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 Psychiatric Mental Health 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 strong need for the program due to rural workforce shortages, and the intent for accurate citation in the CHE inventory. Previously, the program experienced low enrollment and was placed on hold: no new students admitted while improvements were implemented. As a result, last year the program enrolled 50 students. Commission staff asked about Board of Trustees approval, which the representative confirmed, and about the planned faculty hire. The USC representative explained the position is posted and the University is accepting applications. Staff inquired about the status of the grant noted in the proposal and effective delivery of the curriculum based on receiving it. 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 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 students, she noted the University provides grant funds to students from rural areas: $11,000 annually for part-time enrollees.
Stages of Consideration | Date | Comments
--- | --- | ---
| 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. | 1/30/17 | Staff requested the proposal be revised to:
• Confirm the Board of Trustees approval date as requested at ACAP, explain the proposed program centrality to the institution’s mission, and include specific program objectives;
• Explain workforce development needs specifically by providing the following: (1) specific state gerontology population data for the past ten years; (2) projected employment growth; and (3) a listing of all nursing programs with a similar emphasis, including more detail about program similarities and differences;
• State collaborative possibilities with MUSC;
• 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.

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 employment so there is minimal competition between the programs. 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.

<table>
<thead>
<tr>
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Requested Revisions Sent to the Institution 3/14/17

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 Psychiatric Mental Health 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); Community Mental Health and Psychiatric Nursing (major); Psychiatric Mental Health Nurse Practitioner (concentration)

Proposed: Master of Science in Nursing (degree); Psychiatric Mental Health Nurse Practitioner (major); no concentration.

Program Designation

- [ ] Associate’s Degree
- [x] Master’s Degree
- [ ] Bachelor’s Degree: 4 Year
- [ ] Bachelor’s Degree: 5 Year
- [ ] Specialist
- [ ] 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
- [x] No

Proposed Date of Implementation Fall 2017 CIP Code Current: 51.3811; Proposed: 51.3810

Delivery Site(s)

USC – Columbia Campus

Delivery Mode

- [ ] Traditional/face-to-face*
- [ ] Distance Education
- [ ] 100% online
- [x] 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 Psychiatric Mental Health Nurse Practitioner (PMH NP) program to the major name of Psychiatric Mental Health Nurse Practitioner. There are no additional changes requested. The title Psychiatric Mental Health Nurse Practitioner is now the 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 CIP code 51.3810 requested reflects this change at the major level and is illustrated as the code for a “Psychiatric Nurse Practitioner” program. The administration and faculty believe this best reflects the current state of the program and national standards/trends with the PMHNP prepared to see patients across the lifespan. The PMH program was put on hold in 2010 due to low enrollment.

As a Nurse Practitioner program today, student interest is high. The current PMHNP program was re-instituted in Fall 2015. An advisory board of stakeholders (Dept of Mental Health, primary care, FQHCs, others) across the state advised on recruitment, to identify potential students and placements, and to help build capacity for the workforce. The BCBS also now provides scholarships to those in rural areas. The USC CON program is the only one in SC currently at the MSN level. The MSN concentration PMHNP program enrolled 50 students for 2015-16, with additional students in the post-master’s certificate program and completing the title change to a Major as a “Psychiatric Mental Health Nurse Practitioner” program is a critical step for continued accreditation

The PMHNP 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. Graduates of the program will be able to provide psychiatric mental health care to SC citizens and nationally –these graduates can improve behavioral health care which would have profound relevance, reach, and impact on the people of the state.

List the objectives of the program. (1500 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 PMHNP program will prepare students to:

1. Apply knowledge from core courses in the assessment of clients.
2. Demonstrate knowledge and skills required for advanced practice psychiatric nursing.
3. Integrate knowledge of neuroanatomy, neurophysiology, neuropathophysiology and neuropsychiatry as a foundation for understanding the anatomical, biological and psychological processes of psychiatric dysfunction and management by advanced practice psychiatric nurses.
4. Integrate knowledge from neurology, genetics/epigenetics, psychiatry, psychology and the social sciences utilizing a lifespan approach in the diagnosis and treatment of clients.
5. Demonstrate the ability to use theory and research findings applied to practice problems, to analyze practice guidelines, and to conduct an evidence based advanced practice psychiatric nursing project.
6. Demonstrate an understanding of laws governing advanced practice psychiatric nursing, to understand scope of practice, and to apply evidence based practice knowledge in treatment planning.
7. Demonstrate leadership skills for advanced practice psychiatric nursing.

