

UNIVERSITY OF MARY WASHINGTON – NEW PROGRAM REQUIRING STATE APPROVAL

Electronically submit this completed form with attachments in one file to the Chair of the College Curriculum Committee.

COLLEGE (check one):	Arts and Sciences	<input checked="" type="checkbox"/>	Business		Education
Proposal Submitted By: Pam McNabb & Richard Finkelstein			Date Prepared: 10/28/2016		
Department /Program:	Nursing				

Note: for program changes entailing the addition new courses, or revisions to existing courses, submit separate proposals for those course actions.

PROPOSAL TO CREATE PROGRAM REQUIRING STATE ACTION (check one of the following)	
New Degree Program*	<input checked="" type="checkbox"/> Name: Master of Science in Nursing
* Use this in cases where the proposal would either: (1) seek to award an undergraduate degree in a major not currently offered, such as a new B.S. degree in Biochemistry; or (2) create a new Master's program.	
New Certificate Program	Name:
Revise Academic Program Title, CIP Code, Degree Designation, or Department Name Change	Current name, Code, or designation:
	Change to:
Program merger	Programs to be merged:
	New Name for Merged Program:
Delete existing major, certificate, concentration, or degree program	Name:
Implementation Date – FALL semester, year:	
Note: After proposal for a new degree is approved by the UMW Provost , allow at least nine months from that date for the required SCHEV review. Keep this factor in mind when stating the desired implementation date for starting a new degree program. Other program actions reported to SCHEV also require time for review but will not take as long.	

REQUIRED ATTACHMENTS FOR NEW PROGRAMS REQUIRING STATE APPROVAL:

1. **For new degree or certificate programs**, complete and attach SCHEV's "Program Proposal Cover Sheet" and all narratives and documents as required by SCHEV's instructions.
2. **For DEGREE program title changes**, complete and attach SCHEV's "Format for Revising Academic Programs Cover Sheet" and all narratives and documents as required by SCHEV's instructions.
3. **For Department Name changes**, complete and attach SCHEV's "Format for Simple Organization Change"
4. **For program mergers**, complete and attach SCHEV's "Format for Merging Academic Programs Cover Sheet" and all narratives and documents as required by SCHEV's instructions.
5. **For major, minor, and/or certificate deletions**, also complete and attach the SCHEV "Intent to Discontinue Academic Program" form (form is available at the University Curriculum Committee web site) and provide any additional attachments are required by SCHEV's instructions.

**All of the forms required by SCHEV, and instructions for completing them,
are available at the SCHEV [website](#).**

Department Chair Approval: <u>Pamela McNabb</u>	Date: <u>10/28/2016</u>
Dean Approval: <u>Richard Finkelstein</u>	Date: <u>11/1/2016</u>
CCC Chair Approval: <u>Surupa Gupta</u>	Date: <u>11/1/2016</u>
UCC Chair Approval: <u>Patricia Reynolds</u>	Date: <u>1/20/2017</u>
Provost Approval: _____	Date: _____

STATE COUNCIL OF HIGHER EDUCATION FOR VIRGINIA

PROGRAM PROPOSAL COVER SHEET

<p>1. Institution University of Mary Washington</p>	<p>2. Program action (Check one): New program proposal <input checked="" type="checkbox"/> _____ Spin-off proposal _____ Certificate proposal _____</p>
<p>2. Title of Master of Science in Nursing Degree</p>	<p>4. CIP code 51.3801</p>
<p>5. Degree designation Master of Science in Nursing (M.S.N.)</p>	<p>6. Term and year of initiation Spring 2019</p>
<p>7a. For a proposed spin-off, title and degree designation of existing degree program NA</p> <p>7b. CIP code (existing program) NA</p>	
<p>8. Term and year of first graduates Spring 2023</p>	<p>9. Date approved by Board of Visitors</p>
<p>10. For community colleges: NA date approved by local board _____ date approved by State Board for Community Colleges _____</p>	
<p>11. If collaborative or joint program, identify collaborating institution(s) and attach letter(s) of intent/support from corresponding chief academic officers(s) NA</p>	
<p>12. Location of program within institution (complete for every level, as appropriate). Departments(s) or division of _____ School(s) or college(s) College of Arts and Sciences _____ Campus(es) or off-campus site(s) Stafford and Fredericksburg campuses _____ Distance Delivery (web-based, satellite, etc.) hybrid and distance delivery _____</p>	
<p>13. Name, title, telephone number, and e-mail address of person(s) other than the institution's chief academic officer who may be contacted by or may be expected to contact Council staff regarding this program proposal. Dr. Richard Finkelstein, Dean, College of Arts and Sciences: 540.654.1052; rfinkels@umw.edu</p>	

The University of Mary Washington is proposing to initiate a Master of Science in Nursing (MSN) degree program, beginning in spring, 2019. The program will have a single track: Family Nurse Practitioner (FNP). The MSN-FNP program will be administered by the College of Arts and Sciences. MSN programs are post-graduate programs. All students will be required to hold a Bachelor's of Science in Nursing (BSN, or BS in Nursing) earned from an accredited nursing program, and regionally accredited college or university. All students are required to hold an unencumbered license to practice nursing in the Commonwealth of Virginia. Students will pursue graduate nursing coursework at UMW. Prior to working with live patients, students will spend a specific number of lab hours working with virtual patients and high-fidelity human simulation mannequins. To avoid replication of resources, Germanna Community College (GCC) has granted access to their Virtual Hospital during evening, weekend and summer hours. Following a robust simulation experience, students will complete over 600 clinical hours at various community settings, in coordination with Mary Washington Healthcare.

The purpose of this degree program is to provide regional, state, and national communities with well-educated FNPs. The program will do so by engaging degree seekers in graduate courses, including practicum courses, that provide them with broad and multiple perspectives on health care delivery and systems. It will concomitantly engage them with a range of courses that will improve their communications skills; which improve their understanding of decision making in health care settings; and which improve their clinical skills with patients. Graduates of the MSN-FNP will be prepared to become an advanced-practice nurse, specifically in primary care across the lifespan.

