New Program Proposal
Master of Science in Nursing in Adult-Gerontology Acute Care Nurse Practitioner
University of South Carolina

Summary

The University of South Carolina (USC Columbia) requests approval to offer a program leading to the Master of Science in Nursing (M.S.N.) in Adult-Gerontology Acute Care Nurse Practitioner to be implemented in Fall 2017. The proposed program is to be offered through blended instruction. The following chart outlines the stages of approval for the proposal; the Advisory Committee on Academic Programs (ACAP) and the Committee on Academic Affairs and Licensing (CAAL) voted to recommend approval of the proposal. The full program proposal is attached.

<table>
<thead>
<tr>
<th>Stages of Consideration</th>
<th>Date</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Program Proposal Received</td>
<td>12/2/16</td>
<td>Upon consultation with the Commission and with guidance from the nursing accrediting body, USC Columbia submitted new program proposals for three separate M.S.N. programs.</td>
</tr>
</tbody>
</table>
| ACAP Consideration            | 1/26/17| The USC Columbia representative introduced the M.S.N. proposals concurrently, explaining they were modifications to existing programs to streamline program offerings, and represent collaboration with Commission staff with guidance from the nursing accrediting body. The representative discussed the need for the program, the intent for accurate citation in the CHE inventory, and that changes were made to the Adult-Gerontology Acute Care Nurse Practitioner program to align with national trends, using the name recommended by the accrediting body. Commission staff asked about Board of Trustees approval, which the representative confirmed. Then staff inquired about the status of the grant noted in the proposal, effective delivery of the curriculum based on receiving the grant, and the success of the current iteration of the M.S.N. program. USC expected to learn the funding status in forthcoming weeks and expects to deliver the program effectively with or without it. Regarding program success, the representative responded that more than 80 students were enrolled in the program last year, and added that US News & World Report now ranks the USC master’s and doctorate nurse practitioner programs #1 in the country. Staff asked about the normal number of credit hours per student as indicated in the proposal (six hours [6] per semester). The representative explained that six credit hours are normal because of the high number of full-time working adults the program enrolls. To support nursing students, she noted the University provides grant funds to students from rural areas: $11,000 annually for part-time
<table>
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<tr>
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<td>enrollees and $22,000 annually for full-time enrollees, funding 29 students last year. With no further discussion, ACAP voted to approve the program proposal. Staff transmitted remaining questions for additional clarity.</td>
</tr>
</tbody>
</table>
| Comments and Suggestions from CHE Staff Sent to the Institution | 1/30/17    | Staff requested the proposal be revised to:  
• Confirm the Board of Trustee’s approval date as requested at ACAP; explain the proposed program’s centrality to the institution’s mission, and include specific program objectives;  
• Explain workforce development needs specifically by providing the following: (1) statewide gerontology population data for the past ten years; (2) projected employment growth; and (3) a listing of all nursing programs with a similar emphasis;  
• Explain student credit-hour enrollment as discussed at ACAP;  
• Describe program-specific admissions requirements;  
• Identify the courses shared by the three MSN programs, clarify the need for no new courses, and explain what is meant by “on-site clinical check-offs;”  
• Include the expected start date of the new faculty member;  
• Identify specific library resources and academic services to support the program’s students;  
• Include a grant funding update, if available;  
• Identify “Other” costs in the cost chart, explain how the revenue is invested into the College of Nursing and/or institution, and describe the program-specific fees, including purpose and allocation; and  
• Include USC’s recent annual pass rates on the national certification exam, and a description of how the program prepares students for the certification exam.  
In addition, staff asked whether CIP 51.3821 (Geriatric) would be more appropriate for the program. |
| Revised Program Proposal Received | 2/10/17    | The revised proposal satisfactorily addressed the requested revisions.                                                                                                                                   |
| CAAL Consideration      | 3/9/17     | USC Columbia representatives introduced the three M.S.N. programs concurrently, explaining the need to better serve medically underserved S.C. regions (see map attached). The three programs (currently concentrations) enlist robust enrollments with 90+% of graduates remaining in state and 70+% working in primary care.  
Committee members asked about institutional collaborations, which representatives affirmed as the means to secure preceptors for current enrollees. Committee members then asked about competition among the programs and the representative replied that the great need for medical professionals in the state drives many more submitted applications than each program can accept. All graduates secure
She added the programs offered by USC and the Medical University of South Carolina are ranked #s 1 and 2 in the nation and that Clemson’s program is highly ranked as well.

Committee members asked about the program approval process. Representatives and Commission staff explained the need for new proposals to facilitate: 1) new requested changes; 2) long-standing modifications otherwise warranting later CHE review; 3) accuracy on the CHE Inventory; and 4) a requested change in CIP Code that per policy requires a new proposal. As a result, new proposals were the most efficient path. The committee encouraged staff policy review to ensure efficient processes, which staff confirmed was underway.

The committee asked about program costs and the justification for program-specific fees. Representatives explained tuition revenue is divided between the University and the College of Nursing. Program fees in particular support clinical experiences, ensuring adequate clinical faculty to meet accreditation standards: a 1:6 faculty-to-student ratio and a minimum of two check-offs. (Check-offs are day-long and can only be completed for a maximum of two students per day per clinical faculty). Representatives noted the proposal cost chart shows only new costs, not existing costs to be supported by the programs. The committee then asked whether the programs are revenue- or cost-generating, and if revenue-generating, then should tuition and fees should be reduced. Representatives stated the programs would generate revenue and reiterated the College of Nursing retains only half of the tuition funding but all of the fees, and that money is invested in the programs. The committee requested 1) the proposals be revised to show true costs and sources of program financing, and 2) that the University prepare a statement confirming revenue- or cost-generation. If they are revenue generating, Commissioners requested the statement include evidence to justify the need for the revenue and show that the tuition and fees charged for the programs are reasonable.

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</table>

Staff requested the proposal be revised to:
- Include total costs (i.e., new and extant) and revenue sources since the proposals are modifications of current concentrations;
- Explain in the budget justification program fee charges; and
- Provide as CAAL requested an explanation of the revenue model, revenue use, and reasonableness of the tuition and fees schedule.

Revised Program Proposal Received 3/24/17 The revised proposal satisfactorily addressed the requested revisions and includes the requested statement regarding the budget.
Recommendation

The Committee on Academic Affairs and Licensing recommends the Commission approve the program leading to the Master of Science in Nursing in Adult-Gerontology Acute Care Nurse Practitioner to be implemented in Fall 2017.
Name of Institution
   University of South Carolina (Columbia)

Name of Program (include concentrations, options, and tracks)
   Current: Master of Science in Nursing (degree); Clinical (major); Adult-Gerontology Acute Care Nurse Practitioner (concentration)
   Proposed: Master of Science in Nursing (degree); Adult-Gerontology Acute Care Nurse Practitioner (major); no concentration.

