BACCALAUREATE IN SCIENCES OF NURSING PROGRAM

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ACRONYMS

AGENCIES	
CUSJ	Colegio Universitario de San Juan
CCNE	Commission on Collegiate Nursing Education
ACEN	Accreditation Commission for Education
JCAHO	Joint Commission on Accreditation of Healthcare Organizations
JIP	Board of Post Secondary Institutions
MSCHE	Middle States Commission on Higher Education
NLNAC	National League for Nursing Accrediting Commission
PRCE	Puerto Rico Council of Education

CUSJ HEALTH RELATED SCIENCES DEPARTMENT	
HRSD	Health Related Sciences Department
BSN	Baccalaureate of Science in Nursing
BSN-SLO	Baccalaureate of Science in Nursing Student Learning Outcomes
B-SLO	Basic Student Learning Outcomes
A-SLO	Advance Student Learning Outcomes

DEPARMENTS, LABS, OR OFFICES	
NSTIC	Nursing Skills and Therapeutic Intervention Center
GEC	General Education Competencies
CAI	Access to Information Center
ITC	Informatics and Telecommunications Center

OTHER ACRONYMS	
FA	Fall Semester (August to December)
WI	Winter Semester (January to May)
VR	Virtual Room

VIRTUAL ROOM DIRECTORY

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Institution Overview

Colegio Universitario de San Juan (CUSJ) is a public, non-profit, primarily teaching institution of higher education that provides access to quality education to Hispanic US citizen, both young adults and adults. Founded in 1972 by the Municipality of San Juan, it is the first and only higher education institution developed by a municipal government in Puerto Rico. Throughout these 51 years, CUSJ has had a combined "educational- social mission": (1) providing opportunities for underrepresented and underserved Hispanic minorities, a product of K-12 traditional public education, to acquire the knowledge needed for employment; and (2) emphasizing technology as an essential ingredient for success in today's globalized economy. CUSJ is directed at developing 21st-century learning environments to assist students in becoming self-directed learners by providing associate and baccalaureate degree programs as the gateway to a better quality of life.

Originally focused on the San Juan population, CUSJ today is chosen by students from all neighboring municipalities and from throughout Puerto Rico. Initially, CUSJ was in the Miramar sector of San Juan as the Municipality of San Juan Technological Community College, offering vocational certificate programs and associate degrees in computer programming, electronics, secretarial sciences, architecture and construction, and nursing. It is licensed by the Board of Post Secondary Institutions (JIP, Spanish acronym), previously the Puerto Rico Council of Education (PRCE) to offer associate and baccalaureate degree programs and to offer vocational certificate programs. Since June 1978, the Middle States Association of Colleges and Schools (MSA), now Middle States Commission on Higher Education (MSCHE) accredited CUSJ. Since March of 1990, the National League Accreditation Commission for Nursing (NLNAC), now Accreditation Commission on Education in Nursing (ACEN), accredited CUSJ's Associate Degree Program in Nursing. Accreditation was reaffirmed in 2019. The last two times were awarded the highest continuing accreditation decision. Since 2018, the Baccalaureate of Science in Nursing Program was professionally accredited by the Commission on Collegiate in Nursing Education (CCNE) in 2018 and is up for re-accreditation in September 2023.

Today, the institution offers five baccalaureate degrees, eight associate degrees as well as certificates and short courses. The Health-Related Sciences Department (HRSD) provides baccalaureate and associate degrees in Nursing Sciences with Dorothea Orem's Self Care Theory. Orem defines her model as a general nursing theory that explains the concept of self-care as individuals with a constant contribution to his or her own existence. "Self-care is an activity learned by individuals, guided toward an objective. It is a behavior that exists in tangible life situations guided by the people themselves toward others or toward the environment to regulate factors that his or her own development and function in benefit for their life, health, and wellbeing". It also exposes the deficit of self-care which is the relation between the person and his or her self-care need. This theory presents the patient's need to learn about his or her own disease or discapacity care without depending on others. The related theories are universal self-care requisites, self-care development requisites, and health deviation's self-care requisites.

The original associate degree nursing program was licensed by the Puerto Rico Council on Higher Education and began in August 1977 as a result of Puerto Rico's existing need for well-trained nursing personnel to become leaders in nursing care with an assurance to be employed. As part of one of the programs in the Health-Related Sciences Department, the Associate Degree in Nursing has been professionally accredited since 1990 by the National League Accreditation Commission for Nursing (NLNAC), now Accreditation Commission on Education in Nursing (ACEN). This program is designed to be completed in two (2) years and a summer session in semester terms. It articulates nursing and general education courses to balance in each semester the concentration courses with the liberal art courses which adds to seventy-two (72) credits.

The Puerto Rico Department of Labor presented a projection that for the year 2000 there would be a growing need for nursing professionals. CUSJ Health Related Sciences Department faculty developed and submitted to the Puerto Rico Council on Higher Education a Baccalaureate in Science of Nursing proposal

which was accepted to begin in August 2003. This program started successfully. After careful analysis and students' tendencies to enroll in the third year, CUSJ decided to transform it into an articulated program. In other words, ADN to Baccalaureate in Sciences of Nursing Program is designed to be completed in a year and a half taking fifty-seven (57) credits. Interested candidates were required to have an Associate Degree in Nursing.

For the fall 2022 semester, the HRSD had 42% of the CUSJ total enrollment. The Baccalaureate in Sciences of Nursing Program had one hundred and thirty (130) students enrolled. From these, 81% were female; 48% were 24 years or younger; 51% were enrolled in the day session; 81% were full-time students; 85% were continuing students; 6% were transfer students; and 9 % were readmission students. Average GPA was 3.31 out of a 4.0 scale and were enrolled in an average of fourteen (14) credits.

The last six years have presented a challenge to education institutions in Puerto Rico: Hurricanes Irma and María in September 2017, which left the island devastated; the January series of earthquakes which caused multiple changes and delays in schools and universities; and the impact of the COVID-19 pandemic that drastically changed the appreciation of education all around the world and the adjustments for all involved. BSN students and faculty volunteered to support the general population and provided them the opportunity to support the general community and at the same time put forth their knowledge in the health field. The Baccalaureate in Sciences of Nursing Program, as one of CUSJ units, shares the goals of community service offering quality educational opportunities. The CUSJ alumni are professionals that can work in multiple positions and scenarios in the healthcare fields.

Standard I
Program Quality: Mission and Governance

The mission, goals, and expected program outcomes are congruent with those of the parent institution, reflect professional nursing standards and guidelines, and consider the needs and expectations of the community of interest. Policies of the parent institution and nursing program clearly support the program's mission, goals, and expected outcomes. The faculty and students of the program are involved in the governance of the program and in the ongoing efforts to improve program quality.

I-A. The mission, goals, and expected program outcomes are:

- **congruent with those of the parent institution; and**
- **reviewed periodically and revised as appropriate.**

Elaboration: The program's mission, goals, and expected program outcomes are written and accessible to current and prospective students, faculty, and other constituents. Program outcomes include student outcomes, faculty outcomes, and other outcomes identified by the program. The mission may relate to all nursing programs offered by the nursing unit, or specific programs may have separate missions. Program goals are clearly differentiated by level when multiple degree/certificate programs exist. Expected program outcomes may be expressed as competencies, objectives, benchmarks, or other terminology congruent with institutional and program norms.

There is a defined process for periodic review and revision of program mission, goals, and expected program outcomes that has been implemented, as appropriate.

Program Response:

Colegio Universitario de San Juan (CUSJ) is a higher education institution that sees itself as a dynamic teaching institution with a shared sense of responsibility toward learning experiences. This allows the academic and administrative community to explore new possibilities, discover alternatives, and recognize and accept other perspectives for the training and strengthening of the community of learners. Students are the center of the teaching and learning processes in the search for answers through knowledge exploration, discovery, and application. The faculty is seen as an agent of change to promote problem-solving skills through individual and group activity, and challenges that facilitate the educational process viewed as a caring and respectful endeavor focusing on knowledge, aptitudes, a sense of self, and skills.

The mission, objectives, and expected program outcomes of the Baccalaureate in Sciences of Nursing (BSN) Program of the Health-Related Sciences Department (HRDS) are accessible to current and prospective students, faculty, other constituents, and the community in general. They are posted in:

- Information booklets in the Admissions Office (VR-1)
- Health Related Sciences Department Office
- Health Related Sciences Department Manuals
  - Students' Orientation Manual – Associate Degree and Baccalaureate of Science in Nursing 2021-2024 – VR-2 and https://www.cunisanjuan.edu/divulgacion-de-informacion/normas-y-manuales/nursing-student-orientation-manual/
  - Faculty Orientation Manual – Associate Degree and Baccalaureate of Science in Nursing 2021-2024 – VR-3 and https://www.cunisanjuan.edu/divulgacion-de-informacion/normas-y-manuales/nursing-faculty-orientation-manua/
- CUSJ's webpage (http://www.cunisanjuan.edu/) where the document mentioned above can also be found.

The mission, goals, and expected program outcomes of the HRSD are congruent with the elements of CUSJ's mission, goals, and competencies. This congruence is exemplified in the BSN Program Curriculum Pathway explained later in this Key Element. The HRSD mission statement is aligned with the CUSJ

Institutional mission statement as shown in Table I.A.1.

Table I.A.1 CUSJ and the Health-Related Sciences Department Missions

CUSJ Institutional Mission	Health-Related Sciences Department Mission
The Colegio Universitario de San Juan offers transforming educational opportunities at the university and post-secondary levels. Our academic, professional, and occupational programs form professionals that are capable of interacting with the environment. We are change-enabling agents at the service of Puerto Rico's socioeconomic, technological, and cultural development.	The Health-Related Sciences Department offers transforming educational opportunities at associate and baccalaureate levels developing professionals in the nursing fields to offer optimum, holistic, and quality self-care and change-enabling agents at the service of Puerto Rico's socioeconomic, technological, and cultural development.

The salient point in the mission relates to academic offerings. The Institution's mission focuses on maintaining educational opportunities at the postsecondary and university levels that are up-to-date and responsive to a changing job market. As well as in the Institution's mission, the programs in the HRSD are designed to generate professionals that are capable of interacting with their environment and proficient at becoming responsible citizens.

The CUSJ and BSN Program's Goals are also congruent and consistent in their respective mission statements (Table I.A.2).

Table I.A.2 CUSJ and BSN Program's Goals

CUSJ Goals	BSN Program's Goals
1. Promote the holistic development of the student. 2. Provide varied, flexible, and updated programs of excellence that respond to the needs of the community. 3. Maintain an academic and professional climate that stimulates a constant desire for self-improvement among all members of the university community.	1. Develop professionals in the health field in accordance with institutional goals and objectives. 2. Transform the students through multiple dimensions (humanistic, ethical-legal, bio-psycho-social, andcultural) in the health field. 3. Train committed professionals to take leadership and act as change-enabling agents in the health field.

The BSN Program curriculum and its revisions were developed considering laws, standards, and codes that regulate the nursing practice in Puerto Rico; the Nursing Process Methodology; the program's philosophy; the AACN Baccalaureate Essentials 2008; the community of interest; and the established performance of the academic programs. These include the highly regulated healthcare agencies and hospitals with access to clinical practice, national guides, and professional standards which help to broaden nursing students' professional development. It is also grounded in individual, family, group, and community direct care experiences working with safety, effectiveness, and efficiency.

CUSJ has developed a competency-based interdisciplinary curriculum where all courses implement the institutional goals and nine (9) General Education Competencies (GEC) integrated throughout CUSJ's curriculum which allows a systematic strive for curricular cohesion since the competencies are the same for all programs, yet they are operationalized to apply to fields of expertise. All educational programs promote individual development in the following competencies: self-esteem, communication, interpersonal relations, historical and cultural background and the enrichment and promotion of

fundamental cultural, as well as ethical and esthetical, values; protection of the environment and the natural world; health; logical and quantitative reasoning; political, economic, and civic awareness and consciousness; and the importance of technology.

The CUSJ-GEC Competencies are the basis for the Nursing Programs Competencies (Table I.A.3) which in turn are the basis for the General Education Competencies, Nursing Programs Competencies with Objectives and Levels (Appendix I.A.1) that serve to guide students' development of knowledge, aptitudes, and skills.

Table I.A.3 CUSJ and Nursing Programs Competencies Alignment

CUSJ-GED Competencies	Nursing Programs Competencies
1. Nurture in the students' self-esteem, self-assurance, and self-determination.	1.1 Nurture in the student's self-esteem, self-assurance, and self-determination to apply fundamental concepts of Dorothea Orem's Self-Care Theory, other theories, and basic teaching principles in the nursing practice role in different health scenarios with an individual, family, groups, and community.
2. Develop the students' communication skills.	2.1 Develop a person with written and oral communication skills to offer humanistic and assertive care and collaborate with other disciplines to promote an optimum health state to an individual, family, groups, and community in different scenarios.
3. Develop the students' ability to establish positive interpersonal relationships in their daily life.	3.1 Develop a person that establishes efficient and effective interpersonal relationships when planning with the corresponding nursing and interprofessional team to offer a humanistic and responsible care to an individual, family, groups, and community in different health scenarios.
4. Develop the students' logical and quantitative reasoning skills.	4.1 Develop a person with quantitative and logical reasoning when planning, offering, and evaluating a nursing care in collaboration with the interprofessional team to promote care environmental y secure working scenarios for an individual, family, groups, and community.
5. Empower students to make value judgments, make decisions, and adapt to society's changes.	5.1 Prepare to make sound judgments, critical thinking and decision making to apply the nursing processes and use problem solving models when adapting to political, social, and economic changes along with organizational ethical, legal, regulatory, and political changes to offer care to an individual, family, groups, and community.
6. Develop in the learner appreciation for their cultural and historical heritage.	6.1 Develop in the student the appreciation for the nursing historic and transcultural heritage when offering a humanistic care to an individual, family, groups, and community on different life cycles.
7. Promote the appreciation, preservation and improvement of the environment, the natural world and personal health.	7.1 Cultivate appreciation, security, preservation and wellbeing of the environment, the natural world and personal health, applying the knowledge of biological and behavioral sciences, security measures of clients and of nursing when valuing human needs of an individual, family, groups, and community.
8. Develop students' willingness to assume leadership roles, fulfill their civic duties and responsibilities and contribute to the economy of their country.	8.1 Develop a person that takes leadership, professional values, abides to duty, supervise, and administers nursing care, advocates for citizen rights, and contributes with the economy of the country.
9. Develop students'	9.1 Develop students' technological knowledge with a high skill level

CUSJ-GED Competencies	Nursing Programs Competencies
technological knowledge and its applications.	and specialized and basic technical skills abilities to fulfill biological, social, spiritual, and emotional needs of the individual through health care levels in different scenarios.

BSN Program syllabi incorporate the Nursing Programs Competencies along the study period which align with the following Nursing Concepts application into courses content:

- *Clinical Judgement* – Process by which nurses make decisions based on nursing knowledge, other disciplinary knowledge, critical thinking, and clinical reasoning (Manetti, 2019).

- *Communication* – Exchange of information, thoughts, and feelings through diverse interaction mechanisms with intentionality, mutuality, partnership, trust, and presence.

- *Compassionate Care* – The way nurses relate to others as human beings involves "noticing another person's vulnerability, experiencing an emotion reaction to this, and acting in some way with them in a way that is meaningful for people" (Murray & Tuquri, 2020).

- *Cultural Sensitivity* - Sensitive to the ways in which community members' values and perceptions about healthcare differ from his or her own. Possess the needed skills to affirm diversity and embrace the values of people from different social or cultural backgrounds. It is care that meets the social and cultural needs of diverse patient populations. Cultural sensitivity is experienced when neutral language, both verbal and not verbal, is used in a way that reflects sensitivity and appreciation for the diversity of another. Cultural sensitivity may be conveyed through words, phrases, and categorizations that are intentionally avoided, especially when referring to any individual who may be interpreted as impolite or offensive (American Academy of Nursing Expert Panel on Cultural Competence, 2007)

- *Diversity, Equity, Inclusion* – Broad range of individual, population, and social constructs.

- *Ethics* – The principles that guide a person's behavior.

- *Evidence-Based Practice* – problem-solving approach to the delivery of health care that integrates the best evidence from studies and patient care data with clinician expertise and patient preferences and values (MELNYK, Fineout-Overhold, Stillwell, & Williamson, 2010).

- *Health Environments* - a nursing professional who focuses on identifying different issues in the environment that can have an impact on the health and well-being of those in the area.

- *Health Policy* – Goal-directed decision-making about health that is the result of an authorized public decision-making process (Keller & Ridenour, 2021).

- *Informatics* - Specialty that integrates nursing science with multiple information and analytical sciences to identify, define, manage, and communicate data, information, knowledge, and wisdom in nursing practice (ANA).

- *Interprofessional Teams* - Collective efforts of team members and are better accomplished through shared responsibilities, interactive planning, and collaborative decision-making. Working across healthcare professions to cooperate, collaborate, communicate, and integrate care in teams to ensure that care is continuous and reliable. The team consists of the patient, the nurse, and other healthcare providers as appropriate (IOM, 2003b).

- *Patient Care* - Displaying concern for patients by providing for or working to protect them.

- *Patient Centered Care* - Providing care to the individual in a respectful, inclusive, and responsive manner to meet the needs, values, and preferences of the individual. Includes actions to identify, respect, and care about patients' differences, values, preferences, and expressed needs; to relieve pain and suffering; coordinate continuous care; listen to, clearly inform, communicate with, and educate patients; share decision making and management; and continuously advocate disease prevention, wellness, and promotion of healthy lifestyles, including a focus on population health (IOM, 2003b).

- *Quality Improvement* - The "combined and unceasing efforts of everyone — health care professionals, patients, and their families, researchers, payers, planners, and educators — to make the changes that will lead to better patient outcomes (health), better system performance (care), and better professional development (learning)".

- *Quantitative Reasoning* - The application of mathematical, logical, and statistical skills to interpret data and produce new information. Perform mathematical calculations and carry out an analysis with clear assumptions, and finally communicate results appropriately.

- *Social Determinants of Health* – Personal, social, economic, and environmental factors that impact health creating a complex interrelationship of factors, such as the social and economic environment, the physical environment, individual characteristics, and behaviors that influence health.

BSN course evaluations are gathered through six (6) Baccalaureate of Science in Nursing Student Learning Outcomes (BSN-SLO) developed to evaluate nursing students' competencies in the acquisition of knowledge, skills, and aptitudes and attain program excellence and improvement. These are divided into:

- Basic Student Learning Outcomes (B-SLO)
- Advance Student Learning Outcomes (A-SLO)

The Basic Student Learning Outcomes are Critical Thinking, Therapeutic Interventions, and Communication and Interpersonal Relationships.

- *Critical Thinking*

Mental process that represents a systematic, structured, autoregulated, and creative way of thinking of nursing, the ability to use critical thinking and leadership to collectively influence toward goals achievement. Careful and deliberate thought centered in an objective result oriented. Capable of deciding on a variety of alternatives. Is constantly reevaluating, self-correcting, and making an effort to improve. Is founded on nursing processes principles and the scientific method evidence based. Applies logic, intuition, creativity and is based on specific knowledge, abilities, and experiences. Critical analysis and research interpretation skills to apply it to nursing practice. Collaborates with research for analysis and learning. Critical thinking is seen through three (3) perspectives: think ahead,think during the action, and think retrospectively (reflexive thinking). Leadership uses critical thinking to influence people to contribute to the transformation of the practice. Evidence-based practice is reflected on conscious, explicit, and wise systematic process to solve a problem where scientific evidence, professional expertise, values, and individual expectations integrate. Critical thinking expected result development is presented by levels and academic semesters in accordance with the courses in the curricular sequence.

- *Therapeutic Interventions*

A series of direct and indirect; dependent and independent; and collaborative actions that facilitate the health care quality in promotion, prevention, maintenance, and rehabilitation of an individual, group, family and community in different health scenarios and cultural diversity. These are founded on

knowledge; psychomotor socio-affective, secure, ethical, and legal skills. Fosters integration of practical learning experiences that allow repetition, feedback, evaluation, reflection, and experiences of low, medium, and high-fidelity simulation. The simulation activities represent the clinic management in a secure and controlled environment for the student with the purpose to achieve a wide scope through execution, ability refinement, skills, clinical judgement, decision making and competencies development.

- *Communication and Interpersonal Relationships*

Strategies of oral, written, clear, credible, and reliable communication that incorporates verbal and non-verbal abilities; positive and assertive interpersonal relationships when applying critical thinking. Uses a reciprocal process of information exchange by social skills, formality, and professional ethics. Communication and interpersonal relationships serve as a foundation to facilitate ethical-legal processes and the professional practice standards when offering a humanistic care, empathy and sensible to the individual, family, groups, and community with the interprofessional team. In leadership, communication serves to influence behavior that achieves a change. Regarding decision making skills, this is a reciprocal of information exchange by means of social skills, formality, and professional ethics. Evidence-based practice is a process where through communication focalized questions are asked; evidence search and analysis; critical valorization; decision making and performance evaluation.

B-SLO are evaluated by Faculty members through rubrics in the nursing courses which relate Nursing Programs Competencies congruency to the CUSJ-General Education Competencies (GEC) (Table I.A.4).

Table I.A.4 Congruence between CUSJ-GEC and Nursing Programs Competencies with the B-SLO

CUSJ-GEC	Nursing Programs Competencies	B-SLO
1	1.1	Communication and Interpersonal Relationships
2	2.1	
3	3.1	
4	4.1	Critical Thinking
5	5.1	
6	6.1	Critical Thinking Therapeutic Interventions
7	7.1	
8	8.1	Critical Thinking Communication and Interpersonal Relationships
9	9.1	Critical Thinking Therapeutic Interventions

To further develop these B-SLO on a higher level, Advance Student Learning Outcomes (A-SLO) are included in the student learning experiences: Decision Making, Leadership, and Problem-Solving Skills defined as follows:

- *Decision Making*

Process to develop students as capable individuals to decide from a variety of alternatives professional quality maintenance. Decision making has consequences, responsibilities and uses a reflection process in which critical and logical thinking skills are applied taking into consideration theoretical, bioethical models on growing stages and physical, psychological, and spiritual development of with the human beings with whom they interact.

- *Leadership*

Art or process to influence people to encourage them on group goals compliance. The will to work with

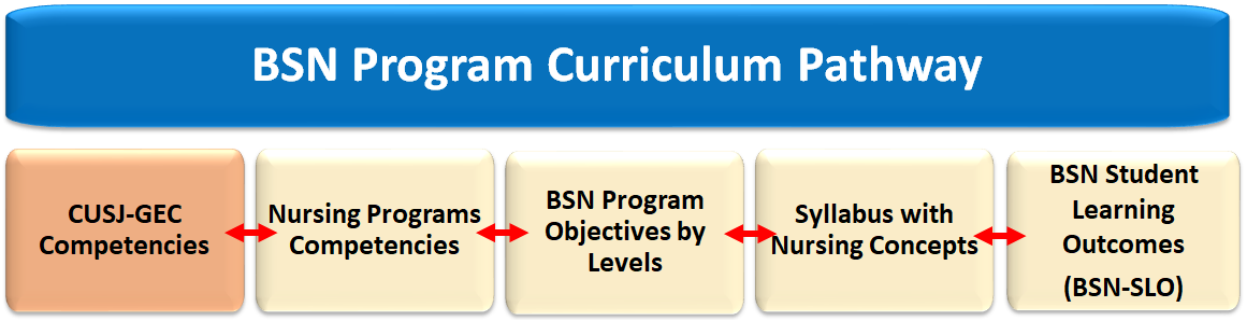
confidence, intensity on the professional execution and honesty. The ability to influence a group to modify behaviors to achieve a change and transformation of the professional practice. The use of a variety of leadership styles in the professional role to lead, guide, orient and conduct objective achievement. Ability to reflect respect for knowledge, expertise, and peer and other health professionals' contributions.

- *Problem Solving*

Systematic, conscient, explicit, and sensible process that integrates strategies to solve situations in the nursing profession. The student developed an inquisitive and flexible way of thinking where care priorities are established in accordance with the patient's identified needs. Short- and long-term goals are set to offer quality care among the different practice areas according to the needs and identified resources. Patient and family participation is incorporated to solve or make changes in situations around a problem. Results are evaluated and shared with the interprofessional team, patient, and family considering privacy and information confidentiality.

The BSN Program Curricular Pathway summarizes the congruence between CUSJ-GEC Competencies and the BSN Program regarding the BSN-SLO (Graphic I.A.1).

Graphic I.A.1 BSN Program Curricular Pathway



At the end of students' academic experience, it is expected that they will be able to execute as stated in the Graduate Profile to transition to the labor force in an effective manner:

1. Provide direct nursing care to individuals, families, groups, and the community in different health scenarios along patients' life cycles.
2. Apply the principles and concepts of Dorothea Orem's Self-Care Theory and other nursing theories to guide nursing practice especially to promote self-care to individuals, families, groups, and the community.
3. Integrate and synthesize general competencies and of the work applying the nursing process, biological sciences, behavioral sciences, art, and technology considering cultural diversity, humanistic and spiritual care while working with individuals, families, groups, and the community in different scenarios.
4. Uses the nursing process to offer individualized care in the different growing stages of human development in the health-disease continuum.
5. Responsible to design, plan, implement, delegate, and evaluate the intervention of the nursing practice.
6. Apply logic and quantitative reasoning skills to plan and evaluate the health care offered.
7. Uses critical thinking to make decisions, establish priorities and make a judgement when developing, implanting, and evaluating the nursing intervention.
8. Apply concepts of the practice based on scientific evidence and evaluate research findings to make decisions in the professional practice guided to improve the patient's, family, groups, and community's findings.
9. Design educational plans to promote the well-being, prevent and maintain the health of the

individuals, families, groups, and the community.
10. Incorporate effective oral and written communication techniques, leadership, negotiation, and conflict resolution to produce positive working relationships.
11. Integrate into collaborative and interprofessional working teams to offer and advocate for quality care and security services.
12. Demonstrate ethical and legal responsibilities in compliance with professional standards, code of ethics, and the law that regulates the nursing practice.
13. Support through logical, ethical, and leadership reasoning; social, environmental, and technological movements that impact the health of the individuals, families, groups, and the community.

Faculty outcomes are defined and explained in key elements I.D, II.G, IV.G, and IV.H.

The congruency of the mission, goals, and expected outcomes of the program complies with CUSJ's Strategic Plan 2021-2023 (VR-4) which contains four (4) pillars that shape the Institution's direction:

- Pilar I - Institutional Quality and Effectiveness
- Pilar II – Academic Affairs
- Pilar III – Student Affairs
- Pilar IV – Fiscal Administration and Strengthening

The HRSD periodic reviews and revisions of its program mission, goals, and expected program outcomes are every five years or as necessary (Appendix I.A.2 - HRSD Systematic Evaluation Plan). These revisions are based on the analysis of the academic and administrative processes. The HRSD Director and Coordinator hold meetings with the faculty at the beginning of every semester to present information regarding the teaching-learning processes like syllabi and students guide; and BSN-SLO; administrative processes to support student learning; nursing disciplines' teams to work with curriculum; clinical practice experiences in multiples scenarios; committee work distribution; and accreditation processes updates; among other issues, which leads to the analysis of program mission, goals, and expected program outcomes compliance. They are also based on the Community of Interest's recommendations, and the analysis of the changes in the Puerto Rico Professional Nursing Standards; the Law Num. 254 of 2015 that regulates the Nursing Practice in Puerto Rico; the Code of Ethics in Nursing, any new regulation on the Nursing Profession and accreditation processes.

I-B. The mission, goals, and expected program outcomes are consistent with relevant professional nursing standards and guidelines for the preparation of nursing professionals.

Elaboration: The program identifies the professional nursing standards and guidelines it uses. CCNE requires, as appropriate, the following professional nursing standards and guidelines:
- The Essentials of Baccalaureate Education for Professional Nursing Practice *[American Association of Colleges of Nursing (AACN), 2008];*
- The Essentials of Master's Education in Nursing *(AACN, 2011);*
- The Essentials of Doctoral Education for Advanced Nursing Practice *(AACN, 2006); and*
- Criteria for Evaluation of Nurse Practitioner Programs *[National Task Force on Quality Nurse Practitioner Education (NTF), 2016].*

A program may select additional standards and guidelines that are current and relevant to program offerings.

A program preparing students for certification incorporates professional standards and guidelines appropriate to the role/area of education.

An APRN education program (degree or certificate) prepares students for one of the four APRN roles and in at least one population focus, in accordance with the Consensus Model for APRN Regulation: Licensure, Accreditation, Certification and Education *(July 2008)*.

Program Response:

The mission, objectives, and expected program outcomes of the BSN Program in the HRSD are consistent and reflect professional nursing standards and guidelines for the preparation of nursing professionals. These documents are:

- Health Insurance Portability and Accountability Act (HIPAA)
- Puerto Rico laws and policies
  - Law 254 of December 31, 2015 – Regulation of the Nursing Profession in Puerto Rico
  - Law #82 Puerto Rico College of Nursing Professionals
- Healthy People 2030
- Professional Nursing Standards
- OSHA Safety Guidelines
- Patient Rights
- Essentials of Baccalaureate Education for Professional Nursing Practice (AACN) 2008
- American Disabilities Act (ADA)
- American Nurses Association (ANA)
- Quality and Safety Educationfor Nurses (QSEN)
- National Patient Safety Goals (Joint Commission) 2023

The consistency of the mission, goals, and expected program outcomes are incorporated into the BSN curriculum throughout the BSN courses in the General Education Competencies, Nursing Programs Competencies with Objectives and Levels (Appendix I.A.1). An example of two or more courses that include objectives that reflect professional nursing standards and guidelines for the preparation of nursing professionals is presented in Table I.B.1 and detailed in Key Element III.B Table III.B.1.

Table I.B.1 Example of BSN Courses with an Objective that Reflects the Professional Nursing Standards and Guidelines for the Preparation of Nursing Professionals

Professional Nursing Standards and Guidelines for the Preparation of Nursing Professionals	Example of BSN Course with an Objective that Reflects the Standards and Guidelines
Health Insurance Portability and Accountability Act (HIPAA)	ENFE 3004 – Bioethics
	ENFE 4101 – Research in Nursing
Law 254 of December 31, 2015 – Regulation of the Nursing Profession in Puerto Rico	ENFE 3006 – Critical Care
	ENFE 3004 – Bioethics
Law #82 Puerto Rico College of Nursing Professionals	ENFE 3205 – Core in Nursing
Healthy People 2030	ENFE 3008 – Gerontology
	ENFE 4102 – Family and Community Selfcare
Professional Nursing Standards (CPEPR)	ENFE 3009 – Human Sexuality
	ENFE 4207 – Nursing Process and Pathophysiology
Safety Guidelines (OSHA)	ENFE 3105 – Nursing Process and Physical Examination
	ENFE 4102 – Family and Community Selfcare
	ENFE 4208 - Administration, Leadership, Management, and Nursing Practice
Patient's Rights	ENFE 3104 - Theory, Models y Roles in Nursing
AACN Essentials of Baccalaureate	ENFE 4101 – Research in Nursing

Professional Nursing Standards and Guidelines for the Preparation of Nursing Professionals	Example of BSN Course with an Objective that Reflects the Standards and Guidelines
Nursing Education 2008	ENFE 3104 - Theory, Models and Roles in Nursing
	ENFE 4102 – Family and Community Selfcare
ADA Law	ENFE 3004 – Bioethics
	ENFE 4101 – Research in Nursing
American Nurses Association (ANA)	ENFE 4102 – Family and Community Selfcare
	ENFE 4208 - Administration, Leadership, Management and Nursing Practice
Quality and Safety Educationfor Nurses (QSEN)	ENFE 4208 - Administration, Leadership, Management and Nursing Practice
National Patient Safety Goals (Joint Commission)	ENFE 3105 – Nursing Process and Physical Examination
	ENFE 4208 - Administration, Leadership, Management and Nursing Practice

The aforementioned professional nursing standards and guidelines integrated into the BSN curriculum to prepare BSN nursing students provides a strong foundation for the educational opportunities that transform their view of the professional field in humanistic, ethical-legal, bio-psycho-social, and cultural dimensions on the health field and foster the professional commitment to take leadership and act as change-enabling agents, consistent with the mission, goals, and expected program outcomes.

I-C. The mission, goals, and expected program outcomes reflect the needs and expectations of the community of interest.

Elaboration: The community of interest is defined by the nursing unit. The needs and expectations of the community of interest are considered in the periodic review of the mission, goals, and expected program outcomes.

Program Response:

HRSD has constituted a Community of Interest composed of clinicians, nursing hospital directors and supervisors, community members, faculty, students, and alumni. They meet once a year or as necessary with the Department's administrative personnel. The purpose of the HRSD's Community of Interest is:

- provide a general evaluation and recommendation in ways to impact the BSN Program on new tendencies;
- improve the quality of the curriculum and the service it provides in accordance with policy and regulations of health services;
- analyze clinical and technological changes in the affiliated agencies and the community;
- dialogue with students and alumni on their academic and professional experiences, respectively.

The responsibilities of the members of the Community of Interest are presented in Table I.C.1.

Table I.C.1 Community of Interest Members' Responsibilities

Community of Interest	Responsibilities
Colegio Universitario de San Juan	Develop analysis and decision-making processes.
Advisory Community	Provide feedback and advice for the decision-making process about technology, curriculum, and new trends in health.
Students	Provide information through dialogue, course evaluation, or satisfaction

	questionnaire.
Alumni	Provide information through dialogue or an alumni questionnaire.
Faculty	Review course syllabus, BSN-SLO, improvement plans.
Clinical Agencies and Practical Setting	Dialogue or comply with the management survey.
Puerto Rico College of Nursing Professionals	Provides support to comply with Nursing Standards, National Guides, Ethics Code and Law.

This year HRSD met with the Community of Interest on March 14 and August 3, 2023 (VR-5). In the first meeting, the following issues were presented and discussed: CUSJ Profile (from mission statement to BSN courses), CUSJ in the COVID-19 period, CUSJ Accreditations, BSN-SLO, and Program Outcomes. Their recommendation was to deepen the analysis of outcomes and statistical results (VR-6). HRSD expressed the importance of decision-making processes for the overall procedures taking place throughout the past year. In the second meeting, the CUSJ Self Study was presented and discussed. Their recommendation was to review the outcomes to ensure uniformity in the information and detail the information in the key elements related to outcomes. In both instances, their recommendations were discussed, accepted, and incorporated into HRSD document analysis and are further explained in Key Element III.I Table III.I.6.

I-D. The nursing unit's expectations for faculty are written and communicated to the faculty and are congruent with institutional expectations.

Elaboration: Expectations for faculty are congruent with those of the parent institution. The nursing unit's expectations for faculty, whether in teaching, scholarship, service, practice, or other areas, may vary for different groups of faculty (full-time, part-time, adjunct, tenured, non-tenured, or other).

Program Response:

Faculty expectations are written in the *Faculty Orientation Manual - Associate Degree and Baccalaureate of Science in Nursing 2021-2024* and communicated to the faculty to foster and enhance the institutional expectation of students' holistic development, offering programs of excellence, and maintaining an academic and professional climate that stimulates a constant desire for self-improvement among all members of the university community.

The HRSD Director and Coordinator prepare the bases of the faculty expectations which are written, presented, communicated, and discussed at the faculty meetings at the beginning of every semester, course leader team meetings, HRSD Director individual faculty meetings, or depending on the Program's needs. These expectations are related to Faculty Teaching; Faculty Scholarship of Teaching; and Faculty Service. Faculty outcome results provide valuable information to promote ongoing program improvement.

- Faculty teaching is regarded as the experiences to transfer knowledge, advise, mentor, support, and participate in learning focused activities. It includes academic fields of knowledge, professional practice, and leadership positions.

- Faculty scholarship of teaching refers to the creative development, application, integration, transformation, and systematic advancement of knowledge in the nursing field in an educational learning space. It encompasses participation in professional organizations / events; development of teaching materials; curriculum development, revision, and assessment; and professional education credits.

- Faculty service is the action of committing time or resources to community or extracurricular service by election, by invitation or by volunteering as a member or a leader at the university, local community, or an external organization for a meaningful contribution through the application of

health fields of knowledge. It includes participation in community organizations, health fairs, seminars, workshops, joint ventures, and clinical practice.

These are identified to improve the faculty performance and impact directly on BSN-SLO. These meetings provide the faculty with the opportunity to express their questions, impressions, and suggestions about the expectations and to participate in the decision-making processes. The expectations are geared toward academic instruction in aspects of reflective teaching, student learning, and academic collaboration. Faculty meetings present a broad and inclusive analysis of BSN Program syllabi, rubrics, cumulative student outcomes, and new ways to improve the students' learning experiences relating it to HRSD expectations considering students and program outcomes.

Faculty meetings were held on August 16, 2022, February 4, and August 2, 2023 (VR-7). On August 16, 2022, a virtual faculty meeting was held to target specific academic aspects in teaching and student learning results analyzed by the HRSD Curriculum Committee: initial analysis on the spheres, domains, and concepts from the AACN Essentials; course syllabi revision; BSN-SLO course rubrics, faculty outcomes; clinical experiences analysis; HRDS student files; and next steps. On February 4, 2023, the faculty meeting was focused on the academic program alignment, HRSD Conceptual Framework; evaluation criteria alignment to the BSN-SLO; faculty-to-student ratio; faculty outcomes preliminary data; and reflection on CUSJ 2018 CCNE Self-Study areas of improvement. This collective effort between the HRSD and the faculty is congruent with CUSJ goals as it helps "maintain an academic and professional climate that stimulates a constant desire for self-improvement among all. It is also congruent with the BSN Program's Goals as it improves the faculty's performance and as they are being constantly trained to be committed professionals to take leadership and act as change-enabling agents in the students' academic experience. On August 2, 2023, a presentation on the CUSJ Self-Study was made to explain the standards and the overall results of the BSN-SLO, Faculty Evaluations, and Satisfaction Questionnaires. The faculty developed a deeper understanding of how the past year's effort during the COVID-19 Pandemic period allowed the HRSD and BSN Program to reach and surpass the expected levels of achievement.

The other two means of communicating faculty expectations at smaller gatherings are the Course Leader Team meetings and HRSD Director individual faculty meetings. Course Leader Team meetings work directly with the course faculty in dialogues regarding student learning while identifying processes to improve the course and clinical experience environment further discussed in Table III.G.2. HRSD Director Individual Faculty Meetings allow personalized communication between the Director and a faculty member to address issues regarding their performance, required documents, continuing education credits, and general aspects of the teaching and learning process.

I-E. Faculty and students participate in program governance.

Elaboration: Roles of the faculty and students in the governance of the program, including those involved in distance education, are clearly defined and promote participation. Nursing faculty are involved in the development, review, and revision of academic program policies.

Program Response:

Ordinance Number 3, series 2022-2023 known as the Code of Colegio Universitario de San Juan establishes the legal basis of CUSJ governance structure in subchapter II titled Board of Trustees. Article 2.201 expresses that CUSJ governance is executed by the Board of Trustees which is composed of nine (9) members: seven (7) members are appointed by the Major of San Juan and confirmed by the Municipal Assembly; one (1) member is elected as a faculty representative and one (1) member is are elected as a student representative. The latter ones are elected in accordance with the CUSJ Tenure System Regulations, and Student Regulations, respectively, both approved in May 2016.

As included in article 2.206 of the Code, the major responsibilities of the Board of Trustees are: examine, revise, and approve the CUSJ's Strategic Plan and budget; evaluate and approve any bylaw that has

passed through the evaluation process by the rightful constituents; authorize the creation and modification of programs of study; evaluate and approve candidates for Chancellor and corresponding Deans. Both the faculty and student representative are elected for a year and can be consecutively elected for a second year. In the case of the faculty representative, they must be at least five (5) years in the tenure track system. Student representatives must be at least 18 years of age, must have a 3.0 general point average, and cannot be new or graduate candidate students. The Board of Trustees includes in their regulations that the faculty and student representatives are assigned to the Programs, Accreditation, and Academic Affairs Committee or the Student and Activities Committees. Also, the student representative is part of the CUSJ Student Council as expressed in CUSJ Student Regulation.

