

**Appendix B:  
Boston College William F. Connell School of Nursing Continuous  
Program Improvement Plan (CPIP)**

**Approved by Faculty Assembly April 26, 2017**

The William F. Connell School of Nursing Continuous Program Improvement Plan formalizes the processes of program quality under the direction of the Connell Leadership Group (CLG). The CLG reviews the plan for accuracy, comprehensiveness, and consistency with the School and University strategic plans each September, informs the faculty and staff of their responsibilities, and designates a person or group to monitor the completion of the plan each year.

The organizing framework for the Continuous Program Improvement Plan is the “Standards for Accreditation of Baccalaureate and Graduate Degree Nursing Programs,” amended by the Commission on Collegiate Nursing Education (CCNE) in 2013.

Abbreviations and Definitions Used in Continuous Program Improvement Plan:

BC: Boston College  
CSON: Connell School of Nursing  
CLG: Connell Leadership Group  
EBI: Educational Benchmarking, Inc.  
EPC: Education Policy Committee  
FAC: Faculty Affairs Committee  
FA: Faculty Assembly  
F&A: Finance and Administration  
MA BORN: Massachusetts Board of Registration in Nursing  
MSE: Master’s Entry Program  
TOR: Teacher of Record for a course

Community of Interest: students, faculty, administrators, the Boston College Jesuit community, alumnae/i, and recipients and providers of health care locally, regionally, nationally and internationally.

**Standard 1: Mission and Governance:**

Category/ Subcategory of Evaluation	Purpose of Evaluation	Responsibility for Evaluation and Revision	Minimum Frequency	Documentation & Follow-up Responsibilities
Mission statement, objectives, and expected student outcomes (1A)	Reviews to ensure mission statement, objectives, and expected student outcomes are written and accessible to current and prospective students	CLG, Associate Deans	Annually	Annual reports of Associate Deans and minutes of CLG from Fall. Data to be obtained from review of: a. WEB pages b. CSON information (handbook)
Standards and guidelines (1A)	To ensure that program has identified nursing standards and guidelines that are accessible to potential and current students  To ensure compliance with MA BORN regulations	Associate Undergraduate and Graduate Deans, CLG  Dean and Academic Associate Deans	Annually  Ongoing	Minutes from discussion at annual program evaluation, and/or annual report of associate deans, review of printed materials and web that occurs annually at CLG (in Fall)  Policies published in student handbooks, university catalog, website, and faculty resource Guide as appropriate. Annual report to MA BORN every November
Mission, philosophy, goals (1A)	Review for clarity and congruence with university mission, professional standards and guidelines, and the needs and expectations of the community of interest	EPC, Academic Associate Deans	Every 5 years Last revised: April 2014	Minutes and annual reports of EPC (and FA if revisions are proposed). Data from other sources including student, alumni, employer and preceptor survey, EBI survey
Expected student outcomes (program and course objectives) (1B)	Review for congruence with university mission, professional standards and guidelines, and the needs and expectations of the community of interest	BS, MS, and PhD program committees, task forces, and course TORs	Annually based on feedback from our COI in such forums as DAB, and when standards and guidelines change. Last reviewed April 30, 2014	Minutes and annual reports of program committees, ad hoc curriculum revision task forces, and program retreats (and EPC and FA if revisions are proposed); Data from other sources including student, alumni, employer and preceptor survey, EBI survey, Course TORs feedback goes through the Committee process which gets reflected on their annual reports. Diversity Advisory Board advises re: inclusivity.