Program Designation
   □ Associate's Degree  ✓ Master's Degree
   □ Bachelor's Degree: 4 Year  □ Specialist
   □ Bachelor's Degree: 5 Year  □ Doctoral Degree: Research/Scholarship (e.g., Ph.D. and DMA)
   □ Doctoral Degree: Professional Practice (e.g., Ed.D., D.N.P., J.D., Pharm.D., and M.D.)

Does the program qualify for supplemental Palmetto Fellows and LIFE Scholarship awards?
   □ Yes
   ✓ No

Proposed Date of Implementation  Fall 2017  CIP Code Current: 51.3808; Proposed: 51.3814

Delivery Site(s)
   USC – Columbia Campus

Delivery Mode
   □ Traditional/face-to-face*  □ Distance Education
      *select if less than 50% online  □ 100% online
      ✓ Blended (more than 50% online)
      □ Other distance education

Program Contact Information (name, title, telephone number, and email address)
   Stephanie Burgess, PhD, APRN, FNP-BC, FAANP
   Associate Dean of Practice and Graduate Director
   (803) 777-2219
   sburgess@mailbox.sc.edu

Institutional Approvals and Dates of Approval:
   Graduate Council: May 23, 2016
   Provost: November 4, 2016
   President: November 22, 2016
   Board of Trustees: December 13, 2016
   ACAP: January 26, 2017
   CAAL: March 9, 2017
Background Information

State the nature and purpose of the proposed program, including target audience and centrality to institutional mission. (1500 characters)

The proposal is to change the MSN concentration of Adult-Gerontology Acute Care Nurse Practitioner (AG-ACNP) program to the major name. There are no additional changes requested. The title Adult-Gerontology Acute Care Nurse Practitioner is now a widely accepted title designated by the professional nursing organizations (American Association of Colleges of Nursing; American Association of Nurse Practitioners; National Organization of Nurse Practitioner Faculties) and the nursing accreditation agency (Commission on Collegiate Nursing Education). The newer CIP code 51.3814 requested is illustrated for use with Acute Care Nurse Practitioner programs and reflects this change at the major level. The administration and faculty believe this best reflects the current state of the program and national standards/trends.

The current AG-ACNP program is well established, being one of the oldest programs in the nation. It is central to the College of Nursing’s graduate programs and mission. Enrollment has continuously remained strong, with 83 students enrolled in 2015-16.

The AGACNP program is central to the primary mission of the University of South Carolina Columbia in using distance e-learning methods to educate the state’s citizens through teaching and community engagement for improving the welfare of others. Graduates of the program will be able to provide acute and hospital based health care to SC citizens and nationally –these graduates can improve the health care which would have profound relevance, reach, and impact on the people of the state. The program requires all students to conduct clinical rotations in rural and underserved areas or with underserved populations. Since 2002, 30% of USC NP applicants choose to practice as a ACAGNP provider, 70% choose to practice in acute or specialty care in rural areas or with underserved populations upon graduation, and 90% remain in SC.

List the program objectives. (2000 characters)
The mission of the College of Nursing is to create and develop competent, caring nurse leaders to advance the profession of nursing through the integration of teaching, research and service to improve client health and well-being outcomes.

The Program will prepare graduates to:

1. Demonstrate knowledge and skills required for advanced practice nursing: AGACNP.
2. Implement core and clinical course content within the context of the community, and demonstrate understanding of the healthcare system for improving population health.
3. Demonstrate the ability to use theory and research findings in practice.
4. Demonstrate leadership skills for advanced nursing practice: AGACNP.
5. Demonstrate an understanding of the laws that govern advanced practice nursing as it relates to scope of practice, billing compliance, standards of practice, and standards of care for Adult Gerontology Acute Care Nursing Practice.
6. Demonstrate assessment, diagnosing, and treatment management of patients who present with acute care problems.
Assessment of Need

Provide an assessment of the need for the program for the institution, the state, the region, and beyond, if applicable. (1500 characters)

Ninety percent (90%) of the graduates of the Adult Gerontology Acute Care Nurse Practitioner (concentration) program remain in South Carolina following graduation, and over 70% of the graduates serve as key providers of acute care health to the citizens across the region in rural and underserved areas. The need for the program remains critical once it becomes a full major, and as such its elevated profile provides greater transparency for potential students, and a more straightforward credential for graduates. Agencies and facilities are seeking more Adult Gerontology Acute Care Nurse Practitioner providers given the growth in the SC gerontology population, increased complex co-morbidities, and the need for specialty service lines such as palliative care, hospice, cardiology, and renal disease management. South Carolina (SC) has a severe provider shortage, especially in the rural areas.

The greatest growth in population is among older adults (over 65), and SC ranks first with the greatest growth in the older population (22%) of any state in the Nation (http://www.ipspr.sc.edu/publication/Older%20SC.pdf). SC is primarily a rural state, with 42 out of 46 counties designated as rural, comprising 4.5 million residents. Census data indicate that the ethnic diversity of the state is 69.2% white, 28.6% AA, and 3.1% Hispanic (US Census, 2010). Approximately, 25% of the population is uninsured. With an overall ranking of “F” in health care, SC ranks 42nd among the states in health status for acute care and 46th for determinants of health (United Health Foundation, 2015). According to the SC Department of Health and Environmental Health (SCDHEC), in 2013 the leading causes of SC deaths were cancer, heart disease, accidents, stroke, Alzheimer’s, chronic respiratory disease, diabetes, nephritis/kidney disease, suicide, and septicemia. Students are prepared to manage these diseases in acute care settings.

Will the proposed modification impact any existing programs and services at the institution?

☐ Yes
☒ No

If yes, explain. (1000 characters)

Employment Opportunities

Is specific employment/workforce data available to support the proposed program?

☒ Yes
☐ No

If yes, complete the table and the component that follows the table on page 4. If no, complete the single narrative response component on page 5 beginning with “Provide supporting evidence.”
Employment Opportunities

<table>
<thead>
<tr>
<th>Occupation</th>
<th>Expected Number of Jobs</th>
<th>Employment Projection</th>
<th>Data Source</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adult Gerontology Acute Care Nurse Practitioner</td>
<td>100 annually</td>
<td>100%, USC CON graduates ~ 50 per year and all employed</td>
<td>Palmetto Health GHS Roper St Francis MUSC Aiken Regional McLeod Private Specialty Providers (ex: Palmetto Cardiology, Columbia Nephrology; Gastroenterology Associates, CENTA) Urgent Care Long Term Care Palliative Care Hospice</td>
</tr>
</tbody>
</table>

Provide additional information regarding anticipated employment opportunities for graduates. (1000 characters)

Agencies and hospital systems are hiring AGACNP to fulfill roles of hospitalists and provide care in specialty service lines such as cardiology, neurology, etc. We have a 100% employment rate for all AGACNP graduates since inception of our program (1996). We are the only AGACNP program in SC. Our program is rated in the top 10 in the US in 2016 by the US News and World Report.