Besides the Board of Trustees, there are other boards and committees that the faculty and students are members in which academic and administrative decisions at the Institutional and program level affect directly the academic departments and the programs ascribed to that department:

- Academic Board

Deliberating and consulting forum for all academic endeavors related to documents, regulations, designations, rise, sabbaticals, license without wage, study license, among others. Integrated by the Chancellor; Deans of Academic, Administrative, and Student Affairs; Academic Department Directors; Access to Information Center Director; two (2) faculty representatives; and a student representative.

- Discipline Board

Deliberating and consulting forum to evaluate and determine solutions to a formal accusation as a result of a complaint presented to the Dean of Student Affairs, found to have cause for which a major sanction can be determined. Integrated by the Dean of Student Affairs, two (2) faculty representatives, a Student Council representative, and a representative for the administrative personnel designated by the Chancellor.

- Faculty Evaluation Institutional Committee

Deliberating and advising body of the Dean of Academic Affairs that evaluates the faculty for formative and summative purposes to achieve and maintain academic excellence.

- Technological Infrastructure Sub-Committee

Deliberating and consulting forum to plan, evaluate, and recommend the technological infrastructure of the Institution. Integrated by the Chancellor;Informatics and Telecommunication Center Director; Access to Information Center Director; and representatives from the academic departments, and from the Deanship of Academic, Administrative and Student Affairs.

- Institutional Curriculum Committee

Deliberating and consulting forum of the Deanship of Academic Affairs to evaluate curricular changes to existing programs and new proposed academic offerings. Integrated by the Dean of Academic Affairs, Academic Departments Directors, Access to Information Center Director, Registrar, and a faculty representative.

- Community of Interest

Providing a general evaluation and recommendation in ways to impact the BSN Program on new tendencies to improve the quality of the curriculum and the service it provides in accordance with policy and regulations of health services; analyzing clinical and technological changes on the affiliated agencies and the community; participating in dialogues with students and alumni on their academic and professional experiences, respectfully.

I-F. Academic policies of the parent institution and the nursing program are congruent and support achievement of the mission, goals, and expected program outcomes. These policies are:

- **fair and equitable;**
- **published and accessible; and**
- **reviewed and revised as necessary to foster program improvement.**

Elaboration: Academic policies include, but are not limited to, those related to student recruitment, admission, retention, and progression. Policies are written and communicated to relevant constituencies. Policies are implemented consistently. Differences between the nursing program policies and those of the parent institution are identified and support achievement of the program's mission, goals, and expected outcomes. A defined process exists by which policies are regularly reviewed. Policy review occurs, and revisions are made as needed.

Program Response:

CUSJ academic policies establish uniform procedures to achieve fair and equitable processes in the classroom, program, and institution settings. CUSJ developed or created policies like:

- CUSJ Tenure System Regulations – https://www.cunisanjuan.edu/divulgacion-de-informacion/normas-y-manuales/ternure-sytem-regulations/
- Student Regulations - https://www.cunisanjuan.edu/divulgacion-de-informacion/politicas-y-reglamentos/student-regulations/
- CUSJ General Catalog 2021-2023 - https://www.cunisanjuan.edu/divulgacion-de-informacion/general-catalog/

Others are mandated by law like FERPA Law or Financial Aid related policies. There are also temporary issues that generate a mandate to create protocols or documents as in the Cares Act during the COVID-19 Pandemic. Policies review and revisions may vary depending on the need, the mandated requirement, or in a timely fashion.

The Chancellor and Deans oversee that policies are written, publicly accessible, non-discriminatory, consistently applied, and reviewed. The Informatics and Telecommunications Center play an important role in the dissemination through the student and faculty portal; the administrative network or through a program called Regroup that sends the information directly to CUSJ constituents' emails. The main place in which policies are accessed is CUSJ webpage (http://www.cunisanjuan.edu/). It has a browser tab titled Information Dissemination (Divulgación de Información in Spanish) in compliance with the Student Right to Know Act where the policies for students, faculty, administrative personnel, community, and people that want to find out information about CUSJ are published (https://www.cunisanjuan.edu/divulgacion-de-informacion/) (Table I.F.1).

Table I.F.1 CUSJ's Webpage Information Dissemination Browser Tab Documents

<table>
<tr><th colspan="3">POLICIES IN THE INFORMATION DISSEMINATION BROWSER TAB ON CUSJ'S WEBPAGE</th></tr>
<tr><td colspan="3">• General Catalog</td></tr>
<tr><td colspan="3">• Service to Veterans Office - General Information of Rights and Aids</td></tr>
<tr><td colspan="3">• Non-Discrimination Statement</td></tr>
<tr><td>Achievement, Statistics, and Cost</td><td>Student Achievements
• Degrees Awarded by Academic Program
• Graduation Rate (by cohort)
• Retention Rate
• Retention by Academic Programs</td><td>Institutional Statistics Summary
• Enrollment Tendencies Enrollment by Academic Programs
• Enrollment by Academic Program</td></tr>
</table>

POLICIES IN THE INFORMATION DISSEMINATION BROWSER TAB ON CUSJ'S WEBPAGE		
	• Nursing Students Achievement Outcomes Data	
	Tuition and Financial Aids • Credits and Fees • Financial Aids	• Federal Student Aid (FAFSA) • Net Price Calculator • How to Prepare a Budget
Norms and Manuals	• University Life Process Manual • Academic Progress Manual • Nursing Faculty Manual • Nursing Students Manual • CUSJ Tenure System Regulations	• Service Animal Protocol • Academic Progress Manual (in English) • Law to Prohibit the Use of the Social Security Number • Parking Norms • Title IX Compliance Manual
Policies and Regulations	• Student Regulations • FERPA Law • Reasonable Modification Manual • Copyright Law and Plagiarism • Netiquette: Ethics in the Use of Technology	• Use and Abuse of Illegal Drugs and Alcohol • Regulations on the Practice of Smoking in Public and Private Places • Student Academic Progress Policy
Transfer to UPPR	• Information on Transfer Processes for Science and Technology Students	• Students to Continue to Four-year Programs in Engineering
Security and Cleary Act Protocol	• Sexual Harassment Institutional Protocol • Domestic Violence Management Protocol	• Suicide Prevention Protocol • Delinquency Acts 2012-2017
• Institutional Policies Disclosure Form		
• Description of CUSJ Services		
• 2021-2023 CUSJ Strategic Plan		
• Institutional Security Plan for COVID-19		
• Coronavirus Prevention Protocol		
• Care Act Funds Report		
• Security Protocol and Cleary Act		

Other means of communication when applicable are placing documents in the Access to Information Center for all to read and comment on; students' orientation process; student and faculty portals; bulletin boards; course syllabi; Institutional Counselor's Office; Academic Departments; or visiting the classrooms. Several of the above-mentioned documents include and emphasize diverse policies included in documents like regulations, academic manuals, and promotional booklets including the pages where these can be found (Table I.F.2).

Table I.F.2 Students' Policies and Their Respective Documentation

POLICY OR DOCUMENT	CUSJ General Catalog 2021-2023*	Student Regulations 2016**	Nursing Students Orientation Manual 2021-2024***	Nursing Faculty Orientation Manual 2021-2024****	Course Syllabi	Academic Calendar
Academic Progress	49		15	21		
American Disabilities Act (ADA)	52		18	24	X	
Attendance	31	11	14	20	X	X
Copyright Law		13	18	24	X	
Counseling (Academic, Vocational and Personal)	52	41	13	11		
Domestic Violence	3	9, 12-14, 24	17	23		
Drug and Alcohol Abuse		12, 34	17	23		
Financial Aid	49	33				X
Graduation Requirements	46					X
Grievance	52		18	24		
Harassment	3	34	17	23		
Non-Discrimination	3	9, 12-13, 24	16	22		
Plagiarism		34-35	18	24	X	
Records Privacy (FERPA)	27	11, 15	17	23		
Retention	53		15	21		
Student Evaluation/Grading	46		15	21	X	
Student Right to Know Act		11	16	22		
Student Selection and Admission	18-20 24-25	15	13	19		X
Suspension / Probation		36-38, 44-46	18	24		
Transfer Course Validation	20					
Withdrawals	44		14-15	20-21	X	X

Source:
* https://www.cunisanjuan.edu/divulgacion-de-informacion/general-catalog/

** https://www.cunisanjuan.edu/divulgacion-de-informacion/politicas-y-reglamentos/student-regulations/

*** https://www.cunisanjuan.edu/divulgacion-de-informacion/normas-y-manuales/nursing-student-orientation-manual/

**** https://www.cunisanjuan.edu/divulgacion-de-informacion/normas-y-manuales/nursing-faculty-orientation-manua/

Nevertheless, by the nature of the practice of the nursing profession, the BSN Program has additional admissions policies that are published in the General Catalog 2021-2023 on pages 24-25 -

(https://www.cunisanjuan.edu/divulgacion-de-informacion/general-catalog/) and are presented in Table I.F.3.

Table I.F.3 HRSD Policies and Rationale

HRSD POLICIES	RATIONALE
Interview with the Nursing Faculty	Gather additional information to assist in candidate selection.
Negative Criminal Background Certificate	Security. Students with a negative criminal record in the last five (5) years cannot take the licensure examination to obtain the RN license.
Health Certificate	Ensure that students are medically fit to enter a higher education program.
Evidence of COVID-19, Influenza, Hepatitis B, and Varicella vaccination. If more than 10 years have passed on the Hepatitis B and Varicella vaccination, titer test labs are requested.	Ensure that students are in good health, to promote infection control and patient security as required by collaborating agencies for students' clinical experience and in compliance with CDC, OSHA, and Health Department requirements.
CPR Certificate	Patient security. Collaborating agencies require that students be trained in CPR prior to participating in the clinical experience.
Sex Offender Registry (PR Law No. 300 Certificate)	Patient security. Collaborating agencies prohibit students included in the registry of convicted persons for sexual offenses and abuse against children and elderly from entering the clinical area.
HIPPA Law Certificate	Patient privacy and security. Required by collaborating agencies for students 'clinical experience.
Particle Aspiration Certificate	Infection control. Required at some collaborating agencies for students' clinical experience.
Nose Culture	Required at some hospitals to participate in the clinical experience.
Public Policy # 284 - Public Policy # 284 - Administrative Order of the Secretary of Health to Establish Public Policy Regarding the Use of Clothing and the Maintenance of Long or Artificial Nails by Health Professionals	Public policy about the use of jewelry and artificial nails among healthcare professionals ensures prevention of infection in healthcare facilities and vulnerable patients.
Student Identification	Security and to identify the person as being a student at CUSJ. Required by collaborating agencies for student's clinical experience.
Hospital Orientation Attendance	Compulsory attendance to the agency's orientation is a requirement for the nursing practice in healthcare and community facilities.

Source: Health Related Sciences Department

The revision process starts at every institutional office, department, or deanship where documents can be updated. When institutional policies, like the Student Regulations, are revised, the following steps are taken (Table I.F.4):

Table I.F.4 Recommendation or Amendment Submission for an Institutional Policy

Analysis, Discussion, and Evaluation	Not Accepted	Accepted
A recommendation or amendment is written and taken to the Dean of Student Affairs (Student Regulation Article 1.4.1)	The process ends.	The corresponding constituents are summoned to an assembly to be discussed and voted upon.
Assembly (Student or Faculty)	The process ends.	Presented at the Academic Board Meeting.
Academic Board	The process ends.	Presented to the Board of Trustees.
Board of Trustees	The process ends.	The recommendation or amendment is incorporated in the corresponding document and disclosed to the corresponding constituents.

If the policy is mandated by law, like Title IX, a document is written and discussed with the corresponding Deanship and then discussed with the Chancellor for final approval. If the policy is for an academic, student, or administrative process, it will be discussed in the corresponding deanship or office for analysis, discussion, and evaluation for a final decision.

CUSJ and HRSD policies congruency is exemplified by the development, review, dissemination, and additional documents requirements to foster BSN Program mission, goals, and expected program outcomes achievement.

I-G. The program defines and reviews formal complaints according to established policies.

Elaboration: The program defines what constitutes a formal complaint and maintains a record of formal complaints received. The program's definition of formal complaints includes, at a minimum, student complaints. The program's definition of formal complaints and the procedures for filing a complaint are communicated to relevant constituencies.

Program Response:

CUSJ and HRSD have established a policy regarding formal complaints included in the CUSJ Students Regulations, article 4.3, in the Students Orientation Manual – Associate Degree and Baccalaureate of Science in Nursing 2021-2024 (page 18), and in the Faculty Orientation Manual – Associate Degree and Baccalaureate of Science in Nursing 2021-2024 (page 24). These provide the students and faculty with a guide where they can request the review of a complaint. These are communicated to both prospective students and faculty during the interview process.

As one of the BSN-SLO of the HRSD, the strong belief in effective Communication and Interpersonal Relationships facilitates informed decision-making and effective problem-solving results. Mediative processes are the main goal in the management of complaints. A complaint is defined as the process to present a written document of unaccepted conduct by another student which can be brought to the HRSD Director or the Dean of Student Affairs that includes a description of the situation, the information of the students involved, and general information when the complaint was filed. Complaints can be of an academic or misconduct nature for which the Deanship of Academic Affairs and Student Affairs, respectively, are consulted. The process regarding a complaint that is academic in nature is written in aforementioned HRSD manuals:

- Request a meeting with the person involved in the situation.
- Meet in a private initial dialogue in the agreed place.

- If the situation is clarified in the initial dialogue, it will be concluded.
- If the student is not satisfied, they may request in writing that the Department's management intervene.
- If it is not resolved with the professor and with the direction of the Department, the student can submit a formal complaint in writing to the Dean of Student or Academic Affairs.
- The address of the Department may be required at the meeting where the situation will be presented to the Dean of Student or Academic Affairs.
- The final agreements and resolutions will be kept in the Department.

The process regarding a complaint that is misconduct in nature is written in the Student Regulations and establishes in article 4.3 the following:

- Written complaints are presented to the Dean of Student Affairs in a period no longer than five (5) calendar days from the moment of the incident.
- The Dean of Student Affairs or the authorized representative, usually the Institutional Counsellor, analyzes the situation in a period no longer than five (5) calendar days from the moment the complaint was handed in to determine if the facts and cause justify an action to continue with the process.
- All persons involved in the incident are cited for an initial individual interview to give a written and oral version. If at this step of the process, the Dean and the Institutional Counsellor determine there is no cause to continue, the complaint is filed. If the determination is that there is cause, depending on the gravity of the incident, a sanction can be given, or the Discipline Board can be convened.
- If the student understands that the determination of this Board is not just, the student can solicit an appeal with the Chancellor who with the revision of all the information and previous deliberations makes a final determination. The evidence of resolution is kept in the Institutional Counselor records and in the HRSD Director's Office.

I-H. Documents and publications are accurate. A process is used to notify constituents about changes in documents and publications.

Elaboration: References to the program's offerings, outcomes, accreditation/approval status, academic calendar, recruitment and admission policies, grading policies, degree/certificate completion requirements, tuition, and fees are accurate. Information regarding licensure and/or certification examinations for which graduates will be eligible is accurate. For APRN education programs, transcripts or other official documentation specify the APRN role and population focus of the graduate.[1,2]

If a program chooses to publicly disclose its CCNE accreditation status, the program uses <u>either</u> of the following statements:

"The (baccalaureate degree program in nursing/master's degree program in nursing/Doctor of Nursing Practice program and/or post-graduate APRN certificate program) at (institution) is accredited by the Commission on Collegiate Nursing Education (http://www.ccneaccreditation.org)."

"The (baccalaureate degree program in nursing/master's degree program in nursing/Doctor of Nursing Practice program and/or post-graduate APRN certificate program) at

[1] *Consensus Model for APRN Regulation: Licensure, Accreditation, Certification and Education* (July 2008).

[2] *Criteria for Evaluation of Nurse Practitioner Programs* (National Task Force on Quality Nurse Practitioner Education, 2016).

(institution) is accredited by the Commission on Collegiate Nursing Education, 655 K Street NW, Suite 750, Washington, DC 20001, 202-887-6791."

Program Response:

Nursing students, faculty, and the general community can access accurate CUSJ documents and publications included in CUSJ webpage, CUSJ General Catalog 2021-2023, and the Students Orientation Manual – Associate Degree and Baccalaureate of Science in Nursing 2021-2024, and in the Faculty Orientation Manual – Associate Degree and Baccalaureate of Science in Nursing 2021-2024 regarding information about the program's offerings, outcomes, accreditation/approval status, academic calendar, recruitment and admission policies, grading policies, degree/certificate completion requirements, and tuition and fees, among others. These may appear in more than one document and publication giving multiple opportunities to come into knowledge to properly be oriented or make decisions. The link to the information or the document in which the information might be found regarding each of the aforementioned will be presented below:

- CUSJ webpage - https://www.cunisanjuan.edu/
  - Program's offerings - https://www.cunisanjuan.edu/academico/bachilleratos/enfermeria/
  - Outcomes
    - https://www.cunisanjuan.edu/divulgacion-de-informacion/normas-y-manuales/nursing-student-orientation-manual/
    - https://www.cunisanjuan.edu/divulgacion-de-informacion/normas-y-manuales/nursing-faculty-orientation-manua/
  - Accreditation/approval status - https://www.cunisanjuan.edu/licencias-y-acreditaciones/
  - Academic calendar - https://www.cunisanjuan.edu/calendario-academico/
  - Recruitment and admission policies - https://www.cunisanjuan.edu/requisitos/
  - Tuition and fees - https://www.cunisanjuan.edu/costos-de-estudio/
- CUSJ General Catalog 2021-2023 - https://www.cunisanjuan.edu/divulgacion-de-informacion/general-catalog/
  - Program's offerings
  - Recruitment and admission policies
  - Grading policies
  - Degree/certificate completion requirements
  - Tuition and fees
- Nursing Student Orientations Manual regarding - https://www.cunisanjuan.edu/divulgacion-de-informacion/normas-y-manuales/nursing-student-orientation-manual/
  - Program's offerings
  - Outcomes
  - Recruitment and admission policies
  - Grading policies
  - Degree/certificate completion requirements
- Nursing Faculty Orientations Manual regarding - https://www.cunisanjuan.edu/divulgacion-de-informacion/normas-y-manuales/nursing-faculty-orientation-manua/
  - Program's offerings
  - Outcomes
  - Recruitment and admission policies
  - Grading policies
  - Degree/certificate completion requirements

The most important asset to notify constituents about changes in documents and publications is the Informatics and Telecommunications Center (ITC) which plays an important role in the dissemination through the student and faculty portal; the administrative network or through a program called Regroup that sends the information directly to CUSJ constituents' emails. The process is as follows:

- The evaluation of information accuracy is discussed with the Dean of Academic, Administrative, and Student Affairs, and Chancellor to identify the forum in which it will be first disseminated and where it will be after dissemination.
- In addition to all Dean, the Directors of the Planning, Institutional Research and External Resources Office; the Informatics and Telecommunication Center; and the Access to Information Center are called to meetings to convey and evaluate the accuracy of the information. This helps to establish best practices to effectively disseminate accurate information to all constituents.
- Regarding specifically nursing students, the orientation process is another way that provides information about the Institutional Policies as well as the Department Policies which are constantly revised by the faculty and Department's administrative personnel according to laws and regulations of the nursing practice in Puerto Rico.

Standard I: Program Quality: Mission and Governance
Strengths and Areas of Improvement

Areas of Strengths:

1. Colegio Universitario de San Juan (CUSJ) is the first and only higher education institution developed by a municipal government in Puerto Rico.
2. The BSN Program is congruent with the mission, goals, and competencies of CUSJ.
3. CUSJ and the Health-Related Sciences Department's mission, goals, and objectives are accessible, published, and available for students, faculty, administrative personnel, and the community on the webpage, documents, and Department Office.
4. The BSN Program Curriculum Pathway shows a clear alignment from the program mission and goals to the BSN Student Learning Outcomes.
5. Relevant professional nursing standards and guidelines are incorporated into the BSN courses.
6. The Faculty Expectations are presented and discussed with the faculty.
7. The Community of Interest meets once a year to analyze the effectiveness, advise, and contribute to new tendencies regarding the National Guides and Nursing Practice Standards.
8. The HRSD has additional admission requirements which increase the program competitiveness to engage in success supported by laws and requirements of accrediting agencies.
9. The complaint policy is included in the Students Regulations and in the Orientation Manual for both students and faculty and is accessible on the Webpage.

Areas of Improvement (Appendix A – Plan of action for the areas to improve):

1. Continue with the effort to identify and gather data for analysis to improve the academic and administrative aspects of the BSN Program.
2. Increase student participation in committees and extracurricular activities.
3. Promote continuous tasks with the Community of Interest to maintain and enhance quality and excellency.

Standard II
Program Quality: Institutional Commitment and Resources

The parent institution demonstrates ongoing commitment to and support for the nursing program. The institution makes resources available to enable the program to achieve its mission, goals, and expected outcomes. The faculty and staff, as resources of the program, enable the achievement of the mission, goals, and expected program outcomes.

II-A. Fiscal resources are sufficient to enable the program to fulfill its mission, goals, and expected outcomes. Adequacy of fiscal resources is reviewed periodically, and resources are modified as needed.

Elaboration: The budget enables achievement of the program's mission, goals, and expected outcomes. The budget supports the development, implementation, and evaluation of the program. Compensation of nursing unit personnel supports recruitment and retention of faculty and staff.

A defined process is used for regular review of the adequacy of the program's fiscal resources. Review of fiscal resources occurs, and modifications are made as appropriate.

Program Response:

The fiscal resources assigned to the HRSD are sufficient to enable the program to fulfill its mission, goals, and expected outcomes, are reviewed periodically, and are modified as needed. CUSJ analyzes the budget to enable the achievement of all academic programs operations and to ensure mission, goals, and program outcomes compliance. The budget varies in accordance with enrollment tuition, fees, and federal and state funds assigned and includes funds to provide the necessary services for students, faculty, administrative personnel, materials, and equipment. CUSJ receives municipal, state, and federal funds. CUSJ funding sources are from the Commonwealth Funds (Special), Local Funds (CUSJ-generated Income), Ordinary Funds (Municipality of San Juan), and Federal Funds (Pell Grant Program and grants provided by the Federal government for specific programs, projects, or for direct services to students). Municipal funds are used for payroll and benefits of the tenure-track faculty, administrative personnel, insurance, and facility maintenance. Federal funds are awarded as a benefit of Pell Grant, Work-Study Program, SEOG, Student Support Services, Department of Veterans Affairs, and diverse grants awarded to the Institution or specific offices or departments depending on the grant. CUSJ also receives funds from tuition and fees from students that have used Pell Grant aid and from students that do not qualify to receive Pell Grant funds.

The process used to review regularly the adequacy of the program's fiscal resources starts at the HRSD as the Director identifies the program's needs in accordance with the expected courses programmed as a result of the analysis of previous years and enrollment tendencies for the upcoming year. These include faculty, administrative personnel, materials, and equipment for the Department. It also includes the evaluation of services, activities, programs, and existing projects as well as students' needs and projected services to be rendered, in order to identify programmatic priorities and allocate fiscal resources. Programs objectives are evaluated to establish a budget plan which is presented in the Academic Departments Directors' meeting with the Dean of Academic Affairs. The Deans of the Academic, Administrative and Student Affairs meet with the Chancellor to discuss and evaluate the budget plans. Once it is accepted, the Chancellor is responsible to discuss the Consolidated Budget with the Board of Trustees, that upon its Institutional approval, is presented to the Management and Budget Office of the Municipality of SanJuan. The Municipal Legislature receives the Consolidated Budget which is explained and defended by the Chancellor for its final approval.

The BSN Programs includes courses from the General Education Department, like English, Biology, Social Science, and Psychology, among others. Budget for the GED is analyzed to comply with the HRSD course assignment. The comparative budget from both Departments regarding part-time and tenure-track

faculty, equipment and materials, and fees and subscriptions is shown in table II.A.1.

Table II.A.1 Annual Budget for the BSN Program and General Education Departments for the Years 2021, 2022 and 2023

EXPENSES	ANNUAL BUDGET					
	2021		2022		2023*	
	BSN Program	GED	BSN Program	GED	BSN Program	GED
Part-time Faculty	$79,751.00	$31,794.00	$70,528.00	$32,512.00	$29,071.00	$13,162.00
Tenured-Track Faculty	$223,500.00	$19,260.00	$187,800.00	$15,180.00	$93,900.00	$7,520.00
Equipment and Office Materials	$5,652.00	$18,192.66	$5,652.00	$10,495.92	$0.00	$0.00
Fees and Subscriptions	$13,631.97	$0.00	$5,613.43	$0.00	$1,002.00	$0.00
Total	**$322,534.97**	**$69,246.66**	**$269,593.43**	**$58,187.92**	**$123,973.00**	**$20,682.00**

* Includes the period between January to June 2023

Tenure track faculty monthly salary is based on their level of academic studies and with an assignment of fifteen (15) credit-hours: faculty member with a bachelor's degree has a salary of $1,800.00; with a master's degree is $2,300.00; and with a doctoral degree is $3,200.00. For the HRSD, faculty members are required to have a master's degree. Credits in excess of fifteen (15) credit-hours are paid $270 with bachelor's degree; $330 with a master's degree; and $450 with a doctoral degree. Part-time faculty members' wages are based on the amount of credit-hour and their academic studies, as for tenure track faculty. Compensation of nursing unit personnel supports the recruitment and retention of qualified faculty and staff.

II-B. Physical resources and clinical sites enable the program to fulfill its mission, goals, and expected outcomes. Adequacy of physical resources and clinical sites is reviewed periodically, and resources are modified as needed.

Elaboration: Physical space and facilities (e.g., faculty and staff work space, classrooms, meeting areas) are sufficient and configured in ways that enable the program to achieve its mission, goals, and expected outcomes. Equipment and supplies (e.g., computing, laboratory, and teaching-learning materials) are sufficient to achieve the program's mission, goals, and expected outcomes. The program is responsible for ensuring adequate physical resources and clinical sites. Clinical sites are sufficient, appropriate, and available to achieve the program's mission, goals, and expected outcomes.

A defined process is used to determine currency, availability, accessibility, and adequacy of resources (e.g., clinical simulation, laboratory, computing, supplies, and clinical sites), and modifications are made as appropriate.

Program Response:

CUSJ has adequate physical space, facilities, and specialized equipment that is sufficient to support the BSN Program in the courses and clinical sites to achieve the program's mission, goals, and expected outcomes. CUSJ location is in Hato Rey near the banking district, on a main street close to a major shopping area, and near the train service for the population from San Juan, Bayamón, Guaynabo. It is comprised of three buildings handicapped accessible with an area of 122,000 cubic meters. All buildings have access to internet and wireless technology, equipped with computers, access to internet, telephone service, photocopy machine, printers, scanners, and eating areas. There are parking areas for students,

faculty, and administrative and support staff; gazebos in the inner courtyard; a cafeteria; and an amphitheater.

The Deanship of Student Affairs has a reception area; Dean and administrative personnel offices; the Admissions Office; Registrar's Office; Financial Aid Offices equipped with seven (7) computers for students' use and personnel assistance; the Tutoring and Orientation Center; Institutional Counselor Office; Training and Job Placement Office; the Health and Prevention Center administered by a registered nurse including a breast-feeding section; a sports complex with a locker/bathroom, gym, game room; and a parking space for students. The Deanship of Academic Affairs includes a reception area; Dean and administrative personnel offices; five (5) academic departments (Health Related Sciences, General Education, Science and Technology, Business Administration, Behavioral Professions); Access to Information Center; Audiovisual Office; the Educational Extension Division; and the Division of Night, Weekend and Holidays Director office all of them equipped with computers, access to the internet, and telephone service. There are also thirty (30) faculty cubicles, photocopy machines, printers, a scanner, and a common eating area. The Deanship of Administrative Affairs includes a reception area; Dean and administrative personnel offices; finance, requisition, purchase, budget, and contract offices. There are photocopy machines, printers, and a scanner. Rectory includes a reception area; a conference room with a smartboard; Chancellor's Office and administrative personnel offices; a Board of Trustees Office; Human Resources Offices; Informatics and Telecommunication Center in charge of the institutional technological infrastructure management; Institutional Wellness; and Planning, Institutional Research and External Resources Office all of them equipped with computers, access to the internet, and telephone service. There are photocopy machines, printers, a scanner, and a common eating area. All these facilities and services are available to BSN students and faculty.

On the academic section are the classrooms, laboratories, and support services. All are handicapped-accessible. CUSJ has forty-five (45) learning environments properly ventilated and with air conditioning systems or fans that encompass classrooms, laboratories, and support services distributed as follows: twenty-three (23) classrooms that have from twenty (20) to thirty (30) seats and a desk for a professor including a court-simulated classroom and a one-way mirror classroom; eleven (11) classrooms with computers; two (2) classrooms with computers and video conferencing equipment; support services are offered by an study computer laboratory with twenty-two (22) computers and printers with technical support personnel to assist on multiple tasks; Access to Information Center with general knowledge references in nursing, administration, information systems, accounting, electronics, instrumentation, electrical power and general education in circulation, reserve, reference, general collection, catalogs, electronic information room with a database, online resources, an agreement with the consortium COBIMET, 10 computers and laptops to lend to student; and newly acquired equipment through the CARES Act fund: one (1) 65" interactive display with a built-in windows 10 controller upgradable to windows 11, one (1) large electronic mobile display stand for single monitor, one (1) all-in-one conferencing bar with integrated AEC, AGC, and NRD, a 27- microphone array with Beamtracking, and wide angle 4k camera; four (4) laboratories environments that encompass two (2) anatomy, physiology and microbiology laboratories, one (1) chemistry laboratory, and the Nursing Skills and Therapeutic Intervention Center (NSTIC), and the Debriefing Classroom. All these facilities and services are also available to BSN students and faculty.

The NSTIC is a simulated hospital setting organized with the purpose of serving different specialized service areas. It has a nursing station equipped with a computer, telephone, and file areas; sections for nursing disciplines such as surgical-medical,maternity, pediatrics, physical exam, and technical areas. It also has simulators of low fidelity (chest, abdomen, head, arm, baby, complete body), medium fidelity (Annie, Kelly, Noelia), and high fidelity (two (2) high fidelity nursing babies, Victoria for maternity and Hall for critical care). An adjacent classroom is used with surgical-medical materials and equipment which provides an experience in a secure environment for the proper development of competencies, skills, and aptitudes. The Nursing Skills and Therapeutic Intervention Center provides service from Monday to Thursday from 7:00 am to 8:30 pm, on Friday from 7:00 am to 1:00 pm and Saturday from 7:00 am to 1:00 pm with the assistance of two professors distributed in these hours. The Debriefing Classroom is used to reinforce learning experiences from the NSTIC has one of the newly acquired

equipment bought by the CARES Act. The students develop a simulation of a standardized situation which is recorded to then examine it and identify the corresponding learning experiences.

Newly acquired equipment to create virtual classrooms bought through CARES Act funds will improve the academic technological infrastructure for forty-two (42) learning environments providing options for students and faculty in the teaching and learning experiences: one (1) wall plate HDBase T transmitter for HDMI and USB C with a USBHUB; one (1) HDBase T receiver for video with USB, control and PoE; one (1) meeting room DSP with 4 channels of Acoustic Echo Cancellation (AEC) assignable across any digital or analog input, and least 4 PoE + ethernet ports which support media and control traffic of various types including AVB, Dane tm, and VoIP; one (1) four-channel PoE + (IEEE 802.3 at Class 4, 30W) conferencing amplifier; one (1) USB switch for BYOD flexibility to dedicated video conferencing rooms, supporting both 2.0 and 3.0 USB connection, must allow easy switching between an-in-room computer and a laptop; one (1) AVB pendant microphone with Beam tracking tm technology with three 120-degree zones, providing full 360-degree coverage for the meeting space; one (1) expansion AVB pendant microphone with Beam tracking tm technology with three 120-degree zones, providing full 360-degree coverage for the meeting space; six (6) low-profile, two-way passive POE+ loudspeaker optimized for speech reproduction in conferencing applications; one (1) wall mounted compact customizable AV control pad; two (2) PTZ USB/HDMI/Ethernet 4k web camera, with autotracking; one (1) encoder/decoder for live streaming device 4k and local recording capability; one (1) 75" or 86" interactive display with a built-in windows 10 controller upgradable to windows 11 with training and technical support for each classroom. Since the BSN course could be assigned in any of the classrooms, all these facilities and services are also available to BSN students and faculty.

Support services for the technological infrastructure are given by the Information and Telecommunications Center (ITC) which oversees services for the networks and administrative and academic information systems of the Institution and manages the availability and network infrastructure maintenance and technology. ITC is in charge of an administrative network, an academic network, and an academic wireless network; an infrastructure of servers, workstations, printers, and communication equipment; two internet connections: a 100 Mbps main line and a 100 Mbps main line, both from different providers, which creates redundancy in case the main Internet connection line fails; Comprehensive Academic Management System (CAMS Enterprise) through which the different student services offices operate, such as Admissions, Registrar's Office, Collections and Financial Aid; student and faculty portals and institutional emails management; Microsoft Agreement management for students, faculty and personnel; and a computerized laboratory room for common use by students.

Regarding clinical sites, HRSD has affiliation agreements with a variety of clinical scenarios that include hospital and community settings where students receive clinical practice education to integrate their knowledge with the opportunity to achieve program outcomes. Clinical practice experiences incorporate a variety of learning disciplines that provide sufficient academic and clinical experiences aligned with the institutional mission, goals, and expected outcomes in a wide variety of learning environments where students can develop competencies as part of their clinical education process. Students practice experiences in diverse clinical scenarios and teaching sites along with faculty members are immersed in populations that represent different sexes, ages, communities, cultures, ethnicities, and socioeconomic and educational backgrounds. These will be further discussed in detail in Standard III Key Element III.H.

Clinical practice courses are supervised by a faculty member in charge of planning and organizing clinical experiences to comply with course objectives. For each clinical practice, a maximum of seven (7) students are assigned to the Administration, Leadership, Management, and Nursing Practice course (ENFE 4208), and a maximum of fourteen (14) are assigned to the Family and Community Selfcare course (ENFE 4102). HRSD and the clinical setting personnel give an orientation at the beginning of the clinical practice to discuss and guide students' performance toward achieving course objectives, general rules, and best practices.

Students are supervised by a faculty member who communicates with the clinical setting supervisor to enhance the clinical experience. Each faculty member is responsible for students' skills development, giving groundwork information on the clinical setting to best approach each scenario, and providing practice in the NSTIC before going to the clinical setting. They also coordinate clinical site personnel tutoring sessions, among other tasks. Faculty members always accompany students in clinical teaching settings at the hospital settings. All hospitals, accredited by the Joint Commission on Accreditation of Healthcare Organizations (JCAHO), and other healthcare scenarios like community-based health services, provide the educational clinical experiences required by students for their development as future professional nurses. These health agencies provide primary, secondary, and tertiary healthcare opportunities for students.

At the end of the semester, the professor and the clinical setting supervisor discuss students' academic and clinical execution. These findings are presented in a joint final meeting where students, the professor, the clinical setting supervisor, and the HRSD clinical coordinator can comment and discuss their experiences and impressions of the experience in accordance with course objectives. These procedures show how CUSJ clinical sites for the program are sufficient to achieve the mission, goals, and expected outcomes.

To determine the BSN Program needs the HRSD Director:

- Identify through the different sources (like the Curriculum Committee, the faculty that work in hospital settings, or the Community of Interest) what are the current equipment, materials, or software, among others, that will develop an updated experience as future professionals.
- Have meetings with the Dean of Administrative Affairs to evaluate the availability and accessibility of possible equipment and materials providers that meet the nursing specifications.
- Analyzes with the faculty the short and long-term adequacy of resources to project the equipment or materials useful life to anticipate a future need.
- Evaluate adverse circumstances that may be extreme, like the hurricanes that impacted Puerto Rico, to make modifications in the use of the available resources to ensure all the students have an equal chance to the learning experience.

II-C. Academic support services are sufficient to meet program and student needs and are evaluated on a regular basis.

Elaboration: Academic support services, which may include library, technology, distance education support, research support, and admission and advising services, foster achievement of program outcomes. A defined process is used for regular review of academic support services, and improvements are made as appropriate.

Program Response:

CUSJ has a variety of facilities and resources to support the operation, quality, and achievement of the goals of the Program that are adequate to fulfill the needs of the students in information access; technology; science laboratories; counseling; tutoring; service to veteran students; training and job placement; cultural, social, recreational and athletics activities development; health and prevention service, bursars' office; cafeteria and parking. These support services cover not only the academic aspects but also seek to support the students' personal, social, security, and leisure time to boost their sense of belonging.

Access to Information Center

The Access to Information Center (CAI, for its acronym in Spanish), integrates educational and information technology with the Library and Audiovisual resources. CAI's main goal is to satisfy the information needs of students in a manner that complements teaching and enriches the lives of its users by providing institutional support to their intellectual and social development. Its objective is to guide

and direct students in research tasks carried out beyond the classroom by providing access to a diverse collection of educational resources. It focuses on the development of information literacy, research, and critical thinking, as well as satisfying the need for updated information. CAI's collection has titles about relevant topics within the areas of office systems administration, computerized accounting, information systems, general education, criminal justice, nursing, industry, and technology, as well as general reference titles. CAI's printed and non-printed informative resources and components include Circulation; Reserve; Reference; General Collection; Electronic Information Area; COBIMET, a consortium of online libraries; Online and Audiovisual resources, among other services. These are available to students, faculty, administrative personnel, and the community from Monday to Thursday from 7:00 am to 10:00 pm, Fridays from 7:00 am to 8:00 pm, and Saturdays from 8:00 am to 1:00 pm. This Center is located on the second floor of the academic area of the main building and is handicap accessible with a wide automatic door and two (2) accessible elevators. It can hold up to fifty (50) users on tables and cubicles. The administrative personnel are the Director, one (1) audiovisual personnel, and three (3) general employees throughout the service hours.

All these resources provide the Nursing faculty the opportunity to revise and recommend the best information for their courses and to evaluate and suggest new additions to the collection. The Center also provides students the following services: educational or electronic resources loans, orientation on the use of educational resources, orientation on how to prepare academic and research documents, access to services through their personal electronic devices, three (3) photocopy machines, computer or VCR, and DVD loans.

Technology - Informatics and Telecommunication Center

The Informatics and Telecommunication Center (ITC) is responsible for all the computerized systems and support software in CUSJ. It provides maintenance and direct technical assistance to the users; coordinates with the computer laboratory personnel in the installation of new software; oversees the academic and administrative networks; and offers training in the available systems. The operating hours are Monday thru Friday from 8:00 am to 5:00 pm and contact support@cunisanjuan.edu and servicioscit@cunisanjuan.edu.

There is an academic and administrative network. The academic network is comprised of the Student and Faculty Portals where general, academic, and extracurricular information is published. This means of communication can be accessed 24/7 by authorized users. Didactic documents, grade information, chats, and forums are available to enhance the classroom experience. The portals can be accessed using the computers in the faculty cubicles, in the Access to Information Center, in the Study Computer Laboratory, or any wireless electronic device. The academic network is supported by an electronic system called Comprehensive Administrative Management System (CAMS Enterprise) that provides independent but interconnected portals for students and faculty which enables constant communication among them. It also provides a connection to the Registrar's Office and Financial Aid Office where students and faculty can use their independent university services. The administrative network is divided into CAMS and Microsoft Outlook as a means of communication. CAMS is accessed by authorized personnel that complete the information regarding information about admission, registration, financial aid, among others.