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)

As with our other NP graduates, it is anticipated that majority of the graduates of the Psychiatric Mental Health Nurse Practitioner program will remain in South Carolina following graduation. The majority of our PMHNP students are being recruited from rural or underserved areas with grant funding from the BCBS for scholarships.

South Carolina (SC) has a severe primary care provider shortage, especially in the rural areas. 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 primary and acute care and 46th for determinants of health (United Health Foundation, 2015).

Mental illness is a major public health concern in the US; it is a primary cause of disability and carries a high financial cost (SAMHSA, 2014). In South Carolina, 4.1% of adults over 18 years have a serious mental illness and 18.9%, or approximately 1 in 5, have “any” mental illness (SAMSHA, 2014). South Carolinians have limited access to mental health care and suffer from a shortage of mental health providers to address the state’s health needs. In SC, 41 counties are designed as underserved for mental health in SC, leaving the remaining 5 counties to fill the gap for mental health services (SC DHEC). In February, 2014 a web-search revealed 50-75 PMHNP vacancies posted across the state of South Carolina. There are no PMHNP education programs at the MSN level in South Carolina, with only two programs in our bordering states (UNC Chapel Hill and University of Florida). Anderson College had initiated a program but it closed after ½ semester Fall 2016. Their students are transferring to...
our program. MUSC is developing a PMHNP program, expected date of enrollment is 2017 or 2018 – having two programs in the State will be useful in helping to meet the need for PMHNPs. With mental health needs escalating, and provider access decreasing, South Carolina will need to move quickly and efficiently to address the unmet need. High priority risk areas are individuals and families in underserved areas and those who are uninsured and underinsured.

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.”

<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>Psychiatric Mental Health Nurse Practitioner</td>
<td>50 annually</td>
<td>100% of graduates will find employment following certification (high confidence) <a href="http://nursejournal.org/psychiatric-nursing/psychiatric-nursing-careers-salary-outlook/">http://nursejournal.org/psychiatric-nursing/psychiatric-nursing-careers-salary-outlook/</a> )</td>
<td>Palmetto Health GHS Roper St Francis MUSC Aiken Regional McLeod Private Psychiatric Providers Long Term Care Primary Care SCDMH DDSN DAODAS Prison County Jails Free Clinics</td>
</tr>
</tbody>
</table>

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

Agencies and hospital systems are hiring PMHNP to fulfill roles of psychiatric mental providers in the acute and outpatient settings. We anticipate 100% employment rate for all PMHNP graduates. We are a well-
established, well respected program in the nation. The USC CON graduate NP (FNP and AGACNP) program is in the top 10 in the US in 2016 by the US News and World Report ranking.

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)

The Office of Healthcare Workforce Analysis and Planning in SC identifies only 31 current PMHNP providers in practice in 2013. [http://www.sc.edu/study/colleges_schools/nursing/centers_institutes/center_nursing_leadership/office_healthcare_workforce_research/reports/workforcedatasummary2013/demo_np.php](http://www.sc.edu/study/colleges_schools/nursing/centers_institutes/center_nursing_leadership/office_healthcare_workforce_research/reports/workforcedatasummary2013/demo_np.php)

As the largest, most technologically advanced integrated health care system in the Nation, the Department of Veterans’ Affairs VHA has multiple ads for PMHNP with a salary range of $77,196.00 - $111,905.00 / Per Year; Series & Grade: VN-0610-00/00. [https://www.usajobs.gov/JobSearch/Search/GetResults?OrganizationID=VA&Series=0610&Title=Psychiatric%20Nurse&ApplicantEligibility=all](https://www.usajobs.gov/JobSearch/Search/GetResults?OrganizationID=VA&Series=0610&Title=Psychiatric%20Nurse&ApplicantEligibility=all)

South Carolina residents have a substantial need for access to mental health care, ranking 45th in access to mental health care in the USA. [http://www.mentalhealthamerica.net/issues/mental-health-america-access-care-data](http://www.mentalhealthamerica.net/issues/mental-health-america-access-care-data)

PMHNPs were more likely to practice in rural areas than psychiatrists (Hanrahan & Hartley, 2008; Trossman, 2013) and have the potential to fill the gap of mental health care in SC.