Provide supporting evidence of anticipated employment opportunities for graduates, including a statement that clearly articulates what the program prepares graduates to do, any documented citations that suggests a correlation between this program and future employment, and other relevant information. Please cite specific resources, as appropriate. (3000 characters)

Our AGACNP graduates obtain employment upon graduation in varied acute care settings (management including assessment, diagnosing, and prescribing autonomously). The program clearly prepares graduates to provide care, assume leadership roles in health care settings, and serve the community/population. Our graduates are 100% employed within 6 months of graduation. Employers rate their satisfaction as 3.5 to 4.0 on a scale of 4.0 of our graduates and their ability to function as advanced practice nurses in acute care settings is clear.

**Note: Only complete this if the Employment Opportunities table and the section that follows the table on page 4 have not previously been completed.**

Will the proposed program impact any existing degree programs and services at the institution (e.g., course offerings or enrollment)?

☐ Yes
☒ No

If yes, explain. (500 characters)
**List of Similar Programs in South Carolina**

<table>
<thead>
<tr>
<th>Program Name</th>
<th>Institution</th>
<th>Similarities</th>
<th>Differences</th>
</tr>
</thead>
<tbody>
<tr>
<td>There are no other Adult Gerontology Acute Care Nurse</td>
<td></td>
<td></td>
<td>MUSC has an Adult Gerontology Health NP program but it is NOT an Adult Gerontology Acute Care NP program. MUSC’s Adult Gerontology Health NP programs prepare NPs to see adult gerontology patients in primary care settings only. USC’s Adult Gerontology Acute Care NP program prepares NPs to see adult gerontology patients in acute care settings or specialty care such as cardiology, nephrology, critical care, etc.</td>
</tr>
<tr>
<td>Practitioner programs in SC.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Description of the Program

Projected Enrollment grad in 6 semesters
(6 credits F/S/SUM in 1st yr and 2nd yr = 8 cr F/S incl CLIN + 3 cr Summer CLIN)

<table>
<thead>
<tr>
<th>Year</th>
<th>Fall Headcount</th>
<th>6 - 8 Credit Hours</th>
<th>Spring Headcount</th>
<th>6 - 8 Credit Hours</th>
<th>Summer Headcount</th>
<th>3 - 6 Cr Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>2018-19</td>
<td>50</td>
<td>300</td>
<td>50</td>
<td>300</td>
<td>50</td>
<td>300+</td>
</tr>
<tr>
<td>2019-20</td>
<td>50 + 30</td>
<td>400 + 180</td>
<td>50 + 30</td>
<td>400 + 180</td>
<td>50 + 30</td>
<td>180 + 150+</td>
</tr>
<tr>
<td>2020-21</td>
<td>30 + 40</td>
<td>240 + 240</td>
<td>30 + 40</td>
<td>240 + 240</td>
<td>30 + 40</td>
<td>240 + 90+</td>
</tr>
<tr>
<td>2021-22</td>
<td>40 + 50</td>
<td>320 + 300</td>
<td>40 + 50</td>
<td>320 + 300</td>
<td>40 + 50</td>
<td>300 + 120+</td>
</tr>
<tr>
<td>2022-23</td>
<td>50 + 64</td>
<td>400 + 384</td>
<td>50 + 64</td>
<td>400 + 384</td>
<td>50 + 64</td>
<td>384 + 150+</td>
</tr>
</tbody>
</table>

*Typically the adult learner students enroll in 6 hours of study due to other obligations such as family, employment, and/or financial commitments. Also, students must progress with a B or better in pre-requisite courses before enrolling in subsequent courses. Students must make a “B” or higher in foundation courses (advanced health assessment or advanced pharmacology for example) and all clinical courses. Full time study is available but less than five (5) percent of students choose this option.

Besides the general institutional admission requirements, are there any separate or additional admission requirements for the proposed program?

☐ Yes
☐ No

If yes, explain. (1000 characters)

Goal Statement to reflect program outcomes
CV
GPA 3.0
Three letters of recommendation from a professional at the Masters or Doctoral level who can attest to the applicant’s ability to be successful in our program, aligning with program outcomes.

The additional admission requirements are used to identify those students who are most likely to complete the program – a high GPA and past performance in sciences are strong indicators. A personal goal statement provides an assessment of motivation and alignment with program outcomes. CV and unencumbered licensure are standard criteria for admission to graduate study.

Minimum GPA of 3.0 from all previous institutions attended for Undergraduate degree (but all transcripts are reviewed regardless of the program). Including if attended USC, science grades strongly considered.
Three letters of reference from Masters prepared registered nurse or physician who can speak to the applicant’s ability to successfully complete the Masters in Nursing program outcomes
A personal Goal statement that reflects MSN program outcomes
Curriculum Vitae
Current unencumbered RN licensure in the state of residence
Are there any special articulation agreements for the proposed program?

☐ Yes
☒ No

If yes, identify. (1000 characters)
**Curriculum**

Select one of the following charts to complete: Curriculum by Year or Curriculum by Category: Part time (typical course for part time study, Non-thesis option, 37 credit hours) Courses with * are shared by the 3 MSN programs.

### Curriculum by Year

<table>
<thead>
<tr>
<th>Year 1</th>
<th>Course Name</th>
<th>Credit Hours</th>
<th>Course Name</th>
<th>Credit Hours</th>
<th>Course Name</th>
<th>Credit Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td><strong>Fall</strong></td>
<td></td>
<td><strong>Spring</strong></td>
<td></td>
<td><strong>Summer</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td>*Nursing 700: Theoretical and Conceptual Foundations for Nursing</td>
<td>3</td>
<td>*Nursing 702: Advanced Pharmacology</td>
<td>3</td>
<td>*Nursing 704: Advanced Health Assessment</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Total Semester Hours</td>
<td>6</td>
<td>Total Semester Hours</td>
<td>6</td>
<td>Total Semester Hours</td>
<td>6</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Year 2</th>
<th>Course Name</th>
<th>Credit Hours</th>
<th>Course Name</th>
<th>Credit Hours</th>
<th>Course Name</th>
<th>Credit Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<td></td>
<td><strong>Spring</strong></td>
<td></td>
<td><strong>Summer</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Nursing 786: AGACNP Management Practicum-1</td>
<td>5</td>
<td>*Nursing 791: Applied Seminar in Nursing Research</td>
<td>3</td>
<td>Nursing 796: Advanced Practice Practicum: AGACNP</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>*Nursing 790: Research Methods</td>
<td>3</td>
<td>Nursing 787: AGACNP Management Practicum-2</td>
<td>5</td>
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</tr>
<tr>
<td></td>
<td>Total Semester Hours</td>
<td>8</td>
<td>Total Semester Hours</td>
<td>8</td>
<td>Total Semester Hours</td>
<td>3</td>
</tr>
</tbody>
</table>

