

**UNIVERSITY OF WASHINGTON
GRADUATE PROGRAM REVIEW
UNIVERSITY OF WASHINGTON BOTHELL
NURSING PROGRAM**

**SELF-STUDY NARRATIVE
February 2008**

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Introduction

History and Context

The University of Washington Bothell (UWB) was **established by the Washington State Legislature in 1989 in order to meet the educational needs of place-bound citizens in the northern Puget Sound region.** The new UW Bothell and Tacoma (UWT) campuses opened in 1990 making the University of Washington a three campus university. The Nursing Program was established two years later with the transfer of the RN to BSN (RNB) completion program from the UW Seattle (UWS) School of Nursing (SON). Founding faculty included two full-time assistant professors, one associate professor who served as part-time program director, and a part-time program coordinator who later assumed the RNB advisor role. The first 56 RNB students were admitted (1992) and since then, over 1,100 RNB students have graduated. Sixty-nine students have been awarded their Master of Nursing degree since the launch of the MN program (2002). The faculty and staff have grown to include nine tenure-line faculty, three full-time lecturers, five part-time lecturers, and four staff serving 174 undergraduate and 50 graduate students during 2007-2008. Several phases can be used to describe the history and context of nursing education at the Bothell campus.

Start-up (1992-1995) encompassed the hiring of the initial RNB program faculty and staff, the graduation of the first four student cohorts, and the receipt of UW and Higher Education Coordinating Board (HECB) support for a Master of Nursing program (1995). This phase ended with significant internal turmoil culminating in the resignation of the first director and one of the two assistant professors. For a period of one year, remaining assistant professor (Leppa) continued the program with the help of several adjunct faculty and an interim (non-nursing) director (Decker). Dr. Leppa is the only remaining nursing faculty with institutional memory of this period. Persevering under tenuous circumstances at best, Dr. Leppa provided extraordinary leadership and continues today as our first full professor promoted through the UWB professorial ranks.

The **second phase** required a **rapid response to reestablish stability** and, after a national search, Dr. Lousteau was recruited from Seattle to serve as the second program director (1996-2002). During this phase, the unit experienced challenges in meeting FTE targets as nursing school enrollments declined nationally from 1995-2000. By 2001, this decline was reversing itself for entry-level BSN programs, but continued to decline for RNB programs such as ours and for associate degree (ADN) programs, the pathway for the majority of our students. The lagging nursing school enrollments provided an opportunity for the program to recruit, develop and stabilize faculty and staff. During Dr. Lousteau's tenure, Dr. Leppa was promoted to associate professor (1997), and three additional assistant professors were hired and promoted to associate professor with tenure in 2002 (Abrums) and in 2003 (Kovalesky & Sikma) respectively. In 1999 the faculty resources earmarked for the approved MN program were allocated to staff an off-site RNB cohort in Port Angeles (2000-2002), a project that was jointly funded through Tri-Campus Tools for Transformation. During this period of stabilization, UWS SON increased their nurse practitioner programming and the graduate education needs of our northern Puget Sound constituents evolved. In response to these factors, the approved, community-based, family nurse practitioner MN program was revised (2001) to focus on nursing leadership in education,

practice, and program development. Although the MN program was approved in 1995, additional staff resources or student FTE were not allocated until 2002.

In 2002, the third and current director (Baroni) of the UWB Nursing Program was hired in time to **facilitate the implementation of the new MN curriculum and to greet the first cohort of 29 students.** During 2002-03, the BSN program was **significantly under enrolled** even though the emerging nursing shortage was entering public awareness and nursing school enrollments were increasing. This under enrollment was exacerbated by the completion of the off-site RNB cohort in Port Angeles. Enrollment shortfalls were also inflated by the growing numbers of students employed by the University of Washington Medical Center (UWMC) and Harborview Medical Center (HMC) utilizing the Washington State tuition exemption (TE) status. A TE student can take up to six credits per quarter with waived tuition that is not otherwise subsidized by the university, medical centers, or the state, and TE enrollment is not included in FTE calculations. Although our fall 2002 RNB enrollment was under target (83%), the percentage reported to the state was even lower (72%) because of the TE enrollment count exclusion. Similarly, 14 (48%) of the 29 students in our first master's cohort were utilizing TE and thus not reportable. Systematic efforts to correct this situation over the next five years included revising the tuition exemption policy for this unit, increased recruitment efforts, and modifying curriculum to increase FTE efficiency.

Efforts over the next five years will focus on **strategic planning to assure program growth and sustainability.** Faculty and staff began this process last year with efforts continuing in 2007-08. Identified strategies include launching the northern counties off-site RNB program in Mount Vernon (autumn 2007), dialogue with downtown hospitals and long-term care centers regarding a downtown site, development of an accelerated RN to MN pathway, and planning for a new four year major in health studies. [See Introduction Attachment 1 for overall strategic plan.]

The process used to develop this self-study included opportunities for ongoing faculty and staff participation. During winter/spring 2007, the director drafted outlines of each required section. Every other week a draft section was emailed to faculty and staff for review, revisions and additions relevant for inclusion. By June 2007 each section had a draft outline of key points. This fall faculty and staff members provided further review of the entire document with final editing completing the process in time for submission. The following narrative addresses Sections A through G in accordance with the Graduate School Guidance. Required Appendices A through H are included along with selected Attachments as further documentation in support of this self-study.

General Self-Evaluation

A.1. Program Strengths: The UWB Nursing program is the smallest UWB program but one of the strongest and most visible within our target communities. **Our strengths derive from the development of faculty and staff who maintain high academic standards and the creation of flexible academic programs, innovative community partnerships, strong tri-campus collegial nursing relationships and result in our proudest achievement: student success.**

[See Section A Attachment 1 for listing of UW Bothell Nursing faculty and staff.]

All nine tenure-line and six of eight adjunct faculty are prepared at the doctoral level with seven having completed post-doctoral study: six at the UWS campus (Cooke, Leppa, Puzan, Salt, Shirley, Westbrook), one at Oregon Health Sciences University (Sikma), and one at the University of Michigan (Mohammed). All full-time faculty are prepared in advanced nursing (Master's or PhD) as well as in other disciplines such as medical anthropology (Abrums), human development and family studies (Baroni), public health (Mohammed), theology (Kovalesky), business administration (Westbrook), and education (Resnick) consistent with the campus commitment to an interdisciplinary focus. Efforts have been made to retain adjunct faculty over multiple years allowing the program to measure, evaluate and enhance curriculum. Drs. Puzan and Resnick have taught with us for more than five years each, and four current faculty are UWB RNB alumni who continued their education through Master's (Blachly: 1994, 2004; Bowman: 2001, 2004), Doctoral (Madison: 2000, 2007) or Post-Doctoral (Cooke: 1996, 2002) studies. It is particularly inspiring for our undergraduate and graduate students to see UWB alumni in faculty roles.

The faculty is **committed to innovative pedagogy and an expanded definition of scholarship** as outlined by Ernest Boyer (1990) who advocated for an expanded, more dynamic view of scholarship that includes discovery, integration, application and teaching. The Boyer model is the framework used to evaluate evidence of scholarship and has resulted in successful promotion and tenure for four faculty (Leppa, full professor, Abrums, Kovalesky & Sikma, associate professors with tenure). Six of the tenure-line faculty have been nominated for and three have been honored with the prestigious UW Distinguished Teaching Award. Although the Nursing program does not have specific focal areas, faculty are developing expertise in innovative pedagogy and clear clusters of faculty expertise are emerging around specialty areas such as Gerontology (Blachly, Leppa, Petry, and Sikma), American Indian Health (Madison, Mohammed), Diversity and Social Justice (Abrums, Cooke, Madison, Puzan, and Resnick), and Environmental Health (Bowman, Madison, and Westbrook).

Attesting to the **leadership skills and service commitments of the UWB nursing faculty** is the frequency with which they are recruited and participate in a variety of campus initiatives, regardless of the associated workload challenges. Examples of this campus and university leadership include the following: Dr. Baroni (director) served as co-chair of the UWB Chancellor Search for two years (2005-07); Dr. Leppa served as the Campus Academic Integrity Officer for four years; nursing faculty have been elected as UWB representatives to the UW faculty senate for four consecutive years (Kovalesky, Sikma); and one of two UWB faculty representatives to the UW Faculty Council on Tri-Campus Policy for the last six years (Leppa). All of the tenure-line nursing faculty have demonstrated significant faculty service to the Nursing program, the UWB campus, and the larger university and nursing communities. As the senior most faculty member, Dr. Leppa has had extraordinary service loads including chairing the Academic Integrity Task Force, and board memberships for Center for Instructional Development and Research (CIDR) and the Faculty Council on Tri-Campus Policy. She was recognized in 2007 as the first recipient of the Rose Distinguished Academic Service Award for "sustained outstanding academic service making an important difference to campus, University, region or discipline".

The program and students benefit from the long-term service of the two senior **nursing program staff** (Ogle & Lynn). Mary Anne Ogle has been with the program since its inception (1992) first as program coordinator and later as the RNB Program Advisor. Judy Lynn has been promoted from office assistant to Nursing Program Administrative Coordinator during her 10 years with

the program and has received the UWB Staff Appreciation Award (2003). Additional current staff include a full-time MN program advisor (Bale), and a half time Office Assistant II (Lee). Adjunct faculty Blachly (0.5) FTE also does recruitment and community outreach. Our staff is prepared and willing to provide support across program needs in addition to their primary responsibilities, essential in a small program such as ours.

Our innovative curricula are designed for registered nurse students who are beginning or seeking to develop their professional roles. Consequently, flexibility in academic programming is essential to our success. Both the RNB and MN programs allow students to complete the majority of their course work attending classes on a one day per week schedule. In addition to optimal scheduling for the working nurse, the curriculum focuses on clinically applicable content such as critical thinking; theory and evidence-based practice; effective communication and relational leadership; and contemporary legal, ethical, cultural, and social justice issues related to health care. In 2005-06, the faculty completed an extensive review of the RNB curriculum consulting with current and former students, community college partners, and members of our nursing advisory committee. The curriculum was revised to meet American Association Academic Colleges of Nursing (AACN) competences and accreditation goals with a new five credit course structure. The new curriculum (with articulation plan for continuing students) was reviewed and approved by appropriate campus and tri-campus committees and is currently being implemented. [See Section A Attachment 2 for further description of curriculum revision.]

Key to our innovative programming success is a **critical base of community partnerships** formalized by articulation agreements with 12 area community and technical college nursing programs. These include those in King county (Bellevue, Shoreline, Seattle Central, Highline, and North Seattle Community Colleges and Lake Washington and Renton Technical Colleges) as well as in the northern counties of Snohomish, Skagit, Whatcom, Island, and Clallam (Everett and Whatcom Community Colleges and Bellingham Technical, Peninsula and Skagit Valley Colleges, including the SV South Whidbey Campus). [See Section A Attachment 3 for sample articulation agreement.]

