinical prevention and population health concepts in the development of culturally relevant and linguistically appropriate health education, communication strategies, and interventions.			x	
Essential IX: Master's-Level Nursing Practice				
1. Conduct a comprehensive and systematic assessment as a foundation for decision-making.				
2. Apply the best available evidence from nursing and other sciences as the foundation for practice.				

Master's Essentials	NRSG 790	NRSG 795	NRSG 780	NRSG 782
3. Advocate for patients, families, caregivers, communities, and members of the health care team.				
4. Use information and communication technologies to advance patient education, enhance accessibility of care, analyze practice patterns, and improve health care outcomes, including nurse sensitive outcomes.				
5. Use leadership skills to teach, coach, and mentor other members of the health care team.				
6. Use epidemiological, social, and environmental data in drawing inferences regarding the health status of patient populations and interventions to promote and preserve health and healthy lifestyles.		x	x	
7. Use knowledge of illness and disease management to provide evidence-based care to populations, perform risk assessments, and design plans or programs of care.			x	
8. Incorporate core scientific and ethical principles in identifying potential and actual ethical issues arising from practice, including the use of technologies, and in assisting patients and other health care providers to address such issues.				
9. Apply advanced knowledge of the effects of global environmental, individual, and population characteristics to the design, implementation, and evaluation of care.			x	
10. Employ knowledge and skills in economics, business principles, and systems in the design, delivery, and evaluation of care.				
11. Apply theories and evidence-based knowledge in leading, as appropriate, the health care team to design, coordinate, and evaluate the delivery of care.				
12. Apply learning, and teaching principles to the design, implementation, and evaluation of health education programs for individuals or groups in a variety of settings.			x	
13. Establish therapeutic relationships to negotiate patient-centered, culturally appropriate, and evidence-based goals and modalities of care.				
14. Design strategies that promote lifelong learning of self and peers and that incorporate professional nursing standards and accountability for practice.				
15. Integrate an evolving personal philosophy of nursing and health care into one's nursing practice.				

Appendix IIIB-4

Analysis of Congruence of MS Program Outcomes with AACN Master's Essentials

1. Incorporate scientific inquiry and theoretical concepts into efforts to improve the care to individuals and communities. (Essentials* 1, 3, 4, 5, 7, 9)
2. Lead evidence-based and interprofessional approaches for the design and delivery of comprehensive, culturally competent care to individuals/families, communities, and populations. (Essentials 2, 3, 4, 5, 6, 7, 9)
3. Participate in the design, implementation, and evaluation of health care systems to foster safety and excellence in health care delivery. (Essentials 1, 5, 6, 7, 8, 9)
4. Engage in ethically sound, culturally sensitive, and evidenced-based practice to promote the health of individuals and communities. (Essentials 1, 2, 3, 4, 6, 7, 8, 9)
5. Commit to lifelong learning for self and promote lifelong learning to consumers. (Essentials 2, 7, 9)
6. Practice advanced nursing roles in collaborative relationships across disciplines and in partnership with communities, i.e., nursing education, nursing administration, nursing informatics, advanced clinical practice, and clinical nursing leadership. (Essentials 2, 3, 4, 7, 8, 9)

* *The Essentials of Master's Education in Nursing* (AACN, 2011)

Appendix IIIB-5

Analysis of Congruence of CNL Courses with AACN Baccalaureate and Master's Essentials

Crosswalk of CNL Courses (2005 Curriculum) with Baccalaureate Essentials

CNL Courses	NURS 501	NURS 503	NURS 505	NURS 507	NURS 508	NURS 509	NURS 511	NURS 514	NURS 517	NURS 523	NURS 622	NURS 525	NURS 625	NURS 701	NURS 736
<i>Essential I.</i> Liberal Education for Baccalaureate Generalist Nursing Practice	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
<i>Essential II.</i> Basic Organizational and Systems Leadership for Quality Care and Patient Safety				X						X	X	X			
<i>Essential III.</i> Scholarship for Evidence Based Practice	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
<i>Essential IV.</i> Information Management and Application of Patient Care Technology		X	X		X	X	X	X	X	X		X		X	X
<i>Essential V.</i> Health Care Policy, Finance, and Regulatory Environments				X	X	X	X	X	X	X	X		X		
<i>Essential VI.</i> Interprofessional Communication and Collaboration for Improving Patient Health Outcomes		X	X	X	X	X	X	X	X	X		X	X		X
<i>Essential VII.</i> Clinical Prevention and Population Health					X	X	X	X	X	X	X				
<i>Essential VIII.</i> Professionalism and Professional Values				X	X	X	X	X	X	X		X			
<i>Essential IX.</i> Baccalaureate Generalist Nursing Practice		X	X		X	X	X	X	X	X					

Crosswalk of CNL Courses (2014 Curriculum) with Baccalaureate Essentials

CNL Courses	NURS 501	NURS 503	NURS 505	NURS 507	NURS 508	NURS 509	NURS 511	NURS 514	NURS 517	NURS 523	NURS 625	NURS 736
<i>Essential I.</i> Liberal Education for Baccalaureate Generalist Nursing Practice	X	X	X	X	X	X	X	X	X	X	X	X
<i>Essential II.</i> Basic Organizational and Systems Leadership for Quality Care and Patient Safety				X								
<i>Essential III.</i> Scholarship for Evidence Based Practice	X	X	X	X	X	X	X	X	X	X	X	X
<i>Essential IV.</i> Information Management and Application of Patient Care Technology			X		X	X	X	X	X	X		X
<i>Essential V.</i> Health Care Policy, Finance, and Regulatory Environments				X			X			X		X
<i>Essential VI.</i> Interprofessional Communication and Collaboration for Improving Patient Health Outcomes			X	X	X	X	X	X	X	X	X	X
<i>Essential VII.</i> Clinical Prevention and Population Health					X	X	X	X	X	X		
<i>Essential VIII.</i> Professionalism and Professional Values			X	X	X	X	X	X	X	X		
<i>Essential IX.</i> Baccalaureate Generalist Nursing Practice			X		X	X	X	X	X	X		

Crosswalk of CNL Courses (2005 Curriculum) with Master's Essentials

CNL Courses	NURS 501	NURS 503	NURS 505	NURS 507	NURS 508	NURS 509	NURS 511	NURS 514	NURS 517	NURS 523	NURS 625	NURS 736
<i>Essential I.</i> Background for Practice from Sciences and Humanities	x	x	x	x	x	x	x	x	x	x	x	x
<i>Essential II.</i> Organizational and Systems Leadership			x	x	x	x	x	x	x	x	x	
<i>Essential III.</i> Quality Improvement and Safety	x	x	x	x	x	x	x	x	x	x	x	x
<i>Essential IV.</i> Translating and Integrating Scholarship into Practice	x	x	x	x	x	x	x	x	x	x	x	x
<i>Essential V.</i> Informatics and Health Care Technologies	x	x	x	x	x	x	x	x	x	x	x	x
<i>Essential VI.</i> Health Policy and Advocacy			x	x	x	x	x	x	x	x	x	
<i>Essential VII.</i> Interprofessional Collaboration for Improving Patient and Population Health Outcomes		x	x	x	x	x	x	x	x	x	x	x
<i>Essential VIII.</i> Clinical Prevention and Population Health for Improving Health			x	x	x	x	x	x	x	x	x	
<i>Essential IX.</i> MS-Level Nursing Practice	x	x	x	x	x	x	x	x	x	x	x	x