**NOTE:** There are no new courses because the program is currently running as a concentration and currently includes all needed courses for CERTIFICATION and current courses meet accreditation standards which allow students to be licensed AS ADVANCED PRACTICE NURSES FOLLOWING CERTIFICATION, AGACNP.
### Master of Science in Nursing: Adult Gerontology- Acute Care Nurse Practitioner (AG-ACNP)

**New:**

**Master of Science in Nursing: Adult Gerontology- Acute Care Nurse Practitioner (AG-ACNP) (37-40 credit hours):**

**Curriculum (37-40 credit hours): 37 = non-thesis. 40 = thesis**

- NURS 700 (3 cr) - Theoretical and Conceptual Foundation for Nursing
- NURS 704 (3 cr) - Advanced Health Assessment*
- NURS 702 (3 cr) - Pharmacologic Management of Pediatric, Adult, and Gerontological Patients Across the Healthcare Delivery Continuum
- NURS 704 (3 cr) - Advanced Health Assessment
- NURS 707 (3 cr) - Advanced Pathophysiology for Nurses
- NURS 718 (3 cr) - Diagnostic Interpretation and Therapeutic Modalities
- NURS 786 (5-6 cr) - Management of Acute Care Adult and Gerontological Health Problems I *
- NURS 787 (5-6 cr) - Management of Acute Adult and Gerontological Health Problems II *
- NURS 796 (3 cr) - Advanced Practice Practicum: Adult – Gerontology Acute Care Nurse Practitioner*
- NURS 717 (3 cr) - Application of Basic Statistics for Nursing and Nursing Service Management
- NURS 790 (3 cr) - Research Methods for Nursing
- NURS 791 (3 cr) - Seminar in Clinical Nursing Research

*indicates courses with practicum hours

Students must successfully complete all clinical placement requirements, including criminal background checks, drug screening and immunizations. Students must participate in clinical rotations in states approved through State Authorization (see [http://www.sc.edu/about/offices_and_divisions/provost/planning/academicprograms/state-authorization/index.php](http://www.sc.edu/about/offices_and_divisions/provost/planning/academicprograms/state-authorization/index.php)) for specifics.

Students are required to participate in two on-site clinical check off days during clinical courses. Students come to campus and with faculty to their practices during the clinical courses to demonstrate their skills in managing patients for health problems: assessment, diagnosing, and initiating a plan of care that includes prescribing medication or interventions, patient teaching, and/or referral. Faculty use a check off master of skills list/rubric using a competency-based list of expected behaviors.
## Course Descriptions for New Courses

<table>
<thead>
<tr>
<th>Course Name</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>N/A</td>
<td></td>
</tr>
</tbody>
</table>

## Faculty

### Faculty and Administrative Personnel

<table>
<thead>
<tr>
<th>Rank</th>
<th>Full- or Part-time</th>
<th>Courses Taught or To be Taught, Including Term, Course Number &amp; Title, Credit Hours</th>
<th>Academic Degrees and Coursework Relevant to Courses Taught, Including Institution and Major</th>
<th>Other Qualifications and Comments (i.e., explain role and/or changes in assignment)</th>
</tr>
</thead>
<tbody>
<tr>
<td>PhD, APRN, BC, FAANP Clinical Professor Director MSN/DNP Associate Dean</td>
<td>Full Time</td>
<td>Nursing 707: Advanced Pathophysiology (3 credits). Taught every term.</td>
<td>PhD in Nursing Science, USC, FNP: Family Nurse Practitioner, USC</td>
<td>Lead NP faculty member for the MSN and DNP Program, NP concentration area. Our NP Program (AGACNP and FNP) is ranked #1 in the US by US NEWS and WORLD REPORT 2016. Nurse Practitioner for over 30 years in SC. Director of the Program USC for 5 years. Associate Dean for USC CON x 10 years. Faculty member USC x 25 years.</td>
</tr>
<tr>
<td>DNP, AGACNP, FNP Clinical Assistant Professor</td>
<td>Full time</td>
<td>Nursing 718: Advanced Diagnostics (3 credits). Taught every term. Nursing 796: Final Advanced Practice Practicum: AGACNP (3 credits). Taught every term.</td>
<td>DNP in Nursing Practice, USC, FNP and AGACNP USC</td>
<td>Nurse Practitioner for over 10 years in SC. Faculty member USC x 5 years.</td>
</tr>
<tr>
<td>DNP, FNP, AGACNP Clinical Assistant Professor</td>
<td>Full time</td>
<td>Nursing 786: AGACNP Management Practicum-1. (5</td>
<td>DNP in Nursing Practice, USC</td>
<td>Nurse Practitioner for over 6 years in SC. Faculty member USC x 1 year.</td>
</tr>
<tr>
<td>MSN, FNP</td>
<td>Clinical Associate Professor</td>
<td>Full time</td>
<td>Nursing 704: Advanced Health Assessment (3 credits). Taught every term.</td>
<td>MSN, USC</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>PhD, FNP</td>
<td>Clinical Associate Professor</td>
<td>Full time</td>
<td>Nursing 707: Advanced Pathophysiology (3 credits). Taught every term.</td>
<td>PhD in Nursing Science, Duquesne University</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>MSN, ACNP</td>
<td>Part Time Temporary Clinical Faculty</td>
<td>Part time</td>
<td>Nursing 786: AGACNP Management Practicum-1. (5 credits). Taught Fall but is moving to Spring and Fall 2017.</td>
<td>MSN, USC</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Nursing 787: AGACNP Management Practicum-2. (5 credits). Taught Fall but is moving to Spring and Fall 2017.</td>
<td></td>
</tr>
<tr>
<td>DrPH</td>
<td>Clinical Associate Professor</td>
<td>Full time</td>
<td>Nursing 717: Application of Statistics for Nursing and Nursing Service. (3 credits). Taught every term.</td>
<td>DrPH, USC</td>
</tr>
<tr>
<td>Rank</td>
<td>Full time</td>
<td>Courses</td>
<td>Degree in Nursing Science</td>
<td>Tenure</td>
</tr>
<tr>
<td>-----------------</td>
<td>-----------</td>
<td>-------------------------------------------------------------------------</td>
<td>-----------------------------------------------------------------</td>
<td>-----------------</td>
</tr>
<tr>
<td>PhD, RN</td>
<td>Full time</td>
<td>Nursing 700: Theoretical and Conceptual Foundations for Nursing. (3 credits). Taught Fall and Spring</td>
<td>PhD in Nursing Science, Vanderbilt</td>
<td>USC Faculty Member x 10 years.</td>
</tr>
<tr>
<td>Associate Professor, Tenured</td>
<td></td>
<td></td>
<td>Completed a Post-doctoral fellowship in Health Disparities in Underserved Populations, at the University of Illinois at Chicago, College of Nursing</td>
<td></td>
</tr>
<tr>
<td>PhD, PNP</td>
<td>Full time</td>
<td>Nursing 790: Research Methods for Nursing. (3 credits). Taught Fall and Spring</td>
<td>PhD in Nursing Science, NC State PNP, Duke</td>
<td>USC Faculty Member (off and on for over 10 years. Break of service due to family/personal)</td>
</tr>
<tr>
<td>Clinical Associate Professor</td>
<td></td>
<td>Nursing 791: Applied Seminar in Clinical Nursing Research (3 credits). Taught Fall and Spring</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Note: Individuals should be listed with program supervisor positions listed first. Identify any new faculty with an asterisk next to their rank.
Total FTE needed to support the proposed program (i.e., the total FTE devoted just to the new program for all faculty, staff, and program administrators):