Category/Subcategory of Evaluation	Purpose of Evaluation	Responsibility for Evaluation & Revision	Minimum Frequency	Documentation and Follow-up Responsibilities
Expected faculty outcomes in teaching, scholarship, service and practice  (1C)	Review for congruence with other BC schools	CLG, Dept. Chair, Dean	Annually	Promotion and tenure policies in the university statutes, guidelines for workload units, position descriptions, data from the Office of Institutional Research, Planning & Assessment (teaching and research productivity reports), online course evaluations, Dept. Chair annual report
Expected faculty outcomes are communicated to faculty  (1C)	Review process by which expected outcomes are communicated to the faculty	Dean, CLG, Dept. Chair, Assistant Dept. Chair	Annually	Resource guide for faculty updated with promotion and tenure policies; workload; performance evaluations, student evaluations are reviewed and compared to institutional norms; minutes from annual meeting of Dean with untenured faculty; state of school address (accomplishments of faculty re: honors, awards, and grant productivity).
Articles of Governance, administrative structure, policies and procedures; position descriptions  (1D)	Review for congruence with mission and determine that they are current and accurate	FAC, CLG, Associate Deans	Annually (Formal review of Articles of Governance in 2010 by elected ad hoc group). Updated 2015	Minutes and annual reports of CLG, FAC (and FA if revisions are proposed). Elected ad hoc review groups. Dean and Provost must approve revisions. Updates made in Faculty Resource Guide each summer or as needed.
Faculty participation in governance  (1D)	Ensure roles in governance are clearly defined and meaningful participation occurring	FAC, CLG, Dean, Dept. Chair, FA	Annually	Minutes of faculty assembly in which suggestions made for change to whole community with subsequent follow up; faculty support needs assessment. Minutes of CLG in which follow up plan from faculty survey addressed; continuous feedback from questions raised in faculty assembly; minutes available to all faculty as are agendas. Faculty who are interested in attending specific meetings asked to do so.
Student participation in governance  (1D)	Review student handbook to ensure roles in governance are clearly defined and meaningful participation occurring	Academic Associate Deans	Annually	Handbook revisions reflect any changes. EBI data summarizes graduates' satisfaction with role. Exit interviews/summaries from student leaders

Category/Subcategory of Evaluation	Purpose of Evaluation	Responsibility for Evaluation & Revision	Minimum Frequency	Documentation and Follow-up Responsibilities
Faculty input for planning  (1D)	Review for effectiveness of faculty input	Faculty Affairs (FAC)	Annually	First faculty meeting faculty are asked to fill out any resource requests as part of budget planning process. Report on FAC annual faculty support needs assessment, that occurs every 2 years; 2016, 2018
Documents and publications (including web pages)  (1E)	Review for accuracy of all information	Communications Specialist; Associate Deans; Student Services and other BC departments	Ongoing (schedule managed by the Office of Marketing and External Relations)	Evident as materials are made available and website is updated. Entire website revamped Spring 2017
CSON academic policies (e.g., recruitment, admission, retention, progression)  (1F)	Review for accessibility, congruence with BC policies and mission, and fairness. Policies are fair, equitable, published, reviewed, and revised	Academic Associate Deans (in conjunction with Academic Officers Council of the University); any faculty may propose a change	Annually	Proposed changes submitted to the program committees and approved by EPC and FA

## **Standard 2: Institutional Commitment and Resources**

Category/Subcategory of Evaluation	Purpose of Evaluation	Responsibility for Evaluation & Revision	Minimum Frequency	Documentation and Follow-up Responsibilities
(2A) Physical resources (office and research space, classroom and learning laboratory space, classroom and office technology)	Review for contribution toward achievement of mission, philosophies, and expected faculty and student outcomes. Develop and oversee plans for any improvement	Dean, Associate Deans FAC, Simulation Laboratory Director	Annually  Deans Survey: July  Faculty Support Needs Assessment: Every 2 years  Budget Report: October	Budget process done by Dean and Associate Dean for Finance in terms of space needs and need for alternations and revisions. All Associate Deans and Lab Director have input to budget process regarding space. CSON budget, faculty and student outcome data (see attached Tables), reports of Dean's Survey, Faculty Support Needs Assessment, CLG, Academic Technology Committees, EBI data
(2A) Fiscal resources in terms of non-physical resources (adequate budget)	Review for contribution toward achievement of mission, philosophies, and expected faculty and student outcomes. Develop and oversee plans for any improvement	Dean, Associate Deans, Associate Research Dean, Dept. Chair, committees as appropriate	Annually	Selected data from CSON budget book, number of full time faculty, number of part time faculty, faculty/student ratios, annual reports, faculty and staff budget requests
(2B) Academic support services (library, technology support, research support, simulation, tutoring, admission and advising services)	Review for contribution toward achievement of mission, philosophies, and expected faculty and student outcomes. Develop and oversee plans for improvement as needed	Associate Deans, Associate Director of Student Services, FAC, Simulation Lab Director, library Director, tutoring services within CSON	Annually  Biennial	Annual Reports of Dean & Associate Deans and FAC; Minutes of FA, FAC, and committees, EBI data. Academic technology committee  Faculty Support Needs Assessment