Partnerships with our nursing education and nursing practice colleagues in the region have been strong forces in the **development of off-site access** to our program including the previously mentioned RNB cohort in Port Angeles (2000-02). In 2003-2005, we partnered with Seattle Children's Hospital and Regional Medical Center (Children's) to offer seamless access and BSN completion trajectory for 15 of their registered nurses. During 2006-2007, elective courses were taught in Mount Vernon to evaluate that location for a possible off-site northern cohort, to increase visibility of our program, and to provide a "jump start" for prospective RNB students interested in beginning their UWB studies closer to home. Based on the success of this initial venture, an HECB proposal for a change in locations was submitted and approved. Thirty-three students matriculated into our Northern Cohort in autumn 2007. Relationships maintained through regular communication and site visits with nursing leadership at northern hospitals including Providence-Everett Medical Center (PEMC), Skagit Valley Hospital, United General Hospital, Valley General Hospital in Monroe, and St. Joseph's Hospital in Bellingham are key to understanding our constituency and have been extremely valuable to our success. An article describing this new initiative will be the lead article in the March 2008 UWB publication – INSIGHT.

Our relationships with Seattle area hospitals have been enhanced by the quality of our MN program and the visibility of both our RNB and MN graduates practicing and providing leadership in local medical centers. A number of Seattle hospitals asked us about hosting an RNB cohort at their facilities (Children's, HMC, Swedish Medical Center [SMC], UWMC, VA Puget Sound-Seattle, Virginia Mason Medical Center). Since we collectively realized that offering individual cohort programs at multiple hospitals within a confined geographic area is not reasonable for a program the size of ours, community partners at these same facilities have begun to explore the development of a UWB RNB program supported by a downtown consortium of hospitals and long term care facilities. Representatives from SMC's Center for Nursing Excellence have taken the lead in this discussion and met with the UWB Nursing faculty strategic planning group in June 2007. We are collaborating to conduct a multi-site needs assessment survey among nurses working in downtown hospitals and long-term care facilities to determine the interest and the perceived benefits and barriers to continuing their education with UWB Nursing.

We share **joint accreditation with our UWS SON and UWT nursing colleagues**. Our last accreditation visit (2000) resulted in a full ten year unconditional approval granted by the Commission on Collegiate Nursing Education [CCNE], and the evaluation team found that "cooperative and collaborative working relationships between the SON and the Bothell and Tacoma branch campuses" was a noted strength of the program. With joint accreditation, regular nursing leadership and curricular collaboration is essential across all three campuses and demonstrates one of the strongest tri-campus disciplinary relationships. Academic leaders meet monthly to discuss issues of joint concern, and UWB faculty participate and represent the program's interests on the tri-Campus BSN and MN curriculum committees. These ongoing interactions have resulted in other tri-campus collaborations including: chairing or serving on UWS doctoral committees (Leppa, Kovalesky), UWB faculty participating in Center for Research in Women Studies and Gender Relations (CRWGR) research mentorship and grant writing (Hartford Foundation, Sikma & U.S. Health Resources and Services Administration [HRSA] Education, Leppa). We have been instrumental in the institution of tri-campus international partnership agreements with the European Institute in Health and Medical Sciences at the University of Surrey (UK) and with Fooyin University in Taiwan. Continuing to explore venues for studying culture, social disparities, and global health, Dr. Abrums collaborated with the UWS SON in their summer program in Italy (2007).

Because most of our RNB students come from ADN pre-licensure programs which tend to serve more diverse and educationally disadvantaged students than most baccalaureate pre-licensure nursing programs, our student body reflects similar diversity. We also have high percentages of students who are the first generation in their families to complete a baccalaureate degree. Recognizing the challenges faced by first generation students, the UWB campus milieu generally and the nursing program specifically, provide the essential support and academic resources to **promote self-confidence and enhance basic academic skills to better assure student success**. In this environment, many students realize that in addition to their degree, they have many more career options and opportunities within their reach. Many of our RNB alumni have found themselves well prepared for subsequent graduate study. Over 100 RNB alumni had completed a Master of Nursing degree at UWS, most typically in Nursing but also in Public Health or Public Administration. At least three RNB graduates have completed their PhDs at UWS and four to five are currently enrolled. Two current UWB nursing faculty are among these UWB alumni

earning PhDs (Cooke, UWB 1996, UWS 2002; Madison, UWB 2000, UWS 2007). Responses from a recent (2006) RNB alumni survey (N=194) indicated that 22% of respondents had completed a graduate degree, another 16% were currently taking graduate level courses, 30% were planning on graduate school in the near future, and another 16% were considering the possibility of graduate study. Cumulatively, 73% of the RNB alumni respondents have pursued graduate study or are considering it. [See Section A Attachment 4 for RNB and MN Alumni Survey Summaries]

We also take pride in the many accomplishments, honors and recognition our students have received: Chancellor's Medal (Cathy Lee, Wendy Yirka, Suanne Washburn, Neil Foltz, Janet Thorson-Mador, Marjan Sanayei, Yeshearg Dagne, Mabel Ezeonwu.), President's Medal (Kari Matson, Karen Sherwin, Susanne Steffes), UWB Alumni Award (Blachly), commencement speaker (Pat Olsen, Robert Chapman), De Tornyay Scholars (6), and Promise of Nursing Faculty Fellows (5). There are also a number of our students who have gone on to receive various Seattle awards. Dr. Cooke was a Magnuson Scholar and Barb Haner (BSN, 1995) was a Distinguished Master's Community Service Scholar. MN alumna (2003), Debbie Kelly received the UWS SON Award for Excellence in Clinical Teaching two consecutive years (2006, 2007).

A.2. Measurement of Program Success: The program measures success first and foremost by reflecting on student achievement [outlined above]. In addition, **a traditional benchmark of success for a professional discipline** is its ability to maintain national accreditation. By successfully completing our most recent tri-campus CCNE accreditation (2000), we have demonstrated our achievement and maintenance of national standards. Receiving the maximum 10 year accreditation, we were scheduled for a review in 2010. However, we have agreed to support an earlier review (2009) to assure timely accreditation of the new UWS Doctorate in Nursing Practice (DNP). The UWS School of Nursing remains the top ranked school of nursing in the country (*U.S. News and World Report*, 2008), and our program maintains shared standards with regard to accreditation and curriculum.

Individual **faculty success is evaluated on an annual basis** through a peer review process in accordance with the University of Washington Handbook, Vol. II: Chapter 24. Within the nursing unit, criteria for success are based on the Boyer Model including the scholarship of discovery (traditional research realm), teaching (pedagogy), application (practice or service), and integration (interdisciplinary and/or translational scholarship). These same criteria are used for reviewing evidence for merit, promotion and tenure reviews. [See Section A Attachment 5 for criteria and exemplars.] This model is broader and more dynamic and is thus well suited for a practice discipline such as ours and is consistent with our commitment to excellence in teaching, research (discovery), campus and community service (application), and interdisciplinary linkages (integration).

Enrollment is a primary indicator of our success in providing an excellent academic experience accessible to working professionals and a fundamental measurement of recruitment and retention efforts. Furthermore, as an FTE driven organization meeting our targets is a measure of unit success since under enrollment in one UWB program results in pressures for over enrollment in another UWB program or significant budget repercussions. Over the last five years, the unit has made significant strides in increasing enrollment through focused recruitment,

policy changes regarding tuition exemption, and curriculum revision to improve work and scheduling efficiencies. [See Section A Attachment 6 for FTE Summary 1992-present]

It is difficult to identify teaching, research and service peer institutions because of the youth of our program, and because we are a unique **teaching-intensive campus embedded in and still dedicated to the research-intensive university model**. Faculty are expected to be excellent teachers, contribute to the well-being of an evolving academic program and campus, and maintain programs of research. Newer campuses of Washington State's public universities such as UWT or WSU Vancouver would likely be the closest peers of that type. Nursing programs embracing the Boyer Model of Scholarship such as Kent State University, Duquesne University, or California State Monterey Bay might also be appropriate peer units.

A.3. Program Weaknesses, Challenges or Obstacles: Being the smallest and only health science program has posed a **challenge to our sustainability** at UW Bothell. As we respond to internal and external mandates for growth, we face the additional challenges of heavier teaching and service loads. For example, most campus committees require program representation especially those related to governance or the development of new initiatives. For larger programs, such responsibilities can be rotated among faculty allowing for episodic relief from service demands. In a program as small as ours, faculty must take on more frequent and consistent service responsibilities without respite. This factor is a double edged sword because our faculty excel in campus and university-wide leadership, as noted in program strengths

Although **meeting FTE targets** has challenged all UWB academic units, this program has faced unique challenges including the impact of the tuition exemption previously described, high head count per FTE ratios, 3 credit versus 5 credit courses, and the inability to count required summer nursing courses as part of our annual FTE targets.

The fiscal **impact of tuition exemption** escalated for our program between 1998 and 2002 after the state increased TE benefits for part-time University and state employees. Detrimental effects of this benefit intensified as UWMC and HMC responded to the nursing shortage by using TE as a recruitment strategy. Unfortunately, this valued "benefit" for UW and other state staff is an unfunded mandate in which neither tuition nor state resources are allocated to teach these students. By 2004, our annual tuition losses exceeded \$350,000 causing significant fiscal stress for a program of this size. Consequently, in 2005-06 UWB Chancellor Warren Buck approved a policy change limiting the use of TE status in the Nursing Program. That year, enrollments declined slightly and then increased again in 2006-07. We are currently over enrolled by 19% for RNB and 32% for MN programs in spite of overall campus under enrollment this year.

A second enrollment challenge relates to the population of students we serve which includes nurses who must balance work and family responsibilities along with their academic studies. Most nursing students are less than full-time (10 credits vs. 15 credits /FTE for undergraduates) resulting in **head count to FTE ratios typically over 2:1** for both the RNB and MN programs over the last five years. While resources have historically been allocated per FTE, the workload of faculty and staff is actually generated by the total number of students served or "headcount". Thus, for a number of years, the workload has been significantly higher than FTE reports would indicate.

We inherited a **3-credit class structure** from UWS SON when the RNB program was transferred to UWB in 1992. While this articulated well with the tri campus nursing curriculum structure and was consistent with our commitment to innovative one-day-per-week scheduling, this format was unusual on the Bothell campus where 5 credit structures are the norm. To better align with other UWB program electives, the Nursing faculty developed a 5-credit course structure for electives (BHLTH), but the 3 credit class structure of nursing core courses remained an FTE-related challenge. During 2005-06, the faculty completed an extensive review of RNB programs nationally, consulted with and surveyed current and former students and community college partners, and revised the curriculum to a 5-credit structure. The new curriculum was reviewed and approved by all appropriate committees and is being implemented this academic year.

