SOUTH DAKOTA BOARD OF REGENTS

Academic and Student Affairs
Consent

AGENDA ITEM: 5 – C (6)
DATE: May 21, 2020

SUBJECT
New Program: USD Doctor of Nursing Practice (DNP) with specialization in Organizational and System Leadership and Master of Science in Nursing (MSN) with specialization in Nursing Informatics and e-Health

C CONTROLLING STATUTE, RULE, OR POLICY
BOR Policy 2:23 – Program and Curriculum Approval
BOR Policy 2:1 – External Review of Proposed Graduate Programs

DISCUSSION / BACKGROUND
The University of South Dakota (USD) requests approval to offer a Doctor of Nursing Practice (DNP) degree with Organizational and System Leadership specialization. The proposed Doctor of Nursing Practice program seeks to prepare individuals for roles that specialize in practice at the aggregate, systems, or organizational level. It builds on the existing Bachelor of Science in Nursing (BSN) and the proposed new Master of Science in Nursing (MSN) in Nursing Informatics and e-Health. The program expands nursing education at USD to meet the growing market demand for graduates with the ability to provide nursing leadership at an advanced level and engage in indirect patient care roles such as nursing administration, executive leadership, and academic leadership opportunities. The program will be offered through distance delivery (online/other distance methods).

USD also requests approval to offer a Master of Science in Nursing (MSN) with specialization in Nursing Informatics and e-Health. The new Master of Science in Nursing program will build on the existing Bachelor of Science in Nursing (BSN) and expand nursing education at USD to meet growing market demand for graduates with the ability to provide nursing care at an advanced level and with proficiency in the science of how to use data, information systems, and healthcare technology driven interventions.

USD anticipates increased demand for graduates of the proposed program, due to the rapid growth of telehealth and telemedicine services in the state, especially with the Centers for Medicare and Medicaid Services Rural Health Strategy and the Telehealth Aims initiative.

(Continued)

DRAFT MOTION 20200521_5-C(6):
I move to approve USD’s new program proposals for a Doctor of Nursing Practice (DNP) with specialization in Organizational and System Leadership; and Master of Science in Nursing (MSN) with specialization in Nursing Informatics and e-Health, as presented.
In offering this degree, USD is looking to the future and anticipating healthcare needs for which the new generation of nurses must be prepared. The complexity of rural healthcare environments, combined with the promise of healthcare technologies in addressing rural healthcare challenges, creates an urgent need for expanded nursing knowledge in healthcare technologies, informatics and analytics.

The Intent to Plan for each program was waived by the Executive Director.

Per BOR Policy 2:1, an external review of the programs was conducted in early February, and the final report of the reviewers is included in Attachment III.

**IMPACT AND RECOMMENDATION**

South Dakota State University (SDSU) is currently the only public university in South Dakota that offers graduate nursing education, and its programs are mainly focused on Advanced Practice Nursing and Nurse Practitioner roles in direct patient care. A significant number of students who seek educational options not offered at SDSU choose out-of-state for-profit academic institutions for their graduate study. The proposed programs will allow students seeking preparation for roles that specialize in practice at the aggregate, systems, or organizational level to stay in state.

**DNP:** Collaboration with the Beacom School of Business at USD will leverage resources and enable cost-savings in program delivery through sharing of courses via distance delivery. Leveraging resources and creating a diverse pool of faculty and student expertise will also enhance program competitiveness for research funding.

**MSN:** The curriculum evolved from discussions amongst experts at USD Nursing Department, the Beacom Business School and Dakota State University (DSU). In addition, discussions with the Nursing Program and the nursing leadership at both Sanford and Avera took place. Meetings will occur on regular basis between the nursing leadership at both institutions and the nursing leadership to bridge education to practice and leverage expertise. The curriculum is expected to evolve with addition of new faculty expertise and development of new research and practice interests.

The proposed programs will be self-sustaining, supported by tuition and fees and with existing resources.

Board office staff recommend approval of the programs.

**ATTACHMENTS**

Attachment I – USD New Program Request Form: DNP with Organizational and System Leadership specialization
Attachment II – USD New Program Request Form: MSN with specialization in Nursing Informatics and e-Health
Attachment III – External Program Review Report
Attachment IV – Response to External Program Review Report
1. What is the nature/purpose of the proposed program?

The University of South Dakota seeks to develop a **Doctor of Nursing Practice degree with Organizational and System Leadership specialization**. USD is **not seeking a nurse practitioner program or an Advanced Practice Registered Nurse specialization** (APRNs i.e. Nurse Practitioners, Clinical Nurse Specialists, Certified Nurse-Midwives, and Certified Registered Nurse Anesthetists). “Doctor of Nursing Practice preparation falls into two broad categories: roles that specialize as an Advanced Practice Nurse (APN) with focus on direct care of individuals, and roles that specialize in practice at an aggregate, systems, or organizational level. This distinction is important as APNs face different licensure, regulatory, credentialing, liability, and reimbursement issues than those who practice at an aggregate, systems, or organizational level. As a result, the specialty content preparing DNP graduates for various practices will differ substantially” [Association of Colleges of Nursing (AACN), the Essentials of Doctoral Education for Advanced Nursing Practice, 2006]². The proposed Doctor of Nursing Practice program seeks to prepare individuals for roles that specialize in practice at the aggregate, systems, or organizational level. The proposed program will target nurses that are in mid-level nursing management and leadership positions who desire to

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¹ If the proposed new program includes specific specializations within it, complete and submit a New Specialization Form for each proposed specialization and attach it to this form. Since specializations appear on transcripts, they require Board of Regents approval.

² [https://www.aacnnursing.org/Portals/42/Publications/DNPEssentials.pdf](https://www.aacnnursing.org/Portals/42/Publications/DNPEssentials.pdf)
enhance their ability to lead within complex health systems and utilize the skill set of a doctorally prepared nurse. Concepts from nursing science and other related disciplines will be synthesized to prepare the student for the highest level of nursing practice and to prepare students to assume leadership roles in health care organizations. The curriculum will prepare the student to incorporate finance, informatics, budget, policy, population health, organizations or health care system transformation, and ethics as they lead within health systems.

The proposed program builds on the existing Bachelor of Science in Nursing (B.S.N.) and the proposed new MSN in health informatics and e-Health. The program expands nursing education at USD to meet the growing market demand for graduates with the ability to provide nursing leadership at an advanced level and engage in indirect patient care roles such as nursing administration, executive leadership, and academic leadership opportunities (AACN, The Doctor of Practice White Paper August 2015, p 1)\(^3\). The proposed program will be self-sustaining. The core of the proposed program are nursing courses that provide nursing graduates with the capacity to take on greater leadership roles and hone their skills in management, leadership, healthcare operations, evidence-based practice, informatics, and quality improvement (AACN Doctor of Nursing Practice Essentials)\(^4\).

The purpose of the new program is to advance the following System Strategic Goals (Policy 1:21) and State Initiatives:

- Expand graduate education and increasing the number of graduate programs in the state
- Increase access to continuing education opportunities that South Dakotans need to upgrade their credentials while remaining in the workforce
- South Dakota will be a recognized national leader in the use of information technology to enhance its educational, economic, social scientific and political development
- Enhance engagement of student in the translation of research. Robust projects that accompany graduate programs create new opportunities for students to become skilled in the translation of research
- Provide technological innovation and skilled labor that support healthcare industries in the state

Collaboration with The Beacom School of Business at The University of South Dakota will leverage resources and enable cost-savings in program delivery through sharing of courses via distance delivery. Leveraging resources and creating a diverse pool of faculty and student expertise will also enhance program competitiveness for research funding.

2. How does the proposed program relate to the university’s mission and strategic plan, and to the current Board of Regents Strategic Plan 2014-2020?\(^4\)

The proposed program furthers the mandate and strategic plan of the Board of Regents and the University of South Dakota by providing new high quality, efficient, flexible, equitable, affordable, and accessible graduate education to the residents of South Dakota. The proposal aligns with the Board’s strategic plan 2014-2020 by growing the number of graduate degrees and expanding the research and economic development opportunities in the state. The new

\(^3\) [https://www.aacnnursing.org/Portals/42/DNP/DNP-Implementation.pdf](https://www.aacnnursing.org/Portals/42/DNP/DNP-Implementation.pdf)

\(^4\) South Dakota statutes regarding university mission are located in SDCL 13-57 through 13-60; Board of Regents policies regarding university mission are located in Board Policies 1:10:1 through 1:10:6. The Strategic Plan 2014-2020 is available from [https://www.sdbor.edu/the-board/agendaitems/Documents/2014/October/16_BOR1014.pdf](https://www.sdbor.edu/the-board/agendaitems/Documents/2014/October/16_BOR1014.pdf).
program enhances and enriches the educational mission at the University of South Dakota and contributes to the overall educational attainment, research and productivity in the state. The program is aligned with the statutory mission of the University of South Dakota, as provided in SDCL 13-57-1:

“The legislature established The University of South Dakota as the liberal arts university to meet the needs of the State and region by providing undergraduate and graduate programs in the liberal arts and sciences, and professional education in business, education, fine arts, law, and medicine, and other courses or programs as the Board of Regents may determine. (SDCL 13-57-1)”

The Board implemented SDCL 13-57-1 by authorizing undergraduate and graduate programs in the liberal arts and sciences and in professional education and by requiring the University to promote excellence in teaching and learning, to support research, scholarly and creative activities, and to provide service to the State of South Dakota, the region, and beyond. The University of South Dakota is the comprehensive university of the South Dakota System of Higher Education.

**USD Strategic Goals:**
- Undergraduate, Graduate & Professional Student Experience
  - Goal 2: Enrich academic experiences for graduate and professional students.
- Research, Scholarship & Creative Work
  - Goal 1: Expand interdisciplinary research, scholarship, and creative work.
  - Goal 2: Increase national-level recognition in a select number of research and creative areas.

By 2020, USD aims to increase enrollment in graduate and professional programs by 3,000 and anticipates that enrollment in off-campus and distance courses will be 5,100. The development of this program supports those efforts.

3. **Describe the workforce demand for graduates of the program, including national demand and demand within South Dakota.**

According to the South Dakota Department of Health 2017 Workforce Supply and Employment Characteristics Report, 55% of the South Dakota RNs are ≥41 years old. Therefore, with the aging RN population, self-sufficiency and sustainability of the nursing workforce becomes a priority. The South Dakota Board of Nursing (SDBON) report went further to indicate that only 59.8% of South Dakota’s RNs had educational preparation as a BS degree or higher. This is below the national average of 65.4%. While South Dakota projections of RN needs include 417 RNs/year, the SDBON report clearly documents a critical need for graduating additional nurses with an advanced educational preparation.

The demand for medical and health services managers is expected to grow by 15% nationally over the next 10 years., employment projections for healthcare services managers in South Dakota will continue to rise between 2014 and 2024 and employment projections for Nursing instructors and teachers is 22.4% between 2014 and 2024. Within academic nursing, a faculty shortage has been well documented and is reaching a critical level. It is estimated that one-third of the aging nurse faculty workforce will retire by 2025 (Fang & Kesten, 2017).

According to the AACN, the Doctor of Nursing Practice with Organizational and System

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Leadership specialization is one innovative approach for preparing faculty needed to teach, generate evidence, and innovate in the clinical setting.

Graduates of the program will be prepared to hold a variety of high level responsible positions in health care including administrative positions in hospital and ambulatory care, private consultation or consulting firms, federal or state government agencies, business or industry, and faculty and clinical positions. Job titles may include Vice President for Nursing and Clinical Services, Program Director, Vice President for Patient Care, Chief Executive Officer, Health Officer, Commissioner of Health, Quality Improvement Director, Clinical Information Technology Specialist, Direct Care Clinician, and Faculty Member.

4. How will the proposed program benefit students?

South Dakota State University is the only public university in the state that offers graduate nursing education which is mainly focused on Advanced Practice Nursing (APRNs) and Nurse Practitioner roles working with direct patient care. Students looking for educational options that are not offered at South Dakota State University, seek such opportunities at for-profit, distant education programs. According to the nursing leadership at Sanford and Avera (Personal communication February 28, 2019), there are over 200 registered nurses employed by both institutions who are seeking opportunities for advancing their leadership development and are currently enrolled in graduate programs at online, out-of-state, for-profit academic institutions. This excludes RNs working at Regional Health, institutions of higher education, and all RNs employed in other healthcare settings. Accounting for all the RNs seeking higher education in the state makes the applicant pool much larger. South Dakota is clearly losing significant economic activity by losing such a large number of students to out-of-state, for-profit programs. Nursing advisors at USD receive regular inquiry about graduate programs from prospective students and registered nurses who would like to return to their alma mater to complete their graduate studies.

Furthermore, the proposed program will allow students to build on their knowledge and personal experiences and competencies to develop a sophisticated understanding and ability to meet the complex needs of current and future healthcare systems and contexts. Students will be able to continue employment while enrolled part-time or full-time in the program. The program is flexible and draws on the university and faculty strengths including distance delivery, use of technologies, and interprofessional approaches.

5. Program Proposal Rationale:

A. If a new degree is proposed, what is the rationale?

Nationally and globally, the Doctor of Nursing Practice (DNP) is well established and recognized credential. The Doctorate degree is highly valued and recognized by employers, healthcare and government and demand for the degree is increasing. The DNP credential is required for teaching in graduate nursing programs and for most executive positions. Therefore, nurses planning to advance their careers are likely to require a DNP equivalent. The DNP is designed for nurses seeking a terminal degree in nursing practice and offers an alternative to research-focused doctoral programs. DNP-prepared nurses are well-equipped to fully engage in implementation and translation science and implement the science developed by nurse researchers prepared in PhD and other research-focused nursing

7 “New Degree” means new to the university. Thus if a campus has degree granting authority for a Ph.D. program and the request is for a new Ph.D. program, a new degree is not proposed.
doctorates. The changing demands of the United States’ complex healthcare environment require the highest level of scientific knowledge and practice expertise to assure quality patient outcomes. As a result, Nursing is moving in the direction of other health professions in the transition to the DNP. Medicine (MD), Dentistry (DDS), Pharmacy (PharmD), Psychology (PsyD), Physical Therapy (DPT), and Audiology (AuD) all require or offer practice doctorates. According to the AACN, there are 336 DNP programs currently enrolling students at schools of nursing nationwide, and an additional 121 new DNP programs are in the planning stages (54 post-baccalaureate and 67 post-master’s programs). From 2016 to 2017, the number of students enrolled in DNP programs increased from 25,289 to 29,093. During that same period, the number of DNP graduates increased from 4,855 to 6,090.

B. What is the rationale for the curriculum?

The curriculum evolved from discussions amongst experts at USD Nursing Department and the Beacom School of Business. In addition, discussions with the Nursing Program and the nursing leadership at both Sanford and Avera took place. Future meetings will occur on a regular basis between the nursing leadership at both institutions and the nursing leadership at USD to bridge education to practice and leverage expertise. The curriculum is expected to evolve with addition of new faculty expertise and development of new research and practice interests. The AACN Essentials of Doctoral Education for Advanced Nursing Practice will provide the foundational curricular requirements for the proposed DNP curriculum (Appendix C).

1. DNP Essentials 1 through 8 are the foundational outcome competencies deemed essential for all graduates of a DNP program regardless of specialty or functional focus.

2. Specialty competencies/content prepare the DNP graduate for those practice and didactic learning experiences for a particular specialty.

Competencies, content, and clinical experiences needed for specific roles in specialty areas are delineated by national specialty nursing organizations. The proposed DNP curriculum will be built using current national standards for a specialization in Organizational and Systems Leadership.

C. Demonstrate/provide evidence that the curriculum is consistent with current national standards.

The proposed DNP program with specialization in Organizational and System Leadership specialization consists of 36 – 43 credit hours, comparable to the credits offered by other DNP programs nationally. A maximum of 280 supervised clinical hours can be transferred from the student’s prior MSN clinical hours. Students who enter the program with less than 280 post-baccalaureate supervised clinical hours will need to take up to 7 additional practicum credit hours to fulfill the requirement of 1000 clinical hours in the DNP program. Eligible students must hold an unencumbered Registered Nurse license and a Master’s Degree in a related field of study. These credit hours and eligibility requirements are comparable to the credits offered by other DNP programs nationally.
The program will prepare nurses in mid-level nursing management and leadership positions to enhance their ability to lead within complex health systems and utilize the skill set of a doctorally prepared nurse. The curriculum will be built around the AACN Essentials of Doctoral Education for Advanced Nursing Practice and the Nursing American Organization for Nurse Executives’ scope and standards and integrate the following competencies:

- AACN Essentials of Doctorate Education in Nursing  
  https://www.aacnnursing.org/DNP/Tool-Kit
- American Organization for Nursing Leadership (AONL) Certified in Executive Nursing Practice Certification: https://www.aonl.org/initiatives/certification
- American Nurses Credentialing Center Certification Programs for Nurse Leaders: https://www.nursingworld.org/our-certifications/
- Healthcare Leadership Alliance Competency Directors: http://www.aone.org/resources/lsa-directory.shtml

D. Summary of the degree program (complete the following tables):

<table>
<thead>
<tr>
<th>Doctor of Nursing Practice with specialization in Organizational and System Leadership</th>
<th>Credit Hours</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Conferred Master of Science Nursing (from an accredited institution)</td>
<td>33</td>
<td>-</td>
</tr>
<tr>
<td>Required courses, all students</td>
<td>36 - 43</td>
<td>100%</td>
</tr>
<tr>
<td>Required option or specialization, if any</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Total Required for the Degree</strong></td>
<td><strong>36 - 43 with Conferred Master of Science Nursing</strong></td>
<td></td>
</tr>
</tbody>
</table>
### Required Courses

<table>
<thead>
<tr>
<th>Prefix</th>
<th>Number</th>
<th>Course Title</th>
<th>Didactic Credit Hours</th>
<th>Clinical Credit Hours</th>
<th>New (yes, no)</th>
</tr>
</thead>
<tbody>
<tr>
<td>NURS</td>
<td>811</td>
<td>Scientific Underpinnings and Evidence-Based Practice</td>
<td>2</td>
<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td>NURS</td>
<td>812</td>
<td>Leadership Development in Healthcare Policy and Advocacy</td>
<td>2</td>
<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td>NURS</td>
<td>841</td>
<td>Applied Evidence-Based Practice and Population Health Concepts</td>
<td>2</td>
<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td>NURS</td>
<td>861</td>
<td>Leadership Development in Quality Improvement in Nursing for Health Systems</td>
<td>1</td>
<td>2</td>
<td>Yes</td>
</tr>
<tr>
<td>NURS</td>
<td>862</td>
<td>Leadership Development in Information Systems Technology for Patient Care Improvement</td>
<td>1</td>
<td>2</td>
<td>Yes</td>
</tr>
<tr>
<td>NURS</td>
<td>863</td>
<td>Leadership Development in Healthcare Business</td>
<td>3</td>
<td>0</td>
<td>Yes</td>
</tr>
<tr>
<td>BADM</td>
<td>761</td>
<td>Leadership Development</td>
<td>3</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>HSAD</td>
<td>770</td>
<td>Managing Health Services Resources</td>
<td>3</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>NURS</td>
<td>773</td>
<td>Clinical Scholarship and Analytical Methods</td>
<td>2</td>
<td>1</td>
<td>No</td>
</tr>
<tr>
<td>NURS</td>
<td>813</td>
<td>Scholarly Writing and Communication I</td>
<td>1</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>NURS</td>
<td>814</td>
<td>Scholarly Writing for DNP Project</td>
<td>2</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>NURS</td>
<td>880</td>
<td>DNP Project <em>(Common Course)</em></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Subtotal: 20 - 16

### Elective Courses

List courses available as electives in the program. Indicate any proposed new courses added specifically for the program.