Category/Subcategory of Evaluation	Purpose of Evaluation	Responsibility for Evaluation & Revision	Minimum Frequency	Documentation and Follow-up Responsibilities
Academic support services (library, technology support, research support, simulation, tutoring, admission and advising services) (2B)	Review for contribution toward achievement of mission, philosophies, and expected faculty and student outcomes. Develop and oversee plans for improvement as needed	Associate Deans, Associate Director of Student Services, FAC, Simulation Lab Director, library Director, tutoring services within CSON	Annually  Biennial	Annual Reports of Dean & Associate Deans and FAC; Minutes of FA, FAC, and committees, EBI data. Academic technology committee  Faculty Support Needs Assessment
Student Support Services (e.g., financial aid, health services, counseling, mission, housing, ministry) (2B)	Review for contribution toward achievement of mission, philosophies, and expected student outcomes. Develop and oversee plans for improvement.	Academic Associate Deans (in consultation with Vice Provosts of the University), Program committees, Dean	Annually	Notes or Annual Report of Associate deans. Minutes of Program Committees, Provost's Advisory Committee, Academic Offices Council, and Council of Deans; EBI data
Chief Nurse Administrator is nurse, holds graduate degree in nursing, doctoral degree, and is academically and experientially qualified (2C)	To ensure suitable qualifications on appointment and that Dean remains qualified to accomplish the mission, goals, and expected program outcomes.	Search Committee and Provost on appointment.  Review of continued qualifications to accomplish mission, goals and expected outcomes.  Review of accomplishments in terms of meeting strategic aims.	Initially on appointment  Annually  At least every five years (more often if deemed warranted). Dean discusses strategic aims with Faculty to determine if new aims need to be added or any aims need to be subtracted from school planning.	Search committee reports to Provost and President initial qualifications met.  Self-evaluation to Provost on continued progress toward meeting goals and expected outcomes.  State of the School address to share continued ability to accomplish mission, goals, and expected outcomes, especially as annual challenges are reviewed.  Dean provides information to faculty on accomplishments regarding strategic aims and modifications are made, based on Faculty input in Faculty Assembly.

Category/Subcategory of Evaluation	Purpose of Evaluation	Responsibility for Evaluation & Revision	Minimum Frequency	Documentation and Follow-up Responsibilities
Faculty Compensation  (2D)	Ensure that faculty compensation is fair and equitable in relation to other units at BC and to other schools of nursing.	Dean, Associate Dean for Finance & Administration, University Faculty Compensation Committee, Provost	Annually	Annual Report of Dean to Provost, CSON budget process, comparison with CCNE data. In 2011, significant market adjustments increasing salaries to the 75% percentile were made. Continued market adjustments made for individual faculty as needed.
Preceptors  (2E)	Review to determine roles are clearly defined and communicated to preceptors and that performance expectations are clearly defined and communicated	Specialty coordinators, clinical placement specialist, Dept. Chair, Assistant Dept. Chair	Each semester   Annually	MS: Specialty Program Directors review site evaluations, make decisions about site selections and submit preceptor qualification information to Dean's office. BS: Synthesis Coordinator reviews site evaluations, makes decisions about site selection, and submits preceptor qualification information to Dean's office.  Preceptor information for pre licensure programs is submitted to MA BORN each fall. Preceptors are indirectly evaluated as part of the clinical site evaluations. MS Specialty Program Directors make site visits and obtain feedback from students pertaining to their clinical placement. Complaints that are submitted to the Associate Deans are reviewed. Pertinent feedback prior to renewing clinical site contracts is solicited.
Environment for teaching, scholarship, service, and practice (support staff, travel monies, faculty development programs, research support, time for service, practice and research, et al.)  (2F)	Review to ensure adequate support for these activities in keeping with the mission, philosophies, and expected faculty outcomes	Dean, CLG, FAC, Associate Dean for Finance & Administration, Dept. Chair	Annually   Biennial	Annual Reports of the Dean, Associate Dean for Research, Associate Dean for Finance & Administration, and Department Chair as well as minutes of CLG and other committees to document faculty development activities.  Faculty Support Needs Assessment