Our PMHNP graduates will obtain employment or initiate their own practice upon graduation to provide psychiatric mental health care (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. Since we re-opened our program in 2015, we anticipate the first class graduating in 2017.

**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>MSN-Psychiatric Mental Health Nurse Practitioner</td>
<td>Medical University of South Carolina</td>
<td>Same type of program academically, online, public university – very similar in that the MSN and DNP programs are online.</td>
<td>The major difference is the lack of a current program at MUSC, and the larger size of the USC program. MUSC plans to open their program Fall 2017 or 2018 upon approval. They provide a small residency program for NPs. There is currently no plan to collaborate in terms of the program offerings due to the differences in tuition at MUSC and the great need in SC for PMHNP graduates.</td>
</tr>
<tr>
<td>MSN- Psychiatric Mental Health Nurse Practitioner (closed fall 2016)</td>
<td>Anderson University</td>
<td>Same type of program academically but with fewer hours in clinical requirements.</td>
<td>Anderson is a small program, onsite, private. Anderson initiated a new PMHNP program Fall 2016 but they have closed their PMHNP program after a ½ semester Fall 2016 due to a loss of their director and psychiatric mental health faculty. Students are transferring to USC.</td>
</tr>
</tbody>
</table>
Description of the Program

Projected Enrollment
PT grad in 9 semesters
(6 credits F/S/SUM in years 1-2 and 3 cr in 3rd yr; + = clinical in yrs 1 & 3)

<table>
<thead>
<tr>
<th>Year</th>
<th>Fall</th>
<th>Spring</th>
<th>Summer</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Headcount</td>
<td>6 Credit Hours</td>
<td>Headcount</td>
</tr>
<tr>
<td>2018-19</td>
<td>55</td>
<td>330</td>
<td>55</td>
</tr>
<tr>
<td>2019-20</td>
<td>50 + 10</td>
<td>360</td>
<td>50 + 10</td>
</tr>
<tr>
<td>2020-21</td>
<td>45 + 10 + 20</td>
<td>315 +</td>
<td>45 + 10 + 20</td>
</tr>
<tr>
<td>2021-22</td>
<td>10 + 20 + 30</td>
<td>330 +</td>
<td>10 + 20 + 30</td>
</tr>
<tr>
<td>2022-23</td>
<td>20 + 30 + 30</td>
<td>420 +</td>
<td>20 + 30 + 30</td>
</tr>
</tbody>
</table>

*Typically these 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 prerequisite 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. Projecting full time study is an option but less than 5% of students choose full time study.

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)

The additional admission requirements are used to identify those students who are most likely to complete the program – a high GPA and past performance are strong indicators. A personal goal statement provides and assessment of motivation and alignment with program outcomes. CV and 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 you 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 full time to part time study, Non-thesis option, 45 credit hours). Courses with * are shared by the 3 MSN programs. Courses with 8* are shared by the 2 MSN programs Fall Start (FNP and PMHNP).

<table>
<thead>
<tr>
<th>Year 1</th>
<th>Fall</th>
<th>Course Name</th>
<th>Credit Hours</th>
<th>Spring</th>
<th>Course Name</th>
<th>Credit Hours</th>
<th>Summer</th>
<th>Course Name</th>
<th>Credit Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>*Nursing 700: Theoretical and Conceptual Foundations for Nursing</td>
<td>3</td>
<td></td>
<td>*Nursing 702: Advanced Pharmacology</td>
<td>3</td>
<td></td>
<td>*Nursing 704: Advanced Health Assessment</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td></td>
<td>**Epidemiology 700: Introduction to Epidemiology</td>
<td>3</td>
<td></td>
<td>**Nursing 708: Conceptual Basis for Community Health</td>
<td>3</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Total Semester Hours</td>
<td>9</td>
<td></td>
<td>Total Semester Hours</td>
<td>9</td>
<td></td>
<td>Total Semester Hours</td>
<td>6</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Year 2</th>
<th>Fall</th>
<th>Course Name</th>
<th>Credit Hours</th>
<th>Spring</th>
<th>Course Name</th>
<th>Credit Hours</th>
<th>Summer</th>
<th>Course Name</th>
<th>Credit Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Nursing 731: Management of Psychiatric Mental Health Problems Across the Lifespan</td>
<td>3</td>
<td></td>
<td>*Nursing 791: Applied Seminar in Nursing Research</td>
<td>3</td>
<td></td>
<td>Nursing 798: Advanced Practice Practicum: PMHNP</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td></td>
<td>*Nursing 790: Research Methods</td>
<td>3</td>
<td></td>
<td>Nursing 732: Management of Complex Psychiatric Mental Health Problems Across the Lifespan</td>
<td>3</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Nursing 761: Neuroscientific Basis for Behavior and Psychopharmacologic Management (summer)</td>
<td>3</td>
<td></td>
<td>**Nursing 720: Clinical Application of Population Analysis</td>
<td>3</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Total Semester Hours</td>
<td>9</td>
<td></td>
<td>Total Semester Hours</td>
<td>9</td>
<td></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, PMHNP.
Proposed Curriculum. Same as current, except name change. Master of Science in Nursing: Psychiatric Mental Health Nurse Practitioner (PMHNP) (45-48 credit hours) These courses were developed to start the concentration in PMHNP and are appropriate to prepare graduates for the certification examination. They meet the essentials for MSN and DNP nurse preparation according for CCNE and NP program accreditation standards.