Although both the RNB and MN programs use a cohort model that requires summer school attendance, the FTE **enrollment generated during summer session is not included** in our annual FTE report because of the role UW Extension plays in overseeing and funding summer quarter. During summer session 2004 we worked with the UW Registrar (Tim Washburn) to address our FTE challenges and he applied for and obtained a state exception which allowed us to include summer FTE in our annual report. This exception is apparently one that may be supported by a public institution but is not required. Since 2004, we have not been permitted to apply for additional summer exceptions. While it is a benefit to have the instructional costs for summer session provided by UW Extension, this reporting mandate creates an additional challenge for a program or campus struggling to meet FTE targets. Once we are able to meet and exceed enrollment targets, the practice could become a benefit to the unit and the campus.

At a national level, a **shortage of nursing faculty** is becoming an increasing concern in large part due to the fact that both Master's and PhD prepared nurses can command significantly higher salaries in service settings than in higher education. UWB nursing faculty salaries lag behind UWS SON, and for selected ranks, at UWT as well. During the 2005-2006 academic year when a large number of faculty needed to be recruited and hired at UWB, campus administration committed to make every effort to hire new faculty at **competitive salaries**. Our program successfully recruited and hired two new assistant professors at competitive salaries during this active search cycle. While this created inevitable tension with respect to exacerbated **salary compression/inversion issues**, we have been able to justify and receive substantial equity adjustments for all tenure-line faculty over the last three years. [See Section A Attachment 7 for UW Bothell nursing faculty salary comparisons with UWS and UWT nursing faculty and across UWB programs by professorial rank.] We have appreciated these increases and will continue to advocate for additional nursing faculty salary adjustments in light of being a high demand field and growing awareness of nursing faculty shortages across the country. This is critical to our ability to retain our current faculty and recruit highly qualified new faculty to join us as we continue to grow.

Our **joint nursing accreditation with UWS SON and UWT** has been both an **opportunity and a challenge**. As a new program on an evolving campus, joint accreditation with a nationally acclaimed school of nursing was certainly a benefit in 1992 when the RNB program was initially transferred from UWS SON to UWB and UWT. The joint accreditation also assures that there is communication and joint curricular oversight across the three campuses. However we are

beginning to experience some lack of clarity in our dual accountabilities to Tri-Campus Nursing initiatives based on our joint accreditation and to the growing UWB campus where faculty hold primary appointments and are awarded promotion and tenure. Likewise, the ability to credibly argue that we share one curriculum is becoming more of a challenge for nursing faculty on all three campuses. Additionally, CCNE has indicated (in informal conversations) that they are likely to increase their critical scrutiny of such consortium-based accreditation models. With the anticipated leadership changes at UWS SON next year and subsequent CCNE accreditation visit in spring 2009, it will be timely to re-evaluate the benefits and challenges of joint accreditation.

The entire **UWB campus has experienced long-standing challenges associated with developing a unique identity** as part of a tri-campus university. This is due to numerous, complex factors including changes in UWB leadership positions in the Chancellor's Office and Academic Affairs; our proximity to the Seattle campus; co-location with a community college; and the uncertainties associated with ever changing legislative/political pressures, the most recent of which is the UW North site consideration. We had an interim Chancellor for two years (2005-2007) and currently have interim Vice Chancellors for Finance/Administration, Academic Affairs, and Student Affairs. With the arrival of Chancellor Kenyon Chan, we hope to see the development of a strong and stable core leadership team move the campus forward and address these issues which are critical to our identity and collective sustainability.

A.4. Changes in Field: Over the last decade there have been significant changes in nursing including the **nation-wide decline in nursing school enrollments** from 1995-2001; the subsequent impact of the prolonged enrollment decline on the **nursing shortage in practice and education**; increased evidence of the **relationship between a baccalaureate prepared nursing workforce and improved health outcomes**; renewed efforts to increase **access to baccalaureate education in the state**; and the need to expand the **use of hybrid education and technology** to increase access and to facilitate global initiatives.

During the 1990's when this program began, the country was experiencing a **span of declining enrollments in nursing programs** which contributed to our early enrollment difficulties. Since 2001, this nation-wide decline has gradually reversed itself as the healthcare system and the public have recognized and addressed the significant nursing shortage. The impact of declined nursing student enrollments has contributed to the current shortage of practicing nurses and nurse educators which is the worst such shortage to date. The recent *White Paper on Nursing in Washington State* (Ellis, 2007) commissioned by the Washington State Nurses Association reported that in **2006 the average age of registered nurses was 48.4 years and that of nursing faculty was over 51.5 for those employed in baccalaureate and graduate programs**. This aging of nursing faculty is equally apparent across Washington State and UWB Nursing is no exception. Continuing to contribute to the **growing faculty shortage** is the fact that nursing faculty salaries are not commensurate with those in clinical practice. This disparity in salaries is a major impediment to recruiting nurses for faculty roles.

Over the last four to five years, a growing body of **literature relates hospital outcomes to the educational mix of nursing staff** (Aiken, 2003). Many hospitals are now recognizing the importance of supporting a well-educated nursing staff not only for staff satisfaction but also for improved outcomes in our ever changing and increasingly complex health care system. Achieving such a goal poses significant challenges for hospitals in parts of the state where no

baccalaureate nursing education is readily available. The uneven geographic distribution of the 25 ADN programs and 7 baccalaureate pre-licensure programs in Washington critically **limits equitable access to nursing education**. Efforts to increase state-wide access to baccalaureate education have **changed the legislative landscape for higher education** and permitted lower division authority to the newer UW and WSU campuses (including UWB) and upper division authority to selected community and technical colleges. Olympic College in Poulsbo has been granted approval to pilot an “Applied Baccalaureate Degree in Nursing”. How this changing political landscape will build on or challenge the excellent relationships we have with regional community and technical college nursing programs through formal articulation agreements is yet to be seen.

Finally, **increased technology and globalization** has tremendous impact on access to higher education and the manner in which it is delivered. Dr. Leppa has championed the development and implementation of a campus-wide Faculty Institute on Technology in the Classroom that a majority of current nursing faculty have attended. This has increased faculty use of technology such as Blackboard to permit hybrid courses blending on-line and face-to-face learning. The use of technology has allowed faculty to connect classrooms globally such as Dr. Leppa’s long-standing collaboration with her United Kingdom (UK) colleagues and plans for similar linkages with colleagues in Taiwan. Increased awareness of global health issues has stimulated UWB nursing faculty to explore innovative global partnerships with faculty and/or student exchanges not only with the UK and Taiwan (Leppa) but also in Lithuania (Kovalesky), Cuba (Abrums/Resnick) and Italy (Abrums). Whether we are using technology to connect globally across continents or to link students in Mount Vernon with academic support in Bothell, it is clear that we need to think creatively about how to increase access to higher education in remote sites while maintaining the UW’s standards of educational excellence.

A.5. Differences in Perceptions: The primary difference **between our view of the program’s role and the view of the college and university** is created by the additional expectations required of professional education in an applied discipline. These differences include achievement of accreditation standards, specialized community-based recruitment, clinical placement coordination with health care agencies (including formal contracts), and additional demands for screening and advising students (e.g., licensure verification, criminal background checks, and immunization, HIPAA and CPR documentations). Further, the Nursing program holds its students to higher standards for professional conduct beyond the university’s student conduct code. [See Section A Attachment 8 for *(Essential Professional Ability and Behaviors)*.]

A.6. Faculty Participation in Unit-Governance: As a small program, it is inevitable that all faculty are involved in **unit governance, self-study and strategic planning**. The faculty and staff meet on the first and second Wednesdays of the month from 9:30-12:00. All tenure-track and full-time adjunct faculty have voting privileges at these meetings. Faculty lead admissions committees for the RNB and MN programs with RNB and MN advisors facilitating. The director is consulted when the committee needs additional information (applicant references, a face-to-face interview) or when committees fail to come to consensus. Participation in annual (since 2003) fall retreats allow opportunities for faculty and staff to summarize the previous year’s accomplishments, consider specific goals and objectives for the upcoming year, and engage in team building activities.

Over the last several years, senior faculty received course buy outs to have **time to devote to leadership** for RNB curriculum revision (Leppa, Kovalesky) and strategic planning (Sikma, Cooke). In 2005-06 each full-time faculty member including lecturers received a single course buy-out for participation in the comprehensive RNB curriculum review and revision implemented in 2007-2008. During 2006-2007, each tenure-line faculty received a single course buy-out to participate in the strategic planning efforts championed by Dr. Sikma.

Annually, faculty and staff provide confidential feedback on the program director's leadership. Solicited by a senior faculty member on behalf of the program director, this effort contributes to ongoing quality improvement. In addition, more broad-based feedback was obtained for the current director's mandatory five year administrative review completed in spring 2007. The final report was shared and discussed openly with the nursing faculty and staff and resulted in several programmatic changes that have been initiated this year including hiring Art Haines (UW Consulting Alliance) to facilitate our 2007 retreat and provide ongoing consultation. Because of the confidential nature of this report it is not being included in the self-study but will be made available to the review team upon request during the upcoming site visit.

A.7. Mentoring of Junior Faculty, Graduate Students and Undergraduate Students:

Appropriate **mentoring of junior faculty in the tenure trajectory** posed challenges particularly in the first five to ten years as the program started with a small cadre of junior faculty. In 1995-96 when the initial director resigned, only one junior professor (Leppa) remained. Dr. Leppa, by necessity had to assume the role of "senior faculty" as the program reorganized. In 1996, a new director was appointed (Lousteau) and additional junior tenure-line faculty were hired (Abrums, 1996; Kovalesky & Sikma, 1997). Although somewhat inconsistently, these faculty were given limited lighter teaching loads to facilitate their progress toward tenure. Dr. Leppa was successfully promoted to Associate Professor in 1997 followed by Dr. Abrums (2002) and Drs. Kovalesky and Sikma (2003). No new tenure-line appointments were made until 2002 when Dr. Westbrook was appointed assistant professor. Another four years passed before additional assistant professors were hired (Petry & Mohammed, 2006; Cooke 2007). We are starting to see the development of 1:1 mentoring relationships as the critical mass of senior faculty grows. We have also tried to formalize the allocation of equitable support for junior faculty, by way of the provision of summer salary and lighter teaching loads during one of the first three years on the tenure track. New opportunities to build mentoring relationships are coming from our collaboration with the UWS SON's Center for Women's Health and Gender Research (Mohammed & Petry) and other universities: New York University Hartford Fellowship (Sikma & Petry) and Oregon Health Sciences University post-doctoral study (Sikma).