With changes in health care payments to hospitals and other providers generated by passage of the Affordable Care Act (ACA), and with recognized best practices in mind, there is a strong need for educational opportunities that will help nurses gain the MSN and improve access to healthcare. Reimbursements of hospitals and clinics for patient care now provide significant incentives and penalties that promote decreased admissions and readmissions. To conform to this new environment, hospitals recognize that they need to increase primary care services, to include health promotion and disease prevention in the community. These goals require an increase in the presence of primary care providers, locally, throughout Virginia, and nationwide. However, there is currently a recognized shortage of primary care providers because primary care practices receive lower reimbursement rates than specialty practices. Within the Fredericksburg area alone, Mary Washington Healthcare estimates that at least 90 additional family practice providers are needed to manage care in the community. In the spring of 2016 they approached UMW and sought our collaboration in building an MSN program for Advanced Practice Family Nurse Practitioners, which will initially be support with \$1.4 million of funds from its Foundation. The vision of MWHC aligns with a sense of national urgency: in December 2009, Dr. Patricia Benner and her team at the Carnegie Foundation for the Advancement of Teaching released a new study titled *Educating Nurses: A Call for Radical Transformation*, which found that many of today's new nurses are "undereducated" to meet practice demands across settings.¹

¹ www.carnegiefoundation.org/elibrary/educating-nurses-highlights (unpaginated: see sections on "Recommendations for Policy Change")

Mission

The mission of the MSN Program clearly fits within the mission of the University of Mary Washington (UMW). At UMW, “faculty, students, and staff share in the creation and exploration of knowledge through freedom of inquiry, personal responsibility, and service. UMW offers a wide range of undergraduate, graduate, and professional programs, with opportunities for students to engage in disciplinary and interdisciplinary studies, to conduct research, to integrate and apply their knowledge within broad educational experiences, to develop their professional interests, and practice the habits of mind necessary for life-long learning.”²

In particular, in the College of Arts and Sciences, which will house the MSN Program, we “stress collaborative learning, individual intellectual development, and respect for diverse points of view, because we believe that these activities enable graduates to be effective in a rapidly changing, interconnected world.” The College of Arts and Sciences “prepares graduates for leadership roles in local, national, and global communities.”³

The MSN program addresses all of these aspects of the University and College missions. It will prepare registered nurses for leadership within their health care systems so that they will provide the high quality of care for which nurses increasingly play a central role. Their leadership strengths will derive from their nuanced understanding of American health care systems, derived from intellectual development supported by courses about health care delivery. Students will also increase the sophistication of the skills in primary care of patients. As per the University-wide emphasis on research, required courses in the program will educate students in evidence-based nursing research and nursing information systems. Education in research and nursing information systems will contribute to nurses becoming life-long learners.

The MSN Program will bring a diverse population, including many non-traditional students, to UMW, and advance their careers by bringing them to the master’s level now regularly required for professional leadership roles that will importantly shape the delivery of healthcare at local, state, and national levels.

Online Delivery

The new Nursing courses will be delivered with asynchronous on-line methods. Sufficient resources exist for providing distance delivery of the new Nursing courses that are part of the proposal. The new courses will be taught from UMW’s Stafford Campus, a site that has long provided distance learning to students and which has recently seen renovation of its facilities for improved distance education delivery. The University of Mary Washington was approved by the Southern Association of Colleges and Schools Commission on Colleges on October 21, 2009 to offer 50% or more of a program via distance delivery. President Paino has identified the repopulation of the Stafford campus and of courses for non-traditionally aged student

² <http://president.umw.edu/wp-content/blogs.dir/181/files/2011/09/UMW-Strategic-Plan-2009-2014.pdf>, p.4

³ <http://cas.umw.edu/about-the-college/>

populations as a top priority.

No new physical or technological resources will be required for the on-line delivery of the MSN-FNP Program.

Accreditation

The UMW BSN Completion Program was granted accreditation by the Commission on Collegiate Nursing Education (CCNE), retroactive to February 11, 2016. The university will submit a request for pre-approval of an advanced practice MSN program to CCNE, prior to the start of the program. Prior to the graduation of the first MSN-FNP cohort, the university will complete the new program accreditation process.

Advisory Board

The UMW BSN Completion Program has an Advisory Board which consists of community members. This advisory board will be expanded to also advise the new MSN-FNP program. Advisory Board members include the Chief Nursing Officers from Mary Washington Healthcare and Spotsylvania Regional Medical Center; the Dean of Nursing at Germanna Community College; the Director of the MWHC Physician Alliance; the Vice President for Strategic Planning at MWH; community representatives to include the past CEO of Mary Washington Healthcare; and the CEO of the Community Foundation of the Rappahannock Region.

Admissions Criteria

Admissions Requirements for the MSN program at UMW

The applicant must:

- Have an unencumbered RN license in the state in which the student intends to complete clinical placement.
- Have a Bachelor of Science in Nursing degree from a program nationally accredited in nursing, and regionally accredited college or university.
- Have a minimum cumulative grade point average of 3.2 on a 4.0 scale in undergraduate study.
- Provide one satisfactory academic recommendation.
- Provide one satisfactory professional recommendation from a physician who has worked with the student.
- Provide a resume or c.v.
- Complete an interdisciplinary interview, if requested.
- Complete an application.
- Show documentation of Clear Child Abuse Record and Clear Criminal Background Check.

- Show documentation of completion of all required vaccinations, or titer immunity, and a physical exam which documents free of contagious diseases.
- Have a current American Heart Association CPR Adult, Child, Infant and AED Certification

Following an initial vetting of applications by University Admissions, an interdisciplinary committee that includes the Director of the Program, and full-time faculty within the BSN and MSN programs, will evaluate these documents.

Target Population

The target populations for the MSN Program at the University of Mary Washington are registered nurses who have an active nursing license and have earned a Bachelor of Science in Nursing from an accredited institution. The degree program will attract the following groups:

- Practicing nurses who seek to advance their studies and earning potential through the attainment of a Master’s degree
- Practicing nurses who to seek licensure to practice advanced practice nursing as a primary care provider in the community setting.
- Practicing nurses who seek to advance to administrative positions within family practice healthcare

The MSN program meets many of the guidelines set forth in the Commonwealth’s TJ-21. It is a STEM program that will help many students improve their earning potential while responding to expected large increases in health care job openings.

Curriculum

The MSN curriculum is designed for registered nurses who hold the BSN, or BS in Nursing, degree. Graduates of the University of Mary Washington program will earn an MSN at the completion of coursework, which includes clinical practicums. The MSN is a highly structured program that teaches students about major issues in national healthcare and health care delivery systems; about research that will increase the efficiency and quality of health care delivery; and it provides skill acquisition for primary care.

Table 1 outlines the coursework from which the students will accumulate 47 credits.

Practicums

Table 1 indicates that there will be three practicums for MSN students. Sites will be provided in collaboration with the Mary Washington Healthcare Physicians Alliance.

Student Retention and Continuation Plan

Our student retention and continuation plan is grounded in careful, pro-active advising; coordination with local clinical sites; scheduling and on-line courses that provide access for working professionals; and rigor that matches accepted practices in nursing education.