ITC provides continuous access during service hours to computers and internet service in the Access to Information Center and to the Study Computer Laboratory which is open from Monday to Friday from 8:00 am to 9:55 pm with printers and technical support personnel to assist on multiple tasks including the enrollment process.

Science Laboratories

Nursing students take a chemistry course in the laboratory located on the third floor of the academic area of the main building. This laboratory holds a course for up to fifteen (15) students and is equipped to offer a complete experience. A laboratory technician is in charge and works in coordination with the

professor. There are two (2) anatomy, physiology, and microbiology laboratories for the nursing students with models, specimens, and multiple equipment to comply with the lab exercises and experiments.

Institutional Counseling Office

The Institutional Counselling Office provides academic, vocational, and personal guidance services to the entire student community, and coordinates external services geared to improve the emotional, social, and economic stability of the student body. Service hours are on weekdays from 8:00 am to 4:00 pm with extended service hours from 4:00 pm to 7:00 on Tuesdays and Wednesdays for the night session students. It includes the following:

- Academic Counselling – helps students raise awareness of the factors that affect their academic progress and ways to engage with a more effective educational approach.
- Vocational Counselling – helps students define occupational goals and select a career in accordance with their interests and skills by analyzing personal objectives, potential and personal qualities through an interview and a vocational test administration.
- Personal Counselling – aims to identify, analyze, and understand the most effective way to control, resolve or accept situations affecting personal development. When the situation warrants, referrals are made to the community or other agencies.
- Services to Students with Disabilities – process reasonable accommodation needed by the students.
- Grievances Procedures - written complaint process to ascertain a violation of rights to the student, according to CUSJ Student Regulations.
- Title IX Compliance - documents situations related to sex discrimination among the constituents in the Institution.

Orientation and Tutoring Center

The Orientation and Tutoring Center (or Student Support Services) is a Federal Education Department program that provides development opportunities to university students with an academic need towards fostering and maintaining retention and graduation. Services are for first- and second-year students to help them successfully complete a university degree and motivate them to continue graduate studies. Participants receive academic, personal, and vocational services, as well as individual and group tutoring in the disciplines of English, Spanish, math, accounting, nursing, and sciences. It also provides the services of a professional counselor to broaden support to students. Service hours are Monday through Thursday from 8:00 am to 8:00 pm and Fridays from 8:00 am to 4:00 pm.

Service to Veteran Students

The US Veteran Affairs Department and the Approval Agency of Educational Services to Veterans recognize CUSJ as an Institution eligible for Veterans that pursue studies and at the same time receive benefits under the study program Montgomery G. I. Bill. The chapters included are the following:

- Active Duty (Chapter 30)
- Selected Reserve (Chapter 1606)
- Reserve Educational Assistance Program (REAP-1607)
- Vocational Rehabilitation and Employment (Chapter 31)
- Educational Assistance to Survivors and Dependents (Chapter 35)
- G.I. Bill post 9/11 (Chapter 33)

Training and Job Placement Office (Workplace and Sociocultural Integration)

This institutional area identifies sources of employment and makes recommendations for the placement of active students and graduates. The office promotes job opportunities, coordinates with employment agencies, and organizes job fairs. This office also prepares statistics on graduates' employment.

This area also coordinates the CUSJ-HETS (Hispanic Educational Technology Services) work and activities, as well as cultural activities, Alumni and Alumni Association, and acts as a counselor to the Student Council. This office coordinates activities to foster the approach and contact of former students and graduates with the Institution.

Regarding socio-cultural activities, it organizes, plans, and sponsors cultural and social activities for the academic year in coordination with the Student Council. These activities foster personal enrichment and provide the opportunity to develop student leadership through cooperation emphasizing service ideals, good citizenship, and cooperation.

Cultural, Social, Recreational, and Athletic Activities Development Office

This office organizes, plans, and sponsors cultural, social, recreational, and athletic activities for the academic year in coordination with the Student Council. These activities foster personal enrichment, provide the opportunity to develop student leadership by cooperation, and emphasize ideal services and citizenship.

Sport Activities

CUSJ has an office that organizes and develops an Athletic and Sports program, in which students represent the Institution in sports such as basketball, volleyball, table tennis, chess, and others. There is an intramural sports program, providing the opportunity for competition to students who are not high-performance athletes. This program promotes camaraderie. Recreational activities develop a sense of belonging complementing the educational purpose in the collegiate community.

Health and Prevention Service

This institutional area offers first aid and preventive health services; and provides talks and orientations, among others, to the university community on different aspects of health, prevention of drug use, alcohol, and AIDS issues, among others. The institutional nurse maintains statistics on institutional compliance with COVID-19. This professional prepares the Vaccine Report and the report for Law 238. In its area, it provides a space for breastfeeding.

Bursars Office

This office is responsible for receiving and processing all income to CUSJ and those related to student services, physical facilities, laboratory fees, other fees, and student activities. Prepares daily reports on the income, coordinates it with the Municipal Financial Office and it is incorporated into the computerized system.

Cafeteria

Food service for students, faculty, personnel, and the community is provided in a broad and accessible space that offers a variety of meals located on the first floor.

Parking Service

CUSJ has two (2) parking areas for students and one (1) parking area for the faculty andadministrative personnel. These parking areas follow internal norms and Puerto Rico Transit Laws with an authorized permit presenting a license permit, vehicle permit, and an active program schedule.

The services review process varies among the facilities to best attend to students and faculty's need. Examples include the following (Table II.C.1):

Table II.C.1 Service Area's Example of Review Processes

Service Area	Review Processes Examples (VR-8)
Access to Information Center	• The personnel make an analysis of the requested books to measure tendencies that can help to decide on future purchases. Nursing students' most requested service is in the Reserved Books section with immediate access to courses suggested or textbooks. • Faculty members meet with the librarian to explore the best academic options for textbooks, reference material, or other means to have access to nursing sources.
Informatics and Telecommunication Center	• Administers a satisfaction questionnaire to collect information on the services requested, frequency, and general problems to discuss problem-solving measures. Some changes made due to the information gathered is increasing service hours.
Orientation and Tutoring Center	• The Director makes a statistical analysis of the services rendered regarding tutoring, counseling, or general support. Since the amount of nursing student participants increased, a second tutor was hired to satisfy demand. • Faculty members meet with the tutors to discuss students' progress in the tutoring sessions. This feedback helps the faculty member to maintain or change the didactic approach if necessary.

The array of services and the review process improve BSN students and faculty to foster the achievement of program outcomes.

II-D. The chief nurse administrator of the nursing unit:

- **is a registered nurse (RN);**
- **holds a graduate degree in nursing;**
- **holds a doctoral degree if the nursing unit offers a graduate program in nursing;**
- **is vested with the administrative authority to accomplish the mission, goals, and expected program outcomes; and**
- **provides effective leadership to the nursing unit in achieving its mission, goals, and expected program outcomes.**

Elaboration: The administrative authority of the chief nurse administrator is comparable to that of chief administrators of similar units in the institution. He or she consults, as appropriate, with faculty and other communities of interest to make decisions to accomplish the mission, goals, and expected program outcomes. The chief nurse administrator is an effective leader of the nursing unit.

Program Response:

The HRSD Director is an experienced and highly qualified professional nurse with the necessary credentials for the position of chief nurse administrator which she has held for the past seven (7) years. She is a Registered Nurse in Puerto Rico as a Nursing Specialist and possesses the Florida State Nursing License. She has a Nursing Science Master's Degree with a specialty in mother and children with an education role from the University of Puerto Rico, Medical Sciences Campus. From her forty-one (41) years of experience as a Registered Nurse and extensive nursing didactic experience for over thirty-three (33) years, she has worked in CUSJ for over twenty-eight (28) years in multiple positions: Clinical Experience Coordinator, Instructor of the Nursing Skills and Therapeutic Intervention Center, Theory Professor, and Department Director. She has worked for the Evaluation Board for the past Puerto Rico Council of Education now Board of Post Secondary Institutions (JIP, Spanish acronym) on several occasions and belongs to the Simulator Educator Association of Puerto Rico and to the educator's section of the Puerto Rico College of Nursing Professionals. At CUSJ, the HRSD Director has coordinated the federal proposal

for JTPA-WIA; has worked in multiple committees and Boards like ACEN and CCNE Reaccreditation, Curriculum, Resources and Facilities, Student Appeals, Academic Board, among others. She has also been Course Team Leader to courses from the Associate Degree and BSN Program; the HRSD Program and Hospitals Coordinator; and Department Director.

The Department Director has the authority and responsibility to administer the Nursing Programs, supervise faculty execution, foster, and maintain the efficacy and excellence of the programs, and complies with the required qualifications as expressed in the CUSJ Tenure System Regulations. Her open communication with the Community of Interest ensures the effectiveness of their integration as well as the continuous revisions to maintain an up-to-date educational program and accomplish the mission, goals, and expected program outcomes.

II-E. Faculty are:

- **sufficient in number to accomplish the mission, goals, and expected program outcomes;**
- **academically prepared for the areas in which they teach; and**
- **experientially prepared for the areas in which they teach.**

Elaboration: The faculty (full-time, part-time, adjunct, tenured, non-tenured, or other) for each degree and post-graduate APRN certificate program are sufficient in number and qualifications to achieve the mission, goals, and expected program outcomes. The program defines faculty workloads. Faculty-to-student ratios provide adequate supervision and evaluation and meet or exceed the requirements of regulatory agencies and professional nursing standards and guidelines.

Faculty are academically prepared for the areas in which they teach. Academic preparation of faculty includes degree specialization, specialty coursework, or other preparation sufficient to address the major concepts included in courses they teach. Faculty teaching in the nursing program have a graduate degree. The program provides a justification for the use of any faculty who do not have a graduate degree.

Faculty who are nurses hold current RN licensure. Faculty teaching in clinical/practicum courses are experienced in the clinical area of the course and maintain clinical expertise. Clinical expertise may be maintained through clinical practice or other avenues. Faculty teaching in advanced practice clinical courses meet certification and practice requirements as specified by the relevant regulatory and specialty bodies. Advanced practice nursing tracks are directly overseen by faculty who are nationally certified in that same population-focused area of practice in roles for which national certification is available.

Program Response:

CUSJ-BSN Program has a faculty academically and experientially prepared in the areas in which they teach and are sufficient to accomplish the mission, goals, and expected program outcomes. The HRSD faculty members comply with the educational credentials and have experience in the practice of the nursing profession in clinical settings. One hundred percent (100%) of CUSJ Nursing Faculty is licensed by the Puerto Rico Board of Nursing and three (3) faculty members also have the Florida State license to practice nursing in that state. In addition, as required by law, all faculty are members of the Puerto Rico College of Nursing Professionals. When hired, all faculty members must present evidence of compliance with all legal requirements necessary to practice the nursing profession in Puerto Rico. Documents that provide this information are available at the HRSD and in CUSJ's Human Resources Office. From the faculty, fifteen (15) hold a Master's Degree in Nursing, and two (2) hold doctoral degrees in Psychology and Education. The following table shows the full-time and part-time faculty distribution for the January to May 2023 semester (Table II.D.1).

Table II.E.1 Full-time and Part-time Faculty Distribution and their Academic Degree on the WI-23 Semester

Academic Degree	Full-Time Faculty	Part-Time Faculty
Master of Science in Nursing (MSN)	4	11
Doctor	1	1
Total – 17 (100%)	5	12

The faculty's teaching experience encompasses a period from two (2) to thirty-three (33) years with an average of thirteen (13) years. Their experience in the field includes positions of Nursing Department Directors, Supervisor, Nursing Subdirector, and Eye Clinic Nurse, among others, maintaining a close relationship with relevant and up-to-date approaches to nursing. There are also two (2) alumni among the faculty members who have a broader and long-term view of the CUSJ nursing program. The faculty profile includes the name of the faculty member, academic rank, years of teaching experience, appointment / workload, credentials, and nursing courses that the faculty member teaches (Appendix II.E.1 – Faculty Profile).

The BSN Program courses that these faculty members teach are the following:

- ENFE 3004 – Bioethics
- ENFE 3006 – Critical Care
- ENFE 3008 – Gerontology
- ENFE 3009 – Human Sexuality
- ENFE 3104 - Theory, Models and Roles in Nursing
- ENFE 3105 – Nursing Process and Physical Examination
- ENFE 3205 – Core in Nursing
- ENFE 4101 – Research in Nursing
- ENFE 4102 – Family and Community Selfcare
- ENFE 4207 – Nursing Process and Pathophysiology
- ENFE 4208 - Administration, Leadership, Management and Nursing Practice

The BSN faculty has a diverse graduate background which broadens the didactic view toward the courses they teach shown in Table II.E.2.

Table II.E.2 Faculty Academic Preparations and Courses and Clinical Experiences Courses They Teach

Formal Academic Preparation	# Faculty with this Preparation	BSN Courses and Clinical Experiences HRSD Faculty Teach
Adult and Elder	7	3004, 3006, 3008, 3009, 3104, 3105, 3205, 4102, 4102-L, 4207, 4208, 4208L
Mental Health and Psychiatry	2	3006, 3205, 4102, 4102L
Community	1	3104, 4102, 4102L, 4207
Adult Critical Care	1	3004, 4208, 4208L
Mother, Child, and Family	1	3104, 3205
Clinical Specialist	1	3104, 4102, 4102L
Pediatrics and Adult	1	3008, 3104, 3105, 3205
Anesthetics	1	3006, 4207, 4208, 4208L
Doctor in Psychology	1	3004, 3009
Doctor in Education	1	3009, 4101

The academic load of full-time faculty is thirty-five (35) hours weekly included in CUSJ Tenure System Regulations, Article 16.2, is distributed as follows:

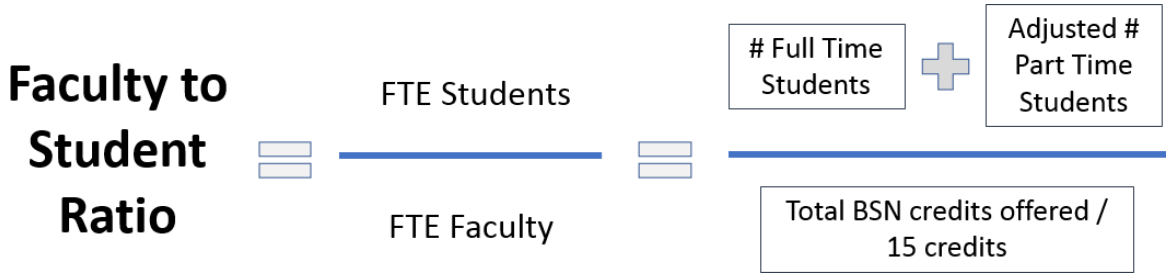
Table II.E.3 Weekly Workload Distribution of Full-Time Faculty with a Minimum of 15 Credit-hours

Workload Description	Workload Hour Distribution
Academic Load	15 hours
Academic Advising and Tutoring for Students	3 hours
Office Hours	3 hours
Departmental and Institutional Committees, Academic Research and Other Academic Services	3 hours
Other Activities	11 hours
TOTAL	35 HOURS

To calculate the faculty-to-student ratio, CUSJ has designated the Planning, Institutional Research, and External Resources Office to gather the information from the Registrar, the Informatics and Telecommunication Center, and the Deanship of Academic Affairs at the end of each enrollment process to be analyzed. The steps to calculate this ratio is as follows:

- Calculate the full-time equivalent for students and faculty (graph II.E.1):
    - FTE Students – Add the number of Fall full-time students' headcount with the adjusted part-time students' headcount.
    - FTE Faculty – Divide the total BSN courses credits for the same Fall semester as for FTE for students with 15 credits which accounts for a full-time faculty academic load.

Graphic II.E.1 Faculty-to-Student Ratio Formula



One hundred five (105) full-time students and twenty-five (25) part-time students were enrolled in the Program for the semester Fall 2022. The calculation was based on the formula that the Federal Department of Education uses for statistical purposes where a part-time studentin a baccalaureate program in a public institution is 0.403543 of the full time. To calculate the number of students there are several steps taken: to convert part-time students into full-time equivalent, CUSJ takes 25 x 0.403543 which converts to ten (10) full-time students. This number is added to the one hundred-five (105) full-time students totaling one hundred fifteen (115) FTE for Students.

Full-time faculty are assigned fifteen (15) credit-hours or the thirty-five (35) hours week load and can offer a maximum of an additional twelve (12) credit-hours. Part-time faculty can offer a maximum of fourteen (14) credit-hours. To calculate full-time equivalency (FTE), all faculty academic workload was added, and it was divided into fifteen (15) credit-hours. For the BSN Program, the total was seventy-nine (79) credit-hours which were divided by fifteen (15) credit-hours equals 5.3 FTE for Faculty.

The faculty-to-student ratio can be calculated by taking the number of FTE for Students and dividing it into FTE for Faculty. In other words, the Faculty to Student Ratio of one hundred fifteen (115) FTE for Students and 5.3 FTE for Faculty is 22.

II-F. Preceptors (e.g., mentors, guides, coaches), if used by the program as an extension of faculty, are academically and experientially qualified for their role.

This key element is not applicable to a degree or certificate program that does not use preceptors.

Elaboration: The roles and performance expectations for preceptors with respect to teaching, supervision, and student evaluation are:
- *clearly defined and communicated to preceptors;*
- *congruent with the mission, goals, and expected student outcomes;*
- *congruent with relevant professional nursing standards and guidelines; and*
- *reviewed periodically and revised as appropriate.*

Preceptors have the expertise to support student achievement of expected outcomes. The program ensures that preceptor performance meets expectations.

Program Response:

This Key Element does not apply to CUSJ BSN Program.

II-G. The parent institution and program provide and support an environment that encourages faculty teaching, scholarship, service, and practice in keeping with the mission, goals, and expected faculty outcomes.

Elaboration: Institutional support is available to promote faculty outcomes congruent with defined expectations of the faculty role (full-time, part-time, adjunct, tenured, non-tenured, or other) and in support of the mission, goals, and expected faculty outcomes.
- *Faculty have opportunities for ongoing development in teaching.*
- *If scholarship is an expected faculty outcome, the institution provides resources to support faculty scholarship.*
- *If service is an expected faculty outcome, expected service is clearly defined and supported.*
- *If practice is an expected faculty outcome, opportunities are provided for faculty to maintain practice competence.*
- *Institutional support ensures that currency in clinical practice is maintained for faculty in roles that require it.*

Program Response:

Faculty improvement enhances reflection upon teaching and upon student learning effectiveness. HRSD Faculty outcomes are Faculty Teaching, Faculty Scholarship of Teaching, and Faculty Service (Table II.G.1). Faculty outcome results provide valuable information to promote ongoing program improvement.

Table II.G.1 HRSD Faculty Outcomes

FACULTY OUTCOME	*SPECIFIC FACULTY OUTCOMES*
Faculty Teaching	Academic Fields of Knowledge
	Practice
	Leadership Positions
Faculty Scholarship of Teaching	Professional Organizations / Events
	Development of Teaching Materials
	Curriculum Development, Revision, and Assessment

FACULTY OUTCOME	*SPECIFIC FACULTY OUTCOMES*
	Professional Education Credits
Faculty Service	Community Service
	Extracurricular Service

Faculty Teaching

Faculty teaching is regarded as the experience to transfer knowledge, advise, mentor, support, and participate in learning-focused activities. It includes academic fields of knowledge, professional practice, and leadership positions with a clear understanding of academic freedom. As expressed in the CUSJ Tenure System Regulations in article 8, the Institution instills academic freedom upon the teaching experience by being able to analyze, weigh, and issue those opinions of a professional nature that they deem proper and convenient for the achievement of the philosophy and objectives of the Institution. Academic freedom is defined as the right of each faculty member to teach with objectivity, honesty, and decorum the relevant subject and extends to the boundaries of the objectives of each course, as outlined in the corresponding syllabus. One hundred percent (100%) of CUSJ Nursing Faculty have an MSN and are licensed by the Puerto Rico Board of Nursing and three (3) faculty members have obtained Florida State license to practice Nursing in that state. The faculty encompasses a variety of academic fields of expertise that contribute directly to the collective knowledge of experiences and practice that students can attain: Adult and Elder, Adult Critical Care, Anesthetics, Clinical Specialist, Community, Mental Health and Psychiatry, Pediatrics and Adult, Psychology, and Education.

Some of our faculty members also have experience in leadership positions in different hospitals settings, for example, as Director of Nursing Services Physician Correctional Medical Center, Supervisor Hospital Development Manager PR and USVI, Emergency Room Coordinator, Supervisor of Pediatrics and Medicine, General Supervisor of Nursing Services, as well as working as consultants in different professional and community scenarios.

Faculty Scholarship of Teaching

Faculty scholarship of teaching refers to the creative development, application, integration, transformation, and systematic advancement of knowledge in the nursing field in an educational learning space. It encompasses participation in professional organizations / events; development of teaching materials; curriculum development, revision, and assessment; and professional education credits. The faculty are members of the Puerto Rico College of Nursing Professionals and participate actively in assemblies and conventions of professional organizations that include the Puerto Rico College of Nursing Professionals and its Educators Section; Simulator-Educator Association of Puerto Rico; Association of Hospitals; Nursing Administrators Association of Puerto Rico; Gerontology Association, among others. They have also participated in multiple professional events like the Annual Assembly College of Nursing Professionals of Puerto Rico, CCNE Workshop on Writing Self-Studies Webinar Series, Basic Life Support (CPR and AED) Program, Simulation Assembly in Puerto Rico, among others. Faculty has been in a continuous engagement regarding curriculum development, revision, and assessment to improve the BSN curriculum through data collection and analysis that has driven a broader and inclusive view toward teaching strategies and practices while analyzing the curriculum alignment to BSN-SLO. This has led to didactic approaches and reflective teaching. Regarding professional education, by law all faculty must take thirty (30) credits to renew their professional license every three (3) years. This contributes to the increase of knowledge integration in the program.

Faculty Service

Faculty service is the action of committing time or resources to community or extracurricular service by election, by invitation or by volunteering as a member or a leader at the university, local community, or

an external organization for a meaningful contribution through the application of health fields of knowledge. It includes participation in community organizations, health fairs, seminars, workshops, joint ventures, and clinical practice. CUSJ and the BSN Program provide an environment that supports faculty service efforts. Faculty are committed to participate in CUSJ's committees, professional organizations, community services, and clinical practice. Faculty initiatives have given rise to health fairs for CUSJ students, personnel, and the community; seminars and workshops for high school students as well as joint ventures with the community to create communal-based general health services. Faculty service includes participation in community organizations, and clinical practice. Some examples are the participation in "Cabecitas Rapadas (Skinheads)" Foundation for children with cancer, COVID-19 Vaccine Administration in Community Action by VOCES, Outreach Program of "Salud en Ruedas" which provides primary medical services to sector of Puerto Rico where health disparities dominate, Recycling Orientation to CUSJ Community, and Pathfinders Adventist Youth Society, among others.

To complement and foster ongoing development in teaching, scholarship of teaching, and service, the Deanship of Academic Affairs and HRSD held a series of academic and clinical events every semester to address didactic needs in both theory and clinical experiences courses through academic affairs deanship workshops, faculty meetings, course team leader meetings, and trainings as follows:

- Academic Affairs Deanship Workshops – at the beginning of the semester, a series of workshops were planned for the faculty (VR-9).
    - Use and Management of Open LMS Platform
    - Informatics Competencies
    - A look into Distance Learning for Higher Education in Puerto Rico
    - Project of the Professional and Academic Development Center to promote student success in CUSJ
    - Moodle Courses Configuration
- Faculty Meetings (VR-7)
    - CCNE Reaccreditation Visit Presentation
    - CCNE Essentials and CUSJ Analysis Application of Spheres, Domains, and Concepts
    - CUSJ SLO
    - Baccalaureate Degree Conceptual Learning Triangle
    - Nursing Standards and Curriculum Pathways
    - Developed or Revised Documents
    - Faculty Outcomes
    - Statistical Analysis of Skills Evaluation in the Nursing Skills and Therapeutic Intervention Center
    - Student Files Procedures
    - Therapeutic Intervention Rubrics Revision
    - Grades in Clinical Practice Experiences
    - Team Leaders
    - Microsoft Teams as a working tool
    - Proposed Schedule
- Course Leader Team Meetings (VR-10)
    - Meetings to analyze and discuss student learning and didactic processes between faculty members that offer the same course led by one the faculty.
- Trainings (VR-11)
    - Faculty training on the simulators in the Nursing Skills and Therapeutic Intervention Center.

- Research in Nursing Mentorship Initiative – A joint initiative between the Research in Nursing course faculty and the Program's Faculty members to a two-part project. The first part is the knowledge support, sharing of future peer professionals, and views on the field as faculty members can make suggestions or recommendations on the following steps of the research process as evaluators of the research proposal and at the end of the semester. The second part, which is still in plans, is the identification of mentors for the different research teams whose goal is to submit the project to academic organizations or magazines for a chance of publication.

These series of academic and clinical events gave the faculty opportunities for ongoing development in teaching to support an environment that encourages faculty teaching, scholarship, service, and practice in keeping with the mission, goals, and expected faculty outcomes in both theory and clinical experiences courses.

Standard II: Program Quality: Institutional Commitment and Resources
Strengths and Areas of Improvement

Areas of Strengths:

1. CUSJ and HRSD provide BSN students and faculty with an ample variety of up-to-date physical resources.
2. Support services are varied and broad to support BSN students' academic success and faculty's teaching experience.
3. The NSTIC has simulators of high, medium, and low fidelity for several nursing disciplines.
4. BSN faculty are academically prepared and well-experienced in the areas in which they teach.
5. BSN faculty comply 100% with the Faculty Outcomes (Teaching, Scholarship of Teaching and Service).

Areas of Improvement (Appendix A – Plan of action for the areas to improve):

1. Increase the efforts toward obtaining external resources.
2. Improve professional development.

Standard III
Program Quality: Curriculum and Teaching-Learning Practices

The curriculum is developed in accordance with the program's mission, goals, and expected student outcomes. The curriculum reflects professional nursing standards and guidelines and the needs and expectations of the community of interest. Teaching-learning practices are congruent with expected student outcomes. The environment for teaching-learning fosters achievement of expected student outcomes.

III-A. The curriculum is developed, implemented, and revised to reflect clear statements of expected student outcomes that:

- **are congruent with the program's mission and goals;**
- **are congruent with the roles for which the program is preparing its graduates; and**
- **consider the needs of the program-identified community of interest.**

Elaboration: Curricular objectives (e.g., course, unit, and/or level objectives or competencies as identified by the program) provide clear statements of expected learning that relate to student outcomes. Expected outcomes relate to the roles for which students are being prepared.

Program Response:

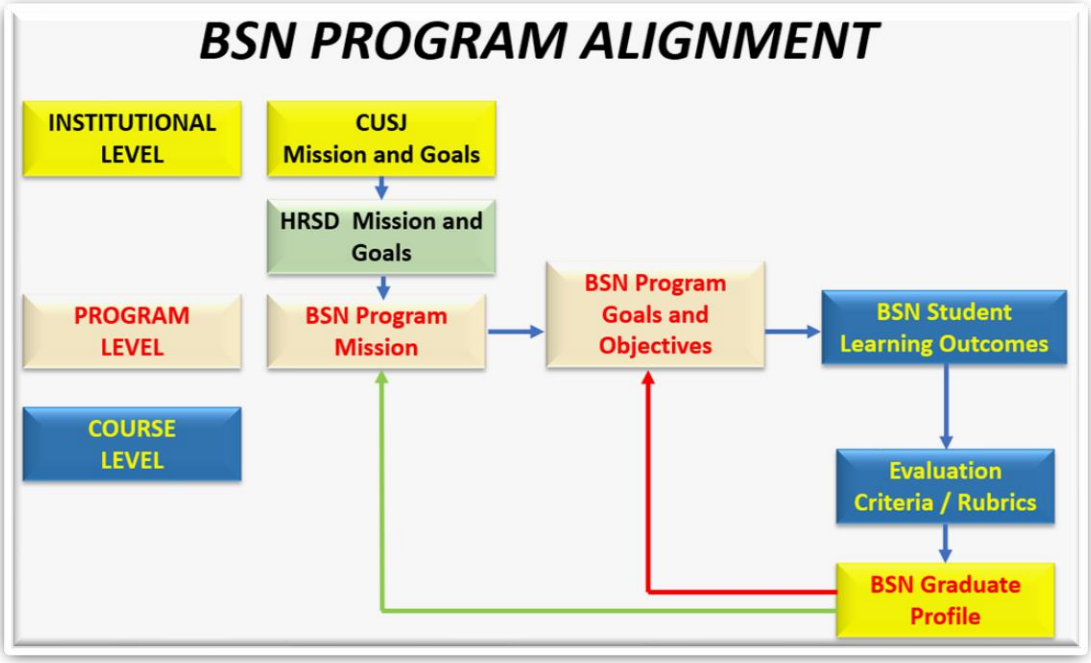
The BSN Program is in harmony and responds to CUSJ's mission, vision, goals, and outcomes. Nursing education is founded on philosophical principles that integrate humanistic, reconstructionist, and technological paradigms offering students the opportunity to develop a nursing professional who provides optimal, holistic, and quality self-care making the students agents of change for socio-economic, technological, and cultural development of Puerto Rico. Dorothea Orem's Theory of Self-care expresses that the patient must maintain an adequate intake of air, water, and food supply; provide associated care with the elimination processes; maintain a balance between activities and rest periods and between social interaction and private time; prevent danger for human life, general function, and wellness; and promote best functions and development between social groups in accordance with human potential, limitations and the willingness to be normal and develop into agents of change.

To this effect, the BSN Program's curricular design has undergone changes that lead to the existence of a new culture of quality, which includes an interdisciplinary educational model centered on the students' learning processes and demands of the employment market that responds to society's true needs. The nursing faculty upholds the Puerto Rico Nursing Practice Standards revised in 2018 by the Puerto Rico College of Nursing Professionals. These standards and guidelines are updated and reviewed by nurse educators and general nurse populations at the annual assembly of nurses practicing in Puerto Rico. Faculty members adopted these standards as a broader focus on community health concepts and leadership activities.

The faculty acknowledges that responsibility in nursing education is essential to the student's academic preparedness for the nursing practice in their chosen primary, secondary, or tertiary level of the healthcare system. For this reason, the faculty reviews the curriculum as often as needed during the academic year to consider changes based on data collected on currently enrolled students and compares it with data collected from previous classes. A formal review and revision of the curriculum takes place every five years or as frequently as necessary as expressed in the HRSD Systematic Evaluation Plan. The nursing curriculum is designed to progress from simple to complex knowledge development supported by General Education Department courses.

As presented in Standard I, the BSN Program's mission, goals, and outcomes are congruent and allow a direct alignment to the BSN-SLO with evaluation criteria utilized to guide the curriculum and needed to fulfill the graduate profile (Graphic III.A.1).

Graphic III.A.1 BSN Academic Program Alignment



This program alignment supports the relationship between the mission, goals, BSN-SLO (Basic and Advance Student Learning Outcomes), and the Nursing Process based on Dorothea Orem's Self-care Theory which meets the standards of contemporary practice of the profession and is portraited in the Conceptual Framework diagram for the BSN Program (Graphic III.A.2).

Graphic III.A.2 BSN Program Conceptual Framework

To deepen the development of BSN-SLO, General Nursing Concepts are incorporated in the courses directly related to course content. The concepts are a key component to tie together the Learning Outcomes to the CUSJ-GED Competencies aligned to CUSJ Mission and Goals as shown in the BSN Program Curriculum Pathway as explained in Standard I Key Element I.A and shown in graphic III.A.3 and detailed in Table III.A.1. and the alignment to the Nursing Programs Competencies, BSN-SLO.

Graphic III.A.3 BSN Program Curriculum Pathway

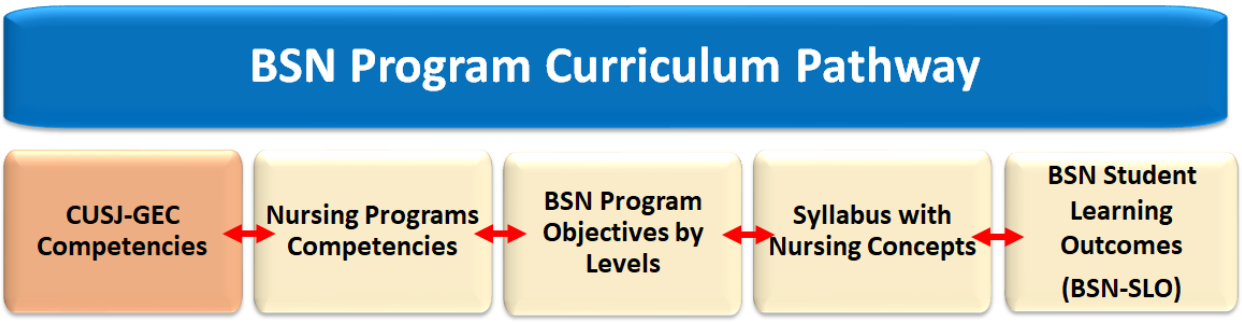


Table III.A.1 Congruence Between Nursing Programs Competencies, Nursing Concepts, and BSN-SLO

Nursing Programs Competencies	*Nursing Concepts*	*BSN-SLO*	
		Basic SLO	*Advance SLO*
4.1 5.1 6.1 7.1 8.1 9.1	Clinical Judgement Health Environments Patient Care Quality Improvement Quantitative Reasoning	Critical Thinking	Decision Making Problem Solving
6.1 7.1 9.1	Compassionate Care Cultural Sensitivity Diversity, Equity, Inclusion Evidence-Based Practice Patient-Centered Care Life Cycle Practice Patient Security	Therapeutic Interventions	Leadership Problem Solving
1.1 2.1 3.1 8.1	Communication Ethics Health Policy Informatics Interprofessional Teams Social Determinants of Health	Communication and Interpersonal Relationships	Decision Making Leadership Problem Solving

The link between CUSJ-GED Competencies and BSN-SLO deepens students' improvement in different roles that enable the development of higher professional characteristics as a BSN graduate (Table III.A.2).

Table III.A.2 Congruence between the Roles for Which Student Are Being Prepared and the Course Where They Develop It

ROLES	COURSES
Leader, Care Agent	ENFE 3104 - Theory, Models, and Roles in Nursing
Care Agent	ENFE 3105 – Nursing Process and Physical Examination

ROLES	COURSES
Care Agent, Educator	ENFE 3205 – Core in Nursing
Researcher	ENFE 4101 – Research in Nursing
Care Agent	ENFE 4102 – Family and Community Self-care
Advisor	ENFE 4207 – Nursing Process and Pathophysiology
Leader	ENFE 4208 - Administration, Leadership, Management, and Nursing Practice
Advisor	ENFE 3004 – Bioethics
Caretaker	ENFE 3006 – Critical Care
Agent of Change	ENFE 3008 – Gerontology
Agent of Change	ENFE 3009 – Human Sexuality

Roles based on *Fundamentos de Enfermeria* of Potter / Perry, 2019

The BSN Program considers the needs identified by the Community of Interest. These professionals present a complementary perspective of a broad view of the need of a nursing professional with an effective approach to the labor tendencies which may impact the curriculum in the health field and nursing scenario and clinical practice. As expressed in Key Element I.C, this year HRSD met with the Community of Interest on March 14 and August 3, 2023. These highly prepared professionals viewed the BSN curriculum as a well-structured program that could clearly show the congruent and consistent alignment with the program's mission, goals, and roles for which the program is preparing its graduates to reflect clear statements of expected student outcomes.

III-B. Baccalaureate curricula are developed, implemented, and revised to reflect relevant professional nursing standards and guidelines, which are clearly evident within the curriculum and within the expected student outcomes (individual and aggregate). Baccalaureate program curricula incorporate *The Essentials of Baccalaureate Education for Professional Nursing Practice* (AACN, 2008).

This key element is not applicable if the baccalaureate degree program is not under review for accreditation.

Elaboration: The baccalaureate degree program incorporates professional nursing standards and guidelines relevant to that program and each track offered. The program clearly demonstrates where and how content, knowledge, and skills required by identified sets of standards are incorporated into the curriculum.

Program Response:

The BSN curriculum has been developed, implemented, and revised to reflect professional nursing standards. These professional standards, guidelines, laws, regulations, competencies, and recommendations established by regulatory and accreditation organizations foster discipline and liberal arts knowledge in documents. These documents are:

- Health Insurance Portability and Accountability Act (HIPAA)
- Puerto Rico laws and policies
    - Law 254 of December 31, 2015 – Regulation of the Nursing Profession in Puerto Rico
    - Law #82 Puerto Rico College of Nursing Professionals
- Healthy People 2030
- Professional Nursing Standards
- OSHA Safety Guidelines
- Patient Rights
- Essentials of Baccalaureate Education for Professional Nursing Practice (AACN) 2008
- American Disabilities Act (ADA)

- American Nurses Association (ANA)
- Quality and Safety Educationfor Nurses (QSEN)
- National Patient Safety Goals (Joint Commission) 2023

The continuous revisions and evaluation of the curriculum during faculty meetings and committee work has contributed to high-quality education for the CUSJ students. In addition, the regulations for academic programs as well as for hospitals compel all related systems to analyze the effectiveness of the outcomes. The courses have incorporated information to support nursing practice and clinical judgement sustained by the application of the basic and general concepts from the Puerto Rico Nursing Standards, diverse laws regulating the nursing profession, and guidelines from accrediting agencies as the Essentials of Baccalaureate Education for Professional Nursing Practice (AACN) 2008 (Table III.B.1).