A source of small group **reciprocal mentoring** is participation in UWB teaching or research circles. All faculty (including lecturers) have had the opportunity to participate and receive a small annual stipend (\$300) per circle since 2003. These circles may be interdisciplinary and cross-programmatic. An example of a teaching circle (2005-2006) focused on participation of six UWB nursing faculty (three tenure-line and three lecturers) in a Narrative Pedagogy Project sponsored by Pamela Ironside, RN, PhD, (University of Wisconsin-Madison School of Nursing). Participation in this qualitative research study provided access to the Project's web-site resources, and bi-monthly telephone conferences with participants from several nursing schools across the country. As a young program on an evolving campus anticipating significant growth

over the next five to ten years, it will be critical that we consider program specific and campus wide venues to foster more systematic mentorship of junior faculty.

New RNB and MN students are introduced to faculty and support staff services and receive information about their respective academic programs during formal orientations. Specific sessions are spent with the director, advisors and faculty. Expectations and resources are outlined in the BSN and MN Handbooks distributed to all students during orientation (also found on the program's website). In addition to specific program information, these handbooks include contact information for campus support services. Current students are recruited to guide entering undergraduate students through various portions of the orientation day while providing encouragement and peer mentoring. While the undergraduate students receive day to day support from the program advisor, they also work more closely with individual faculty in the development of their Senior Portfolio (BNURS 495) during the final quarter of core courses. Additional opportunities are available through independent study options (BNURS 407,498,499).

The MN orientation is held the Friday before the first week of the quarter to ensure attendance. The **MN students are introduced to faculty, staff and academic resources** and have formal and informal opportunities to meet with current MN students and alumni. Each MN student is assigned a temporary faculty advisor for guidance until a supervisory chair is appointed. The supervisory committee chair (and members) assumes responsibility for individual guidance during the final year of graduate study.

Teaching

B.1. Individual Faculty Course, Student, and FTE Workload: [See Section B Attachment 1 for data on faculty teaching for 2006-2007 and Autumn/Winter 2007-2008.]

B.2. Allocation of Teaching Responsibilities: The Nursing program has had a goal of keeping **tenure-line teaching loads** limited to five classroom courses per year in addition to responsibilities for mentoring and supervision of undergraduate (BNURS 495 Senior Portfolio, 1 credit) and graduate students (BNURS 503 Advanced Fieldwork & BNURS 598 Scholarly Project, 12 credits total per student). With the implementation of our revised RNB curriculum in 2007-08, tenure-line teaching assignments have been reduced by one classroom course per year with the undergraduate/graduate independent study (BNURS 495, BNURS 503 and BNURS 598) collectively comprising the "fifth course". A full-time teaching assignment for adjunct faculty in the nursing program has been six 3 credit classroom courses per year, and in the revised 2007-08 curriculum, full time will be six 5 credit courses per year. Our seasoned adjunct faculty who have taught with us for more than one year may also assume additional responsibility to provide guidance to the undergraduate students preparing their Senior Portfolios (BNURS 495). Doctorally prepared adjunct faculty may volunteer to serve as supervisory committee members for MN student projects; however this service is not required.

Planning for and allocating **teaching assignments have followed a predictable process**. In January, the director begins a review and discussion of teaching needs and possible assignments for both the RNB and MN programs for the next academic year. First, tenure-line and full-time adjunct faculty present their teaching requests indicating their preferred courses, acceptable courses, and those courses they would prefer not to teach based on limited expertise or interest.

Then the director drafts a teaching schedule being as responsive as possible. The draft is presented for review and discussion at a program meeting. Teaching assignments are negotiated both individually and openly among faculty with the proviso that substitutions may be made as necessary as the year progresses. Substitutions and/or additional course sections are added only after discussion among faculty at a program meeting. To date faculty preferences have been honored and no faculty member has been asked to teach a course for which limited expertise or interest has been identified. Efforts are also made to limit the number of new course preparations and to maintain consistency in teaching assignments, particularly in the early years of employment. As we have launched our northern RNB site, specific funds have been allocated as incentives for both tenure-line and adjunct faculty who volunteer to teach the Mount Vernon cohort.

B.3. Faculty participation in undergraduate student learning outside the classroom are integral components in several undergraduate nursing courses. BNURS 407 Social and Cultural Issues in Health Care requires real-world assignments where students are asked to engage in challenging “social network activities” that expand cultural awareness (for example, visiting homeless shelters or surviving on food stamps for a week). In BNURS 409 Community Partnerships, students have independent learning experiences in a variety of settings (schools, hospices, adult daycares, prisons, public and occupational health settings) and complete a community service project.

As introduced in B.2., faculty are **involved in supervising the development of undergraduate Senior Portfolios** (BNURS 495). The curriculum also allows for additional independent study initiated by student interests through Special Projects (BNURS 498) and Undergraduate Research (BNURS 499). Alternative strategies for faculty mentoring of students are numerous. For example, over the last five years, Dr. Sikma mentored two undergraduates (Winters, Nguyen). Other faculty have mentored undergraduate and graduate students by engaging them in their research as well as co-authoring manuscripts for publication (Abrums, Kovalsky, Leppa, Sikma, Petry, Westbrook) and national presentations (Abrums, Leppa, Resnick, Sikma). Faculty have been particularly innovative in the ways they have integrated students in their course development (Westbrook) and teaching (Abrums, Leppa, Sikma, Westbrook). Dr. Leppa has developed and maintained a long-standing exchange between UWB Nursing students and nursing students in the UK by coordinating intensive 12 day trips to UK during spring break to supplement student learning in BNURS 410 Ethical and Legal Issues in Health Care and her elective course on health care policy (BHLTH 497).

B.4. Faculty Engagement in Undergraduate Research and Scholarship: The Essentials of Baccalaureate Education for Professional Nurses (AACN, 1998) indicates that nurses at the **BSN level must be able to “participate in research and utilize research findings”** in their practice. At UWB, the required course is BNURS 403 Evidence-Based Practice and Scholarly Inquiry (5 credits) with statistics as a prerequisite course. Alternative venues for engaging undergraduate students in research and scholarship have been utilized through independent studies options with faculty as described above. Selected undergraduate students have been hired as research assistants with faculty research although numbers are limited since the majority of our students are full time, working registered nurses.

B.5. Evaluation of Instructional Effectiveness: Peer review of instructional effectiveness is expected annually. This may be done using direct observation in the classroom, and or review of

syllabi and written student assignments. In addition, many nursing faculty have participated in “connected teaching” with their peers when teaching separate sections of the same course or companion courses in the same quarter. The annual review, structured using the Boyer Model includes the scholarship of teaching. Faculty must provide evidence of their ability to meet or exceed the performance criteria expected by rank. The program prides itself and is recognized by UWB campus peers, on our commitment to exemplary teaching. We are particularly proud of the fact that six of our senior faculty have been nominated for the UW Distinguished Teacher recognition and that three have been awarded this prestigious honor (Leppa, Kovalesky, Sikma).

One measure of instructional effectiveness of the program as a whole are the student and alumni surveys. The most recent **alumni survey of BSN graduates** included a section asking them to rate their ability levels in a variety of skills both before and after completing their program of study. Alumni indicated improvement in all skills with the greatest improvement reported in students’ abilities to write scholarly papers, read and understand research, and critically analyze ideas. The strongest overall enhancements that alumni reported were in their commitment to life-long learning directed toward research-based advanced practice and the development of skillful inquiry relevant to practice, education or administration.

A significant outcome of these self-assessments was the current revision of the BSN and MN curricula. We conducted focus groups and large class discussions about the curriculum and learning experiences with both current students and alumni. We used this to evaluate course content, identifying gaps and overlaps both within our curriculum and with our community college partners. The revised curriculum has two fewer courses (BNURS 340 and 412 were dropped) and essential content from them was moved to other revised 5-credit courses as appropriate.

B.6. Summary Data Collection Using OEA or CIDR: All tenure-line and adjunct faculty solicit **student evaluations of their teaching effectiveness** utilizing the instructional Assessment System (IAS) through the Office of Educational Assessment (OEA). Faculty include summaries of their OEA student evaluations as part of their annual activity reports submitted for merit considerations. They are asked to reflect on these data and make plans for improvement and follow-up based on their assessment of their teaching strengths and challenges. Dr. Westbrook sought the consultation of the OEA to prepare trend data to include in her third year review. [See Section B Attachment 2 for OEA department five year (2002-2007) course evaluation summaries by nursing units for Bothell, Seattle and Tacoma campuses]

Faculty are encouraged to request **support from CIDR and/or our UWB Teaching and Learning Center**. For example, Dr. Leppa involved CIDR to offer Small Group Instructional Diagnosis (SGID) feedback to help her compare two sections of BNURS 410 Ethical and Legal Issues in Health Care: one on-site weekly face-to-face section and the other piloting a hybrid format with 60% of the classes being face-to-face and 40% being on-line using Blackboard courseware. In BNURS 412, Dr. Westbrook also used SGID consultations on several occasions, as well as sponsored focus groups with former students to help identify more effective strategies for engaging students in the course content. In addition, several nursing faculty are CIDR trained to perform SGIDs and do so for their colleagues in other campus departments.

The program will also rely on services from these units for an evaluation of the revised RNB curriculum that will be conducted with current students in spring 2008 in collaboration with the Teaching Writing Center (TLC) or CIDR.

B.7. Procedures to Improve Undergraduate Teaching Effectiveness: An early history and outline of mentorship for junior faculty was given in A.7. With three assistant professors hired in 2006-07 and anticipated program and campus growth over the next five years, a formalized process for mentoring the scholarship of teaching becomes a priority. A pilot for this mentoring effort was initiated in 2006 when Dr. Mohammed joined the faculty directly from her post-doctoral fellowship with limited teaching experience. During her first quarter, she was paired with Dr. Abrams to teach the two sections of BNURS 407 Cultural and Social Issues in Healthcare. Although formal mentoring has not been a standard, anecdotal reports from junior faculty indicate that their peers and senior faculty (including the director) are supportive and willing to provide informal debriefing and consultation on teaching challenges and strategies whenever asked. Faculty have also mentored adjunct faculty and selected UW Huckabee fellows including Rob Carroll who worked with Dr. Leppa from 1997 to 1999 and Jerelyn Resnick who worked Dr. Kovalesky from 2000-2002. Since completing her UWS doctoral studies in Education (2002), Dr. Resnick has continued to teach with us as a highly respected lecturer.

B.8. Identification and Promotion of Teaching Innovations and Best Practices: Faculty have excelled in promoting innovations and best practices in undergraduate and graduate student learning, particularly in implementing interdisciplinary approaches in nursing education. However, we have not formally chronicled them in a systematic way. We do have informal ways of tracking and promoting best practices and most faculty could identify numerous examples of innovation in their own teaching. Many of them take advantage of working with their colleagues in nursing and across the campus in teaching circles or various workshops offered by the Teaching and Learning Center. Abrams, Leppa, and Resnick have written articles on best practices in undergraduate teaching in diversity. Drs. Abrams and Resnick, along with former students, have presented their teaching strategies at national nursing education conferences. Dr. Leppa has led faculty in transformative learning practices using Blackboard strategies for on-line education. Drs. Resnick and Madison are currently involved in developing distance learning strategies. Dr. Abrams is implementing a more formalized venue to identify and promote best practices using regular brown bag sessions (2008) that include opportunities for faculty to review courses with colleagues with an emphasis on pedagogical concerns and issues.