- All BSN/BS in Nursing degree holders who are accepted into the MSN program at the University of Mary Washington will be assigned an advisor from the Nursing program. The advisor's role is two-fold: to advise the student on course registration and program planning and serve as a professional mentor. The advisor will also serve as a liaison to the student's practicum supervisor.
- All students will be assigned to an advisor when they are admitted to the program, and will be required to meet with the advisor at least twice per semester. Students will also be required to participate in an online discussion forum in Canvas (UMW's course management software), which will be moderated by a full-time faculty member. This should provide a sounding board for problems and will allow us to keep track of and act upon issues that students are facing.
- The UMW BSN-C program has already worked closely with the two major local hospitals regarding scheduling student support during the program's operation. The support for furthering the education of local nurses by the Chief Nursing Officers will continue.
- All students must earn an 83 (B) or better for each course in the plan of study in order to progress. The grade of a B-, C, D, F or W is considered a course failure. Students may repeat a non-clinical/practicum course once, and must earn an 83 (B). Failure of a clinical/practicum course, is non-repeatable and results in dismissal from the program. Students will be dismissed from the program if they fail a course twice, or fail two courses. Students are not eligible to apply for readmission to the UMW MSN-FNP program.

Time to Degree

Because students will enter the program in cohorts, the time to degree for those that stay "on track" will be consistent: 2 ½ years (27 months). If students need to repeat up to two non-clinical/practicum course, their time to degree may be extended up to two semesters. (See Table 1 for the outline of progression).

Faculty

Program Administration

UMW currently has a Director for the BSN Completion Program. The Director is the holder of a Doctorate in Nursing Practice (DNP). The person is "administrative faculty" and a 12-month employee. With the establishment of the MSN program we expect that this person will receive a new title, Chair of Nursing, and take on the additional duty of overseeing a new Administrative Faculty Member who will direct the MSN program. Adding this position is a requirement for the program because to receive accreditation, the new degree program must be led by a nationally

certified, qualified Family Nurse Practitioner. The FNP Director will teach 0.25 time, and act as a clinical liaison to the clinical sites and physician practices.

Teaching Faculty

This program will additionally rely on qualified adjunct faculty as indicated in Table 1. The credentials we are seeking for the full-time and adjunct faculty members are noted in Table 1. Adjunct faculty can be non-nurses and hold graduate degrees, if they are teaching course content in there are of graduate education. Those with nursing degrees must also present the following credentials:

- An unencumbered Nursing license
- National certification as an advanced practice nurse, consistent with the course being taught
- Minimum 3 years clinical nursing experience consistent with the course content

Part-time faculty, defined by SCHEV as full-time faculty members who teach “part-time” in the program are also indicated in Table 1.

Program Administration

The MSN-FNP Program will be housed within the UMW College of Arts and Sciences. Its Chair will report to the Dean of that college.

Student Assessment

Students will be assessed during each course through the use of rubrics applied to written essays and oral assignments, presentations, clinical case presentations, and to embedded questions in exams. Each of these assessments will measure the program’s success at bringing graduates of the program to a set of graduate outcomes, that is, knowledge and skills they will have mastered.

Learning Outcomes

- A. **Graduate Outcomes** of the UMW MSN-FNP Program will:
1. build on the competencies gained in a baccalaureate nursing program by developing a deeper understanding of nursing and the related sciences needed to fully analyze, design, implement, and evaluate nursing care.⁴
 - a. SLO 1.1: Critically analyzes data and evidence for improving advanced nursing practice. (Footnote #2 AACN (2013) Population Focused Nurse Practitioner Competencies) after each SLO
 - b. SLO 1.2: Integrates knowledge from the humanities and sciences within the context of nursing science.
 - c. SLO 1.3.: Translates research and other forms of knowledge to improve practice processes and outcomes.

⁴ AACN (2011) The Essentials of Master’s Education in Nursing

- d. SLO 1.4: Develops new practice approaches based on the integration of research, theory, and practice knowledge.
2. develop organizational and systems leadership competencies to promotion of high quality and safe patient care.
 - a. SLO 2.1: Assumes complex and advanced leadership roles to initiate and guide change.
 - b. SLO 2.2: Provides leadership to foster collaboration with multiple stakeholders (e.g. patients, community, integrated health care teams, and policy makers) to improve health care...
 - c. SLO 2.3: Demonstrates leadership that uses critical and reflective thinking.
 - d. SLO 2.4: Advocates for improved access, quality and cost effective health care.
 - e. SLO 2.5: Advances practice through the development and implementation of innovations incorporating principles of change.
 - f. SLO 2.6: Communicates practice knowledge effectively, both orally and in writing.
3. be able articulate in the methods, tools, performance measures, *culture of safety* principles, and standards related to *quality*, as well as prepared to apply quality principles within an organization to be an effective leader and change agent.
 - a. SLO 3.1: Uses best available evidence to continuously improve quality of clinical practice.
 - b. SLO 3.2: Evaluates the relationships among access, cost, quality, and safety and their influence on health care.
 - c. SLO 3.3: Evaluates how organizational structure, care processes, financing, marketing and policy decisions impact the quality of health care.
 - d. SLO 3.4: Applies skills in peer review to promote a culture of excellence.
 - e. SLO 3.5: Anticipates variations in practice and is proactive in implementing interventions to ensure quality
4. translate and integrate nursing *scholarship* and research into practice.
 - a. SLO 4.1: Provides leadership in the translation of new knowledge into practice.
 - b. SLO 4.2: Generates knowledge from clinical practice to improve practice and patient outcomes.
 - c. SLO 4.3: Applies clinical investigative skills to improve health outcomes.
 - d. SLO 4.4: Leads practice inquiry, individually or in partnership with others.
 - e. SLO 4.5: Disseminates evidence from inquiry to diverse audiences using multiple modalities.
5. have competence to determine the appropriate use of *technologies* and integrate current and emerging technologies into one's practice to enhance care outcomes.
 - a. SLO 5.1: Integrates appropriate technologies for knowledge management to improve health care.