- NURS 700 (3 cr)- Theoretical and Conceptual Foundation for Nursing
- 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 708 (3 cr)- Conceptual Basis for Family and Community Health Nursing
- NURS 718 (3 cr) - Advanced Pathophysiology for Nurses
- NURS 707 (3 cr) – Clinical Applications of Population Analysis
- NURS 731 (3 cr)- Management of Psychiatric Mental Health Problems across the lifespan*
- NURS 732 (3 cr) – Management of Complex Psychiatric Mental Health Problems across the lifespan *
- NURS 761(3 cr) Neuroscientific Basis for Behavior and Psychopharmacologic Management
- NURS 798 (3 cr) - Advanced Practice Practicum: Psychiatric Mental Health NP*
- EPID 700 (3 cr)- Introduction to Epidemiology
- 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

(or NURS 799 (6 cr) Thesis Preparation)

*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 ) for specifics.

Students are required to participate in two on-site clinical check off days during clinical courses to assess skill development. 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. &lt;br&gt; Nursing 798: Final Advanced Practice Practicum: PMHNP (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. &lt;br&gt; Our NP Program (AGACNP and FNP are ranked #1 in the US by US NEWS and WORLD REPORT 2016). &lt;br&gt; Nurse Practitioner for over 30 years in SC. &lt;br&gt; Director of the Program USC for 5 years. &lt;br&gt; Associate Dean for USC CON x 10 years. &lt;br&gt; 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.</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 702: Advanced Pharmacology (3 credits). Taught every term.</td>
<td>DNP in Nursing Practice, USC FNP USC AGACNP University of Pennsylvania</td>
<td>Nurse Practitioner for over 6 years in SC Faculty member USC x 1 year.</td>
</tr>
<tr>
<td>Position</td>
<td>Full time</td>
<td>Course and Details</td>
<td>Education/Experience</td>
<td></td>
</tr>
<tr>
<td>----------------------------------</td>
<td>---------------------------------------------------------------------------</td>
<td>-------------------------------------------------------------------------------------</td>
<td>-------------------------------------------------------------------------------------</td>
<td></td>
</tr>
<tr>
<td><strong>MSN, FNP Clinical Associate Professor</strong></td>
<td></td>
<td>Nursing 704: Advanced Health Assessment (3 credits). Taught every term.</td>
<td>MSN, USC FNP, USC DNP in progress, expected date of graduation 2017</td>
<td></td>
</tr>
<tr>
<td><strong>PhD, FNP Clinical Associate Professor</strong></td>
<td></td>
<td>Nursing 707: Advanced Pathophysiology (3 credits). Taught every term.</td>
<td>PhD in Nursing Science, Duquesne University FNP, Ohio University</td>
<td></td>
</tr>
<tr>
<td><strong>PhD, PMHNP Clinical Associate Professor</strong></td>
<td></td>
<td>Nursing 731: Management of Psychiatric Mental Health Problems Across the Lifespan. (3 credits). Taught Fall.</td>
<td>PhD Public Health, USC Post Doctoral Fellowship Duke University PMNHP, USC</td>
<td></td>
</tr>
<tr>
<td><strong>DNP, PMHNP Clinical Assistant Professor</strong></td>
<td></td>
<td>Nursing 732: Management of Complex Psychiatric Mental Health Problems Across the Lifespan. (3 credits). Taught Spring. Nursing 761: Neuroscientific Basis for Behavior and Psychopharmacologic Management. (3 credits). Taught Fall.</td>
<td>DNP, USC Post Master's Certificate – Psychiatric Mental Health Nurse Practitioner-Across the lifespan, Vanderbilt</td>
<td></td>
</tr>
<tr>
<td><strong>DrPH Clinical Associate Professor</strong></td>
<td></td>
<td>Nursing 717: Application of Statistics for Nursing and Nursing Service. (3 credits). Taught every term.</td>
<td>DrPH, USC Statistician for over 20 years USC Faculty Member x 19 years. Director Statistical Laboratory x 15 years</td>
<td></td>
</tr>
<tr>
<td><strong>PhD, RN Associate Professor, Tenured</strong></td>
<td></td>
<td>Nursing 700: Theoretical and Conceptual Foundations for Nursing. (3 credits). Taught Fall and Spring</td>
<td>PhD in Nursing Science, Vanderbilt Completed a Post doctoral Fellowship in Health Disparities in USC Faculty Member x 10 years.</td>