Congruence of CNL Courses (2014) with Master's Essentials

CNL Courses	NURS 501	NURS 503	NURS 505	NURS 507	NURS 508	NURS 509	NURS 511	NURS 514	NURS 517	NURS 523	NURS 625	NURS 736
<i>Essential I.</i> Background for Practice from Sciences and Humanities	X	X	X	X	X	X	X	X	X	X	X	X
<i>Essential II.</i> Organizational and Systems Leadership			X	X	X	X	X	X	X	X	X	
<i>Essential III.</i> Quality Improvement and Safety	X	X	X	X	X	X	X	X	X	X	X	X
<i>Essential IV.</i> Translating and Integrating Scholarship into Practice	X	X	X	X	X	X	X	X	X	X	X	X
<i>Essential V.</i> Informatics and Health Care Technologies	X	X	X	X	X	X	X	X	X	X	X	X
<i>Essential VI.</i> Health Policy and Advocacy			X	X	X	X	X	X	X	X	X	
<i>Essential VII.</i> Interprofessional Collaboration for Improving Patient and Population Health Outcomes		X	X	X	X	X	X	X	X	X	X	X
<i>Essential VIII.</i> Clinical Prevention and Population Health for Improving Health			X	X	X	X	X	X	X	X	X	
<i>Essential IX.</i> Master's-Level Nursing Practice	X	X	X	X	X	X	X	X	X	X	X	X

Appendix IIIB-6

Analysis of Congruence of RN-MS Courses with Baccalaureate and Master's Essentials

Baccalaureate Essentials with RN-MS Courses	NURS 450	NURS 452	NURS 454	NURS 460	NURS 467
<i>Essential I.</i> Liberal Education for Baccalaureate Generalist Nursing Practice	x	x		x	x
<i>Essential II.</i> Basic Organizational and Systems Leadership for Quality Care and Patient Safety	x			x	x
<i>Essential III.</i> Scholarship for Evidence-Based Practice		x			
<i>Essential IV.</i> Information Management and Application of Patient Care Technology				x	
<i>Essential V.</i> Health Care Policy, Finance, and Regulatory Environments	x	x			
<i>Essential VI.</i> Interprofessional Communication and Collaboration for Improving Patient Health Outcomes	x		x	x	x
<i>Essential VII.</i> Clinical Prevention and Population Health			x		x
<i>Essential VIII.</i> Professionalism and Professional Values	x				
<i>Essential IX.</i> Baccalaureate Generalist Nursing Practice	x		x		

Master's Essentials with RN-MS Courses	NURS 690	NURS 691	NURS 692	NURS 695
<i>Essential I. Background for Practice from Sciences and Humanities</i>				
1. Integrate nursing and related sciences into the delivery of advanced nursing care to diverse populations.		x	x	x
2. Incorporate current and emerging genetic/genomic evidence in providing advanced nursing care to individuals, families, and communities while accounting for patient values and clinical judgment.				
3. Design nursing care for a clinical or community-focused population based on biopsychosocial, public health, nursing, and organizational sciences.			x	x
4. Apply ethical analysis and clinical reasoning to assess, intervene, and evaluate advanced nursing care delivery.			x	x
5. Synthesize evidence for practice to determine appropriate application of interventions across diverse populations.			x	x
6. Use quality processes and improvement science to evaluate care and ensure patient safety for individuals and communities.			x	
7. Integrate organizational science and informatics to make changes in the care environment to improve health outcomes.		x	x	x
8. Analyze nursing history to expand thinking and provide a sense of professional heritage and		x		

Master's Essentials with RN-MS Courses	NURS 690	NURS 691	NURS 692	NURS 695
identity.				
Essential II. Organizational and Systems Leadership				
1. Apply leadership skills and decision making in the provision of culturally responsive, high-quality nursing care, health care team coordination, and the oversight and accountability for care delivery and outcomes.	x	x	x	x
2. Assume a leadership role in effectively implementing patient safety and quality improvement initiatives within the context of the interprofessional team using effective communication (scholarly writing, speaking, and group interaction) skills.	x		x	x
3. Develop an understanding of how health care delivery systems are organized and financed (and how this affects patient care) and identify the economic, legal, and political factors that influence health care.	x	x	x	x
4. Demonstrate the ability to use complexity science and systems theory in the design, delivery, and evaluation of health care.			x	x
5. Apply business and economic principles and practices, including budgeting, cost/benefit analysis, and marketing, to develop a business plan.			x	x
6. Design and implement systems change strategies that improve the care environment.			x	x
7. Participate in the design and implementation of new models of care delivery and coordination.				x
Essential III. Quality Improvement and Safety				
1. Analyze information about quality initiatives recognizing the contributions of individuals and interprofessional health care teams to improve health outcomes across the continuum of care.	x	x	x	
2. Implement evidence-based plans based on trend analysis and quantify the impact on quality and safety.			x	x
3. Analyze information and design systems to sustain improvements and promote transparency using high reliability and just culture principles.			x	
4. Compare and contrast several appropriate quality improvement models.			x	
5. Promote a professional environment that includes accountability and high-level communication skills when involved in peer review, advocacy for patients and families, reporting of errors, and professional writing.				x
6. Contribute to the integration of health care services within systems to affect safety and quality of care to improve patient outcomes and reduce fragmentation of care.			x	x
7. Direct quality improvement methods to promote culturally responsive, safe, timely, effective, efficient, equitable, and patient-centered care.			x	
8. Lead quality improvement initiatives that integrate socio-cultural factors affecting the delivery of nursing and health care services.			x	
Essential IV. Translating and Integrating Scholarship into Practice				
1. Integrate theory, evidence, clinical judgment, research, and interprofessional perspectives using translational processes to improve practice and associated health outcomes for patient			x	x