- b. SLO 5.2.: Translates technical and scientific health information appropriate for various users' needs.
 - c. SLO 5.2.a: Assesses the patient's and caregiver's educational needs to provide effective, personalized health care.
 - d. SLO 5.2.b: Coaches the patient and caregiver for positive behavioral change.
 - e. SLO 5.3.: Demonstrates information literacy skills in complex decision making.
 - f. SLO 5.4.: Contributes to the design of clinical information systems that promote safe, quality and cost effective care.
 - g. SLO 5.5: Uses technology systems that capture data on variables for the evaluation of nursing care.
6. understand the principles of healthcare economics, finance, payment methods, and the relationships between policy, health economics and health advocacy.
- a. SLO 6.1: Demonstrates an understanding of the interdependence of policy and practice.
 - b. SLO 6.2: Advocates for ethical policies that promote access, equity, quality, and cost.
 - c. SLO 6.3: Analyzes ethical, legal, and social factors influencing policy development.
 - d. SLO 6.4: Contributes in the development of health policy.
 - e. SLO 6.5.: Analyzes the implications of health policy across disciplines.
 - f. SLO 6.6: Evaluates the impact of globalization on health care policy development.
7. communicate, collaborate, and consult with other health professionals to manage and coordinate care across systems to improve patient and population health outcomes.
- a. SLO 7.1: Applies knowledge of organizational practices and complex systems to improve health care delivery.
 - b. SLO 7.2: Effects health care change using broad based skills including negotiating, consensus-building, and partnering.
 - c. SLO 7.3: Minimizes risk to patients and providers at the individual and systems level.
 - d. SLO 7.4: Facilitates the development of health care systems that address the needs of culturally diverse populations, providers, and other stakeholders.
 - e. SLO 7.5: Evaluates the impact of health care delivery on patients, providers, other stakeholders, and the environment.
 - f. SLO 7.6: Analyzes organizational structure, functions and resources to improve the delivery of care.

8. apply and integrate broad, organizational, patient-centered, and culturally responsive concepts into evidence-based clinical ***prevention and population*** care and services across the lifespan.
 - a. SLO 8.1: Integrates ethical principles in decision making.
 - b. SLO 8.2: Evaluates the ethical consequences of decisions.
 - c. SLO 8.3: Applies ethically sound solutions to complex issues related to individuals, populations and systems of care.

9. understand the foundations of care, and the art and science of nursing practice as it relates to individuals across the lifespan, families, and clinical populations.
 - a. SLO 9.1: Functions as a licensed independent practitioner.
 - b. SLO 9.2: Demonstrates the highest level of accountability for professional practice.
 - c. SLO 9.3: Practices independently managing previously diagnosed and undiagnosed patients.
 - d. SLO 9.3.a: Provides the full spectrum of health care services to include health promotion, disease prevention, health protection, anticipatory guidance, counseling, disease management, palliative, and end-of-life care.
 - e. SLO 9.3.b: Uses advanced health assessment skills to differentiate between normal, variations of normal and abnormal findings.
 - f. SLO 9.3.c: Employs screening and diagnostic strategies in the development of diagnoses.
 - g. SLO 9.3.d: Prescribes medications within scope of practice.
 - h. SLO 9.3.e: Manages the health/illness status of patients and families over time.
 - i. SLO 9.4: Provides patient-centered care recognizing cultural diversity and the patient or designee as a full partner in decision-making.
 - j. SLO 9.4.a.: Works to establish a relationship with the patient characterized by mutual respect, empathy, and collaboration.
 - k. SLO 9.4b: Creates a climate of patient- centered care to include confidentiality, privacy, comfort, emotional support, mutual trust, and respect.
 - a. SLO 9.4.c: Incorporates the patient’s cultural and spiritual preferences, values, and beliefs into health care.
 - l. SLO 9.4.d: Preserves the patient’s control over decision making by negotiating a mutually acceptable plan of care

Workplace Competencies and Employment Skills

The graduate of the UMW MSN-FNP program will be prepared to care for individuals and families across the lifespan. The MSN-FNP role includes health promotion and disease

preventative. MSN-FNPs are prepared to assess, diagnose and treat of acute and chronic illness and preventative health care for individuals and families across the lifespan. Family nurse practitioners demonstrate a commitment to family-centered care and understand the relevance of the family's identified community in the delivery of healthcare (AACN, 2013 Population-Focused Nurse Practitioner Competencies.)

Graduates of the MSN Program will have the knowledge, skills, and abilities necessary for career advancement in Nursing. Graduates will be prepared for both independent and collaborative clinical practice, in addition to leadership positions in Nursing through courses that promote professional inquiry and build on prior learning and practice experiences of the baccalaureate prepared registered nurse. The program promotes a leadership perspective by integrating the discipline of Nursing within broad ethical, social, and economic issues studied within the MSN curriculum.

Within their workplace, graduates of the MSN Completion Program will be able to:

- Assess research data as a guide to determining effective and cost-efficient health care practices.
- Design paths that move themselves from positions in which they primarily assist within the system to positions in which they act as decision makers and leaders both in the delivery of health care to patients and in the management of hospitals.
- Design interventions based on health care screenings they independently conduct.
- Lead research protocols on health care delivery systems.
- Deliver oral and written presentations on factors affecting public health within selected populations.
- Manage health care data derived from Nursing and medical informatics systems.

Program Assessment

The proposed program will be assessed through a variety of instruments. These include:

- Collection of baseline knowledge of admitted students as they begin their program
- Collection of data on career paths prior to admission and goals for careers
- Student evaluations of course content and teaching at the end of each semester, to be compiled semi-annually by the program director, and assessed by both the Director of the program and the Dean. Issues arising from poor content or instruction will be addressed before the course is offered again.
- Graduating student survey, to be completed as students prepare to graduate: this will assess attainment of learning outcomes and changes to the baselines established during admission, and give an overview of the entire program.
- Graduates with employment will be followed for five years; employment placement data will be collected annually for analysis according to job type and associated requirements.
- Known employers will be surveyed within nine months of the hire of a program graduate, and biennially thereafter. Data will be related to career prospects for graduates and to

assess the relevance of the graduate program to workplace needs and requirements: shifts in job requirements, skill sets and other competencies will be noted.

- The results of these surveys will be compiled by the program director each year. The director will also report on applications, quality of enrolled students, and graduation throughout.

Reviews of the MSN Program will be conducted through two processes: by the accrediting agency; and UMW, through its regular 10- and 5-year program review process.

Benchmarks of Success

- 93% of students will complete MSN course work within 2 ½ years.
- Program retention will be 70%.
- 70% of graduates will pass the FNP certification exam on the first attempt.
- 70% of job-seekers will have earned appropriate jobs in the field within 1 year of completing the program
- Alumni satisfaction surveys will show that 70% of graduates are satisfied with instructional quality and programmatic content.

These benchmarks are tangible, measureable, and achievable. We will be able to identify that we have met our goals by using Virginia Board of Nursing pass rate reports; surveys; maintaining enrollment, retention and completion data as we do for other programs in our Office of Institutional Effectiveness; and by meeting with physician practices who hire the UMW-MSN FNP graduates.

In the event that a benchmark is not met at any particular evaluation, a careful review will be initiated by the Director of the MSN Program and the Dean of the College of Arts and Sciences. Input will be sought from program faculty, and particularly MWHC Physician Alliance members, who train and hire UMW MSN-FNP graduates. Appropriate modification of the program, its requirements, or its administration will be considered in order to remediate any benchmark deficiencies. The possible need to revise benchmarks will be periodically examined as the program matures and as the Nursing profession continues to respond to changes in healthcare.