Research and Productivity

C.1. Balance of Faculty Scholarly Interest with Program and Campus Needs:

The Bothell campus was established in 1990 to provide greater access to baccalaureate and graduate degrees for place-bound and non-traditional students through collaboration with community colleges in responding to regional needs while maintaining the high standards of the University of Washington. When the RNB program was transitioned from the UWS SON (1992), the UWB Nursing program was similarly charged with responsibilities to increase educational access to place-bound and non-traditional students (working nurses) while maintaining the highest standards of professional nursing education consistent with our shared UW tri-campus nursing accreditation. In an effort to accommodate multiple and

sometimes divergent expectations, the UWB Nursing faculty adopted an expanded definition of scholarship which would allow a balance among areas of scholarly interests of individual faculty members while meeting the expectations of our campus mission and joint accreditation with the UWS SON. This expanded definition is based on Ernest Boyer's challenge to think about scholarship more broadly than traditional definitions. His definition underscores the dynamic nature of the four domains of discovery, integration, application and teaching (Boyer, 1990). These four domains are the structure in which this program evaluates evidence for appointment, merit, promotion and tenure. Keeping in mind that teaching is the primary focus of the Bothell campus, this definition of scholarship permits our faculty to balance competing demands and demonstrate their ability to develop and sustain meaningful programs of scholarly inquiry worthy of distinction in multiple interest areas.

The tenure-line faculty of this unit are reviewed for promotion and tenure based on policies and procedures outlined in chapter 24 of the *University Handbook* with Boyer's expanded definition of scholarship serving as the lens for evaluating dossiers. Assistant professors must be reviewed in their third year for progress towards tenure and recommended for a three year contract renewal. Because of our program size and limited senior faculty of full professor rank, our "program" promotion review committees have inevitably included interdisciplinary and inter-campus representation. Dr. Leppa's recent successful review for promotion to full professor was chaired by Dr. Marcia Killien (UWS SON) with committee members from UWS SON (Craven), UWT Nursing (Dobratz) and UWB Interdisciplinary Arts and Sciences (Watts) and Computer and Software Systems (Jackels). While our program size makes this inevitable, there are merits in having to translate one's scholarship in terms that are understandable across disciplines and campuses.

Once the review committee has completed the review and recommendation, the chairperson presents a summary of their process and findings to the UWB "Committee of Full Professors" that serves at the campus level and is comparable to the college level review on most campuses. Recommendations from the review committee and the committee of the full professors are advisory to the program director who then completes and forwards recommendations to the Vice Chancellor for Academic Affairs who obtains advice from the GFO Council on Faculty Affairs. That review is completed and forwarded to the Chancellor after which the dossier is sent to the Provost for review and approval.

C.2. Mentorship of Junior Faculty in Research: As described under A.7. and B.7., specific **mentoring of junior faculty in research and creative productivity** has been similarly sporadic due in equal parts to the program's youth and size, and episodic faculty hiring. More consistent efforts have been made over the last five years by giving all new assistant professors at least one year of reduced teaching and opportunities for summer funding to support their scholarship to give their tenure trajectory a firm foundation. All have the opportunity to participate in research circles and apply for internal funds including Rose and Worthington campus awards and the Royalty Research Funds of the larger university. We are optimistic that additional support will be available as the new director of research and sponsored programs hired this year at UWB develops the role and research resources. In addition, the UWB and UWT nursing programs were invited to participate in the UWS SON's CWHGR as part of their Research Development & Partnership (RDP) Core. The goal of RDP is to expand and enhance the cadre of investigators prepared to address priority research questions in women's and gender-based health, including

the development of gender sensitive preventive and therapeutic interventions. Activities to achieve this goal are focused on developmental activities at the UW SON and its three campuses (Seattle, Bothell, and Tacoma) and extended to four research institutions (University of Hawaii, Manoa; University of Alaska; Washington State University; and West Virginia University, Charleston). All UWB Nursing faculty whose research aligns with the partnership's goals and interests have access to associated resources. Drs. Mohammed and Petry were invited to participate in the partnership's summer institute as fellows (August 2007), and Drs. Cooke and Kovalesky intend to participate in the next summer institute (2008). Opportunities for UWB faculty to access research resources and the expertise of the UWS SON such as this are welcomed venues for the development of mentoring and scholarship opportunities. Interdisciplinary research mentoring opportunities are also emerging for junior faculty to wit: Dr. Mohammed's recently awarded Minority Supplement grant and Dr. Petry's participation in a week long intensive seminar at NYU in July 2007 with a group of 12 Hartford Institute Geriatric Nursing Scholars.

C.3. Impact of Faculty Research on the Nursing Field: UWB Nursing faculty have made **significant contributions over the last five years in three major areas relating to the changing demographics as they influence health care delivery and innovative pedagogy.** We have three professors addressing the **changing demographics related to the aging population.** Dr. Sikma's collaborative research (Dr. Heather Young, OHSU) related to resident autonomy, nurse delegation and the occurrence of medication errors in assisted living is influencing state policy decisions. She was honored last year with the UWB Worthington Distinguished Faculty Scholarship Award (2007) which recognizes "sustained scholarly productivity that has a significant impact on the discipline or profession" (http://www.bothell.washington.edu/academic/teaching/faculty_serviceaward.xhtml). Dr. Petry's research has examined barriers to health promotion among aging lesbian women and was instrumental in presenting the first national conference on the subject for both lay and professional participants. Dr. Leppa's efforts to address the development and education related to end of life decision-making (with colleagues at WSU) has had a statewide impact on medical practice as well as the residents.

Contributions addressing **population diversity and health status disparities related to discrimination and social injustice are being made by a number of faculty.** Dr. Abrums focuses her work on the healing effects of story telling among African Americans and more recently on raising awareness of health disparities globally. Dr. Mohammed is testing strategies to improve health outcomes among American Indians with diabetes. Dr. Cooke studies the health consequences among African American women with incarcerated male partners, and Dr. Kovalesky is focused on strategies to improve assessment and intervention for substance addiction in faith communities.

The third major area addresses **innovative pedagogy** with respect to integrating technology in the classroom (Leppa), strategies for supporting American Indian nursing students' cultural transition into the profession (Madison), and effectiveness of teaching diversity and social justice content on RNB attitudes (Leppa, Abrums & Resnick).

In addition to the faculty research contributions described above, faculty along with undergraduate and graduate students alike are making "front-line" contributions to local health

services delivery and nursing educational systems through the community education, fieldwork and scholarly projects that are completed as part of the respective curricula.

C.4. Current Advances That Have Influenced the Program: Advances in the use of technology in the classroom have had significant influence on our ability to address both the scholarship of teaching and academic discovery in innovative ways. For example, Dr. Leppa provided leadership and pedagogical expertise to develop a UWB campus wide Faculty Institute on Effective Use of Online Teaching. The participation of faculty across the campus in this institute has resulted in increased use of technology to engage students outside the classroom. Dr. Leppa has also used her expertise to model innovative ways of linking students as well as her research colleagues across continents (UK and Taiwan).

C.5. Variations among Faculty in Methodologies, Paradigms or Subfield Specialization: As described in A.1., the UWB Nursing faculty share a common grounding in nursing as an applied discipline but also reflect the campus wide commitment to interdisciplinarity. Our areas of research expertise are equally broad ranging from infant development (Baroni) to adolescence (Resnick), healthy aging, geriatrics and end-of-life care (Blachly, Leppa, Petry, Sikma). There is a strong cadre of faculty whose expertise is in diversity and social justice (Abrums, Puzan) as well as that more specifically focused on vulnerable populations such as American Indian Health (Madison, Mohammed), incarcerated African American males and their families (Cooke), and those with problems with addiction (Kovalesky). The scholarship of teaching and application are also reflected in pedagogical research (Abrums, Kovalesky, Leppa, Mohammed, Resnick,) and organization science and program development and evaluation (Leppa, Sikma, Westbrook). Common among most of the faculty is expertise in the use of qualitative methods. However, the depth of our expertise in the quantitative areas is growing (Baroni, Mohammed) and we have excellent statistical analysis resources in our Quantitative Skills Center.

C.6. Impediments to Faculty Productivity and Efforts to Reduce Them: UWB faculty in general face the **productivity impediments associated with a rapidly growing campus and having much less research support** than is typically found in a more established institution. However, our size and specific features of the nursing curriculum and student body provide additional barriers to research productivity. We have addressed each of these barriers within the last five years and we are beginning to see progress in their reduction.

Heavy **service and leadership responsibilities** have posed challenges for a small program such as ours and have been discussed in previous sections. In recent years, the faculty have tried to be strategic by choosing to represent the program only on the most critical or visible committees. **Heavy teaching loads** have also posed challenges to scholarly productivity given our small faculty size; our prescriptive, disciplinary, cohort-model curriculum; high head count to FTE ratio; and long standing 3 credit versus 5 credit course schedule (as discussed in A.3.). As a professional discipline we are responsible for providing content deemed essential by our national profession organizations (AACN) and it's accrediting body (CCNE) which means that faculty sometimes must teach outside their specific area of expertise which often requires more time consuming preparation than might be required when teaching content consistent with one's specific area of interest and expertise. For example, when a faculty member is gone for any reason (sabbatical, research or service buy-out, or health) core classes cannot be dropped from the schedule, and someone must step in to teach the courses.

Until recently, only the barest of research support structure was available on this campus to facilitate faculty scholarship. We have begun to see **slow but promising improvements** beginning with creation of a research director position (2006). The new director (Brennan) who has extensive experience in health services research was recruited from the University of Chicago. She has served us well since her arrival, facilitating the submission of two large (HRSA, Hartford Foundation) and one small (Johnson & Johnson Promise of Nursing) grant proposals. Although only the smaller proposal (\$25,000) was funded, without Ms. Brennan, even submission of these three proposals would have been very difficult, if not impossible. In the past year we have also experienced enhanced collaboration with our faculty colleagues with increased access to UWS SON funding opportunities and collaborative grant writing (Hartford Foundation Proposal), and through Dr. Mohammed's participation in the UWS School of Social Work grant which co-sponsored her recently funded, four year NIH Minority Supplement award.

C.7. Program's Efforts to Encourage and Preserve Staff Productivity: [See Section A Attachment 1, *Personnel Chart*] Efforts are made to recognize administrative staff accomplishments as they occur and more formally at the time of the annual performance evaluation when accomplishments from the previous year are acknowledged and goals for the next year are identified. Extra meritorious ratings are a significant way for recognizing staff accomplishments. For two long term staff members, we successfully completed position reclassifications (2003-04) which recognized their initiative in taking on new responsibilities and brought job classification and salary in line with actual job responsibilities. Currently, the only way to encourage productivity and provide rewards to one of these (classified staff) individuals is for the program director to submit an annual retention request, as that staff member is at the top step and thus only entitled to cost of living adjustments.