Master's Essentials with RN-MS Courses	NURS 690	NURS 691	NURS 692	NURS 695
aggregates.				
2. Advocate for the ethical conduct of research and translational scholarship (with particular attention to the protection of the patient as a research participant).				
3. Articulate to a variety of audiences the evidence base for practice decisions, including the credibility of sources of information and the relevance to the practice problem confronted.				X
4. Participate, leading when appropriate, in collaborative teams to improve care outcomes and support policy changes through knowledge generation, knowledge dissemination, and planning and evaluating knowledge implementation.			X	X
5. Apply practice guidelines to improve practice and the care environment.				X
6. Perform rigorous critique of evidence derived from databases to generate meaningful evidence for nursing practice.	X	X	X	X
Essential V. Informatics and Health Care Technologies				
1. Analyze current and emerging technologies to support safe practice environments, and to optimize patient safety, cost-effectiveness, and health outcomes.			X	X
2. Evaluate outcome data using current communication technologies, information systems, and statistical principles to develop strategies to reduce risks and improve health outcomes.				
3. Promote policies that incorporate ethical principles and standards for the use of health and information technologies.				X
4. Provide oversight and guidance in the integration of technologies to document patient care and improve patient outcomes.				
5. Use information and communication technologies, resources, and principles of learning to teach patients and others.				
6. Use current and emerging technologies in the care environment to support lifelong learning for self and others.				
Essential VI. Health Policy and Advocacy				
1. Analyze how policies influence the structure and financing of health care, practice, and health outcomes.		X	X	
2. Participate in the development and implementation of institutional, local, and state and federal policy.				X
3. Examine the effect of legal and regulatory processes on nursing practice, health care delivery, and outcomes.	X	X	X	X
4. Interpret research, bringing the nursing perspective, for policy makers and stakeholders.				X
5. Advocate for policies that improve the health of the public and the profession of nursing.				X
Essential VII. Interprofessional Collaboration for Improving Patient and Population Health Outcomes				
1. Advocate for the value and role of the professional nurse as member and leader of interprofessional health care teams.				X
2. Understand other health professions' scopes of practice to maximize contributions within the	X	X	X	X

Master's Essentials with RN-MS Courses	NURS 690	NURS 691	NURS 692	NURS 695
health care team.				
3. Employ collaborative strategies in the design, coordination, and evaluation of patient-centered care.				
4. Use effective communication strategies to develop, participate, and lead interprofessional teams and partnerships.	x	x	x	x
5. Mentor and coach new and experienced nurses and other members of the health care team.				
6. Functions as an effective group leader or member based on an in-depth understanding of team dynamics and group processes.				x
Essential VIII. Clinical Prevention and Population Health for Improving Health				
1. Synthesize broad ecological, global and social determinants of health; principles of genetics and genomics; and epidemiologic data to design and deliver evidence based, culturally relevant clinical prevention interventions and strategies.				
2. Evaluate the effectiveness of clinical prevention interventions that affect individual and population-based health outcomes using health information technology and data sources.				x
3. Design patient-centered and culturally responsive strategies in the delivery of clinical prevention and health promotion interventions and/or services to individuals, families, communities, and aggregates/clinical populations.			x	x
4. Advance equitable and efficient prevention services, and promote effective population-based health policy through the application of nursing science & other scientific concepts.			x	
5. Integrate clinical prevention and population health concepts in the development of culturally relevant and linguistically appropriate health education, communication strategies, and interventions.				
Essential IX. Master's-Level Nursing Practice				
1. Conduct a comprehensive and systematic assessment as a foundation for decision making.	x	x	x	x
2. Apply the best available evidence from nursing and other sciences as the foundation for practice.				x
3. Advocate for patients, families, caregivers, communities, and members of the health care team.				x
4. Use information and communication technologies to advance patient education, enhance accessibility of care, analyze practice patterns, and improve health care outcomes, including nurse sensitive outcomes.				x
5. Use leadership skills to teach, coach, and mentor other members of the health care team.				x
6. Use epidemiological, social, and environmental data in drawing inferences regarding the health status of patient populations and interventions to promote and preserve health and healthy lifestyles.	x			x
7. Use knowledge of illness and disease management to provide evidence-based care to populations, perform risk assessments, and design plans or programs of care.				
8. Incorporate core scientific and ethical principles in identifying potential and actual ethical issues arising from practice, including the use of technologies, and in assisting patients and other				

Master's Essentials with RN-MS Courses	NURS 690	NURS 691	NURS 692	NURS 695
health care providers to address such issues.				
9. Apply advanced knowledge of the effects of global environmental, individual and population characteristics to the design, implementation, and evaluation of care.				
10. Employ knowledge and skills in economics, business principles, and systems in the design, delivery, and evaluation of care.	x	x	x	x
11. Apply theories and evidence-based knowledge in leading, as appropriate, the health care team to design, coordinate, and evaluate the delivery of care.	x	x	x	x
12. Apply learning, and teaching principles to the design, implementation, and evaluation of health education programs for individuals or groups in a variety of settings.			x	
13. Establish therapeutic relationships to negotiate patient-centered, culturally appropriate, evidence-based goals and modalities of care.			x	
14. Design strategies that promote lifelong learning of self and peers and that incorporate professional nursing standards and accountability for practice.				
15. Integrate an evolving personal philosophy of nursing and health care into one's nursing practice.	x	x	x	x

Appendix IIIB-7

Analysis of Congruence of DNP Courses and AACN Essentials of Doctoral Education for Advanced Nursing Practice