Expansion of an Existing Program

The proposed MSN Program is not an expansion of an existing program, certificate, option, concentration, track, major, or minor.

Relationship to Existing Degree Programs

UMW current has a BSN Completion program and a program (1+2+1) in which it collaborates with Germanna Community College to educate RN and BSN prepared nurses. We expect that both programs will be feeder programs to the MSN.

Collaboration or Stand Alone

This is a stand-alone degree program. No other organization was involved in its development, and no other organization will collaborate in its operation.

Justification for the Proposed Program

Response to Current Needs

Demand for physicians continues to grow faster than supply, leading to a projected shortfall of primary care between 12,500 and 31,100 physicians by 2025. Just locally, the Mary Washington Healthcare estimate is that about 90 new primary care practitioners are needed in the community just to keep up with the shortage engendered from the shortfall of primary care physicians and family nurse practitioners. Increase in the number of positions for MSN educated nurses benefit people in that profession but they also benefit the public and the hospital systems by decreasing costs, lowering wait times, reducing the numbers and length of hospital stays, and reducing readmissions to hospitals.

The calls for facilitating academic progression to a Master's degree and beyond in nursing are growing louder within the profession, as evidenced by the Tri-Council for Nursing policy statement on the Educational Advancement of Registered Nurses (2010) and the recently adopted Joint Statement on Academic Progression for Nursing Students and Graduates (2012). In the policy statement, the Tri-Council organizations state: "Current healthcare reform initiatives call for a nursing workforce that integrates evidence-based clinical knowledge and research with effective communication and leadership skills. These competencies require increased education at all levels. At this tipping point for the nursing profession, action is needed now to put in place strategies to build a stronger nursing workforce. Without a more educated nursing workforce, the nation's health will be further at risk." Nurses with advanced education are needed in large numbers to serve as teachers, scientists, primary care providers, specialists, and leaders throughout the healthcare delivery system. The Tri-Council encourages all nurses, regardless of entry-point into the profession, to continue their education in programs that grant **baccalaureate**, master's, and doctoral degrees."⁵

Such national demands for more advanced education for nurses were endorsed by national leaders representing both community college- and university-based registered nursing (RN) programs. In addition, employers are showing a preference in their hiring practices,⁶

The current composition of the Nursing Workforce in Virginia, contrasted with new standards for the education of nurses, shows a great need for programs that take RNs to higher level

⁵ <http://www.nln.org/newsreleases/tri-council.pdf> (my emphasis)

<http://www.aacn.nche.edu/aacn-publications/position/joint-statement-academic-progression>

⁶ <http://www.aacn.nche.edu/news/articles/2012/enrolldata>

degrees. Despite the calls for more highly educated nurses, the most recent data shows that only 37.12% of nurses in Virginia have a Master's degree or higher.⁷ In addition, the overall number of RNs per 10,000 persons in Virginia is expected to decline over time. This means that the ways in which nursing services are currently organized and delivered will be inadequate to meet the future needs of Virginia's citizens at the same level of service being provided in 2008.⁸

In August, 2006, the Governor of Virginia issued Executive Order 31 to create a Health Reform Commission charged with recommending ways to improve Virginia's healthcare system. The Commission addressed key issues relating to access to care: quality, transparency and prevention; long-term care; and healthcare workforce. In its September 2007 report, even with the current nursing programs that are in operation, the Commission projected a shortage of approximately 22,600 nurses and 1,500 physicians in Virginia by 2020 and indicated that Virginia would be experiencing a growing need for direct support professionals, physician extenders, and other healthcare providers to address the requirements of the elderly, disabled, and others in long-term settings.⁹

The collaboration and partnering of various organizations will facilitate and inspire the seamless academic progression of nursing students and nurses. The common goal is a well-educated, diverse nursing workforce to advance the nation's health. Advancement opportunities for academic progression will ensure that nurses have the support needed to take the next step in their education.¹⁰

Employment Demand

Many groups, including the Bureau for Labor Statistics, the nation's magnet hospitals, the Veteran's Administration, and the Virginia State Board of Nursing, all referenced below, emphasize the need for tremendous growth in the nursing workforce and particularly, in the number of nurses with a baccalaureate degree or beyond. Despite the 2.6 million registered nurses nationwide, many more qualified nurses must be prepared in programs offered by community colleges and four-year institutions to meet the nation's growing demand for health care and to replace a large wave of nurses nearing retirement. By 2020, the Bureau of Labor Statistics projects that more than 711,900 additional RNs will be needed to work in acute care hospitals, long-term care facilities, community health centers, nursing schools, and other areas. The Bureau states that "employment of registered nurses is expected to grow 26 percent from 2010-2020, faster than the average for all occupations."¹¹ According to the Bureau, Nursing is

⁷<http://www.dhp.virginia.gov/hwdc/docs/Nursing2012/NursingWorkforce2010to2012.pdf>, p.11

⁸ <http://www.dhp.virginia.gov/hwdc/docs/ForecastingNurseSandD2008-2020.pdf>, p12.

⁹ <http://www.dhp.virginia.gov/hwdc/docs/ForecastingNurseSandD2008-2028.pdf>

¹⁰ <http://www.aacn.nche.edu/aacn-publications/position/joint-statement-academic-progression>

¹¹ <http://www.bls.gov/ooh/Healthcare/Registered-nurses.htm#tab-6>

among the top 10 occupations with the largest job growth.¹² Information from the Bureau and from the Virginia Employment Commission¹³ is tabulated below.

There are many kinds of jobs which can be filled by nurses with a MSN degree. In addition to the many medical subspecialty opportunities within hospital departments, they include:

- Community Health Nursing
- Advanced Practice Nursing
- Nursing Manager and Administrator
- Nurse executive and Nursing CEO
- Informatics Nursing
- Health Policy Nursing
- Nurse Educator
- Nurse Researcher

Labor Market Data

Below, we show employment projections data for national and state levels for Nursing.

National Employment	2010 Employment	Projected 2020 Employment	Total 2010-20 Employment Change	Total % Change
Registered Nurses	2,737,400	3,449,300	711,900	26%

Virginia Employment	2010 Employment	2020 Projected Employment	Total 2010-20 Employment Change	Annual Avg. % Change
Registered Nurses	63,124	77,857	14,733	2.10%

Although these sites do not break out nursing opportunities by the degree which the Registered Nurse has received, the data discussed in the “Response to Current Needs” section demonstrates that it higher degrees are increasingly expected. Advanced practice (MSN or DNP) nursing job postings in general saw a tremendous increase from Q1 2012 to Q1 2013. From Q1 2012 to Q1 2013, job postings for urgent care NPs increased by 196 percent. Family medicine, general, and psychiatric/mental health continue to be the most in-demand nurse practitioner specialties, according to key findings in Q1 of 2013. Family medicine NP tops the list for most nurse practitioner job postings in the first quarter of 2013.

