

**MEDICAL UNIVERSITY OF SOUTH CAROLINA**  
**COLLEGE OF NURSING**  
**PROGRAM MODIFICATION**  
**TO THE SOUTH CAROLINA COMMISSION ON HIGHER EDUCATION**  
**TO REOPEN**  
**RN to BSN PROGRAM**  
**Date of Submission: May 1, 2014**

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Vice President of Academic Affairs and Provost

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## **2. Classification**

**Program Title:** Bachelor of Science in Nursing

**Concentration/options/track:** RN – BSN

**Academic Unit in which the program resides:** College of Nursing

**Designation, type and level of degree:** Bachelor of Science in Nursing (BSN)

**Program Length:** One-year program (3 semesters)

**Proposed Date of Implementation:** August 2014

**Current CIP:** 513801

**Program Identification:** Modified

**Site:** Medical University of South Carolina, Charleston, South Carolina

**Scholarship:** In most situations students will not qualify for the Palmetto Fellow or LIFE scholarships.

**Delivery Mode:** Online course, with required clinical

## **3. Institutional Approval**

1. College of Nursing Faculty Assembly: March 17, 2014
2. Deans Meeting: March 17, 2014
3. Vice Presidents' Council: March 19, 2014
4. Board of Trustees: April 11, 2014

## **4. Program Purpose and Long Range Goals**

**Description:** The RN-to-BSN (RN-BSN) program will be a modification of the current Accelerated BSN program at the Medical University of South Carolina (MUSC) College of Nursing (CON). This will be a three continuous semester online program for registered nurses (RN) who are graduates of an accredited associate degree or diploma program in nursing and it will lead to the Bachelor of Science degree in Nursing. The program will have a yearly fall start date and will be full time. This proposed modification would allow registered nurses to enter the BSN program after meeting required prerequisites. The program will utilize existing courses in the current accelerated BSN program and add new courses to meet the needs of working, adult nurses. The curriculum has been modified and is designed to attract the working professional who has already passed NCLEX and who now plans to obtain a BSN degree. Students will work online, asynchronously to obtain education while accommodating their RN work shifts. Intense courses based on adult learning theories will be offered in 5-week blocks over the semester. The program focuses on the knowledge, skills and values deemed essential for professional nursing practice with a specific focus on leadership, care coordination and communication skills. The baccalaureate program also provides a foundation for graduate study in nursing. The clinical courses focusing on gerontology, community/public health, and leadership/quality improvement will span the entire semester. The program is designed to meet the American Association of Colleges of Nursing (AACN) “Essentials of Baccalaureate Education for Professional Nursing Practice (2008).”<sup>1</sup> In addition, the following professional nursing standards and guidelines will be used:

- *Code of Ethics for Nurses With Interpretive Statements* (American Nurses Association, 2001)
- *Nursing: Scope and Standards of Practice* (American Nurses Association, 2004)
- *Nursing's Social Policy Statement* (American Nurses Association, 2003)
- R.91-11-C. Department of Labor, Licensing and Regulation--State Board of Nursing. Nursing education programs. Faculty. *South Carolina Code of Regulations* (South Carolina General Assembly, 2008)

**Purpose and Goals:** The purpose of this RN-BSN program is to prepare graduates for professional nursing roles such as care coordinators, clinical leaders, applicants for graduate

study, and contributors to interprofessional healthcare teams. The overall goals are to educate professionals to integrate evidence-based clinical knowledge and research with effective communication and leadership skills in order to translate best clinical practice into care of individual patients, families, communities, and populations. Nurses educated at the baccalaureate level have been shown to enhance patient outcomes.

Program Outcomes: Graduates will demonstrate the following:

1. Overall satisfaction with their educational experience.
2. Knowledge, skills, and abilities to provide leadership, evidence-based care, and patient safety to achieve quality outcomes in patient care.
3. Competence in care coordination and facilitation of access to resources across the continuum of healthcare environments in order to meet the evolving healthcare needs of individuals, families, communities, and populations.
4. Effective interprofessional communication and shared decision-making in applying principles of systems and organizational processes to promote quality care and patient safety.

Job Opportunities: The Bureau of Labor Statistics (BLS) in 2012 identified registered nursing as one of the leading occupations in terms of job growth through 2020.<sup>2</sup> They projected a growth of 19% from 2012 to 2022, faster than the average for all occupations. The BLS projects a need for 1.2 million nurses to fill new positions (>500,000) and replace a retiring workforce over the next eight years.<sup>2</sup> Although nurses entering the RN-BSN program already hold jobs in the nursing field, they are often unable to seek promotion without a baccalaureate degree. In addition, there is growing evidence that facilities with a large proportion of baccalaureate-prepared nurses have better patient outcomes, including reduced morbidity and mortality.