Students must take 1 – 7 clinical credit hours to meet a minimum of 1,000 clinical hours for the program:

<table>
<thead>
<tr>
<th>Prefix</th>
<th>Number</th>
<th>Course Title</th>
<th>Credit Hours</th>
<th>New (yes, no)</th>
</tr>
</thead>
<tbody>
<tr>
<td>NURS</td>
<td>895</td>
<td>Practicum <em>(Common Course)</em></td>
<td>1 – 7*</td>
<td>No</td>
</tr>
</tbody>
</table>

Subtotal: 1 - 7

*Students who do not transfer in up to 280 supervised clinical hours would be required to take up to 7 credits of Practicum to meet the 1,000 clinical hour requirement for the degree.

### 6. Student Outcomes and Demonstration of Individual Achievement

A. **What specific knowledge and competencies, including technology competencies, will all students demonstrate before graduation?** The knowledge and competencies should be specific to the program and not routinely expected of all university graduates. **Complete Appendix A – Outcomes using the system form.**

Program graduates will be able to:
• Assume a leadership role as a Doctor of Nursing Practice prepared nurse in healthcare.
• Apply principles of evidence-based practice, interprofessional collaboration, nursing and leadership science, ethics, cultural sensitivity, and determinants of health to ensure accountability for quality of health care and patient safety.
• Employ principles of business, finance, economics, and health policy to system wide initiatives that will improve safety and quality of care.
• Synthesize scientific methods and underpinnings to shape and influence healthcare decisions and systems of care.
• Employ data driven clinical and system decisions by integrating healthcare technology and informatics in managing complex healthcare environments.
• Facilitate transformative practice and organizational change that is based on critical evaluation of relationships among practice, fiscal policy issues, populations, and healthcare delivery systems.

Please consult Appendix A for detailed outcomes mapped to coursework

B. Are national instruments (i.e., examinations) available to measure individual student achievement in this field? If so, list them.
Graduates of the program will be eligible to obtain certification in the following:
• American Organization of Nurse Executives (A.O.N.E.) Certified in Executive Nursing Practice (C.E.N.P.)
• American Nurses Credentialing Center (A.N.C.C.) Nurse Executive (NE-BC)

C. How will individual students demonstrate mastery? Describe the specific examinations and/or processes used, including any external measures. What are the consequences for students who do not demonstrate mastery?

The certification examination is a competency-based examination that provides a valid and reliable assessment of knowledge and skills of nurse leaders. Once a student completes eligibility requirements to take the certification examination and successfully passes the exam, the student is awarded the credentials based on the type of certification they pursued. The need to obtain a certificate depends on the type, scope and capacity of the work that the program graduates choose, as well as the requirements of the hiring organization or employer. Graduate will also demonstrate mastery by successful completion of the program and the DNP project.

7. What instructional approaches and technologies will instructors use to teach courses in the program?

The program will be delivered by distant technology and using Desire to Learn (D2L) course management system. Instructional approaches may include lectures, discussion boards, blogs, cooperative and project based-learning. In addition, there will be clinical, face-to-face residencies, and leadership immersion experiences.

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8 What national examination, externally evaluated portfolio or student activity, etc., will verify that individuals have attained a high level of competence and identify those who need additional work?
8. Did the University engage any developmental consultants to assist with the development of the curriculum? Did the University consult any professional or accrediting associations during the development of the curriculum? What were the contributions of the consultants and associations to the development of curriculum?

The University of South Dakota nursing faculty consulted with experts from Duke, University of Minnesota, and University of Arizona. Nursing faculty also consulted with leadership from Avera and Sanford. The contributions were related to clinical hour requirements, need for program and demand, course content and expected program outcomes.

9. Are students enrolling in the program expected to be new to the university or redirected from other existing programs at the university? Complete the table below and explain the methodology used in developing the estimates.

If question 12 includes a request for authorization for off-campus or distance delivery, add lines to the table for off-campus/distance students, credit hours, and graduates.

<table>
<thead>
<tr>
<th>Fiscal Years*</th>
<th>1st</th>
<th>2nd</th>
<th>3rd</th>
<th>4th</th>
<th>5th</th>
<th>6th</th>
</tr>
</thead>
<tbody>
<tr>
<td>Headcount &amp; hours from proposal</td>
<td>FY21</td>
<td>FY22</td>
<td>FY23</td>
<td>FY24</td>
<td>FY25</td>
<td>FY26</td>
</tr>
<tr>
<td>Fall headcount (see table in proposal)</td>
<td>6</td>
<td>13</td>
<td>22</td>
<td>28</td>
<td>32</td>
<td>34</td>
</tr>
<tr>
<td>Program FY cr hrs, Off-Campus NURS</td>
<td>54</td>
<td>117</td>
<td>213</td>
<td>273</td>
<td>315</td>
<td>339</td>
</tr>
<tr>
<td>Program FY cr hrs, Off-Campus OTHER (BADM, HSAD)</td>
<td>18</td>
<td>39</td>
<td>51</td>
<td>63</td>
<td>69</td>
<td>69</td>
</tr>
<tr>
<td>Program FY cr hrs, Off-Campus TOTAL</td>
<td>72</td>
<td>156</td>
<td>264</td>
<td>336</td>
<td>384</td>
<td>408</td>
</tr>
<tr>
<td>Number of Graduates</td>
<td>6</td>
<td>8</td>
<td>10</td>
<td>12</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*Doy not include current fiscal year.

**This is the total number of credit hours generated by students in the program in the required or elective program courses. Use the same numbers in Appendix B – Budget.

10. Is program accreditation available? If so, identify the accrediting organization and explain whether accreditation is required or optional, the resources required, and the University’s plans concerning the accreditation of this program.

The program will seek accreditation from the Commission on Collegiate Nursing Education (CCNE) and approval of the South Dakota Board of Nursing. There will be incremental burden to assess the new courses with a Nursing prefix (foundational and core courses).

11. Does the University request any exceptions to any Board policy for this program? Explain any requests for exceptions to Board Policy. If not requesting any exceptions, enter “None.”

None

12. Delivery Location

A. Complete the following charts to indicate if the university seeks authorization to deliver the entire program on campus, at any off campus location (e.g., UC Sioux Falls, Capital

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9 Developmental consultants are experts in the discipline hired by the university to assist with the development of a new program (content, courses, experiences, etc.). Universities are encouraged to discuss the selection of developmental consultants with Board staff.

10 The accreditation requirements of the Higher Learning Commission (HLC) require Board approval for a university to offer programs off-campus and through distance delivery.
University Center, Black Hills State University-Rapid City, etc.) or deliver the entire program through distance technology (e.g., as an online program)?

<table>
<thead>
<tr>
<th>Yes/No</th>
<th>Intended Start Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>On campus</td>
<td>No</td>
</tr>
<tr>
<td>Off campus</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Yes/No</th>
<th>If Yes, list location(s)</th>
<th>Intended Start Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Distance Delivery (online/other distance delivery methods)</td>
<td>Yes</td>
<td>015-Internet asynchronous</td>
</tr>
</tbody>
</table>

B. Complete the following chart to indicate if the university seeks authorization to deliver more than 50% but less than 100% of the certificate through distance learning (e.g., as an online program)?

<table>
<thead>
<tr>
<th>Yes/No</th>
<th>If Yes, identify delivery methods</th>
<th>Intended Start Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Distance Delivery (online/other distance delivery methods)</td>
<td>Yes</td>
<td>015-Internet asynchronous</td>
</tr>
</tbody>
</table>

13. Cost, Budget, and Resources: Explain the amount and source(s) of any one-time and continuing investments in personnel, professional development, release time, time redirected from other assignments, instructional technology & software, other operations and maintenance, facilities, etc., needed to implement the proposed major. Address off-campus or distance delivery separately.

Please refer to Appendix B

14. Board Policy 2:1 states: “Independent external consultants retained by the Board shall evaluate proposals for new graduate programs unless waived by the Executive Director.” Identify five potential consultants (including contact information and short 1-2 page CVs) and provide to the System Chief Academic Officer (the list of potential consultants may be provided as an appendix). In addition, provide names and contact information (phone numbers, e-mail addresses, URLs, etc.) for accrediting bodies and/or journal editors who may be able to assist the Board staff with the identification of consultants.

Please refer to Appendix C for potential consult list

**Journal**
The Journal of Nursing Administration
Editor in Chief: Karen Hill, DNP, RN, NEA-BC, FACHE, FAAN
JONAEditor@gmail.com

**Accreditation**

11 Delivery methods are defined in AAC Guideline 5.5.
12 This question responds to HLC definitions for distance delivery.
15. Is the university requesting or intending to request permission for a new fee or to attach an existing fee to the program?

☐ Yes  ☑ No

Explanation (if applicable):

16. New Course Approval: New courses required to implement the new graduate program may receive approval in conjunction with program approval or receive approval separately. Please check the appropriate statement:

☑ YES, the university is seeking approval of new courses related to the proposed program in conjunction with program approval. All New Course Request forms are included as Appendix C and match those described in section 5D.

☐ NO, the university is not seeking approval of all new courses related to the proposed program in conjunction with program approval; the institution will submit new course approval requests separately or at a later date in accordance with Academic Affairs Guidelines.

17. Additional Information: Additional information is optional. Use this space to provide pertinent information not requested above. Limit the number and length of additional attachments. Identify all attachments with capital letters. Letters of support are not necessary and are rarely included with Board materials. The University may include responses to questions from the Board or the Executive Director as appendices to the original proposal where applicable. Delete this item if not used.
## APPENDIX A

### Individual Student Outcomes and Program Courses

List specific individual student outcomes—knowledge and competencies—in each row. Label each column with a course prefix and number. Indicate required courses with an asterisk (*). Indicate with an X the courses that will provide the student with an opportunity to acquire the knowledge or competency listed in the row. All students should acquire the program knowledge and competencies regardless of the electives selected. Modify the table as necessary to provide the requested information for the proposed program.

<table>
<thead>
<tr>
<th>Individual Student Outcome</th>
<th>Program Courses that Address the Outcomes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Assume a leadership role as a doctor of Nursing Practice prepared nurse in healthcare.</td>
<td>NURS 811* X</td>
</tr>
<tr>
<td>Apply principles of evidence-based practice, interprofessional collaboration, nursing and leadership science, ethics, cultural sensitivity, and determinants of health to ensure accountability for quality of health care and patient safety.</td>
<td>X X X X X</td>
</tr>
<tr>
<td>Employ principles of business, finance, economics, and health policy to system wide initiatives that will improve safety and quality of care.</td>
<td>X X X X X</td>
</tr>
<tr>
<td>Synthesize scientific methods and underpinnings to shape and influence healthcare decisions and systems of care.</td>
<td>X X X X X</td>
</tr>
<tr>
<td>Employ data driven clinical and system decisions by integrating healthcare technology and informatics in managing complex healthcare environments</td>
<td>X X X X X</td>
</tr>
<tr>
<td>Facilitate transformative practice and organizational change that is based on critical evaluation of relationships among practice, fiscal policy issues, populations, and healthcare delivery systems.</td>
<td>X X X X X</td>
</tr>
</tbody>
</table>

Expand the table as necessary to include all student outcomes. Outcomes in this table are to be the same ones identified in the text.
# APPENDIX B

**USD Nursing DNP Track Only**

## 1. Assumptions

**Headcount & hours from proposal**

<table>
<thead>
<tr>
<th></th>
<th>FY21</th>
<th>FY22</th>
<th>FY23</th>
<th>FY24</th>
<th>FY25</th>
<th>FY26</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fall headcount (see table in proposal)</td>
<td>6</td>
<td>13</td>
<td>22</td>
<td>28</td>
<td>32</td>
<td>34</td>
</tr>
<tr>
<td>Program FY cr hrs, Off-Campus NURS</td>
<td>54</td>
<td>117</td>
<td>213</td>
<td>273</td>
<td>315</td>
<td>339</td>
</tr>
<tr>
<td>Program FY cr hrs, Off-Campus OTHER (BADM, HSAD)</td>
<td>18</td>
<td>39</td>
<td>51</td>
<td>63</td>
<td>69</td>
<td>69</td>
</tr>
<tr>
<td>Program FY cr hrs, Off-Campus TOTAL</td>
<td>72</td>
<td>156</td>
<td>264</td>
<td>336</td>
<td>384</td>
<td>408</td>
</tr>
</tbody>
</table>

- Faculty, Regular FTE
  - See p. 3
  - [1.00] 1.70 1.70 1.70 1.70 1.70

- Faculty Salary & Benefits, average
  - See p. 3
  - $96,499 $96,499 $96,499 $96,499 $96,499 $96,499

- Faculty, Overload/Inload/Adjunct - number of courses
  - See p. 3
  - 1 2 2 2 2 2

- Faculty, Overload/Inload/Adjunct - number of course credits
  - See p. 3
  - 3 6 6 6 6 6

- Faculty, Overload/Inload/Adjunct - per 3 Cr Hr course
  - See p. 3
  - $8,876 $8,876 $8,876 $8,876 $8,876 $8,876

- Other FTE (see next page) - Grad Prgm Dir/Grad Fac Advisor
  - See p. 3
  - [0.25] 0.25 0.25 0.25 0.25 0.25

- Other Salary & Benefits, average
  - See p. 3
  - $120,214 $120,214 $120,214 $120,214 $120,214 $120,214

## 2. Budget

### Salary & Benefits

- Faculty, Regular (NURS)
  - $96,499 $164,048 $164,048 $164,048 $164,048 $164,048

- Faculty, Overload/Inload/Adjunct (rate x number of courses)
  - $8,876 $17,752 $17,752 $17,752 $17,752 $17,752

- Other FTE-Grad Prgm Dir/Grad Fac Advisor
  - $30,054 $30,054 $30,054 $30,054 $30,054 $30,054

<table>
<thead>
<tr>
<th></th>
<th>FY21</th>
<th>FY22</th>
<th>FY23</th>
<th>FY24</th>
<th>FY25</th>
<th>FY26</th>
</tr>
</thead>
<tbody>
<tr>
<td>S&amp;B Subtotal</td>
<td>$135,429</td>
<td>$211,854</td>
<td>$211,854</td>
<td>$211,854</td>
<td>$211,854</td>
<td>$211,854</td>
</tr>
</tbody>
</table>

### Operating Expenses

- Travel
  - $1,500 $2,550 $2,550 $2,550 $2,550 $2,550

- Contractual Services
  - $20,500 $13,250 $1,250 $750 $500 $300

- Supplies & materials
  - $300 $650 $1,100 $1,400 $1,600 $1,700

- Capital equipment
  - $1,500 $1,050 $0 $0 $0 $0

<table>
<thead>
<tr>
<th></th>
<th>FY21</th>
<th>FY22</th>
<th>FY23</th>
<th>FY24</th>
<th>FY25</th>
<th>FY26</th>
</tr>
</thead>
<tbody>
<tr>
<td>OE Subtotal</td>
<td>$23,800</td>
<td>$17,500</td>
<td>$4,900</td>
<td>$4,700</td>
<td>$4,650</td>
<td>$4,400</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>$159,229</strong></td>
<td><strong>$229,354</strong></td>
<td><strong>$216,754</strong></td>
<td><strong>$216,554</strong></td>
<td><strong>$216,504</strong></td>
<td><strong>$216,154</strong></td>
</tr>
</tbody>
</table>

## 3. Program Resources
<table>
<thead>
<tr>
<th></th>
<th>GR</th>
<th>$267.11</th>
<th>$267.11</th>
<th>$267.11</th>
<th>$267.11</th>
<th>$267.11</th>
</tr>
</thead>
<tbody>
<tr>
<td>Allied Health Off Campus (NURS Prefix) tuition/hr, HEFF net</td>
<td>Tuition revenue hrs x amt</td>
<td>$14,424</td>
<td>$31,252</td>
<td>$56,895</td>
<td>$72,922</td>
<td>$84,141</td>
</tr>
<tr>
<td>Other Off-Campus (BADM, HSAD Prefix) tuition/hr, HEFF net</td>
<td>Tuition revenue hrs x amt</td>
<td>$261.16</td>
<td>$261.16</td>
<td>$261.16</td>
<td>$261.16</td>
<td>$261.16</td>
</tr>
<tr>
<td>Program fee, per cr hr (if any) - NURS Prefix Only</td>
<td>$103.00</td>
<td>$5,562</td>
<td>$12,051</td>
<td>$21,939</td>
<td>$28,119</td>
<td>$32,445</td>
</tr>
<tr>
<td>Delivery fee, per cr hr (if any) - NURS Prefix Only</td>
<td>$45.80</td>
<td>$2,473</td>
<td>$5,359</td>
<td>$9,755</td>
<td>$12,503</td>
<td>$14,427</td>
</tr>
<tr>
<td>University redirections</td>
<td>$62,500</td>
<td>$62,500</td>
<td>$62,500</td>
<td>$62,500</td>
<td>$62,500</td>
<td>$62,500</td>
</tr>
<tr>
<td>Community/Employers</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>Grants/Donations/Other</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td><strong>Total Resources</strong></td>
<td><strong>$89,660</strong></td>
<td><strong>$121,347</strong></td>
<td><strong>$164,409</strong></td>
<td><strong>$192,498</strong></td>
<td><strong>$211,533</strong></td>
<td><strong>$221,515</strong></td>
</tr>
</tbody>
</table>

### Resources Over (Under) Budget

Provide a summary of the program costs and resources in the new program proposal.