¹² [Bls.gov/EconomicsNewsReleaseTable6](http://bls.gov/EconomicsNewsReleaseTable6), quoted at http://explorehealthcareers.org/en/Career/21/Registered_Nurse_RN (a site reviewed and approved by the American Association of Colleges of Nursing)

¹³ <https://data.virginialmi.com/vosnet/analyzer/results.aspx?session=occproj&cbooccupation=291141&cbooccupationTYPES=14>

In the Fredericksburg region, the Chief Nursing Officer at Mary Washington Healthcare, as well as the Medical Director, confirm a need for and support the creation of a MSN program for their employees and others in the region and state.

Student Demand

In June, 2013 survey was conducted at Mary Washington Hospital, the largest healthcare provider in the region to assess local demand for our BSN completion program. A similar survey will be conducted for the MSN program. However, even at this time we are confident that the approval by the MWHC foundation of \$5000 annually toward tuition for this program will generate significant *local* demand. It should be noted that this tuition assistance for MWHC employees will only be applicable to the UMW program. There will also be demand beyond the region because the program will be on-line and because seats for such degrees are in short supply throughout Virginia.

v) Summary of Projected Enrollments in Proposed Program

Complete and submit the form below.

STATE COUNCIL OF HIGHER EDUCATION FOR VIRGINIA
SUMMARY OF PROJECTED ENROLLMENTS IN PROPOSED PROGRAM

Instructions:

- Enter the appropriate dates at the top of each column.
- Provide **fall headcount enrollment (HDCT)** and **annual full-time equivalent student (FTE) enrollment**. Round the FTE to the nearest whole number.
- **Assumptions: Provide data** for 1. Retention (%); 2. Part-time students (%); 3. Full-time students (%); 4. Expected time to graduation (in years) for full-time and part-time students; and 5. Number of credit hours per semester for full-time and part-time students.

Note: **Target Year** refers to the year the institution anticipates the program will have achieved full enrollment. The Council will review for possible closure any program that has not met SCHEV's productivity standards within five years of the date of first program graduates. Programs that do not anticipate meeting SCHEV productivity standards should not be proposed (see Productivity Standards). Productivity standards are not guidelines for student projected enrollment and should not be used to complete the chart below. Projected enrollment should represent actual plans for student enrollment in the program.

Projected enrollment:

Year 1		Year 2		Year 3		Year 4 Target Year (2-year institutions)			Year 5 Target Year (4-year institutions)		
2018-2019		2019-2020		2020-2021		2021-2022			2022-2023		
HDCT 15	FTES 10	HDCT 30	FTES 20	HDCT 30	FTES 20	HDCT 30	FTES 20	GRAD ---	HDCT 30	FTES 20	GRAD 12

Note: VCCS institutions only complete **Years 1 through 4**. Graduation rates must be included in Year 4, Target year for the VCCS. Four-year institutions are not to complete the GRAD rate for Year 4.

ASSUMPTIONS

1. Retention % --93%
2. Part-time student % -- 100%
3. Full-time student % -- 0%
4. Expected time to graduation – 2.5 years for each cohort (7 semesters)
5. Number of credits hours per semester
 - a. Full-time students – 0 (no full time students in the program)
 - b. Part-time students – 6-8 credits (program has a mix of 3- and 4-credit courses)

Duplication

There are six other state institutions with MSN Programs in Virginia. The commonwealth’s nurses have a variety of options to choose from when exploring MSN programs.¹⁴

However, there is a severe shortage of seats of students who want a MSN degree. There is a general shortage of seats for RN (associate’s level), BSN, and MSN applicants throughout Virginia. In addition, no program exists within easy commuting distance of Fredericksburg. The closest MSN programs are at George Mason University, about 48 miles from Fredericksburg, and Virginia Commonwealth University, over 50 miles away.

Both Dr. Carol Urban, Dean of the George Mason School of Nursing, and Sonya Almond, RN MS, clinical supervisor of junior and senior level nursing students at GMU, during extensive meetings encouraged UMW to pursue a nursing program. Although GMU also has such a program, they believe that UMW’s area in Virginia is underserved and that especially nurses who will be working and simultaneously pursuing the program are reluctant to travel significant distances to continue their education. Although GMU and VCU both have on-line MSN programs, along with the University of Virginia and others, including for-profit institutions, Dr. Urban, Ms. Almond, and our prior consultant, Dr. Elizabeth Speakman, Dean at Jefferson

¹⁴ <http://www.bestnursingdegree.com/programs/rn-to-bsn/virginia/>

University and a member of the Board of Governors of the National League of Nursing, have emphasized that if there is one relatively local to their region, nursing students prefer programs that include significant face time in addition to on-line work. A recent article in the Chronicle of Higher Education points to a Gallup Survey that shows that most Americans concur with this sentiment.¹⁵

Distinct about the UMW MSN-FNP program, will be the unusually high degree of regional collaboration with which the program will operate and which has already led to the proposal for this program. Also distinctive about this collaboration is the fact that, thanks to our relationship with Mary Washington Healthcare, we will be providing preceptor sites for the students, rather than expecting them to locate them on their own. In keeping with values central to the UMW mission and strategic plan, the UMW MSN-FNP program will ground students within social science rooted questions about the populations they will be serving, about national issues in health care systems and delivery, and about health care ethics, the last building on coursework for those who pursued a BSN with us.

All schools of Nursing must follow a relatively prescribed program of courses to receive accreditation from CCNE, and to qualify their graduates to sit for certification examinations with are required for licensure through the Virginia Boards of Medicine and Nursing. However, differences exist in the organization and presentation of topics and thus in emphasis. UMW will be one of the few that has a free standing course in Research, which it will provide at the beginning of the sequence. It also will feature separate required courses on Primary Health Care approaches for women, and children separately, perhaps the only one in Virginia to do so. Providing care to these populations is often integrated into the family framework. Furthermore, emphasis is place on our own community of interest, the greater Fredericksburg area. A specific course was developed to provide students' knowledge and skills in family and community assessment, to identify those who are most vulnerable and at risk of health problems. In addition, a course on aging was developed to address the increasing aging population in our region, with the goal to maintain the health of the aging individual.

Perhaps the most distinctive feature of the proposed UMW program that separates it from the other MSN programs in Virginia is its sole focus on educating Family Nurse Practitioners (FNPs) who live, practice and raise their families in our community. Our graduates will operate on the front lines of primary care, and care for our community members using a family-centered model. It needs to be mentioned, the funding received from the MWHC Foundation, is funding provided by our community members. Our community of Fredericksburg, is committed to improve the health outcomes of our residents, and support their commitment with their financial resources. All of the other public institutions have a broader focus and have reported they do not receive the same community and healthcare institutional support that has been bestowed upon the UMW nursing programs.