Table III.B.1 Nursing Profession Professional Standard Laws and Regulations Integration into BSN Course Objectives (Examples)

Documents	Course Code	Course Objective
Health Insurance Portability and Accountability Act (HIPAA)	ENFE 3004 – Bioethics	Distinguish legal ethical concepts, to formulate critical judgments and make decisions with the interprofessional team, in nursing care offered in different health scenarios to the individual, family, groups, and community.
	ENFE 4101 – Research in Nursing	Contrast the ethical and legal principles of the research process, the nursing process, and the decision-making process when offering care to individuals, families, groups, and the community in different health settings.
Law 254 of December 31, 2015 – Regulation of the Nursing Profession in Puerto Rico	ENFE 3006 – Critical Care	Analyze basic human needs through different logical and quantitative reasoning skills, conceptual models, and nursing theories when intervening with people with and without health deviations by offering nursing care in safe work settings to individuals, families, groups, and the community, during the different stages of the life cycle.
	ENFE 3004 – Bioethics	Apply the ethical-moral concepts based on the body of knowledge that regulate the standards of nursing practice in Puerto Rico, as a guide to intervene with the individual, family, groups, and community in different health scenarios.
Law #82 Puerto Rico College of Nursing Professionals	ENFE 3205 – Core in Nursing	Recognize the responsibility of leadership and values in the performance of functions as a general nursing professional in different health settings, while advocating for the rights of the citizen, family, groups, and community.
Healthy People 2030	ENFE 3008 – Gerontology	Develop with security, confidence, and determination the knowledge, theoretical and practical concepts derived from the research, gerontological and critical care processes, when planning and offering health education to the individual, family, groups, and community in different health scenarios.
	ENFE 4102 – Family and Community Selfcare	Examine the professional relationship as a member of a discipline and interprofessional team from a professional and ethical perspective in the process of problem solving, critical thinking and decision making in preservation, client safety, improvement of the environment, the natural world and health personal, by intervening with the individual, family, groups, and community in different health scenarios.
Professional Nursing Standards	ENFE 3009 – Human Sexuality	Discriminate the evidence based on nursing practice and clinical judgment through the nursing process from an interprofessional perspective, by providing safe and quality care when it intervenes

Documents	Course Code	Course Objective
(CPEPR)		with the individual, family, groups, and community in different health scenarios.
	ENFE 4207 – Nursing Process and Pathophysiology	Judge the concepts of self-care requirements in the promotion, prevention, maintenance, education, nursing diagnoses and rehabilitation of the individual, family, groups, and community with health deviations in different scenarios.
Safety Guidelines (OSHA)	ENFE 3105 – Nursing Process and Physical Examination	Assess the professional and environmental risks that impact nursing practice in different health settings when applying the nursing process and direct care to the patient.
	ENFE 4102 – Family and Community Selfcare	Assess the professional and environmental risks that impact nursing practice in different health settings when intervening with the individual, group, family, and community.
	ENFE 4208 - Administration, Leadership, Management and Nursing Practice	Assess the professional and environmental risks that impact nursing practice in different health settings when offering nursing care and when supervising that care provided by personnel under their supervision.
Patient's Rights	ENFE 3104 - Theory, Models y Roles in Nursing	Interpret the different conceptual models, nursing theories and legal ethical aspects through logical and quantitative reasoning, protecting the rights of patients when intervening with the individual, family, groups, and community in different health scenarios.
AACN Essentials of Baccalaureate Nursing Education 2008	ENFE 4101 – Research in Nursing	Contrast the ethical and legal principles of the research process, the nursing process, and the decision-making process when offering care to individuals, families, groups, and the community in different health settings.
	ENFE 3104 - Theory, Models and Roles in Nursing	Discuss the conceptual and theoretical models of nursing around interpersonal and therapeutic relationships, required to deal with activities in daily life and to offer humanistic and assertive care to healthy people and with health deviations to the family, groups and community in different health scenarios.
	ENFE 4102 – Family and Community Selfcare	Integrate positive interpersonal relationships, using various efficient and effective referral resources to promote, maintain, and restore health to individuals, families, groups, and communities in different health settings.
ADA Law	ENFE 3004 – Bioethics	Distinguish legal ethical concepts, to formulate critical judgments and make decisions with the interprofessional team, in nursing care offered in different health scenarios to the individual, family, groups and community.
	ENFE 4101 – Research in Nursing	Contrast the ethical and legal principles of the research process, the nursing process, and the decision-making process when offering care to individuals, families, groups, and the community in different health settings.
American Nurses Association (ANA)	ENFE 4102 – Family and Community Selfcare	Interpret the concepts of self-care, self-esteem, self-confidence, and self-determination, when offering nursing care to the individual, families, groups, and the community in primary, secondary, and tertiary health settings.
	ENFE 4208 - Administration, Leadership,	Value leadership skills when supervising and managing nursing care in fulfilling their functions as provider and administrator of health

Documents	Course Code	Course Objective
	Management and Nursing Practice	services when intervening with individuals, families, groups, and the community in different health settings.
Quality and Safety Educationfor Nurses (QSEN)	ENFE 4208 - Administration, Leadership, Management and Nursing Practice	Evaluate the roles and responsibilities as a leader to achieve the goals and improve the practice and professional competencies in nursing care as a collaborator with the members of the interprofessional team in the administration of nursing care in different health settings.
National Patient Safety Goals (Joint Commission) 2023	ENFE 3105 – Nursing Process and Physical Examination	Carry out different interviews, health history, and physical estimates to healthy people, families, groups, and communities with health deviations in different scenarios using information gathering instruments.
	ENFE 4208 - Administration, Leadership, Management and Nursing Practice	Select leadership skills to provide safety principles in the work setting with the interprofessional team and as a member of a profession, promoting a safe care environment taking into account the organization and public policy in different health settings.

AACN Baccalaureate Essentials have identified nine (9) Essentials that delineate the outcomes expected of graduates of baccalaureate nursing programs:

I Liberal Education for Baccalaureate Generalist Nursing Practice
II Basic Organizational and Systems Leadership for Quality Care and PatientSafety
III Scholarship for Evidence-Based Practice
IV Information Management and Application of Patient Care Technology
V Healthcare Policy, Finance, and Regulatory Environments
VI Interprofessional Communication and Collaboration for Improving Patient Health Outcomes
VII Clinical Prevention and Population Health
VIII Professionalism and Professional Values
IX Baccalaureate Generalist - Practice

Table III.B.2 shows the congruence between the CUSJ and Nursing Programs Competencies; SLO; and the BSN SLO to the AACN Baccalaureate Essentials.

Table III.B.2 Congruence between the CUSJ and the Nursing Programs Competencies, AACN Baccalaureate Essentials, and BSN-SLO

CUSJ-GED Competencies	Nursing Programs Competencies	Essentials	B-SLO	A-SLO
1. Nurture in the student self-esteem, self-assurance, and self-determination.	1.1 Nurture in the student self-esteem, self-assurance, and self-determination to apply fundamental concepts of Dorothea Orem's Self-Care Theory, other theories, and basic teaching principles in the nursing practice role in different health scenarios with an individual, family, groups, and community.	II	Communication and Interpersonal Relationships	Decision Making Leadership Problem Solving
2. Develop the students' communication	2.1 Develop a person with written and oral communication skills to offer humanistic and assertive care and	I VI		

CUSJ-GED Competencies	Nursing Programs Competencies	Essentials	B-SLO	A-SLO
skills.	collaborate with other disciplines to promote an optimum health state to an individual, family, groups, and community in different scenarios.			
3. Develop the students' ability to establish positive interpersonal relationships in their daily life.	3.1 Develop a person that establishes efficient and effective interpersonal relationships when planning with the corresponding nursing and interprofessional team to offer a humanistic and responsible care to an individual, family, groups, and community in different health scenarios	VI		
4. Develop the students' logical and quantitative reasoning skills.	4.1 Develop a person with quantitative and logical reasoning when planning, offering, and evaluating a nursing care in collaboration with the interprofessional team to promote care environmental y secure working scenarios for an individual, family, groups, and community.	I III V VI	Critical Thinking	Decision Making Problem Solving
5. Empower students to make value judgments, make decisions, and adapt to society's changes.	5.1 Prepare to make sound judgments, critical thinking and decision making to apply the nursing processes and use problem solving models when adapting to political, social, and economic changes along with organizational ethical, legal, regulatory, and political changes to offer care to an individual, family, groups, and community.	III V IX		
6. Develop in the learner appreciation for their cultural and historical heritage.	6.1 Develop in the student the appreciation for the nursing historic and transcultural heritage when offering a humanistic care to an individual, family, groups, and community on different life cycles.	I IX	Critical Thinking Therapeutic Interventions	Decision Making Leadership Problem Solving
7. Promote the appreciation, preservation and improvement of the environment, the natural world and personal health.	7.1 Cultivate appreciation, security, preservation and wellbeing of the environment, the natural world and personal health, applying the knowledge of biological and behavioral sciences, security measures of clients and of nursing when valuing human needs of an individual, family, groups, and community.	II VII VIII		
8. Develop students' willingness to assume	8.1 Develop a person that takes leadership, professional values, abides to duty, supervise, and administers nursing care, advocates	II VIII IX	Critical Thinking Communication	Decision Making Leadership

CUSJ-GED Competencies	Nursing Programs Competencies	Essentials	B-SLO	A-SLO
leadership roles, fulfill their civic duties and responsibilities and contribute to the economy of their country.	for citizen rights, and contributes with the economy of the country.		and Interpersonal Relationships	Problem Solving
9. Develop students' technological knowledge and its applications.	9.1 Develop students' technological knowledge with a high skill level and specialized and basic technical skills abilities to fulfill biological, social, spiritual, and emotional needs of the individual through health care levels in different scenarios.	IV	Critical Thinking Therapeutic Interventions	Decision Making Leadership Problem Solving

The Essentials are incorporated in the BSN program courses giving the elements for the body of knowledge in the development of the curricula and the future professional nurses' development. The expected transformation of the nursing students is described in the roles that are potentiated by the Nursing Concepts and the BSN-SLO. The courses and the clinical experience reflect the operationalization of the elements to achieve the expected outcomes for which students are being prepared. CUSJ curriculum is aligned to AACN Baccalaureate Essentials 2008, and Nursing Roles and Concepts (Table III.A.3 and Appendix III.A.1 – Course Descriptions).

Table III.B.3 AACN Baccalaureate Essentials Alignment to Nursing Concepts, Roles, and Courses

ESSENTIALS	NURSING CONCEPTS	ROLES	COURSES
I III VI	Patient-Centered Care Interprofessional Teams	Leader Care Agent	ENFE 3104 - Theory, Models y Roles in Nursing
IX	Quality Improvement Compassionate Care Patient Security	Care Agent	ENFE 3105 – Nursing Process and Physical Examination
I	Evidenced BasedPractice Quality Improvement Patient Care	Care Agent Educator	ENFE 3205 – Core in Nursing
IV	Quantitative Reasoning Social Determinants of Health	Researcher Educator	ENFE 4101 – Research in Nursing
V VI	Communication Cultural Sensitivity Health Environments	Care Agent	ENFE 4102 – Family and Community Selfcare
IX	Patient Centered Care Clinical Judgement Patient Security	Advisor	ENFE 4207 – Nursing Process and Pathophysiology
VIII	Informatics Health Policy Quantitative Reasoning	Leader	ENFE 4208 - Administration, Leadership, Management and Nursing Practice
VIII	Quality Improvement Ethics	Advisor	ENFE 3004 – Bioethics
II	Patient Security	Caretaker	ENFE 3006 – Critical Care

ESSENTIALS	NURSING CONCEPTS	ROLES	COURSES
	Clinical Judgement		
VII	Quality Improvement Social Determinants of Health	Agent of Change	ENFE 3008 – Gerontology
VII	Life Cycle Practice Diversity, Equity, Inclusion Patient Security	Agent of Change	ENFE 3009 – Human Sexuality

Roles based on *Fundamentos de Enfermeria* of Potter / Perry, 2019

III-C. Master's curricula are developed, implemented, and revised to reflect relevant professional nursing standards and guidelines, which are clearly evident within the curriculum and within the expected student outcomes (individual and aggregate).

- **Master's program curricula incorporate professional standards and guidelines as appropriate.**
  a. **All master's degree programs incorporate *The Essentials of Master's Education in Nursing* (AACN, 2011) and additional relevant professional standards and guidelines as identified by the program.**
  b. **All master's degree programs that prepare nurse practitioners incorporate *Criteria for Evaluation of Nurse Practitioner Programs* (NTF, 2016).**
- **Graduate-entry master's program curricula incorporate *The Essentials of Baccalaureate Education for Professional Nursing Practice* (AACN, 2008) and appropriate graduate program standards and guidelines.**

This key element is not applicable if the master's degree program is not under review for accreditation.

Elaboration: The master's degree program incorporates professional nursing standards and guidelines relevant to that program and each track offered. The program clearly demonstrates where and how content, knowledge, and skills required by identified sets of standards are incorporated into the curricula.

Master's degree APRN education programs (i.e., clinical nurse specialist, nurse anesthesia, nurse midwife, and nurse practitioner) incorporate separate comprehensive graduate-level courses to address the APRN core, defined as follows:

- *Advanced physiology/pathophysiology, including general principles that apply across the lifespan;*
- *Advanced health assessment, which includes assessment of all human systems, advanced assessment techniques, concepts and approaches; and*
- *Advanced pharmacology, which includes pharmacodynamics, pharmacokinetics, and pharmacotherapeutics of all broad categories of agents.*

Additional APRN core content specific to the role and population is integrated throughout the other role and population-focused didactic and clinical courses.

Master's degree programs that have a direct care focus but are not APRN education programs (e.g., nurse educator and clinical nurse leader) incorporate graduate-level content addressing the APRN core. These programs are not required to offer this content as three separate courses.

Program Response:

This Key Element does not apply to CUSJ BSN Program.

III-D. DNP curricula are developed, implemented, and revised to reflect relevant professional nursing standards and guidelines, which are clearly evident within the curriculum and within the expected student outcomes (individual and aggregate).

- **DNP program curricula incorporate professional standards and guidelines as appropriate.**
  a. **All DNP programs incorporate *The Essentials of Doctoral Education for Advanced Nursing Practice* (AACN, 2006) and additional relevant professional standards and guidelines if identified by the program.**
  b. **All DNP programs that prepare nurse practitioners incorporate *Criteria for Evaluation of Nurse Practitioner Programs* (NTF, 2016).**
- **Graduate-entry DNP program curricula incorporate *The Essentials of Baccalaureate Education for Professional Nursing Practice* (AACN, 2008) and appropriate graduate program standards and guidelines.**

This key element is not applicable if the DNP program is not under review for accreditation.

Elaboration: The DNP program incorporates professional nursing standards and guidelines relevant to that program and each track offered. The program clearly demonstrates where and how content, knowledge, and skills required by identified sets of standards are incorporated into the curricula.

DNP APRN education programs (i.e., clinical nurse specialist, nurse anesthesia, nurse midwife, and nurse practitioner) incorporate separate comprehensive graduate-level courses to address the APRN core, defined as follows:

- *Advanced physiology/pathophysiology, including general principles that apply across the lifespan;*
- *Advanced health assessment, which includes assessment of all human systems, advanced assessment techniques, concepts and approaches; and*
- *Advanced pharmacology, which includes pharmacodynamics, pharmacokinetics, and pharmacotherapeutics of all broad categories of agents.*

Additional APRN core content specific to the role and population is integrated throughout the other role and population-focused didactic and clinical courses.

Separate courses in advanced physiology/pathophysiology, advanced health assessment, and advanced pharmacology are not required for students enrolled in post-master's DNP programs who hold current national certification as advanced practice nurses, unless the program deems this necessary.

Program Response:

This Key Element does not apply to CUSJ BSN Program.

III-E. Post-graduate APRN certificate program curricula are developed, implemented, and revised to reflect relevant professional nursing standards and guidelines, which are clearly evident within the curriculum and within the expected student outcomes (individual and aggregate). Post-graduate APRN certificate programs that prepare nurse practitioners incorporate *Criteria for Evaluation of Nurse Practitioner Programs* (NTF, 2016).

This key element is not applicable if the post-graduate APRN certificate program is not under review for accreditation.

Elaboration: The post-graduate APRN certificate program incorporates professional nursing standards and guidelines relevant to that program and each track offered. The program clearly demonstrates where and how content, knowledge, and skills required by identified sets of standards are incorporated into the curricula.

APRN education programs (i.e., clinical nurse specialist, nurse anesthesia, nurse midwife, and nurse practitioner) incorporate separate comprehensive graduate-level courses to address the APRN core, defined as follows:

- *Advanced physiology/pathophysiology, including general principles that apply across the lifespan;*
- *Advanced health assessment, which includes assessment of all human systems, advanced assessment techniques, concepts and approaches; and*
- *Advanced pharmacology, which includes pharmacodynamics, pharmacokinetics, and pharmacotherapeutics of all broad categories of agents.*

Additional APRN core content specific to the role and population is integrated throughout the other role- and population-focused didactic and clinical courses.

Separate courses in advanced physiology/pathophysiology, advanced health assessment, and advanced pharmacology are not required for certificate students who have already completed such courses, unless the program deems this necessary.

Program Response:

This Key Element does not apply to CUSJ BSN Program.

III-F. The curriculum is logically structured to achieve expected student outcomes.

- **Baccalaureate curricula build on a foundation of the arts, sciences, and humanities.**
- **Master's curricula build on a foundation comparable to baccalaureate-level nursing knowledge.**
- **DNP curricula build on a baccalaureate and/or master's foundation, depending on the level of entry of the student.**
- **Post-graduate APRN certificate programs build on graduate-level nursing competencies and knowledge base.**

Elaboration: Baccalaureate degree programs demonstrate that knowledge from courses in the arts, sciences, and humanities is incorporated into nursing practice. Graduate-entry programs in nursing incorporate the generalist knowledge common to baccalaureate nursing education as delineated in The Essentials of Baccalaureate Education for Professional Nursing Practice *(AACN, 2008) as well as advanced nursing knowledge.*

Graduate programs are clearly based on a foundation comparable to a baccalaureate degree in nursing. Graduate programs delineate how students who do not have a baccalaureate degree in nursing acquire the knowledge and competencies comparable to baccalaureate education in nursing as a foundation for advanced nursing education. Programs that move students from basic nursing preparation (e.g., associate degree or diploma education) to a graduate degree demonstrate how these students acquire the baccalaureate-level knowledge and competencies delineated in The Essentials of Baccalaureate Education for Professional Nursing Practice *(AACN, 2008), even if they do not award a baccalaureate degree in nursing in addition to the graduate degree.*

DNP programs, whether post-baccalaureate or post-master's, demonstrate how students acquire the doctoral-level knowledge and competencies delineated in The Essentials of Doctoral Education for Advanced Nursing Practice *(AACN, 2006). If the program awards the master's degree as part of the DNP program, the program demonstrates how students acquire the master's-level knowledge and competencies delineated in* The Essentials of Master's Education in Nursing *(AACN, 2011) and, if applicable,* Criteria for Evaluation of Nurse Practitioner Programs *(NTF, 2016).*

The program provides a rationale for the sequence of the curriculum for each program.

Program Response:

The BSN curriculum is logically structured to achieve expected student outcomes. The program is designed as an articulated ADN to BSN, where the student enters the bachelor's degree program after completing an ADN from an authorized Institution in Puerto Rico. The BSN Program's curriculum has fifty (57) credits to obtain the bachelor's degree integrating concentration courses with courses from the General Education Department to provide a holistic academic development. Courses in the fields of science, mathematics, and humanities add and complete a professional development recognizing that liberal arts education promotes and complements knowledge enhancement into intellectual skills required to exert a high-level nursing practice. The courses included are distributed as concentration, general education, and guided electives (Table III.F.1).

Table III.F.1 BSN Curriculum Sequence with Concentration, Guided Elective, and General Education Courses

CONCENTRATION COURSES		
Code	Course Title	Prerequisites
	First Semester	
ENFE 3104	Theory, Models and Roles in Nursing	--
ENFE 3105	Nursing Process and Physical Examination	--
ENFE 3205	Core in Nursing	--
ELEC DIR	Guided Elective Course	--
	Second Semester	
ENFE 4101	Research in Nursing	ESTA 2255 ENFE 3105
ENFE 4102	Family and Community Selfcare	ENFE 3105 ENFE 4101
ELEC DIR	Guided Elective Course	**
	Third Semester	
ENFE 4207	Nursing Process and Pathophysiology	ENFE 3104, 3105, 3205, 4101, 4102
ENFE 4208	Administration, Leadership, Management and Nursing Practice	ENFE 3104, 3105, 3205, 4101, 4102
ELEC DIR	Guided Elective Course	--

GENERAL EDUCATION COURSES		
Code	Course Title	Prerequisites
	First Semester	
ESTA 2255	Basic Statistics	LICO 1101 ENFE 1005
CISO 1101	Social Science I	--
	Second Semester	
HUMA 1101	Study of Occidental Civilization I	--
QUIM 1010	General Chemistry	--
QUIM 1010L	General Chemistry Lab	QUIM 1010
	Third Semester	
HIST 1103	Historia de Puerto Rico	--
HUMA 1102 or CISO 1102	Study of Occidental Civilization II	HUMA 1101/
	Social Science II	CISO 1101

Guided Elective Courses
ENFE 3004 – Bioethics
ENFE 3006 – Critical Care
ENFE 3008 – Gerontology
ENFE 3009 – Human Sexuality

The guided elective courses are added to the concentration courses in credit count. Even though the liberal arts courses (general education) are extremely important to foster a holistic professional, it accounts for one-third of the total amount of credits of the Program and is distributed in all semesters to balance the academic load in concentration courses (Table III.F.2). This reinforces the applied knowledge for nursing developing disciplines through Critical Thinking, Therapeutic Intervention, and

Communications and Interpersonal Relationships (B-SLO) with an emphasis in Decision Making, Problem Solving and Leadership Skills (A-SLO).

Table III.F.2 Percentage of Concentration, Guide Courses, and General Education Courses in the BSN Curriculum Sequence

	Credits	Theory hours	Lab Hours	% Credits	% Theory hours	% Lab Hours
Concentration courses	38	33	12	66.7%	64.7%	80.0%
General Education courses	19	18	3	33.3%	35.3%	20.0%
TOTAL	57	51	15	100.0%	100.0%	100.0%

Understanding the importance of providing a complete education in nursing disciplines, the BSN curriculum also builds upon a foundation of the arts, sciences, and humanities and it articulates the knowledge to be incorporated into the nursing practice.

III-G. Teaching-learning practices:

- **support the achievement of expected student outcomes;**
- **consider the needs and expectations of the identified community of interest; and**
- **expose students to individuals with diverse life experiences, perspectives, and backgrounds.**

Elaboration: Teaching-learning practices (e.g., simulation, lecture, flipped classroom, case studies) in all environments (e.g., virtual, classroom, clinical experiences, distance education, laboratory) support achievement of expected student outcomes identified in course, unit, and/or level objectives.

Teaching-learning practices are appropriate to the student population (e.g., adult learners, second-language students, students in a post-graduate APRN certificate program), consider the needs of the program-identified community of interest, and broaden student perspectives.

Program Response:

CUSJ is structured and equipped for the use of varied pedagogical approaches that accommodate different learning styles to foster didactic and clinical instruction for BSN-SLO achievement. CUSJ capabilities provide access to the full range of academic support services and educational tools for classrooms. The instructional processes include different theories, concepts, and trends that strengthen the curriculum in educational philosophy, human growth and development, humans' needs, roles, and social interaction. The program uses an interdisciplinary approach to present the curriculum by collaborating with the General Education faculty to provide a well-rounded education to the students.

The BSN Program faculty has adopted and utilizes a variety of teaching strategies in the classroom and in a variety of clinical teaching-learning practice settings. Table III.G.1 shows examples of teaching-learning strategies and the environments in the nursing courses where these strategies can take place in.

Table III.G.1 BSN Courses, Teaching Strategies, and Environments

BSN Courses	Examples	
	Teaching Strategies	Environments
ENFE 3104 Theory, Models and Roles in Nursing	Case Study Analysis, Clinical Situation Discussions, Internet Search, Troubleshooting Process	Classroom, Library Resources

BSN Courses	Examples	
	Teaching Strategies	Environments
ENFE 3105 Nursing Process and Physical Examination	Demonstration of Therapeutic Interventions (Physical Examination), Guided Discussion, Nursing Process Application, Practice Exams, Simulation, Supervised Practice	Classroom, Clinical Simulation, Library Resources, Skill Laboratory
ENFE 3205 Core in Nursing	Article Analysis, Collaborative Work, Internet Search	Classroom, Library Resources
ENFE 4101 Research in Nursing	Cooperative Learning, Evidence Based Project, Independent Studies, Internet Quest, Project, Research Article Analysis	Classroom, Clinical Scenario, Community, Library Resources
ENFE 4102 Family and Community	Cooperative Learning, Internet Search, Patient Selfcare Education, Reflexive Diary	Classroom, Clinical Scenario (Community, Elderly Homes, Schools), Library Resources
ENFE 4207 Nursing Process and Pathophysiology	Clinical Case Analysis, Conference, Independent Work, Internet Search	Classroom, Library Resources
ENFE 4208 Administration, Leadership, Management and Nursing Practice	Document Analysis, Exercise Practices (Hypothetical Cases, Categorization, Tasks Assignment, Shift Program), Integration of Therapeutic Skills, Role Play	Classroom, Hospital Clinical Scenario, Clinical Simulation Hospital Clinical Scenarios, Library Resources, Skill Laboratory
Guided Elective Courses		
ENFE 3004 Bioethics	Internet Search, Interviews, Learning Reflexive Journal, Newspaper Articles Analysis	Classroom, Library Resources
ENFE 3006 Critical Care	Case Discussion, Hypothetical Situations Analysis, Small Group Discussions	Classroom, Clinical Simulation, Library Resources, Skill Laboratory
ENFE 3008 Gerontology	Group Discussion, Collaborative Work, Debate, Internet Search	Classroom, Library Resources
ENFE 3009 Human Sexuality	Socialized Discussion, Collaborative Work, Internet Quest, Leading Questions, Written Immediate Reaction	Classroom, Library Resources

The strategies are designed to provide students with an opportunity to gain experience in a safe environment and to acquire BSN-SLO prior and during real-life clinical experiences. Students are exposed to a variety of scenarios for nursing care development. Students become active participants in patient care in the health care scenario of Puerto Rico. The clinical teaching-learning practices provided by faculty and health care providers become particularly important. Some of these settings are advanced, others provide regular services, and all health facilities provide the educational clinical experiences required by students for their development as future professional nurses. New students challenge faculty to develop knowledge, abilities, and skills to render effective educational approaches. For this reason, it is pertinent to use communication technology. The BSN Program prepares students to develop their critical thinking skills to ensure that they achieve the stated objectives/outcome. Students apply evidence-based nursing therapeutic interventions with the purpose of providing safe and quality care to the patient/client and as a scientific tool to guide their practice and to increase and strengthen the body of knowledge in the nursing field. This challenge also puts faculty into a position to prepare constantly on multiple teaching and learning strategies and environments that support the achievement of expected individual BSN-SLO identified in the course, unit, and/or level objectives. Table III.G.2 presents some examples that can show how some of the teaching-learning strategies and environments support the achievement of expected BSN-SLO.

Table III.G.2 Examples of Strategies and Environments that Support Achievement of BSN-SLO

Course: ENFE 4101- Research in Nursing **SLO:** Critical Thinking **BSN SLO:** Decision Making and Problem Solving		
Nursing Programs Competencies	**Teaching Strategies**	**Environment**
4.1. Develop a person with quantitative and logical reasoning when planning, offering, and evaluating a nursing care in collaboration with the interprofessional team to promote care environmental y secure working scenarios for an individual, family, groups, and community. 5.1. Prepare to make sound judgments, critical thinking and decision making to apply the nursing processes and use problem solving models when adapting to political, social, and economic changes along with organizational ethical, legal, regulatory, and political changes to offer care to an individual, family, groups, and community.	• Analysis Review • Case study • Cooperative learning • Discussion of clinical situations • Evidence base project • Independent studies • Internet quest • Research article analysis • Small group discussion • Socratic Method	• Classroom • Clinical scenario • Community • Library resources
Courses: ENFE 3105 - Nursing Process and Physical Examination ENFE 4102 - Family and Community Selfcare **SLO:** Therapeutic Interventions **BSN SLO:** Leadership and Problem Solving		
Nursing Programs Competencies	**Teaching Strategies**	**Environment**
7.1 Cultivate appreciation, security, preservation and wellbeing of the environment, the natural world and personal health, applying the knowledge of biological and behavioral sciences, security measures of clients and of nursing when valuing human needs of an individual, family, groups, and community. 9.1. Develop students' technological knowledge with a high skill level and specialized and basic technical skills abilities to fulfil biological, social, spiritual, and emotional needs of the individual through health care levels in different scenarios.	• Case study • Cooperative learning • Demonstration of physical examination • Guided discussion • Internet quest • Interprofessional activities • Nursing process application • Patient self care education • Practice exams • Reflexive diary • Role play • Simulation • Supervised practice	• Classroom • Clinical scenarios (Community, Elderly Homes, Hospitals, Schools) • Clinical simulation • Library resources • Skill laboratory
Course: ENFE 4208 - Administration, Leadership, Management and Nursing Practice **SLO:** Communication and - Interpersonal Relationship **BSN SLO:** Decision Making, Leadership and Problem Solving		
Nursing Programs Competencies	**Teaching Strategies**	**Environment**
2.1. Develop a person with written and oral communication skills to offer humanistic and assertive care and collaborate with other	• Analysis review • Case study • Group discussions	• Classroom

	disciplines to promote an optimum health state to an individual, family, groups, and community in different scenarios. 3.1. Develop a person that establishes efficient and effective interpersonal relationships when planning with the corresponding nursing and interprofessional team to offer a humanistic and responsible care to an individual, family, groups, and community in different health scenarios.	• Role play • Situation analysis • Socratic method • Workshops	• Hospital clinical scenarios • Library resources • Skill laboratory

One of the benefits of the period during the COVID-19 Pandemic was the development of videos on a case study of a standardized patient situation as a teaching strategy. The objective of the recording with the students is to demonstrate problem-solving, decision-making, and leadership skills. This complemented the clinical experiences at the agencies or hospitals they attended exposing students to diverse life experiences, perspectives, and backgrounds. These videos were later used to write a self-assessment of their performance on how they completed the expected process: five (5) incorrect points observed, five (5) correct ones observed, mention five (5) nursing actions that will be carried out to improve the safety of the intervention (VR-12). At the end of the simulation, the student is required to write a nursing note to evaluate their intervention during the simulation.

This information is shared with the Community of Interest which meets at least once a year, either face-to-face or by teleconference, to address issues, with particular emphasis on the preparation of graduates to fulfill needed roles in the health care scenario. It is consistently consulted or considered in the form of survey and outcome data, throughout the curriculum evaluation and revision process to ensure that course content, sequencing, and overall program design are responsive to their needs. Additionally, faculty members in the meeting who teach in the BSN Program address the educational and transitional needs of new graduate nurses. Feedback from the Committee is important in maintaining the currency and relevancy of the curriculum. The Community of Interest received and endorsed the determination of the BSN program to have a wide variety of teaching methods to cover the diversity of learning methods that students have and increase the opportunity to achieve meaningful learning.

Periodic review at the program and course levels is ongoing, based on faculty assessments, student evaluation feedback, employer concerns, and emerging developments in scholarship. These meetings provide a more formal and intentional forum for input into our curriculum from outside stakeholders. Feedback from our Community of Interest and Faculty contributes to curricular updates in the BSN Program (see Table III.G.3).

Table III.G.3 Examples of Curricular Changes in Response to our Community of Interest or Faculty

Group	Issue	Plan	Outcomes
Community of Interest (VR-5)	Make a more detailed analysis of the statistical results related to the outcomes.	Complete the analysis to then explain to the faculty and Community of Interest the detailed results.	• The outcomes analysis was completed by HRSD Curriculum Committee and presented to the faculty and the Community of Interest. • Faculty will identify through Course Leader Teams meeting best practice teaching approaches to continue fostering student success.
Faculty	Rubrics standardization (VR-13)	Analyze the rubric's information to revise the portions that need standardization regarding SLO and	• The courses' evaluation criteria were verified from the definition to the grading percentage distribution. This led to verifying the rubrics for every criterion and the revision and implementation of the revised rubrics.

Group	Issue	Plan	Outcomes
		communication with students.	

The input of the Community of Interest as to their view on how the BSN Program needs can be met has helped to improve the overview of the Program outcomes and proven to be appropriate suggestions and recommendations for the best practices on the teaching and learning process and to the BSN curriculum. Also, the Faculty's view and understanding of the rubrics standardization and communication to students redirects and improves BSN students' chances for success. In summary, BSN curriculum teaching-learning practices support the achievement of expected student outcomes; consider the needs and expectations of the identified community of interest; and expose students to individuals with diverse life experiences, perspectives, and backgrounds.

III-H. The curriculum includes planned clinical practice experiences that:

- **enable students to integrate new knowledge and demonstrate attainment of program outcomes;**
- **foster interprofessional collaborative practice; and**
- **are evaluated by faculty.**

Elaboration: To prepare students for a practice profession, each track in each degree program and each track in the post-graduate APRN certificate program affords students the opportunity to develop professional competencies and to integrate new knowledge in practice settings aligned to the educational preparation. Clinical practice experiences include opportunities for interprofessional collaboration. Clinical practice experiences are provided for students in all programs, including those with distance education offerings. Clinical practice experiences align with student and program outcomes. These experiences are planned, implemented, and evaluated to ensure students are competent to function as members of interprofessional teams at the level for which they are being prepared.

Programs that have a direct care focus (including, but not limited to, post-licensure baccalaureate and nurse educator tracks) provide direct care experiences designed to advance the knowledge and expertise of students in a clinical area of practice.

Program Response:

Clinical experiences broaden students' views in current nursing scenarios where they can put into practice their learning and can further develop critical thinking; adequate therapeutic interventions; and communications and interpersonal relationships while getting a better understanding of how and when to make evidence-based decisions; how and when to act when solving problems; and how and when to take leadership as a nursing professional. There is information regarding the clinical practice experiences in:

- Course Descriptions
- Affiliation Agreements
- Evaluation Processes

CUSJ BSN Program has a direct care focus with direct patient care clinical experiences designed to advance the knowledge and expertise of students in a clinical area of practice consistent with the AACN *Essentials of Baccalaureate Education for Professional Nursing Practice* 2008 expectations for clinical experiences within a baccalaureate program. BSN Program has integrated into the curriculum clinical practice experiences into the Family and Community Self-care course (ENFE 4102-L) and Administration, Leadership, Management, and Nursing Practice course (ENFE 4208-L). Both courses have three (3) hours of theory class and six (6) hours of clinical experience. All clinical experiences are aligned with the respective course objectives and learning outcomes. Course descriptions are presented as follows:

- ENFE 4102 – Family and Community Selfcare
  The course is designed on a broad foundation of the nursing process directed toward the individual, family, and community. It pursues the prevention at primary, secondary, and tertiary levels of community diseases throughout the life cycle. It focuses on the promotion of the physical, social, emotional, and spiritual health of human beings. It discusses key modern and traditional public health concepts such as roles and functions, ethics, morals, legal, culture, value, politics, leadership, and basic human needs. It delves into the technical skills of communication, intervention, problem solving, collaborative process, epidemiology, education, and the use of the self, among others.

- ENFE 4208 - Administration, Leadership, Management and Nursing Practice
  The course provides the student with knowledge and skills to develop as nursing professionals in their leadership and administrative roles. It analyzes the theories of leadership and management. It includes concepts such as communication, management principles, problem solving models, stress management, motivation, conflict, risk management and budgeting among others. Self-determination and appreciation for their historical heritage and culture is cultivated in the student. The development of logical and quantitative reasoning skills is promoted. The students are expected to demonstrate the application of critical thinking, to integrate research process and make evaluative judgment in their decision making. The appreciation and improvement of the environment and its development is encouraged as professionals who apply the concepts of ethics and values, and who assumes leadership in their duties.

CUSJ has affiliation agreements with a variety of clinical scenarios where students receive their clinical education and have the opportunity of integrating their new knowledge to achieve the program outcomes (VR-14). This offers a wide variety of learning environments where students can develop competencies as part of their clinical education process. Students experience in diverse clinical scenarios and teaching sites with the supervision and support of faculty members exposes them to populations that represent different sexes, ages, communities, cultures, ethnicities, and socioeconomic and educational backgrounds. The clinical options available to CUSJ students result in a wide range of experiences in a variety of settings, with geographically diverse populations. The faculty is aware that appropriate clinical experience facilities are vital to the learning process, and thus make every effort to choose the best clinical setting to fulfill each clinical course's objectives. The faculty is actively involved in the evaluation and recommendation of different agencies to be used according to the clinical experiences required.

Students are under the supervision of a faculty member who oversees the planning and organizing of the clinical experiences according to course clinical objectives. Each faculty member is responsible for students' skills development, giving groundwork information of the clinical setting to better approach each scenario, providing practice, if necessary, in the NSTIC, coordinating the students' orientation with clinical site personnel, and coordinating tutoring sessions, among other tasks. Faculty members always accompany students in clinical teaching settings at the hospital and community settings and evaluate them on their performances. Students are distributed in groups of seven (7) in hospital settings for the Administration, Leadership, Management, and Nursing Practice course (ENFE 4208) and up to fourteen (14) students for the Family and Community Self-care course (ENFE 4102).

Clinical settings, accredited by the Joint Commission on Accreditation of Healthcare Organizations (JCAHO), and other healthcare scenarios like community-based health services, provide the educational scenarios experiences required for their development as future professional nurses through an interprofessional collaborative practice (Table III.H.1). These health settings and learning environments are aligned with the courses and provide learning opportunities in long-term, assisted living, acute, chronic, outpatient, and community/public care settings with individuals, families, and populations across the lifespan. Practice learning environments used for students are selected to foster the competencies necessary for contemporary nursing practice, which are congruent with BSN-SLO.

Table III.H.1 Current Affiliated Agencies for Clinical Practice, Description and Courses Agency

CURRENT AFFILIATED AGENCIES FOR CLINICAL PRACTICE	
ENFE 4102-L - Family and Community Self-care	
Agency	Description of Agency
El Maestro Aegis Hato Rey, PR Coordinator: Mildred Valentín	Home care nursing services, health promotion and maintenance. Primary care level.
Elemental School Dr. Modesto Rivera Rivera Urb. Villa Carolina, Carolina, PR Coordinator: Dania Navarro Adorno	School nursing services, health promotion and maintenance. Primary care level.
Elemental School Pedro Carlos Timothee Puerto Nuevo, San Juan, PR Coordinator: Diana Camacho de Jesús	
Elemental School Abraham Lincoln Sol Street, San Juan, PR Coordinator: Christie Elias	
ENFE 4208-L - Administration, Leadership, Management and Nursing Practice	
Agency	Description of Agency
Doctor's Center Hospital San Juan, PR Coordinator: Yadira Santiago	Care providers that develop student skills as managers for clients of all ages. Tertiary care general hospital.
San Juan Municipal Hospital Medical Center of Puerto Rico Río Piedras, PR Coordinator: Ana Vaquiz	Care providers and managers for individuals of all ages with acute and chronic health problems. Tertiary care general hospital.
Auxilio Mutuo Hospital San Juan, PR Coordinator: Monserrat Plácido	Care providers and managers for individuals of all ages with acute and chronic health problems. Tertiary care general hospital.
Centro Comprensivo de Cáncer Hospital San Juan, PR Coordinator: Maribel Meléndez	Care providers to meet a prevailing need of the population regarding cancer prevention, diagnosis and treatment in young people and adults. Tertiary care general hospital.
Ashford Hospital, San Juan, PR Coordinator: Keishla Rivera	Care providers develop skills and objectives with a preventive approach, innovative therapies, precise diagnoses, and personalized treatments to improve quality of life for all populations. Tertiary care general hospital.

BSN students have direct care experiences in these agencies or community settings with faculty supervision and with the agency's coordinator as a facilitator to attain clinical experience objectives and achieve interprofessional experiences during the clinical experience. The Family and Community Selfcare (ENFE 4102-L) and Administration, Leadership, Management and Nursing Practice (ENFE 4208-L) courses provide the opportunity of interprofessional teamwork, collaboration, and coordination https://journals.stfm.org/familymedicine/2021/july-august/arenson-2021-0223/. During the clinical experience, BSN students have the opportunity to interact with people at different communities and clinical settings with nursing professionals at different levels of nursing, health professionals, and community leaders. Professional training is tied to the course objectives and present in the clinical competencies that students must develop to complete their preparation and practice the nursing profession while developing BSN-SLO.