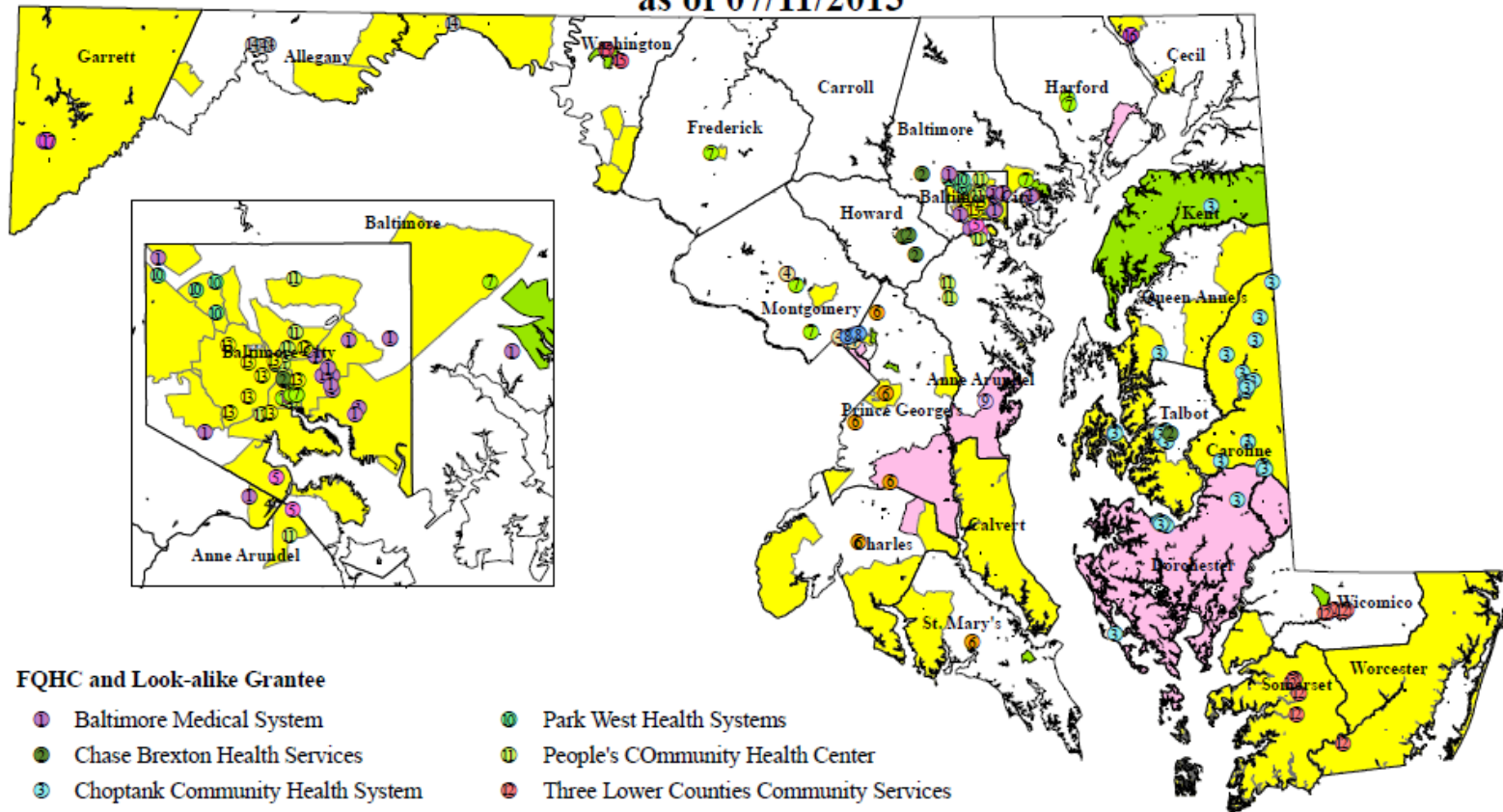
AACN Doctoral Essentials	NRSG 780	NRSG 782	NRSG 790	NRSG 795	NDNP 804	NDNP 807- 808	NDNP 814- 817	NDNP 811- 813
Essential I. Scientific Underpinnings for Practice								
1. Integrate nursing science with knowledge from ethics, the biophysical, psychosocial, analytical, and organizational sciences as the basis for the highest level of nursing practice.			X		X		X	X
2. Use science-based theories and concepts to: <ul style="list-style-type: none"> • determine the nature and significance of health and health care delivery phenomena • describe the actions and advanced strategies to enhance, alleviate, and ameliorate health and health care delivery phenomena as appropriate, and evaluate outcomes 	X		X		X		X	X
3. Develop and evaluate new practice approaches based on nursing theories and theories from other disciplines.	X		X		X			X
Essential II. Organizational and Systems Leadership for Quality Improvement and Systems Thinking								
1. Develop and evaluate care delivery approaches that meet current and future needs of patient populations based on scientific findings in nursing and other clinical sciences, as well as organizational, political, and economic sciences.		X	X				X	X
2. Ensure accountability for quality of health care and patient safety for populations with whom they work. <ul style="list-style-type: none"> a. Use advanced communication skills/processes to lead quality improvement and patient safety initiatives in health care systems. b. Employ principles of business, finance, economics, and health policy to develop and implement effective plans for practice-level and/or system-wide practice initiatives that will improve the quality of care delivery. c. Develop and/or monitor budgets for practice initiatives. d. Analyze the cost-effectiveness of practice initiatives accounting for risk and improvement of health care outcomes. e. Demonstrate sensitivity to diverse organizational cultures and populations, including patients and providers. 		X					X	X
3. Develop and/or evaluate effective strategies for managing the ethical dilemmas inherent in patient care, the health care organization, and research.		X					X	

AACN Doctoral Essentials	NRSG 780	NRSG 782	NRSG 790	NRSG 795	NDNP 804	NDNP 807- 808	NDNP 814- 817	NDNP 811- 813
Essential III. Clinical Scholarship and Analytical Methods for Evidence-Based Practice								
1. Use analytic methods to critically appraise existing literature and other evidence to determine and implement the best evidence for practice.	x		x	x	x			x
2. Design and implement processes to evaluate outcomes of practice, practice patterns, and systems of care within a practice setting, health care organization, or community against national benchmarks to determine variances in practice outcomes and population trends.	x		x	x			x	x
3. Design, direct, and evaluate quality improvement methodologies to promote safe, timely, effective, efficient, equitable, and patient-centered care.			x	x			x	x
4. Apply relevant findings to develop practice guidelines and improve practice and the practice environment.			x	x			x	x
5. Use information technology and research methods appropriately to: <ul style="list-style-type: none"> • collect appropriate and accurate data to generate evidence for nursing practice • inform and guide the design of databases that generate meaningful evidence for nursing practice • analyze data from practice • design evidence-based interventions • predict and analyze outcomes • examine patterns of behavior and outcomes • identify gaps in evidence for practice 			x	x				x
6. Function as a practice specialist/consultant in collaborative knowledge-generating research.			x					x
7. Disseminate findings from evidence-based practice and research to improve health care outcomes			x					x
Essential IV. Information Systems/Technology and Patient Care Technology for the Improvement and Transformation of Health Care								
1. Design, select, use, and evaluate programs that evaluate and monitor outcomes of care, care systems, and quality improvement including consumer use of health care information systems.		x			x	x		x
2. Analyze and communicate critical elements necessary to the selection, use and evaluation of health care information systems and patient care technology.		x				x		x
3. Demonstrate the conceptual ability and technical skills to develop and execute an evaluation plan involving data extraction from practice information systems and databases.						x		x
4. Provide leadership in the evaluation and resolution of ethical and legal issues		x				x		x