<table>
<thead>
<tr>
<th>NURS</th>
<th>OTHER</th>
<th>(NURS)</th>
<th>(OTHER)</th>
<th>(OTHER)</th>
<th>(OTHER)</th>
<th><strong>Total</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Faculty Teach FTE</td>
<td>$69,568</td>
<td>$108,006</td>
<td>$52,345</td>
<td>$24,056</td>
<td>$4,971</td>
<td>$5,161</td>
</tr>
<tr>
<td>Faculty Non-Nurs</td>
<td>$75,785</td>
<td>$8,215</td>
<td>$99,500</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Adm/AdvFTE</td>
<td>$10,643</td>
<td>$661</td>
<td>$10,643</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Average S&amp;B</strong></td>
<td>$96,499</td>
<td>$8,876</td>
<td>$120,214</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Explain faculty used to develop the average salary & fiscal year salaries used. Enter amount above.

*The FY20 salaries of 11 doctorally prepared faculty the Nursing department were averaged.*

Explain overload/inload/adjunct faculty costs used in table:

*8% of the average faculty salary for HIMS, BADM, HSAD faculty was used to determine the overload/inload/adjunct rate per 3 credits.*
Explain other [for example, CSA or exempt] salary & benefits. Enter amount above.

\[\text{The FY20 salaries of the current Nursing Assoc Chair Academics and Director Student Advising and Serv were averaged to estimate costs of Graduate Program Directorship and Graduate Student Advising.}\]

Summarize the operating expenses shown in the table:

- **Travel**: 1500 per faculty FTE for faculty development.
- **Contractual Services**: $3000 per new course for course development. $13,000 over six years in marketing costs, heavy front end investment at program inception.
- **Supplies & Materials**: $50 per year per student for supplies and materials.
- **Capital Assets**: $1500 per Faculty FTE for technology and office equipment.

Summarize resources available to support the new program (redirection, donations, grants, etc).

- **University Redirect**: USD Nursing intends to redirect net savings from Pierre and Watertown closures.

*State-support*: Change cell on page 1 to use the UG or GR net amount.

<table>
<thead>
<tr>
<th>Off-Campus Tuition, HEFF &amp; Net</th>
<th>FY20 Rate</th>
<th>HEFF</th>
<th>USD Retained</th>
<th>Net Program Retained</th>
</tr>
</thead>
<tbody>
<tr>
<td>Graduate - Allied Health Nursing</td>
<td>$336.80</td>
<td>$38.73</td>
<td>$30.95</td>
<td>$267.11</td>
</tr>
<tr>
<td>Graduate - Other (BADM, HSAD)</td>
<td>$465.80</td>
<td>$53.57</td>
<td>$151.07</td>
<td>$261.16</td>
</tr>
</tbody>
</table>

**Variable Benefits Rates**

- **University FY20**
- **USD 14.04%**

To point to your net
### 1. Assumptions

**Headcount & hours from proposal**

<table>
<thead>
<tr>
<th></th>
<th>1st FY21</th>
<th>2nd FY22</th>
<th>3rd FY23</th>
<th>4th FY24</th>
<th>5th FY25</th>
<th>6th FY26</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fall headcount (see table in proposal)</td>
<td>12</td>
<td>26</td>
<td>44</td>
<td>56</td>
<td>64</td>
<td>68</td>
</tr>
<tr>
<td>Program FY cr hrs, Off-Campus NURS</td>
<td>108</td>
<td>234</td>
<td>396</td>
<td>504</td>
<td>576</td>
<td>612</td>
</tr>
<tr>
<td>Program FY cr hrs, Off-Campus OTHER (BADM, HIMS, HSAD)</td>
<td>36</td>
<td>78</td>
<td>117</td>
<td>147</td>
<td>165</td>
<td>171</td>
</tr>
<tr>
<td>Program FY cr hrs, Off-Campus TOTAL</td>
<td>144</td>
<td>312</td>
<td>513</td>
<td>651</td>
<td>741</td>
<td>783</td>
</tr>
</tbody>
</table>

| Faculty, Regular FTE | See p. 3 | 2.00 | 3.00 | 3.00 | 3.00 | 3.00 |
| Faculty Salary & Benefits, average | See p. 3 | $96,499 | $96,499 | $96,499 | $96,499 | $96,499 |

| Faculty, Overload/Inload/Adjunct - number of courses | See p. 3 | 2 | 4 | 5 | 5 | 5 | 5 |
| Faculty, Overload/Inload/Adjunct - number of course credits | See p. 3 | 6 | 12 | 15 | 15 | 15 | 15 |
| Faculty, Overload/Inload/Adjunct - per 3 Cr Hr course | See p. 3 | $8,876 | $8,876 | $8,876 | $8,876 | $8,876 | $8,876 |

| Other FTE (see next page) - Grad Prgm Dir/Grad Fac Advisor | See p. 3 | 0.50 | 0.50 | 0.50 | 0.50 | 0.50 | 0.50 |
| Other Salary & Benefits, average | See p. 3 | $120,214 | $120,214 | $120,214 | $120,214 | $120,214 | $120,214 |

### 2. Budget

**Salary & Benefits**

- Faculty, Regular (NURS) $192,998 $289,497 $289,497 $289,497 $289,497 $289,497
- Faculty, Overload/Inload/Adjunct (rate x number of courses) $17,752 $35,504 $44,380 $44,380 $44,380 $44,380
- Other FTE-Grad Prgm Dir/Grad Fac Advisor $60,107 $60,107 $60,107 $60,107 $60,107 $60,107
- **S&B Subtotal** $270,857 $385,108 $393,984 $393,984 $393,984 $393,984

**Operating Expenses**

- Travel $3,000 $4,500 $4,500 $4,500 $4,500 $4,500
- Contractual Services $40,625 $23,500 $2,500 $1,500 $1,000 $500
- Supplies & materials $600 $1,300 $2,200 $2,800 $3,200 $3,300
- Capital equipment $3,000 $1,500 $0 $0 $0 $0
- **OE Subtotal** $47,225 $30,800 $9,200 $8,800 $8,700 $8,400

| Total | $318,082 | $415,908 | $403,184 | $402,784 | $402,684 | $402,384 |

### 3. Program Resources

- Allied Health Off Campus (NURS Prefix) tuition/hr, HEFF net GR $267.11 $267.11 $267.11 $267.11 $267.11 $267.11
### Tuition Revenue

<table>
<thead>
<tr>
<th></th>
<th>hrs x amt</th>
<th>$28,848</th>
<th>$62,505</th>
<th>$105,777</th>
<th>$134,625</th>
<th>$153,858</th>
<th>$163,474</th>
</tr>
</thead>
<tbody>
<tr>
<td>Other Off-Campus (BADM, HSAD Prefix) tuition/hr, HEFF net</td>
<td>GR</td>
<td>$261.16</td>
<td>$261.16</td>
<td>$261.16</td>
<td>$261.16</td>
<td>$261.16</td>
<td>$261.16</td>
</tr>
<tr>
<td>Tuition revenue</td>
<td>hrs x amt</td>
<td>$9,402</td>
<td>$20,371</td>
<td>$30,556</td>
<td>$38,391</td>
<td>$43,092</td>
<td>$44,659</td>
</tr>
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</table>

### Program fee, per cr hr (if any) - NURS Prefix Only

<table>
<thead>
<tr>
<th></th>
<th>$103.00</th>
<th>$11,124</th>
<th>$24,102</th>
<th>$40,788</th>
<th>$51,912</th>
<th>$59,328</th>
<th>$63,036</th>
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</table>

### Delivery fee, per cr hr (if any) - NURS Prefix Only

<table>
<thead>
<tr>
<th></th>
<th>$45.80</th>
<th>$4,946</th>
<th>$10,717</th>
<th>$18,137</th>
<th>$23,083</th>
<th>$26,381</th>
<th>$28,030</th>
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</thead>
</table>

### University redirections

<table>
<thead>
<tr>
<th></th>
<th>$125,000</th>
<th>$125,000</th>
<th>$125,000</th>
<th>$125,000</th>
<th>$125,000</th>
<th>$125,000</th>
<th>$125,000</th>
</tr>
</thead>
</table>

### Community/Employers

<table>
<thead>
<tr>
<th></th>
<th>$0</th>
<th>$0</th>
<th>$0</th>
<th>$0</th>
<th>$0</th>
<th>$0</th>
<th>$0</th>
</tr>
</thead>
</table>

### Grants/Donations/Other

<table>
<thead>
<tr>
<th></th>
<th>$0</th>
<th>$0</th>
<th>$0</th>
<th>$0</th>
<th>$0</th>
<th>$0</th>
<th>$0</th>
</tr>
</thead>
</table>

### Total Resources

<table>
<thead>
<tr>
<th></th>
<th>$179,321</th>
<th>$242,695</th>
<th>$320,258</th>
<th>$373,012</th>
<th>$407,659</th>
<th>$424,198</th>
</tr>
</thead>
</table>

#### Resources Over (Under) Budget

Provide a summary of the program costs and resources in the new program proposal.

<table>
<thead>
<tr>
<th></th>
<th>$(138,761)</th>
<th>$(173,213)</th>
<th>$(82,926)</th>
<th>$(29,772)</th>
<th>$4,975</th>
<th>$21,814</th>
</tr>
</thead>
</table>

### Estimated Salary & Benefits per FTE

<table>
<thead>
<tr>
<th></th>
<th>Teach FTE</th>
<th>Non-Nurs</th>
<th>Adm/AdvFTE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Estimated salary (average) - explain below</td>
<td>$75,785</td>
<td>$8,215</td>
<td>$99,500</td>
</tr>
<tr>
<td>University's variable benefits rate (see below)</td>
<td>0.1404</td>
<td>0.0804</td>
<td>0.1404</td>
</tr>
<tr>
<td>Variable benefits</td>
<td>$10,643</td>
<td>$661</td>
<td>$10,643</td>
</tr>
<tr>
<td>Health insurance/FTE, FY20</td>
<td>$10,071</td>
<td>$0</td>
<td>$10,071</td>
</tr>
<tr>
<td><strong>Average S&amp;B</strong></td>
<td>$96,499</td>
<td>$8,876</td>
<td>$120,214</td>
</tr>
</tbody>
</table>

Explain faculty used to develop the average salary & fiscal year salaries used. Enter amount above.

*The FY20 salaries of 11 doctorally prepared faculty the Nursing department were averaged.*

Explain overload/inload/adjunct faculty costs used in table:

*8% of the average faculty salary for HIMS, BADM, HSAD faculty was used to determine the overload/inload/adjunct rate per 3 credits.*
Explain other [for example, CSA or exempt] salary & benefits. Enter amount above.

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Summarize resources available to support the new program (redirection, donations, grants, etc).

*University Redirect: USD Nursing intends to redirect net savings from Pierre and Watertown closures.*

*State-support: Change cell on page 1 to use the UG or GR net amount.*

<table>
<thead>
<tr>
<th>Off-Campus Tuition, HEFF &amp; Net</th>
<th>FY20 Rate</th>
<th>HEFF</th>
<th>USD Retained</th>
<th>Net Program Retained</th>
</tr>
</thead>
<tbody>
<tr>
<td>Graduate - Allied Health Nursing</td>
<td>$336.80</td>
<td>$38.73</td>
<td>$30.95</td>
<td>$267.11</td>
</tr>
<tr>
<td>Graduate - Other (BADM, HSAD)</td>
<td>$465.80</td>
<td>$53.57</td>
<td>$151.07</td>
<td>$261.16</td>
</tr>
</tbody>
</table>

*Variable Benefits Rates*  

| University FY20 | USD | 14.04% |

*to point to your net*
SOUTH DAKOTA BOARD OF REGENTS
ACADEMIC AFFAIRS FORMS
New Graduate Degree Program

<table>
<thead>
<tr>
<th>UNIVERSITY:</th>
<th>University of South Dakota</th>
</tr>
</thead>
<tbody>
<tr>
<td>PROPOSED GRADUATE PROGRAM:</td>
<td>Master of Science in Nursing with specialization in Nursing Informatics and e-Health, M.S.N.</td>
</tr>
<tr>
<td>EXISTING OR NEW MAJOR(S):</td>
<td>New</td>
</tr>
<tr>
<td>DEGREE:</td>
<td>Master of Science in Nursing</td>
</tr>
<tr>
<td>EXISTING OR NEW DEGREE(S):</td>
<td>New degree</td>
</tr>
<tr>
<td>INTENDED DATE OF IMPLEMENTATION:</td>
<td>Fall 2021</td>
</tr>
<tr>
<td>PROPOSED CIP CODE:</td>
<td>51.3802</td>
</tr>
<tr>
<td>SPECIALIZATIONS: 1</td>
<td>Nursing Informatics and e-Health</td>
</tr>
<tr>
<td>IS A SPECIALIZATION REQUIRED (Y/N):</td>
<td>Yes</td>
</tr>
<tr>
<td>DATE OF INTENT TO PLAN APPROVAL:</td>
<td>Click here to enter a date.</td>
</tr>
<tr>
<td>UNIVERSITY DEPARTMENT:</td>
<td>Department of Nursing</td>
</tr>
<tr>
<td>UNIVERSITY DIVISION:</td>
<td>School of Health Sciences</td>
</tr>
</tbody>
</table>

University Approval

To the Board of Regents and the Executive Director: I certify that I have read this proposal, that I believe it to be accurate, and that it has been evaluated and approved as provided by university policy.

[Signature]
President of the University
Date

1. What is the nature/purpose of the proposed program?

The University of South Dakota seeks to develop a Master of Science in Nursing (MSN) with specialization in Nursing Informatics and e-Health. The new Master of Science in Nursing program builds on the existing Bachelor of Science in Nursing (B.S.N.) and expands nursing education at USD to meet the growing market demand for graduates with the ability to provide nursing care at an advanced level. The proposed program will be self-sustaining. The core of the proposed program are nursing courses that provide nursing graduates with a fuller understanding of the discipline of nursing in order to engage in higher level practice and leadership (Association of Colleges of Nursing (AACN) Master’s Essentials, p. 4)2 in diverse areas of any health care setting.

The purpose of the new program is to advance the following System Strategic Goals (Policy 1:21) and State Initiatives:

- Expand graduate education and increasing the number of graduate programs in the state
- Increase access to continuing education opportunities that South Dakotans need to upgrade their credentials while remaining in the workforce

1 If the proposed new program includes specific specializations within it, complete and submit a New Specialization Form for each proposed specialization and attach it to this form. Since specializations appear on transcripts, they require Board of Regents approval.

2 [https://www.aacnnursing.org/Portals/42/Publications/DNPESSENTIALS.pdf](https://www.aacnnursing.org/Portals/42/Publications/DNPESSENTIALS.pdf)

Program Forms: New Graduate Degree Program Form (Last Revised 05/2017)
South Dakota will be a recognized national leader in the use of information technology to enhance its educational, economic, social scientific and political development.

Enhance engagement of student in the translation of research and new knowledge. Robust projects that accompany graduate programs create new opportunities for students to become skilled in the translation of science.

Provide technological innovation and skilled labor that support healthcare industries in the state.

Collaboration between the School of Health Sciences (SHS), Department of Nursing, and the Beacom School of Business at the University of South Dakota and will also include the College of Business and Information Technology and the Beacom College of Computer and Cyber Sciences at Dakota State University (DSU). The collaboration will leverage resources and enable cost-savings in program delivery through sharing of courses via distance delivery. Leveraging resources and creating a diverse pool of faculty and student expertise will also enhance program competitiveness for research funding.

2. How does the proposed program relate to the university’s mission and strategic plan, and to the current Board of Regents Strategic Plan 2014-2020?

The proposed program furthers the mandate and strategic plan of the Board of Regents and the University of South Dakota by providing new high quality, efficient, flexible, equitable, affordable, and accessible graduate education to the residents of South Dakota. The proposal aligns with the Board’s strategic plan 2014-2020 by growing the number of graduate degrees and expanding the research and economic development opportunities in the state. The new program enhances and enriches the educational mission at the University of South Dakota and contributes to the overall educational attainment, research and productivity in the state. The program is aligned with the statutory mission of the University of South Dakota, as provided in SDCL 13-57-1:

“The legislature established The University of South Dakota as the liberal arts university to meet the needs of the State and region by providing undergraduate and graduate programs in the liberal arts and sciences, and professional education in business, education, fine arts, law, and medicine, and other courses or programs as the Board of Regents may determine. (SDCL 13-57-1)”

The Board implemented SDCL 13-57-1 by authorizing undergraduate and graduate programs in the liberal arts and sciences and in professional education and by requiring the University to promote excellence in teaching and learning, to support research, scholarly and creative activities, and to provide service to the State of South Dakota, the region, and beyond. The University of South Dakota is the comprehensive university of the South Dakota System of Higher Education.
3. Describe the workforce demand for graduates of the program, including national demand and demand within South Dakota. Provide data and examples; data sources may include but are not limited to the South Dakota Department of Labor, the US Bureau of Labor Statistics, Regental system dashboards, etc.

According to the South Dakota Department of Health 2017 Workforce Supply and Employment Characteristics Report 55% of the South Dakota RNs are ≥41 years old⁴. Therefore, with the aging RN population, self-sufficiency and sustainability of the nursing workforce becomes a priority. The South Dakota Board of Nursing (SDBON) report went further to indicate that 59.8% of South Dakota’s RNs had educational preparation as a BS degree or higher. This is below the national average of 65.4%. While South Dakota projections of RN needs include 417 RNs/year, the SDBON report clearly documents a critical need for graduating additional nurses with an advanced educational preparation.