¹⁵ http://chronicle.com/blogs/wiredcampus/traditional-education-beats-online-in-key-areas-many-say-in-gallup-survey/47363?cid=at&utm_source=at&utm_medium=en

Of the six current programs, two have largely abandoned the MSN degree (ODU and Radford) because they find greater profit in the higher number of semesters for which they can charge students advancing to the DNP.

Projected Resource Needs

Projected Resource Needs for the MSN Program

The following items detail the resources necessary to initiate and sustain the program. Standard UMW graduate tuition and fee rates will be charged for the program. An initial enrollment of 10 student FTE is projected for the 2018-19 initiation year; enrollment will increase to 20 FTE by 2022-23 target year. The proposed program allocates 1.0 FTE of instructional effort for every 7.0 FTE of enrollment. Therefore, a total of 1.43 FTE of instructional effort is required in the initiation year of 2018-19, rising to 2.86 FTE by the target year of 2022-23.

Full-time Faculty

The UMW Provost has committed to hire a faculty member beginning in fall 2018 who will teach in the proposed Master of Science in Nursing, Family Nurse Practitioner degree program (MSN-FNP). The individual hired will hold a Ph.D. or DNP degree. In addition to teaching, this person will serve as the program director. This teaching assignment accounts for .76 FTE of instructional time in the initiation year, rising to .86 FTE in the target year. The remainder of this person's assignment will involve program director duties. The new faculty member will be hired at the rank of Assistant Professor with a salary of \$90,000 and benefits of \$41,256.

Part-time Faculty

There will be no part-time faculty used in this program.

Adjunct Faculty

Adjunct faculty will be hired to teach in courses in which they have demonstrated clinical expertise. In the initiation year of the program, .67 FTE of adjunct faculty (two faculty members) will contribute to the delivery of courses in the MSN-FNP program. This group will consist of M.S. trained nurses. The FTE for adjunct faculty will rise to 2.0 FTE by the target enrollment year (six persons). In the initial year of the program, three sections of courses will be taught by two adjunct faculty at a cost of \$15,000 in salary and benefits \$1,148 in and benefits. In the target year of the program, eight sections of courses will be taught by five adjunct faculty at a cost of \$45,000 in salary and benefits \$3,443 in and benefits. Adjunct faculty will include a PhD prepared nurse teaching research; an advanced practice nurse to teach advance physical assessment; a clinical nursing informatics specialist to teach healthcare informatics; a physiologist to teach pathophysiology, a pharmacist to teach pharmacology; in addition to nationally certified FNP's to teach clinically-focused courses and oversee practicum experiences.

Graduate Assistants

There will be no graduate assistants. All courses will be taught by faculty members.

Classified Positions

Administrative support for the program will be provided by a shared office manager providing

.33 FTE toward support of the MSN-FNP program. The remainder of her time supports UMW's current BSN degree program. At the full-time classified position salary of \$35,000 and benefits of \$27,506, the costs incurred in support of the MSN-FNP program will be \$11,667 salary and \$9,169 in benefits.

Targeted Financial Aid

While the University of Mary Washington is not targeting any institutionally-financed targeted financial aid is projected for this program, the Mary Washington Hospital Foundation (which has no affiliation with the University of Mary Washington) has agreed to provide \$1.2 million in scholarship/loan support over five years for students who enroll in the program. The scholarship/loan award, made to the student, would cover about half of the program's financial-aid expenses. The loan agreement between the student and Mary Washington Hospital allows the loan to be forgiven for those students who earn the MSN-FNP degree and then work for three years as a family nurse practitioner in the Fredericksburg community.

Equipment

In the initiation year, for the new faculty member, the cost of office furniture is \$4,000 and the cost for a computer and printer is \$2,000. For the shared adjunct faculty office, the cost is \$3,000 for furniture and \$1,500 for a computer and printer. The part-time faculty member already has a fully outfitted office and needs no additional equipment. The classified support position also has an outfitted office and will require no additional equipment. Total equipment, furniture, and computer costs in the initiation year are \$10,500.

The amount in the target year includes another \$3,000 for furniture and \$1,500 for a computer and printer for a second shared adjunct faculty office plus \$5,000 for replacement computers for staff who will have used the same computer for five years by the time of the target year.

Library

The Library at UMW has numerous of journal and database resources at the institution that will be available to the nursing students. In addition, UMW subscribes to CINAHL (Cumulative Index to Nursing and Allied Health Literature), which is owned and operated by EBSCO Publishing. The University of Mary Washington is also an active member of VIVA (The Virtual Library of Virginia) a consortium of colleges and universities in Virginia that provides students and faculty access to a rich array of electronic resources through the campus network. VIVA resources range from online encyclopedias and dictionaries to bibliographic databases and full-text periodical services. Beyond these resources, projected costs of additional databases needed to support the MSN program, according to the Director of the UMW Libraries, will be \$40,000 in the initiation year, rising to \$45,000 in the target year.

Telecommunications

UMW does not foresee any additional technology needs as a result of adding this program. All nursing courses will use the Canvas learning management system platform available at UMW. It is estimated that there will be expenses of \$3,000 for connecting faculty and staff to voice and data systems during the initiation year. This cost is \$6,000 in the target enrollment year.

Space

The program will be entirely online. The Stafford campus has ample space to provide faculty and student meetings space as needed. There is room for the new director and adjunct faculty to have office space. The Stafford Campus also houses University Hall, which is able to accommodate multiple cohorts as needed.

Other Resources

The program will require an annual operating budget. UMW also makes available to all faculty money for travel to conference as well as small internal research grants for both faculty and students. One additional operating cost is a rental agreement to provide simulation experiences for courses requiring the use of high-fidelity human simulation manikins across the life span. We estimate these total of all operation expenses at \$7,500 in the initiation year, rising to \$15,000 by the target year.

1. Estimated \$\$ and funding source to initiate and operate the program.

Funding Source	Program initiation year 2018 - 2019	Target enrollment year 2022 – 2023*
Reallocation within the department <i>(Note below the impact this will have within the department.)</i>	\$0	\$0
Reallocation within the school or college <i>(Note below the impact this will have within the school or college.)</i>	\$20,836	\$20,836
Reallocation within the institution <i>(Note below the impact this will have within the institution.)</i>	\$97,148	\$97,699
Other funding sources <i>(Specify and note if these are currently available or anticipated.)</i>	\$147,404	\$153,000

**Note: SCHEV’s requirements stipulate that the proposal use 0% salary increases and no inflation factor for any other cost item.*

2. Statement of Impact/Funding Sources.

Reallocation within the department

Because there is no current Department of Nursing at UMW, there is no reallocation from within the department. Nursing is an independent program, with a Director and faculty reporting to the Dean of the College of Arts and Sciences.