<table>
<thead>
<tr>
<th>Faculty</th>
<th>Staff</th>
<th>Administration</th>
</tr>
</thead>
<tbody>
<tr>
<td>9FTE</td>
<td>1FTE</td>
<td>.5FTE</td>
</tr>
</tbody>
</table>

(faculty shared between FNP, AGACNP, PMHNAP programs)

**Faculty/Administrative Personnel Changes**

Provide a brief explanation of any additional institutional changes in faculty and/or administrative assignment that may result from implementing the proposed program. (1000 characters)

We are recruiting another doctorally prepared AGACNP faculty member. The position is already approved and posted within the various academic venues for advertising. We have also supported a current NP faculty member to complete a post-master’s AGACNP certificate program (University of Pennsylvania) over the past year – she is expected to be certified and available to direct this program in August 2017. With the growth in our program, an additional faculty member is needed to meet ratios of faculty to students according to accreditation standards by National Organization of Nurse Practitioner Faculty. Additionally, with increased enrollments, tuition incomes will cover clinical fees for clinical courses, liability insurance for NP students and NP faculty, faculty credentialing in facilities to precept NP students, student credentialing for clearances to engage in clinical in the various agencies and facilities, part time faculty support to assist in NP courses with enrollments to maintain NP faculty to NP student ratios, and faculty travel for site visits and NP student check offs. Students are required to have at least 2 site visits by faculty and 2 check offs by faculty for each clinical course. As students progress in the program, student engagement in clinical experiences increases up to three and four days per week in various agencies or facilities.
## Financial Support

*Notes: Clinical course fees assessed for students in first year (1 course), and 3rd year (3 courses)

<table>
<thead>
<tr>
<th>Category</th>
<th>1&lt;sup&gt;st&lt;/sup&gt;</th>
<th>2&lt;sup&gt;nd&lt;/sup&gt;</th>
<th>3&lt;sup&gt;rd&lt;/sup&gt;</th>
<th>4&lt;sup&gt;th&lt;/sup&gt;</th>
<th>5&lt;sup&gt;th&lt;/sup&gt;</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Tuition Funding to UNIV - not direct source for PMHNP</strong></td>
<td>$319,950</td>
<td>$618,570</td>
<td>$511,920</td>
<td>$661,230</td>
<td>$836,136</td>
<td>$2,947,806</td>
</tr>
<tr>
<td><strong>Tuition Funding to CON for PMHNP</strong></td>
<td>$338,175</td>
<td>$470,993</td>
<td>$431,393</td>
<td>$552,645</td>
<td>$700,952</td>
<td>$2,494,158</td>
</tr>
<tr>
<td><strong>Program-Specific Fees</strong></td>
<td>$52,500</td>
<td>$336,000</td>
<td>$294,000</td>
<td>$378,000</td>
<td>$478,800</td>
<td>$1,539,300</td>
</tr>
<tr>
<td><strong>State Funding (i.e., Special State Appropriation)</strong></td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td><strong>Reallocation of Existing Funds</strong></td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td><strong>Federal Funding</strong></td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td><strong>Other Funding</strong></td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>$390,675</td>
<td>$806,993</td>
<td>$725,393</td>
<td>$930,645</td>
<td>$1,179,752</td>
<td>$4,033,458</td>
</tr>
</tbody>
</table>
## Estimated New Costs by Year

<table>
<thead>
<tr>
<th>Category</th>
<th>1&lt;sup&gt;st&lt;/sup&gt;</th>
<th>2&lt;sup&gt;nd&lt;/sup&gt;</th>
<th>3&lt;sup&gt;rd&lt;/sup&gt;</th>
<th>4&lt;sup&gt;th&lt;/sup&gt;</th>
<th>5&lt;sup&gt;th&lt;/sup&gt;</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>MSN Program Administration CORE</td>
<td>$45,625</td>
<td>$45,625</td>
<td>$45,625</td>
<td>$45,625</td>
<td>$45,625</td>
<td>$228,125</td>
</tr>
<tr>
<td>AGACNP Administration</td>
<td>$52,360</td>
<td>$52,360</td>
<td>$52,360</td>
<td>$52,360</td>
<td>$52,360</td>
<td>$261,800</td>
</tr>
<tr>
<td>Faculty Salaries + Fringe CORE</td>
<td>$170,000</td>
<td>$170,000</td>
<td>$200,000</td>
<td>$200,000</td>
<td>$240,000</td>
<td>$980,000</td>
</tr>
<tr>
<td>AGACNP Fac Salaries</td>
<td>$170,000</td>
<td>$255,000</td>
<td>$255,000</td>
<td>$340,000</td>
<td>$340,000</td>
<td>$1,360,000</td>
</tr>
<tr>
<td>Clinical Faculty TFAC</td>
<td>$45,000</td>
<td>$60,000</td>
<td>$60,000</td>
<td>$75,000</td>
<td>$75,000</td>
<td>$315,000</td>
</tr>
<tr>
<td>Core Staff Salaries + Fringe</td>
<td>$100,219</td>
<td>$100,219</td>
<td>$100,219</td>
<td>$100,219</td>
<td>$100,219</td>
<td>$501,095</td>
</tr>
<tr>
<td>Graduate Assistants</td>
<td>$12,000</td>
<td>$12,000</td>
<td>$24,000</td>
<td>$24,000</td>
<td>$24,000</td>
<td>$96,000</td>
</tr>
<tr>
<td>Equipment</td>
<td>$25,000</td>
<td>$25,000</td>
<td>$25,000</td>
<td>$25,000</td>
<td>$25,000</td>
<td>$125,000</td>
</tr>
<tr>
<td>Facilities</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>$0</td>
</tr>
<tr>
<td>Supplies/Materials</td>
<td>$24,520</td>
<td>$24,520</td>
<td>$24,520</td>
<td>$24,520</td>
<td>$24,520</td>
<td>$122,600</td>
</tr>
<tr>
<td>Library Resources</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>$0</td>
</tr>
<tr>
<td>Other*</td>
<td>$5,500</td>
<td>$5,500</td>
<td>$5,500</td>
<td>$5,500</td>
<td>$5,500</td>
<td>$27,500</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>$650,224</td>
<td>$750,224</td>
<td>$792,224</td>
<td>$892,224</td>
<td>$932,224</td>
<td>$4,017,120</td>
</tr>
</tbody>
</table>