The Nursing Program staff are extremely competent and dedicated to the success of nursing students and the program. Adjustments to work schedules and flex time are commonly approved and staff frequently will cover for each other to accommodate such adjustments without significant gaps in service to students and faculty. Staff are strongly encouraged to identify and pursue professional development opportunities to enhance their skills and roles. They are also recognized with personal notes of thanks for jobs well done and quarterly staff lunches.

Relationships with Other Units

D.1. Collaboration with Other UW Units or Institutions: The program has a strong **commitment to collaboration across units, campuses, other institutions and the larger healthcare community**. As an academic unit within an interdisciplinary-oriented campus, we collaborate with all of the UWB academic units. Our faculty colleagues from other programs participate in our annual merit review and promotion and tenure processes, and we reciprocate. The Bothell Health (BHLTH) line of elective courses was developed in 1997 to serve as a platform for our interdisciplinary 5 credit courses. Since then, some 20 such BHLTH courses have been developed including such topics as Caring and Compassionate Leadership, Environmental Health, Global and Local Health Inequalities, and Alcoholism in Hollywood Films. [See Section D Attachment 1 for list of BHLTH courses.] In addition, Dr. Kovalesky has routinely taught school health focused courses within the UWB Education program and has taught in the lower division Discovery Core for the last two years. This year, Dr. Resnick is scheduled to teach one lower

division course. In 2007, Dr. Abrums collaborated to develop and teach the first campus course on global health with Dr. Lerum from Interdisciplinary Arts and Sciences (IAS).

As previously noted we maintain joint CCNE accreditation with the UWS SON. Because of shared accreditation, nursing education across all three UW **campuses must collaborate in review and approval of all curricular decisions**. Individual UWB Nursing faculty have informal **relationships with nursing colleagues** on all three campuses. For example, in 2006-07 Dr. Sikma was co-PI with Dr. Cochrane (UWS) and Christine Tashibano on a tri-campus nursing proposal submitted to the Hartford Foundation. Similarly, Dr. Leppa was PI on a tri-campus HRSA grant proposal last year. Although neither grant was funded, the process was pivotal in underscoring the direct and indirect benefits of tri-campus collaboration. Dr. Mohammed is engaging in successful research collaboration with Dr. Karina Walters of the UWS School of Social Work. In addition, several faculty hold adjunct appointments with the UWS School of Nursing (Baroni, Leppa, & Sikma).

The nature of our student population (working nurses) in both our RNB and MN programs **requires strong community college and healthcare collaborations** to assure successful recruitment and the development of strong responsive curricula. We established our first two formal articulation agreements with Shoreline and Bellevue Community Colleges and since then have established an additional ten such agreements with regional community and technical college ADN programs. Negotiating these articulation agreements have often opened the way for additional partnerships including teaching field placements for MN students.

We also have worked diligently to become trusted **partners with area health care agencies** to increase access to higher education through creative partnerships. Several examples serve to illustrate this point. In 2003, we partnered with Children's to facilitate the successful admission and subsequent BSN study for 15 of their registered nurses all of whom graduated in two years of part-time study. More recently, the collective efforts of hospital nurse executives and nursing directors from community/technical colleges in Snohomish, Skagit, Whatcom and Island counties were instrumental in assuring the successful launch of our Northern Cohort (RNB) in fall 2007. Again, these community partnerships generate field placements and scholarly projects sites for our second year MN students.

D.2. Faculty's Interdisciplinary Research: While there are opportunities for interdisciplinary research, the majority of faculty scholarship is within healthcare in general and nursing in particular. Two exceptions include Dr. Mohammed's participation in the Promoting Healthy Hearts study working with faculty in the UWS School of Social Work and the Tulalip Nation, and a beginning collaboration between Dr. Cooke and Dr. Udell (IAS) addressing family impact for female partners and children of incarcerated African American men.

D.3. Impediments in Developing Interdisciplinary Research and Connections: Most interdisciplinary **research and connections with other units** are made through informal channels and individual innovators because of limited infrastructural incentives and high demands to meet individual program FTE targets on the Bothell campus.

Health care by definition is interdisciplinary and recent Institute of Medicine (IOM) reports have charged the health care disciplines to engage in interdisciplinary teaching and research.

However, being the **only health care program on the Bothell campus** and distal to the broader health sciences campus and institutions in Seattle serve as impediments.

D.4. Work and Relationships with Other Units to Plan Future Initiatives: As UWB has transitioned to a full four-year institution and anticipates a period of rapid growth, **strategic planning efforts have been launched within and between the current academic programs** and the larger UW tri-campus community. In 2006-2007, under leadership of Dr. Sikma, the program launched efforts to develop a strategic plan for growth consistent with the campus wide mandate to increase access to education in the north Puget Sound region. The list of possible growth options included: expansion of the RNB program to additional off-campus sites; development of a new BA or BS in Health Studies; an accelerated RN to MN program; and other innovations to our MN program through focal areas including interdisciplinary opportunities. These ideas are being developed in collaboration with our community partners in education and practice as well as other UWB and UWS units. For example, Dr. Sikma and Dr. Groom who is leading the IAS faculty initiative to enhance science offerings on campus communicate frequently to assure that our efforts are complementary. The Nursing Program has had preliminary discussions with administration and selected faculty from the UWS School of Public Health regarding the possibility of a BA in Public Health. More recently, we were approached by faculty in the UWB Business program brainstorming about possible programming interface between the MBA and MN graduate programs.

Interdisciplinary teaching has always been a valued albeit sometimes challenging venture to actualize, however several examples illustrate our efforts. As outlined in D.1., Nursing does not yet have a full four year undergraduate degree, but we have had nursing representation in the development of the freshman Discovery Core and participate in interdisciplinary teaching. Most faculty at the UWB campus are very interested in cross-disciplinary and cross-campus collaborations, and the campus and larger university could do much to enhance incentives and facilitation of such interest. For example, basic mechanisms of cross-listing courses to allow FTE to follow faculty and credit for FTE in summer session teaching would be valued incentives in an FTE bound campus such as ours.

D.5. Faculty participation in program, campus and university governance is supported in a variety of ways. At the program level, all tenure-line and full-time lecturers have voting privileges and actively participate in program meetings. Part-time lecturers are encouraged to participate and contribute to program issues even though they do not have voting privileges. Faculty oversee admissions processes, curriculum development and evaluation, and faculty searches and approve the hiring of all tenure or non tenure-line faculty. At the campus level, nursing faculty are represented on the GFO Executive Council and committees. Non tenure-line faculty are encouraged (not required) to serve on campus wide committees pending their interest and availability. Nursing faculty are well respected campus leaders having served as GFO Chair person (Leppa), and members of campus initiatives including Research Support (Baroni, Sikma), Strategic Planning (Sikma), Diversity (Abrums), Lower Division (Kovalesky), Applied Science and Technology Planning (Baroni), and strategic planning for STEM related majors (Sikma). At the university level, Dr. Leppa has ably served on the Tri-Campus Policy Committee, and Drs. Kovalesky and Sikma have recently served as campus representatives to the UW Faculty Senate.

Diversity

E.1. Nursing Program's Inclusion of Underrepresented Groups: This unit shares tri-campus nursing accreditation through CCNE which is the accrediting arm of AACN. AACN has maintained a strong and visible position on the need for diversity and equal opportunity. An AACN position statement (1997) called for all nursing education programs to *"provide a supportive learning environment and curriculum in which students, staff, and faculty from all walks of life and from the entire spectrum of society are full participants in the educational process"* (pg 1). In alignment with the AACN's position statement, this program embraces diversity as a value through its recruitment and retention practices, curriculum, and faculty scholarship. As a unit that began with an RNB bridge program for registered nurses already prepared for practice through diploma (hospital-based) or ADN programs, we have by necessity created an environment that is supportive of educationally challenged, ethnically diverse, nontraditional students. Structuring classes on a one-day-per-week schedule has been critical to our student populations' success in managing school, work, and family responsibilities.

E.2. Compare Teaching Loads and Duties of Underrepresented Groups in Program: Since 2002, the Nursing program has hired four tenure-line assistant professors (Westbrook, 2002; Mohammed and Petry, 2006; and Cooke, 2008). Two are Caucasian females (Westbrook, Petry) and two are from underrepresented groups (Mohammed, Cooke). In reviewing their respective first year teaching assignments in Section E Attachment 1, it should be noted that Drs. Westbrook and Petry were hired as assistant professors after multiple years of teaching experience both at UWB and other institutions; Dr. Cooke joined the faculty after three years as an Assistant Professor (tenure track) at Arizona State University School of Nursing; and Dr. Mohammed joined the faculty directly from her PhD (2004) and Post-Doctoral Study (2006).

E.3.-E.5. Program Environment That Values Diversity: As an upper-division transfer program, we have established effective partnerships with our regional community college ADN programs in the form of formal articulation agreements permitting seamless transition from the associate to baccalaureate degree programs. It is common to **find far more students from underrepresented groups in our community and technical colleges** than in our baccalaureate institutions. The recent Sullivan Commission (2004) identified a number of strategies to increase support for disadvantaged and/or minority students interested in health professions. One specific recommendation was that *"Baccalaureate colleges and health professions should provide and support 'bridging programs' that enable graduates of two-year colleges to succeed in the transition to four-year colleges. Graduates of two-year community college nursing programs should be encouraged (and supported) to enroll in baccalaureate degree-granting nursing programs"* (pg. 7). The unit has been a notable leader in this regard **successfully recruiting and retaining one of the largest and most diverse BSN student bodies** in the state. The MN program has been admitting graduate students for just five years with early challenges in attracting as diverse a student body as we would like; however, we have seen an increase in the last two cohort admissions. [See Section E Attachment 2 for Student Diversity Data.]

The unit has long supported the Mary Mahoney Scholarship fund by sponsoring a table at their annual luncheon and we have encouraged our students of African descent to apply to this program for scholarship funds. We have been collaborative partners in a successful HRSA Diversity Grant awarded to Bellevue Community College's ADN program with one core

objective being to increase the number of minority BCC nursing students who bridge to our RNB program. Of particular note are Dr. Abrums' efforts since 2003 to develop, refine and resubmit a HRSA Diversity Grant to provide recruitment, retention and scholarship money for students from underrepresented groups. In spite of a review approval score of 91 in 2005, the project was not funded. However, this year we were awarded a one-time \$25,000 grant from the National Student Nurses' Association (NSNA) and the Johnson & Johnson Promise of Nursing Initiative to develop more focused strategies for the recruitment and retention of minority and other disadvantaged students. This grant drew heavily from Dr. Abrums' work and we are encouraged that with that funding, we can now begin to implement a few of her proposed strategies. [See Section E Attachment 3 for the funded "Diversity Outreach to Increase Students from Minority Populations" grant.]