AACN Doctoral Essentials	NRSG 780	NRSG 782	NRSG 790	NRSG 795	NDNP 804	NDNP 807- 808	NDNP 814- 817	NDNP 811- 813
within health care systems relating to the use of information, information technology, communication networks, and patient care technology.								
5. Evaluate consumer health information sources for accuracy, timeliness, and appropriateness.						x		
Essential V. Health Care Policy for Advocacy in Health Care								
1. Critically analyze health policy proposals, health policies, and related issues from the perspective of consumers, nursing, other health professions, and other stakeholders in policy and public forums.	x	x	x				x	x
2. Demonstrate leadership in the development and implementation of institutional, local, state, federal, and/or international health policy.		x					x	x
3. Influence policymakers through active participation on committees, boards, or task forces at the institutional, local, state, regional, national, and/or international levels to improve health care delivery and outcomes.		x					x	x
4. Educate others, including policymakers at all levels, regarding nursing, health policy, and patient care outcomes.		x					x	x
5. Advocate for the nursing profession within the policy and health care communities.		x					x	x
6. Develop, evaluate, and provide leadership for health care policy that shapes health care financing, regulation, and delivery.		x					x	x
7. Advocate for social justice, equity, and ethical policies within all health care arenas.	x						x	x
Essential VI. Interprofessional Collaboration for Improving Patient and Population Health Outcomes								
1. Employ effective communication and collaborative skills in the development and implementation of practice models, peer review, practice guidelines, health policy, standards of care, and/or other scholarly products.							x	x
2. Lead interprofessional teams in the analysis of complex practice and organizational issues.							x	x
3. Employ consultative and leadership skills with intraprofessional and interprofessional teams to create change in health care and complex health care delivery systems.							x	x
Essential VII. Clinical Prevention and Population Health for Improving the Nation's Health								
1. Analyze epidemiological, biostatistical, environmental, and other appropriate scientific data related to individual, aggregate, and population health.	x		x	x	x			x
2. Synthesize concepts, including psychosocial dimensions and cultural diversity, related to clinical prevention and population health in developing, implementing,	x		x					

AACN Doctoral Essentials	NRSG 780	NRSG 782	NRSG 790	NRSG 795	NDNP 804	NDNP 807- 808	NDNP 814- 817	NDNP 811- 813
and evaluating interventions to address health promotion/disease prevention efforts, improve health status/access patterns, and/or address gaps in care of individuals, aggregates, or populations.								
3. Evaluate care delivery models and/or strategies using concepts related to community, environmental and occupational health, and cultural and socioeconomic dimensions of health.	x							x
Essential VIII. Advanced Nursing Practice								
1. Conduct a comprehensive and systematic assessment of health and illness parameters in complex situations, incorporating diverse and culturally sensitive approaches.				Practicum				
2. Design, implement, and evaluate therapeutic interventions based on nursing science and other sciences.								
3. Develop and sustain therapeutic relationships and partnerships with patients (individual, family or group) and other professionals to facilitate optimal care and patient outcomes.								
4. Demonstrate advanced levels of clinical judgment, systems thinking, and accountability in designing, delivering, and evaluating evidence-based care to improve patient outcomes.			x				x	x
5. Guide, mentor, and support other nurses to achieve excellence in nursing practice.				Practicum				
6. Educate and guide individuals and groups through complex health and situational transitions.								
7. Use conceptual and analytical skills in evaluating the links among practice, organizational, population, fiscal, and policy issues.			x		x		x	x
8. All DNP graduates, prepared as APNs, must be prepared to sit for national specialty APN certification.								

Appendix III-E-1
**Maryland Medically Underserved Area and Population Designations (MUA/Ps),
 Federally Qualified Health Centers (FQHCs) and Look-alike Sites
 as of 07/11/2013**



FQHC and Look-alike Grantee

- | | |
|---|---|
| ① Baltimore Medical System | ⑩ Park West Health Systems |
| ② Chase Brexton Health Services | ⑪ People's Community Health Center |
| ③ Choptank Community Health System | ⑫ Three Lower Counties Community Services |
| ④ Community Clinic | ⑬ Total Health Care |
| ⑤ Family Health Centers of Baltimore | ⑭ Tri-State Community Health Center |
| ⑥ Greater Baden Medical Service | ⑮ Walnut Street Community Health Center |
| ⑦ Health Care for the Homeless | ⑯ West Cecil Health Center |
| ⑧ Mary's Center for Maternal and Child Care | ⑰ Western Maryland Health Care Cororation |
| ⑨ Owensville Primary Care, Inc | |

- Medically Underserved Area (MUA)
- Medically Underserved Population (MUP)
- Governor Exceptional MUP

Created by Office of Primary Care Access, HSIA, Maryland DHMH /Source: HRSA Data Warehouse

Appendix III G-1



NURS 487 Student Evaluation of Preceptor and Site

- Clinical/Practicum site: _____
- Preceptor: _____
- Year: _____
- Semester: ___ Fall ___ Spring ___ Summer

Directions: The assessment of the practicum site experience is a critical element in efforts to improve the curriculum. Please indicate the extent to which you agree or disagree with the following statements (1=Strongly Disagree and 5=Strongly Agree). Please feel free to add comments and suggestions in the space provided at the bottom of the page.

The clinical/practicum site....

1. Offered a range of learning opportunities.	1	2	3	4	5
2. Provided a supportive learning environment	1	2	3	4	5
3. Provided effective role models.	1	2	3	4	5
4. Was consistent in meeting the course objectives	1	2	3	4	5
5. Provided a variety of interpersonal and/or technical opportunities for professional growth.	1	2	3	4	5

The preceptor....

6. Provided clear and concise communication.	1	2	3	4	5
7. Created a positive learning environment.	1	2	3	4	5
8. Demonstrated knowledge of course/specialty content.	1	2	3	4	5
9. Gave constructive feedback on performance.	1	2	3	4	5
10. Used clinical/ practice environment for planned and unplanned learning experiences.	1	2	3	4	5

11. What other learning experiences were available? (check all that apply)

- 1. In-service education programs
- 2. Special testing, procedures, or laboratory experiences
- 3. Team meetings, conferences, or rounds
- 4. Administrative or management meetings
- 5. Other: _____

12. Overall, how would you rate the experience at this site? (check only one)

- 1. Excellent. Would not hesitate to recommend this site for another student.
- 2. Good. Would recommend for another student.
- 3. Fair. Site and experiences need further development.
- 4. Poor. Site and experiences are not adequately developed.

13. What suggestions would you give to help students be better prepared for this experience?

14. Additional comments:

Appendix III G-2



UNIVERSITY of MARYLAND
SCHOOL OF NURSING

NURS 487 Site Visit Form

Student: _____ Hours completed: _____

Date and time of visit: _____ Type of visit: Onsite ___ Phone ___

Faculty performing visit: _____ Site/Unit _____

Nurse Manager _____ Primary Preceptor _____

Secondary Preceptor (if applicable) _____

Feedback
(Preceptor) _____

Types of Clinical Experiences:

Student Progress toward learning objectives:

Surpassing ___ Acceptable ___ Needs work ___

Student's Feedback:

Instructor Feedback:

Joint Goals for remainder of practicum:

Appendix III G-3

Instruction Page

University of Maryland School of Nursing Doctor of Nursing Practice Program (DNP) Clinical Evaluations

Checklist:

UMSON Faculty

- (STEP 1) Clinical Placement Form approved prior to practicum/scholarly project experience.
- (STEP 2) Mutually agree with student and preceptor student's course objectives, requirements & evaluation.
- (STEP 3) Distribute student, preceptor, and practicum experience evaluation at the beginning of practicum/Scholarly project experience.
- (STEP 4) Collect the student, preceptor, and practicum experience evaluation at the end of the practicum/Scholarly project experience.