National and South Carolina Data: According to the American Association of Colleges of Nursing (AACN), registered nurses are recognizing the need to get a baccalaureate degree, and many employers are providing funding and support to assist them.<sup>3</sup> Enrollment into RN-BSN programs has increased by 15.5% and continues to grow.<sup>4</sup> There are 692 current programs at the state and national level, with approximately 400 of these at least partially online; however, they cannot meet the needs of those hoping to return to school. According to AACN, close to 3,000 RN-BSN students are turned away from programs each year.<sup>3</sup> There are currently 11 RN-BSN programs in the state of South Carolina but only 5 of them are online programs. Registered nurses who wish to obtain their bachelors degree may not be able to attend traditional classroom education. The need for online education in the state is critical. Every year the South Carolina Department of Commerce and the federal BLS collaborate to estimate the future employment levels for many healthcare occupations including nursing. In the state of South Carolina the number one occupation that is expected to grow the fastest is Registered Nursing.<sup>5</sup> South Carolina anticipates a 25% increase in jobs for registered nurses between 2008-2018 with average annual job openings totaling 1,633.<sup>5</sup> In addition to this, 33,445 nurses in the state of South Carolina do not hold baccalaureate degrees. This is 59% of the 64,800 registered nurse workforce in the State. It is essential that we increase the educational programs in South Carolina to not only meet the needs of these nurses, but to achieve the goals of the Institute of Medicine's (IOM) landmark report "The Future of Nursing: Leading Change, Advancing Health," which called for increasing the number of baccalaureate-prepared nurses in the workforce to 80% by 2020.<sup>6</sup> The Tri-Council for Nursing, including the AACN, American Nurses Association, American Organization of Nurse Executives, and the National League for Nursing have all stated that a more highly educated nursing workforce is critical to meeting the nation's nursing needs and delivering safe, effective patient care.<sup>7</sup> The Tri-Council has issued a consensus statement calling for all registered nurses to advance their education. The RN-BSN

program at MUSC will complement the current programs and will help South Carolina meet this goal.

## **5. Justification for the Program**

Need and Rationale: The American Nurses Association (ANA) first recommended the baccalaureate degree as the “minimum preparation for the beginning professional nursing practice” in 1965. Although there are still numerous entries into the nursing field including LPN, ADN and diploma programs, it is becoming evident that the BSN should be the required entry-level degree. Healthcare has becoming increasingly complex and healthcare organizations, as well as the federal government, are calling for BSN-prepared nurses. BSN-prepared nurses are better equipped to meet the demands of practice. In 2008, the ANA passed a resolution which recommended that all RNs who graduate from an ADN or diploma program be required to earn a BSN within 10 years of graduation.

In 2013, the IOM released a study of nursing and healthcare, “The Future of Nursing: Leading Change, Advancing Health.”<sup>6</sup> It addressed the need to prepare a nursing workforce that is adept at critical thinking and the use of research and best evidence. Patients are older, sicker and more diverse, and nurses are expected to work more independently toward actively promoting health and the well being of a population. The report addressed the core competencies of nurses to include leadership, health policy, systems improvement, research and evidence-based practice, teamwork and collaboration, and technological knowledge. In addition, they must have competency in specific areas such as community health, public health, and geriatrics. The IOM report provided clear directives to advance the formal education of registered nurses and recommended that the proportion of nurses with baccalaureate degrees increase to 80% by 2020.<sup>6</sup>

ADN, diploma and BSN nurses all sit for the same licensing examination and are held to the same professional standards; however, there is a strong movement in this country to have the BSN as entry into practice. The American Association of Colleges of Nursing (AACN) recognizes the BSN degree as “the minimum educational requirement for professional nursing practice” and states that the BSN degree is essential for nurses seeking to perform at the leadership level. They also state that the BSN-prepared nurse is the only basic nursing graduate prepared to practice in multiple healthcare settings such as critical care, ambulatory care, and public and mental health. The AACN reported that there was a 15.5% increase in the enrollment of nurses in RN-BSN programs from 2010-2011 and this marked the tenth year of increases.<sup>4</sup> The AACN reported that 52,922 students graduated from BSN entry programs in 2011 and 24,311 graduated from BSN completion programs.<sup>8</sup> Quality patient care hinges on having a highly educated nursing workforce, and to do this, South Carolina needs to be able to provide education to 59% of the current workforce that does not hold a BSN degree. In a recent study surveying RN-BSN programs they found that 46% of these programs admitted less than 50 students and 53% graduated fewer than 24 students a year.<sup>9</sup> In order to ensure that all nurses have BSN degrees, it is essential that we open programs to meet the growing demand.

The National Advisory Council on Nurse Education and Practice (NACNEP) also supports the BSN as the minimum for entry into practice. This organization reports to the U.S. Congress and the U.S. Secretary for Health and Human Services on nursing issues and has asked for the U.S. Congress, Department of Health and Human Services, and the Department of Education to work with nursing programs to reach this goal. They state that this would improve the quality and safety of healthcare in the United States. They call for nurse educators to “evaluate and revise education curricula, approaches, and programs used to educate new and practicing nurses”.<sup>10</sup> MUSC's proposed RN-BSN program addresses a need not only in the State but nationally.

Studies have demonstrated that BSN-prepared nurses are associated with decreased patient mortality. A new study in “The Lancet” found that patients with complications post-

surgery are more likely to live if they are cared for in hospitals with adequate staffing levels and higher numbers of BSN-prepared nurses. They found that a “10% increase in the proportion of nurses holding a BSN in an acute care setting is associated with a 7% decrease in the risk of death in discharged patients following common surgeries such as knee replacements, appendectomies and vascular procedures.”<sup>11</sup> The American Association of Colleges of Nursing (AACN) recently stated that this article adds to the growing body of evidence that quality patient care requires a well-educated nursing workforce.<sup>12</sup> In addition, the U.S. Congress, the U.S. Department of Health, and Human Services and the U.S. Department of Education are being asked to “work with U.S. nursing programs to support the goal of having all registered nurses prepared at the baccalaureate in nursing (BSN) or higher degree level to improve quality and safety” of care in the United States.<sup>10</sup>

To ensure the RN workforce achieves baccalaureate or higher degrees by 2020, colleges must become part of the innovative solutions that will develop the future generations of nurses. The Medical University of South Carolina Hospital Authority (MUHA) is just one of hundreds around the country that have started to require that their nurses have at least a baccalaureate degree in nursing. NACNEP recommends that Colleges of Nursing work with healthcare providers to close the gap between practice and education for nurses and to improve safety and quality of care for patients.<sup>10</sup> The MUSC CON has worked closely with MUHA in the current BSN program, and the RN-BSN program will further this collaboration.