*Notes: + indicates a clinical course with clinical fee attached; Adult Gero Acute Care NP and TFAC more expensive salaries

Expected total for 5<sup>th</sup> year is 114 students - used in modeling income and expenses (mistake in listing 114 as first group)

**Net Total** (i.e., Sources of Financing Minus Estimated New Costs)

<table>
<thead>
<tr>
<th></th>
<th>1&lt;sup&gt;st&lt;/sup&gt;</th>
<th>2&lt;sup&gt;nd&lt;/sup&gt;</th>
<th>3&lt;sup&gt;rd&lt;/sup&gt;</th>
<th>4&lt;sup&gt;th&lt;/sup&gt;</th>
<th>5&lt;sup&gt;th&lt;/sup&gt;</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Net Total</td>
<td>-$146,904</td>
<td>$56,769</td>
<td>-$66,831</td>
<td>$38,421</td>
<td>$247,528</td>
<td>$128,983</td>
</tr>
</tbody>
</table>
Budget Justification

Provide a brief explanation for the other new costs and any special sources of financing (state funding, reallocation of existing funds, federal funding, or other funding) identified in the Financial Support table. (1000 characters)

Note: Institutions need to complete this budget justification only if any other new costs, state funding, reallocation of existing funds, federal funding, or other funding are included in the Financial Support table.

As this proposal approval process has taken some time, the original budget was prepared years before the development of this final version. Actual admissions to the program were not previously linked to clinical placement availability and they must be linked. Additionally, the original financial document did not include core costs and actual CON tuition received. In order to capture all expenses and income, the updated budget above is provided as requested. The technology fee per credit hour of $17.00 and the graduate credit fee of $80.00 are accurately included for each semester. The clinical fee of $1000 along with insurance fee of $50 is provided as requested and it is indicated as per course (not credit hour) and is only included in the financial support document when students are actually taking clinical courses. The proposal includes how many clinical courses students are taking and when in the program they occur. These fees are only charged to students when they are enrolled in the clinical courses – not throughout the program. The fees are essential to allowing the programs to be self-supporting and meet accreditation requirements of maintaining a 1:6 faculty:student ratio when students are in the clinical courses. The clinical fees are used to pay for the adjuncts as faculty needed to cover the clinical courses. The adjuncts work directly with the course assigned, full-time NP faculty to individually complete required “check-offs” for students at least twice during the semester.

No new costs are needed. One faculty line has been approved and we are advertising for that position: Doctorally prepared Adult Gerontology Acute Care NP.
The “Other” costs vary greatly and may include expenses for travel, office supplies, printing, contractual services, consultants, liability insurance for NP students, background checks, advertising/public relations.

The program specific fees include the following with the estimated total based on the projected number of students and credit hours:

- Full-time Graduate Students (MSN/DNP & PhD) $560.00
- Part-time Graduate Students (MSN/DNP & PhD) $285.00
- Technology/ Online Instruction (additional per credit hour) $70.00
- Clinical Course Fee (per clinical course) $250.00

The program specific fees support AGACNP programmatic expenses and the instructional costs related to required clinical and other experiential learning mandated by our respective accreditation body. The fees support the activities related to student affairs, advisement and student services. Our college requires significant resources to identify, support and monitor placement sites and preceptors. Some sites additionally require liability insurance, background checks, drug tests and certain immunizations. Monitoring compliance is a labor intensive responsibility for our faculty and staff.

Clinical scenarios are replicated in realistic practice environments through the use of patient simulators, robotics, and other sophisticated teaching tools so testing and online instruction incur fees. The college provides support services such as computer labs and statistical consultation. The student computer lab and testing center was remodeled in 2016 to place state of the art technology in the hands of the students. The technology fee makes these advances possible. The insurance fee varies per year. Students enrolled in clinical courses are required to purchase professional liability insurance. This fee is included on the students' semester fee statement and contributes toward Nursing’s portion of the USC professional liability coverage for students and instructors as well as a supplemental student blanket professional liability insurance policy sourced through an external vendor.

Background checks are conducted prior to each student initiating clinical. Agencies require a clean drug test and background check (drug testing, County Criminal Search, Nationwide Fraud and Abuse, US Patriot Act Search, Residence History, Social Security Alert, Licensure primary verification, and National Sex Offender Registry).

The net total overage is not a true overage. The salary expenses must be funded since the portion we would keep (summer tuition and Nursing fees) are not covering all current salaries—however faculty do teach across programs. Therefore, any “overage” is invested in faculty teaching in the graduate program.

**How else does the revenue support the College of Nursing?**

The revenue supports the CON for faculty lines, additional programs (for example, we are in the preliminary stages of establishing a palliative care tract), renovations for the CON such as the computer lab (55 computers) and simulation space, student ceremonies (White Coat for the Graduate Students entering the program, Stethoscope Ceremony for UG students entering the program, Convocation), and marketing materials and venues.
**Evaluation and Assessment**

**Programmatic Assessment:** Provide an outline of how the proposed program will be evaluated, including any plans to track employment. Identify assessment tools or software used in the evaluation. Explain how assessment data will be used. (3000 characters)

TEQ and CEQ: Teacher and Course Evaluations. Collected each semester from NP students by class climate online. Data collected by Dr. Tavakoli, Office of Research College of Nursing, and disseminated to course faculty and College of Nursing Administrators. Aggregate data presented to College of Nursing Graduate Faculty. SAS software and class climate used to collect and store data. Assessments used to amend course content, teaching strategies, and course materials as appropriate.