STUDENT

- (STEP 1) Complete all objectives & requirements for practicum/Scholarly project experience.
- (STEP 2) *Complete preceptor and practicum experience evaluation.
- (STEP 3) *Complete summary report (*see below*).
- (STEP 4) Submit preceptor and practicum evaluation at the end of the practicum/Scholarly project experience to UMSON supervising faculty.

AGENCY/PRECEPTOR

- (STEP 1) Review and support student's course objectives, requirements, and evaluation of practicum experience prior to beginning of practicum experience.
- (STEP 2) Submit Preceptor's Evaluation of Student's Performance at the end of practicum experience to UMSON supervising faculty.

To Student:

Prepare a typed **Summary Report** to be submitted with the practicum evaluation form. The report should include:

1. Description of activities performed during placement, noting any deviations from the practicum learning agreement.
2. How well did the practicum experience integrate what you learned in your formal DNP course work?
3. What did you gain from the experience, identifying problems if they occurred?
4. Extent to which your educational objectives were achieved, including evidence of outcomes and/or deliverables. (These are identified in the student's Independent Study contract or course syllabus.)
5. Provide record of practicum hours completed using the DNP Practicum Hours Log (S:\Doctoral\DNP\DNP Program Folder\DNP Course Schedules & Degree Audit tools\DNP Practicum Hours Log)

*IMPORTANT NOTICE:

Evaluation & Summary report required for course completion

**DNP Practicum Experience
Student's Evaluation of Practicum & Preceptor**

Preceptor:	Student Name:
Semester: Year:	Evaluation Date:
Site/Agency:	Faculty:

SECTION I - Practicum Experience Evaluation

My practicum experience . . .			
Criteria	RATING		
1. Contributed to the development of my specific DNP expertise.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
2. Provided me with the opportunity to meet my learning objectives.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
3. Provided the opportunity to use skills obtained in DNP classes.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
4. Added new information and/or skills needed as a DNP.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
5. Challenged me to work at my highest level.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
6. Served as a valuable learning experience in advanced nursing practice.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
7. The organization provided an adequate orientation and safe working environment.	<input type="checkbox"/> Yes <input type="checkbox"/> No		
8. I would recommend this organization to others for a future practicum.	<input type="checkbox"/> Yes <input type="checkbox"/> No		

SECTION II - Evaluation of Preceptor

My preceptor . . .			
Criteria	RATING		
1. Provided an adequate orientation to the unit.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
2. Met with me periodically to discuss progress towards learning objectives.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
3. Provided constructive feedback.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
4. Provided sufficient number of learning experiences appropriate to course objectives.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
5. Was easily accessible.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
6. Allocated sufficient time for consultation.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
7. Role-modeled professional practice and behaviors.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
8. Encouraged discussion of clinical and operational activities, differing viewpoints and questions.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
9. Encouraged self-direction in practicum.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
10. Enabled me to achieve my learning objectives	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
11. Initiated communication relevant to my practicum that he/she considered of interest to me.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
12. Was knowledgeable in his/her area of responsibility.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
13. I would recommend my preceptor for future student practicums	<input type="checkbox"/> Yes <input type="checkbox"/> No		

Comments:

Student's Signature: _____ Date: ____/____/____

Return completed form to:

UMSON Faculty Name:		Telephone/Ext.:	
UMSON Faculty Address:		Email address:	
<i>FACULTY EVALUATION of SITE (for UMSON faculty use only):</i>			
I would recommend this organization for a future practicum <input type="checkbox"/> Yes <input type="checkbox"/> No			

**DNP Practicum Experience
Preceptor's Evaluation of Student's Performance**

Semester: _____ Year: _____

Student's Name:	Preceptor's Name/Title:
Agency:	Faculty:

Please evaluate if the student met the following criteria during the practicum:

The student . . .	RATING		
1. Achieved practicum experience objectives	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
2. Completed work assignment(s) in agreed upon time.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
3. Was knowledgeable of the special projects assigned.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
4. Worked independently.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
5. Followed-through on assignments.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
6. Exercised initiative.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
7. Accepted direction and/or feedback.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
8. Worked effectively within a group.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
9. Was well prepared.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
10. Demonstrated leadership behaviors.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
11. Communicated effectively.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
12. Related to and worked well with external organizations.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
13. Brought appropriate skills to the project.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
14. Brought appropriate knowledge to the project.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
15. Brought academic perspective to our organization.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A

16. University of Maryland School of Nursing (UMSON) faculty member was easily accessible for questions or concerns. <input type="checkbox"/> Yes <input type="checkbox"/> No (if no, please explain)
17. Would you recommend that UMSON DNP place another student with your agency for a practicum experience? <input type="checkbox"/> Yes <input type="checkbox"/> No (if no, please explain)

Comments:

Evaluator's Signature: _____ Date: ___/___/___

Return completed form to:

UMSON Faculty Name:		Telephone/Fax:	
UMSON Faculty Address:			
<i>Email address:</i>			

Course Evaluation Questionnaire

University of Maryland School of Nursing Course Evaluation Questionnaire

This survey helps assess and improve the quality of our courses and faculty. Please complete the course identifying information below. We encourage written comments and suggestions at the end of this form.

Course	Section	Instructor's Last Name	Semester	Year
<input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9	<input type="checkbox"/> 0 <input type="checkbox"/> 1	<input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9	<input type="radio"/> Winter <input type="radio"/> Spring <input type="radio"/> Summer <input type="radio"/> Fall	<input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9

Marking Instructions

INCORRECT MARKS

CORRECT MARK

Please use a No. 2 Pencil only.