AACN identified the need for developing nurses who have advanced preparation in informatics with the beginning level for specialty education in nursing informatics being recognized as a master’s prepared degree level. In addition to preparation with outcome competencies, the graduate would receive in-depth content and expertise in informatics, healthcare technologies, and analytics.

The range and use of telehealth services have expanded over the past decades, along with the role of technology in improving and coordinating care. With the recent COVID-19 pandemic emergence, the importance of the use of e-health methods has increased substantially. As the nation moves to accelerate the adoption of telehealth, MSN prepared nurses’ with expertise in informatics will be instrumental to support the health of citizens, support the ability to access safe care in rural and urban settings, and coordinate and manage care through virtual and electronic means.

Therefore, the need to increase the number of graduating nurses is coupled with the need to graduate nurses who are proficient in the science of how to use data, information systems, healthcare technology driven interventions to research, education and direct patient care, and knowledge to improve health and the delivery of health care services (i.e. nursing informatics). Furthermore, graduate nurses must be able to analyze consumers' needs for information; study and implement methods of making information accessible to consumers; and design and implement models of care that integrate consumers' preferences into medical information systems (i.e. consumer informatics).

We anticipate increased demand for the proposed program graduates with the rapid growth of telehealth and telemedicine services in the state, especially with the Centers for Medicare and Medicaid Services Rural Health Strategy and the Telehealth Aims initiative. Governor Noem has set a priority to expand broadband access to increase availability of telehealth services and critical expertise to remote/rural areas in the state. The need for job offerings for masters-prepared graduates with health information technology and eHealth expertise is expected to grow at a faster than expected rate according to a 2017 study performed by the HR Hanover Research Group for the AACN to assess the market for graduate degrees in nursing in light of the broader trends in nursing education and nursing workforce development⁵.

In offering this degree, USD SHS is looking to the future and anticipating the healthcare needs for which the new generation of nurses must be prepared. The complexity of rural healthcare

⁵ Hanover Research. Trends in Graduate Nursing Programs. March 2017, Report commissioned for AACN, Arlington, VA.
environments and the promise that healthcare technologies hold in addressing rural healthcare challenges make expanded nursing knowledge in healthcare technologies, informatics and analytics a necessity.

4. **How will the proposed program benefit students?**

South Dakota State University is the only public university in the state that offer graduate nursing education. Students looking for educational options that are not offered at South Dakota State, seek such opportunities at for-profit distant education programs. According to the nursing leadership at Sanford and Avera (Personal communication February 28, 2019), there are currently over 200 registered nurses who are employed by both institutions and who are enrolled in graduate programs at online out-of-state for-profit academic institutions. This excludes RN working at Regional Health, institutions of higher education, and all RNs employed in other healthcare settings. Accounting for all the RNs seeking higher education in the state makes the applicant pool much larger. By losing such a large number of prospective students to-out-of-state for-profit programs, South Dakota is clearly losing significant economic activity. Nursing advisors at USD receive regular inquiry about graduate programs from prospective students and registered nurses who would like to return to their alma mater to complete their graduate studies.

Furthermore, the proposed MSN program will allow students to build on their knowledge and personal experiences and competencies to develop a sophisticated understanding and ability to meet the complex needs of current and future healthcare systems and contexts. Students will be able to continue employment while enrolled part-time or full-time in the program. The program is flexible and draws on the university and faculty strengths including distance delivery and use of technologies and interprofessional approaches.

5. **Program Proposal Rationale:**

   A. **If a new degree is proposed, what is the rationale?**

   Nationally and globally, the MSN is well established and recognized credential. The MSN degree is not required for basic nursing practice or licensure, but it is highly valued and recognized by employers, healthcare and government. The MSN credential is required for teaching in a baccalaureate program and for most administrative positions. Therefore, nurses planning to advance their careers are likely to require an MSN or equivalent.

   B. **What is the rationale for the curriculum?**

   The curriculum evolved from discussions amongst experts at USD Nursing Department, the Beacom Business School and DSU. In addition, discussions with the Nursing Program and the nursing leadership at both Sanford and Avera took place. Meetings will occur on regular basis between the nursing leadership at both institutions and the nursing leadership to bridge education to practice and leverage expertise.

   The AACN Essentials of Master’s Education in Nursing will provide the foundational curricular requirements for the proposed MSN curriculum (Appendix C) and include the following:

---

6 “New Degree” means new to the university. Thus if a campus has degree granting authority for a Ph.D. program and the request is for a new Ph.D. program, a new degree is not proposed.

*Program Forms: New Graduate Degree Program Form (Last Revised 05/2017)*
1. Master’s Graduate Nursing Core: foundational curriculum content deemed essential for all students who pursue a master’s degree in nursing regardless of the functional focus.

2. Functional Area Content: those clinical and didactic learning experiences identified and defined by the professional nursing organizations and certification bodies for specific nursing roles or functions. Interprofessional offering of such courses broadens the perspectives of the nurse graduate and enhances the ability to engage in interprofessional practice.

Through foundational and core courses and through functional interprofessional/interdisciplinary courses, the program builds on undergraduate nursing knowledge and interprofessional capacity. Competencies, content, and clinical experiences needed for specific roles in specialty areas are delineated by national specialty nursing organizations. The proposed MSN curriculum will be built using current national standards for a specialization in Nursing Informatics and e-Health. Graduates of the program will be able to function at an advanced level and become leaders in nursing within the interprofessional team.

C. Demonstrate/provide evidence that the curriculum is consistent with current national standards.

The proposed MSN program with specialization in health informatics consists of 33 credit hours, comparable to the credits by other MSN programs offered in South Dakota and nationally.

The curriculum will be built around the AACN Essentials of Master’s Education in Nursing and Nursing Informatics scope and standards and integrating the following:

- AACN Essentials of Master’s Education in Nursing
  [https://www.aacnnursing.org/Education-Resources/AACN-Essentials](https://www.aacnnursing.org/Education-Resources/AACN-Essentials)
- American Nurses Credentialing Center Informatics Nursing Blueprint
- Nurse Informaticists competencies
  [https://www.himss.org/professionaldevelopment/tiger-initiative](https://www.himss.org/professionaldevelopment/tiger-initiative)
- Interprofessional Clinical Prevention and Population Health Education Competencies
- Healthcare Leadership Alliance Competency Directors:
  [http://www.aone.org/resources/qla-directory.shtml](http://www.aone.org/resources/qla-directory.shtml)

D. Summary of the degree program (complete the following tables):

<table>
<thead>
<tr>
<th>Master of Science in Nursing with specialization in Nursing Informatics and e-Health, M.S.N.</th>
<th>Credit Hours</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Required courses, all students</td>
<td>33</td>
<td>100%</td>
</tr>
<tr>
<td>Required option or specialization, if any</td>
<td>0</td>
<td>0%</td>
</tr>
<tr>
<td>Electives</td>
<td>0</td>
<td>0%</td>
</tr>
<tr>
<td><strong>Total Required for the Degree Total</strong></td>
<td><strong>33</strong></td>
<td><strong>100%</strong></td>
</tr>
</tbody>
</table>
### Required Courses

<table>
<thead>
<tr>
<th>Prefix</th>
<th>Number</th>
<th>Course Title</th>
<th>Credit Hours</th>
<th>New (yes, no)</th>
</tr>
</thead>
<tbody>
<tr>
<td>NURS</td>
<td>511</td>
<td>Evidence Based Practice: A foundation for nurses in advanced practice roles.</td>
<td>3</td>
<td>Yes</td>
</tr>
<tr>
<td>NURS</td>
<td>513</td>
<td>Contemporary Nursing Concepts for Advanced Practice Nursing</td>
<td>3</td>
<td>Yes</td>
</tr>
<tr>
<td>NURS</td>
<td>514</td>
<td>Informatics as a Foundation to Nursing &amp; Nursing Practice</td>
<td>3</td>
<td>Yes</td>
</tr>
<tr>
<td>NURS</td>
<td>535</td>
<td>Leadership in Informatics and Technology</td>
<td>3</td>
<td>Yes</td>
</tr>
<tr>
<td>NURS</td>
<td>740</td>
<td>Population Health Nursing Interventions and Healthcare Technologies</td>
<td>3</td>
<td>No</td>
</tr>
<tr>
<td>NURS</td>
<td>767</td>
<td>Quantitative Analysis of Workflow to Improve Patient Outcomes</td>
<td>3</td>
<td>Yes</td>
</tr>
<tr>
<td>NURS</td>
<td>688</td>
<td>Healthcare Business for the Digital Economy</td>
<td>3</td>
<td>Yes</td>
</tr>
<tr>
<td>HSAD</td>
<td>760</td>
<td>Health Services Informatics</td>
<td>3</td>
<td>No</td>
</tr>
<tr>
<td>NURS</td>
<td>788</td>
<td>Master’s Problem/Project</td>
<td>3</td>
<td>Yes</td>
</tr>
<tr>
<td>HIMS*</td>
<td>742*</td>
<td>Health Informatics, Information Systems and Health Information Technology Taught by DSU [Prerequisite: HIMS 701 will not be required for Nursing majors at USD. See Appendix D.].</td>
<td>3</td>
<td>No</td>
</tr>
<tr>
<td>HIMS*</td>
<td>743*</td>
<td>Informatics a Foundation to Clinical Practice</td>
<td>3</td>
<td>Yes</td>
</tr>
</tbody>
</table>

Subtotal: 33

*courses delivered at DSU 6 credits total (18%), please see Appendix D for intent of offering

### Elective Courses: List courses available as electives in the program. Indicate any proposed new courses added specifically for the program.

<table>
<thead>
<tr>
<th>Prefix</th>
<th>Number</th>
<th>Course Title</th>
<th>Credit Hours</th>
<th>New (yes, no)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

6. Student Outcomes and Demonstration of Individual Achievement

A. What specific knowledge and competencies, including technology competencies, will all students demonstrate before graduation? Complete Appendix A – Outcomes using the system form.

Graduate of the program will have demonstrated the ability to:

- Develop knowledge and skill in informatics and health care communication technologies as a foundation to nursing practice.
- Develop knowledge and skills in tools, method and theories of informatics and healthcare technologies to support and inform practice improvement activities, change processes, and system reliability and workflow.
- Intervene at System and population level through policy development to promote safety, cost effectiveness and ethical principles and standards for use of information and health technology.
• Apply evidence-based practice to informatics solutions in population health and clinical and system improvement.
• Integrate informatics and healthcare technology to organizational and system leadership principles.
• Apply broad organizational, interprofessional, client-centered and culturally appropriate healthcare technologies and informatics in planning, delivery, management and evaluation of evidence-based clinical prevention and population healthcare services to individuals, families, and aggregates/identified populations.
• Demonstrate knowledge and skill in system design life cycle, system usability and human interaction and healthcare data management, analysis, application and transformation.
• Demonstrate knowledge and skills in applying rules, regulations and requirements of information technology

Please consult Appendix B for detailed outcomes mapped to coursework

B. Are national instruments (i.e., examinations) available to measure individual student achievement in this field? If so, list them.

Student can obtain The Informatics Nursing Certification through the American Nurses Credentialing Center [https://www.nursingworld.org/our-certifications/informatics-nurse/](https://www.nursingworld.org/our-certifications/informatics-nurse/)

C. How will individual students demonstrate mastery? Describe the specific examinations and/or processes used, including any external measures. What are the consequences for students who do not demonstrate mastery?

The ANCC Informatics Nursing board certification examination is a competency-based examination that provides a valid and reliable assessment of the entry-level clinical knowledge and skills of registered nurses in the informatics specialty after initial RN licensure. Once a student completes eligibility requirements to take the certification examination and successfully pass the exam, the student is awarded the credential: Registered Nurse-Board Certified (RN-BC). This credential is valid for 5 years. Graduates can continue to use this credential by maintaining their license to practice and meeting the renewal requirements in place at the time of their certification. The National Commission for Certifying Agencies and Accreditation Board for Specialty Nursing Certification accredits this ANCC certification. The need to obtain a certificate depends on the type, scope and capacity of the work that the program graduates choose. In addition, students demonstrate mastery by successful completion of the program and completion of a quality improvement project.

7. What instructional approaches and technologies will instructors use to teach courses in the program?

The program will be delivered by distant technology and using Desire to Learn (D2L) course management system. Instructional approaches may include lectures, discussion boards, blogs, cooperative and project based-learning, guided research and quality improvement projects.

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7 What national examination, externally evaluated portfolio or student activity, etc., will verify that individuals have attained a high level of competence and identify those who need additional work?
8. Did the University engage any developmental consultants to assist with the development of the curriculum? Did the University consult any professional or accrediting associations during the development of the curriculum? What were the contributions of the consultants and associations to the development of curriculum?

Nursing faculty worked closely with the experts in the Beacom School of Business, Dakota State University Health Information Technology, University of Minnesota and the nursing leadership at both Sanford and Avera to identify needs and outline the curriculum. Informatics experts from the University of Arizona and the University of Minnesota, developers of two of the first programs of nursing informatics in the country provided expertise and lessons learned via web conferences and emails. The University has committed to hiring an outside consultant to assist faculty in developing the proposed curriculum.

9. Are students enrolling in the program expected to be new to the university or redirected from other existing programs at the university? Complete the table below and explain the methodology used in developing the estimates?

Students are new to the university, estimates are based on historic data from other graduate programs in health sciences and number of graduate nursing student surveys indicating the numbers of nursing students who expressed an intent to pursue a graduate degree within three to five years after graduation.

<table>
<thead>
<tr>
<th>Estimates</th>
<th>1st</th>
<th>2nd</th>
<th>3rd</th>
<th>4th</th>
<th>5th</th>
<th>6th</th>
</tr>
</thead>
<tbody>
<tr>
<td>Headcount &amp; hours from proposal</td>
<td>FY21</td>
<td>FY22</td>
<td>FY23</td>
<td>FY24</td>
<td>FY25</td>
<td>FY26</td>
</tr>
<tr>
<td>Fall headcount (see table in proposal)</td>
<td>6</td>
<td>13</td>
<td>22</td>
<td>28</td>
<td>32</td>
<td>34</td>
</tr>
<tr>
<td>Program FY cr hrs, Off-Campus NURS</td>
<td>54</td>
<td>117</td>
<td>183</td>
<td>231</td>
<td>261</td>
<td>273</td>
</tr>
<tr>
<td>Program FY cr hrs, Off-Campus OTHER (HIMS, HSAD)</td>
<td>18</td>
<td>39</td>
<td>66</td>
<td>84</td>
<td>96</td>
<td>102</td>
</tr>
<tr>
<td>Program FY cr hrs, Off-Campus TOTAL</td>
<td>72</td>
<td>156</td>
<td>249</td>
<td>315</td>
<td>357</td>
<td>375</td>
</tr>
<tr>
<td>Number of Graduates</td>
<td>6</td>
<td>8</td>
<td>10</td>
<td>12</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*Do not include current fiscal year.
**This is the total number of credit hours generated by students in the program in the required or elective program courses. Use the same numbers in Appendix B – Budget.

10. Is program accreditation available? If so, identify the accrediting organization and explain whether accreditation is required or optional, the resources required, and the University’s plans concerning the accreditation of this program.

The program will seek accreditation from the Commission on Collegiate Nursing Education (CCNE) and approval of the South Dakota Board of Nursing. There will be incremental burden to assess the new courses with a Nursing prefix (foundational and core courses).

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8 Developmental consultants are experts in the discipline hired by the university to assist with the development of a new program (content, courses, experiences, etc.). Universities are encouraged to discuss the selection of developmental consultants with Board staff.

Program Forms: New Graduate Degree Program Form (Last Revised 05/2017)
11. Does the University request any exceptions to any Board policy for this program? Explain any requests for exceptions to Board Policy.
None

12. Delivery Location

A. Complete the following charts to indicate if the university seeks authorization to deliver the entire program on campus, at any off campus location (e.g., UC Sioux Falls, Capital University Center, Black Hills State University-Rapid City, etc.) or deliver the entire program through distance technology (e.g., as an online program)?

<table>
<thead>
<tr>
<th>On campus</th>
<th>Intended Start Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes/No</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Off campus</th>
<th>Intended Start Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes/No</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Distance Delivery (online/other distance delivery methods)</th>
<th>Yes/No</th>
<th>If Yes, identify delivery methods</th>
<th>Intended Start Date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Yes</td>
<td>015 – Internet asynchronous</td>
<td>Fall 2021</td>
</tr>
</tbody>
</table>

B. Complete the following chart to indicate if the university seeks authorization to deliver more than 50% but less than 100% of the certificate through distance learning (e.g., as an online program)?

<table>
<thead>
<tr>
<th>Distance Delivery (online/other distance delivery methods)</th>
<th>Yes/No</th>
<th>If Yes, identify delivery methods</th>
<th>Intended Start Date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>No</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

13. Cost, Budget, and Resources: Explain the amount and source(s) of any one-time and continuing investments in personnel, professional development, release time, time redirected from other assignments, instructional technology & software, other operations and maintenance, facilities, etc., needed to implement the proposed major. Address off-campus or distance delivery separately.

See Appendix B. The program will be supported by tuition and fees and with existing resources.

14. Board Policy 2:1 states: “Independent external consultants retained by the Board shall evaluate proposals for new graduate programs unless waived by the Executive Director.” Identify five potential consultants (including contact information and short 1-2 page CVs) and provide to the System Chief Academic Officer (the list of potential consultants may be provided as an appendix). In addition, provide names and contact information (phone numbers, e-mail addresses, URLs, etc.) for accrediting bodies and/or journal editors who may be able to assist the Board staff with the identification of consultants.

Please see Appendix C for potential consultant list.

9 The accreditation requirements of the Higher Learning Commission (HLC) require Board approval for a university to offer programs off-campus and through distance delivery.

10 Delivery methods are defined in AAC Guideline 5.5.

11 This question responds to HLC definitions for distance delivery.
Journal
Editor in Chief: June Kaminski, RN, MSN, PhD(c), Nursing Curriculum Coordinator, Research Coordinator, Informatics & Elearning, Aboriginal Health Consultant, Arthritis Research Canada
Chief Senior Editor: Jack Yensen, RN, PhD, Professor, Synergy Web. Inc.

Accreditation
Commission on Collegiate Nursing Education
Diandrea Campbell
Accreditation Coordinator
202-887-6791 extension 252

15. Is the university requesting or intending to request permission for a new fee or to attach an existing fee to the program? If yes, explain.