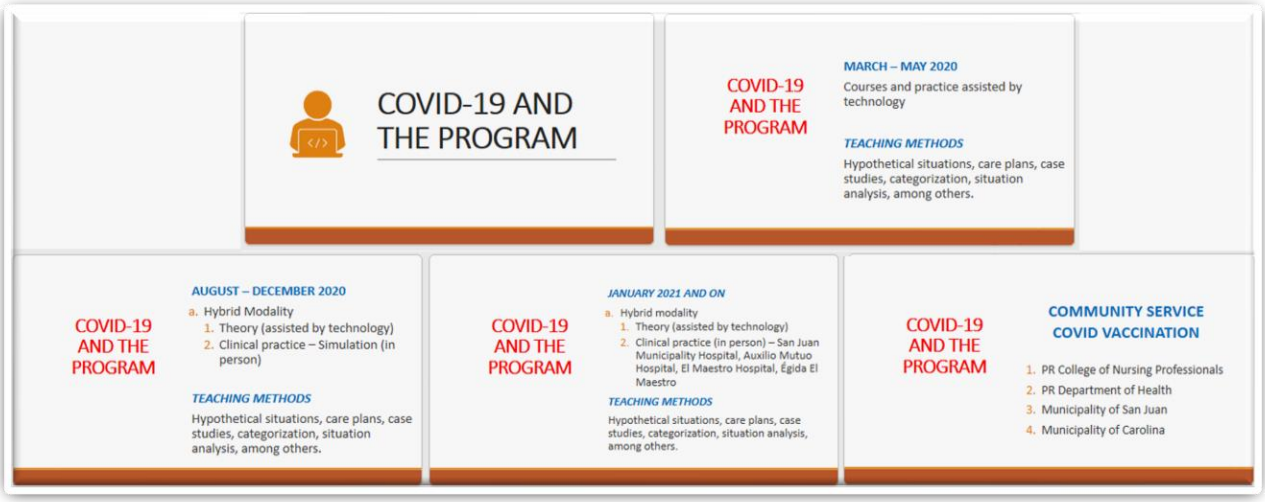
The Family and Community Selfcare (ENFE 4102-L) clinical experience works on the interprofessional concept through educational talks and health fairs in different health settings in the community coordinated with BSN students, the course professor, and the leader or provider. Some examples are a joint venture with doctors, nutritionists, and optometrists from the School of Optometry of the Inter-American University; vaccination with Voces de PR; and BSN students' clinical talks on vital signs, glucose, weight, orientation of primary and secondary prevention, together with the College of Glucose and Cholesterol Medical Technologists. At the community setting students in teams are assigned a family and they evaluate them through an interview with Family and Community Estimate Instrument (ENFE 4102-L) (VR-15) collecting information on household needs that are measured. Referrals may be written in coordination with the community leader. Health promotion is provided through educational talks on primary and secondary prevention. To impact the entire assigned community, a health fair is held every semester with educational talks on nutrition, vaccination, vital signs, glucose, and weight, among other issues. Another dimension on the community are the educational activities provided to schools that impact students, teachers, and parents if present which are an extension on teamwork, collaboration, and coordination approach as these activities are geared to support the highest priority topics identified by the school according to their population: nutrition, weight, menstruation; use of alcohol and drugs; teenage pregnancy; physical activity, among others. Another population of the community impacted by BSN students in this clinical experience is older adults in the Teachers Aegis. BSN students offer the general process explained before with the community and in schools.

The Administration, Leadership, Management and Nursing Practice (ENFE 4208-L) clinical experience works on the interprofessional concept through the interaction with different levels of nursing (ADN, BSN, MSN, and LPN), health professionals, and administrative personnel in the clinical setting at the San Juan Municipal Hospital, and Doctor's Center, among others. The first interaction between the interprofessional team occurs with the participation of the Orientation to the Clinical Area with the Human Resources department personnel and the Education Coordinators. The clinical setting mission, vision, standards, and policies are discussed with BSN students; and they are exposed to the Department of Nursing processes and procedures at the different clinical areas assigned for the practice of nursing students. The participation of nursing students is also developed with interprofessional teamwork through teamwork, collaboration, and coordination between the different members of the health-related professions and those help agents who offer patient care and offer nursing services. This experience fosters and enhances BSN students' development of oral and written communication skills on different levels of care. Nursing professors are aware of these opportunities to offer them to students to the extent possible that they have the facility to participate individually or as a group. Interprofessional teams have different tasks establishing care priorities. This type of setting may include:

- Nursing team: ADN, BSN, MSN, and LPN. The work assignment is distributed after categorizing the patients mostly done with the floor supervisor or head nurse.
- Doctors and consultants: interpretation, transcription, and execution of medical orders.
- Pharmacy Department: sending medical orders, transcribing, and administering medications.
- Enterostomal Nursing: The student is exposed to entering different departments of the hospital where the patient is, from the Intensive Care Unit to the Emergency Room.
- Respiratory Therapy: Collaboration with this group is mainly support and care for the patient during different situations from a green key to endotracheal suction procedures and treatment requests.
- Nutrition and Diet Department: request and coordinate an evaluation with a clinical nutritionist, diet changes and snacks.
- Engineering Department: notify any problems with the equipment.
- Maintenance and cleaning department: the student is exposed to monitoring infection control measures from patient admission to discharge maintaining a safe care environment.
- Social work: interact with the HT when there are patients who do not have family members or who have abandoned them in the hospital.

These experiences were limited from March to December 2020 because of the COVID-19 Pandemic (Graphic III.H.1). From March to May 2020 all courses and practice were assisted by technology. From August to December 2020, CUSJ adopted a hybrid modality where the theory courses were assisted by technology and the clinical experiences were simulated experiences with the low, medium and hi fidelity simulators in the NSTIC at CUSJ because the agencies were not accepting students for the clinical experiences (VR-16). From January 2021 and on CUSJ kept the hybrid modality where the theory courses were assisted by technology and the clinical experiences were offered at the agencies that were accepting students (graphic III.H.1).

Graphic III.H.1 COVID-19 and the Program



Although during this period there were some limitations, these last three years offered an opportunity to provide service and put knowledge to the test when the COVID-19 aftermath caused so many people to be afraid and in need of health care. An example of this period was in 2021, during the Pandemic (VR-17). CUSJ students had a historical experience of participating in the staggered vaccination process organized by the Puerto Rico College of Nursing Professionals and supported by the Department of Health. The students together with the teachers participated in activities related to the vaccination process against COVID-19 at a time when access to vaccines and the process was very slow on the island. Being a staggered process, it was necessary to start vaccinating the populations of older adults and people with previous health conditions. The students had the opportunity to interact with the public and experience handling difficult people, teamwork, organizing strategies to reduce the lines of participants that formed before 7:00 am on Tuesdays and Thursdays, which were the days that the students had scheduled their clinical experience. Students had the opportunity to:

- Receive guidance from personnel of the Puerto Rico Department of Health and CDC for the vaccination, registration, and data entry process in the Vaccine Adverse Event Reporting System (VAERS)
- Interview participants, complete demographic data record, fill out vaccination cards and take consent in addition to providing verbal and written information about the COVID-19 vaccine to participants
- File immunization records
- Serve and administer the vaccine
- Take vital signs
- Observe for possible reactions
- Guide the participant about possible effects and what to do in addition to handing out an information sheet for the home

- Offer guidance for the next appointment to complete the vaccine cycle and deliver the Vaccine card to the participant

The BSN students also had this experience at the San Juan Municipal Hospital and at the Municipality of Carolina.

Faculty members always accompany students in clinical teaching settings and evaluate their performances. Each clinical practice experience has evaluation methods that include competencies specific to the course content and population and are based on BSN-SLO which allows students to develop interprofessional skills. Students' evaluations are completed by the clinical instructor/faculty at the end of the semester of the clinical experience. The evaluation rubrics are included in the course documents to ensure that students are informed of the evaluation criteria (Table III.H.2). Student evaluations are completed by the clinical instructor/faculty at the end of the clinical experience. These rubrics are signed by the student and the faculty member. Aggregate rubric results for the clinical experiences courses' evaluation criteria are shown in Table III.H.3.

Table III.H.2 Evaluation Criteria in Clinical Experience Courses

CLINICAL EXPERIENCES COURSES	EVALUATION CRITERIA	
ENFE 4102-L Family and Community Selfcare	• Clinical Competency • Community Study • Family Study	• Educational Talk • Health Clinic
ENFE 4208-L Administration, Leadership, Management and Nursing Practice	• Clinical Competency • Patient Categorization	• Situation Analysis

Table III.H.3 Aggregate rubrics results in Clinical Experience Courses

Clinical Experience Courses	Evaluation Methods	Calendar year 2022	
		WI-22	FA-22
ENFE 4102L Family and Community Selfcare	Educational Talk	95	92
	Health Clinic	97	87
	Clinical Competency	97	91
ENFE 4208L Administration, Leadership, Management and Nursing Practice	Situation Analysis	98	86
	Categorization Patient	89	94
	Clinical Competency	95	94

Evaluation methods results allow the course team leaders and the faculty that offers that course to identify and discuss nursing aspects that need further analysis and revision to improve and increase students' knowledge and skills development and faculty teaching strategies analysis.

BSN students receive structured and planned academic experiences that enable them to integrate new knowledge and demonstrate attainment of program outcomes; that foster interprofessional practice; and that are evaluated by faculty.

III-I. Individual student performance is evaluated by the faculty and reflects achievement of expected student outcomes. Evaluation policies and procedures for individual student performance are defined and consistently applied.

Elaboration: Evaluation of student performance is consistent with expected student outcomes. Grading criteria are clearly defined for each course, communicated to students, and applied

consistently. Processes exist by which the evaluation of individual student performance is communicated to students. In instances where preceptors facilitate students' clinical learning experiences, faculty may seek input from preceptors regarding student performance, but ultimately faculty are responsible for evaluation of individual student outcomes. The requirement for evaluation of student clinical performance by qualified faculty applies to all students in all programs. Faculty evaluation of student clinical performance may be accomplished through a variety of mechanisms.

Program Response:

The evaluation process is regarded as the examination of how students are achieving learning outcomes through multiple means. Feedback on evaluation results is an important aspect for students to understand and improve the learning outcomes and eventually complete the course satisfactorily. The criteria by which students will be evaluated are detailed in the course syllabus, the document that contains information to make students aware of what they need to successfully complete the course (VR-18). It includes general course information (number of credits, prerequisites, among others); course description; course content; educational methodology; evaluation criteria with definition and percentages; rules of conduct and course requirements; copyright, plagiarism, and A.D.A. Law information; and bibliography. Each syllabus explicitly lists student evaluation criteria for the course with the definition and weight given for each criterion in computing the final grade. The syllabus is handed in and discussed with students at the beginning of every course. All evaluation criteria included are defined in the course syllabus by the faculty which enables the BSN Program to evaluate in a fair and uniform manner with respect to every student. In addition, students can be clear about what every criterion means to best achieve them.

The HRSD Curriculum Committee analyses and approves the evaluation criteria included in each course which is then discussed in faculty meetings to ensure the faculty's understanding of what is expected from every student. Any modification of evaluation methodology or grading rubrics made by course faculty members must be resubmitted to the committee and approved before implementation. Evaluation rubrics are the specific document that collects individual or group evaluation which includes the rubrics' title; students and faculty names; a general introduction; instructions for evaluation; items for each B-SLO and its correspondent calculation (Critical Thinking; Therapeutic Interventions; and Communications and Interpersonal Relationships); and a summary of the results by B-SLO which is signed by the student and faculty (Appendix III.I.1 – Clinical Competencies Evaluation Criteria).

Every evaluation criterion has a specific rubric that divides the evaluation items by B-SLO which in turn is related to A-SLO. Faculty members conduct evaluations of student performance in the BSN Program at regular intervals throughout the semester. Performance in theory courses is evaluated using a variety of criteria and methodology as case studies, oral presentations, and analysis reviews, among others, for which there are rubrics developed (Table III.I.1 and VR-19).

Table III.I.1 Evaluation Criteria in Theory Courses

COURSES	EVALUATION CRITERIA	
THEORY COURSES		
ENFE 3104 - Theory, Models and Roles in Nursing	• Partial Tests • Final Test • Care Plan	• Case Study • Oral Presentation • Ethical and Professional Commitment
ENFE 3105 – Nursing Process and Physical Examination	• Partial Tests • Final Test • Quizzes	• Physical Examination • Oral Presentation • Ethical and Professional Commitment
ENFE 3205 – Core in Nursing	• Partial Tests • Final Test	• Case Study • Oral Presentation

COURSES	EVALUATION CRITERIA	
	• Bibliographic Card • Monograph	• Ethical and Professional Commitment
ENFE 4101 – Research in Nursing	• Analysis of Research Article • Partial Deliveries of the Research Project	• Research Project • Oral Presentation • Ethical and Professional Commitment
ENFE 4102 – Family and Community Selfcare	• Partial Tests • Final Test • Quizzes • Analysis Review	• Oral Presentation • Clinical Experience • Ethical and Professional Commitment
ENFE 4207 – Nursing Process and Pathophysiology	• Partial Tests • Final Test • Quizzes • Independent Work	• Situation Analysis • Written Presentation • Oral Presentation • Ethical and Professional Commitment
ENFE 4208 - Administration, Leadership, Management and Nursing Practice	• Partial Tests • Instructional Guide • Final Project	• Oral Presentation • Clinical Experience • Ethical and Professional Commitment
GUIDED ELECTIVE COURSES		
ENFE 3004 – Bioethics	• Partial Tests • Final Test • Reflexive Diary • Analysis Review	• Oral Presentation • Debate • Ethical and Professional Commitment
ENFE 3006 – Critical Care	• Partial Tests • Final Test • Quizzes	• Situation Analysis • Oral Presentation • Ethical and Professional Commitment
ENFE 3008 – Gerontology	• Partial Tests • Final Test • Quizzes • Debate	• Analysis Review • Oral Presentation • Ethical and Professional Commitment
ENFE 3009 – Human Sexuality	• Partial Tests • Final Test • Debate • Written Presentation	• Oral Presentation • Case Study • Ethical and Professional Commitment

The evaluation of student performance is linked to the expected individual BSN-SLO in each course. Faculty members dialogue with students who require additional assistance to achieve expected outcomes in the performance of essential competencies and help them to define what is causing the student not to achieve the competencies. If this action is not effective, the faculty member proceeds to discuss the situation with the HRSD Director and a referral is made to the Institutional Counselor to assist the student if necessary and possible. Individualized plans of remediation are developed and students with documented disabilities are given appropriate accommodations according to ADA Law.

In BSN Program courses with clinical components, clinical performance is evaluated as 40% of the total course 100%. Clinical evaluation tools that establish standards and promote consistency in student evaluation are provided to clinical instructors and are included in student course documents. The clinical evaluations vary for each course (Table III.I.2) based on the course population focus and objectives.

Table III.I.2 Evaluation Criteria in Clinical Experience Courses

Clinical Experience Courses	Evaluation Criteria	
ENFE 4102-L Family and Community Selfcare	Clinical Competency Community Study	Educational Talk Family Study Health Clinic
ENFE 4208-L Administration, Leadership, Management and Nursing Practice	Clinical Competency Patient Categorization	Situation Analysis

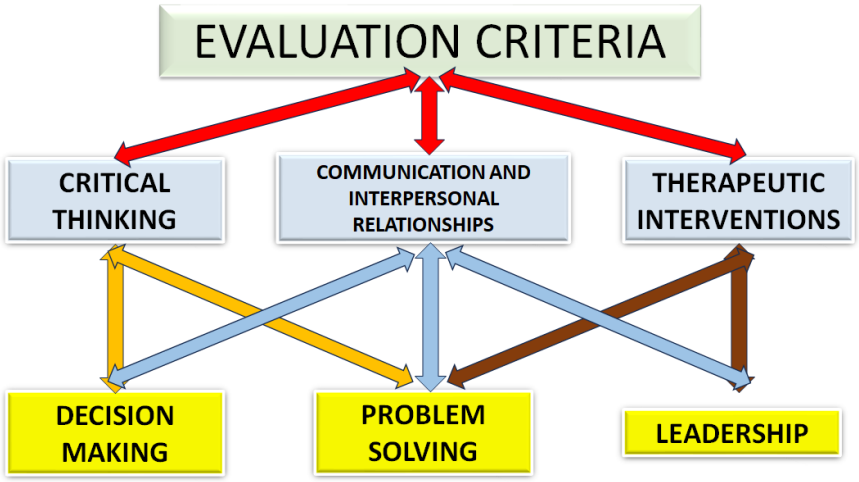
The overall evaluation criteria and student performance for theory and clinical experiences courses are gathered and accomplished through a variety of criteria (Table III.I.3)

Table III.I.3 Evaluation Criteria for Theory and Clinical Experience Courses

Theory Courses Evaluation Criteria		Clinical Experience Courses Evaluation Criteria
Analysis of Research Article Analysis Review Bibliographic Card Care Plan Case Study Clinical Experience Debate Ethical and Professional Commitment Final Project Final Test Independent Work	Instructional Guide Monograph Oral Presentation Partial Deliveries of Research Project Partial Tests Physical Examination Quizzes Reflexive Diary Research Project Situation Analysis Written Presentation	Clinical Competency Community Study Educational Talk Family Study Health Clinic Patient Categorization Situation Analysis

The evaluation criteria analysis establishes the foundation for the course and program assessment of the BSN-SLO (Graphic III.I.1).

Graphic III.I.1 Evaluation Criteria Alignment to BSN-SLO



Through the evaluation rubrics calculations are made to measure BSN-SLO learning at the course level and program level.

- Basic Student Learning Outcomes (B-SLO)
  - Critical Thinking (CT)
  - Communication and Interpersonal Relationships (CIR)
  - Therapeutic Intervention (TI)

- Advance Student Learning Outcomes (A-SLO)
  - Decision Making (DM)
  - Leadership (L)
  - Problem Solving (PS)

The first step of this process is direct student learning. For each course, there is a set of evaluation criteria that are linked to the SLO. At the course level, students get their individual grades from the respective evaluation criteria at the enrolled course. Every criterion is linked to one or more SLO and BSN SLO. An average percentage can be measured with individual criteria results from all the students in the course. An example is presented in the following tables from the course Family and Community Selfcare course (ENFE 4102) for the Fall 2020 semester to Winter 2023 semester. Faculty analyzed the relation of the evaluation criteria for this course to the Program's B-SLO and identified A-SLO (Table III.I.4)

Table III.I.4 Family and Community Selfcare course (ENFE 4102) Evaluation Criteria of B-SLO and A-SLO

Evaluation Criteria	B-SLO	A-SLO
Partial Tests	CT, CIR, TI	DM, PS, L
Final Test	CT, CIR, TI	DM, PS, L
Quizzes	CT, CIR	DM, PS, L
Analysis Review	CT, CIR, TI	DM, PS, L
Oral Presentation	CT, CIR, TI	DM, PS, L
Clinical Experience	CT, CIR, TI	DM, PS, L
Ethical and Professional Commitment	CT, CIR, TI	DM, PS, L

Table III.I.5 shows these evaluation criteria with their respective percentages. For every semester's general percentage, calculations for tendencies of evaluation criteria achievement along the three (3) year period and individual semester courses achievement can be identified.

Table III.I.5 Family and Community Selfcare course (ENFE 4102) Evaluation Criteria and Percentages for the Academic Semester FA-20 to WI-23

	Academic Semesters								
	%	FA-20	WI-21	FA-21	WI-22	FA-22	WI-23	Total	Total %
Partial Tests	25%	21.5	21.0	20.7	21.7	20.5	20.5	***21.0***	***84***
Final Test	10%	7.0	8.0	9.0	8.7	8.5	8.0	***8.2***	***82***
Quizzes	5%	4.5	4.5	4.3	4.3	5.0	4.0	***4.4***	***88***
Analysis Review	5%	4.5	4.5	4.3	4.7	3.5	4.5	***4.3***	***86***
Oral Presentation	10%	9.0	9.0	9.3	9.7	9.5	9.5	***9.3***	***93***
Clinical Experience	40%	35.5	37.0	36.7	38.7	37.0	37.0	***37.0***	***93***
Ethical and Professional Commitment	5%	5.0	5.0	4.7	5.0	5.0	4.5	***4.9***	***98***
	Total	***87.0***	***89.0***	***89.0***	***92.7***	***89.0***	***88.0***	***89.1***	***89***

The best semester performance was on WI-22 with a 92.7% out of 100 point average. Program evaluation by semester provides direct information on tendencies of the student learning, indirect faculty

performance, and non-academic situations factors as indicators. The best-performed criterion by students was Ethical and Professional Commitment with 98% out of 100 point average followed by Clinical Experience and Oral Presentation with 93%. On the other hand, FA-20 had the least percentage. This semester proved to be critical due to the students' first full semester under the unforeseen and unexpected situations they encountered after the impact of the COVID-19 Pandemic and the sudden changes to the teaching delivery from face to face to online. The HRSD Director and the faculty made constant approaches to support students in their academic and personal endeavors. This type of assessment helps faculty to research teaching strategies' effectiveness and helps the HRSD to assist on possible professional development projects to improve program performance.

The following table shows the overall BSN-SLO percentages in the three (3) year period of this self-study.

Table III.I.6 BSN Courses Overall Percentages for SLO and BSN SLO for the Three (3) Year Period - Fall 2020 (FA-20) to Winter 2023 (WI-23) Semester

	BSN SLO							
	B-SLO				A-SLO			Overall
	CT	CIR	TI		DM	L	PS	%
Concentration Courses Percentage per B-SLO and A-SLO								
ENFE 3104 - Theory, Models and Roles in Nursing	87	84	87		85	93	88	87
ENFE 3105 - Nursing Process and Physical Examination	83	78	88		81	93	85	85
ENFE 3205 - Core in Nursing	89	89	86		87	93	81	88
ENFE 4101 - Research in Nursing	86	87	80		83	85	81	84
ENFE 4102 - Family and Community Selfcare	90	90	88		87	91	93	90
ENFE 4207 - Nursing Process and Pathophysiology	80	80	79		76	84	83	80
ENFE 4208 - Administration, Leadership, Management and Nursing Practice	90	85	91		84	93	92	89
Concentration Courses Percentage per B-SLO and A-SLO	***86***	***85***	***86***		***83***	***90***	***86***	
Guided Elective Courses per B-SLO and A-SLO								
ENFE 3004 – Bioethics	86	89	89		85	92	96	90
ENFE 3006 – Critical Care	82	81	82		79	92	88	84
ENFE 3008 – Gerontology	91	91	90		89	94	94	92
ENFE 3009 – Human Sexuality	88	88	88		87	91	88	88
Guided Elective Courses Percentage	***87***	***87***	***87***		***85***	***92***	***92***	
OVERALL TOTAL PERCENTAGE FOR B-SLO AND A-SLO	**86**	**86**	**87**		**84**	**91**	**89**	

CT	Critical Thinking	DM	Decision Making
CIR	Communications and Interpersonal Relationships	L	Leadership
		PS	Problem Solving
TI	Therapeutic Interventions		

The best overall developed B-SLO is Therapeutic Intervention with 87% out of 100 point average and of the A-SLO was Leadership with 91% out of 100 point average. The most challenging course as a result of this analysis was Nursing Process and Pathophysiology (ENFE 4207). The course is designed so the nursing

student learns to assess and categorize different acute and chronic pathophysiological processes. In addition, it evaluates the mechanisms and clinical manifestations, treatments, and management related to diseases and how they interact with the body, mind, culture, and spirit. As expressed by the students, putting into perspective most of the acquired knowledge is the biggest challenge in this course. An example of a way to address this issue and for which efforts have been discussed in the Course Leader Team meeting was to evaluate the rubric Oral and Written Presentation (VR-20). The Faculty decided that students would a better chance and more evaluation opportunities if this rubric was separated into two (2) rubrics: Written Report and Oral Presentation.

For clinical experience performance, its percentage weight is 40% of the total course 100%. Clinical Evaluation Criteria (Table III.I.2 and III.I.3) for these courses can be analyzed annually or as in Table III.I.7 in the three (3) year period of this self-study.

Table III.I.7 Courses Evaluation Overall Percentages for the Three (3) Year Period Fall 2020 to Winter 2023 Semester

Nursing Courses with Clinical Experience	%	Academic Semesters						Overall Performance
		FA-20	WI-21	FA-21	WI-22	FA-22	WI-23	
ENFE 4102 - Family and Community Selfcare	40%	35.5	37.0	36.7	38.7	37.0	37.0	92.5
ENFE 4208 - Administration, Leadership, Management and Nursing Practice	40%	37.7	36.7	35.5	36.3	37.7	36.5	91.7

At a faculty meeting, discussions can derive teaching and learning best practices methods which can directly enhance teaching strategies and program outcomes. The evaluation applies to all students in all programs and is consistent with expected student outcomes.

As presented throughout this Key Element, expected learning outcomes for courses and clinical experiences are clearly identified, graded, and evaluated through a variety of mechanisms, and communicated to BSN students raising awareness of learning achievement and broadening success achievement.

III-J. The curriculum and teaching-learning practices are evaluated at regularly scheduled intervals, and evaluation data are used to foster ongoing improvement.

Elaboration: Faculty use data from faculty and student evaluation of teaching-learning practices to inform decisions that facilitate the achievement of student outcomes. Such evaluation activities may be formal or informal, formative or summative. The curriculum is regularly evaluated by faculty and revised as appropriate.

Program Response:

Evaluation of curriculum and teaching-learning practices have proven to provide valuable information for the improvement of the BSN Program. As an ongoing and continuous process, it is included in the HRSD Systematic Plan under the responsibility of the HRSD Director, Curriculum Committee, Institutional Faculty Evaluation Committee, and Faculty (Appendix I.A.1 – HRSD Systematic Evaluation Plan). They provide a look into the same issue from multiple perspectives that complement the academic context. The curriculum can be evaluated from the results of faculty evaluations and BSN SLO. As expressed in detail in the Key Element III.G, the BSN curriculum has a myriad of teaching strategies and in Key Element III.I, the courses BSN-SLO students' aggregate results are collected and analyzed as a result in part to the faculty teaching strategies.

A formal review and revision of curriculum and teaching-learning practice take place, at least, every five years or as necessary. To foster continuous improvements, the curricular and teaching-learning practices are assessed and evaluated at regularly scheduled intervals by students with the document titled "Professor's Evaluation: Evaluation Questionnaire by Students" administered by the Institutional Faculty Evaluation Committee (Appendix III.J.1). With this document, faculty members are evaluated once or twice a year by their students in the following items:

- Class Planning and Development
- Knowledge of Course Material
- Professor's Duties
- Mediation of the Student Process
- Personal Characteristics

The results are collected and reported to the HRSD Director, who in turn, discusses it with the faculty member evaluated. This feedback process enables the professor to improve on issues identified by the students and gives the HRSD Director the opportunity to identify means of professional development. The results for the period from 2020-2021 to 2022-2023 are presented in Table III.J.1.

Table III.J.1 Faculty Evaluation Results by Students – 2020-2021 to 2022-2023

Evaluation Items	2020-21	2021-22	2022-23
Class Planning and Development	92.10	83.48	88.05
Knowledge on Course Material	93.22	81.72	88.90
Professor's Duties	91.20	81.27	83.10
Mediation of the Student Process	90.30	77.93	86.18
Personal Characteristics	94.58	81.33	90.88
Overall Totals	92.28	81.15	87.42

The expected level of achievement is 80%. When these results were discussed with the faculty, they identified that for the period 2020-2021 the COVID-19 Pandemic initial period provoked an extraordinary and sudden impact on teaching practices which geared their effort to shift to deepen the support on students' approaches due to this change in this situation. For the period 2021-2022, turning into a hybrid teaching and learning process was even more difficult because they did not fully understand how to switch from face to face to assisted by technology teaching. This transition period was equally difficult for faculty members because students would mostly rely on course recording to study and sometimes, they did not see the recording. For the period 2022-2023, both faculty and students had more experience in this hybrid teaching and learning process which improved the overall results.

On the other hand, BSN-SLO results allow a closer look into the implementation of curriculum. Key Element III.I presents the detail of the learning outcomes results from students for the BSN courses from which Table III.J.2 present the overall results:

Table III.J.2 Overall Results of the BSN-SLO

BSN-SLO			
B-SLO	FA-20 to WI-23	A-SLO	FA-20 to WI-23
Critical Thinking	86%	Decision Making	84%
Communications and Interpersonal Relationships	86%	Leadership	91%
Therapeutic Interventions	87%	Problem Solving	89%

The expected level of achievement is 80%. Students met the expected level of achievement for all the learning outcomes. Throughout the past two (2) years, HRSD and the Curriculum Committee developed a deeper awareness in the faculty due to the yearly discussions on these results which led to the revision of all the syllabi and evaluation criteria rubrics after a series of meetings on this issue.

Standard III – Program Quality: Curriculum and Teaching-Learning Practices
Strengths and Areas of Improvement

Areas of Strengths:

1. The curriculum is continuously revised and updated to reflect expected BSN-SLO, and is congruent with mission, goals, and with the roles for which the programs are preparing its graduates.
2. The BSN Program Curricular Pathway clearly shows curricular alignment.
3. Curricula and expected BSN-SLO reflect professional nursing standards and guidelines; consider the AACN Essentials (2008) of Baccalaureate Programs; role and nursing concepts.
4. The curriculum is structured to achieve the expected BSN-SLO.
5. HRSD receives and considers the Community of Interest and Faculty recommendations to create plans to work on issues presented.
6. Clinical practice experiences are planned, enable students to achieve BSN-SLO, foster interprofessional collaborative practice, and are evaluated by students and faculty.
7. Student performance is evaluated by faculty and reflects achievement of expected BSN-SLO by standardized rubrics for every evaluation criterion.
8. The teaching and learning practices and program learning environments support the achievement of expected student outcomes.
9. An ongoing assessment and evaluation of courses, student learning, and faculty performance are used in decision-making processes.

Areas for Improvement (Appendix A – Plan of action for the areas to improve):

1. Continue the development of the classroom assessment culture.
2. Computerize the assessment and evaluation systematic process of expected outcomes.

Standard IV
Program Effectiveness: Assessment and Achievement of Program Outcomes

The program is effective in fulfilling its mission and goals as evidenced by achieving expected program outcomes. Program outcomes include student outcomes, faculty outcomes, and other outcomes identified by the program. Data on program effectiveness are used to foster ongoing program improvement.

IV-A. A systematic process is used to determine program effectiveness.

Elaboration: The program (baccalaureate, master's, DNP, and/or post-graduate APRN certificate) uses a systematic process to obtain relevant data to determine program effectiveness. The process:

- *is written, is ongoing, and exists to determine achievement of program outcomes;*
- *is comprehensive (i.e., includes completion, licensure, certification, and employment rates, as required by the U.S. Department of Education; faculty outcomes; and other program outcomes);*
- *identifies which quantitative and/or qualitative data are collected to assess achievement of the program outcomes;*
- *includes timelines for data collection, review of expected and actual outcomes, and analysis; and*
- *is periodically reviewed and revised as appropriate.*

Program Response:

HRSD and the BSN Program faculty understand the importance of developing processes to foster a continuous analysis of program, faculty, and student learning outcomes through data gathering in a methodical and structured manner for the assessment of program effectiveness. As stated in Standard III, the BSN Program alignment (Graphic III.A.1) supports the relationship between the mission, goals, B-SLO (Critical Thinking; Therapeutic Interventions; and Communications and Interpersonal Relationships), the A-SLO (Decision Making, Leadership, Problem Solving), and the Nursing Process based on Dorothea Orem's Self Care Theory which meets the standards of the contemporary practice of the profession and is portraited in the Conceptual Framework diagram for the BSN Program (Graphic III.A.2). This alignment lays the foundation for the continuous analysis on the Institutional, Program and Course levels. HRSD Systematic Evaluation Plan provides the groundwork for this assessment process which is comprehensive and ensures the understanding and further participation of the constituents related to the HRSD. The faculty has an important role in this plan raising the awareness to guide students toward the achievement of BSN-SLO (Appendix I.A.1 – HRSD Systematic Evaluation Plan). The components of this plan are reviewed in systematic and periodic interval to ensure that the program is revised as needed, based on aggregated and trended data.

This document presents:

- CUSJ and BSN Program Goals
- HRSD Systematic Plan regarding the Goals
- The professional standards, guidelines, laws, regulations, competencies, and recommendations established by regulatory and accreditation organizations regarding CUSJ and BSN Program Goals.

To acknowledge CUSJ and BSN Programs Goals' importance in the Program's alignment, they are stated at the beginning of the document to serve as a guide and a reminder of what is ultimately expected to achieve. The HRSD Systematic Evaluation Plan contains the alignment between the specific Goal, the key element, the person responsible, and the timeframe to measure quality and effectiveness. In addition, regulations, laws, and accrediting agency statements are part of the HRSD Systematic Evaluation Plan to measure effectiveness. Departmental efforts to demonstrate where and how content,

knowledge, and skills required by identified sets of standards are incorporated into the curriculum have contributed to improve the quality of the education in the BSN Program. In addition, in accordance with the mission, the systematic plan is revised periodically to achieve quality standards and satisfy the social function of the Program in the development of prepared human resources in the health field.

IV-B. Program completion rates demonstrate program effectiveness.

This key element is not applicable to a degree or certificate program that does not yet have individuals who have completed the program.

Elaboration: The program (baccalaureate, master's, DNP, and/or post-graduate APRN certificate) demonstrates achievement of required program outcomes regarding completion in <u>any one</u> of the following ways:

- *the completion rate for the most recent calendar year (January 1 through December 31) is 70% or higher;*
- *the completion rate is 70% or higher over the three most recent calendar years;*
- *the completion rate is 70% or higher for the most recent calendar year when excluding students who have identified factors such as family obligations, relocation, financial barriers, and decisions to change major or to transfer to another institution of higher education; or*
- *the completion rate is 70% or higher over the three most recent calendar years when excluding students who have identified factors such as family obligations, relocation, financial barriers, and decisions to change major or to transfer to another institution of higher education.*

The program identifies the cohort(s), specifies the entry point, and defines the time period to completion, each of which may vary by track; however, the program provides the completion rate for the overall degree/certificate program. The program describes the formula it uses to calculate the completion rate. The program identifies the factors used and the number of students excluded if some students are excluded from the calculation.

Program Response:

Students admitted to the CUSJ BSN Program are subject to a competitive process. The following Measurement Criteria Definitions are used as the base of CUSJ Completion Rate percentages calculated (Table IV.B.1).

- *COMPLETION RATE* is defined as the percentage (%) of admitted students or cohort students graduating in a 2-4 semester period (2 years or less) or a 5-6 semester period (3 years or less).

- *CALENDAR YEAR OF ADMISSION* is the cohort year.

- *COHORT STUDENTS* are those that are admitted on that specific calendar year. This means that to be considered in a specific completion rate, a two (2) year program can be completed in three (3) years or 150% of the projected end date.

- *# OF STUDENTS ADMITTED* are the students admitted in a specific cohort year.

- *# OF EXCLUDED STUDENTS* are those who have left the program due to identified factors such as family obligations, relocation, financial barriers, the decision to change majors, military issues, health issues, or transfer to another institution of higher learning in that specific cohort year.

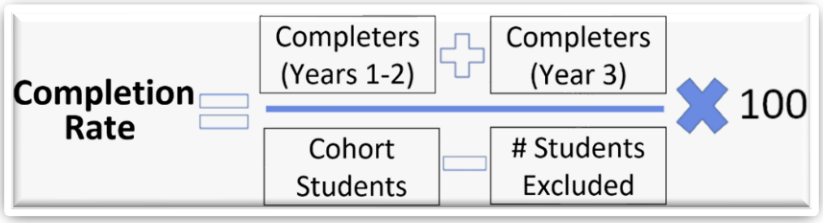
Table IV.B.1 Completion Rates for BSN Program

Calendar Year of Graduation	Calendar Year of Admission	# Students Admitted	# Students Excluded	# Students Completing	% Students Completing
2023	*2020*	26	0	20	77%

Even though the baseline is 70%, for the Calendar Year 2020 two significant events impacted Puerto Rico which in turn impacted the completion rate: the January series of earthquakes and the island lockdown due to the COVID-19 pandemic in March. CUSJ has been engaged in giving additional academic and personal support. There are some measures taken to this end. The Institutional Counsellor has held multiple meetings with faculty members and Department Directors to bridge support services and enhance the vision of students' possibilities. The Dean of Academic Affairs increased the offering of hybrid courses, courses that combine traditional education in the classroom with didactic activities that can be on-line to reinforce, elaborate, complement, and broaden the diversity of teaching approaches. These strategies have held the students' spirits to reorganize their possibilities to continue.

To calculate the completion rates, CUSJ has designated the Planning, Institutional Research, and External Resources Office to gather the information from the Registrar and the Informatics and Telecommunication Center at the end of each enrollment process to be analyzed using the equation in Graph IV.B.1.

Graphic IV.B.1 Completion Rate Equation



- A cohort year is established as a baseline.
- The number of students that completed up to a three-year period are considered as Completers.
- Students considered as excluded are subtracted from the Cohort students.

IV-C. Licensure pass rates demonstrate program effectiveness.

This key element is not applicable to a program that does not prepare individuals for licensure examinations or does not yet have individuals who have taken licensure examinations.

Elaboration: Programs with a pre-licensure track demonstrate achievement of required program outcomes regarding licensure. The program demonstrates that it meets the licensure pass rate of 80% in <u>any one</u> of the following ways:

- *the NCLEX-RN® pass rate for each campus/site and track is 80% or higher for first-time takers for the most recent calendar year (January 1 through December 31);*
- *the pass rate for each campus/site and track is 80% or higher for all takers (first-time and repeaters who pass) for the most recent calendar year;*
- *the pass rate for each campus/site and track is 80% or higher for all first-time takers over the three most recent calendar years; or*

- *the pass rate for each campus/site and track is 80% or higher for all takers (first-time and repeaters who pass) over the three most recent calendar years.*

For each campus/site and track, identify which of the above options was used to calculate the pass rate.

Program Response:

This Key Element does not apply to CUSJ BSN Program. An admission requirement to this program is to possess an associate degree in nursing. When they are admitted they can have taken the board already. If not, they are encouraged to take the board exam before completing the BSN program. This program does not prepare individuals for licensure examinations or does that have not yet taken licensure examinations.

IV-D. Certification pass rates demonstrate program effectiveness.

This key element is not applicable to a degree or certificate program that does not prepare individuals for certification examinations or does not yet have individuals who have taken certification examinations.

Elaboration: The master's, DNP, and post-graduate APRN certificate programs demonstrate achievement of required program outcomes regarding certification. For programs that prepare students for certification, certification pass rates are obtained and reported for those completers taking each examination, even when national certification is not required to practice in a particular state.

For programs that prepare students for certification, data are provided regarding the number of completers taking each certification examination and the number that passed. A program is required to provide these data regardless of the number of test takers.

A program that prepares students for certification demonstrates that it meets the certification pass rate of 80%, for each examination, in <u>any one</u> of the following ways:

- *the pass rate for each certification examination is 80% or higher for first-time takers for the most recent calendar year (January 1 through December 31);*
- *the pass rate for each certification examination is 80% or higher for all takers (first-time and repeaters who pass) for the most recent calendar year;*
- *the pass rate for each certification examination is 80% or higher for all first-time takers over the three most recent calendar years; or*
- *the pass rate for each certification examination is 80% or higher for all takers (first-time and repeaters who pass) over the three most recent calendar years.*

The program identifies which of the above options was used to calculate the pass rate. The program provides certification pass rate data for each examination but, when calculating the pass rate described above, may combine certification pass rate data for multiple examinations relating to the same role and population.

Program Response:

This Key Element does not apply to CUSJ BSN Program.

IV-E. Employment rates demonstrate program effectiveness.

This key element is not applicable to a degree or certificate program that does not yet have individuals who have completed the program.

Elaboration: The program demonstrates achievement of required outcomes regarding employment rates.

- *The employment rate is provided separately for each degree program (baccalaureate, master's, and DNP) and the post-graduate APRN certificate program.*
- *Data are collected within 12 months of program completion. Specifically, employment data are collected at the time of program completion or at any time within 12 months of program completion.*
- *The employment rate is 70% or higher. However, if the employment rate is less than 70%, the employment rate is 70% or higher when excluding graduates who have elected not to be employed.*

Program Response:

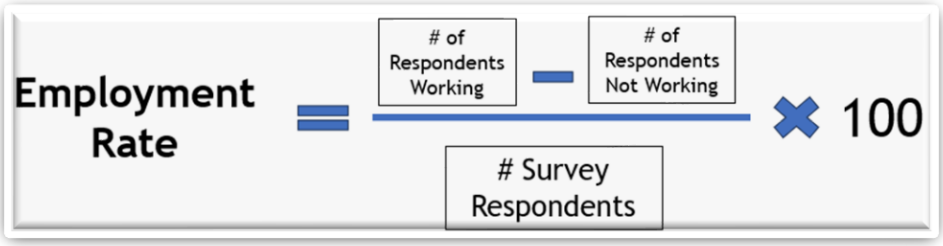
The employment rates of the most recent completers, this is for the 2022 calendar year, includes the data collected within 12 months of program completion for the students that belong to the 2019 calendar year of admission, completed their studies in the calendar year 2022 and became employed at the time of program completion or at any time within 12 months of program completion (Table IV.E.1).