### **Standard 3: Curriculum, Teaching/Learning Practices and Individual Student Learning Outcomes**

Category/Subcategory of Evaluation	Purpose of Evaluation	Responsibility for Evaluation & Revision	Minimum Frequency	Documentation and Follow-up Responsibilities
Curriculum: courses  (3A)  (3B)  (3B)	Review for clear course objectives (or competencies) that are: <ul style="list-style-type: none"> <li>• congruent with the mission, philosophy and program outcomes</li> <li>• consistent with the roles for which the program is preparing its graduates</li> <li>• reflective of professional nursing standards &amp; guidelines (<i>Essentials</i> documents, <i>Criteria for Evaluation of NP Programs</i>, and others as required/appropriate)</li> </ul>	Course TOR's, Academic Associate Deans, MS specialty coordinators, Program committees, EPC, Faculty Assembly	Annually (and whenever guidelines or standards are changed)	Groups present proposals for revision to appropriate Program Committee. Documentation is in minutes of Program Committees, EPC, and FA.  Minutes or reports of curriculum retreats, ad hoc curriculum revision groups, Program Evaluation Day  EBI student exit assessment data (annual) and alumni (every 3 years, next in 2018) data; CSON survey of employer data (planned for 2018)  Course syllabi state which professional nursing standards and guidelines are used. Program Committees review course syllabi for standards & guidelines when new or revised courses are submitted. Course TOR updates syllabi each semester. Minutes reflect changes. Course TORs feedback goes through the Committee process which gets reflected on their annual reports.



Category/Subcategory of Evaluation	Purpose of Evaluation	Responsibility for Evaluation & Revision	Minimum Frequency	Documentation and Follow-up Responsibilities
Curriculum: structure  (3B, 3C)  (3B, 3C)  (3B, 3C)	Review for logical structure that leads to achievement of expected individual and aggregate student outcomes: --BS curriculum builds on a foundation of arts, sciences & humanities --MS curricula build on BS preparation and incorporates <i>Master's Essentials, Criteria for Evaluation of NP Program, or other relevant specialty criteria</i> --MSE program incorporates <i>Baccalaureate Essentials</i> in the pre-licensure year and <i>Master's Essentials</i> in the advanced practice year	Academic Associate Deans, Program Committees, EPC, CSON representative to University Core Development Committee (undergraduate); Faculty Assembly	Annual review of Program Evaluation data  Whenever curriculum revisions are made	Minutes of Program Committees, EPC, and FA  Minutes or reports of curriculum retreats, ad hoc curriculum revision groups, Program Evaluation Day  EBI student exit assessment data (annual) and alumni (every 3 years, next in 2018) data; CSON survey of employer data (next in 2018).  If inadequate response rate on employer satisfaction program directors will contact employers and conduct interviews (as was done in 2015-6) and employer satisfaction of undergraduate alumni will be obtained from largest employers in area (as was done in 2015-6).
Teaching-learning practices and environment  (3D)	Review for support of achievement of expected individual and aggregate student learning outcomes: <ul style="list-style-type: none"> <li>• classrooms</li> <li>• clinical sites</li> <li>• learning laboratory</li> <li>• simulation</li> <li>• distance education</li> <li>• international experiences</li> <li>• faculty/student ratios for theory and clinical courses</li> </ul>	Course faculty, Associate Deans, CLG, Program committees, Clinical Placement Specialist, EPC, Dept. Chair, preceptors, specialty coordinators, Academic Technology Committee, Director Resource Learning Center	Annually/ ongoing	Improvements and upgrades are made on an ongoing basis. Major changes are approved through Program and other committees as appropriate and/or CLG and are reflected in minutes. Annual reports of Associate Deans include data about international experiences for students (# studying abroad, participating in Global Health Initiative, etc.). EBI student exit assessment data (annual) and alumni (every 3 years, next in 2012) data; CSON survey of employer data (planned for 2012) Student and faculty evaluations of undergrad clinical sites are collected each semester. Data are reviewed by Department chair/Assistant Dept. chair, TORs, and Clinical Placement Specialist. Grad students evaluate preceptors and agencies upon completion of each course. Data are reviewed by specialty coordinator and at specialty coordinator meeting.