The Medical University of South Carolina (MUSC) College of Nursing (CON) is opening the RN to BSN program with the encouragement and full support from MUHA as well as other hospitals in the region to raise the education level of the RN workforce. The goal in providing this higher-level education is to enhance both the clinical competency and the care delivered to improve the quality of care that all patients receive. MUHA currently has 800 nurses without baccalaureate degrees. MUHA has put a plan into place to ensure BSN education for all of their nurses in the next four years and has asked the CON to work with them to help meet this goal. Qualified MUHA nurses will have priority admission into the program during the first two years.

Centrality to the Commission-Approved Mission of the Institution: The College of Nursing (CON) supports the mission of MUSC and is committed to providing evidence-based nurse education in an interprofessional environment; developing, testing, and disseminating nursing knowledge in the health sciences; and demonstrating excellence in nursing practice that embraces equity and culturally-effective care to patients, families, and communities. The CON’s mission was revised and updated in July 2013. The MUSC College of Nursing’s educational programs aim to prepare professional nurses who are leaders at all educational levels to practice nursing in a dynamic, interprofessional healthcare environment.

The curriculum prepares nurses who will practice nursing at the baccalaureate clinical level. The existing BSN program has a non-degree entry option for those without nursing degrees, who have met the prerequisites for the program. With the proposed modification, a second entry point will be offered to nurses who have passed the NCLEX exam who wish to return for their baccalaureate degree. The curriculum is designed to meet the overall mission of the CON. The programs will share common courses and have unique courses that are fast paced. This new RN-BSN curriculum, like the current BSN curriculum, is carefully designed and embodies MUSC’s and the CON’s mission by unifying education, research, and clinical practice.

## **6. Enrollment**

Admission Criteria: Table 1 outlines the required prerequisites that students must take for entry into the program. In addition to this, students will receive 30 credit hours if they are registered nurses who have successfully passed the NCLEX exam, demonstrating competency in their RN education. The preferred minimum cumulative Grade Point Average (GPA) will be a 3.0 on a 4.0 scale. Students must earn a minimum grade of “C” in prerequisite courses. Course work may be in progress at the time of application, but must be completed by the initial date of

enrollment. Three of the four required science courses must be completed at the time of application. Applicants will be required to submit official transcripts, three (3) satisfactory reference forms, a one hundred (100) word essay, and a resume with the application.

**Table 1: Prerequisite Courses**

|   | <b>Semester Hours</b> |
|---|-----------------------|
| English Composition/Literature          | 6 sh                  |
| Lifespan Human Growth and Development   | 3 sh                  |
| Human Anatomy                           | 4 sh                  |
| Human Physiology                        | 4 sh                  |
| Microbiology                            | 4 sh                  |
| Statistics                              | 3 sh                  |
| Science elective                        | 4 sh                  |
| Social Science and Humanities electives | 15 sh                 |
| General electives                       | 17 sh                 |
| <b>Total:</b>                           | <b>60 sh</b>          |

Projected Enrollment in the First Five Years: This proposed modification would increase student enrollment in the CON by 30 in the first year with the ability to increase beyond that as we expand the program to the community and the State. The goal would be to increase student enrollment by 60 students in the BSN program over the next 4 years. Currently the CON has 180 BSN students enrolled and admits 80 students into the BSN program twice a year. This would increase our total BSN numbers to 210 in year one and up to 240 by year four. Table 2 estimates new enrollment over the next five years for the RN-BSN program.

| <b>Table 2: ESTIMATED NEW ENROLLMENT</b> |             |              |               |              |               |              |
|--|-------------|--------------|---------------|--------------|---------------|--------------|
| <b>YEAR</b>                              | <b>FALL</b> |              | <b>SPRING</b> |              | <b>SUMMER</b> |              |
|  | Headcount   | Credit Hours | Headcount     | Credit Hours | Headcount     | Credit Hours |
| 2014-2015                                | 30          | 13           | 30            | 9            | 30            | 9            |
| 2015-2016                                | 40          | 13           | 40            | 9            | 40            | 9            |
| 2016-2017                                | 50          | 13           | 50            | 9            | 50            | 9            |
| 2017-2018                                | 60          | 13           | 60            | 9            | 60            | 9            |
| 2018-2019                                | 60          | 13           | 60            | 9            | 60            | 9            |

## 7. Curriculum

Curriculum Changes and Program of Study: Table 3 outlines the curriculum. The current undergraduate BSN program offers two online courses, Health Systems and Policy (NURSU 372) and Leadership and Management in Nursing (NURSU 376) but is mostly offered in a traditional classroom environment. The RN-BSN program will be a fully online program. The CON utilizes the Moodle Environment to manage the learning component. The following courses in the current BSN program will be offered intensely over shorter time frames for adult learners: NURSU 315 Wo1; NURSU 464 Wo1; NURSU 372 Wo1 and NURSU 376 Wo1. The remainder of the courses will be designed specifically to meet the needs of experienced nurses to ensure we meet the AACN “Essentials of Baccalaureate Education for Professional Nursing Practice (2008)”.<sup>6</sup> The nursing courses are varied during the program being 5 weeks in length for all didactic courses and 10-15 weeks in length for clinical courses. Each semester there is one

clinical course with a focus on one of the following: gerontology, community/public health, or leadership/quality improvement that extends over longer periods of time each semester. The clinical hours must be documented and will consist of a project that may include either virtual or live work. The three projects will make up the overall capstone of the program.