<td></td>
</tr>
<tr>
<td>Position</td>
<td>Time</td>
<td>Courses</td>
<td>Degree and Experience</td>
<td>Status</td>
</tr>
<tr>
<td>------------------------------------------</td>
<td>--------</td>
<td>-------------------------------------------------------------------------</td>
<td>----------------------------------------------------------------------------------------</td>
<td>-------------------------------------------</td>
</tr>
</tbody>
</table>
| PhD, PNP, Clinical Associate Professor   | Full   | Nursing 790: Research Methods for Nursing (3 credits). Taught Fall and Spring  
Nursing 791: Applied Seminar in Clinical Nursing Research (3 credits). Taught Fall and Spring | PhD in Nursing Science, NC State  
PNP, Duke                                                                 | USC Faculty Member (off and on for over 10 years. Break of service due to family/personal) |
| PhD, Assistant Professor, Tenure Track   | Full   | Nursing 720: Clinical Application of Population Analysis.                | PhD, Simon Fraser University  
Completed a three-year Canadian Institutes of Health Research Postdoctoral Fellowship in Trauma Outcomes at the University of British Columbia, Department of Surgery. | USC Faculty Member x 3 years               |
| PhD, RN, Associate Professor, Tenured    | Full   | Nursing 708: Conceptual Basis for Family and Community Health Nursing    | PhD in Nursing Science, Illinois University in Chicago                                   | USC Faculty Member x 7 years               |

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>7 FTE</td>
<td>1</td>
<td>5</td>
</tr>
</tbody>
</table>

(Faculty are shared between FNP, AGACNP, and PMHNP 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 one Doctorally prepared PMHNP faculty member to start in Fall 2018. The position is already approved and has been advertised in the appropriate nursing venues. With the growth in our program (55 NP students, admitting 28 in Spring 2017), the 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, budget increases are needed to 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. We expect to use qualified adjunct faculty to fill the gaps as needed. As students progress in the program, student engagement in clinical experiences increases in the final course up to three and four days per week in various agencies or facilities.

**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  There are multiple resources listed on the library website for mental health (88 pages of listings)  see http://libguides.usc.edu/mentalhealth

“Psych Info.” 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.

The Simulation Lab at the College of Nursing is used in preparation for “check-off” and practice skills for the NP students.

No new resources are needed.
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 (2015) 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, 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 Skype with NP students in distant clinical sites. The room has been up-fitted to meet the technology support.

None needed.

Will any extraordinary physical facilities be needed to support the proposed program?

☐ Yes
☒ No

Identify the physical facilities needed to support the program and the institution’s plan for meeting the requirements, including new facilities or modifications to existing facilities. (1000 characters).

All didactic instruction is online asynchronous. Current facilities include a simulation lab fully equipped with high fidelity manikins/monitors for programming acute care scenarios. We have 6 examining rooms and 4 high fidelity manikins. We applied for another grant (approved but will know exact amount of funding in March 2017) for 4 additional high fidelity mannequins to be used across the program for FNP, PMHNP, AGACNP and BSN program.

We received $25,000 from the National Student Nurses Association for 2 new sim rooms, 2 mannequins to assist in training for pysch mental health. The College contributed $16,255 additional funds for these two rooms. This has been completed.