Please record the number representing your response by filling in the appropriate oval at the right of each statement

Response:

Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	Not Applicable
-------------------	----------	---------	-------	----------------	----------------

In this course:

1. Content flowed logically from objectives. 1 2 3 4 5 6
2. The amount of work for credit earned was about right. 1 2 3 4 5 6
3. Textbook, readings and other instructional materials contributed to my learning. 1 2 3 4 5 6
4. Assignments were consistent with course objectives. 1 2 3 4 5 6
5. Materials were accessible. 1 2 3 4 5 6
6. Materials helped meet course objectives. 1 2 3 4 5 6
7. Evaluation measured objectives appropriately. 1 2 3 4 5 6
8. Assignments/examinations reflected course content. 1 2 3 4 5 6
9. Technology used in the course enhanced my learning. 1 2 3 4 5 6
10. Feedback provided on assignments was useful. 1 2 3 4 5 6
11. I learned useful information. 1 2 3 4 5 6

This instructor:

12. Was knowledgeable about course content. 1 2 3 4 5 6
13. Used effective teaching strategies to meet objectives. 1 2 3 4 5 6
14. Demonstrated ability to clearly convey complex material, using examples and illustrations. 1 2 3 4 5 6
15. Was adequately prepared. 1 2 3 4 5 6

PLEASE TURN OVER



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This instructor: (continued)

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	Not Applicable
16. Presented information in a logical flow.	1	2	3	4	5	6
17. Provided constructive feedback throughout the course.	1	2	3	4	5	6
18. Encouraged discussion and questions.	1	2	3	4	5	6
19. Acknowledged various points of view.	1	2	3	4	5	6
20. Applied consistent standards in evaluating work.	1	2	3	4	5	6
21. Treated students with respect.	1	2	3	4	5	6

For this technology enhanced course:

All of these items may not be applicable to every course. If one or more is not applicable to this one, simply mark "6" (not applicable):

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	Not Applicable
22. My level of technical expertise with computers and the internet at the start of the course was sufficient.	1	2	3	4	5	6
23. Hardware and software requirements were adequate to complete the course.	1	2	3	4	5	6
24. Course navigation was easily executed.	1	2	3	4	5	6
25. Readings, multimedia, and discussion questions worked together to promote efficient and effective learning.	1	2	3	4	5	6
26. I knew whom to contact when I had technical questions.	1	2	3	4	5	6
27. I received prompt response to my technical questions.	1	2	3	4	5	6
28. I was adequately prepared to use the instructional technology required in this course.	1	2	3	4	5	6
29. The examination process was easily executed.	1	2	3	4	5	6
30. Submission of materials to instructor was easy.	1	2	3	4	5	6

31. What did you like most about this course? _____

32. What did you like least about this course? _____

33. What could be done to improve this course? _____

34. What activity contributed most to your learning? _____

Appendix IVA-2

Program Assessment Questionnaire

UNIVERSITY OF MARYLAND SCHOOL OF NURSING PROGRAM ASSESSMENT QUESTIONNAIRE

USE A PENCIL ONLY
INCORRECT MARKS CORRECT MARK

Year Graduated:
 (Fill in two digit year)

Month Graduated: Dec
 May
 Aug
 (Fill in month)

Cumulative GPA:
 (Estimate if you can't remember exactly)

Type of degree program:

BSN Traditional RN to MS MS/CNL PhD
 RN to BSN MS/MBA MS DNP
 Other (specify): _____

If master's, mark your official specialty or the one that best fits your master's program:

Adult Primary Care Nurse Practitioner Family Nurse Practitioner Nurse-Midwifery
 Advanced Practice Pediatric Nursing Gerontological Nurse Practitioner Oncology
 Clinical Nurse Leader Health Services Leadership & Management Psychiatric-Mental Health Nursing
 Clinical Research Management Nurse Anesthesia Trauma Critical Care & Emergency Nursing
 Community/Public Health Nursing Nursing Informatics

A. PROGRAM UTILITY AND EFFICACY

To what degree did your program:

1. help you acquire necessary nursing skills?	1	2	3	4	5
2. provide overall intellectual growth?	1	2	3	4	5
3. enhance your personal growth?	1	2	3	4	5
4. provide help toward achieving your career goals?	1	2	3	4	5
5. provide integration of courses and other learning experiences into a meaningful whole?	1	2	3	4	5
6. require you to use the skills you had prior to entry?	1	2	3	4	5
7. prepare you for a position appropriate to the level of education?	1	2	3	4	5
8. encourage collegial behavior among you and your peers?	1	2	3	4	5
9. enhance your commitment to professional nursing?	1	2	3	4	5
10. provide role models in nursing practice (including direct practice and indirect practice such as education or administration or health policy development)?	1	2	3	4	5
11. provide role models in scholarly conduct?	1	2	3	4	5
12. prepare you to assume responsibility for self assessment and continuing professional development?	1	2	3	4	5
13. provide you access to clinical agencies with suitable nursing role models?	1	2	3	4	5

B. CURRICULUM OPTIONS AND INDIVIDUALIZATION

What is your level of satisfaction with:

14. alternatives in meeting course objectives?	1	2	3	4	5
15. alternatives in meeting program objectives?	1	2	3	4	5
16. academic advising?	1	2	3	4	5
17. course scheduling?	1	2	3	4	5
18. course sequencing?	1	2	3	4	5
19. the degree your former experiences were taken into account in curriculum planning?	1	2	3	4	5
20. the degree your special learning needs were met?	1	2	3	4	5
21. amount of input you had or could have had into your program?	1	2	3	4	5

C. TIME EFFICIENCY AND STUDENT DEMANDS

To what degree were you satisfied that there was:

22. no unnecessary duplication of clinical experiences?	1	2	3	4	5
23. no unnecessary duplication of theoretical content?	1	2	3	4	5

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C. TIME EFFICIENCY AND STUDENT DEMANDS (continued)

To what degree were you satisfied that there was:

	Completely Dissatisfied	Dissatisfied	Neutral	Satisfied	Completely Satisfied
24. an overall emphasis on scientific basis for nursing practices?	1	2	3	4	5
25. a well articulated curriculum?	1	2	3	4	5
26. manageability of demands?	1	2	3	4	5
27. adequate time for learning required content?	1	2	3	4	5
28. adequate presentation and application of the conceptual framework in School of Nursing course?	1	2	3	4	5

D. FACULTY STUDENT RELATIONSHIPS

How satisfied were you with faculty:

	Completely Dissatisfied	Dissatisfied	Neutral	Satisfied	Completely Satisfied
29. competence in theory presentations?	1	2	3	4	5
30. clinical competence?	1	2	3	4	5
31. concern for you as an individual?	1	2	3	4	5
32. concern for your overall education?	1	2	3	4	5
33. availability (during office hours or by appointment)?	1	2	3	4	5
34. sensitivity to your needs?	1	2	3	4	5

E. LEARNING RESOURCES

To what degree were the following satisfactory:

	Completely Dissatisfied	Dissatisfied	Neutral	Satisfied	Completely Satisfied
35. depth of clinical (or laboratory) experiences?	1	2	3	4	5
36. variety of clinical experiences?	1	2	3	4	5
37. variety of courses available to you?	1	2	3	4	5
38. depth of courses available to you?	1	2	3	4	5
39. financial assistance available to you?	1	2	3	4	5
40. classrooms?	1	2	3	4	5
41. conference rooms?	1	2	3	4	5
42. support services?	1	2	3	4	5
43. library holdings (books, journals, etc.)?	1	2	3	4	5
44. library hours?	1	2	3	4	5
45. library physical facilities?	1	2	3	4	5
46. library staff?	1	2	3	4	5
47. computer laboratory instructions?	1	2	3	4	5
48. computer laboratory hours?	1	2	3	4	5
49. computer laboratory hardware?	1	2	3	4	5
50. computer laboratory software?	1	2	3	4	5
51. currency of materials in the media center?	1	2	3	4	5
52. materials produced by the media center?	1	2	3	4	5
53. working condition of media equipment?	1	2	3	4	5
54. adequacy of School of Nursing physical facilities?	1	2	3	4	5