**RN-BSN Full-time Plan of Study**

**Table 3: RN-BSN Curriculum**

| <b>Semester I</b>   | <b>Credits</b> | <b>Clinical Focus hours</b> | <b>BSN Essentials</b> | <b>Other</b>   |
|---|----------------|-----------------------------|-----------------------|----------------|
| NURSU XXX: Dynamics of Nursing Practice and Interprofessional Care                | 3.0 (3,0,0)    |                             | II, III, VII, VIII    | First 5 weeks  |
| *NURSU 315 W01: Health Assessment   | 3.0 (3,0,0)    |                             | VII, IX               | Second 5 weeks |
| NURSU XXX: Pathophysiology (may be challenged via test)                           | 3.0 (3,0,0)    |                             | I                     | Third 5 weeks  |
| NURSU XXX: Healthy Aging and Health Promotion                                     | 4.0 (3,0,1)    | 45 hours                    | II, VI, V, IX         | 15 weeks       |
| <b>Semester II</b>  |                |                             |                       |                |
| *NURSU 464 W01: Research & Evidence Based Practice in Nursing                     | 3.0 (3,0,0)    |                             | III                   | First 5 weeks  |
| NURSU XXX: Population Focused Nursing: Health Promotion and Community Partnership | 4.0 (3,0,1)    | 45 Hours                    | II, III, VI, V        | Last 10 weeks  |
| NURSU XXX: Information Management in Nursing                                      | 2.0 (2,0,0)    |                             | IV                    | Third 5 weeks  |
| <b>Semester III</b>   |                |                             |                       |                |
| *NURSU 376 W01: Leadership and Management in Nursing                              | 3.0 (3,0,0)    |                             | II, III, VI           | First 5 weeks  |
| *NURSU 372 W01: Healthcare Systems and Policy                                     | 3.0 (3,0,0)    |                             | III, V                | Second 5 weeks |
| NURSU XXX: Practicum in Clinical and Management Decision-Making                   | 2.0 (0,0,2)    | 90 hours                    | IX                    | 15 weeks       |
| <b>Total Prerequisites</b>  | 30             |                             |                       |                |
| <b>Validates Pre-licensure course work BSN Degree</b>                             | 60             |                             |                       |                |
| <b>Total</b>  | 30             |                             |                       |                |
|   | 120            |                             |                       |                |

\*In existing BSN program

The program will have sufficient rigor in the practice discipline for these nursing students to ensure they can impact health outcomes. The RN-BSN program will provide rich and varied opportunities for practice that are designed to assist these practicing nurses to

achieve “the Essentials of Baccalaureate Education for Professional Nursing Practice”.<sup>13</sup> The practice-related experience in this program is designed to assist the student in integrating new practice-related knowledge and skills that will transition them from the Associate Degree or diploma to the baccalaureate level of proficiency. The practice experience for these students will focus on organization/systems understanding, leadership development, evidence-based practice and quality improvement, information management and integration of technologies into practice, interprofessional collaboration and communication, comprehensive assessment, and clinical prevention and population health. The program will work to assist the student in gaining higher-level skills than those already accomplished in their RN program.

The practice experience will include both direct and indirect patient care. Direct care will be provided in the community and hospital setting. The students will work with an interprofessional team in a healthcare setting to identify gaps in care and implement a quality improvement strategy. In the hospital setting they will work with nursing staff to implement a new procedure or nursing practice that is evidence based. These students will also have the opportunity for indirect care that will allow them to provide education, write or update policies, or improve communication across units utilizing technology.

### Course Descriptions

The course descriptions for each of the new courses can be found in Table 4.

| <b>Table 4: New Courses and Descriptions</b>                      |  |
|---|--|
| <b>Course</b>   | <b>Description</b>   |
| NURSU XXX Dynamics of Nursing Practice and Interprofessional Care | This course is an online course designed to provide learning opportunities for RN to BSN students to broaden their perspectives of the professional nursing role in healthcare delivery. The course introduces the major concepts of proactive leadership and excellence in patient care to improve health outcomes, eliminate health disparities, and advance the nursing profession. It addresses the context of professional nursing and interprofessional care including, but not limited to: critical thinking, evidence-based practice, and professional roles, values, and ethics. The course recognizes and builds on the prior education and work experience of the RN. |
| NURSU XXX Pathophysiology   | This course examines the physiologic mechanisms underlying selected alterations in health that occur throughout the life cycle. Relationships between physiologic responses to potential or actual health problems are emphasized. This course will cover selected diseases and their evaluation and treatment in clinical care.   |
| NURSU XXX Healthy Aging and Health Promotion                      | This course provides an examination of theories, trends, and research drawn from the fields of sociology, psychology, biology, and the health professions with emphasis on aging, health promotion, and health inequities. Students will integrate this knowledge base into the present healthcare system to develop nursing care strategies to improve the care and health of older adults in healthcare and the community.   |
| NURSU XXX Information Management in Nursing                       | This course will cover the design, development, implementation, and support of computer-based information systems. With innovations in healthcare technology, unique opportunities and challenges for the end-   |