   Yes   X   No

16. New Course Approval: New courses required to implement the new graduate program may receive approval in conjunction with program approval or receive approval separately. Please check the appropriate statement:

   X   YES,
   the university is seeking approval of new courses related to the proposed program in conjunction with program approval. All New Course Request forms are included as Appendix C and match those described in section 5D.

   NO,
   the university is not seeking approval of all new courses related to the proposed program in conjunction with program approval; the institution will submit new course approval requests separately or at a later date in accordance with Academic Affairs Guidelines.

17. Additional Information:
**APPENDIX A**

**MSN-Informatics and leadership in e-Health Individual Student Outcomes and Program Courses**

List specific individual student outcomes—knowledge and competencies—in each row. Label each column with a course prefix and number. Indicate required courses with an asterisk (*). Indicate with an X the courses that will provide the student with an opportunity to acquire the knowledge or competency listed in the row. All students should acquire the program knowledge and competencies regardless of the electives selected. Modify the table as necessary to provide the requested information for the proposed program.

<table>
<thead>
<tr>
<th>Individual Student Outcome</th>
<th>NURS 511*</th>
<th>NURS 513*</th>
<th>NURS 514*</th>
<th>NURS 535*</th>
<th>NURS 740*</th>
<th>NURS 767*</th>
<th>NURS 688*</th>
<th>HIMS 742*</th>
<th>HIMS 743</th>
<th>DSCI 723*</th>
<th>HSAD 760*</th>
<th>NURS 788*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Develop knowledge and skill in health informatics and health care communication technologies as a foundation to nursing practice.</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Develop knowledge and skills in tools, method and theories of informatics and healthcare technologies to analyze, support and inform practice improvement activities, change processes, and system reliability and workflow</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Intervene at System and population level through policy development to promote safety, cost effectiveness and ethical principles and standards for use of information and health technology.</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Apply evidence-based practice to informatics solutions in population health and clinical and system improvement</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Integrate informatics and healthcare technology and communication to organizational and system leadership principles.</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Apply broad organizational client-centered and culturally appropriate healthcare technologies and informatics in planning, delivery, management and evaluation of evidence-based clinical prevention and population healthcare services to individuals, families, and aggregates/identified populations.</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Demonstrate knowledge and skill in system design life cycle, system usability and human interaction and healthcare data management, analysis, application and transformation.</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Demonstrate knowledge and skills in applying rules, regulations and requirements of information technology.</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
</tbody>
</table>

*Outcomes in this table are to be the same ones identified in the text.*
APPENDIX B

USD Nursing MS Track Only

1. Assumptions

**Headcount & hours from proposal**

<table>
<thead>
<tr>
<th></th>
<th>1st FY21</th>
<th>2nd FY22</th>
<th>3rd FY23</th>
<th>4th FY24</th>
<th>5th FY25</th>
<th>6th FY26</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fall headcount (see table in proposal)</td>
<td>6</td>
<td>13</td>
<td>22</td>
<td>28</td>
<td>32</td>
<td>34</td>
</tr>
<tr>
<td>Program FY cr hrs, Off-Campus NURS</td>
<td>54</td>
<td>117</td>
<td>183</td>
<td>231</td>
<td>261</td>
<td>273</td>
</tr>
<tr>
<td>Program FY cr hrs, Off-Campus OTHER (HIMS, HSAD)</td>
<td>18</td>
<td>39</td>
<td>66</td>
<td>84</td>
<td>96</td>
<td>102</td>
</tr>
<tr>
<td>Program FY cr hrs, Off-Campus TOTAL</td>
<td>72</td>
<td>156</td>
<td>249</td>
<td>315</td>
<td>357</td>
<td>375</td>
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</table>

Faculty, Regular FTE

<table>
<thead>
<tr>
<th></th>
<th>1st FY21</th>
<th>2nd FY22</th>
<th>3rd FY23</th>
<th>4th FY24</th>
<th>5th FY25</th>
<th>6th FY26</th>
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</thead>
<tbody>
<tr>
<td>See p. 3</td>
<td>1.00</td>
<td>1.30</td>
<td>1.30</td>
<td>1.30</td>
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<td>1.30</td>
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</tbody>
</table>

Faculty Salary & Benefits, average

<table>
<thead>
<tr>
<th></th>
<th>1st FY21</th>
<th>2nd FY22</th>
<th>3rd FY23</th>
<th>4th FY24</th>
<th>5th FY25</th>
<th>6th FY26</th>
</tr>
</thead>
<tbody>
<tr>
<td>See p. 3</td>
<td>$96,499</td>
<td>$96,499</td>
<td>$96,499</td>
<td>$96,499</td>
<td>$96,499</td>
<td>$96,499</td>
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</tbody>
</table>

Faculty, Overload/Inload/Adjunct - number of courses

<table>
<thead>
<tr>
<th></th>
<th>1st FY21</th>
<th>2nd FY22</th>
<th>3rd FY23</th>
<th>4th FY24</th>
<th>5th FY25</th>
<th>6th FY25</th>
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</thead>
<tbody>
<tr>
<td>See p. 3</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>3</td>
<td>3</td>
<td>3</td>
</tr>
</tbody>
</table>

Faculty, Overload/Inload/Adjunct - number of course credits

<table>
<thead>
<tr>
<th></th>
<th>1st FY21</th>
<th>2nd FY22</th>
<th>3rd FY23</th>
<th>4th FY24</th>
<th>5th FY25</th>
<th>6th FY25</th>
</tr>
</thead>
<tbody>
<tr>
<td>See p. 3</td>
<td>3</td>
<td>6</td>
<td>9</td>
<td>9</td>
<td>9</td>
<td>9</td>
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</tbody>
</table>

Faculty, Overload/Inload/Adjunct - per 3 Cr Hr course

<table>
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<tr>
<th></th>
<th>1st FY21</th>
<th>2nd FY22</th>
<th>3rd FY23</th>
<th>4th FY24</th>
<th>5th FY25</th>
<th>6th FY25</th>
</tr>
</thead>
<tbody>
<tr>
<td>See p. 3</td>
<td>$8,876</td>
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<td>$8,876</td>
<td>$8,876</td>
<td>$8,876</td>
<td>$8,876</td>
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</tbody>
</table>

Other FTE (see next page) - Grad Prgm Dir/Grad Fac Advisor

<table>
<thead>
<tr>
<th></th>
<th>1st FY21</th>
<th>2nd FY22</th>
<th>3rd FY23</th>
<th>4th FY24</th>
<th>5th FY25</th>
<th>6th FY25</th>
</tr>
</thead>
<tbody>
<tr>
<td>See p. 3</td>
<td>0.25</td>
<td>0.25</td>
<td>0.25</td>
<td>0.25</td>
<td>0.25</td>
<td>0.25</td>
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</tbody>
</table>

Other Salary & Benefits, average

<table>
<thead>
<tr>
<th></th>
<th>1st FY21</th>
<th>2nd FY22</th>
<th>3rd FY23</th>
<th>4th FY24</th>
<th>5th FY25</th>
<th>6th FY25</th>
</tr>
</thead>
<tbody>
<tr>
<td>See p. 3</td>
<td>$120,214</td>
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<td>$120,214</td>
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</table>

2. Budget

**Salary & Benefits**

<table>
<thead>
<tr>
<th></th>
<th>1st FY21</th>
<th>2nd FY22</th>
<th>3rd FY23</th>
<th>4th FY24</th>
<th>5th FY25</th>
<th>6th FY25</th>
</tr>
</thead>
<tbody>
<tr>
<td>Faculty, Regular (NURS)</td>
<td>$96,499</td>
<td>$125,449</td>
<td>$125,449</td>
<td>$125,449</td>
<td>$125,449</td>
<td>$125,449</td>
</tr>
<tr>
<td>Faculty, Overroad/Inload/Adjunct (rate x number of courses)</td>
<td>$8,876</td>
<td>$17,752</td>
<td>$26,628</td>
<td>$26,628</td>
<td>$26,628</td>
<td>$26,628</td>
</tr>
<tr>
<td>Other FTE-Grad Prgm Dir/Grad Fac Advisor</td>
<td>$30,054</td>
<td>$30,054</td>
<td>$30,054</td>
<td>$30,054</td>
<td>$30,054</td>
<td>$30,054</td>
</tr>
<tr>
<td>Other FTE-Grad Prgm Dir/Grad Fac Advisor</td>
<td>$30,054</td>
<td>$30,054</td>
<td>$30,054</td>
<td>$30,054</td>
<td>$30,054</td>
<td>$30,054</td>
</tr>
<tr>
<td>S&amp;B Subtotal</td>
<td>$135,429</td>
<td>$173,254</td>
<td>$182,130</td>
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<td>$182,130</td>
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</table>

**Operating Expenses**

<table>
<thead>
<tr>
<th></th>
<th>1st FY21</th>
<th>2nd FY22</th>
<th>3rd FY23</th>
<th>4th FY24</th>
<th>5th FY25</th>
<th>6th FY25</th>
</tr>
</thead>
<tbody>
<tr>
<td>Travel</td>
<td>$1,500</td>
<td>$1,950</td>
<td>$1,950</td>
<td>$1,950</td>
<td>$1,950</td>
<td>$1,950</td>
</tr>
<tr>
<td>Contractual Services</td>
<td>$20,125</td>
<td>$10,250</td>
<td>$26,628</td>
<td>$26,628</td>
<td>$26,628</td>
<td>$26,628</td>
</tr>
<tr>
<td>Supplies &amp; materials</td>
<td>$300</td>
<td>$650</td>
<td>$1,100</td>
<td>$1,400</td>
<td>$1,600</td>
<td>$1,700</td>
</tr>
<tr>
<td>Capital equipment</td>
<td>$1,500</td>
<td>$450</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>OE Subtotal</td>
<td>$23,425</td>
<td>$13,300</td>
<td>$4,300</td>
<td>$4,100</td>
<td>$4,050</td>
<td>$3,900</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>$158,854</td>
<td>$186,554</td>
<td>$186,430</td>
<td>$186,230</td>
<td>$186,180</td>
<td>$186,030</td>
</tr>
</tbody>
</table>

3. Program Resources

Allied Health Off Campus (NURS Prefix) tuition/hr, HEFF net

<table>
<thead>
<tr>
<th></th>
<th>1st FY21</th>
<th>2nd FY22</th>
<th>3rd FY23</th>
<th>4th FY24</th>
<th>5th FY25</th>
<th>6th FY25</th>
</tr>
</thead>
<tbody>
<tr>
<td>See p. 3</td>
<td>$267.11</td>
<td>$267.11</td>
<td>$267.11</td>
<td>$267.11</td>
<td>$267.11</td>
<td>$267.11</td>
</tr>
</tbody>
</table>

Program Forms: New Graduate Degree Program Form (Last Revised 05/2017)
<table>
<thead>
<tr>
<th>Tuition revenue</th>
<th>hrs x amt</th>
<th>$14,424</th>
<th>$31,252</th>
<th>$48,882</th>
<th>$61,703</th>
<th>$69,717</th>
<th>$72,922</th>
</tr>
</thead>
<tbody>
<tr>
<td>Other Off-Campus (BADM, HSAD Prefix) tuition/hr, HEFF net</td>
<td>GR</td>
<td>$261.16</td>
<td>$261.16</td>
<td>$261.16</td>
<td>$261.16</td>
<td>$261.16</td>
<td>$261.16</td>
</tr>
<tr>
<td>Tuition revenue</td>
<td>hrs x amt</td>
<td>$4,701</td>
<td>$10,185</td>
<td>$17,237</td>
<td>$21,938</td>
<td>$25,072</td>
<td>$26,639</td>
</tr>
<tr>
<td>Program fee, per cr hr (if any) - NURS Prefix Only</td>
<td></td>
<td>$103.00</td>
<td>$5,562</td>
<td>$12,051</td>
<td>$18,849</td>
<td>$23,793</td>
<td>$26,883</td>
</tr>
<tr>
<td>Delivery fee, per cr hr (if any) - NURS Prefix Only</td>
<td></td>
<td>$45.80</td>
<td>$2,473</td>
<td>$5,359</td>
<td>$8,381</td>
<td>$10,580</td>
<td>$11,954</td>
</tr>
<tr>
<td>University redirections</td>
<td></td>
<td>$62,500</td>
<td>$62,500</td>
<td>$62,500</td>
<td>$62,500</td>
<td>$62,500</td>
<td>$62,500</td>
</tr>
<tr>
<td>Community/Employers</td>
<td></td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>Grants/Donations/Other</td>
<td></td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td><strong>Total Resources</strong></td>
<td></td>
<td><strong>$89,660</strong></td>
<td><strong>$121,347</strong></td>
<td><strong>$155,849</strong></td>
<td><strong>$180,514</strong></td>
<td><strong>$196,125</strong></td>
<td><strong>$202,683</strong></td>
</tr>
</tbody>
</table>

**Resources Over (Under) Budget**

Provide a summary of the program costs and resources in the new program proposal.

<table>
<thead>
<tr>
<th>Estimated Salary &amp; Benefits per FTE</th>
<th>Teach FTE</th>
<th>Faculty</th>
<th>Non-Nurs</th>
<th>Adm/AdvFTE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Estimated salary (average) - explain below</td>
<td>$75,785</td>
<td>$8,215</td>
<td>$99,500</td>
<td></td>
</tr>
<tr>
<td>(see below) University's variable benefits rate</td>
<td>0.1404</td>
<td>0.0804</td>
<td>0.1404</td>
<td></td>
</tr>
<tr>
<td>Variable benefits</td>
<td>$10,643</td>
<td>$661</td>
<td>$10,643</td>
<td></td>
</tr>
<tr>
<td>Health insurance/FTE, FY20</td>
<td>$10,071</td>
<td>$0</td>
<td>$10,071</td>
<td></td>
</tr>
<tr>
<td><strong>Average S&amp;B</strong></td>
<td>$96,499</td>
<td>$8,876</td>
<td>$120,214</td>
<td></td>
</tr>
</tbody>
</table>

Explain faculty used to develop the average salary & fiscal year salaries used. Enter amount above.

*The FY20 salaries of 11 doctorally prepared faculty in the Nursing department were averaged.*

Explain overload/inload/adjunct faculty costs used in table:

*8% of the average faculty salary for HIMS, BADM, HSAD faculty was used to determine the overload/inload/adjunct rate per 3 credits.*

Explain other [for example, CSA or exempt] salary & benefits. Enter amount above.

*Program Forms: New Graduate Degree Program Form (Last Revised 05/2017)*
The FY20 salaries of the current Nursing Assoc Chair Academics and Director Student Advising and Serv were averaged to estimate costs of Graduate Program Directorship and Graduate Student Advising.

Summarize the operating expenses shown in the table:

Travel: 1500 per faculty FTE for faculty development. Contractual Services: $3000 per new course for course development. $2,625 for curriculum development consultant, $13,000 over six years in marketing costs, heavy front end investment at program inception. Supplies & Materials: $50 per year per student for supplies and materials. Capital Assets: $1500 per Faculty FTE for technology and office equipment.

Summarize resources available to support the new program (redirection, donations, grants, etc).

University Redirect: USD Nursing intends to redirect net savings from Pierre and Watertown closures.

State-support: Change cell on page 1 to use the UG or GR net amount.

<table>
<thead>
<tr>
<th>Off-Campus Tuition, HEFF &amp; Net</th>
<th>FY20 Rate</th>
<th>HEFF</th>
<th>USD Retained</th>
<th>Net Program Retained</th>
</tr>
</thead>
<tbody>
<tr>
<td>Graduate - Allied Health Nursing</td>
<td>$336.80</td>
<td>$38.73</td>
<td>$30.95</td>
<td>$267.11</td>
</tr>
<tr>
<td>Graduate - Other (BADM, HSAD)</td>
<td>$465.80</td>
<td>$53.57</td>
<td>$151.07</td>
<td>$261.16</td>
</tr>
</tbody>
</table>

Variable Benefits Rates

<table>
<thead>
<tr>
<th>University</th>
<th>FY20</th>
</tr>
</thead>
<tbody>
<tr>
<td>USD</td>
<td>14.04%</td>
</tr>
</tbody>
</table>

USD Nursing MS & DNP Tracks Combined

1. Assumptions

   Headcount & hours from proposal

   Fall headcount (see table in proposal)
   Program FY cr hrs, Off-Campus NURS
   Program FY cr hrs, Off-Campus OTHER (BADM, HIMS, HSAD)
Program Forms: New Graduate Degree Program Form (Last Revised 05/2017)

2. Budget

Salary & Benefits

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Faculty, Regular (NURS)</td>
<td>$192,998</td>
<td>$289,497</td>
<td>$289,497</td>
<td>$289,497</td>
<td>$289,497</td>
<td>$289,497</td>
<td>$289,497</td>
</tr>
<tr>
<td>Faculty, Overload/Inload/Adjunct (rate x number of courses)</td>
<td>$17,752</td>
<td>$35,504</td>
<td>$44,380</td>
<td>$44,380</td>
<td>$44,380</td>
<td>$44,380</td>
<td>$44,380</td>
</tr>
<tr>
<td>Other FTE-Grad Prgm Dir/Grad Fac Advisor</td>
<td>$60,107</td>
<td>$60,107</td>
<td>$60,107</td>
<td>$60,107</td>
<td>$60,107</td>
<td>$60,107</td>
<td>$60,107</td>
</tr>
<tr>
<td>S&amp;B Subtotal</td>
<td>$270,857</td>
<td>$385,108</td>
<td>$393,984</td>
<td>$393,984</td>
<td>$393,984</td>
<td>$393,984</td>
<td>$393,984</td>
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</tbody>
</table>

Operating Expenses

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Travel</td>
<td>$3,000</td>
<td>$4,500</td>
<td>$4,500</td>
<td>$4,500</td>
<td>$4,500</td>
<td>$4,500</td>
<td>$4,500</td>
</tr>
<tr>
<td>Contractual Services</td>
<td>$40,625</td>
<td>$23,500</td>
<td>$2,500</td>
<td>$1,500</td>
<td>$1,000</td>
<td>$500</td>
<td></td>
</tr>
<tr>
<td>Supplies &amp; materials</td>
<td>$600</td>
<td>$1,300</td>
<td>$2,200</td>
<td>$2,800</td>
<td>$3,200</td>
<td>$3,400</td>
<td></td>
</tr>
<tr>
<td>Capital equipment</td>
<td>$3,000</td>
<td>$1,500</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
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<tr>
<td>OE Subtotal</td>
<td>$47,225</td>
<td>$30,800</td>
<td>$9,200</td>
<td>$8,800</td>
<td>$8,700</td>
<td>$8,400</td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>$318,082</td>
<td>$415,908</td>
<td>$403,184</td>
<td>$402,784</td>
<td>$402,684</td>
<td>$402,384</td>
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3. Program Resources