As a member of the recruitment team, Bonnie Blachly, MN, faculty specialist in long-term care, is working with facilities such as the Leon Sullivan Care Center, The Parkshore, and Kline-Galland which serve diverse populations in Central and South Seattle and have large numbers of nursing staff who are underrepresented in nursing, especially at the BSN and MN levels.

Until recently, the UWB Nursing **faculty has been homogenous** in terms of race, age, or gender due to a shortage of nursing faculty in general and the shortage of faculty from underrepresented groups in particular. In 2006-07 we were fortunate to be able to hire two **new assistant professors one of whom (Dr. Mohammed of Japanese-Pakistani descent)** was hired through two years of support from the UW Provost's Office. The other new assistant professor (Dr. Petry) is from Germany and taught in Switzerland prior to coming to the U.S. for her doctoral studies. In 2007-08, we were able to recruit and hire Dr. Cooke as an Acting Assistant Professor representing our first African American Nursing faculty, **one of four African American faculty** on campus. With approval from the Provost to waive a national search, we have been able to transition Dr. Cooke from acting to tenure-line Assistant Professor effective December 2007.

The UWB Nursing program environment values diversity which is reflected in our curriculum which includes specific core courses related to diversity in both academic programs (BNURS 409 Social and Cultural Issues in Health Care and BNURS 504 Diversity and Social Justice), and faculty expertise related to healthcare disparities (Abrums, Cooke, Madison, Mohammed, Puzan and Resnick). Faculty also have the opportunity to develop elective courses according to their specific areas of interest and expertise. As a result we have **offered popular electives related to diversity issues** including BNURS 455 Women, Culture and Health and BHLTH 497 Special Topics: Global and Local Health Disparities (Abrums), and BHLTH 497 Special Topics: (Mis) Perceptions of the Body (Puzan) addressing mind-body dissonance related to disability and conditions such as obesity and disordered eating. Dr. Madison has developed two electives related to healthcare disparities including BHLTH 497 Special Topics: Current Issues in American Indian Health and BHLTH 497 Special Topics: Health and Culture in Hispanic Migrant Families. Appropriately, four of our faculty have received Diversity Fellowship Awards since the award program began in 2005-06.

Degree Programs

F.2a. Master's Degree: The program offers **one undergraduate (RNB) and one graduate (MN) degree** at this time. The majority of our RNB students return to school with the stated

intention of continuing on for graduate studies. BSN/RNB graduates interested in specific advanced practice focal areas typically apply to UWS or one of the other nursing schools in the area offering advanced clinical practice roles. Our MN program has a generalist orientation with a focus on leadership in nursing education, practice, and policy and program development. It also provides a solid foundation for success in subsequent doctoral study.

Being jointly accredited with the UW SON, we share a **common philosophy and goals** as well as shared objectives for MN study at the University of Washington. [See Section F Attachment 1 for MN program objectives and curriculum.] We provide our MN students opportunities for population focused study of advanced nursing through core courses of nursing theory and professional foundations, research, and field application at individual, family, community or systems levels.

In addition to these program objectives, our MN students are also expected **to uphold the standards** outlined in the *Essential Behaviors for Admission, Continuation, and Graduation for Master's Students* which are outlined in the MN Handbook. These *Essential Behaviors* include the cognitive, professional, motor, behavioral/emotional, communication and sensory/observational skills conforming to the highest standards of professional nursing practice.

The overall **MN curriculum conforms to the expectations** from the AACN Task Force (1996) as essential core content for any master's of nursing program regardless of focus or specialization. These core elements include research, policy, organization and financing of health care, ethics, professional role development, theoretical foundations of nursing practice, human diversity and social issues, and health promotion and disease prevention.

MN students are admitted as a cohort each fall for part-time graduate studies following either a 7 quarter or 11 quarter (two to three years) curricular pathway to completion. Classes are scheduled on Fridays and students take either one or two 3 credit course(s) each quarter. This scheme has been seen as a manageable schedule by our students most of whom pursue graduate studies while typically balancing full-time work and family responsibilities. Since fall 2002, we have admitted six graduate cohorts and have graduated 69 MNs.

F.2b. Measurement of Success for The MN Program: We gather information from a variety of sources to measure success in achieving the objectives for the MN program including enrollment statistics, the GPAs of new admissions, informal feedback after the first quarter of study, formal end of quarter course evaluations, completion rates, and exit interviews and satisfaction surveys of our alumni and their employers. Each student completes 6 credits of a scholarly project culminating in a formal, public presentation (examination). At the time of the public presentation, the supervisory chair completes an evaluation related to the MN student's scholarly competence. [See Section F Attachment 2 for list of scholarly projects 2004-2007.]

F.2c. Career Options Available for Graduates and Alumni's Professional Success: We offer BNURS 507 Advanced Nursing Roles (2 credits) as a required course providing students with an overview of the myriad of leadership roles in nursing including educator, researcher, administrator, and entrepreneur, as well as advanced practices roles of the nurse practitioner, nurse midwife, clinical nurse specialist, and nurse anesthetists. Although we do not prepare advanced practice nurses by most nursing definitions (NP, CNM, CNS, CRNA), it is important that master's prepared nurses are familiar with the range of advanced nursing opportunities. For

those **students who are interested in further study to prepare them in specific advanced practice roles**, we have developed **opportunities** for them to take electives on the Seattle campus in required advanced practice core requirement such as advanced physiology, pharmacology or physical assessment. This gives them a jump-start on completing a post-master's certificate in advanced practice nursing. With movement of advanced practice master's programs of study into the Doctorate of Nursing Practice (DNP), we have worked with our UWS SON colleagues on seamless articulation from our MN program into the DNP curriculum for those so interested. With that said, the majority of students who apply and matriculate at UWB have career interests in nursing education, research, and leadership which matches the strengths of our curriculum.

As a program largely devoted to increasing access to graduate education for place-bound working nurses, it is **critical that we stay informed of regional needs for master's prepared nurses**. Although the MN program funded in 1996 included a family nurse practitioner program, by 2002 when the program was fully funded for implementation, it was apparent that another focus would be more responsive to community needs. As a result, the focus of the MN program turned to leadership roles in practice and education along with preparation for possible doctoral study. This revision in purpose and focus has been most timely with respect to the emerging faculty shortage and regional hospitals' increased interest in achieving ANCC Magnet status which encourages hospital leaders to have baccalaureate or higher degree credentials.

Ongoing **exchange of information on emerging regional needs** occurs formally through our UWB Nursing Advisory Committee [see Section F Attachment 3 for roster] which meets twice a year and informally through our alumni network. These updates can influence student degree and career planning since our MN program allows for 18 credits with which to develop individual specialization (6 credits of electives, 6 credits of advanced fieldwork and 6 credits of scholarly inquiry). During the first five years of the MN program, our graduates have had a wide variety of employment options with a sizable number of graduates who are employed in basic nursing education programs and practice leadership positions. Although we do not have a formal program evaluation plan in place, its development has been evolving over the last two years. It began with the gathering of survey data from all the current BSN and MN alumni in the summer of 2006. In addition, we gathered entry survey data from all students entering our programs this academic year. Currently Drs. Westbrook and Resnick have taken the leadership to conduct an evaluation of our transition to the new curriculum and the Mt. Vernon cohort, as well as establishing an ongoing, systematic program evaluation plan.

F.3a. Objectives of the UWB Nursing Bachelor's Degree Program: The RNB program is an outgrowth of the UWS SON's commitment to provide educational opportunities for registered nurses in Washington State. The overall goal of the program is to provide access to upper-division course work leading to a BSN for nurses prepared in two-year ADN or three-year hospital-based diploma nursing programs. The UWB program admitted its first students during summer quarter 1992 and, by August 2008, we expect to have **over 1,200 UWB RNB alumni**, most continuing to live and work in the northern Puget Sound region.

The UWB RNB program is a specially designed program for working nurses. By utilizing transfer credits based on the Washington State agreement among two-year and four-year institutions and validation testing of prior learning, the RNB program allows registered nurses to

complete a baccalaureate degree in one year of full-time study or two years of part-time study. This accelerated progression is possible once all prerequisites for admission to the UW and the UWB Nursing Program have been met. The program prepares students to be successful in ongoing graduate education with close to 75% of our students indicating interest in ongoing education beyond their BSN degree. As a jointly accredited program, we share common tri-campus nursing goals for BSN education. [See Section F Attachment 4 for RNB program goals and curriculum plan.]

In addition to these expectations, our undergraduate students share additional expectations outlined in the *Essential Professional Ability/Behaviors for RN-to-BSN Students* which further amplify the requirements found in the University of Washington Student Conduct Code. These expectations include motor and sensory skills, communication, and cognitive, behavioral/emotional and professional conduct essential to professional nursing practice. These expectations are outlined in the BSN Handbook available to students in the form of hard copies as well as accessible on-line.

F.3b. Measuring Success in Achieving RNB Objectives: We gather information from a variety of sources to measure our success in achieving the objectives for the RNB program including enrollment statistics, GPA of new admissions, formal end of quarter course evaluations, completion rates, and exit interviews and satisfaction surveys of our alumni and their employers. A Senior Portfolio (BNURS 495) is completed for credit (1) during the final quarter of nursing core courses. To complete this requirement, each student reflects on personal and professional development during the program in three specific areas: critical thinking, oral and written communication, and applying theory to practice (program terminal objectives). Personal achievements are documented in a critical self-reflective essay that includes a commentary on their growth relative to their initial application goal statement and on examples of written work.

In order to **graduate from the Nursing Program**, a student must earn a minimum grade of 2.0 in each required nursing core course, maintain a cumulative GPA of 2.0 or better, and receive a satisfactory evaluation during the clinical site portion of BNURS 409. Each fall, the faculty discuss the progress of all students in the program. Each student receives a letter indicating the evaluation and possibly suggestions for improvement. Similar reviews are completed at the end of subsequent quarters with formal communication extended only to those showing unsatisfactory progress. Each student whose overall GPA falls below 2.5 is sent a letter of concern and is asked to meet with the RNB Advisor for counsel. A student whose GPA falls below 2.0 or who receives less than a 2.0 in a required Nursing course must petition the faculty to be allowed to continue in the program and to repeat the failed course. Approval of this petition is contingent upon the development of an individual plan for successful progression in the program under the guidance of the RNB Advisor and/or the Program Director and consent of the faculty. A student may be required to drop back to part-time status as a condition for continuation.

F.3c. Connecting Undergraduates to Research: An understanding and appreciation of the importance of research for a practice discipline is core to all nursing education. The most recent revision of the AACN *Position Statement on Nursing Research* (2006) outlines the expectations that **baccalaureate prepared nurses have a basic understanding of the research processes and elements of evidence-based practice so that they can apply research findings to their clinical practice**, identify possible researchable problems, and contribute to research team effort.