PAQ: Program Assessment Questionnaire of Graduating NP students: Collected each semester from graduating NP students by class climate online. Data collected by Dr. Tavakoli, Office of Research College of Nursing, and disseminated to course faculty and College of Nursing Administrators. Aggregate data presented to College of Nursing Graduate Faculty. SAS software and class climate used to collect and store data. Assessments used to amend course content, program content deficits, and course materials as appropriate.

EAQ: Employer Assessment Questionnaire who employ NP graduates: Collected annually from employers of NP graduates by class climate online. Data collected by Dr. Tavakoli, Office of Research College of Nursing, and disseminated to course faculty and College of Nursing Administrators. Aggregate data presented to College of Nursing Graduate Faculty. SAS software and class climate used to collect and store data. Assessments used to amend the program to ensure the graduate is meeting the employer demands and expectations.

SEP: Student Evaluation of Preceptor. Collected each semester from the NP students in the 12 week of the clinical course by class climate online. Data collected by Dr. Tavakoli, Office of Research College of Nursing, and disseminated to course faculty and College of Nursing Administrators. Aggregate data presented to College of Nursing Graduate Faculty. SAS software and class climate used to collect and store data. Assessments used to continue or discontinue a preceptor for the student learning environment.

FPES: Faculty/Preceptor Evaluation of the Student in clinical. Collected 2 times per semester on each NP student in each clinical course. Direct observation. Hard Copy Tool FPES used by the Course Faculty Member and Preceptor to evaluate the student’s competency proficiencies in the clinical setting. Evaluations shared with students to enhance or strengthen skills and competencies. Course tools used in course evaluations.
### Student Learning Assessment

<table>
<thead>
<tr>
<th>Expected Student Learning Outcomes</th>
<th>Methods of/Criteria for Assessment</th>
</tr>
</thead>
</table>
| Demonstrate knowledge and skills required for advanced practice nursing.                          | FPES: Faculty/Preceptor Evaluation of the Student in clinical. Collected 2 times per semester on each NP student in each clinical course. Direct observation. Hard Copy Tool FPES used by the Course Faculty Member and Preceptor to evaluate the student’s competency proficiencies in the clinical setting. Evaluations shared with students to enhance or strengthen skills and competencies. Course tools used in course evaluations.  
Clinical Check offs 2 times per semester per student in each clinical course  
Course exams (multiple choice)  
Board Vitals: online asynchronous test exam prep  
Criteria: Students make a “B” or better in each clinical course to pass and progress. If a student makes a “C”, the course is repeated. Only 2 courses can be repeated. A student is automatically dismissed in the program if they make a “D” of “F” in any course required for the program of study. |
| Implement core and clinical course content within the context of the community, and demonstrate understanding of the community as a client. | FPES: Faculty/Preceptor Evaluation of the Student in clinical. Collected 2 times per semester on each NP student in each clinical course. Direct observation. Hard Copy Tool FPES used by the Course Faculty Member and Preceptor to evaluate the student’s competency proficiencies in the clinical setting to apply evidence based findings for patient care. Evaluations shared with students to enhance or strengthen skills and competencies. Course tools used in course evaluations.  
Clinical Check offs 2 times per semester per student in each clinical course  
Course exams (multiple choice)  
Course papers as appropriate: example: Cultural assessment, interdisciplinary teams, evidence based research, population assessments, etc.  
Board Vitals: online asynchronous test exam prep  
Course Papers to reflect population/community health and social determinants of health. |
<table>
<thead>
<tr>
<th>Criteria: Students make a “B” or better in each clinical course to pass and progress. If a student makes a “C”, the course is repeated. Only 2 courses can be repeated. A student is automatically dismissed in the program if they make a “D” of “F” in any course required for the program of study.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Demonstrate the ability to use theory and research findings in practice.</td>
</tr>
<tr>
<td>FPES: Faculty/Preceptor Evaluation of the Student in clinical. Collected 2 times per semester on each NP student in each clinical course. Direct observation. Hard Copy Tool FPES used by the Course Faculty Member and Preceptor to evaluate the student’s competency proficiencies in the clinical setting to apply evidence based findings for patient care. Evaluations shared with students to enhance or strengthen skills and competencies. Course tools used in course evaluations.</td>
</tr>
<tr>
<td>Criteria: Students make a “B” or better in each clinical course to pass and progress. If a student makes a “C”, the course is repeated. Only 2 courses can be repeated. A student is automatically dismissed in the program if they make a “D” of “F” in any course required for the program of study.</td>
</tr>
<tr>
<td>Demonstrate leadership skills for advanced nursing practice.</td>
</tr>
<tr>
<td>FPES: Faculty/Preceptor Evaluation of the Student in clinical. Collected 2 times per semester on each NP student in each clinical course. Direct observation. Hard Copy Tool FPES used by the Course Faculty Member and Preceptor to evaluate the student’s competency proficiencies in the clinical setting to apply evidence based findings for patient care. Evaluations shared with students to enhance or strengthen skills and competencies. Course tools used in course evaluations.</td>
</tr>
<tr>
<td>Clinical Check offs 2 times per semester per student in each clinical course</td>
</tr>
<tr>
<td>Course exams (multiple choice)</td>
</tr>
<tr>
<td>Criteria: Students make a “B” or better in each clinical course to pass and progress. If a student makes a “C”, the course is repeated. Only 2 courses can be repeated. Only 2 C’S allowed in the program in any course. A student is automatically dismissed in the program if they make a “D” of “F” in any course required for the program of study.</td>
</tr>
</tbody>
</table>
Library and Learning Resources

Identify current library/learning collections, resources, and services necessary to support the proposed program and any additional library resources needed. (1000 characters)

USC library  A quick search of the Thomas Cooper library shows 144 holdings under “intensive care” and 1215 under “gerontology”.
Nursing has key databases available through the library:
CINAHL Complete is coverage of the literature in nursing and allied health care areas.
PubMed-Medli (with USC links) is the premier database of worldwide biomedical literature including research, clinical practice, administration, policy issues, and health care services.
Joanna Briggs Institute EBP (Evidence Based Practice) Database covers a wide range of medical, nursing, and health science specialties and includes a unique suite of information that's been analyzed, appraised, and prepared by expert reviewers at the JBI so you can integrate the world's best evidence into your research. It includes evidence summaries, evidence-based recommended practices, best practice information sheets, systematic reviews, consumer information sheets, systematic review protocols and technical reports.
The Cochrane Library provides reliable and up-to-date information on the effects of interventions in health care.
The Simulation Lab at the College of Nursing provides additional support.

No new resources are needed.