Table IV.E.1 Employment Rate for the 2022 Calendar Year of Completion

Program(s) Under Review:	Year of Completion	# Completers	% Employed within 12 months of completion
Baccalaureate	2022	36	▪ Number survey respondents: 33 ▪ % Employed: 94%

Graph IV.E.2 shows the formula used to calculate the employment rate.

Graphic IV.E.2 Employment Rate Formula



The employment rate for the 2022 calendar year of completion was calculated based on survey responders with the following information:

- Number of completers – 36
- Number of survey respondents employed – 31
- Number of survey respondents not working - 2
- Number of survey non-respondents – 3

The calculated Employment Rate for the 2022 calendar year of completion was 94%, thus, of the 31 survey respondents all were employed (Table IV.E.1).

IV-F. Data regarding completion, licensure, certification, and employment rates are used, as appropriate, to foster ongoing program improvement.

This key element is applicable if one or more of the following key elements is applicable: Key Element IV-B (completion), Key Element IV-C (licensure), Key Element IV-D (certification), and Key Element IV-E (employment).

Elaboration: The program uses outcome data (completion, licensure, certification, and employment) for improvement.

- *Discrepancies between actual and CCNE expected outcomes (program completion rates 70%, licensure pass rates 80%, certification pass rates 80%, employment rates 70%) inform areas for improvement.*
- *Changes to the program to foster improvement and achievement of program outcomes, as appropriate, are deliberate, ongoing, and analyzed for effectiveness.*
- *Faculty are engaged in the program improvement process.*

Program Response:

BSN Program evaluates completion and employment rates for program effectiveness. As stated in Key Elements IV.B and IV.E, the Completion Rate is 77% and the Employment Rate is 94%, respectively.

Regarding completion rates, the expected level of achievement was met and surpassed. But there are still reasons that may have impacted students' chances of completing their studies:

- There is a growing tendency for agencies from the United States to come to Puerto Rico and recruit nurses because of the numerous well-paid employment opportunities.
- The island's situations aftermath (hurricanes, earthquakes, COVID-19 pandemic) has provoked students' need for a second job or to withdraw entirely.
- The students whose Pell Grant benefits have ended may not have the economic means to continue.

Several concerns were raised during this period of the harsh situation and CUSJ took action to deal with these concerns (Table IV.F.1).

Table IV.F.1 Actions Taken and Results Achieved to Concerns to Increase Completion Rates

Outcome: Completion Rate (VR-21)		
Concern	**Action Taken**	**Results**
Students' academic support and follow-up during the COVID-19 Pandemic lockdown	The referral process was reinforced with all the personnel from the Orientation and Tutoring Center.	The prevention process reduced possible withdrawals.
Increasing tutoring services requests	The Orientation and Orientation Center increased to two (2) nursing course tutors.	The number of students that were completing courses successfully increased.
Withdrawals due to economic issues	The Training and Job Placement Office identified part-time jobs.	The number of students that were completing courses successfully increased.
COVID-19 Pandemic after first vaccination process	The Dean of Academic Affairs increased the offering of hybrid courses, courses that combine traditional education in the classroom with didactic activities that can be online to reinforce,	The number of students that were completing courses successfully increased.

Outcome: Completion Rate (VR-21)		
Concern	**Action Taken**	**Results**
	elaborate, complement, and broaden the diversity of teaching approaches.	

Regarding employment rates, the expected level of achievement was met and surpassed. The same situation that may affect completion rates may benefit employment rates due to the growing need for nursing professionals. Ninety-four (94%) of the surveyed are working in nursing-related fields. This is a huge strength of the BSN program. The efforts to maintain or raise the actual outcome continue (Table IV.F.2):

Table IV.F.2 Actions Taken and Results Achieved to Concerns to Increase Employment Rates

Outcome: Employment Rate (VR-22)		
Concern	**Action Taken**	**Results**
Resume and Interview Process	The Training and Job Placement Officer gave a talk on how to make a resume and presented guidelines to complete a successful interview process.	The number of students placed in a job increased.
Withdrawals due to economic issues	The Training and Job Placement Office identified part-time jobs.	Some of the students kept their jobs after graduation.
Time to look for a job	The Training and Job Placement Office developed job fairs.	The number of students placed in a job increased.

Faculty engage directly in students' academic completion processes and in students' performance at a professional level for their future employment preparation opportunities. Both are the general result of the BSN curriculum and students' development of learning abilities. Each semester the nursing faculty revises, and analyzes the input provided by various resources such as the clinical practice agencies, alumni satisfaction surveys, student evaluations, faculty continuing education, new trends that emerge in the healthcare services, and other facts, to improve the activities for their courses. Faculty suggestions are discussed in the corresponding committees and faculty meetings. Faculty members participate in the corresponding Course Leader Teams to develop, revise, and update specific courses. The criteria used to assign this task is based on the faculty member's expertise in teaching the course, area of specialization, and experience in the area of expertise.

IV-G. Aggregate faculty outcomes demonstrate program effectiveness.

Elaboration: *The program demonstrates achievement of expected faculty outcomes. In order to demonstrate program effectiveness, outcomes are consistent with and contribute to achievement of the program's mission and goals and are congruent with institution and program expectations. Expected faculty outcomes:*

- *are identified for the faculty as a group;*
- *specify expected levels of achievement for the faculty as a group; and*
- *reflect expectations of faculty in their roles.*

Actual faculty outcomes are compared to expected levels of achievement. Actual faculty outcomes are presented in the aggregate. If expected faculty outcomes vary for different groups of faculty (full-time, part-time, adjunct, tenured, non-tenured, or other), actual faculty outcomes may be presented separately for each different group of faculty.

Program Response:

CUSJ Health Related Science Department Faculty outcomes are Faculty Teaching, Faculty Scholarship of Teaching and Faculty Service which are geared toward achieving program effectiveness. The following table shows the distribution of each of the Faculty Outcomes.

Table IV.G.1 HRSD Faculty Outcomes

FACULTY OUTCOME	*SPECIFIC FACULTY OUTCOMES*
Faculty Teaching	Academic Fields of Knowledge
	Practice
	Leadership Positions
Faculty Scholarship of Teaching	Professional Organizations / Events
	Development of Teaching Materials
	Curriculum Development, Revision, and Assessment
	Professional Education Credits
Faculty Service	Community Service
	Extracurricular Service

HRSD Director and Curriculum Committee understands Faculty Outcomes as a whole, this means that every faculty member should perform in Faculty Teaching, Faculty Scholarship of Teaching, and Faculty Service. This process was revised in December 2022. They discussed and identified the Specific Faculty Outcomes to analyze program effectiveness with an aggregate expected level of achievement of 80%. A faculty meeting was held on February 4, 2023, to discuss, among other things, the Faculty Outcomes and the process that was going to be implemented.

The HRSD Director made a qualitative analysis using the identified specific faculty outcomes from the curriculum vitae and meetings with faculty members to dialogue on personal and professional related events to each expected outcome and expectations in their roles. Once the information was analyzed, it was compared to each expected faculty outcome for each faculty member and then as aggregate faculty outcomes.

The Aggregate faculty outcomes are the following:

- The BSN faculty complies with the Specific Faculty Outcomes for Faculty Teaching as one hundred percent (100%) of the faculty's academic fields of knowledge are in nursing fields as MSN and are licensed to practice in Puerto Rico; one hundred percent (100%) of the faculty has taught or teaches in more than one BSN course; and one hundred percent (100%) of the faculty has held one or more leadership positions in their professional experience.

- The BSN faculty complies with the Specific Faculty Outcomes for Faculty Scholarship of Teaching as one hundred percent (100%) of the faculty are members of one or more professional organizations; one hundred percent (100%) of the faculty has participated or attended multiple professional events; one hundred percent (100%) of the faculty has developed teaching materials, has participated on BSN curriculum development processes, has revised and assessed their academic documents every semester on a didactic reflection process to improve student success in attaining SLO and BSN SLO; and one hundred percent (100%) of the faculty has completed their mandatory professional education credits.

- The BSN faculty complies with the Specific Faculty Outcomes for Faculty Service as one hundred percent (100%) of the faculty has participated, cooperated, coordinated, or attended community or extracurricular service activities or venues to share and further the general knowledge in self-care.

The overall result of the actual level of achievement was 100% since BSN faculty members complied with Faculty Teaching, Faculty Scholarship of Teaching, and Faculty Service outcomes results shared on August 2, 2023, in the faculty meeting. HRSD Director plans to continue these dialogues and collect information with the support of the Curriculum Committee and establish a Faculty Development Plan for these outcomes with the proposed percentage distribution to improve program effectiveness.

IV-H. Aggregate faculty outcome data are analyzed and used, as appropriate, to foster ongoing program improvement.

Elaboration: The program uses faculty outcome data for improvement.
- *Faculty outcome data are used to promote ongoing program improvement.*
- *Discrepancies between actual and expected outcomes inform areas for improvement.*
- *Changes to foster achievement of faculty outcomes, as appropriate, are deliberate, ongoing, and analyzed for effectiveness.*
- *Faculty are engaged in the program improvement process.*

Program Response:

Faculty Outcomes results provide information and have raised awareness on the development of meaningful professional development that can strengthen HRSD, BSN Program, teaching, and reflective strategies on learning. Although the actual faculty outcome was 100%, there were concerns about how the national situations that Puerto Rico has gone through could affect teaching and learning methods. Since 2017, health-related personnel all around Puerto Rico have been working extensively to support the national situation that the Island has endured: Hurricanes Irma and María; Earthquakes; COVID-19 Pandemic. These situations resulted in the emigration of healthcare professionals which put a strain on those that remain in Puerto Rico, working more than one job, and economic issues, among others. But specifically, during the COVID-19 Pandemic a sudden mandatory shift to computer-assisted teaching and learning brought a collective concern on ways to successful academic delivery. CUSJ engaged in a series of actions to promote faculty engagement in the program improvement process and to maintain the Faculty Outcomes results.

Table IV.H.1 Actions Taken and Results Achieved to Concerns about Teaching and Learning Methods Due to The National Situations (VR-23)

Concern	Action Taken	Results
Identify the best and immediate means for online teaching and learning environments since a mandatory lockdown was in place.	CUSJ had an Agreement with Microsoft which included the software Microsoft Teams. Several sessions were developed for the faculty to learn the practical uses of offering computer-assisted courses, to record lectures, and to create small group sessions in the same course.	After the training sessions, the faculty expressed that communication with students increased, making this effort an excellent way of teaching, and tutoring one-to-one. Students welcomed this solution helping them to continue their academic studies.
Submission of student or faculty written documents.	Students Portal and Microsoft Teams were used to allow students to hand in course assignments, presentations, or other written documents to comply with course requirements and faculty could upload course materials.	Using the Student Portal and Microsoft Teams to submit documents improved compliance with requirements and support between faculty and students and between students.

Concern	Action Taken	Results
Faculty's knowledge on online teaching.	The Dean of Academic Affairs arranged for the faculty to take a Certification titled "Online Facilitator and Manager of Virtual Courses" from the Division of Continuing Education and Professional Studies of the University of Puerto Rico, Rio Piedras Campus - 30 contact hours.	Faculty members completed the certification which broaden their knowledge of developing an online course.
Broadening learning management systems options	A faculty member from the Business Administration Department made a presentation on the Use and Management of Open LMS Platforms.	Faculty's options for diverse and open learning management systems gave them possible LMS for other electronic means: cell phones, Ipads, etc.
BSN clinical experiences settings	Faculty were trained on the simulators in the Nursing Skills and Therapeutic Intervention Center.	Faculty members reinforced their knowledge of the simulators' use and applications. Students had a continuous academic and simulated setting to complete their academic requirements.
Improve the hybrid teaching and learning environment.	CUSJ acquired "Virtual Classrooms", equipment able to improve hybrid teaching and learning environments.	The equipment was installed in July 2023. The training session will be on August 16 and 17, 2023.

Throughout this process, faculty members participated in the analysis of the need for electronic and online need to complete the courses while at the same time giving students orientation and training in the newly acquired technologies to improve the program's effectiveness.

IV-I. Program outcomes demonstrate program effectiveness.

Elaboration: The program demonstrates achievement of outcomes <u>other than</u> those related to completion rates (Key Element IV-B), licensure pass rates (Key Element IV-C), certification pass rates (Key Element IV-D), employment rates (Key Element IV-E), and faculty (Key Element IV-G).

Program outcomes are defined by the program and incorporate expected levels of achievement. The program describes how outcomes are measured. Actual levels of achievement, when compared to expected levels of achievement, demonstrate that the program, overall, is achieving its outcomes. Program outcomes are appropriate and relevant to the degree and certificate programs offered.

Program Response:

HRSD has identified outcomes at the course and program levels for the BSN Program to demonstrate program effectiveness for the period from FA-20 to WI-23:

- Program - Course Level - Student Learning Outcomes and BSN Student Learning Outcomes - (defined in Key Element I.A with aggregate data in Key Element III.J)
- Program - Course Level - Faculty evaluations by students - (defined and with aggregate data in Key Element III.J)
- Program Level - Satisfaction of active students, alumni, and employers with the program - (defined in this Key Element)

Active Students Satisfaction represents how students perceive student services; the nursing faculty;

facilities and resources; curriculum; learning abilities; academic organization; with several open questions collected through a questionnaire (Appendix IV.I.1 - Questionnaire – Opinion Survey of Active Students' Satisfaction with the Program). Ninety-one (91) active students participated in the Satisfaction Questionnaire for 2020-2021 to 2022-2023 academic years periods (table IV.E.1). Criteria evaluated were student services; facility and resources; nursing faculty; curriculum; learning abilities; academic organization. The overall for all criteria was over 90% except for Facility and Resources with 77% and Learning Abilities with 88% for 2020-2021. This academic year coincides with the period at the beginning of the COVID-19 Pandemic declaration by the World Health Organization. Most students had to acquire computers or online services to comply with the rigors of higher education and the sudden change to online learning. Faculty members also had to make changes in their teaching strategies. The software used to bridge students and faculty's learning environment was Microsoft Teams which opened multiple means of document exchange, course recording capabilities accessible to students, and personalized and group tutoring meetings, among others. This proved to be very helpful, although there are a lot of students which still prefer face-to-face learning.

Table IV.I.1 Active Student' Satisfaction Percentages for the Years 2020-2021, 2021-2022, 2022-2023

Criteria	Year		
	2020-2021 n=17	2021-2022 n=31	2022-2023 n=43
Student Services	90%	93%	97%
Facility and Resources	77%	92%	91%
Nursing Faculty	97%	100%	98%
Curriculum	98%	99%	99%
Learning Abilities	88%	95%	95%
Academic Organization	93%	97%	95%

Alumni Satisfaction represents how alumni understand that their academic experience in CUSJ has helped them to achieve a professional standard on the nursing field collected through a questionnaire (Appendix IV.I.2 - Questionnaire – Opinion Survey of Alumni' Satisfaction with the Program). Thirty-six (36) alumni participated in the Satisfaction Questionnaire for 2020-2021 to 2022-2023 academic years periods (Table IV.E.2). This questionnaire collects information on the perception on how CUSJ offers has applied to them. Criteria evaluated were student services; facility and resources; nursing faculty; curriculum; learning abilities; academic organization.

Table IV.I.2 Alumni Satisfaction Percentages for the Years 2020-2021, 2021-2022, 2022-2023

Criteria	Year		
	2020-2021 n=12	2021-2022 n=9	2022-2023 n=15
Student Services	90%	94%	94%
Facility and Resources	85%	90%	91%
Nursing Faculty	94%	95%	95%
Curriculum	100%	99%	100%
Learning Abilities	93%	93%	96%
Academic Organization	93%	94%	95%

Employers Satisfaction represents employers' perception of the professional performance of the alumni evaluating the combined needs of the job to the program's graduate profile collected through a questionnaire (Appendix IV.I.3 - Questionnaire – Opinion Survey of Employers' Satisfaction with the Program). This evaluation is conducted annually. Twenty-one (21) supervisors to CUSJ alumni from multiple health care settings completed the Employers Questionnaire (Table IV.E.3). Criteria evaluated were graduate profile; communication and interpersonal relationship; professional approach; personal qualities; and therapeutic interventions. This questionnaire reveals supervisors' perception of clinical

skills, judgement, and capacity to patient quality care. The overall results for Critical Thinking and Communication and Interpersonal Relationships were 92.3%.

Table IV.I.3 Employer Satisfaction Percentages for the Years 2020-2021, 2021-2022, 2022-2023

Student Learning Outcomes	2020-2021 n = 6	2021-2022 n= 6	2022-2023 n= 9
Critical Thinking	92%	96%	93%
Communication and Interpersonal Relationships	93%	89%	92%
Therapeutic Interventions	100%	100%	100%

The average of the previous outcomes is presented in Table IV.I.1 as the actual outcome compared to the expected level of achievement.

Table IV.I.4 Expected and Actual Level of Achievements at the Program-Course Level Outcomes

Program-Course Level Outcomes		
Outcome	**Expected Level of Achievement**	**Actual Outcome**
BSN Student Learning Outcomes		
Critical Thinking	Eighty percent (80%) of BSN students develop Critical Thinking Skills.	Eighty-six percent (86%) of BSN students developed Critical Thinking Skills surpassing the expected level of achievement of eighty percent (80%). The expected level of achievement was met.
Communications and Interpersonal Relationships	Eighty percent (80%) of BSN students develop Communication and Interpersonal Relationships Skills.	Eighty-six percent (86%) of BSN students developed Communication and Interpersonal Relationships Skills surpassing the expected level of achievement of eighty percent (80%). The expected level of achievement was met.
Therapeutic Interventions	Eighty percent (80%) of BSN students develop Therapeutic Intervention Skills.	Eighty-seven percent (87%) of BSN students developed Therapeutic Interventions Skills surpassing the expected level of achievement of eighty percent (80%). The expected level of achievement was met.
Decision Making	Eighty percent (80%) of BSN students develop Decision-Making Skills.	Eighty-four percent (84%) of BSN students developed Decision Making Skills surpassing the expected level of achievement of eighty percent (80%). The expected level of achievement was met.
Leadership	Eighty percent (80%) of BSN students develop Leadership Skills.	Ninety-one percent (91%) of BSN students developed Leadership Skills surpassing the expected level of achievement of eighty percent (80%). The expected level of achievement was met.
Problem Solving	Eighty percent (80%) of BSN students develop Problem-Solving Skills.	Eighty-nine percent (89%) of BSN students developed Problem-Solving Skills surpassing the expected level of achievement of eighty percent (80%). The expected level of achievement was met.

Program-Course Level Outcomes		
Outcome	**Expected Level of Achievement**	**Actual Outcome**
Faculty Evaluation by Students		
Class Planning and Development	Eighty percent (80%) of the faculty develops satisfactorily Classes Planning and Development.	Eighty-eight percent (88%) of the faculty developed satisfactory classes planning and development surpassing the expected level of achievement of eighty percent (80%). The expected level of achievement was met.
Knowledge on Course Material	Eighty percent (80%) of the faculty develops satisfactorily students' knowledge and course material.	Eighty-eight percent (88%) of the faculty developed satisfactory students' knowledge and course materials surpassing the expected level of achievement of eighty percent (80%). The expected level of achievement was met.
Professor's Duties	Eighty percent (80%) of the faculty complies satisfactorily with their duties.	Eighty-five percent (85%) of the faculty developed satisfactorily with their duties surpassing the expected level of achievement of eighty percent (80%). The expected level of achievement was met.
Mediation of the Student Process	Eighty percent (80%) of the faculty develops satisfactory Mediation of the Student Process.	Eighty-five percent (85%) of the faculty developed satisfactorily mediation of the students' process surpassing the expected level of achievement of eighty percent (80%). The expected level of achievement was met.
Personal Characteristics	Eighty percent (80%) of the faculty has good personal characteristics.	Eighty-nine percent (89%) of the faculty have good personal characteristics surpassing the expected level of achievement of eighty percent (80%). The expected level of achievement was met.

Table IV.I.5 Expected and Actual Level of Achievements at the Program Level Outcomes

Program Level Outcomes		
Outcome	**Expected Level of Achievement**	**Actual Outcome**
Students Satisfaction		
Student Services	Eighty percent (80%) of BSN students are satisfied with CUSJ Student Services.	Ninety-five percent (95%) of BSN students expressed satisfaction with CUSJ Student Services surpassing the expected level of achievement of eighty percent (80%). The expected level of achievement was met.
Facility and Resources	Eighty percent (80%) of BSN students are satisfied with CUSJ Facility and Resources.	Eighty-nine percent (89%) of BSN students expressed satisfaction with CUSJ Facility and Resources surpassing the expected level of achievement of eighty percent (80%). The expected level of achievement was met.

Program Level Outcomes		
Outcome	**Expected Level of Achievement**	**Actual Outcome**
Nursing Faculty	Eighty percent (80%) of BSN students are satisfied with HRSD Nursing Faculty.	Ninety-eight percent (98%) of BSN students expressed satisfaction with HRSD Nursing Faculty surpassing the expected level of achievement of eighty percent (80%). The expected level of achievement was met.
Curriculum	Eighty percent (80%) of BSN students are satisfied with the Curriculum.	Ninety-nine percent (99%) of BSN students expressed satisfaction with the Curriculum surpassing the expected level of achievement of eighty percent (80%). The expected level of achievement was met.
Learning Abilities	Eighty percent (80%) of BSN students are satisfied with the Learning Abilities acquired.	Eighty-eight percent (88%) of BSN students expressed satisfaction with the Learning Abilities acquired, surpassing the expected level of achievement of eighty percent (80%). The expected level of achievement was met.
Academic Organization	Eighty percent (80%) of BSN students are satisfied with the Academic Organization.	Ninety percent (90%) of BSN students expressed satisfaction with the Academic Organization surpassing the expected level of achievement of eighty percent (80%). The expected level of achievement was met.
Alumni Satisfaction		
Student Services	Eighty percent (80%) of BSN alumni were satisfied with CUSJ Student Services.	Ninety-eight percent (98%) of BSN alumni expressed satisfaction with CUSJ Student Services surpassing the expected level of achievement of eighty percent (80%). The expected level of achievement was met.
Facility and Resources	Eighty percent (80%) of BSN alumni were satisfied with CUSJ Facility and Resources.	Ninety-six (96%) of BSN alumni expressed satisfaction with CUSJ Facility and Resources surpassing the expected level of achievement of eighty percent (80%). The expected level of achievement was met.
Nursing Faculty	Eighty percent (80%) of BSN alumni were satisfied with CUSJ Nursing Faculty.	One hundred percent (100%) of BSN alumni expressed satisfaction with HRSD Nursing Faculty surpassing the expected level of achievement of eighty percent (80%). The expected level of achievement was met.
Curriculum	Eighty percent (80%) of BSN alumni were satisfied with CUSJ Curriculum.	One hundred percent (100%) of BSN alumni expressed satisfaction with the Curriculum surpassing the expected level of achievement of eighty percent (80%). The expected level of achievement was met.
Learning Abilities	Eighty percent (80%) of BSN alumni were satisfied with CUSJ Learning Abilities.	Ninety-eight percent (98%) of BSN alumni expressed satisfaction with the Learning Abilities acquired, surpassing the expected level of achievement of eighty percent (80%). The expected level of achievement was met.
Academic Organization	Eighty percent (80%) of BSN alumni were satisfied with CUSJ Academic Organization.	One hundred percent (100%) of BSN alumni expressed satisfaction with the Academic Organization surpassing the expected level of

Program Level Outcomes		
Outcome	**Expected Level of Achievement**	**Actual Outcome**
		achievement of eighty percent (80%). The expected level of achievement was met.
Employer Satisfaction		
Critical Thinking Skills	Eighty percent (80%) of employers are satisfied with BSN alumni's Critical Thinking skills.	Ninety-four percent (94%) of employers expressed satisfaction with BSN alumni's Critical Thinking skills, surpassing the expected level of achievement of eighty percent (80%). The expected level of achievement was met.
Communication and Interpersonal Relationships	Eighty percent (80%) of employers are satisfied with BSN alumni's Communication and Interpersonal Relationships skills.	Ninety-one percent (91%) of employers expressed satisfaction with BSN alumni's Communication and Interpersonal Relationships skills, surpassing the expected level of achievement of eighty percent (80%). The expected level of achievement was met.
Therapeutic Interventions	Eighty percent (80%) of employers are satisfied with BSN alumni's Therapeutic Intervention skills.	One hundred percent (100%) of employers expressed satisfaction with BSN alumni's Therapeutic Interventions skills, surpassing the expected level of achievement of eighty percent (80%). The expected level of achievement was met.

The general definition of program effectiveness is the promotion of learning processes in a program through a systematic and continuous fashion, faculty development and support, and effective academic instruction to attain a desired result. The BSN Program has presented ongoing procedures that are reflected in the average and overall aggregate results (Table IV.3).

Table IV.I.6 BSN Program Outcomes Overall Average Aggregate Results

BSN Program Outcomes	Average Aggregate Results	Overall Average Aggregate Results
BSN Student Learning Outcomes	87%	92%
Faculty Evaluation by Students	87%	
Faculty Outcomes	100%	
Completion Rate	77%	
Employment Rate	94%	
Students Satisfaction	93%	
Alumni Satisfaction	99%	
Employer Satisfaction	95%	

The BSN Program's overall average aggregate result is 92% which demonstrates program effectiveness.

IV-J. Program outcome data are used, as appropriate, to foster ongoing program improvement.

Elaboration: For program outcomes defined by the program:

- *Actual program outcomes are used to promote program improvement.*
- *Discrepancies between actual and expected outcomes inform areas for improvement.*
- *Changes to the program to foster improvement and achievement of program outcomes, as appropriate, are deliberate, ongoing, and analyzed for effectiveness.*
- *Faculty are engaged in the program improvement process.*

Program Response:

Program outcomes data helps envision short and long-term improvements to benefit future students' academic achievements success and life-long learning as nursing professionals. At the same time, the faculty can foster and enhance didactic reflection while creating an academic environment that stimulates respect, teamwork, collaboration, coordination, and the will to project empathy, compassion, and humanity in patient care. HRSD and BSN Faculty work hand in hand to promote improvement with emphasis on collaborative processes geared toward advancement of the nursing professionals using BSN Student Learning Outcomes results, faculty evaluations by students, and satisfaction of active students, alumni, and employers with the program (Table IV.J.1).

Table IV.J.1 Actions Taken and Results Achieved to Raise Program Outcomes

Outcomes	Action Taken	Results
BSN Student Learning Outcomes	Curriculum Committee's meetings discussions	These reflective meetings provided the groundwork of the planned process to analyze and give feedback to the faculty as a first step toward the revision process.
	Revision of BSN courses and evaluation criteria rubrics	The revision was completed in July 2022, presented to the faculty on August 16, 2022, and implemented during the semester from August to December 2022.
	Course Leader Teams meetings	These meetings increased faculty communication and understanding of how to evaluate students' achievement of the BSN-SLO.
	Faculty meetings	Allowed a continuous communication and feedback process to discuss, evaluate, and make decisions on the next steps in the teaching process.
	Trainings	The faculty received curricular training on the revision process fostering their engagement in constant communication with students on their course results and engaging students in active learning.
Faculty Evaluation by Students	Annual evaluations	Reflective meetings with the corresponding faculty member with the HRSD Director on the students' feedback which raised awareness of possible aspects of teaching that may need modification.
	Professional Development	The faculty received a series of training on simulation; online management and teaching, among others, that redirected their view in teaching and directly helped students' persistence in academic processes.
Satisfaction of active students, alumni, and	Meetings with employers	The HRSD Director has received more requests for graduates to be employed in their agencies.
	Faculty meetings	The faculty has become aware of how their collective efforts are developing successful professionals and increasing their collaborative engagement.

Outcomes	Action Taken	Results
employers with the program	Curriculum Committee's meetings	The Committee has identified the needs expressed by students that become part of the committee's plan for the next academic session.

Standard IV – Program Effectiveness: Assessment and Achievement of Program Outcomes
Strengths and Areas of Improvement

Areas of Strengths:

1. The alignment of the HRSD Systematic Plan to the key elements of the Standards increases the chances of a continuous assessment process toward program effectiveness.
2. The different courses of action helped the achievement of the expected level of achievement of completion rates despite the island's atmospheric, tectonic, and health situations.
3. The employment rate is 94% which means that BSN program graduates are sought in health settings.
4. Aggregate faculty outcomes show that 100% of the faculty comply with Faculty Teaching, Scholarship of Teaching, and Service outcomes.
5. Aggregate faculty outcomes were analyzed and used to take action and improve the BSN Program concerns identified.
6. One hundred percent (100%) of the program outcomes surpassed the expected level of achievement of eighty percent (80%).

Areas for Improvement (Appendix A – Plan of action for the areas to improve):

1. Computerize the assessment and evaluation systematic process of expected outcomes.

APPENDIXES

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Appendix A

Plan of Action for the Areas to Improve

APPENDIX A

PLAN OF ACTION

AREAS OF IMPROVEMENT	TIMEFRAME	OBJECTIVE
Standard I: Mission and Governance Strengths		
1. Continue with the effort to identify and gather data for analysis to improve the academic and administrative aspects of the BSN Program.	One year	Establish academic and administrative baselines regarding program effectiveness through the implementation of the Department Assessment Plan.
2. Increase student participation in committees and extracurricular activities.	Semester	Articulate student experience into the academic and administrative processes through Department and Institutional committees and Department activities.
3. Promote continuous tasks with the Community of Interest to maintain and enhance quality and excellency.	Semester	Develop questionnaires with different approaches to broaden the input of the community of interest.
Standard II: Program Quality Institutional Commitment and Resources		
1. Increase the efforts toward obtaining external resources.	Monthly	Identify grants or proposals with the Planning, Institutional Research External Resources Office personnel.
	Semester	Write a research proposal to increase the opportunity of external resources funding.
2. Improve professional development.	Semester	Coordinate with the Dean of Academic and Student Affairs workshops guided to improve teaching and learning strategies.
Standard III – Program Quality: Curriculum and Teaching-Learning Practices		
1. Continue the development of the classroom assessment culture.	Semester	Coordinate with the Institutional Assessment Committee workshops in multiple assessment methods to use in theory and clinical experiences courses.
2. Computerize the assessment and evaluation systematic process of expected outcomes.	Semester	Coordinate with the Dean of Academic Affairs and the Business Administration Department personnel workshops in the use of software programs related to assessment and evaluation.
Standard IV Program Effectiveness: Assessment and Achievement of Program Outcomes		
1. Computerize the assessment and evaluation systematic process of expected outcomes.	Semester	Coordinate with the Business Administration Department Director seminars on diverse computer software.
2.	Annual	Develop computerized assessment and evaluations on the software identified.

Appendix I.A.1

General Education Competences, Nursing Programs Competences And Objectives By Course

GENERAL EDUCATION COMPETENCES, NURSING PROGRAMS COMPETENCES AND OBJECTIVES BY COURSE

The Colegio Universitario de San Juan has developed an interdisciplinary curriculum based on competencies where all courses implement institutional competencies and goals. The use of the nine General Education competencies through the College's curriculum allows for a systematic effort for the cohesion of the curriculum since the competencies apply to all academic programs at the same time that they are operationalized to apply to each specialty. All educational programs promote individual development in the following skills: self-esteem; communication; relationships; historical and cultural background; the fundamental enrichment and promotion of cultural, ethical, and aesthetic values; protection of the environment and the natural world; health; logical and quantitative reasoning; political, economic and civic awareness; and the importance of technology. The General Education or Institutional competencies are the basis of the competencies of the Bachelor of Science in Nursing Program and the objectives by levels, which guide the development of knowledge, aptitudes, and skills in the Program student.

The Nursing Bachelor of Science Program offers 11 courses: 7 are concentration courses and 4 are elective courses. The following table presents the class of how to identify the competence, course, and objective in the table of Competences of the Bachelor of Sciences in Nursing Program.

COURSES CLASIFICATION	COURSE NAME	CODE	Course Code by Competency	Competency (first number)	Semester (second number)	Course (letter)
Concentration Courses	Theory, Models and Roles in Nursing	ENFE 3104	1.5.A	1	5 (semester I)	A
	Nursing Process and Physical Examination	ENFE 3105	1.5.B			B
	Core in Nursing	ENFE 3205	1.5.C			C
	Research in Nursing	ENFE 4101	1.6.D		6 (semester II)	D
	Family and Community Selfcare	ENFE 4102	1.6.E			E
	Nursing Process and Pathophysiology	ENFE 4207	1.7.F		7 (semester III)	F
	Administration, Leadership, Management and Nursing Practice	ENFE 4208	1.7.G			G
Elective Courses	Bioethics	ENFE 3004	1.H		-	H
	Critical Care	ENFE 3006	1.I		-	I
	Gerontology	ENFE 3008	1.J		-	J
	Human Sexuality	ENFE 3009	1.K		-	K

NURSING PROGRAMS COMPETENCIES

Competency	Nursing Programs Competencies	ENFE 3104 (A) ENFE 3105 (B) ENFE 3205 (C)	ENFE 4101 (D) ENFE 4102 (E)	ENFE 4207 (F) ENFE 4208 (G)	ENFE 3004 (H) ENFE 3006 (I) ENFE 3008 (J) ENFE 3009 (K)
		SEMESTER I	SEMESTER II	SEMESTER III	
1. Nurture in the student self-esteem, self-assurance, and self-determination.	**1.1** Nurture in the student self-esteem, self-assurance, and self-determination to apply fundamental concepts of Dorothea Orem's Self-Care Theory, other theories, and basic teaching principle in the nursing practice role in different health scenarios with an individual, family, groups, and community.	**1.5.A.1** Explain with confidence the concepts around the human being, self-care needs, conceptual models, nursing, and teaching theories required to offer humanistic and assertive care to healthy people, family, group, and community in different health scenarios. **1.5.B.1** Determining the self-care requirements when carrying out physical estimation interventions in adults and the elderly with common, recurrent, and chronic health deviations in the individual, family, groups, and community; in different health scenarios and their social, cultural, economic, and legal impact. **1.5.C.1** Demonstrate positive and assertive behavior with	**1.6.D.1** Establish self-confidence and determination during their participation in the different phases of the research and nursing process by intervening with the individual, family, groups, and community in different health scenarios. **1.6.E.1** Interpret the concepts of self-care, self-esteem, self-confidence, and self-determination, when offering nursing care to the individual, families, groups, and the community in primary, secondary, and tertiary health settings.	**1.7.F.1** Judge the concepts of self-care requirements in the promotion, prevention, maintenance, education, nursing diagnoses and rehabilitation of the individual, family, groups, and community with health deviations in different scenarios. **1.7.G.1** Value the concepts of self-care, self-esteem, self-confidence, and other leadership theories when offering nursing care to the individual, family, groups, and community in different health settings. **1.7.G.2** Evaluate the skills of the leader and supervise the nursing care offered by the associate and practical nurse to the individual,	**1.H.1** Apply the following health concepts with determination: human trust, basic needs for growth and development, conceptual models, nursing, and teaching theories for their own well-being by providing care in a safe environment with cultural sensitivity, taking controversies into consideration bioethical and legal. **1.I.1** Highlight their self-esteem, confidence, and self-determination when sharing responsibilities with their peers and interprofessional team, when analyzing nursing theories about old age, when making physical estimates in the individual, family, group, and community in different health scenarios. **1.J.1**

Competency	Nursing Programs Competencies	ENFE 3104 (A) ENFE 3105 (B) ENFE 3205 (C) SEMESTER I	ENFE 4101 (D) ENFE 4102 (E) SEMESTER II	ENFE 4207 (F) ENFE 4208 (G) SEMESTER III	ENFE 3004 (H) ENFE 3006 (I) ENFE 3008 (J) ENFE 3009 (K)
		peers and patients, family members, groups, and the community in different health and interprofessional team settings, using different nursing models, concepts, and theories as a basis.		family, groups, and community in primary, secondary, and tertiary health settings.	Develop with security, confidence, and determination the knowledge, theoretical and practical concepts derived from the research, gerontological and critical care processes, when planning and offering health education to the individual, family, groups, and community in different health scenarios. **1.K.1** Integrate the fundamental concepts of different conceptual frameworks, nursing theories and basic teaching-learning principles, by offering educational talks to the individual, family, groups, and the community in coordination with the interprofessional team in different health settings.
2. Develop the students' communication skills.	**2.1** Develop a person with written and oral communication skills to offer	**2.5.A.1** Discriminate different conceptual models and nursing theories when using oral and written	**2.6.D.1** Maximize oral and written communication by collaborating in the collection of relevant	**2.7.F.1** Value the concepts of oral and written communication in decision-making to	**2.I.1** Gather oral and written information to provide safe, compassionate, and comprehensive care by

Competency	Nursing Programs Competencies	ENFE 3104 (A) ENFE 3105 (B) ENFE 3205 (C) SEMESTER I	ENFE 4101 (D) ENFE 4102 (E) SEMESTER II	ENFE 4207 (F) ENFE 4208 (G) SEMESTER III	ENFE 3004 (H) ENFE 3006 (I) ENFE 3008 (J) ENFE 3009 (K)
	humanistic and assertive care and collaborate with other disciplines to promote an optimum health state to an individual, family, groups, and community in different scenarios.	communication during interventions with healthy patients and with health deviations in families, groups, and the community with the interprofessional team in different health settings. **2.5.B.1** Carry out different interviews, health history, and physical estimates to healthy people, families, groups, and communities with health deviations in different scenarios using information gathering instruments. **2.5.B.2** Estimate the concepts of oral and written communication when carrying out the physical estimate and offer a humanistic and assertive care to adults and the elderly with and without common and recurrent health deviations, to the family, groups, and community, and with the interprofessional team in	data in the research process, by participating in activities with the interprofessional team and nursing care provider in various health settings. **2.6.E.1** Plan different oral and written communication strategies used in the research process in the field of health and nursing by offering comprehensive and humanistic care to individuals, families, groups, and the community.	maintain effective and respectful communication of interprofessional collaboration in different health settings. **2.7.G.1** Prioritize oral and written communication in the performance of leadership skills when participating in interprofessional and interagency activities related to the continuity of safe and quality care offered to individuals, families, groups, and the community at different stages of growth and development in a variety of health settings. **2.7.G.2** Evaluate oral and written communication skills when supervising the nursing care offered by the people under their	intervening with individuals, families, groups, and the community in various health settings. **2.J.1** Adapt oral and written communication skills by proactively intervening with adults and the elderly, in individuals, families, groups and the community, critically ill clients, in various health settings by offering nursing care. **2.K.1** Apply the basic concepts of oral and written communication, when intervening with healthy people, family, groups, and the community together with members of the interprofessional team in different health settings; in the study of information related to different conceptual models and nursing theories.

Competency	Nursing Programs Competencies	ENFE 3104 (A) ENFE 3105 (B) ENFE 3205 (C) SEMESTER I	ENFE 4101 (D) ENFE 4102 (E) SEMESTER II	ENFE 4207 (F) ENFE 4208 (G) SEMESTER III	ENFE 3004 (H) ENFE 3006 (I) ENFE 3008 (J) ENFE 3009 (K)
		different health scenarios. **2.5.C.1** Discuss the basic concepts of oral and written communication required in health education and therapeutic interventions with healthy people, family, groups, community, and members of the interprofessional team in different health settings.		responsibility using the best administration, leadership, and evaluation practices.	
3. Develop the students' ability to establish positive interpersonal relationships in their daily life.	**3.1** Develop a person that establishes efficient and effective interpersonal relationships when planning with the corresponding nursing and interprofessional team to offer a humanistic and responsible care to an individual, family, groups, and community in different health scenarios	**3.5.A.1** Discuss the conceptual and theoretical models of nursing around interpersonal and therapeutic relationships, required to deal with activities in daily life and to offer humanistic and assertive care to healthy people and with health deviations to the family, groups and community in different health scenarios. **3.5.C.2** Share with patients, family members and the	**3.6.D.1** Examine the concepts of theoretical models on interpersonal relationships by collaborating in the participation in the development of the research process to offer humane and safe care to patients, families, groups, and the community in different health settings. **3.6.E.1** Establish positive interpersonal relationships with the	**3.7.F.1** Value the concepts of positive interpersonal relationships with individuals, family, groups, community, and other members of the nursing team to meet the demands of continuous, immediate, and future interactions, through nursing practice standards and relevant legislation. **3.7.G.1** Argue the concepts of theoretical models and positive interpersonal	**3.H.1** Uses concepts of effective interpersonal relationships when advocating for the rights of care to patients, family, groups, and the community in different health settings. **3.I.1** Discriminate the concepts of interpersonal relationships and ethical aspects when interacting with patients, family, groups, and the community as a health care provider in different health settings.