Category/ Subcategory of Evaluation	Purpose of Evaluation	Responsibility for Evaluation & Revision	Minimum Frequency	Documentation and Follow-up Responsibilities
Curriculum and teaching- learning practices  (3E)	Review for relevance to the needs and expectations of the student population (e.g., adult learners, English language learners) and others in the community of interest	Course faculty, Program Committees, Department Chair, CLG, EPC	Annually/ ongoing	Improvements and upgrades are made on an ongoing basis. Major changes are approved through CLG or Program committees and are reflected in minutes. Students evaluate all courses at the end of the semester, and evaluate the curricula at the end of the program (EBI exit assessment). Dean, Academic Associate Deans, and Department Chair review course evaluation data. There are student representatives on Program Committees and EPC .
Student achievement of course and program objectives (expected student learning outcomes)  (3F)	Ensure that evaluation policies and procedures are consistently applied and appropriate for the course and program objectives	Course TORs, Associate Deans, Academic Standards (Progression) Committees	Each semester	All course syllabi include grading criteria, which are determined by the TOR in accordance with school policies. Student handbooks delineate academic policies, including procedure for academic evaluation disputes. Student clinical evaluations are filed in student records in the Associate Deans' offices or student eFolder and included by students in their professional portfolios. Policy changes originate in Program Committees and are reflected in minutes. Course TORs feedback goes through the Committee process which gets reflected on their annual reports.
Curriculum and teaching- learning practices  (3G)	Ensure that these are evaluated at regular intervals to foster ongoing improvement	Course faculty, Program Committees, Department Chair, CLG	Annually/ ongoing	Other data include: EBI alumnae/survey and School's employer survey. Peer teaching evaluation as appropriate

**Standard 4: Program Effectiveness: Assessment and Achievement of Program Outcomes**

Category/Subcategory of Evaluation	Purpose of Evaluation	Responsibility for Evaluation & Revision	Minimum Frequency	Documentation and Follow-up Responsibilities
(4A) A systematic process is used to determine program effectiveness	To ensure process is written, ongoing, is comprehensive, identifies data to be collected, provides timelines, and is reviewed and updated.	Dean works with Assistant Dean for Graduate Enrollment and Data Analytics to ensure appropriate data are collected, collated, and analyzed.  EPC reviews CPIP items to ensure that appropriate data are being collected and that data being collected is in line with CCNE standards.	Annually	Dean, EPC and Assistant Dean for Graduate Enrollment and Data Analytics disseminate data to appropriate members of CLG and other stakeholders such as program committees.  EPC reviews CPIP annually. Shares concerns about data collection related to student outcomes with Dean, academic deans, program committees as appropriate and/or brings suggested changes forward for approval by Faculty Assembly.
(4B) Program completion rates demonstrate program effectiveness	Completion rates for last 3 years examined collectively for trends and to ensure completion rate is 70% or higher. We strive to meet university benchmark of 95% completion rate.	Assistant Dean for Graduate Enrollment and Data Analytics collects and analyzes data.	Annually	Assistant Dean for Graduate Enrollment Management and Data Analytics reviews data and shares with Connell Leadership Group (CLG) and CLG takes appropriate action if there are changes in completion rates.