|  |   |
|--|---|
|  | user will be considered and carefully addressed. This course will provide students with a thorough understanding of confidentiality issues surrounding information management; and the impact information management systems have on the healthcare team, delivery of care, efficiency and productivity, patient safety, and health outcomes.   |
| NURSU XXX Population Focused Nursing: Health Promotion and Community Partnership | This course is designed to provide the knowledge and skills in applying health promotion, health equities and disease prevention frameworks, and nursing and public health concepts to population-based healthcare with an emphasis on promoting and protecting the health of the public using health promotion, risk reduction, and disease management and control strategies for vulnerable persons and populations. Clinical experiences will include an evidence-based population health project with a specific population in a community setting  |
| NURSU XXX Practicum in Clinical and Management Decision-Making                   | This clinical course allows the registered nurse to apply learned nursing theory and clinical knowledge with their baccalaureate education in the identification and implementation of a scholarly nursing project. This project utilizes, but is not limited to, knowledge of leadership skills, principles of teaching/learning, healthcare policy, change process, group process, team building, collaboration, healthcare policy and delivery systems, quality improvement, evidence-based care, diversity, nursing roles, information technology and systems, population-based care, and ethical/legal issues. |

Assessment of Student Learning Outcomes: Student learning outcomes will be assessed by successful completion of the program, survey of employers on these nurses at graduation, and a BSN exit survey where the graduate ranks his/her satisfaction with meeting the program objectives and rates the quality of the education. Employers will be asked to evaluate the students on each of the learning outcomes with the goal that 90% of the employers will “Agree or Strongly Agree” that the MUSC CON student demonstrates these new learning outcomes. On the BSN exit survey, students will be asked their perception of their ability to demonstrate each of the objectives with the goal of all students choosing “Agree or Strongly Agree”. In addition, the goal is that 100% of students will rate the quality of their education as “Very Good or Exceptional” . Table 5 demonstrates the metrics and how they relate to program outcomes and learning outcomes.

**Program Outcomes (PO)**

1. Overall satisfaction with their educational experience.
2. Knowledge, skills, and abilities to provide leadership, evidence-based care, and patient safety to achieve quality outcomes in patient care.
3. Competence in care coordination and facilitation of access to resources across the continuum of healthcare environments in order to meet the evolving healthcare needs of individuals, families, communities, and populations.
4. Effective interprofessional communication and shared decision making in applying principles of systems and organizational processes to promote quality care and patient safety.

### Student Learning Outcomes (SLO)

1. Function effectively within nursing and interprofessional teams by fostering open communication, respect, and shared decision-making to achieve quality outcomes in patient care
2. Collect, analyze, and synthesize data to make clinically-reasoned judgments about evidence-based interventions and evaluation of outcomes
3. Assume accountability for quality and safety for one's own practice and delegated nursing care
4. Demonstrate knowledge of the influence of policy on social determinants of health and lifestyle variations for interventions related to health equities, health promotion, risk reduction, and disease prevention for individuals, families, groups, communities, and populations across the lifespan and across the continuum of healthcare
5. Use knowledge of organizations and systems leadership to design, manage, coordinate, collaborate, and negotiate a plan of care with the patient/family and interprofessional healthcare team, and to allocate physical, fiscal, and human resources.

| <b>Table 5: Student Learning Outcomes</b>  |           |            |               |
|--|-----------|------------|---------------|
| <b>Metric</b>  | <b>PO</b> | <b>SLO</b> | <b>Target</b> |
| Percent of graduating students who agree they made the right choice in selecting MUSC CON  | 1         | -          | 100%          |
| Percent of graduating students who agree they received a high quality education  | 1         | -          | 100%          |
| Percent of employers who agree/strongly agree that graduate collects, analyzes, and synthesizes data for clinically reasoned judgments   | 2         | 2          | 90%           |
| Percent of students that agree/strongly agree that they can analyze data and identify and prioritize responses   | 2         | 2          | 100%          |
| Percent of employers who agree/strongly agree graduate assumes accountability for quality & safety for one's practice and nursing care   | 2         | 3          | 90%           |
| Percentage of students that agree/strongly agree that they can apply nursing interventions to achieve quality outcomes in patient care   | 2         | 3          | 100%          |
| Percentage of employers that agree that the graduate can function effectively within nursing and interprofessional teams   | 3, 4      | 1          | 90%           |
| Percentage of students that agree/strongly agree that they can coordinate nursing care across the continuum of healthcare environments   | 3         | 4          | 100%          |
| Percent of employers who agree/strongly agree graduate demonstrates knowledge of social determinants of health and lifestyle variations for intervention   | 3         | 4          | 90%           |
| Percentage of students that agree/strongly agree that they can communicate effectively within interprofessional teams  | 4         | 1          | 100%          |
| Percentage of employers who agree/strongly agree graduate can apply principles of systems and organizational processes and understands resource allocation in planning care for individual patients, families, communities, and populations. | 3         | 5          | 90%           |
| Students will successfully complete three clinical projects that make up the overall capstone of the program.  | 2,3,4     | 1-5        | 100%          |