Competency	Nursing Programs Competencies	ENFE 3104 (A) ENFE 3105 (B) ENFE 3205 (C) SEMESTER I	ENFE 4101 (D) ENFE 4102 (E) SEMESTER II	ENFE 4207 (F) ENFE 4208 (G) SEMESTER III	ENFE 3004 (H) ENFE 3006 (I) ENFE 3008 (J) ENFE 3009 (K)
		interprofessional team and members of the college community in different social and professional activities as a member of the profession in different health settings.	interprofessional team by offering humanistic and responsible care to individuals, families, groups, and the community in different health settings. **3.6.E.2** Examine the importance of interpersonal relationships when implementing measures to promote a safe and quality environment for patients, families, groups, and the community in different health settings. **3.6.E.3** Integrate positive interpersonal relationships, using various efficient and effective referral resources to promote, maintain, and restore health to individuals, families, groups, and communities in different health settings.	relationships by assuming leadership skills, offering assertive and proactive humanistic care to individuals, families, groups, and the community as a member of a profession in different health settings. **3.7.G.2** Evaluate the principles and relevant aspects of positive interpersonal relationships, in the supervision of nursing care offered by the people under their responsibility, using the best management, leadership and evaluation practices in different health scenarios.	**3.J.1** Accentuate the importance of positive and therapeutic interpersonal relationships in their daily lives, by carrying out humanistic and assertive care in patients with and without health deviations in the family, groups, and community in different health scenarios.
4. Develop the students'	**4.1** Develop a person with	**4.5.A.1**	**4.6.D.1**	**4.7.F.1**	**4.I.1**

Competency	Nursing Programs Competencies	ENFE 3104 (A) ENFE 3105 (B) ENFE 3205 (C) SEMESTER I	ENFE 4101 (D) ENFE 4102 (E) SEMESTER II	ENFE 4207 (F) ENFE 4208 (G) SEMESTER III	ENFE 3004 (H) ENFE 3006 (I) ENFE 3008 (J) ENFE 3009 (K)
logical and quantitative reasoning skills.	quantitative and logical reasoning when planning, offering, and evaluating a nursing care in collaboration with the interprofessional team to promote care environmental y secure working scenarios for an individual, family, groups, and community.	Apply logical and quantitative reasoning skills when studying different conceptual models and nursing theories, when estimating health and basic human needs in individuals, families, groups, and communities through the stages of growth and development in different health care settings primary, secondary, tertiary, and supra-tertiary. **4.5.A.2** Interpret the different conceptual models, nursing theories and legal ethical aspects through logical and quantitative reasoning, protecting the rights of patients when intervening with the individual, family, groups, and community in different health scenarios. **4.5.C.1** Demonstrate knowledge of logical and quantitative reasoning when planning, offering,	Integrate logical and quantitative reasoning skills in the stages of the research process to apply evidence-based practice when intervening with individuals, families, groups, and the community in different health settings. **4.6.D.2** Develop logical and quantitative reasoning skills when using the scientific method in the research process when collaborating with the interprofessional team in data collection, documentation, and dissemination of evidence when intervening with individuals, families, groups, and the community in different health settings. **4.6.D.3** Implement logical and quantitative reasoning skills when protecting legal ethical principles as a defender of the	Judge the logical and quantitative reasoning skills, when using the nursing process when making decisions in the provision of high-quality care, in coordination with the interprofessional team in different health scenarios for individuals, families, groups, and the community. **4.7.G.1** Value the concepts of logical and quantitative reasoning as a leader and member of the nursing discipline, use the standards of practice and problem-solving methods, when intervening with individuals, families, groups, and the community in different health scenarios. **4.7.G.2** Compare the concepts of logical and quantitative reasoning by evidencing multiple	Analyze basic human needs through different logical and quantitative reasoning skills, conceptual models and nursing theories when intervening with people with and without health deviations by offering nursing care in safe work settings to individuals, families, groups, and the community, during the different stages of the life cycle. **4.K.1** Use logical and quantitative reasoning when recognizing the integration of knowledge, skills, and abilities that serve as a human link between the patient, family, groups, and community in the complex health care environment.

Competency	Nursing Programs Competencies	ENFE 3104 (A) ENFE 3105 (B) ENFE 3205 (C) SEMESTER I	ENFE 4101 (D) ENFE 4102 (E) SEMESTER II	ENFE 4207 (F) ENFE 4208 (G) SEMESTER III	ENFE 3004 (H) ENFE 3006 (I) ENFE 3008 (J) ENFE 3009 (K)
		and evaluating nursing care to promote the well-being and maintenance of health for the individual, family, groups, and community in different health settings.	rights of individuals, families, groups, and the community when using the research process in different health settings. **4.6.D.4** Estimates logical and quantitative reasoning skills when analyzing research findings and other evidence when planning, offering, and evaluating high-quality, multidimensional nursing care to individuals, families, groups, and the community in different health settings.	knowledge to support practice and clinical judgments, in collaboration with the interprofessional team when intervening with the individual, family, groups, and community in different health scenarios. **4.7.G.3** Evaluate in the clinical experience the results obtained in decision-making and in the establishment of priorities, when planning and offering nursing care to individuals, families, groups and the community in collaboration with the interprofessional team in different health scenarios.	
5. Empower students to make value judgments, make decisions, and adapt to society's changes.	**5.1** Prepare to make sound judgments, critical thinking and decision making to apply the nursing processes and use problem	**5.5.A.1** Discuss different conceptual models, nursing theories and the critical thinking model that serve as a basis for making decisions in solving problems presented by individuals,	**5.6.D.1** Interpret different problem-solving models based on evidence from nursing practice and research theories when offering health care to individuals, families, groups, and the	**5.7.G.1** Judge the concepts of decision-making based on evidence from nursing practice by demonstrating leadership skills as a care manager for the individual, family,	**5.H.1** Distinguish legal ethical concepts, to formulate critical judgments and make decisions with the interprofessional team, in nursing care offered in different health scenarios

Competency	Nursing Programs Competencies	ENFE 3104 (A) ENFE 3105 (B) ENFE 3205 (C) SEMESTER I	ENFE 4101 (D) ENFE 4102 (E) SEMESTER II	ENFE 4207 (F) ENFE 4208 (G) SEMESTER III	ENFE 3004 (H) ENFE 3006 (I) ENFE 3008 (J) ENFE 3009 (K)
	solving models when adapting to political, social, and economic changes along with organizational ethical, legal, regulatory, and political changes to offer care to an individual, family, groups and community.	families, groups, and the community in different health care settings. **5.5.B.1** Use the nursing process and critical thinking as scientific tools when offering care to individuals, families, groups, and the community with the interprofessional team in different health settings. **5.5.C.1** Interpret problem solving models when adapting to political, social, and economic changes in the provision of care offered to the individual, family, groups, and community in different health settings.	community in different health settings. **5.6.D.2** Contrast the ethical and legal principles of the research process, the nursing process, and the decision-making process when offering care to individuals, families, groups, and the community in different health settings. **5.6.E.1** Examine the nursing process and method of solving problems in the appreciation of political, social, and economic changes when intervening with individuals, families, groups, and the community in different health scenarios.	groups, and community in different health settings. **5.7.G.2** Argue about the models of problem solving and decision making as a leader and member of a profession when adapting to political, social, and economic changes, when offering health care in different scenarios.	to the individual, family, groups and community. **5.H.2** Compare bioethical-legal aspects, regulations and organizational policies as a leader and member of a profession; by developing trust and respect towards the interprofessional team and as an advocate of individual, family, group and community care in different health settings. **5.J.1** Analyze adequate nursing care to proactively intervene with adults and the elderly, in individuals, families, groups and the community, critically ill clients, in various health scenarios. **5.K.1** Discriminate the evidence based on nursing practice and clinical judgment through the nursing process from an interprofessional perspective, by providing safe and quality care

Competency	Nursing Programs Competencies	ENFE 3104 (A) ENFE 3105 (B) ENFE 3205 (C) SEMESTER I	ENFE 4101 (D) ENFE 4102 (E) SEMESTER II	ENFE 4207 (F) ENFE 4208 (G) SEMESTER III	ENFE 3004 (H) ENFE 3006 (I) ENFE 3008 (J) ENFE 3009 (K)
					when it intervenes with the individual, family, groups, and community in different health scenarios. **5.K.2** Specify the regulations, policies, legal, and organizational to offer safe and quality health care to individuals, families, groups, and communities in different health settings.
6. Develop in the learner appreciation for their cultural and historical heritage.	**6.1** Develop in the student the appreciation for the nursing historic and transcultural heritage when offering a humanistic care to an individual, family, groups, and community on different life cycles.	**6.5.A.1** Discuss the origin, development, and evolution of different conceptual models and theories of transcultural nursing when offering humanistic care to the individual, family, groups, and community in different health settings. **6.5.A.2** Apply conceptual models and nursing theories in the practice of the profession in Puerto Rico and its historical and transcultural heritage by offering humanistic and assertive care to the	**6.6.E.1** Integrate historical and cross-cultural evolution by applying knowledge of cultural factors when providing nursing care with diverse populations in different health settings. **6.6.E.2** Examine historical heritage and cross-cultural evolution as a nursing researcher by exploring the cultural and ethical legal impact of advocating for the provision of health services to individuals, families, groups, and	**6.7.F.1** Value their leadership and their relationship with the historical and cultural heritage in the implications of policies, justice and social, legal equity and costs in health services in different scenarios. **6.7.F.2** Judge the historical and transcultural heritage by supervising safe, compassionate, and comprehensive nursing care through the health services offered to the individual, family,	**6.H.1** Analyze the bioethical-legal aspects, regulations, and organizational policies regarding the historical and transcultural heritage in collaboration with an interprofessional team in favor of individual, family, group and community care in different health scenarios. **6.I.1** Manage the application of universal transcultural care in the self-care of individuals, families, groups, and the

Competency	Nursing Programs Competencies	ENFE 3104 (A) ENFE 3105 (B) ENFE 3205 (C) SEMESTER I	ENFE 4101 (D) ENFE 4102 (E) SEMESTER II	ENFE 4207 (F) ENFE 4208 (G) SEMESTER III	ENFE 3004 (H) ENFE 3006 (I) ENFE 3008 (J) ENFE 3009 (K)
		individual, family, groups, and community in the different life cycles and health scenarios. **6.5.C.1** Explain the origin and historical development of nursing in the universal and Puerto Rican context by intervening with the individual, family, groups, and community in the different life cycles and health scenarios. **6.5.C.2** Analyze the historical and universal development of the ethical and cultural aspects of nursing in Puerto Rico when intervening with the individual, family, groups, and community in different health care settings.	communities in different health settings.	groups and community in different settings. **6.7.G.1** Estimate the historical and cross-cultural heritage, by demonstrating leadership skills and as a member of a profession by offering humanistic care, with social, ethical, and moral justice to the individual, family, groups, and community in different health settings.	community, considering the different life cycles and health scenarios. **6.K.1** Adapt the historical and transcultural dimension by collaborating with the interprofessional team and offering nursing interventions taking into account spirituality and cultural experiences to individuals, families, groups, and the community in different health settings.
7. Promote the appreciation, preservation and improvement of the environment, the natural	**7.1** Cultivate appreciation, security, preservation and wellbeing of the environment, the natural world and personal health,	**7.5.A.1** Explain the concepts of biological sciences, conceptual models and nursing theories in the appreciation, preservation, and improvement of the environment, 'the natural	**7.6.E.1** Examine the professional relationship as a member of a discipline and interprofessional team from a professional and ethical perspective in the	**7.7.G.1** Select leadership skills to provide safety principles in the work setting with the interprofessional team and as a member of a profession, promoting a safe care	**7.I.1** Maximize the measures that promote self-care when carrying out activities as a health provider, in appreciation, preservation, and maintenance of the environment, the natural

Competency	Nursing Programs Competencies	ENFE 3104 (A) ENFE 3105 (B) ENFE 3205 (C) SEMESTER I	ENFE 4101 (D) ENFE 4102 (E) SEMESTER II	ENFE 4207 (F) ENFE 4208 (G) SEMESTER III	ENFE 3004 (H) ENFE 3006 (I) ENFE 3008 (J) ENFE 3009 (K)
world and personal health.	applying the knowledge of biological and behavioral sciences, security measures of clients and of nursing when valuing human needs of an individual, family, groups, and community.	world and personal health as a guide in estimating the basic human needs of people with and without health deviations in different stages of growth and development, when sharing responsibilities with the interprofessional team in different scenarios of individual, family, group, and community health care. **7.5.B.1** Assess the professional and environmental risks that impact nursing practice in different health settings when applying the nursing process and direct care to the patient. **7.5.C.1** Demonstrate basic knowledge of regulatory environmental policies and laws at the local and state level, and new global trends by offering care in different safe environments to individuals, families,	process of problem solving, critical thinking and decision making in preservation, client safety, improvement of the environment, the natural world and health personal, by intervening with the individual, family, groups, and community in different health scenarios. **7.6.E.2** Manage therapeutic interventions applying the knowledge of biological, behavioral, and nursing sciences, assess the basic human needs of the individual when carrying out health promotion activities as a care provider; in the appreciation, preservation, demographic changes, maintenance of the environment, the natural world and personal health by intervening with individuals, family, groups, and community	environment taking into account the organization and public policy in different health settings. **7.7.G.2** Argue leadership and decision-making skills when planning and intervening as a care manager in collaboration with the interprofessional team and other health agencies as a link between the patient, family, groups, and community to preserve and improve the environment, the natural world, and personal health. **7.7.G.3** Assess the professional and environmental risks that impact nursing practice in different health settings when offering nursing care and when supervising that care provided by personnel	world, safety, and personal health when intervening with individuals, families, groups, and the community in different health care settings. **7.K.1** Associate a variety of norms and procedures from different conceptual frameworks and nursing theories that develop in the student the appreciation, preservation and improvement of the environment, the natural world and personal health when advocating for vulnerable populations, promoting social justice, ethical and moral responsibility in planning care for individuals, families, groups, and the community in different health scenarios.

Competency	Nursing Programs Competencies	ENFE 3104 (A) ENFE 3105 (B) ENFE 3205 (C) SEMESTER I	ENFE 4101 (D) ENFE 4102 (E) SEMESTER II	ENFE 4207 (F) ENFE 4208 (G) SEMESTER III	ENFE 3004 (H) ENFE 3006 (I) ENFE 3008 (J) ENFE 3009 (K)
		groups, and the community.	in different health scenarios. **7.6.E.3** Assess the professional and environmental risks that impact nursing practice in different health settings when intervening with the individual, group, family, and community.	under their supervision.	
8. Develop students' willingness to assume leadership roles, fulfill their civic duties and responsibilities and contribute to the economy of their country.	**8.1** Develop a person that takes leadership, professional values, abides to duty, supervise, and administers nursing care, advocates for citizen rights, and contributes with the economy of the country.	**8.5.A.1** Discuss the laws, conceptual frameworks, theories, norms, and procedures that regulate nursing practice in Puerto Rico and the United States when intervening with different people, families, groups, and communities, and with the interprofessional team in different areas. **8.5.C.1** Recognize the responsibility of leadership and values in the performance of functions as a general nursing professional in different health settings, while advocating for the rights of the citizen,	**8.6.D.1** Implement safety and responsibility when intervening with individuals, families, groups, and the community by integrating evidence-based research findings in different health settings. **8.6.E.1** Integrate ethical-legal aspects and leadership skills, when intervening with the client, family, groups, and community with health disorders in different scenarios. **8.6.E.2** Establish clinical judgment and decision-	**8.7.G.1** Value leadership skills when supervising and managing nursing care in fulfilling their functions as provider and administrator of health services when intervening with individuals, families, groups, and the community in different health settings. **8.7.G.2** Estimate the leadership, supervision, and other responsibilities in the performance of functions as a general nursing professional in different health settings when	**8.H.1** Apply the ethical-moral concepts based on the body of knowledge that regulate the standards of nursing practice in Puerto Rico, as a guide to intervene with the individual, family, groups, and community in different health scenarios. **8.J.1** Develop with security, confidence, and determination the knowledge, theoretical and practical concepts derived from the research, gerontological and critical care processes, when planning and offering health

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		family, groups, and community. **8.5.C.2** Interpret the civic, political, legal, cost-effective, and quality aspects that impact nursing practice when assuming leadership in nursing care in different health settings for the individual, family, groups, and community. **8.5.C.3** Demonstrate civic, political, and economic commitment as a member of the interprofessional team by promoting quality care by intervening with the individual, family, groups, and community in different health settings.	making skills as care alternatives to improve health, promotion, self-care, and aspects that contribute to the country's economy by offering nursing care to individuals, families, groups, and the community in different health settings. **8.6.E.3** Maximize the influence of globalization, trends and advances evidenced by nursing practice with the client, family, groups, and community in different health settings.	intervening with individuals, families, groups, and the community. **8.7.G.3** Evaluate the roles and responsibilities as a leader to achieve the goals and improve the practice and professional competencies in nursing care as a collaborator with the members of the interprofessional team in the administration of nursing care in different health settings.	education to the individual, family, groups, and community in different health scenarios.
9. Develop students' technological knowledge and its applications.	**9.1** Develop students' technological knowledge with a high skill level and specialized and basic technical skills abilities to fulfil biological,	**9.5.A.1** Discuss the variety of technological methods and basic skills based on different conceptual models, nursing theories, and other sciences required to meet the biological, social, spiritual, and emotional	**9.6.D.1** Choose technological advances with a high degree of expertise, when applying the database and online management when performing interventions with individuals, families,	**9.7.F.1** Value technological changes and information systems as a care manager in decision-making and as a member of the interprofessional team when intervening with individuals, families,	**9.H.1** Apply ethical-legal theories in the management of information and electronic files by maintaining privacy and confidentiality when intervening with the individual, family,

Competency	Nursing Programs Competencies	ENFE 3104 (A) ENFE 3105 (B) ENFE 3205 (C) SEMESTER I	ENFE 4101 (D) ENFE 4102 (E) SEMESTER II	ENFE 4207 (F) ENFE 4208 (G) SEMESTER III	ENFE 3004 (H) ENFE 3006 (I) ENFE 3008 (J) ENFE 3009 (K)
	social, spiritual, and emotional needs of the individual through health care levels in different scenarios.	needs of the patient, family, groups, and community in different health settings. **9.5.C.1** Recognize technological advances and a high degree of expertise for safe and quality care for individuals, families, groups, and the community in different health settings.	groups, and the community in different health scenarios. **9.6.D.2** Examine technological resources for specialized evidence-based practice to meet the biological, social, spiritual, and emotional needs of the individual, family, groups, and community across levels of health care in different settings. **9.6.E.1** Integrate specialized skills in communication management, using technological advances to promote safe and ethical-legal care for individuals, families, groups, and the community in different health settings. **9.6.E.2** Implement technology with a high degree of expertise when using electronic formats and clinical records when intervening with	groups, and the community in different health settings. **9.7.G.1** Select technological advances, and technical skills as a leader when supervising the care of individuals, families, groups, and the community in different health settings. **9.7.G.2** Judge technological advances as a leader by assuming responsibility for competencies in nursing practice, their improvement and professional development, and the staff under their supervision.	groups, and community in different health scenarios. **9.K.1** Identify the role of nursing in the management of information systems and technological advances when planning health levels in different scenarios.

Competency	Nursing Programs Competencies	ENFE 3104 (A) ENFE 3105 (B) ENFE 3205 (C)	ENFE 4101 (D) ENFE 4102 (E)	ENFE 4207 (F) ENFE 4208 (G)	ENFE 3004 (H) ENFE 3006 (I) ENFE 3008 (J) ENFE 3009 (K)
		SEMESTER I	SEMESTER II	SEMESTER III	
			individuals, families, groups, and the community in different health settings.		

Appendix I.A.2

HRSD Systematic Evaluation Plan

COLEGIO UNIVERSITARIO DE SAN JUAN
Health Related Sciences Department
Baccalaureate of Sciences in Nursing (BSN)

HRSD SYSTEMATIC EVALUATION PLAN

CUSJ Health Related Sciences Department (HRSD) and the faculty understand the importance of developing processes to foster a continuous analysis on program, faculty and student learning outcomes through data gathering in a methodical and structured manner. This Systematic Plan provides the groundwork to pursue program effectiveness. HRSD Director, Coordinator, Personnel, and Faculty and CUSJ multiple offices play an essential role in this process.

This document presents:

- CUSJ and BSN Program Goals
- HRSD Systematic Plan regarding the Goals
- The professional standards, guidelines, laws, regulations, competencies, and recommendations established by regulatory and accreditation organizations regarding the BSN Program curriculum.

CUSJ AND BSN PROGRAM'S GOALS

CUSJ Goals

1. Promote the holistic development of the student.
2. Provide varied, flexible, and updated programs of excellence that respond to the needs of the community.
3. Maintain an academic and professional climate that stimulates a constant desire for self-improvement among all members of the university community.

BSN Program's Goals

1. Develop professional in health fields in accordance with institutional goals and objectives.
2. Transform the students through multiple dimensions (humanistic, ethical-legal, bio-psycho-social, and cultural) on the health field.
3. Train committed professionals to take leadership and act as change-enabling agents in the health field.

HRSD SYSTEMATIC EVALUATION PLAN

Goals		Standard and Key Elements		Person(s) Responsible	Timeframe
CUSJ	Program				
STANDARD I - PROGRAM QUALITY: MISSION AND GOVERNANCE					
1	1, 2	I-A.	The mission, goals, and expected program outcomes are: ▪ congruent with those of the parent institution; and ▪ reviewed periodically and revised as appropriate.	• HRSD Director • HRSD Committees • Faculty	Every 5 years or as necessary
1	1, 2	I-B.	The mission, goals, and expected program outcomes are consistent with relevant professional nursing standards and guidelines for the preparation of nursing professionals.	• HRSD Director • HRSD Committees • Faculty	Every 5 years or as necessary
1	1, 2	I-C.	The mission, goals, and expected program outcomes reflect the needs and expectations of the community of interest.	• HRSD Director • HRSD Committees • Faculty • Community of Interest	Annual
1, 3	1, 3	I-D.	The nursing unit's expectations for faculty are written and communicated to the faculty and are congruent with institutional expectations.	• HRSD Director • Curriculum Committee	Annual
3	3	I-E.	Faculty and students participate in program governance.	• HRSD Director • Faculty • Students	As needed
1, 3	1	I-F.	Academic policies of the parent institution and the nursing program are congruent and support achievement of the mission, goals, and expected program outcomes. These policies are: ▪ fair and equitable; ▪ published and accessible; ▪ and reviewed and revised as necessary to foster program improvement.	• Chancellor • Deans • HRSD Director	As needed
2	1	I-G.	The program defines and reviews formal complaints according to established policies.	• HRSD Director • Faculty	Annual
2	1, 3	I-H.	Documents and publications are accurate. A process is used to notify constituents about changes in documents and publications.	• Chancellor • Dean of Academic Affairs • Director	As needed
STANDARD II - PROGRAM QUALITY: INSTITUTIONAL COMMITMENT AND RESOURCES					
1, 2, 3	1, 2, 3	II-A.	Fiscal resources are sufficient to enable the program to fulfill its	• HRSD Director	Annual

Goals		Standard and Key Elements	Person(s) Responsible	Timeframe
CUSJ	Program			
		mission, goals, and expected outcomes. Adequacy of fiscal resources is reviewed periodically, and resources are modified as needed.	• Deans of Academic, Administrative and Student Affairs	
1, 2, 3	1, 2, 3	II-B. Physical resources and clinical sites enable the program to fulfill its mission, goals, and expected outcomes. Adequacy of physical resources and clinical sites is reviewed periodically, and resources are modified as needed.	• HRSD Director • Deans of Academic, Administrative and Student Affairs	Annual
1	1, 2	II-C. Academic support services are sufficient to meet program and student needs and are evaluated on a regular basis.	• HRSD Director • Deans of Academic and Student Affairs	Annual
3	1, 3	II-D. The chief nurse administrator of the nursing unit: ▪ is a registered nurse (RN); ▪ holds a graduate degree in nursing; ▪ holds a doctoral degree if the nursing unit offers a graduate program in nursing; ▪ is vested with the administrative authority to accomplish the mission, goals, and expected program outcomes; and ▪ provides effective leadership to the nursing unit in achieving its mission, goals, and expected program outcomes.	• HRSD Director	As needed
3	3	II-E. Faculty are: ▪ sufficient in number to accomplish the mission, goals, and expected program outcomes; ▪ academically prepared for the areas in which they teach; ▪ and experientially prepared for the areas in which they teach.	• HRSD Director • HRSD Coordinator • CUSJ Human Resources Official	Annual
1, 3	N/A	II-F. Preceptors (e.g., mentors, guides, coaches), if used by the program as an extension of faculty, are academically and experientially qualified for their role.	• HRSD Director if an opportunity arises	N/A
2	1, 3	II-G. The parent institution and program provide and support an environment that encourages faculty teaching, scholarship, service, and practice in keeping with the mission, goals, and expected faculty outcomes.	• Chancellor • Deans • HRSD Director • HRSD Coordinator	Annual
STANDARD III - PROGRAM QUALITY: CURRICULUM AND TEACHING-LEARNING PRACTICES				
1, 3	1, 2	III-A. The curriculum is developed, implemented, and revised to reflect clear statements of expected student outcomes that: ▪ are congruent with the program's mission and goals;	• HRSD Director • HRSD Committees • Faculty • Community of Interest	Every 5 years or as needed

Goals		Standard and Key Elements	Person(s) Responsible	Timeframe
CUSJ	Program			
		▪ are congruent with the roles for which the program is preparing its graduates; ▪ and consider the needs of the program–identified community of interest.		
1, 2	2, 3	III-B. Baccalaureate curricula are developed, implemented, and revised to reflect relevant professional nursing standards and guidelines, which are clearly evident within the curriculum and within the expected student outcomes (individual and aggregate). Baccalaureate program curricula incorporate *The Essentials of Baccalaureate Education for Professional Nursing Practice* (AACN, 2008).	• HRSD Director • Curriculum Committee • Faculty	Annual
N/A	N/A	III-C. Master's curricula are developed, implemented, and revised to reflect relevant professional nursing standards and guidelines, which are clearly evident within the curriculum and within the expected student outcomes (individual and aggregate).	• N/A	N/A
N/A	N/A	III-D. DNP curricula are developed, implemented, and revised to reflect relevant professional nursing standards and guidelines, which are clearly evident within the curriculum and within the expected student outcomes (individual and aggregate).	• N/A	N/A
N/A	N/A	III-E. Post-graduate APRN certificate program curricula are developed, implemented, and revised to reflect relevant professional nursing standards and guidelines, which are clearly evident within the curriculum and within the expected student outcomes (individual and aggregate). Post-graduate APRN certificate programs that prepare nurse practitioners incorporate Criteria for Evaluation of Nurse Practitioner Programs (NTF, 2016)	• N/A	N/A
2	2	III-F. The curriculum is logically structured to achieve expected student outcomes. ▪ Baccalaureate curricula build on a foundation of the arts, sciences, and humanities. ▪ Master's curricula build on a foundation comparable to baccalaureate-level nursing knowledge. ▪ DNP curricula build on a baccalaureate and/or master's foundation, depending on the level of entry of the student. ▪ Post-graduate APRN certificate programs build on graduate-level nursing competencies and knowledge base.	• HRSD Director • Curriculum Committee • Faculty	Every 5 years or as needed
1, 2, 3	1, 2	III-G Teaching-learning practices:	• HRSD Director	Annual

Goals		Standard and Key Elements	Person(s) Responsible	Timeframe
CUSJ	Program			
		▪ support the achievement of expected student outcomes; ▪ consider the needs and expectations of the identified community of interest; and ▪ expose students to individuals with diverse life experiences, perspectives, and backgrounds.	• Curriculum Committee • Faculty • Community of Interest	
1, 2, 3	2, 3	III-H The curriculum includes planned clinical practice experiences that: ▪ enable students to integrate new knowledge and demonstrate attainment of program outcomes; ▪ foster interprofessional collaborative practice; and ▪ are evaluated by faculty.	• HRSD Director • Curriculum Committee • Faculty	Annual
3	2, 3	III-I. Individual student performance is evaluated by the faculty and reflects the achievement of expected student outcomes. Evaluation policies and procedures for individual student performance are defined and consistently applied.	• HRSD Director • Faculty	Annual
1	2	III-J. The curriculum and teaching-learning practices are evaluated at regularly scheduled intervals, and evaluation data are used to foster ongoing improvement.	• HRSD Director • Curriculum Committee • Institutional Faculty Evaluation Committee • Faculty	Annual
STANDARD IV - PROGRAM EFFECTIVENESS: ASSESSMENT AND ACHIEVEMENT OF PROGRAM OUTCOMES				
1, 2, 3	1, 2, 3	IV-A. A systematic process is used to determine program effectiveness.	• HRSD Director • HRSD Committees • Faculty	Annually or as needed
3	1	IV-B. Program completion rates demonstrate program effectiveness.	• HRSD Director • OPIRE	Semester
3	1	IV-C. Licensure pass rates demonstrate program effectiveness.	• HRSD Director • OPIRE	Annual
N/A	N/A	IV-D. Certification pass rates demonstrate program effectiveness.	•	
3	1	IV-E. Employment rates demonstrate program effectiveness.	• HRSD Director • Training and Job and Placement Officer	Annual
1, 2, 3	1, 2, 3	IV-F. Data regarding completion, licensure, certification, and employment rates are used, as appropriate, to foster ongoing program improvement.	• HRSD Director • HRSD Committees • Faculty	Annually or as needed

Goals		Standard and Key Elements	Person(s) Responsible	Timeframe
CUSJ	Program			
2	1, 2, 3	IV-G. Aggregate faculty outcomes demonstrate program effectiveness.	• HRSD Director • Curriculum Committee • Faculty	Annual
2	1, 2, 3	IV-H. Aggregate faculty outcome data are analyzed and used, as appropriate, to foster ongoing program improvement.	• HRSD Director • Curriculum Committee • Faculty	Annual
2	1, 2, 3	IV-I. Program outcomes demonstrate program effectiveness.	• HRSD Director • Faculty	Annual
2	1, 2, 3	IV-J. Program outcome data are used, as appropriate, to foster ongoing program improvement.	• HRSD Director • Faculty	Annual

CUSJ AND BSN PROGRAM'S RELATION TO REGULATIONS, GUIDELINES, AND STANDARDS

DOCUMENT NAME	CUSJ GOALS	PROGRAM GOALS
Health Insurance Portability and Accountability Act of 1996 (HIPAA)	2	3
Law 254 of December 31, 2015 – Regulation of the Nursing Profession in Puerto Rico	1	1, 2, 3
Law #82 Puerto Rico College of Nursing Professionals	3	3
Healthy People 2030	1	3
Professional Nursing Standards (CPEPR)	1, 2, 3	1, 2, 3
Safety Guidelines (OSHA)	1, 2	1, 2, 3
Patient's Rights	1, 2	3
American Disabilities Act (ADA)	1, 2, 3	1-2-3
AACN Essentials of Baccalaureate Nursing Education	1, 2, 3	1, 2, 3
American Nurses Association (ANA)	1, 2, 3	1, 2, 3
Quality and Safety Educationfor Nurses (QSEN)	1, 2, 3	1, 2, 3
National Patient Safety Goals (Joint Commission)	1, 2, 3	1, 2, 3

Appendix II.E.1

BSN Faculty Profile

APPENDIX II.E.1

BSN FACULTY PROFILE

Name	Academic Rank	Teaching Years	Appointment / Workload	Faculty Credential			Nursing Courses Teaching Responsibility
				Academic Degree / Specialty Area	RN Licensure	Certifications / Professional Courses	
Rosario Rodríguez, Elizabeth	Instructor	33	Tenure Full Time	MSN 2001 Mother, Child, and Family	X	• Certified on **Hi-Fi**equipment • Configuration of Courses in Moodle • Online Facilitator and Virtual Courses Manager • Medical Error Prevention and Root Cause Analysis • Laws and Rules for Florida Nurses • Recognizing Impairment in the Workplace • Recognizing and Reporting Human Trafficking in Florida • Strategies for appropriate Opioid Prescribing: The Florida APRN/PA Requirement • Domestic Violence: The Florida Requirement Imminent Death and Loss • Pituitary and Adrenal Disorders	3104, 3205,
Cuevas Ortiz, Diana	Instructor	Rosario Rodríguez, Elizabeth	Tenure Full Time	MSN 1990 Adult and Elderly	X	• Simulate educators • Certified on **Hi-Fi**equipment • BLS/CPR • Sensibility and Competency on the Service of LGBTQIA+ • Infection Prevention and Control: Hepatitis, HIV-AIDS, and Tuberculosis • Configuration of Courses in Moodle • Online Facilitator and Virtual Courses Manager • Mass Shooters and Murderers: Motives and Paths • Strategies for Appropriate Opioid Prescribing: The FL APRN/PA Requirement • Recognizing and Reporting Human Trafficking in	3006, 3104, 3205, 4207, 4208

Name	Academic Rank	Teaching Years	Appointment / Workload	Faculty Credential			Nursing Courses Teaching Responsibility
				Academic Degree / Specialty Area	RN Licensure	Certifications / Professional Courses	
						Florida • Recognizing Impairment in the Workplace: Florida Requirement • Domestic violence: The Florida Requirement • Medical Error Prevention and Root Cause Analysis	
Laguna Claudio, Ana	Instructor	9	Tenure Full Time	MSN 2012 Mental Health and Psychiatric	X	• Certificate of Interventions of protective measures with the patient MentalHealth • Certified on **Hi-Fi**equipment • Configuration of Courses in Moodle • Online Facilitator and Virtual Courses Manager	3205, 4102
Nieves Ramos, José R.	Associate Professor	32	Tenure Full Time	MSN 1991 Community	X	• Certified on **Hi-Fi**equipment • Configuration of Courses in Moodle • Online Facilitator and Virtual Courses Manager • Vaccination promoter • Information skills	4207
Bernier Barriera, Jesús	Instructor	2	Non-Tenure Part Time	MSN 2021 Mental Health and Psychiatric	X	• Autism spectrum disorder • Effect of Covid-19 on health and quality of life in elderly people • Cultural competence in services to the population LGBTTIQ • Communicable respiratory diseases: Influenza, Mycoplasma and Covid-19 • Infection prevention and control: Hepatitis, HIV/SIDA y Tuberculosis • Certification in Nonviolent Crisis Intervention (CPI) • Symposium: Clinical interventions in the management of patient with stroke • Quiñones Nursing Institute Skin and Wound Care Specialist Certification • Advanced Cardiopulmonary Resuscitation Measures (ACLS) Course	3004, 4208

Name	Academic Rank	Teaching Years	Appointment / Workload	Faculty Credential			Nursing Courses Teaching Responsibility
				Academic Degree / Specialty Area	RN Licensure	Certifications / Professional Courses	
						• Course on Management of Patients with Burns	
Bravo Arana, Emma	Instructor	4	Non-Tenure Part Time	MSN 2019 Adult and Elderly	X	• Management of COVID-19 in Mental Health and in Different Clinical Scenarios • Cultural competence in services to the population LGBTTIQ • Breastfeeding Crisis Intervention and Suicide Vulnerability Florida (CEUfast) • EKG/EGG Interpretation • OSHA: Occupational Exposure to Blood Borne Pathogens • Alzheimer and Vascular Dementia • Infection Control and Barrier Precautions	4208
Cano González, Onelia	Instructor	5	Non-Tenure Part Time	MSN 2020 Clinical specialist	X	• Fentanyl: Emerging Drug and the Threat of Overdose • Configuration of Courses in Moodle • Non-Violent Intervention in Crisis	3006, 3008, 3105, 3205
De la Rosa Damián, Yasmín	Instructor	9	Non-Tenure Part Time	MSN 2017 Adult and Elderly	X	• Simulate educators • Certified on **Hi-Fi**equipment • Vaccination Promoter • Hepatobiliary Pathologies • Infection Prevention and Control: Hepatitis, HIV/AIDS and Tuberculosis • Polypharmacy and its Management: What the Health Professional Should Know • The Aging Evolutionary Process • Cultural Sensitivity and Competence in Services to the Population LGBTTIQ • Basic Life Support (CPR and AED) Program • Effect of Covid-a9 on Health and Quality of Life in the Elderly • Online Facilitator and Virtual Courses Manager	4102

Name	Academic Rank	Teaching Years	Appointment / Workload	Faculty Credential			Nursing Courses Teaching Responsibility
				Academic Degree / Specialty Area	RN Licensure	Certifications / Professional Courses	
						• Communicable Respiratory Diseases	
Díaz Torres, Michael	Instructor	2	Non-Tenure Part Time	MSN 2016 Menta Health and Psychiatric	X	• Advance Cardiovascular Life Support • Certificate of Interventions of protective measures with the patient MentalHealth. • N-95 Particulate Respiratory	3006
López López, Osvil	Instructor	2	Non-Tenure Part Time	MSN 2022 Pediatrics and Adult	X	• FEMA IS-00100.C Introduction to Incident Command System, ICS-100 • Nephrology and Hemodialysis Nursing • OSHA Certification, Infection Control, National Goals and HIPAA • Professional Education Care Services: CPR, (2023) • Professional Education Care Services: ACLS, (2023) • Professional Education Care Services: PALS, (2023) • Crisis Prevention Interventions "CPI" • Online Facilitator and Virtual Courses Manager • Management and Administration of the COVID-19 Vaccine • EKG & Pharmacology Course • Surgical Nursing Specialist Course • Phlebotomy Technician Course • Depression, anxiety disorders, psychosis, and substance use disorders	3008, 3104, 3105, 3205
López Vázquez, Lesbia	Instructor	25	Non-Tenure Part Time	MSN 2007 Adult and Elderly	X	• Prevention of falls in the elderly • Communicable respiratory diseases: Influenza, Mycoplasma and Covid-19 • Cultural competence in services to the population LBGTTIQ+ • Infection control, Hepatitis, HIV/AIDS and	3009, 4208

Name	Academic Rank	Teaching Years	Appointment / Workload	Faculty Credential			Nursing Courses Teaching Responsibility
				Academic Degree / Specialty Area	RN Licensure	Certifications / Professional Courses	
						Tuberculosis. • Organizational and systematic management, supervision and leadership: Efecctive in a health organization. • Management skills seminar. • Identification of abuse and maltreatment of the elderly	
Matienzo Rosario, Lourdes	Instructor	8	Non-Tenure Part Time	MSN 2015 Adult and Elderly	X	• Management Supervision and Organizational and Systematic Leadership: Effective in a Health Organization • Cultural Competence in Services to the LGBTTR+ Population • Advanced Cardiac Life Support (ACLS) CPR • Basic Life Support (CPR and AED) • Patient Safety and Role of Medical Adhesives • Communicable Respiratory Diseases: Influenza, Mycoplasma and Coronavirus (COVID-19) • Handling of Evidence Collection Kit • Forensic Sexual Assault Victims • Forensic Nursing Certification • Advance Cardiac Life Support	3004, 4208
Morales Ramos, Joshua	Instructor	2	Non-Tenure Part Time	MSN Adult and Elderly	X	• Simulate educator • Annual congress of the Puerto Rican society of Ophtalmology • Communicable respiratory diseases: Coronavirus, Influenza and Mycoplasma • Certificate: Hipaa law, Osha and Emtala law • Virtual course for the management of thr Covid-19 vaccine • Course: Exposure control plan for Covid-19 of the RCM	3104, 4102
Soto Candelaria,	Instructor	20	Non-Tenure Part Time	MSN 1982 Adult and	X	• Mass mortality plan inhospital emergencies • Early warning systems starfish	4101, 4208

Name	Academic Rank	Teaching Years	Appointment / Workload	Faculty Credential			Nursing Courses Teaching Responsibility
				Academic Degree / Specialty Area	RN Licensure	Certifications / Professional Courses	
Elva				Elderly		• Progressive Discipline(Progressive supervision) • Modification and therapy of behaviors in aggressive people • Nursing LeadershipSummit • Communicable Respiratory Diseases: Influenza, Mycoplasma and Covid-19 • Nursing Informatics: Constant Paradigm in 21st Century Practice and Education • Brain Gym: Exercise Your Neurons • Aging Evolutionary Process • Cultural Competence in Services to the Population LGBTTIQ+	
Zorrilla Hirujo, Hilario	Instructor	6	Non-Tenure Part Time	MSN Anesthetic	X	• Advanced skills: Nursing management of the adult client in critical health • Advanced skills: Nephrology	3006, 4207, 4208
NON-NURSING FACULTY							
Gelpi Rodríguez, Phaedra	Assistant Professor	30	Tenure Full Time	EdD 2008 Curriculum and Teaching in Science, Evaluation		• Quality Control Laboratory Academy • Online Facilitator and Virtual Courses Manager • Online Facilitator Copyright on Distance Learning • Configuration of Courses in Moodle	3009, 4101
Rosa Núñez, Waleska	Instructor	13	Non-Tenure Part Time	PsyD 2019 Organizational Psychology		• Configuration of Courses in Moodle • Online Facilitator and Virtual Courses Manager • Intervention in Social Work • Puerto Rico Social Work Code of Ethics	3004, 3009

Appendix III.B.1

BSN Course Descriptions

BSN COURSE DESCRIPTIONS

ENFE 3004 – BIOETHICS
3 credits, 3 class hours – Prerequisite: None
This course provides the student with knowledge to offer direct nursing care to groups, individuals, pregnant women, the family, and the community. It applies to any health scenario, including mental health and home health. Bioethics encompasses medical ethics but is not limited to it. It deals with the problems related to the values that arise from the doctor-patient relationship. The course's scope includes the problems related to values that arise in all health professions, including related professions. It applies to biomedical research and its behavior, regardless of whether or not their influence is direct and therapeutical. It addresses a wide range of social situations, such as what relates to public, occupational, and international health, and birth control ethics, among others. It covers situations relating to the life of animals and plants, for example, in terms of animal experiments and conflicting environmental demands. The student applies the nursing process and places clients in different self-care systems. The learner uses the knowledge acquired about communication, interpersonal relationships, interactions with groups of individuals, family, community and with the interdisciplinary team. The course cultivates in students their self-esteem, self-confidence, and appreciation for life.