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Allied Health Off Campus (NURS Prefix) tuition/hr, HEFF net</td>
<td>GR</td>
<td>$267.11</td>
<td>$267.11</td>
<td>$267.11</td>
<td>$267.11</td>
<td>$267.11</td>
<td>$267.11</td>
</tr>
<tr>
<td>Tuition revenue hrs x amt</td>
<td>$28,848</td>
<td>$62,505</td>
<td>$105,777</td>
<td>$134,625</td>
<td>$153,858</td>
<td>$163,946</td>
<td></td>
</tr>
<tr>
<td>Other Off-Campus (BADM, HSAD Prefix) tuition/hr, HEFF net</td>
<td>GR</td>
<td>$261.16</td>
<td>$261.16</td>
<td>$261.16</td>
<td>$261.16</td>
<td>$261.16</td>
<td>$261.16</td>
</tr>
<tr>
<td>Tuition revenue hrs x amt</td>
<td>$9,402</td>
<td>$20,371</td>
<td>$30,556</td>
<td>$38,391</td>
<td>$43,092</td>
<td>$44,659</td>
<td></td>
</tr>
<tr>
<td>Program fee, per cr hr (if any) - NURS Prefix Only</td>
<td>$103.00</td>
<td>$11,124</td>
<td>$24,102</td>
<td>$40,788</td>
<td>$51,912</td>
<td>$59,328</td>
<td>$63,346</td>
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<tr>
<td>Delivery fee, per cr hr (if any) - NURS Prefix Only</td>
<td>$45.80</td>
<td>$4,946</td>
<td>$10,717</td>
<td>$18,136</td>
<td>$23,083</td>
<td>$26,381</td>
<td>$28,030</td>
</tr>
<tr>
<td>University redirections</td>
<td>$125,000</td>
<td>$125,000</td>
<td>$125,000</td>
<td>$125,000</td>
<td>$125,000</td>
<td>$125,000</td>
<td></td>
</tr>
<tr>
<td>Community/Employers</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
</tr>
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## Grants/Donations/Other

<table>
<thead>
<tr>
<th></th>
<th>$0</th>
<th>$0</th>
<th>$0</th>
<th>$0</th>
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<th>$0</th>
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</thead>
<tbody>
<tr>
<td><strong>Total Resources</strong></td>
<td>$179,321</td>
<td>$242,695</td>
<td>$320,258</td>
<td>$373,012</td>
<td>$407,659</td>
<td>$424,198</td>
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</tbody>
</table>

### Resources Over (Under) Budget

*Provide a summary of the program costs and resources in the new program proposal.*

<table>
<thead>
<tr>
<th></th>
<th>NURS (138,761)</th>
<th>OTHER (173,213)</th>
<th>OTHER (82,926)</th>
<th>OTHER (29,772)</th>
<th>$4,975</th>
<th>$21,814</th>
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<tbody>
<tr>
<td>Faculty Teach FTE</td>
<td>$75,785</td>
<td>$8,215</td>
<td>$99,500</td>
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<tr>
<td>Faculty Non-Nurs FTE</td>
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<td></td>
<td></td>
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<tr>
<td>Faculty Adm/AdvFTE</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>University's variable benefits rate (see below)</td>
<td>0.1404</td>
<td>0.0804</td>
<td>0.1404</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Variable benefits</td>
<td>$10,643</td>
<td>$661</td>
<td>$10,643</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Health insurance/FTE, FY20</td>
<td>$10,071</td>
<td>$0</td>
<td>$10,071</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

| **Average S&B**      |               |                 |                |                | $96,499 | $8,876 | $120,214 |

*Explain faculty used to develop the average salary & fiscal year salaries used. Enter amount above.*

*The FY20 salaries of 11 doctorally prepared faculty the Nursing department were averaged.*

*Explain overload/inload/adjunct faculty costs used in table:*  

*8% of the average faculty salary for HIMS, BADM, HSAD faculty was used to determine the overload/inload/adjunct rate per 3 credits.*

*Explain other [for example, CSA or exempt] salary & benefits. Enter amount above.*

*The FY20 salaries of the current Nursing Assoc Chair Academics and Director Student Advising and Serv were averaged to estimate costs of Graduate Program Directorship and Graduate Student Advising.*

*Summarize the operating expenses shown in the table:*  

*Travel: 1500 per faculty FTE for faculty development. Contractual Services: $3000 per new course for course development. $13,000 over six years in marketing costs, heavy front end investment at program inception. Supplies & Materials: $50 per year per student for supplies and materials. Capital Assets: $1500 per Faculty FTE for technology and office equipment.*
Summarize resources available to support the new program (redirection, donations, grants, etc).

*University Redirect: USD Nursing intends to redirect net savings from Pierre and Watertown closures.*

*State-support: Change cell on page 1 to use the UG or GR net amount.*

<table>
<thead>
<tr>
<th>Off-Campus Tuition, HEFF &amp; Net</th>
<th>FY20 Rate</th>
<th>HEFF</th>
<th>USD Retained</th>
<th>Net Program Retained</th>
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<tbody>
<tr>
<td>Graduate - Allied Health Nursing</td>
<td>$336.80</td>
<td>$38.73</td>
<td>$30.95</td>
<td>$267.11</td>
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<tr>
<td>Graduate - Other (BADM, HSAD)</td>
<td>$465.80</td>
<td>$53.57</td>
<td>$151.07</td>
<td>$261.16</td>
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</table>

*Variable Benefits Rates*

<table>
<thead>
<tr>
<th>University</th>
<th>FY20</th>
</tr>
</thead>
<tbody>
<tr>
<td>USD</td>
<td>14.04%</td>
</tr>
</tbody>
</table>
APPENDIX C

Appendix MSN Nursing Informatics and e-Health Expert List
Maryland: MSN Nursing Informatics
https://www.nursing.umaryland.edu/academics/grad/nursing-informatics/

Eun-Shim Nahm, PhD, RN, FAAN
Professor and Program Director
Bio: Eun-Shim Nahm, PhD, RN, FAAN, conducts research in gero-informatics and develops and evaluates technology-based interventions for the health management patients and their caregivers. She teaches senior-level nursing informatics courses and doctoral-level research courses. She coordinates informatics students’ practicum placements.
Professor, OSAH
Program Director, Nursing Informatics
Co-Director, Center of Excellence in Biology and Behavior Across the Life Span
Address: 455C
Phone Number: 410-706-4913
Fax Number: 410-706-3289
enahm@umaryland.edu

Vanderbilt: MSN Nursing Informatics
https://nursing.vanderbilt.edu/msn/ni/index.php

Patricia Sengstack DNP, RN-BC, FAAN
Director, Nursing Informatics Specialty
Nursing Informatics Executive, Vanderbilt University Medical Center

Bio: Dr. Sengstack is an Associate Professor for the Vanderbilt University School of Nursing and a Nursing Informatics Executive for the Vanderbilt University Medical Center. She is the former Chief Nursing Informatics Officer for the Bon Secours Health System. She served for nine years as the Chief of Clinical Informatics at the National Institutes of Health, Clinical Center in Bethesda, MD. She has her DNP from Vanderbilt University and a Master's in Nursing Informatics from the University of Maryland. She is the Past President of the American Nursing Informatics Association, from 2013 - 2015. She has multiple informatics publications, and most recently published a Sigma Theta Tau book titled, "Mastering Informatics: A Healthcare Handbook for Success". She teaches informatics at the masters and doctoral levels at Vanderbilt University and has recently taken on a role at Vanderbilt’s Medical Center as a nursing informatics executive to provide strategic informatics leadership. Her focus over the last several years has been health information technology’s impact on patient safety as well as building a program to improve the evaluation process of IT systems.

Patricia Sengstack
patricia.r.sengstack@vanderbilt.edu
272 School of Nursing
Phone:
615-343-4930

**University of Minnesota: DNP Nursing Informatics**

Donald C. Adderley  
Director of Nursing Clinical Facilities, School of Nursing  
adder001@umn.edu  
Office Phone 612-626-3706  
Office Address:  
1-325 Moos  
Mailing Address:  
School of Nursing  
University of Minnesota  
5-140 Weaver Densford Hall  
308 Harvard St SE  
Minneapolis, MN 55455

**Duke University: MSN Health Informatics**
https://nursing.duke.edu/academic-programs/msn-master-science-nursing/health-informatics

**Michael Edward Zychowicz**  
Professor in the School of Nursing

Bio:
Dr Michael Zychowicz is Professor and Director of the MSN Program at Duke University School of Nursing. He is certified as both an Adult Nurse Practitioner and an Orthopedic Nurse Practitioner. His specialty is orthopedic nursing, with subspecialties in sports medicine, spine surgery, and general orthopedics. He graduated from Orange County Community College with an Associate Degree in Nursing in 1990 and from the State University of New York at Plattsburgh with a BSN in 1995. After working as a critical care and emergency room nurse, he earned a Master of Science as a Nurse Practitioner from Syracuse University in 1997. While at Syracuse, he taught anatomy and physiology and performed a primary care/rural health internship with the National Health Service Corps. Dr. Zychowicz completed the Doctorate of Nursing Practice degree in 2006 at Case Western Reserve University.

Dr. Zychowicz taught nursing and practiced as a nurse practitioner at Mount St. Mary College (Newburgh, NY) from 1999 to 2008. While in Newburgh, he also practiced in Orthopedics and Sports Medicine. During this period, he was selected as New York State NP of the Year (2004), received the American Academy of Nurse Practitioners (AANP) Award for Excellence in 2007, was selected as a Fellow of the American Academy of Nurse Practitioners (2007), and received the American Association of Colleges of Nursing Leadership in Academic Nursing Fellowship (2007-2008). He also served as an Army Reserve Officer in the Army Medical Department between 1991 and 2005.

*Program Forms: New Graduate Degree Program Form (Last Revised 05/2017)*
Dr. Zychowicz has published a book titled *Orthopedic Nursing Secrets*, in addition to articles and chapters on a variety of orthopedic topics. He is frequently invited to lecture at conferences and seminars across the country where he shares his expertise and passion for orthopedic topics locally and nationally to nursing and nurse practitioner organizations. He is on the editorial advisory board for the journal *Advance for Nurse Practitioners* and is a contributing editor for *Clinical Advisor*. His research and clinical interests include occupational back injuries and the impact of health beliefs on return to work time. His research interests include occupational back injuries and returning to work after an occupational injury. In 2010 he joined the journal *Orthopedic Nursing* as a columnist writing about orthopedic pathophysiology.

Contact Information

307 Trent Drive, Office #2025; DUMC 3322,
Durham, NC 27710

**University of Michigan: MSN Health Informatics**
https://nursing.umich.edu/academics/msn-and-post-masters-dnp-systems-populations-leadership-path/systems-populations-and

Tiffany Veinot
Director, Health Informatics Program
Associate Professor of Information, School of Information
Associate Professor of Health Behavior and Health Education, School of Public Health

Bio:
Dr. Tiffany Veinot is an associate professor in the School of Information with a cross-appointment with the Department of Health Behavior and Health Education in the School of Public Health. Dr. Veinot is a member of the Biomedical Library and Informatics Review Committee (BLIRC) at the National Library of Medicine, National Institutes of Health and recently served as proceedings chair for the Association for Computing Machinery (ACM) International Conference on Health Informatics.

Dr. Veinot is a peer reviewer for several research conferences and journals, and her published research has garnered awards from the Journal of Documentation, Canadian Association of Information Science (CAIS), the American Society for Information Science & Technology (ASIS&T) SIG USE, and the Association for Library and Information Science Education (ALISE). Dr. Veinot received a PhD in information and media studies through the Library and Information Science doctoral program at the University of Western Ontario.

tveinot@umich.edu
(734) 615-8281
3443 North Quad
University of Utah: MSN Nursing Informatics
https://nursing.utah.edu/programs/graduate/ms/nursing-informatics.php
Catherine Janes Staes, PhD, MPH, RN, FACMI

Bio:
Catherine J. Staes is currently the Director of the Nursing Informatics Specialty at the University of Utah’s College of Nursing. Prior to taking this position in August 2018, she was on the faculty of the University of Utah’s Department of Biomedical Informatics for 11 years leading efforts in the area of population and public health informatics.

Her expertise involves systems analysis, decision support, and standards to improve communication between public health and clinical entities, assisting clinicians and laboratories in making decisions that meet public health goals. This involves understanding the current processes for communicating public health guidelines and reporting requirements and designing systems and knowledge that can be implemented in the clinical setting. Dr. Staes’ focus also includes developing and delivering curriculum about public health informatics, clinical decision support, and standards and terminology for graduate informatics students and the public health workforce.

Prior to joining the Biomedical Informatics Department in 2006, Dr. Staes worked primarily in epidemiology but has other healthcare experience as well. As a clinical nurse, she worked in a variety of areas including pediatric intensive care, infectious disease/oncology (AIDS), and in rural public health clinics with the U.S. Public Health Service (1981 to 1986). As an epidemiologist (1988 to 2000), Dr. Staes worked for the Centers for Disease Control (CDC), the North Carolina State Department of Health, and the Salt Lake Valley Health Department, where she worked in communicable disease control, lead poisoning prevention, and surveillance of injuries. She honed her public health research skills as an Epidemic Intelligence Service (EIS) Officer at the CDC. After earning her PhD, she worked as a knowledge engineer for Theradoc, a decision-support vendor.

Dr. Staes is an Associate Editor of JAMIAOpen and is on the editorial board of JAMIA. As an EIS Officer at the CDC, she earned the Alexander D. Langmuir Prize.

Program Manager
Shelley Kern, MPC
Phone: 801-585-0878
Email: shelley.kern@nurs.utah.edu

Specialty Track Director
Catherine Staes, PhD, MPH RN
Email: catherine.staes@hsc.utah.edu
APPENDIX D

From: Spohn, Renae <Renae.Spohn@dsu.edu>
Sent: Wednesday, March 20, 2019 4:36 PM
To: AbouSamra, Haifa R <Haifa.AbouSamra@usd.edu>
Cc: Bennett, Dorine <dorine.bennett@dsu.edu>
Subject: Re: MSN Criteria Crosswalk with DSU's MSHIIM Program

Hello--

Dorine and I have had a chance to meet and discuss the forms you attached. We have a very successful collaboration with SDSU in the MSA program and prefer to try to proceed in the same manner. Here's what we are planning to do: 1. DSU will change the language on the HIMS 742 course pre-requisite to read "Pre-requisite HIMS 701 or prior healthcare knowledge or experience". The course numbering and naming will remain as a unique course offered by DSU. 2. HIMS 743 will be a new DSU HIMS unique course. USD can offer the course as a part of the NURS program with a HIMS 743 prefix. SDSU handles the catalog by putting (Dakota State University) behind the course title in the catalog so we believe this collaboration could follow the same method rather than making it a common course. Both courses are expected to be taught by DSU faculty. We appreciate your partnership and believe you will find these actions reasonable.

Thanks. Renae
Report of the Program Evaluation for two proposed graduate nursing programs
at University of South Dakota

Conducted by:
Michael E. Zychowicz, DNP, ANP, ONP, FAANP, FAAN
Professor of Nursing
Duke University School of Nursing
307 Trent Drive
Durham NC 27710
(919) 613-4692
Michael.Zychowicz@duke.edu

Kimberly Shea, PhD, RN, CHPN
Clinical Associate Professor
The University of Arizona College of Nursing
1305 N Martin Ave
Tucson, AZ 85721
(520) 626-6076
kshea@email.arizona.edu

Submitted: March 9, 2020
**Background:**

University of South Dakota’s Department of Nursing, within the School of Health Sciences, has proposed the development and implementation of two new graduate nursing degree programs. These are 1) the Master of Science in Nursing (MSN) with specialization in Nursing Informatics and e-Health and 2) the Doctor of Nursing Practice (DNP) with specialization in Organizational and System Leadership. These two programs would mark the Department of Nursing’s first foray into delivering graduate Nursing education.

On Thursday February 6th the reviewers (Drs. Michael Zychowicz and Kimberly Shea) performed a virtual site visit using videoconference to inform their evaluation of the proposals. The reviewers held 3 group meetings with stakeholder groups focusing on distinct topical areas for each meeting.

- Institutional Support and Mission – Executive Resources
- Interprofessional Collaboration – Academic Partners
- Faculty - Curriculum

During each session there was a robust discuss. There was adequate time for all questions to be asked and answered. In preparation for the videoconference meetings, the reviewers were provided with a variety of documents describing the University, School of Health Sciences, and Department of Nursing. These included documents describing resources, facilities, student and faculty profile, curricula, history, accreditation, and organizational structure. The reviewers were also provided with the full proposals for the DNP and MSN degree programs. The reviewers were provided with any requested documents following the videoconference which were needed for the review.

This report is an independent assessment of the proposed MSN and DNP graduate nursing programs for University of South Dakota. The report addresses the proposed curriculum, the faculty, administrative support services and student services to support the proposed programs. A concluding section for the report provides a summary of strengths, weaknesses, and recommendations.

**Program Curriculum: Doctor of Nursing Practice with specialization in Organizational and System Leadership**

**Does the proposed DNP program meet or exceed current national standards and expectations for the discipline?**

It is the opinion of the reviewers that there are gaps in the proposed DNP curriculum. The reviewers have considered the proposed curriculum alongside The American Academy of Colleges of Nursing (AACN): The Essentials of Doctoral Education for Advanced Nursing Practice (2006). This document of essentials defines the curricular elements and competencies that must be present in DNP programs. The course descriptions were reviewed to determine which course titles and course descriptions contained key words (underlined below) from each of the eight DNP essentials. Gaps in the proposed curriculum are described. Of note, the reviewers only have the course names and course descriptions and do not have any fleshed-out course objectives or expected course outcomes, so we are working with a limited picture of each of the
proposed courses. It has been our understanding that development of course objectives or expected course outcomes are not a typical part of proposal submission at USD and would typically not be developed at this point in the process.