F. OVERALL IMPRESSIONS OF THE PROGRAM

	Completely Dissatisfied	Dissatisfied	Neutral	Satisfied	Completely Satisfied
55. Overall, how well satisfied are you with your program?	1	2	3	4	5
56. Would you recommend the program to others?	1	2	3	4	5

Appendix IVA-3

University of Maryland School of Nursing

Dashboard

Area	Measure	Responsible:
Operation *Semi-Annual (July 1 & January 1)	1. Revenue	Assistant Dean, Admin. Services
	a. State Funding	
	b. Tuition & Fees	
	2. Expenses	
	a. Faculty Salary	
	b. Staff Salary	
	c. Operation Expense	
	3. Budget Variance	
	4. External Funding	
	a. Research	
	b. Practice	
	c. Education	
	5. Foundation Revenue (Cash Received by the Foundation)	
	6. Staff	
	a. Total Budgeted FTE Filled Staff Lines	
	b. Total Budgeted FTE Open Staff Vacancy	
	7. Faculty	
	a. Total Budgeted FTE Filled Faculty Lines	
b. Total Budgeted FTE Open Faculty Vacancy		
8. Adjunct Faculty (Not FTE Faculty)		
a. Total Number of Adjunct Faculty		
b. Total Number of Open Adjunct Faculty		
Research *Semi-Annual (July 1 & January 1)	9. Grant Submitted	Associate Dean, Research
	a. Number of External Grants Submitted (non-NIH Grants)	
	b. Number of Training Grants Submitted	
	c. Number of NIH Grant Submitted	
Academic Performance *Semi-Annual (July 1 & January 1)	10. Enrollment (Number and %/total)	Assistant Dean, Student and Academic Services
	a. BSN	
	b. RN-BSN	
	c. RN-MS	
	d. MS-CNL	
	e. MS-Non-CNL	
	f. Post-BSN to DNP	
	g. Post-MS to DNP with Specialty	
	h. Post-MS to DNP	
	i. PhD	
	j. Post-BSN Certificate	
	k. Post-MS Certificate	
	l. Course Work Only	
	11. Completion Rate (Number and %/total)	
a. BSN		
b. RN-BSN		
c. RN-MS		
d. MS-CNL		

Area	Measure	Responsible:
	e. MS-Non-CNL	
	f. Post-BSN to DNP	
	g. Post-MS to DNP with Specialty	
	h. Post-MS to DNP	
	i. PhD	
	j. Post-BSN Certificate	
	k. Post-MS Certificate	
	12. Course Evaluation (on a 5-point scale)	Director of Evaluation
	a. BSN	
	b. RN-BSN	
	c. MS-CNL	
	d. MS-Non-CNL	
	e. DNP	
	f. PhD	
	13. Faculty Evaluation (on a 5-point scale)	
	a. BSN	
	b. RN-BSN	
	c. MS-CNL	
	d. MS-Non-CNL	
	e. DNP	
	f. PhD	
	14. NCLEX Pass Rate (Annually)	
	a. 1st time pass rate: BSN	
	b. 1st time pass rate: CNL	
	15. Certification Exam Pass Rate (Annually)	
	a. CNL:	
	b. Acute Care NP/CNS ANCC: AACN:	
	c. AGNP Primary Care ANCC: AANP:	
	d. CRNA:	
	e. FNP ANCC: AANP:	
	f. PNP Acute Care	
g. PNP Primary Care		
h. Psych/MH NP:		
16. Employment Rate (Annually)		
a. BSN		
b. CNL		

Appendix IVH-1

Program Assessment Tool

Quality Measures			
1.	Curriculum		
		Sources	Programmatic data and comments
	a. Evidence of content update and review	Curriculum committee minutes	
	b. Last time program reviewed/ approved by Curriculum Committee	Program minutes Advisory Board Minutes	
	c. Evidence that latest science included in courses		
	d. Logical sequencing of courses		
2.	Program		
	a. Alignment with National Standards	Accreditation Reports	
	b. Certifications 1) Are graduates eligible to set for exams? 2) What is the pass rate for graduates taking the exams?	ANA Scope of Practice ANA Standards of Practice CCNE Specialty National Standards	
	c. Course Evaluations (provide aggregate of past 3 years)	Certification Requirements Certification pass rates CEQ/FEQ	
3.	Students		
	a. Retention of Students		
	b. Stipends/ Scholarships Available		
	c. Mentoring Opportunities Available		

4.	Faculty		
	a. Faculty Practice Professional Service Contracts (PSA) b. Publications, Research, and Grants (please see Faculty appendices) c. Expertise in Specialty		
5.	Interdisciplinary Activities		
	a. Teaching b. Research c. Practice	Include UMB campus and Non-UMB campus activities	
6.	Admissions and Progressions		
	a. Faculty Involvement in: 1). Timely responses to inquiries r/t admissions 2). Recruitment b. Review of students to insure progression		
7.	Alignment with SON Strategic Plan		
		UMSON Strategic Plan 2012-2017	
8.	Additional Information		
	a. Professional membership and organizations b. Positions of leadership.		
Market Trends			
1.	Inquiries per Semester		
	a. Number of inquiries by website b. Number of inquiries to the program c. Number of applications applied and reviewed d. Number of applications accepted	Office of Student Affairs, Program Director, Faculty	

	e. Number of students actually enrolled		
2.	Enrollment Trends		
	a. Number of part-time students b. Number of full-time students c. Average length in the program d. Number In-State e. Number Out of State f. Graduation Rates	Office of Student Affairs, Program Director, Faculty	
3.	Workforce Projections		
	Future employment opportunities for graduates of your program	NLN, AACN, Workforce Capacity for State of Maryland	
4.	Employment Opportunities		
	a. Local b. Regional c. State	UMSON Employer Survey Alumni Survey	
5.	Societal Trends		
	a. Prospective (Anticipated workforce needs in short term and long term) b. Uniqueness (new demographic trends, opportunities for new areas of practice, filling an unique niche)	Environmental Scanning, assessment of trends in healthcare	
6.	Sustainability		
	Integration with the Strategic Plan	UMSON Strategic Plan	
7.	Special Faculty		
	a. Sufficient faculty for your specialty b. Recruitment Plan c. Retention Plan	Faculty, workload assignments	
8.	Additional information pertinent to market trends		
SWOT ANALYSIS			
1.	Strengths of the Program		
2.	Weaknesses of the Program		
3.	Opportunities		
4.	Threats to Program		