## 7. Faculty

To meet the demands of this modified program, the CON will need 1.5 FTEs to begin the program in year 1 and will hire new faculty. In year 2 and 3 of the program, another 1.15 faculty FTE will need to be hired to cover increased student enrollment. In addition, the Director of the BSN program will need a 0.2 FTE increase to oversee this program. Table 5 represents the current faculty full-time equivalent (FTE) devoted to the baccalaureate program. The didactic courses will require 70% teaching effort in year one. In addition, the clinical preceptor time and faculty work will require another 45% teaching effort. As a result, 1.5 FTE's will be hired for the proposed program allowing faculty development time for new courses. As the program grows, an additional 1.15 FTE will be hired for student oversight and teaching. These faculty members must have experience in the RN role and be masters-prepared with a doctorate preferred. Experience in teaching, or at least precepting, will be critical.

| Full-Time FTE | Part-Time FTE | Total Faculty FTE |
|---------------|---------------|-------------------|
| 10            | 12            | 22                |

The primary mission of the MUSC College of Nursing is to preserve and optimize human life in South Carolina and beyond through our commitment to evidence-based nursing education. To actualize this mission, the College carefully selects educator-clinicians and educator-researchers based on academic and experiential preparation to meet our strategic educational goals and priorities

**Faculty Academic Preparation:** Almost all regular, tenure track faculty members (87%) are either doctorally prepared (PhD, ScD, DrPH, DNP) or currently enrolled (9%) in a doctoral program (PhD, EdD, or DNP). No faculty member holds less than a master's degree, and 65% are nationally certified, including 100% of NP faculty. It is fitting that a majority of faculty members (61%) are educator-clinicians, given the practice focus of the undergraduate nursing program and the high percentage of graduate students in our doctorate of nursing practice program. However, the number of educator-researchers (18) is sufficient to further the research mission of the College, and the number of doctorally prepared faculty (40) is adequate to support doctoral programs within the College (Table 6).

**Table 6. Number & Percent of Regular Faculty, by Rank & Characteristics, Devoted to All Degree Program in the CON (BSN, MSN, DNP, and PhD)**

| Characteristic   | Rank  |     |           |    |                 |    |                |    |            |    |
|------------------|-------|-----|-----------|----|-----------------|----|----------------|----|------------|----|
|                  | Total |     | Professor |    | Assoc Professor |    | Asst Professor |    | Instructor |    |
|                  | No.   | %   | No.       | %  | No.             | %  | No.            | %  | No.        | %  |
| Rank             | 46    | 100 | 7         | 15 | 12              | 26 | 14             | 30 | 13         | 29 |
| Full-time status | 45    | 98  | 7         | 15 | 12              | 27 | 13             | 29 | 13         | 29 |
| Doctorate        | 40    | 87  | 6         | 15 | 12              | 30 | 13             | 33 | 8          | 22 |
| Tenured          | 8     | 17  | 7         | 88 | 1               | 12 | —              | —  | —          | —  |
| Certified        | 30    | 65  | 3         | 10 | 6               | 20 | 9              | 30 | 13         | 40 |
| Educator track   |       |     |           |    |                 |    |                |    |            |    |
| Clinician        | 28    | 61  | 1         | 4  | 6               | 21 | 9              | 32 | 12         | 43 |
| Research         | 18    | 39  | 6         | 33 | 6               | 33 | 5              | 28 | 1          | 6  |

**Faculty Development:** With 60% of programs at the College of Nursing offered online, and over 250 students receiving online education, faculty development has focused on online teaching. To support faculty development in online teaching, a course was designed for all who teach online, in addition to ongoing Moodle training and super-user support throughout the college. Orientation for new faculty continues for a full semester after being hired. New faculty who are hired take three education courses offered by the College, including a course addressing online methodologies. The MUSC Apple Tree Society continues to foster dialogue and activities related to the scholarship of teaching on campus. They offer presentations every two weeks and record many of them for interested faculty who cannot attend the live sessions. Examples of recent topics include: instructional design, teaching methods, assessment of teaching, assembling teaching portfolios, conflict resolution and communication, motivating mentees, building a career as an educator, and NIH review process.

## **8. Physical Plant**

Through the diligence of College of Nursing leadership as well as support of the University administration, funds were secured to renovate the College of Nursing building. During winter 2012 the College of Nursing relocated to temporary space in the Harborview Office Tower and the College of Health Professions, Building B. Renovation began in spring 2013, and it is estimated that faculty and staff will return to the state-of-the-art building in late 2014. The renovation scope includes full interior renovation of the four floors of the College of Nursing (approximately 44,000 square feet), with all new interior finishes and room configurations. It includes two large state of the art classrooms, a multipurpose room, student lounge and research space, as well as administrative and faculty offices. New lighting, along with enhanced data and mechanical systems are being installed. Two new elevators are also included. All five floors of the building are being fitted for safety, including a fire sprinkler system. All exterior windows are being replaced with new energy efficient windows. The plan includes a room dedicated as a museum outlining the College's history and loyal alumnae. The MUSC Healthcare Simulation Lab remains intact and is operational on the first floor the College of Nursing. It continues to support students in state-of-the-art clinical instruction at all levels of the educational program.

The Nursing Technology Center (NTC) continues to provide optimal information technology equipment and resources to support the College's faculty, staff and students. The College of Nursing web page is viewed as the portal for students and potential faculty. It is reviewed and updated on an ongoing basis. The NTC also began developing videos to assist with ongoing College of Nursing training needs. A joint project between the Office of Chief Information Officer (OCIO) and the College of Nursing continued during FY13 to update and integrate faculty, staff and student database needs. This has expedited our ability to pull student outcome data and obtain information for student grants.