We received $50,280 from the Fullerton Foundation to purchase telehealth equipment for the CON to train PMHNP students. These equipment are on order and should be installed by May 2017.

Otherwise, no new facilities/equipment are needed. One Simulation Lab room has been reformatted and updated to fit technology for skyping with Psych NP students as they deliver mental health services with their preceptor.
## Financial Support

<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>Tuition Funding to UNIV - not direct source for PMHNP</td>
<td>$351,945</td>
<td>$383,940</td>
<td>$335,948</td>
<td>$351,945</td>
<td>$447,930</td>
<td>$1,871,708</td>
</tr>
<tr>
<td>Tuition Funding to CON for PMHNP</td>
<td>$371,993</td>
<td>$405,810</td>
<td>$355,084</td>
<td>$371,993</td>
<td>$473,445</td>
<td>$1,978,325</td>
</tr>
<tr>
<td>Program-Specific Fees*</td>
<td>$153,780</td>
<td>$115,260</td>
<td>$254,415</td>
<td>$159,030</td>
<td>$216,720</td>
<td>$899,205</td>
</tr>
<tr>
<td>State Funding (i.e., Special State Appropriation)*</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Reallocation of Existing Funds*</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Federal Funding*</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Other Funding*</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><strong>$525,773</strong></td>
<td><strong>$521,070</strong></td>
<td><strong>$609,499</strong></td>
<td><strong>$531,023</strong></td>
<td><strong>$690,165</strong></td>
<td><strong>$2,877,530</strong></td>
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</tbody>
</table>
## Estimated New Costs by Year

<table>
<thead>
<tr>
<th>Category</th>
<th>1st</th>
<th>2nd</th>
<th>3rd</th>
<th>4th</th>
<th>5th</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>PMHNP 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>$120,000</td>
<td>$120,000</td>
<td>$120,000</td>
<td>$120,000</td>
<td>$120,000</td>
<td>$600,000</td>
</tr>
<tr>
<td>PMHNP Fac Salaries</td>
<td>$120,000</td>
<td>$120,000</td>
<td>$180,000</td>
<td>$180,000</td>
<td>$240,000</td>
<td>$840,000</td>
</tr>
<tr>
<td>Clinical Faculty TFAC</td>
<td>$15,000</td>
<td>$15,000</td>
<td>$15,000</td>
<td>$15,000</td>
<td>$15,000</td>
<td>$75,000</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>
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<td>$12,000</td>
<td>$12,000</td>
<td>$12,000</td>
<td>$60,000</td>
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<tr>
<td>Equipment</td>
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<td>$25,000</td>
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<td>0</td>
<td>0</td>
<td>$50,000</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 and 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>
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<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>$520,224</td>
<td>$520,224</td>
<td>$555,224</td>
<td>$555,224</td>
<td>$615,224</td>
<td>$2,766,120</td>
</tr>
</tbody>
</table>

*Notes:  + indicates a clinical course with clinical fee attached; Expected attrition from first class: 55 to 50 to 45 over 18 semesters used in modeling income and expenses as first group is large

**Net Total** (i.e., Sources of Financing Minus Estimated New Costs)  
|               | $5,549 | $846   | $54,275 | (-24,201) | $74,941 | $111,410  |
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.

The “Other” costs vary greatly and may include expenses for faculty travel to student’s clinical sites, office supplies, printing, contractual services, consultants, 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 PMHNP 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 medical professional liability coverage for students and instructors as well as a supplemental student blanket professional liability insurance policy sourced through an external vendor.

The net total overage is not a true overage. The salary expenses must be funded since the portion we would keep directly (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 |
| Demonstrate the ability to use theory and research findings in practice. | Course Papers to reflect population/community health and social determinants of health, epidemiology statistics and concepts applied.

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. |
| --- | --- |

| Demonstrate leadership skills for advanced nursing practice. | Course papers as appropriate: example: professionalism, autonomous practice, political activism, interdisciplinary teams, team leaders, electronic health record mastery, ethics, legal aspects, corporate compliance (HIPAA, billing, reimbursement, etc.).

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) |
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.
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: Psychiatric Mental Health Nurse Practitioner and can see patients across the lifespan. Upon certification, students can obtain licensure as a Nurse Practitioner in all states in the US.

There are no current graduates so no certification pass rates are available – the other USC CON NP programs maintain a certification rate above 90-100% in all but one year (88%, 2013).

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.

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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.