The expectation is reflected in one of the core goals of the RNB program expecting graduates to *“integrate methods of research and scholarship in making and prioritizing diagnoses, and in planning, implementing and evaluating the care of individuals, groups and communities.”*

BSN students meet this expectation through completion of statistics as a pre-requisite and subsequently, BNURS 403 Evidence-Based Practice and Nursing Inquiry as a core nursing course. The expectation at the baccalaureate level is to have an understanding of the research **process as it applies to research utilization, problem identification, and possible participation on clinical research teams in practice.** Students interested in developing further research skill development may enroll in BNURS 499 Undergraduate Research (1-5 credits) to either investigate a selected problem, or to conduct an analysis and interpretation of findings under the supervision of a faculty member. Additional opportunities are available for undergraduate students to work on faculty research. As noted earlier, Dr. Sikma has mentored several students as de Tornyay Center Healthy Aging Scholars by allowing them to work on her research related to self-directed care. Dr. Kovalesky has mentored undergraduate students interested in working on her descriptive content analysis of items regarding substance abuse in selected U.S. and Eastern European newspapers. Two of these students of Eastern European descent participated in the UW’s Ninth Annual Undergraduate Research Symposium in May 2006, with Dr. Kovalesky’s guidance.

F.3d. State-Mandated Accountability Measures: This unit has complied with the selected **state-mandated accountability measures** required and compiled by various University of Washington resources including the Office of Educational Assessment, the Office of Institutional Research, and the Graduate School Statistical Reports. [Please see Appendix A for time to degree and RNB degree efficiency index for data from 1996-2006.] Time to degree for BSN students averaged 2.8 years in 2004-05 and 2.4 years in 2005-06. Degree efficiency indices from 1996 through 2006 ranged from a low of 73.2% in 1997-98 to a high of 90.2% in 2002-03. Over the last five years the efficiency to graduation index has averaged 84.4%. Because our students are all working nurses who must balance work, family and school responsibilities, most of our students do not carry a full 15 credit load and a certain percentage each year request leaves of absence for personal/family reasons. While this can increase the time to graduation, a majority of students who take a LOA, eventually return to complete their UWB nursing degree.

F.3e. Career Options for Graduates: All of our RNB students have already completed their pre-licensure education and are either licensed and practicing RNs or are recent graduates planning to take their licensure exam (NCLEX). The majority of our **students are already in career pathways and in an era of nursing shortages at every level, our students have a range of opportunities within the profession.** As our students are working professional nurses, the opportunities for faculty and students to stay current on regional needs at an informal level is ongoing. Faculty partnerships with the practice community and biannual meetings of the UWB Nursing Advisory Committee are additional avenues for staying current. Since the majority of our incoming BSN students self-identify interest in graduate studies, we are able to track the numbers of our BSN alumni to matriculate for UW graduate studies with most frequent pathways being nurse practitioner, nurse educator and occasionally doctoral study. Since 2003, we have hosted an annual *“Nursing Career Advancement Day”* during which both clinical and educational pathways are explored with practice and school exhibitors. This annual event is an opportunity for our own students and faculty, nursing students from other schools, and practicing

nurses to convene and meet with employers and schools of nursing to consider career options. The day concludes with an alumni panel focusing on such issues as financing one's nursing education, innovative career pathways and employment opportunities for nurses.

Graduate Students

G.1a. MN Recruitment: A variety of **recruitment strategies** have been used including exhibits at local and regional nursing conferences, information sessions at area hospitals and community colleges, and sessions with our own RNB students. Each year we admit 2-5 students into the MN program directly from the RNB program. We find increasing numbers of second degree students in the ADN programs and can admit them directly into the MN program with few additional requirements. These include leadership and community health content required of BSN prepared nurses but not typically part of the ADN curriculum. This content can be met through petition describing academic or professional experience or taking two of our RNB courses (BNURS 430 Relational Leadership and BNURS 409 Community Partnerships). Finally, we have witnessed an informal and yet powerful recruiting venue through word of mouth and referral by our growing cadre of MN alumni.

G.1b. MN Retention Rates: Retention rates for the MN program have been quite high with attrition limited to health or family responsibilities rather than dissatisfaction with the program. In our first cohort of 29 students, 2 students left because of family illnesses and increased caregiving responsibilities. The one student from that initial cohort who has not yet graduated has experienced significant health challenges requiring several surgeries and extended leaves of absence (LOA). He is returning and expected to complete his MN in 2008. In subsequent cohorts, we have had one student who was dismissed from the program for unsatisfactory progress, one student who moved out of state, and another who withdrew due to family stress. All of the remaining MN students who have left have applied for temporary leaves of absence for personal, financial or family responsibilities with plans to return. Of the 128 MN students who have been admitted since fall 2002, 6.5% have withdrawn or failed, 69 of the 79 possible graduates have completed the MN (87.3%), and 6.2% are continuing students on the 11 quarter track. We have been pleased with our overall retention rate of 93.5% even though some students have had to take additional time to complete their degrees.

G.2a. Communication of Academic Program Expectations: Academic program expectations are communicated through the MN Handbook which is distributed at orientation and available on-line. In addition, informal brown-bag lunches are offered throughout the year to clarify expectations during each phase of study. Temporary faculty advisors serve as resources to the MN students until a permanent supervisory committee chair is appointed during the research course sequence. The MN advisor also has a major role in assuring timely updated communication to students and is available to meet with students as requested. The high turnover of MN advisors (3) has required significant back-up advisement by the director in order to assure accurate and timely communication with students. With the hire of Ms. Bale, we are hoping for stability in this important role.

G.2b. Graduation and Placement Record: We keep students informed of our graduation and placement record in a variety of ways including orientation, alumni panels, and utilization of many of our MN alumni as preceptors of current MN student advanced fieldwork opportunities.

G.2c. Examples of Program Mentoring/Advising: Faculty and the MN Advisor review all MN students for academic progress at the end of autumn quarter. Each student receives a letter indicating their current status. Each quarter thereafter, students are similarly reviewed. Only students having difficulty meeting academic or essential behavioral expectations are notified in writing of their status. At the end of their first year of study students are required to submit a “Master’s Project Initial Project and Curriculum Plan” signed by the student and the faculty advisor to the MN Advisor. This document includes a review of course work to date, plans for subsequent courses including electives, and anticipated graduation date. One copy is retained by the student and the other submitted for the student’s file in the program office. During a student’s final year of study, progress is monitored by the permanent faculty advisor and committee who ultimately sign the student warrant for graduation.

G.3a. Graduate Students Involvement in Unit Governance: Finding creative strategies to involve students who are working professionals and on a one day per week class schedule in program governance is a challenge. One current student and one alumna are members of the UWB Nursing Advisory Committee, but the MNs are not represented at our program meetings. Nonetheless, we have found venues for including graduate student consultation in our programmatic decisions. We included an opportunity for graduate students to attend public presentations and interview our faculty candidates during the 2005-06 faculty search process. As we anticipated the need to review and revise the RNB curriculum, MN students in BNURS 526 Program Planning and Evaluation were assigned small group projects that focused on developing specific curriculum evaluation plans. During Spring break 2007, Drs. Abrums and Resnick coordinated a trip to Cuba with eight MN students for the dual purpose of exploring that country’s primary health care system and to evaluate feasibility of developing short-term intensive partnerships in community health for the revised core nursing course, Partners in Community Health (BNURS 409). During the process of RNB curriculum revision, several student focus groups of MN who were RNB alumni were convened to respond to the proposed curriculum changes.

G.3b. Grievance Process: The grievance procedure outlined in the MN Handbook is consistent with the Graduate School Memorandum #33 www.grad.washington.edu/Acad/gsmemos/gsmemo33.htm which encourages students to meet with the faculty or staff with whom they have a concern in order to resolve the dispute informally. It then outlines specific steps for filing a formal complaint and establishment of a Grievance Committee through the Graduate School to oversee a formal hearing. We have had no formal grievances filed by any of our graduate students to date.

G.4. Graduate Student Service Appointments: We have few graduate service appointments. In selected cases when such appointments have been made, the appointees are typically UWS SON doctoral nursing students. Two part-time HRSA traineeships are awarded annually to students in their final year to cover tuition and a stipend but the appointments do not require service. Selected faculty have hired graduate student research assistants under their own grants and provide the necessary supervision and training. In all cases, the hiring process is consistent with guidance provided by the UW Graduate School according to Executive Orders 28 and 30: <http://www.grad.washington.edu/fellow/execor28.htm>.

Conclusion and Future Directions

Through the self-study process, we have reflected upon our relatively short but challenging history at the University of Washington Bothell. As the smallest unit on a rapidly evolving new campus, we are left a bit tired but also with an appreciation of how hard we have worked to address our challenges while maintaining our commitment to excellence. As we are beginning to experience some of the benefits of our efforts, we are focusing current attention on sustaining ourselves and considering future directions. Over the past summer we engaged the services of a consultant (Art Haines) to facilitate our fall strategic planning retreat. He conducted interviews with all program faculty and staff and found a strong sense of confidence in our collective skills to achieve our objectives as well as some concern regarding our ability to address conflict and disagreements in a way that leads to effective outcomes. Our fall retreat provided a venue for finding alignment around norms and actions to strengthen our sense of community among the faculty and staff which we believe is necessary to sustain us during our next phase of growth and change.

During the retreat we identified core priorities for the 2007-2009 biennium, identified faculty leads or co-leads for each and proposed a restructured format for program meetings to facilitate progress. The core priorities include: 1) the northern RNB cohort; 2) academic strategic planning; 3) academic program review/accreditation; 4) team building; 5) merit and tenure review processes; 6) compensation and recognition; 7) quality evaluation and assessment; and 8) possible impact of the proposed UW North Sound campus.

During 2007-2008 we successfully launched our northern RNB cohort, made progress in each of the priority areas and were moving forward with considering a health studies degree. By December we became aware that Nursing had been recommended in the SIS report and included in the Governor's proposed 2008 supplemental budget to begin classes in Everett as early as fall 2008. As a result, we have been following the current legislative session closely regarding the proposed UW North Sound (Everett) which if approved would significantly influence our future directions. By the time of the site visit in May the legislative session will have ended and we should have greater clarity on our next steps.

In early January we were informed by Barbara Perry, UW Director of Federal Relations that the federal budget included \$200,000 earmarked for UW Bothell Nursing to increase the number of master's prepared nursing faculty available to teach in Washington's community and technical college programs. We anticipate further guidance from FIPSE, the agency administering these funds, and should have more details by the time of our site visit.

We appreciate the importance of self-study and the academic review process. We want to thank the Graduate School for its guidance in preparation for this review and we look forward to reading the additional insights and recommendations from our evaluation team.

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