The proposed program modification will not affect the physical plant's ability to support this modification in the program. The new physical plant was designed and built with the goal of increasing enrollment and adding programs over time.

## **9. Equipment**

All didactic courses will be conducted online using a learning management system (Moodle). Other online resources such as videoconferencing, Skype, Wikis, Tegrity (course content capture system), podcast, and vodcast (video on demand clips) will be used in many of the courses. These resources facilitate and assist students in an asynchronous learning environment to gain the necessary knowledge and skills required for the BSN degree. The CON currently utilizes all these programs so no new programs or software will be needed.

## 10. Library Resources

The MUSC Library, <http://www.library.musc.edu/>, serves as a database and knowledge center, academic computing support unit, electronic education center, and leader in information planning. Online resources include the full catalog as well as major biomedical databases (e.g., OVID MEDLINE, CINAHL, PsycINFO, SciFinder, and PubMed). Links include online catalogs of other libraries, drug information (LexiComp), consumer health (Hands on Health, MEDLINEPLUS), clinical decision support systems (Dynamed, UpToDate), Clinical Practice Guidelines and alerts, reviews of clinical trials, evidence-based practice (Cochrane Database of Systematic Reviews), government resources (Toxnet, National Guideline Clearinghouse, US Preventive Services Task Force (USPSTF) Recommendations), electronic books (MD Consult, Harrison's Online, Access Medicine, eBrary Academic Complete ebook collection) and e-journal packages with literature search capabilities (ScienceDirect, Journals@Ovid, American Chemical Society), statewide shared academic databases (PASCAL which includes the following resources: CINAHL Plus With Full Text, Anatomy and Physiology Online, eBrary Academic Complete ebook collection), and other resources that provide a wealth of worldwide information. Service-oriented faculty and staff assist in the use of a variety of informational systems. An active program of individual, class, and group instruction supports teaching, clinical care, research and community outreach. The Informatics Lab has more than 175 microcomputers with Windows and Apple operating systems. Graphic workstations with Learning Commons technologists are available. In addition to providing access to collections and information remote from its physical facility, the Library maintains a comprehensive collection of books, journals, history of medicine materials, and multimedia (55, 698), and has access to more than 20,600 electronic journals and less than 5 print journals that are not available electronically. The library serves as a resource library within the National Network of Libraries of Medicine, and is a major health science resource library for the State of South Carolina and the Southeast.

The MUSC Library has received several prestigious awards from the National Commission on Libraries and Information Science (NCLIS) for excellence in providing health information and promoting health awareness. In May 2006, the NCLIS Health Information Award for Libraries was awarded to MUSC's Racial and Ethnic Approaches to Community Health (REACH) 2010 Diabetes Coalition Library Partnership. Chosen from entries nationwide, the REACH 2010 program was judged as the best library program for encouraging healthy lifestyles and providing health information to citizens. The program is a collaborative effort of a library-community-campus partnership consisting of the MUSC College of Nursing, MUSC Library, county public libraries, and other community-based organizations. In 2004, the Library received the NCLIS Blue Ribbon Consumer Health Information Recognition Award for Libraries recognizing the impact, innovativeness, and replicability of its [Hands on Health-South Carolina project](#). The NCLIS, National Commission on Libraries and Information Science, has recognized outstanding libraries in 37 states for their contributions to health awareness and health education. Designed to serve the consumer and community health information needs of South Carolinians, Hands on Health, a public web site, pays special attention to health issues of particular importance in South Carolina, such as hypertension, heart disease, stroke, diabetes, disabilities, obesity, nutrition, family violence, and cancer.

The library resources remain unchanged and this modification will not affect the library's ability to support the program. The library continues to serve as a major health science library for MUSC, the State of South Carolina, and the Southeast, and no new acquisitions will be needed to accommodate the additional students for the BSN degree due to this modification. Students and faculty have access to a vast amount of resources online, and preceptors are also granted access upon request. This supports online education as well as those who live locally. Net IDs and passwords are utilized so that library resources can be accessed from anywhere in the world. Alumni of the program can continue to have access if they visit the library.

PASCAL (Partnership Among South Carolina Libraries) provides resources central to nursing education and to the proposed modification of the RN-BSN Program. PASCAL provides access to CINAHL (Cumulative Index to Nursing and Allied Health Literature) Plus with Full Text, the primary index to the nursing journal literature. CINAHL includes the full text to 620 journals and over 200 books. PASCAL also provides access to Anatomy & Physiology Online and eBrary Academic Complete ebook collection (approximately 100,000 ebooks). In addition, the PASCAL Delivers service can be used to borrow any print book available in a South Carolina academic institution within two or three days if the book is not checked out.

### **11. Accreditation, Approval, Licensure, or Certification**

The Commission on Collegiate Nursing Education (CCNE) accredits the current Accelerated BSN program. The BSN program was accredited on May 24, 2010 for 10 years and will be up for renewal on June 30, 2020. CCNE accredits at the degree level, not by entry point into the program. The CON will ensure that this new RN-BSN program incorporates the 2008 Baccalaureate Essentials and will ensure that all graduates have attained the baccalaureate competencies. The program will provide opportunities for students to integrate new learning and baccalaureate level skills into practice. The CON has already been in contact with CCNE and will be submitting a substantive change once approval is received from the South Carolina Commission of Higher Education. This is not a new degree but rather a new entry level for the BSN degree and there is no approval required from the Southern Association of Colleges and Schools Commission on Colleges (SACS COC). We will submit a separate assessment plan to them for approval. The state board of nursing does not require anything in regards to this program since they only regulate programs related to pre-licensed students.