Reallocation within the school or college

The administrative assistant who serves the Bachelor of Nursing (BSN) program will devote .33 FTE toward support of the proposed MSN program; this amounts to \$20,836 in salary and benefits. The one additional course required can be accommodated within the faculty member’s regular rotation of teaching assignments. The additional workload involved for the administrative

assistant was taken into account when the University expanded what had been a part-time administrative position for the BSN program into a full-time one (this staffing change was made in 2016). This reallocation within the College of Arts and Sciences will not negatively impact any existing programs.

Reallocation within the institution

Institutional reallocations will provide the funds for the adjunct instructors, library, equipment, telecommunication, and other costs. In the initiation year, these funds will be covered as a part of realignment of expenditures taking part within the University's implementation of its strategic plan. The proposed MSN program has been identified as a high priority within the strategic plan. For the target year, increasing revenues from the University's successful Bachelor of Science in Nursing program will be the primary source of reallocated funds. This approach will not cause a negative impact within the institution.

Other Funding Sources

In the initiation year, the combination of other funding sources will cover the costs of the new full-time faculty position and the adjunct faculty.

The first source of other funding is a \$64,006 grant from the Mary Washington Hospital Foundation to support program operations. Another primary source of "other" funding is through new tuition and fee revenue that will be generated by students enrolling in this new program. Full graduate student tuition and fee rates for 2016-17 are \$7,650. Applying those tuition and fee rates to the projected FTE enrollment in the initiation year yields anticipated revenue of \$38,250 (tuition for half a year, given the spring 2019 start date). A final source of other funding in the initiation year will be an additional anticipated grant from the Mary Washington Hospital Foundation for \$9,000. The Hospital Foundation has made a commitment to help support the start-up of the MSN program and UMW anticipates no difficulty in obtaining approval of the additional funding required to initiate the new degree.

Funding of the program in the target year changes somewhat. Anticipated tuition revenues for the target year, using the 2016-17 rates held constant and applied them to the projected enrollments, produces revenue of \$153,000. The termination of the grant and additional funding provided by the hospital foundation to initiate the program will be absorbed by an increase in the amount allocated within the institution, as explained above.

Table 1. MSN (FNP) 7-Semester Part-time Curriculum

<u>COURSE #</u>	<u>COURSE NAME</u>	<u>CLINICAL HOURS</u>	<u>CR</u>	
Semester 1 (SPRING) 2019				
1	NURS 520	Issues and Trends in Advanced-Practice Family Nursing	0	3
2	NURS 530	Theories and Evidence-Based Research in Advanced-Practice Family Nursing	0	3
			Semester Credits:	6
Semester 2 (SUMMER) 2019				
3	*NURS 540	Informatics & Healthcare Technologies	0	3
4	NURS 550	Life Transitions and Health in Aging	0	3
			* Course number change request from 510 to 540.	6
Semester 3 (FALL) 2019				
5	NURS 560	Health Promotion and Maintenance in Advanced-Practice Family Nursing	0	2
6	NURS 580	Family Assessment, Theory and Practice	0	1
7	NURS 590	Principles of Advanced Pathophysiology in Advanced-Practice Family Nursing	0	3
			Semester Credits:	6
Semester 4 (SPRING) 2020				
8	NURS 610	Advanced Physical Assessment in Advanced-Practice Family Nursing		3
9	NURS 620	Pharmacotherapeutics in Advanced-Practice Family Nursing		3
			Semester Credits:	6
Semester 5 (SUMMER) 2020				
10	NURS 630	Advanced-Practice Family Nursing: Primary Care Approaches for Women		3
11	NURS 640	Advanced-Practice Family Nursing: Management of Acute Illnesses		3
12	NURS 650	Advanced-Practice Family Nursing: Practicum I	120	2
			Semester Credits:	8
Semester 6 (FALL) 2020				
13	NURS 710	Advanced-Practice Family Nursing: Seminar in Complex Health Problems		1
14	NURS 740	Advanced-Practice Family Nursing: Primary Care Approaches for Children		3
15	NURS 750	Advanced-Practice Family Nursing: Practicum II	180	3
			Semester Credits:	7
Semester 7 (SPRING) 2021				
16	NURS 760	Advanced-Practice Family Nursing: Management of Chronic Illness		3
17	NURS 770	Advanced-Practice Family Nursing: Practicum III	240	4
X	NURS 790	MSN Comprehensive Exam		0
			Semester Credits:	7
				TOTAL PROGRAM CREDITS: 46

Table 1. MSN (FNP) 7-Semester Part-time Curriculum

COURSE #	COURSE NAME	CLINICAL HOURS	CR	
Semester 1 (SPRING) 2019				
1	NURS 520	Issues and Trends in Advanced-Practice Family Nursing	0	3
2	NURS 530	Theories and Evidence-Based Research in Advanced-Practice Family Nursing	0	3
			Semester Credits:	6
Semester 2 (SUMMER) 2019				
3	*NURS 540	Informatics & Healthcare Technologies	0	3
4	NURS 550	Life Transitions and Health in Aging	0	3
			* Course number change request from 510 to 540.	6
Semester 3 (FALL) 2019				
5	NURS 560	Health Promotion and Maintenance in Advanced-Practice Family Nursing	0	2
6	NURS 580	Family Assessment, Theory and Practice	0	1
7	NURS 590	Principles of Advanced Pathophysiology in Advanced-Practice Family Nursing	0	3
			Semester Credits:	6
Semester 4 (SPRING) 2020				
8	NURS 610	Advanced Physical Assessment in Advanced-Practice Family Nursing		3
9	NURS 620	Pharmacotherapeutics in Advanced-Practice Family Nursing		3
			Semester Credits:	6
Semester 5 (SUMMER) 2020				
10	NURS 630	Advanced-Practice Family Nursing: Primary Care Approaches for Women		3
11	NURS 640	Advanced-Practice Family Nursing: Management of Acute Illnesses		3
12	NURS 650	Advanced-Practice Family Nursing: Practicum I	120	2
			Semester Credits:	8
Semester 6 (FALL) 2020				
13	NURS 740	Advanced-Practice Family Nursing: Primary Care Approaches for Children		3
14	NURS 750	Advanced-Practice Family Nursing: Practicum II	180	3
			Semester Credits:	6
Semester 7 (SPRING) 2021				
15	NURS 760	Advanced-Practice Family Nursing: Management of Chronic Illness		3
16	NURS 770	Advanced-Practice Family Nursing: Practicum III	240	4
X	NURS 790	MSN Capstone		1
			Semester Credits:	8
			TOTAL PROGRAM CREDITS:	46