Category/Subcategory of Evaluation	Purpose of Evaluation	Responsibility for Evaluation & Revision	Minimum Frequency	Documentation and Follow-up Responsibilities
<p>Licensure and certification pass rates demonstrate program effectiveness.</p> <p>(4C)</p>	<p>Aggregate student data are evaluated for effectiveness of programs individually and collectively and shared with key stakeholders.</p> <p>We strive for NCLEX and certification rates higher than national average pass rates</p>	<p>Assistant Dean for Graduate Enrollment and Data Analytics analyzes data and shares with Associate Deans for Graduate and Undergraduate Programs.</p> <p>Information shared with potential students, current students, and faculty on website.</p>	<p>Annually</p>	<p>Associate Deans circulate results to program committees and faculty via email or at program evaluation day. Information placed on website by Communications Specialist and updated annually. Follow up occurs as needed in program committee meetings or in meetings of graduate specialty program directors. Summary of review and any remedial actions are recorded in minutes and/or annual reports.</p>
<p>Employment rates demonstrate program effectiveness.</p> <p>(4D)</p>	<p>Compare aggregate student data regarding employment with expected outcomes</p>	<p>Associate Deans obtain data from Program Directors or others conducting exit interviews annually.</p> <p>University Career Services provides employment data of undergraduate students.</p>	<p>Annually</p>	<p>Associate Deans gather information from graduating students and/or program directors (in case of graduate students) regarding employment, and provide data to Assistant Dean for Graduate Enrollment and Data Analytics.</p> <p>Data shared with program committees and in other meetings as appropriate, such as program evaluation day. Summary of review and any remedial actions are recorded in minutes and/or annual reports.</p> <p>Career Services conducts annual survey of undergraduate employment and shares with key stakeholders in school. This information shared with Assistant Dean for Graduate Enrollment and Data Analytics and with Communication specialist for communicating with external stakeholders.</p>

Category/Subcategory of Evaluation	Purpose of Evaluation	Responsibility for Evaluation & Revision	Minimum Frequency	Documentation and Follow-up Responsibilities
(4E) Program outcomes demonstrate program effectiveness.	Achievement of outcomes other than those in Key elements b,c,d,f.	Undergraduate and graduate programs have outcomes that are evaluated throughout the program and at program completion.	Annually	<p>Associate Deans examine achievement of program outcomes as measured in EBI and exit interviews annually and by employer satisfaction and alumni satisfaction every 3 years.</p> <p>Associate Deans work with appropriate program committees to ensure changes are made if outcomes not being met.</p> <p>Program committees and Associate Deans report progress in program outcomes via annual reports.</p>
(4F) Faculty outcomes individually and in the aggregate demonstrate program effectiveness	<p>Evaluate that in the aggregate faculty outcomes are consistent with and contribute to achievement of the program's mission and goals;</p> <p>-are congruent with the institution and program expectations,</p> <p>-are identified by the faculty as a group</p> <p>-reflect expectation of faculty in their roles and evaluation of faculty performance</p>	<p>Promotions Committee; Tenured/Untenured Faculty, Department Chair</p> <p>-Chair mentorship meetings</p> <p>-Dean individual annual review meetings with faculty</p> <p>-Associate Dean for Research</p>	Annually	<p>Faculty Assembly, Provost, President Minutes of Tenured Faculty, Faculty Promotions Committee, Summary of untenured faculty meeting on promotion and tenure with the Dean</p> <p>Department Chair's Annual report, Associate Dean for Research Annual Report</p> <p>Dean's Annual Report to the Provost; Dean's Annual State of the School presentation</p>

Category/Subcategory of Evaluation	Purpose of Evaluation	Responsibility for Evaluation & Revision	Minimum Frequency	Documentation and Follow-up Responsibilities
(4G) Program defines and reviews formal complaints according to established policies.	Ensures that definition of formal complaints and procedures for following complaints are communicated to relevant constituencies.	Associate Deans;  Department Chair  Dean	Annually or as needed	Academic Associate Deans present formal complaint data to the Dean and/or program committees as appropriate and if applicable at Program Evaluation day each May. Associate Dean for F&A presents other formal complaint data and Human Resources complaints to CLG.  Faculty complaints are presented to Department Chair and to appropriate university grievance committees as appropriate.
(4H) Data analysis is used to foster ongoing program improvement.	Ensure that CPIP provides a vehicle for constant data analysis that identifies discrepancies and needed changes and fosters improvement in all programs with faculty engagement in the process.	Assistant Deans  Associate Deans  Department Chair  Faculty  Communication Specialist	Ongoing with annual reviews as part of annual reporting cycle.	Data used on ongoing basis to ensure that expected outcomes and actual outcomes are in alignment. Data are shared with appropriate constituencies, including program committees and leadership group; such that goals for the new academic year reflect any additional needed changes identified in annual reporting cycles.