Adult Gerontology Acute Care Evidence Based Practice Information is a major data source for the program and is available to distance students.
Required readings are found in textbooks and available via electronic sources and inter library loan.

Simulation Lab at the College of Nursing is used for preparing for clinical days to “check-off” skills for the NP students. Students use the lab to practice skills and apply knowledge.

Student Support Services

Identify academic support services needed for the proposed program and any additional estimated costs associated with these services. (500 characters)

No new resources are necessary.

We recently added one staff line in student services to support the growth in the program for academic advising and clinical contracts.

Student resources are listed in the graduate student handbook on pages 7-9

ONLINE COURSES
All nursing courses in the MSN Program are delivered online through Blackboard Courses Management System which allows USC faculty to create a secure course web site for class communications, posting assignments, posting readings, linking to complementary web sites, administering exams, and much more. In courses that use
Blackboard, the course syllabus will provide basic information about accessing Blackboard https://blackboard.sc.edu. Additional information about Blackboard is available at http://www.uts.sc.edu/academic/blackboard/. Log in can occur at https://blackboard.sc.edu/webapps/portal/frameset.jsp.

Courses offered in this format are constructed and conducted differently than traditional classroom courses. Below are some suggestions on how to be successful in online courses:

- Become familiar with Blackboard, the course software
- Access Bb through your VIP account
- Read the “How to…” guides that are found in each course.
- Participate actively in the course

Clinical Courses have didactic component online but require direct clinical practice, direct clinical check offs with faculty, and other activities such as clinical conferencing or simulation.

OTHER STUDENT SUPPORT SERVICES The Director of Student Affairs in the College of Nursing, Ms. Cheryl Nelson, is the student’s advocate in the College of Nursing and serves as the initial contact for concerns such as requesting exception to a college policy or a grievance. In addition, Mr. Dale Moore, The Graduate School Ombudsman, serves as a confidential, neutral, informal and independent resource for graduate student concerns and conflicts. More information about the role of the Graduate School Ombudsman is available on the Graduate School website at http://gradschool.sc.edu/ STUDENTS WITH DISABILITIES The USC College of Nursing is committed to providing reasonable accommodations for students with disabilities. Students with disabilities must contact the Office of Student 9 Disability Services (http://www.sa.sc.edu/sds/) prior to or early in their academic program to determine if they are eligible for reasonable accommodations. Students with disabilities, like all other students in the nursing program, must be able to continually meet core performance standards and functional abilities established to ensure that they meet the objectives of the nursing program. (See http://www.sc.edu/study/colleges_schools/nursing/internal/gradhandbook1314.pdf )

**Physical Resources**

Identify any new instructional equipment needed for the proposed program. (500 characters). We recently added a Simulation Lab Room designated for NP students in distant clinical sites. The room has been up-fitted to meet the technology support. We have been approved for grant funding for additional fidelity mannequins, will know exact amount on March 2017.

None needed.

Will the proposed program seek program-specific accreditation?

☑ Yes   This program is accredited though CCNE 2021

☐ No

If yes, provide the institution’s plans to seek accreditation, including the expected timeline for accreditation. (500 characters) We plan to seek re-accreditation in 2021. Our last accreditation was successful for a 10 year accreditation and no compliance issues or recommendations.
Will the proposed program lead to licensure or certification?

☑ Yes
☐ No

If yes, explain how the program will prepare students for licensure or certification. (500 characters)

After Graduation, the students are eligible to sit for the national certification exam: Adult Gerontology Acute Care Nurse Practitioner. Upon certification, students can obtain licensure as a Nurse Practitioner in all states in the US. The AGACNP program maintains a certification rate above 90-100% in all years since program was initiated.

**Teacher or School Professional Preparation Programs**

Is the proposed program a teacher or school professional preparation program?

☐ Yes
☑ No

If yes, complete the following components.

Area of Certification

Please attach a document addressing the South Carolina Department of Education Requirements and SPA or Other National Specialized and/or Professional Association Standards.
University of South Carolina
Operating Budget

The University of South Carolina's budget process is a comprehensive planning effort representative of the vision of the University to provide research, teaching, and service for the citizens of the State of South Carolina. The process involves participation beginning at the department level and reaching out to all campuses to develop budgets which will reflect the investments identified to significantly enhance the academic reputation, benefit students and contribute to the economic and societal health of the State.

Since the 2011 fiscal year, the University of South Carolina Columbia campus operates with a hybrid budget model for operating funds. Under this model all fall and spring E & G tuition and state appropriations are deposited to the general fund, and are offset by the combined budgets allocated to all units, both academic and service. Academic units retain revenue associated with specific instructional offerings including, but not limited to, lab, course specific and program fees. Academic units also retain tuition for the summer term. Non-academic units generate approximately 2% of operating revenue. Both academic and service units are allowed to carry forward unspent funds from one year to the next as part of their operating budgets, but that resource is assessed an administrative fee relative to the size of the operating budget. As of December 31, 2016 USC Columbia’s operating budget totaled approximately $756 million. Sources are summarized as follows:

- Fall & Spring Tuition - 47.9%
- Revenue generated and retained by units - 9.4%
- State Appropriations - 14.9%
- Abatements - 14.7%
- Carryforward - 12.0%
- Net Transfers in / out of other current funds - 1.1%

Unit budgets are generally grouped into four primary categories – Instruction, Academic Support and Student Services, Institutional Support, and Abatements and Scholarships. Institutional Support and Operation and Maintenance of Physical Plant include Utilities, Facilities, Law Enforcement and Safety, Communications, Human Resources, Development, Finance and General Administration including the Board of Trustees and President’s Office. The $756 million operating budget is distributed among these categories as follows:

- Instruction - 48.2%
- Academic Support and Student Services - 12.0%
- Institutional Support, O&M of Plant - 23.2%
- Abatements and Scholarships - 16.6%

The University is currently reviewing the budget model for the Columbia campus. Although in the early stages of analysis, initial consultations with external consultants and University constituencies indicate a desire for a budget model that incentivizes the development of new academic programs and allows for a more direct application of revenue and expenditures related to academic unit activities. The USC Columbia campus utilized a responsibility center management type budget for the period of fiscal years 2004 up to 2011. Under this budget methodology tuition and fee revenues accrued to each academic unit and those units were assessed a charge to support university services. At the height of the Great Recession, as the University lost approximately 50% of its state appropriations, this budget model was returned to a more centralized methodology to mitigate the risk of reduced budgets. As the new model is developed, the University will engage stakeholders across the institution and weigh the complexity of an allocation model with the need for simplicity and accountability.

Each of the University's System campuses prepares and implements respective operating budgets. As with USC Columbia, academic units at each campus generate the vast majority of revenue. These resources are used to support units not directly involved in providing instructional services to the students.