Essential I. Scientific Underpinnings for Practice

- When considering the proposed core courses for the DNP, the word practice only exists in the course description for NURS 812.
- The word science or scientific exists in the course description for NURS812, 861, and 773.
- This demonstrates some evidence of this Essential being present within the proposed curriculum. It does not, however, align with the working draft MS Word document provided to the reviewers titled Descriptions Doctor of Nursing Practice with specialization in Organizational and System Leadership. In this working draft, the AACN essential elements are cross walked against the proposed curriculum (pg. 13) provided to the reviewers. Essential I is described in the crosswalk table as existing in every proposed DNP course however the key search words above only exist in three of the proposed courses. As mentioned already, the reviewers only have course descriptions and not course objectives or expected course outcomes, so it is possible that the course objectives and outcomes for all proposed courses could include this content.

Essential II. Organizational and Systems Leadership for Quality Improvement and Systems Thinking

- The word organizational exists in the course description—BADM761 and HSC755
- The word leadership exists in the course description—BADM 761 and HSC755
- The words system leadership only exists in the course description—HSAD770
- The words organizational leadership do not exist in any of the course descriptions
- The word quality only exists in the course description—NURS861
- The words systems thinking do not exist in any of the course descriptions
- This demonstrates evidence of the essential being present within the proposed curriculum. It does not, however, align with the working draft provided to the reviewers. While the reviewers potentially see Essential II being present in courses BADN761, HSC755, HSAD770, and NURS861; the working draft AACN cross walk shows Essential II being present in courses HSAD770, NURS861, NURS811, NURS812, and NURS895.

Essential III. Clinical Scholarship and Analytical Methods for Evidence-Based Practice

- The words scholarship or scholarly do not exist in any of the course descriptions
- The words analytic or analytical do not exist in any of the course descriptions
- The words evidence and evidence-based practice exist in the course description – NURS811 and 812
- This demonstrates some evidence of the essential being present within the proposed curriculum. It does not, however, align with the working draft provided to the reviewers. While the reviewers potentially see Essential III being present in courses NURS811 and 812; the working draft AACN cross walk shows Essential III being present in courses NURS811, NURS812, HSC755, NURS773, and NURS895.
Essential IV. Information Systems/Technology and Patient Care Technology for the Improvement and Transformation of Health Care

- The word information only exists in the course description– NURS861
- The words information systems do not exist in any of the course descriptions
- The words information technology do not exist in any of the course descriptions
- The words patient care technology do not exist in any of the course descriptions
- The words transform or transformation do not exist in any of the course descriptions
- This demonstrates minimal evidence of Essential IV being present within the proposed curriculum. It does not, however, align with the working draft provided to the reviewers. While the reviewers potentially Essential IV being present in courses NURS861; the working draft AACN cross walk shows Essential IV being present in courses HSC755, NURS811, NURS812, NURS895.

Essential V. Health Care Policy for Advocacy in Health Care

- The word policy does not exist in any of the course descriptions
- The word advocacy does not exist in any of the course descriptions
- This demonstrates no evidence of the essential being present within the proposed curriculum. It does not align with the working draft provided to the reviewers. While the reviewers do not see Essential V being present in any courses; the working draft AACN cross walk shows Essential V being present in courses HSAD770 and NURS895. Again, the reviewers only have course descriptions and not course objectives or expected course outcomes, so it is possible that the course objectives and course outcomes for all proposed courses could include this content.

Essential VI. Interprofessional Collaboration for Improving Patient and Population Health Outcomes

- The word interprofessional only exists in the course description– NURS861
- The word collaboration does not exist in any of the course descriptions
- The words population health do not exist in any of the course descriptions
- The word population exists in the course description – NURS812 and HSC755. It is not clear that this is referring specifically to population health
- The word outcomes does not exist in any of the course descriptions
- This demonstrates minimal evidence of the essential being present within the proposed curriculum. It does not align with the working draft provided to the reviewers. While the reviewers see some evidence of Essential VI being present in NURS861, NURS812, and HSC755 courses; the working draft AACN cross walk shows Essential VI being present in courses BADM761, NURS895, NURS861 and HSC755. Again, the reviewers only have course descriptions and not course objectives or expected course outcomes, so it is possible that the course objectives and outcomes for all proposed courses could include this content.
Essential VII. Clinical Prevention and Population Health for Improving the Nation’s Health

- The words *prevent* or *prevention* do not exist in any of the course descriptions
- The words *population health* do not exist in any of the course descriptions
- The word *population* only exists in the course description – NURS812 and HSC755. It is not clear that this is specifically referring to the essence of this essential of improving the health of the nation.
- The words *improve* or *improving* only exists in the course description – NURS861. It is not clear that this is specifically referring to the essence of this essential of improving the health of the nation.
- The words *nation, national, America, American, US, or United States* do not exist in any of the course descriptions
- This demonstrates minimal evidence of the essential being present within the proposed curriculum. It does not align with the working draft provided to the reviewers. While the reviewers see some evidence of Essential VII being present in NURS861, NURS812, and HSC755 courses; the working draft AACN cross walk shows Essential VII being present in courses NURS895 and HSC755. Again, the reviewers only have course descriptions and not course objectives or expected course outcomes, so it is possible that the course objectives and outcomes for all proposed courses could include this content.

Essential VIII. Advanced Nursing Practice

- The words *nurse, nursing, advanced nurse, advanced nursing, or nursing practice* do not exist in any of the course descriptions
- It is very curious that the words Nurse or Nursing are not utilized at all in the proposed nursing course titles or the nursing course descriptions. Again, the reviewers only have course descriptions and not course objectives or expected course outcomes, so it is possible that the course objectives and outcomes for all proposed courses could include this content.

Lastly, the DNP Essentials states “The DNP graduate preparing for advanced specialty practice at the population/organizational/policy level demonstrates competencies in conducting comprehensive organizational, systems, and/or community assessments to identify aggregate health or system needs; working with diverse stakeholders for inter- or intra-organizational achievement of health-related organizational or public policy goals; and, designing patient-centered care delivery systems or policy level delivery models” (p.18). The reviewers have noted evidence for a portion of this requirement being present in the course description for courses BADN761, HSC755, HSAD770, and NURS861 as it relates to interprofessional and multidisciplinary teams; stakeholder engagement; organizational, system and population assessment; and program design. An area that is absent in the course descriptions is public or health policy. This shortcoming can and should be strengthened in the proposed curriculum.

**Does the proposed DNP program meet accreditation requirements where applicable? What changes, if any, do you recommend?**

Based upon the working draft document prepared by USD Department of Nursing which shows a crosswalk of the curriculum against AACN’s DNP Essentials, the school shows that all the DNP Essentials exist within the proposed DNP curriculum. The reviewers have a somewhat different
assessment of the presence of the essentials in the curriculum. In reviewing the course descriptions, it is not overtly clear that the courses will meet as many of the essentials that are listed on the working draft document. As an example, the working document shows course N770 and N895 as having content relevant to Essential #5: Health Care Policy for Advocacy in Health Care. In reviewing the course name and the course descriptions, there is no overt reference to health policy or advocacy in the N770 or N895 course descriptions. Two additional content areas that need to be enhanced are informatics as it relates to DNP practice as well as population health.

Since the course objectives and course outcomes for all proposed courses have not yet been developed, which seems to be a part of the normal process at USD, when developed these may provide further evidence of additional essential elements being embedded in specific courses course content and course activities. The faculty may also consider altering the course descriptions to be more overt about the alignment of the course with specific essentials.

**Will the proposed DNP program provide students with sound preparation for their careers and serve them well as they seek employment?**

Basing the answer to this question on only the course descriptions and titles is difficult. However, based on the presented evidence, students may have exposure to what is needed for both their careers and to pass the ANCC or AONL certification exams. Gaps exist in the curriculum that we believe need to be addressed to enhance the students’ preparation for the board exams. This includes ensuring the students receive curriculum content in the area of finance, informatics, budget, policy, population health, organization or health systems transformation, and ethics. These content areas are not overtly visible in the proposed USD DNP course descriptions; however, they may be included in future course objectives and course outcomes to be developed.

Eighteen percent of the ANCC exam is about Structures and Processes, including Financial Management and Health and Public Policy. In our review of the proposed DNP course descriptions, we have not identified any course content for health care finance, business financial management or health and public policy. Ensuring these content areas are included in the curriculum would strengthen the proposed DNP program.

**Program Curriculum: Master of Science in Nursing with specialization in Health Informatics and Analytics**

**Does the proposed MSN program meet or exceed current national standards and expectations for the discipline?**

It is the opinion of the reviewers there are gaps in the proposed MSN curriculum. The courses presented address the five broad categories of The AACN Master’s Essentials for Informatics and Healthcare Technologies (2011). The reviewers had access to course descriptions, which were searched for key words within the five AACN categories. The key words are underlined with the courses that contain them below. Gaps in the curriculum are described below as well.
Essential 1. Use of patient care and other technologies to deliver and enhance care
- One non-nursing course (HSAD760) describes the use of technology to improve patient care.
- Patient care is the crux of nursing and therefore an MSN program should demonstrate the focus of technology use on the delivery and enhancement of quality patient care.

Essential 2. Communication technologies to integrate and coordinate care
- Communication as the basis for theory is described in Nurs514.
- Telecommunication is a component of HIMS 743, which is the use of technology for remote interaction.
- Content on how communication can be improved through use of technologies with the intent of coordinating care is missing.

Essential 3. Data management to analyze and improve outcomes of care
- Data management is found in two courses Nurs688 and DSCI723.
- Data management is not tied to outcomes of care in any of the courses.
- Nurs767 describes analysis of workflow and patient outcomes management but does not tie the data management to the improvement of outcomes of care (nursing or other).
- In Nursing Informatics, outcomes that are nurse sensitive outcomes should be tied to care, not just health services.

Essential 4. Health information management for evidence-based care and health education.
- Evidence-based interventions related to population health is found in Nurs740.
- Evidence-based practice related to scope of practice is found in Nurs514.
- No reference to health education has been offered in the content.
- Data management and information management are not the same things. Therefore, the use of health information as evidence to improve care is not part of the course descriptions.

Essential 5. Facilitation and use of electronic health records to improve patient care
- Both HIIMS courses describe EHR information systems, however it is not tied to improvement of patient care.

In summary, the critical differences between the broader health informatics and nursing informatics is the focus on patient care and patient care outcomes. The management of data, knowledge and information with the intent of improved patient care must be evident in the curriculum. The course descriptions yield a strong understanding of health informatics yet attention to specifics of nursing informatics as described in the AACN essentials is a large gap in the curriculum.
Does the proposed MSN program meet accreditation requirements where applicable? What changes, if any, do you recommend?

The reviewers were provided with a MS Word file titled Description Master of Science in Nursing with specialization in Nursing Informatics and e-Health. In this document, the proposed MSN course names are cross walked with proposed MSN student learning outcomes (SLO), ANCC Nursing Informatics certification requirements and AACN Master’s Essentials. The two courses listed that did not have any matches in the AACN categories of informatics essentials key word searches, described above, are Nurs511 and Nurs535. Their course descriptions are very different, yet, on page 17 where SLOs and AACN essentials are cross walked, the courses address the same SLOs and AACN essentials. Additional attention to this detail when courses are further developed is important to fill gaps and/or emphasize areas that are important for repetition.

Per current course descriptions, there is limited intent to address Rules, Regulations and Requirements (R, R & R). These are critical components of Nursing Informatics foundations both in AACN Essentials and the ANCC Nursing Informatics certification exam. Within R, R & R, are ethics, privacy, HIPAA and security concerns. Ethics is part of the description for Nurs513 and HIMS743. While only multilevel regulations are mentioned in HSAD760. There is no mention of any R, R & R topics within Nurs514, yet this is a foundational course. Policy is not in course descriptions, yet “policy creation” (ANCC), “Policy development” (AACN) are cited in accreditation agency standards. The lack of linking these concepts together in the coursework, raises concerns for students to grasp the important relationship of this foundational component of Nursing Informatics.

Based on the current crosswalk of curriculum content, some issues are noted below to consider as you finalize the crosswalk and proposed curriculum.

- Six (50%) of your courses have no identified content applicable to the ANCC certification.
- There are two courses that have “Foundations” in the titles (Nurs514 and HIMS743). Per the ANCC website’s description of the certification exam, 51% of the ANCC exam is about Foundations of Practice. The course descriptions for the two foundations courses (Nurs514 and HIMS743) are very different. Clarification and specificity with respect to the differences between Nursing Informatics and Health Informatics needs to be fleshed out in the curriculum.
  - Nurs514 (2 credit) seems to have more application to SLO
  - HIMS743 (3 credit) spear to have less application to SLO and AACN essentials and no ANCC certification requirements.
- The Department should clearly define how the determination of healthcare knowledge/experience be made as a prerequisite for HIMSS742.

Additional Concerns with curriculum

Human factors related to human interaction with technology and usability are a part of the user experience (ANCC). There is limited reference to education in these areas. In Nurs767, workflow usability is the only mention of usability, this is not user experience or system usability.
Will the proposed MSN program provide students with sound preparation for their careers and serve them well as they seek employment?

Basing the answer to this question on only the course descriptions is difficult. However, based on the presented evidence, students may have exposure to what is needed for success. More detail in the following ways is needed to determine if they will have “sound preparation”.

• The proposed MSN program is more closely aligned to the AACN Essentials than the ANCC exam. The current language used in the course descriptions will be dissimilar to the language used by the ANCC. A recommendation is made to integrate more of the language from ANCC to better help the students to understand question intent and be prepared for the exam.
• The only course description that discusses preparation for the role of an informatics nurse is Nurs514 and it reads as if it is a theory course. This course content is critical to preparation for the role, yet it has the fewest number of credits indicating less time spent on learning content.
• More details are needed on objectives for Nurs788 – how will the project be structured to provide an opportunity for students to apply what they have learned in the clinical environment?
• Nursing informatics is specific within the larger framework of health informatics, therefore within the curriculum more concentration on use of technology to improve patient outcomes and patient care are needed in preparation.

Faculty

Will the current and planned faculty be sufficient to offer strong programs?

The faculty and administration of SDU believe they will be able to incrementally add new faculty to teach within the proposed DNP and MSN programs to ensure they will have enough faculty to offer a strong program. This is anticipated to be a combination of new hires and redeploying faculty from other schools who are educationally and experientially qualified to teach in the proposed program. It was not fully clear how many faculty members would be redeployed from other schools; however, they will need to be academically and experientially qualified to teach in the DNP or MSN programs.

There are no Department of Nursing faculty identified with experience and expertise in nursing informatics. The addition of a doctorally prepared nurse trained in informatics would improve the application of course content to the nursing masters’ essentials, ANCC exam as well as incorporate sound preparation for employment as a nurse informaticist. The Department should strongly consider recruiting a nurse informaticist when putting together their plan for faculty recruitment.

Another concern is the additional faculty workload that comes with the DNP scholarly projects. During the meetings, the program reviewers asked the nursing department if they believe they have or will have enough faculty for the DNP scholarly projects. The reviewers were reassured by the nursing department they feel they have enough DNP prepared faculty who can engage with DNP student scholarly projects. They further reinforced that there are models in place with the DPT program and other practice doctorate programs at USD that can provide guidance.
While the AACN Essentials does not set strict criteria for a student to faculty ratio for courses or scholarly projects, there is some broad guidance from the CCNE Standards for Accreditation. The CCNE standard II - Program Quality: Institutional Commitment and Resources states “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.” They go on to state that the program must have clear definitions for faculty workloads and the faculty to student ratios should provide for adequate supervision and evaluation. With that, it is recommended that the program ensure they have fully defined workload policies, APT Policies and faculty to student ratios specifically for graduate faculty as they put the proposed DNP and MSN programs in place.

**Do the programs require additional expertise to implement the programs at a high level of quality?**

There are six proposed new core NURS courses with one elective course for the DNP program. Just about any DNP educated faculty should be able to teach the NURS811, NURS812, NURS813, and NURS895. The school should have ample PhD prepared faculty to teach the NURS773 Applied Clinical Research course. Two new proposed courses that would require some additional expertise are the NURS861 Quality Safety and Legal Risk Management and NURS767 Quality Analysis of Workflow Reliability, Quality and Safety. The reviewers are confident that qualified faculty exist within the current faculty ranks who are educationally and experientially qualified to teach these courses at a high-level including, but not limited to Dean Anne Pithan, Dr. Lisa Feller and Dr. Cheryl Fischbach.

The courses in the proposed MSN informatics program display the expertise and influence of the professors from the Beacom School of Business. Dr. Bart Hanus and Dr. Chet Barney are accomplished professors of Information Science and Information systems management in the workplace. The addition of a PhD prepared nurse trained in informatics would improve the application of course content to the nursing masters’ essentials, ANCC exam as well as incorporate sound preparation for employment as a nurse informaticist.

**Will the teaching, research, service expectations, and related resources be competitive when recruiting new faculty to staff the proposed programs?**

The available academic affairs documents regarding workload expectations as well as expectations for promotion and tenure were reviewed. The faculty expectations and available resources seem to be in alignment with peer institutions and should be competitive when recruiting new faculty.

**Services**

**Are library resources and other services sufficient to support high quality programs?**

After reviewing the supporting documents and information available on the USD website, the reviewers believe library and other services are sufficient to support a high-quality program.
When the faculty were asked by the reviewers if they felt they had adequate resources to deliver a high-quality program, there was a resounding yes. The library has robust online resources available for students. There is a high degree of access to librarian services. The students have access to an online bookstore with e-books available as well.

The D2L learning platform used by the school is highly capable of delivering the proposed programs well. The faculty have access to development resources for D2L. Instructional design, media and IT services are available to faculty for high quality course development. It is our understanding that the school routinely reviews online courses and uses a standardized rubric for online course evaluations.

Interestingly, we understand that faculty are required to complete a professional certificate related to online teaching. Faculty have access to professional development workshops to advance their understanding of online pedagogy.

The school has professional student advisors providing student support. Support is in place as it relates to State Authorization Reciprocity Agreements (SARA) and individual state authorization for the delivery of online coursework to students outside of South Dakota. The school has a process in place for maintenance and oversight of the state authorization process.