### **12. Estimated Costs and Sources of Financing**

This request to modify the RN-BSN program complements the work of the College of Nursing. Course development and recurring costs (i.e. personnel) are 100% funded through the College of Nursing.

The tuition funding listed in the table (Table 7) below assumes the following: A year-one enrollment of 30 students with that number increasing to an estimated 60 over the next four years. With very few exceptions, these students will be SC residents and pay in-state tuition for the first two years. In year three the program will be opened to a small number of out-of-state students (20%). The assumption is that all in-state students years 1 and 2, then 10 out-of-state students year 3, and 12 out-of-state students years 4 and 5. The tuition totals are based on the Medical University of South Carolina in-state tuition for full time enrollment by semester for a one-year program. Tuition increases of 2% in-state per year and 1% out-of-state per year were made. The Medical University of South Carolina Hospital system will offset the tuition for 30 RN employees for the RN-BSN program for the first year and will have priority admission.

#### Program Administration:

.2 FTE, including fringe benefits, of the Director of the Undergraduate Programs will be necessary for the program. This effort will include program oversight, review of program faculty, program outcomes, and program matriculation.

#### Faculty Salaries:

Two new faculty members will be hired (one full time and one part time) effective Fall 2014 in the College of Nursing to meet the needs of this new modification. The didactic courses will require 70% teaching effort, and clinical preceptor time and faculty work will require another 45% teaching effort. In addition there is course development time. Based on this, 1.50 FTE, including fringe benefits, will be recruited for teaching needs and program development. With

growth in the program of student numbers, additional faculty will be hired in years 2 and 3 to equal another 1.15 FET by year 3.

Clerical/Support Personnel:

One additional staff member FTE, including fringe benefits, will be needed to meet the demands of the RN-BSN program. These would include review of applications and necessary prerequisites. This effort would also include administration of grades, clinical placements, surveys, and course evaluation. In addition, 0.2 FTE, including fringe benefits, of information technology (IT) staff support will be necessary to aid students in the online learning environment.

Supplies and Materials:

Two computers will be purchased in year 1 to support the faculty and staff assigned to the program (referenced above). An additional computer will be added for the faculty hired in year 3.

Facilities:

The College is assessed a charge of \$26/square foot for office space maintenance in the University's budgeting model. This line item will cover this charge for three faculty/staff assigned to the program.

Other:

The College of Medicine operates a Simulation Lab where undergraduate students can practice their clinical skills in a safe, state-of-the-art learning environment. The Lab also allows faculty to assess clinical skills and safety for each student. The cost included here will be used to reimburse the College of Medicine for lab time.

Table 7 - Costs to the Institution and Sources of Financing

| <b>ESTIMATED COSTS BY YEAR</b> |                       |                       |                       |                       |                       |               |
|--------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|---------------|
| <b>CATEGORY</b>                | <b>1<sup>st</sup></b> | <b>2<sup>nd</sup></b> | <b>3<sup>rd</sup></b> | <b>4<sup>th</sup></b> | <b>5<sup>th</sup></b> | <b>TOTALS</b> |
| Program Administration         | \$22,100              | \$22,763              | \$23,446              | \$24,149              | \$24,874              | \$117,332     |
| Faculty Salaries               | \$127,075             | \$196,331             | \$202,221             | \$269,618             | \$277,70              | \$1,072,951   |
| Graduate Assistants            |                       |                       |                       |                       |                       |               |
| Clerical/Support Personnel     | \$117,000             | \$120,510             | \$124,125             | \$127,849             | \$131,685             | \$621,169     |
| Supplies and Materials         | \$10,000              | \$5,000               |                       |                       |                       | \$15,000      |
| Library Resources              |                       |                       |                       |                       |                       |               |
| Equipment                      |                       |                       |                       |                       |                       |               |
| Facilities                     | \$9,360               | \$9,360               | \$9,360               | \$9,360               | \$9,360               | \$46,800      |
| Other: Simulation Fees         | \$3,800               | \$3,914               | \$4,031               | \$4,152               | \$4,277               | \$20,175      |

|                                     |           |           |           |           |           |             |
|-------------------------------------|-----------|-----------|-----------|-----------|-----------|-------------|
| <b>TOTALS</b>                       | \$289,335 | \$357,878 | \$363,184 | \$435,129 | \$447,90  | \$1,893,427 |
| <b>SOURCES OF FINANCING BY YEAR</b> |           |           |           |           |           |             |
| Tuition Funding                     | \$237,834 | \$295,249 | \$299,627 | \$361,158 | \$369,520 | \$1,563,387 |
| Program-Specific Fees               | \$ 51,501 | \$62,629  | \$63,557  | \$73,971  | \$78,382  | \$330,040   |
| State Funding*                      |           |           |           |           |           |             |
| Reallocation of Existing Funds**    |           |           |           |           |           |             |
| Federal Funding                     |           |           |           |           |           |             |
| Other Funding (Specify)             |           |           |           |           |           |             |
| <b>TOTALS</b>                       | \$289,335 | \$357,878 | \$363,184 | \$435,129 | \$447,902 | \$1,893,427 |

There are no unique costs or other special state appropriations required or requested. The cost of the program will be financed with tuition dollars and program fees. The commitment from MUSC for 30 students the first year with full tuition and at least 15 students in year two will insure program success.

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