ENFE 3006 – CRITICAL CARE
3 credits, 3 class hours – Prerequisite: None
The course provides students with the opportunity to acquire basic critical care knowledge and to continue developing critical thinking. The learning experiences are guided to stimulate in the student the intervention with critically ill adults, elderly and family who present deviations or needs of oxygenation, cardiovascular, cognitive, sensory, psychomotor and multisystemic deviations or needs. Emphasis is placed throughout the course on the use of the nursing process to meet human needs by intervening with critically ill adults, the elderly and family in different settings such as intensive, subacute, or intermediate care units and at home.

ENFE 3008 – GERONTOLOGY
3 credits, 3 class hours – Prerequisite: None
This course is designed so that nursing students have the opportunity to discuss the basics of gerontology and its recent research; identify the professional role of nursing in the promotion and maintenance of health in the elderly; in addition to knowing their needs, to carry out decision-making and problem solving. Through this content, the nursing professional will be able to obtain a suitable vision of the problems that may occur during the aging process, as well as the strategies that will help solve them. The course will also provide the necessary tools to promote critical thinking through the study and practice of health prevention, promotion, and maintenance programs in different scenarios. In the same way, knowledge will be provided about adaptation strategies that facilitate the aging process, achieving a better quality of life.

ENFE 3009 – HUMAN SEXUALITY
3 credits, 3 class hours per week - Prerequisite: None
The course provides the student with an affective and cognitive approach to the issues of human sexuality. It offers the opportunity to relate to values, feelings, self-esteem, and attitudes related to the biology of human sexuality. The teaching-learning process about sexuality is approached from a personal bridge that takes into consideration the experience, knowledge, convictions, and values of the individual. Interpersonal communication is a basic component of healthy and positive sexuality.

ENFE 3104 – NURSING THEORIES, MODELS AND ROLES

3 credits, 3 class hours – Prerequisite: None

This course provides the student with the opportunity to enter the nursing profession by studying the various theories developed by great thinkers in this field. It is studied in an organized way, using different activities, which promote communication skills, interpersonal relationships and decision making. The terms used are defined, their development or historical evolution studied. The term's application and acceptance in the nursing profession are logically analyzed. The student is guided in the analysis of nursing as a combination of science and art that usually includes different aspects of the human being, the environment and health, to the development of statements or postulates that respond to different points of view. It also provides the means to analyze and evaluate different nursing theories, so that as a person and future professionals, students can adopt them in activities of daily living and in their self-realization.

ENFE 3105 - NURSING PROCESS AND PHYSICAL ESTIMATION

3 credits, 3 class hours – Prerequisite: None

This course provides the student with the basic knowledge and skills to perform the patient's physical estimate as an essential nursing tool in the client's health care according to their stage of growth and development. When making the physical estimate, the student will value the importance of communication and interpersonal relationships with clients and the interdisciplinary team. The student will learn to use the nursing process, in conjunction with the physical estimate, to identify altered basic needs or universal requirements, and health deviations. The student will demonstrate technological knowledge and basic technical skills, respect, privacy, fulfill duties and rights citizens considering the ethical-legal aspects in his intervention. The student considers self-care, self-esteem, self-confidence, appreciation and improvement of the environment and historical and cultural heritage for their personal development and when offering nursing care. The student will carry out the skill of physical estimation incorporating the knowledge of the biological and social behavior sciences, through the methods of inspection, auscultation, percussion, and palpation.

ENFE 3205 - CORE IN NURSING

4 credits, 4 class hours – Prerequisite: None

The course provides the student with the opportunity to integrate and expand knowledge, skills, and attitudes in the areas of maternity, pediatrics, psychiatry, and other related sciences. The student is expected to possess the competencies to provide a safe and effective care environment to clients with common and recurring health conditions, considering cultural sensitivity and diversity. Through case studies and the nursing process, students foster the prevention, maintenance, and promotion of the psychosocial and physiological integrity of clients. During the development of the course, emphasis is placed on the therapeutic interventions of nursing and the necessary professional competencies, with the purpose of providing excellent health care within an ethical-legal frame of reference.

ENFE 4101 - RESEARCH IN NURSING

4 credits, 4 class hours per week – Prerequisites: ESTA 2255, ENFE 3105

This research course is designed and organized to initiate the student in the analysis of the research process and how it, in turn, is applied in the field of health and nursing. The nursing process is analyzed, the research process is compared as are the solution process, and the nursing process with its application in nursing practice. Research in Nursing is discussed and defined as a scientific procedure to validate and refine existing knowledge as well as generate new knowledge that influences nursing practice. Critical thinking is applied to generate knowledge through research with the purpose of describing, explaining, predicting, and controlling a nursing phenomenon. The scientific method to find solutions to problems related to the field of health and nursing practice is evaluated. At the same time, the concepts of legal, ethical, and educational

aspects are emphasized, among others. Also included are communication mechanisms and interpersonal relationships to communicate research design and findings through written and oral reports.

ENFE 4102 - FAMILY AND COMMUNITY SELF-CARE
5 credits, 3 class hours and 6 laboratory hours per week – Prerequisites: ENFE 3105, ENFE 4101
The course is designed on a broad foundation of the nursing process directed towards the individual, family, and community. It pursues the prevention at primary, secondary and tertiary levels of community diseases throughout the life cycle. It focuses on the promotion of the physical, social, emotional, and spiritual health of human beings. It discusses key modern and traditional public health concepts such as: roles and functions, ethics, morals, legal, culture, value, politics, leadership, and basic human needs. It delves into the technical skills of communication, intervention, problem solving, collaborative process, epidemiology, education, and the use of the self, among others.

ENFE 4207 - NURSING PROCESS AND PATHOPHYSIOLOGY
4 credits, 4 class hours per week – Prerequisites: ENFE 3104, ENFE 3105, ENFE 3205, ENFE 4101, ENFE 4102
The course is designed so the nursing student learns to assess and categorize different acute and chronic pathophysiological processes. In addition, it evaluates the mechanisms and clinical manifestations, treatments and management related to diseases and how they interact with the body, mind, culture, and spirit. The course analyzes and applies the nursing process as well as critical and rational thinking as a scientific basis for therapeutic nursing interventions with clients from different health scenarios, genders and stages of growth and development. Concepts and theories from the biological and nursing sciences, communication skills and interpersonal relationships, health promotion and disease prevention, management or administration of care and research are integrated. The course directs and develops in the student the commitment to offer quality nursing care and services to the individual, the family, and the community.

ENFE 4208 - NURSING ADMINISTRATION, LEADERSHIP, MANAGEMENT AND PRACTICE
6 credits, 3 class hours and 6 laboratory hours per week – Prerequisites: ENFE 3104, ENFE 3105, ENFE 3205, ENFE 4101, ENFE 4102
The course provides the student with knowledge and skills to develop as nursing professionals in their leadership and administrative roles. It analyzes the theories of leadership and management. It includes concepts such as communication, management principles, problem solving models, stress management, motivation, conflict, risk management and budgeting among others. Self-determination and appreciation for their historical heritage and culture is cultivated in the student. The development of logical and quantitative reasoning skills is promoted. The students are expected to demonstrate the application of critical thinking, to integrate research process and make evaluative judgment in their decision making. The appreciation and improvement of the environment and its development is encouraged as professionals who apply the concepts of ethics and values, and who assumes leadership in their duties.

Appendix III.I.1

Clinical Competencies Evaluation Criteria

Appendix III.I.1

EVALUATION RUBRIC

CLINICAL COMPETENCIES

STUDENT'S NAME: _____ COURSE: **ENFE**

PROFESSOR(A): _____ SECTION: _____

DATE: _____ FINAL GRADE: _____

THEME: _____

INTRODUCTION

The quality of nursing services depends on committed health professionals. It is essential to define and evaluate the professional clinical competencies of students to improve training, ensure quality and manage these future professionals by competencies. For this, a combination of evaluation methods must be used. The evaluation in the different stages has different purposes, contents, and methods, and the university institutions must take responsibility for obtaining the professionals that Puerto Rican society needs.

This instrument has been designed with the purpose of evaluating how the student skillfully implements the nursing process in the individual, family, and community. An inquiring way of thinking derived from the problem-solving process, nursing process and decision making is encouraged in the student. The student is expected to participate in the different areas of practice considering the identified needs, priorities in care and resources used to achieve the objectives outlined in the care of the patient, family, and community. All this is framed in a safe care environment in all practice areas.

INSTRUCTIONS

1. The teacher uses this document to assess the student.
    a. Use the following scale as a reference:

        2 = Excellent – Meets the fully described indicator
        1 = Average – Partially complies with the indicator described
        0 = Deficient – Does not comply with the described indicator

    b. Indicate with a check mark (√) for each of the subparagraphs the evaluation towards the student.
    c. Write the necessary comments next to the corresponding indicator.
    d. Add the results obtained by student (subtotals) in each Student Learning Outcome (SLO) to obtain the final score of the instrument according to the performance of the student.
2. The teacher and student discuss the evaluation to find out the areas of strength and areas to improve.
3. The teacher and student sign the evaluation once it has been completed.

STUDENT LEARNING OUTCOMES (SLO) EVALUATION CRITERIA

INDICATORS BY STUDENT LEARNING OUTCOME (SLO)	POINTS			COMMENTS
	2	1	0	
Critical Thinking – **35%**				
1. Assess the health status of the patient, family, and community.				
2. Examine the altered values of laboratories, studies, and images.				

INDICATORS BY STUDENT LEARNING OUTCOME (SLO)	POINTS			COMMENTS
	2	1	0	
3. Contrast the data obtained from laboratories, studies and images with the clinical manifestations and findings of the physical examination.				
4. Consider patient comorbidities in data analysis.				
5. Distinguish between prescription drugs, vaccines, supplements, and vitamins from non-prescription drugs.				
6. Examine compliance and adherence to treatment, medication, and diet.				
7. Analyze the interfered needs according to Abraham Maslow in social aspect; of physical, mental, and spiritual health; and its impact on daily activities.				
8. Specify the stage of human growth and development of the patient according to Eric Erickson.				
9. Establish priorities when offering nursing care, considering cultural diversity.				
10. Identify the nursing care system according to Dorothea Orem.				
11. Develop current and risk nursing diagnoses.				
12. Use the PES format in writing nursing diagnoses.				
13. Apply the nursing process, critical thinking skills, problem solving process and decision making in nursing intervention with the patient, family, and community.				
TOTAL CHECKMARKS				
SUBTOTAL CRITICAL THINKING				**___ /26 x 0.35 =____%**
Therapeutic Interventions – **35%**				
1. Develop goals for the care plan in real time with metrics.				
2. Establish priorities in nursing actions.				
3. Design nursing actions based on prioritized needs and scientific evidence.				
4. Maintain a safe and effective care environment for the patient, family, and nursing staff.				
5. Integrate community agencies and interprofessional team members into the plan.				
6. Consider the family in patient care.				
7. Include the patient and family in the educational process in hospitalization, discharge planning, and home care.				
8. Check patient progress against goals and metrics.				
9. Evaluate the patient's response to the care offered.				
10. Reformulate the care plan according to the patient's progress.				
11. Reorganize the work assignment considering the classification of the patient.				
TOTAL CHECKMARKS				
SUBTOTAL THERAPEUTIC INTERVENTIONS				**___ /22 x 0.35 =____%**
Communication and Interpersonal Relationships – **30%**				

INDICATORS BY STUDENT LEARNING OUTCOME (SLO)	POINTS			COMMENTS
	2	1	0	
1. Establish communication and effective and positive interpersonal relationships in all practice settings.				
2. Recognize the hierarchy and lines of communication in the university environment and the practice agency.				
3. Structure their conduct to the mission and values of the university environment and the practice agency.				
4. Demonstrate initiative in assigned activities; starts and completes them.				
5. Implement the use of the principles of security, privacy, and confidentiality.				
6. Practice holistic, empathic, and compassionate nursing care.				
7. Document the clinical record according to the rules of the hospital or practice setting.				
8. Demonstrate adjusting to different leadership styles during teamwork.				
9. Practice collaborative work with classmates, nursing staff and other members of the interprofessional team in the different practice scenarios.				
10. Argue in the discussion of situations in the workplace and health scenarios.				
11. Apply the elements of oral, written, and technological communication when interacting with the nursing team, patients, and classmates.				
12. Modify the factors that affect their communication, behavior, and therapeutic and interpersonal relationships.				
13. Take advantage of time management in the nursing lab class in the classroom, the simulation lab, and the practicum agency.				
14. Demonstrate punctuality.				
15. Comply with attendance.				
16. Use the uniform as indicated in CUSJ's policy and the HRSD's Student Manual.				
17. Demonstrate adjustment and flexibility to new situations in practice settings.				
18. Explain to the team leader and the staff in charge of the patient or community about the nursing interventions to be carried out when in doubt.				
19. Integrate adequate vocabulary, ethical and professional conduct in the university environment and practice agency.				
20. Demonstrate assertiveness and empowerment in the management of patients and family members who are complaining.				
TOTAL CHECKMARKS				
SUBTOTAL COMMUNICATION AND INTERPERSONAL RELASHIONSHIPS				**___ /40 x 0.30 =____%**

Prepared by: M. Benítez, RN, MSN, CNS., March 2000
Revised by: M. Benítez, RN, MSN, CNS, 2005, 2010, 2011.
E. Vázquez, RN, MSN, E. Rosario, RN, MSN, August 2013
C. Fernández, RN, MSN, Mayo, 2016
D. Cuevas, RN, MSN, September 2020; Mayo, 2022
Dra. Phaedra Gelpi Rodríguez, EdD, June 2022

NOMBRE: _____ CURSO: _____

PROFESOR(A): _____ SECCIÓN: _____

FECHA: _____ RÚBRICA: _____

SUMMARY OF STUDENT LEARNING OUTCOME (SLO)

STUDENT LEARNING OUTCOME (SLO)	PERCENTAGE	SUBTOTAL
Critical Thinking	35%	
Therapeutic Interventions	35%	
Communication and Interpersonal Relationships	30%	
	TOTAL	

COMMENTS:

_____ _____

Faculty signature Student Signature

Appendix III.J.1

Professor's Evaluation: Evaluation Questionnaire by Students

INSTITUTIONAL FACULTY EVALUATION COMMITTEE
(CIE)

PROFESSOR'S EVALUATION
EVALUATION QUESTIONNAIRE BY STUDENTS

Students' instructions: This questionnaire will give you the opportunity to express your opinion about the professor in charge of this course. **Do not sign the answer sheet**. Write the answer that best shows your opinion about the professor, by blackening the circle corresponding to the letter in the "SCANTRON" answer sheet. Answer using the following Evaluation Scale:

A. Always
B. Almost Always
C. Occasionally
D. Almost never
E. Never

I. TEACHING

A. Class planning and development:

1. The class is organized and enables the student to take notes on the topics covered.

2. The professor utilizes various methods to present the topics, such as: conferences, panels, group work, exercises, oral reports, modules, or others (does not have to use all methods in all classes).

3. The professor encourages students' participation in class.

4. The professor summarizes the important main points at the end of the class, the unit or chapter.

5. The professor utilizes the complete period of class to cover the material.

6. At the beginning of the course, the professor hands out a course guide or course outline to inform students of the course's: objectives, evaluation criteria, textbook, bibliography, time distribution with approximate dates, laboratories (if applicable), office hours and tutoring hours.

7. The professor utilizes the textbook and assigns materials to develop the class.

8. The professor utilizes audiovisual materials such as movies, videos, transparencies, films, recorded material, posters, blackboard, others (Does not have to use all these methods).

9. Additional material provided by the professor is useful to the course.

10. The professor specifies and explains the assignments and Project on which the student will be evaluated.

11. The professor allows students to express their point of view on topics presented in class.

B. Knowledge of the course's material:

12. The professor presents examples, anecdotes, or situations that help clarify the ideas presented in class.

13. The professor answers students' questions and clarifies doubts.

14. The professor enables the student to acquire the knowledge and basic skills related to the course.

C. Professor's duties:

15. The professor informed students of his/her tutoring and office hours and has been available to see students during these times, regardless of whether the student has or has not made use of them.

16. The professor fosters the use of the Access to Information Center (CAI-Library).

17. Gathers the students in the classrooms, laboratories or audiovisual center at the previously agreed time.

D. Student's evaluation process:

18. The professor explains in detail the criteria which he/she will use to evaluate student achievement.

19. The professor indicates at the beginning of the course the approximate dates of the exams, oral or written reports, assignments and others.

20. The professor reviews and gives the opportunity to clarify doubts before each test or assignment.

21. The professor prepares testing that enables students to demonstrate what they have learned in the course.

22. Testing is prepared based on the textbook and material covered in class.

23. The time allotted by the professor to complete the test is sufficient.

24. The professor writes useful remarks when correcting the tests, assignments or projects required for the class.

25. The professor informs and discusses with the students the results of the tests, at least one week after the test.

26. The professor administers sufficient evaluation methods, such as: tests, projects, assignments, oral or written reports, laboratories (if applicable), quizzes, and others, in order to ensure a just final grade.

II. PERSONAL CHARACTERISTICS

27. The professor is interested in the student's learning.

28. The professor is respectful to all students.

29. The professor encourages students to seek help when necessary.

*** *R E M E M B E R* ***

COMMENTS:
PLEASE FILL OUT IN THE NEXT PAPER.

Appendix IV.I.1

Questionnaire – Opinion Survey of Active Students' Satisfaction with Program with the Program

COLEGIO UNIVERSITARIO DE SAN JUAN
HEALTH RELATED SCIENCES DEPARTAMENT
BACCALAUREATE OF SCIENCE IN NURSING

QUESTIONNAIRE

OPINION SURVEY OF ACTIVE STUDENTS' SATISFACTION WITH THE PROGRAM

Reviewed and modified: 2001 y 2010

Reviewed: 2011, 2015, 2020

Dear graduates:
Colegio Universitario de San Juan (CUSJ), the Health Related Sciences Department and its Baccalaureate of Science in Nursing wish to evaluate the level of satisfaction of its professional performance of graduates with the teaching-learning processes and institutional services offered to them while studying in the Program. In order to gather to collect this data we need your collaboration by answering this graduates' opinion survey. The data collected will be confidentially analyzed and will be used with the sole purpose of improving the services offered by the Nursing Program and CUSJ, so as to insure excellence in our educational offer. Thank you for the time and effort.

Sincerely,

Faculty Members

Baccalaureate of Science in Nursing

GENERAL DATA

Read each statement carefully and answer with the alternative that reflects your opinion

GENDER: _____

GRADUATION YEAR: _____ AGE: _____ TELEPHONE: _____

EMPLOYER: _____ PUBLIC: _____ PRIVATE: _____

ADDRESS: _____

JOB TITLE: _____

EDUCATIONAL LEVEL:

DEGREE	AWARDED DATE	IN PROGRESS
ASSOCIATE		
BACHELOR		
MASTER		
DOCTORATE		

FUTURE PLANS: STUDY: _____ WORK: _____ NEITHER WORK NOR STUDY PLANS: _____

DO YOU PARTICIPATE IN PROFESSIONAL DEVELOPMENT ACTIVITITIES?

YES: _____ (MULTIPLE: _____ ONLY REQUIRED: _____) NO: _____
TYPES: CONFERENCES: _____ PRESENTATIONS: _____ JOURNALS: _____

SEMINARS: _____ INTERNET: _____ OTHERS: _____

DO YOU SUBSCRIBE TO PROFESSIONAL NURSING JOURNALS? YES: ____ NO: ____

WHICH ONE(S)?: _____

In the next two sections we will ask you to evaluate Student Services (Section A) and Installations and Resources (Section B) provided to you while studying at the Colegio Universitario of San Juan. Place an X in the square that represents your opinion.

SCALE

Excellent: Always complies with the criteria.
Good: Complies with the criteria most of the time.
Deficient: Rarely complies with the criteria.
No opinion

A. STUDENT SERVICES

SCALE / CRITERIA	EXCELLENT	GOOD	DEFICIENT	NO OPINION
1. Admission process.				
2. Availability of Institutional Catalog to students.				
3. Pre-enrollment and enrollment processes.				
4. Guidance, tutoring, and counseling services.				
5. Guidance related to student participation in activities, committees, and student organizations available in the Institution.				
6. Nursing and first-aid (health) services.				
7. Library services.				
8. Student participation in Program committees.				

COMMENTS:

_____

_____

___

_____

_____

B. INSTALLATIONS AND RESOURCES

SCALE / CRITERIA	EXCELLENT	GOOD	DEFICIENT	NO OPINION
9. Classrooms (cleanliness and temperature).				
10. Access for physically challenged persons.				

11. General conditions and availability of resources and materials in Biology Labs.				
12. Installations and availability of personnel in the library.				
13. Journals, books, materials, and equipment available in the library.				
14. Location and recreational areas installations.				
15. Availability of personnel for the recreational areas.				
16. Location and cafeteria installations.				
17. Services rendered by the cafeteria.				
18. Location and Nursing Program Administration Office installations.				
19. Availability of personnel for the Nursing Program Administration Office.				
20. Availability and location of Nursing Faculty offices.				
21. Location of Nursing Skills Laboratory				
22. Hospitals and practice centers were you had your Clinical Experiences.				
23. Access to Clinical Experience centers.				

COMMENTS:

_____
_____
___
_____
___
_____

In Section C we will ask you to evaluate the **Nursing Faculty** that you had contact with.

C. NURSING FACULTY

SCALE / CRITERIA	EXCELLENT	GOOD	DEFICIENT	NO OPINION
24. Professional experience.				
25. Mastery of the content of the area being taught				
26. Effective time management of the time allotted for the course.				
27. Faculty motivates and stimulates student participation in classes.				
28. Use a wide range of materials in their teaching.				
29. Guide students in the process of acquiring the knowledge and skills required by the subject they are teaching.				
30. Use a wide range of evaluation methods that insure a fair final grade.				
31. Induce or stimulate students to seek help whenever necessary.				
32. The teaching process included strategies and methods that helped you develop the ability to: communicate orally and in writing, think critically, pass judgment, make decisions, and solve problems.				

COMMENTS:

_____
_____
_____
_____

In section D, we will ask about several curricular aspects of our Nursing Program. Please indicate if the parameters established by the premise were attained or not. Remember to place an X in the area provided for your selection.

D. CURRICULUM

SCALE / CRITERIA:	YES	NO
D.1. Critical Thinking, Communication, and Interpersonal Relationships		
33. Applies the concepts related to Dorothea Orem and other theoreticians to promote self-care in persons with common and recurring health problems in health care facilities.		
34. Integrates the nursing process as a tool to diagnose, plan, intervene, and evaluate the health care of customers with different ages, thus guiding general nursing personnel.		
35. Uses communication and interpersonal relationship skills to offer humane care to customers and to facilitate the interaction of the health team with the community served.		
36. Displays technical nursing skills to provide for the physiological, psychological, social, and spiritual needs of the customer.		
37. Accepts the legal and moral responsibilities required to comply with his role.		
38. Collaborates with the nursing professional to satisfy the educational needs of the customer under their care.		
39. Assumes responsibility for professional growth and development.		
40. The courses of the nursing program have helped you to carry out the function and responsibilities that the practice of nursing requires.		
41. The curricular sequence follows an adequate and logical development that facilitates the teaching and learning processes.		
42. The faculty members helped you promote self-esteem, self-confidence, and self-care as a person.		
43. Enabled your use of critical and logical thinking skills while carrying out your duties and responsibilities as a nursing practitioner.		
44. Use of technology and audiovisual equipment were appropriate.		
45. Allowed you to take care of persons with diverse cultural backgrounds and different stages of development and growth.		
46. Incorporated therapeutic interventions (skills) that helped you perform as a nursing professional.		
47. Promotes leadership and decision making.		

SCALE / CRITERIA:	YES	NO
D.1. Critical Thinking, Communication, and Interpersonal Relationships		
48. The curriculum of the Nursing Program guided you to adequately deal with nursing boards.		
49. As designed, the courses have the theoretical and practical content required to perform duties and responsibilities that are essential in your professional practice.		

COMMENT: _____
_____
_____

Do you believe the answers provided in this Questionnaire will help improve our Nursing Program and the University? _____ YES _____ NO

Why?
:_____
_____

E. Therapeutic Interventions:

Mention the skills you commonly use in your job environment, such as administering medication, documenting, and venipuncture.

_____
_____
_____
_____
_____

Colegio Universitario de San Juan at its Health Related Sciences Department thank you for cooperating by completing this questionnaire. We also request that if you have any additional comments or suggestions that may help the Baccalaureate of Science in Nursing improve, feel free to provide these in the space provided:

_____
_____
_____

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Appendix IV.I.2

Questionnaire – Opinion Survey of Alumni's Satisfaction with the Program

COLEGIO UNIVERSITARIO DE SAN JUAN
HEALTH RELATED SCIENCES DEPARTAMENT
BACCALAUREATE OF SCIENCE IN NURSING

QUESTIONNAIRE

OPINION SURVEY OF ALUMNI'S' SATISFACTION WITH THE PROGRAM

Reviewed and modified: 2001 y 2010

Reviewed: 2011, 2015, 2020

Dear graduates:
Colegio Universitario de San Juan (CUSJ), the Health Related Sciences Department and its Baccalaureate of Science in Nursing wish to evaluate the level of satisfaction of its alumni with the teaching-learning processes and institutional services offered to them while studying in the Program. In order to gather to collect this data we need your collaboration by answering this graduates' opinion survey. The data collected will be confidentially analyzed and will be used with the sole purpose of improving the services offered by the Nursing Program and CUSJ, so as to insure excellence in our educational offer. Thank you for the time and effort.

Sincerely,

Faculty Members

Baccalaureate of Science in Nursing

GENERAL DATA

Read each statement carefully and answer with the alternative that reflects your opinion

GENDER: _____

GRADUATION YEAR: _____ AGE: _____ TELEPHONE: _____

EMPLOYER: _____ PUBLIC: _____ PRIVATE: _____

ADDRESS: _____

JOB TITLE: _____

EDUCATIONAL LEVEL:

DEGREE	AWARDED DATE	IN PROGRESS
ASSOCIATE		
BACHELOR		
MASTER		
DOCTORATE		

FUTURE PLANS: STUDY: _____ WORK: _____ NEITHER WORK NOR STUDY PLANS: _____

DO YOU PARTICIPATE IN PROFESSIONAL DEVELOPMENT ACTIVITITIES?

YES: _____ (MULTIPLE: _____ ONLY REQUIRED: _____) NO: _____
TYPES: CONFERENCES: _____ PRESENTATIONS: _____ JOURNALS: _____

SEMINARS: _____ INTERNET: _____ OTHERS: _____

DO YOU SUBSCRIBE TO PROFESSIONAL NURSING JOURNALS? YES: ____ NO: ____

WHICH ONE(S)?: _____

In the next two sections we will ask you to evaluate Student Services (Section A) and Installations and Resources (Section B) provided to you while studying at the Colegio Universitario of San Juan. Place an X in the square that represents your opinion.

SCALE

Excellent: Always complies with the criteria.
Good: Complies with the criteria most of the time.
Deficient: Rarely complies with the criteria.
No opinion

A. STUDENT SERVICES

SCALE / CRITERIA	EXCELLENT	GOOD	DEFICIENT	NO OPINION
1. Admission process.				
2. Availability of Institutional Catalog to students.				
3. Pre-enrollment and enrollment processes.				
4. Guidance, tutoring, and counseling services.				
5. Guidance related to student participation in activities, committees, and student organizations available in the Institution.				
6. Nursing and first-aid (health) services.				
7. Library services.				
8. Student participation in Program committees.				

COMMENTS:

_____
_____
___
_____
_____

B. INSTALLATIONS AND RESOURCES

SCALE / CRITERIA	EXCELLENT	GOOD	DEFICIENT	NO OPINION
9. Classrooms (cleanliness and temperature).				
10. Access for physically challenged persons.				
11. General conditions and availability of resources and materials in Biology Labs.				

12. Installations and availability of personnel in the library.				
13. Journals, books, materials, and equipment available in the library.				
14. Location and recreational areas installations.				
15. Availability of personnel for the recreational areas.				
16. Location and cafeteria installations.				
17. Services rendered by the cafeteria.				
18. Location and Nursing Program Administration Office installations.				
19. Availability of personnel for the Nursing Program Administration Office.				
20. Availability and location of Nursing Faculty offices.				
21. Location of Nursing Skills Laboratory				
22. Hospitals and practice centers were you had your Clinical Experiences.				
23. Access to Clinical Experience centers.				

COMMENTS:

_____

_____

___

_____

___

_____

In Section C we will ask you to evaluate the **Nursing Faculty** that you had contact with.

C. NURSING FACULTY

SCALE / CRITERIA	EXCELLENT	GOOD	DEFICIENT	NO OPINION
24. Professional experience.				
25. Mastery of the content of the area being taught				
26. Effective time management of the time allotted for the course.				
27. Faculty motivates and stimulates student participation in classes.				
28. Use a wide range of materials in their teaching.				
29. Guide students in the process of acquiring the knowledge and skills required by the subject they are teaching.				
30. Use a wide range of evaluation methods that insure a fair final grade.				
31. Induce or stimulate students to seek help whenever necessary.				
32. The teaching process included strategies and methods that helped you develop the ability to: communicate orally and in writing, think critically, pass judgment, make decisions, and solve problems.				

COMMENTS:

_____

_____
_____
_____

In section D, we will ask about several curricular aspects of our Nursing Program. Please indicate if the parameters established by the premise were attained or not. Remember to place an X in the area provided for your selection.

D. CURRICULUM

SCALE / CRITERIA:	YES	NO
D.1. Critical Thinking, Communication, and Interpersonal Relationships		
33. Applies the concepts related to Dorothea Orem and other theoreticians to promote self-care in persons with common and recurring health problems in health care facilities.		
34. Integrates the nursing process as a tool to diagnose, plan, intervene, and evaluate the health care of customers with different ages, thus guiding general nursing personnel.		
35. Uses communication and interpersonal relationship skills to offer humane care to customers and to facilitate the interaction of the health team with the community served.		
36. Displays technical nursing skills to provide for the physiological, psychological, social, and spiritual needs of the customer.		
37. Accepts the legal and moral responsibilities required to comply with his role.		
38. Collaborates with the nursing professional to satisfy the educational needs of the customer under their care.		
39. Assumes responsibility for professional growth and development.		
40. The courses of the nursing program have helped you to carry out the function and responsibilities that the practice of nursing requires.		
41. The curricular sequence follows an adequate and logical development that facilitates the teaching and learning processes.		
42. The faculty members helped you promote self-esteem, self-confidence, and self-care as a person.		
43. Enabled your use of critical and logical thinking skills while carrying out your duties and responsibilities as a nursing practitioner.		
44. Use of technology and audiovisual equipment were appropriate.		
45. Allowed you to take care of persons with diverse cultural backgrounds and different stages of development and growth.		
46. Incorporated therapeutic interventions (skills) that helped you perform as a nursing professional.		
47. Promotes leadership and decision making.		

SCALE / CRITERIA:	YES	NO
D.1. Critical Thinking, Communication, and Interpersonal Relationships		
48. The curriculum of the Nursing Program guided you to adequately deal with nursing boards.		
49. As designed, the courses have the theoretical and practical content required to perform duties and responsibilities that are essential in your professional practice.		

COMMENT: _____
_____
_____

Do you believe the answers provided in this Questionnaire will help improve our Nursing Program and the University? _____ YES _____ NO

Why?
:_____
_____

E. Therapeutic Interventions:

Mention the skills you commonly use in your job environment, such as administering medication, documenting, and venipuncture.

_____
_____
_____
_____
_____

Colegio Universitario de San Juan at its Health Related Sciences Department thank you for cooperating by completing this questionnaire. We also request that if you have any additional comments or suggestions that may help the Baccalaureate of Science in Nursing improve, feel free to provide these in the space provided:

_____
_____
_____

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Appendix IV.I.3

Questionnaire – Opinion Survey of Employers' Satisfaction with the Program

COLEGIO UNIVERSITARIO DE SAN JUAN
HEALTH RELATED SCIENCES DEPARTAMENT
BACCALAUREATE OF SCIENCE IN NURSING

QUESTIONNAIRE

OPINION SURVEY OF EMPLOYERS' SATISFACTION WITH THE PROGRAM

Reviewed and modified: 2001 y 2010

Reviewed: 2011 and 2015

Dear graduates:
Colegio Universitario de San Juan (CUSJ), the Health Related Sciences Department and its Baccalaureate of Science in Nursing wish to evaluate the level of satisfaction of its professional performance of graduates. In order to gather to collect this data we need your collaboration by answering this graduates' opinion survey. The data collected will be confidentially analyzed and will be used with the sole purpose of improving the services offered by the Nursing Program and CUSJ, so as to insure excellence in our educational offer. Thank you for the time and effort.

Sincerely,

Faculty Members

Baccalaureate of Science in Nursing

A. **Instructions:**

1. For part I-General Information: Complete each one of the questions according to the information requested.

2. In part II-Competencies: Place a checkmark (√) in the space provided for each question according to scale provided.

3. In part III-Therapeutic interventions (nursing skills): Place a checkmark (√) in the space provided for each skill performed by the graduate.

4. Please do not leave questions or criteria without an answer.

B. For each criterion use the following scale:

4-Always: Complies with the behavior with complete mastery at all times.

3-Frequently: Complies with the behavior with mastery the majority of the time.

2-Sometimes: Complies with the behavior described half the time.

1-Rarely: Rarely complies with the behavior described.

0-Does not comply with the behavior described.

I – General Information

A. Agency name _____

B. Type of agency

( ) Public ( ) Private

( ) Other, (explain): _____

_____

C. Position of the person answering the questionnaire

( ) Manager/supervisor ( ) Clinical nurse

( ) Other, (explain): _____
_____

D. Academic degree:

( ) BSN ( ) MSN ( ) Clinical specialist

( ) Other, indicate:_____

E. Years of experience in the position

( ) 10-14 ( ) 15-20 ( ) 21-25 or more

F. Amount of time supervising the graduate of the University College of San Juan

( ) Less than 1 year ( ) 1 – 2 years ( ) 3 – 4 years

( ) 5 years or more

G. Graduates' place of employment

( ) Hospital ( ) Medical office ( ) Laboratory

( ) Other agencies, indicate which:
_____
_____

H. Type of care offered:

( ) Direct ( ) Indirect

I. Promotions/reclassifications of the graduate in employment from initial position of employment to present

Initial 1. _____
2. _____
3. _____
4. _____

J. Number of graduates of our University supervised _____

II. Graduates' Competencies

Criteria	4	3	2	1	0	Comments
Part I: Critical Thinking **A. Direct Care** 1. Applies the nursing process and scientific principles while providing direct care to fulfill the needs of the customer.						
2. Uses the nursing process to make decisions.						
3. Shows mastery when offering nursing care based on scientific principles and evidence.						
4. Evaluates the care offered to the customer, group, and family.						
5. Critically analyzes if the treatment plan requires any modifications.						
6. Preparing a teaching plan and participates in the education of customers, group, and family to obtain optimal functioning.						
7. Maintains confidentiality in all matters related customer care.						
8. Establishes positive and assertive interpersonal relationships while providing care.						
9. Uses therapeutical communication techniques in the relationship with the customer and the family.						
10. Correctly documents in the customer's file any significant change in the behavior of the patient, following the norms established by the Institution						
11. Takes responsibility for the care offered through security measures for patients and national goals as established in the practice of nursing in Puerto Rico y the JCAHO.						
Part II: Communication and interpersonal relationships 12. Maintains positive interpersonal relationships and effective communication with the members of the health team.						
13. Consults with supervisors, co-workers, and other members of the health team						
14. Complies with norms and procedures established by the Institution.						
15. Uses critical judgment to make decisions in order to solve problems with the						

Criteria	4	3	2	1	0	Comments
patient, group, family, and other situations.						
B. Member of the profession 16. Accepts legal responsibility for nursing actions related to the care offered to the patient, group, and family.						
17. Recognizes the need to assume personal responsibility by participating in activities and complying with Continued Education requirements established by Law 11.						
C. Personal qualities 18. Professional appearance.						
19. Positive attitudes (feelings, values) while performing duties and responsibilities.						
20. Participates in activities planned by the Institution.						
21. Applies knowledge of ethnical/cultural diversity related to the discipline and general education in the behavior displayed with patients, family, and health team.						

Other comments:

_____

_____

Title _____

Part III: Therapeutic Interventions

Mention the skills frequently used in the job environment, such as administering medication, documentation, and venipuncture.

_____

_____

_____

_____

Reviewed by: Prof. B. Román, MSN
Prof. M. Vigo, MSN
August, 2007
Reviewed by: Curriculum Committee
May, 2011
Reviewed by: Nursing Faculty
November, 2012, 2015
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