**Other Issues**

**Are there other issues (e.g., student recruiting, program management, support staff) that should be given attention?**

The faculty seem unsure if the proposed DNP curriculum is designed for the new or middle manager (unit manager) or for the high-level experienced executive (Chief Nursing Officer). These two groups will have divergently different levels of experience and learning needs. The school needs to be very clear what their target audience is and to be very clear that the curriculum meets the needs of that specific audience. In addition to having an influence on the curriculum, this will alter recruitment strategies, marketing and advertising to prospective students.

DNP students are required to have 1,000 hours of post-baccalaureate practice as part of a supervised academic program. For incoming DNP students who currently have an MSN, most schools with authorize a transfer of up to 500 hours toward the 1000-hour total. The school needs to consider, and have a clear policy in place, for the transfer of practice hours. Additionally, students coming into the program may not have graduated from an APRN program, and as such, may have less than 500 practice hours or even no practice hours at all. Again, the school needs to ensure a clear plan and policy are in place for how these students will obtain their practice hours.

The school seems to have a large number of DNP practicum hours required (11 cr.) for the proposed DNP program. Many schools will require between 4-6 credit hours of practicum for the post master’s DNP students. The school may want to re-consider the number of practicum credit hours and potentially reduce those hours while simultaneously considering changing some of the listed elective courses, and making them a required part of the curriculum. The program may become somewhat more robust with this change and fill some potential curricular gaps.
The proposed programs are interesting and unique in that there is a solid partnership in the delivery of courses in a very interdisciplinary fashion leveraging partnerships with other schools. While we believe this is very innovative, we offer a word of caution. Because of these partnerships, the nursing department needs to ensure there are no gaps or redundancy in the curriculum and understand changes to courses outside of the Nursing Department could substantively affect the overall curriculum.

The proposed DNP curriculum appears to be a post MSN to DNP framework. It is unclear if and how the proposed DNP program would articulate with the proposed MSN program to offer a pathway to the DNP degree for an applicant who currently only has a bachelor’s degree and is interested in both the DNP and MSN programs.

In reviewing the MSN and DNP proposals, the reviewers have not identified any point in the programs when students will have deliberate time to build relationships and network with their classmates or faculty members. Relationship building is essential for students both while they are in school and when they become alumni. Students will develop relationships with their classmates to help them get through school and to help them when navigating the workforce. Students who have a relationship with faculty may have a greater visceral or emotional connection with the school as alumni. Is there an intention for building relationships outside the online platform? What does that look like within the programs?

The number of projected enrollees for the first year of each program seems slightly high. The enrollment projections also seem to not make any assumptions about leave of absence or non-completers. The enrollment revenue projections may be slightly elevated based upon the student enrollment projections.

There is a large Master of Health Informatics Program at University of Minnesota which is the 2nd largest nursing informatics school in the United States. This master’s program is not mentioned on p.4, #6 of the document Intent to Plan for a New Program. The proposed MSN program is offered online therefore the proximity of other informatics programs is not an issue, however, the statistics of their enrollments may be beneficial in determining potential enrollment for the informatics MSN program.

Summary Recommendation:
What do you see as the strengths and weaknesses of the proposed programs?

Strengths
1. The USD Nursing Department has experience in delivering a successful and well-established undergraduate nursing program.

2. Facilities and resources at the University and Nursing Department are more than ample for the delivery of the undergraduate programs. Additionally, the facilities and resources should be more than adequate for the Department to deliver the proposed graduate nursing programs.
3. The IT infrastructure and support for faculty at USD is more than adequate to deliver the proposed online graduate nursing programs.

4. Data sets are available at the university for students and faculty to work with. This is particularly necessary for students and faculty of the proposed MSN Nursing Informatics program.

5. It is abundantly clear that the Nursing Department has very strong and mutually beneficial relationships and partnerships. These partnerships will allow partners to share resources and interprofessional faculty expertise in the delivery of the proposed programs. Proposed collaborations have been identified between the Department of Nursing, and the Beacom School of Business at the University of South Dakota, the College of Business and Information Technology and the Beacom College of Computer and Cyber Sciences at Dakota State University (DSU).

6. The faculty and administration for the Nursing department appear highly motivated and enthusiastic to develop and implement the proposed MSN and DNP programs.

7. There is a clearly identified need for the development of these two programs in the Department of Nursing.

Weaknesses

1. The reviewers have identified potential gaps and weaknesses (described in detail above) in the proposed curricula for the DNP and MSN, based upon course descriptions shared with us. The identified gaps have the potential to impede successful CCNE accreditation. The identified gaps have the potential to impede successful CCNE accreditation.

   **Recommendation:** A reassessment of the curriculum needs to be performed to ensure AACN essential elements as well as ANCC or AONL elements are overtly included in the courses for each of the programs. Please note, the reviewers only have course descriptions and not course objectives or expected course outcomes, so it is possible that the course objectives and outcomes for all proposed courses could include this content. Further detail of identified gaps in the curriculum are described in the Program Curriculum sections of this report.

2. There are no Department of Nursing faculty identified with experience and expertise in nursing informatics. The addition of a doctorally prepared nurse trained in informatics would improve the application of course content to the nursing masters’ essentials, ANCC exam as well as incorporate sound preparation for employment as a nurse informaticist.

   **Recommendation:** The Department should strongly consider recruiting a nurse informaticist when putting together their plan for faculty recruitment.

3. Many schools will require between 4-6 credit hours of practicum for the post master’s DNP students. The proposed DNP program has listed 11 credit hours for the NURS895 practicum course. From the reviewers’ experience, this is nearly double what other DNP programs require.
require for the practicum course work. The reviewers have not identified a rationale for the large credit hour requirement for the practicum course.

**Recommendation:** The school may want to re-consider the number of practicum credit hours and potentially reduce those hours while simultaneously considering changing some of the listed elective courses and making them a required part of the curriculum. The program may become somewhat more robust with this change and fill some potential curricular gaps.

4. While the title for the DNP program states there will be a specialization in Organizational and System Leadership, it is not abundantly clear what level of leadership will be focused upon. Delivering education for experienced chief nurse executives is somewhat different than educating those with minimal to no formal leadership experience. This affects curriculum as well as recruitment.

**Recommendation:** The school needs to be very clear who their target audience is for the DNP program and to be very clear that the curriculum meets the needs of that specific audience.

5. While the educational partners have experience in delivering graduate education, the department of nursing lacks experience with developing and delivering graduate nursing education.

**Recommendation:** The Department should leverage the experience of faculty members who have experience with developing graduate curriculum at other institutions. The Department may also consider an external consultant as they develop the proposed curriculum.

6. Based upon the reviewers’ experience in new program development, the enrollment projections for the proposed MSN and DNP programs seem slightly high and seem to assume a 100% program completion rate without any student attrition. This has the potential to over-estimate revenue generation from the programs.

**Recommendation:** The Department may want to reconsider the recruitment and enrollment targets, consider historical enrollment benchmarks for new programs at the university, and build in some assumptions around student attrition and leave of absence.

7. The reviewers have not identified any clear time built into the DNP and MSN programs for students to network and develop relationships with other students and faculty in a face to face manner. The relationships these online students make will last a lifetime to advance their careers and their affinity for the university when they are alumni.

**Recommendation:** The Department should give consideration for how and when students will have deliberate time to network and develop social connections with their faculty and other students.

8. This is the first time the Department of Nursing is putting in place a graduate program. Workload recognition and allocation for graduate programs can be different from
undergraduate programs. The Department, School and University have APT and workload policies in place.

**Recommendation:** The Department should ensure existing Nursing APT and workload policy are reviewed to ensure they are applicable to the workload realities of nursing faculty teaching in graduate programs.

**What broader recommendations do you have for the university and the Board of Regents?**

The Nursing Department of USD has clearly articulated the need for the proposed MSN and DNP programs. The proposals have a strong foundation with notable partnerships. The reviewers believe the Nursing Department should consider the identified weaknesses and recommendations noted above and how they can be addressed.

Of importance to address are the identified, potentially significant, gaps and weaknesses in the proposed curriculum for both the DNP and MSN programs. These gaps have the potential to impede successful CCNE program accreditation as well as diminish curricular quality and student preparation for their careers. It is the strong recommendation of the reviewers that the Nursing Department needs to address these curricular gaps and weaknesses, as described in this review. This may include changing the language of course descriptions to be overt about a course’s inclusion of AACN essential elements. Faculty may also consider developing the course objectives and course outcomes to clearly demonstrate inclusion of AACN essential elements. Additionally, faculty may consider adding other courses to the curriculum to address these identified gaps.

As stated several times in this document, the reviewers only have course descriptions and titles for this review. It has been our understanding that development of course objectives or expected course outcomes are not a typical part of proposal submission at USD and would typically not be developed at this point in the process. It is possible that the course objectives and outcomes for all proposed courses could describe the identified shortcomings in the curriculum.

After the gaps in the curriculum are satisfactorily addressed, we believe the proposals should be considered for approval by the University and Board of Regents.
April 24, 2020

Joelle L. Lien, D.M.A. Systems Associate Vice President for Academic Affairs

Dear Dr. Lien,

Thank you for providing feedback from our site visit which was conducted on February 6\textsuperscript{th}, 2020 at the University of South Dakota. We appreciate the feedback that you gave regarding our two graduate nursing programs which included the Master of Science in Nursing with specialization in Nursing Informatics and e-health, and the Doctor of Nursing Practice with specialization in Organizational and System Leadership. We found the reviewer’s comments to be very helpful and have created a table with the comments, recommendations, and our responses.

Thank you so much, again, for your comments. We look forward to your feedback.

Respectfully submitted,

Anne Pithan
Anne Pithan DNP, RN, CNE, CMSRN
Department of Nursing Chair
414 E. Clark Street, LM #302
Vermillion, SD 57069
<table>
<thead>
<tr>
<th>Weaknesses Identified in Report</th>
<th>Recommendation</th>
<th>USD Nursing Response</th>
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</table>
| 1. The reviewers have identified potential gaps and weaknesses in the proposed curriculum for the DNP and MSN, based upon course descriptions shared with us. The identified gaps have the potential to impede successful Commission on Collegiate Nursing Education (CCNE) accreditation. | A reassessment of the curriculum needs to be performed to ensure American Association of Colleges of Nursing (AACN) essential elements as well as American Nurses Credentialing Center (ANCC) or American Organization for Nursing Leadership (AOLN) elements are overtly included in the courses for each of the programs. Please note, the reviewers only have course descriptions or expected course outcomes, so it is possible that the course objectives and outcomes for all proposed courses should include this content. Further detail of identified gaps in the curriculum are described in the Program Curriculum sections of this report. | A reassessment of the DNP curriculum was completed. The Nursing Program has made the following revisions to the DNP curriculum:  
1. Revised course titles for each NURS course to align specifically with the DNP Essentials.  
2. Identified gaps and made revisions in the current course descriptions to address missing components (such as organizational and systems thinking, analysis, scholarship, and evidence-based practice) to better align with the DNP Essentials, American Organization for Nursing Leadership (AONL) Competencies and the Nurse Executive Board Certification (NE-BC) test map.  
3. The DNP curriculum was divided into 3 distinct sections: Core courses, Leadership Development courses, and Project courses to better align with accreditation standards and emphasize the role of the advanced practice nurse.  
4. Practicum courses were changed. This change included reducing the credits to two 3-credit hour courses thus, allowing for the development of additional nursing courses that address the gaps in leadership/business skills, population health and outcomes, interprofessional collaboration, information systems/technology, and health policy/advocacy. The courses were re-labeled as Project courses to reflect the rigorous scholarly nature of the practical experience.  
5. Additional elective courses (called practicum) for clinical hours were developed for those entering the program with less than the maximum allowed number of transfer clinical hours. |
### Response to Report Evaluation

A reassessment of the MSN curriculum was completed. The Nursing Program has made the following revisions to the MSN curriculum:

6. Course titles and descriptions were modified to closer align with MSN essentials and American Association of Colleges of Nursing (ANCC) competencies, and to emphasize nurse-sensitive outcomes.

7. Courses that were identified as not relevant to accreditation and certification competencies were removed and replaced with courses that addressed identified gaps in the curriculum.

8. Additional details describing the Master’s project were provided in the course description for NURS 788.

### See Appendix A for Details

### See Appendix B for Details

| 2. There are no Department of Nursing Faculty identified with experience and expertise in nursing informatics. The addition of a doctorally prepared nurse trained in informatics would improve the application of course content to the nursing masters’ essentials, ANCC exam as well as incorporate sound preparation for employment as a nurse informaticist. |
|---|---|---|
| The Department should strongly consider recruiting a nurse informaticist when putting together their plan for faculty recruitment. |
| The program will do the following: |
| 1. Recruit a doctorally prepared nurse trained in informatics, and/or |
| 2. Build expertise in our nursing faculty through informatics certification. |
| We have delayed the start of this program until fall 2021 which will give us time to recruit a doctorally prepared faculty with expertise in informatics and/or build expertise (through certification) of our current faculty. Possible certification options include a post-master’s certificate in nursing informatics. |
The program has established partnerships with Avera, Sanford, and Monument health systems informatics departments. Staff from these departments will serve on the advisory board and share expertise regarding nursing informatics through adjunct teaching and curriculum development. With the recent COVID-19 pandemic emergence, the importance of the use of e-health methods has increased substantially. Department leadership will work closely with our practice partners to meet this escalated demand.

| 3. Many schools will require between 4-6 credit hours of practicum for the post-masters DNP students. From the reviewers’ experience, this is nearly double what other DNP programs require for the practicum course work. The reviewers have not identified a rationale for the large credit hour requirement for the practicum course. | The school may want to reconsider the number of practicum credit hours and potentially reduce those hours while simultaneously considering changing some the listed elective courses and making them a required part of the curriculum. The program may become somewhat more robust with this change and fill some potential curricular gaps. | The program has made the following revisions based on the recommendation of the report:
   1. The number of practicum hours were reduced from 11 credit hours to a minimum of 6 credit hours.
   2. The remaining 5 credits were used to develop new courses to address curricular gaps and create a more robust curriculum.

   See Appendix A for details. |
4. While the title for the DNP programs states there will be specialization in Organizational and System Leadership, it is not abundantly clear what level of leadership will be focused upon. Delivering education for experienced chief nurse executives is somewhat different than educating those with minimal to no formal leadership experience. This affects curriculum as well as recruitment.

The school needs to be very clear who their target audience is for the DNP program and to be very clear that the curriculum meets the needs of that specific audience.

Based on workforce needs of the state of South Dakota, the Doctor of Nursing Practice with specialization in Organizational and System Leadership Program will target nurses that are in mid-level nursing management and leadership positions who desire to enhance their ability to lead within complex health systems and utilize the skill set of a doctorally prepared nurse. The AONL Competencies and the American Nurses Credentialing Center’s (ANCC) Nurse Executive Board Certification Exam test map for mid-level nurse leaders (non-chief executive leadership) were used to guide curriculum development and have been mapped to all coursework. This allows the student who desires certification in this area of nursing practice to be better prepared for the exam if this meets their career goals.

See Appendix A for details.

5. While the educational partners have experience in delivering graduate education, the department of nursing lacks experience with developing and delivering graduate education.

The department should leverage the experience of faculty members who have experience with developing graduate curriculum at other institutions. The Department may also consider an external consultant as they develop the proposed curriculum.

The Department of Nursing has eleven doctoral prepared faculty that are eligible to teach within the program. The faculty consists of DNP, PhD, and EdD prepared faculty and can effectively assist the student in all aspects of the DNP coursework and graduate education (see Appendix C). Several of the doctoral prepared Nursing faculty have taught inter-professionally in other graduate programs within the School of Health Sciences at USD. There will be outstanding support, mentoring and resources available to the faculty through the university and the Center for Teaching and Learning. The School of Health Sciences has six graduate level programs and the university is a leader in graduate education in the state with 78 graduate programs. All Nursing faculty who are expected to teach in the program hold graduate status and are well versed and well equipped to teach at a graduate level. External experts will be sought to assist and guide curriculum development.
| 6. Based upon the reviewers’ experience in new program development, the enrollment projections for the proposed MSN and DNP programs seem slightly high and seem to assume a 100% program completion rate without any student attrition. | The Department may want to reconsider the recruitment and enrollment targets, consider historical enrollment benchmarks for new programs at the University, and build in some assumptions around student attrition and leave of absence. | The program has reduced the proposed enrollment number from 9 to 6 students entering the MSN program and from 8 to 6 students entering the DNP program. While this number may be on the conservative side, the new projections, will allow for any student attrition in the program. With the acceleration that is occurring in the tele-health and e-health services, we expect the demand to be sustainably increased for the proposed specializations and we are confident we can meet our target numbers.

The range and use of telehealth services have expanded over the past decades, along with the role of technology in improving and coordinating care. With the recent COVID-19 pandemic emergence, the importance of the use of e-health methods has increased substantially. As the nation moves to accelerate the adoption of telehealth, MSN prepared nurses’ with expertise in informatics will be instrumental to support the health of citizens, support the ability to access safe care in rural and urban settings, and coordinate and manage care through virtual and electronic means.

See Appendix D for details. |
7. The reviewers have not identified any clear time built into the DNP and MSN programs for students to network and develop relationships with other students and faculty in a face to face manner. The relationships these online students make will last a lifetime to advance their careers and their affinity for the university when they are alumni.

<table>
<thead>
<tr>
<th>The Department should give consideration for how and when students will have deliberate time to network and develop social connections with their faculty and other students.</th>
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<tr>
<td>To address networking and relationship building between student-student and student-faculty, a variety of networking opportunities will be integrated throughout the program.</td>
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</table>

1. The School of Health Sciences currently has several graduate programs that are offered entirely online. This includes the Master of Social Work, the Master of Public Health and the PhD in Health Sciences. The nursing faculty are involved in the admission committee’s work and teach in the Master of Public Health and the PhD in Health Sciences programs. All three graduate programs have a successful record of accomplishment with outstanding student outcomes. Strategies and frameworks used to engage students in these two programs can be easily replicated in the graduate nursing programs. In addition, faculty teaching in those programs within the School of Health Sciences will provide outstanding support and mentoring to the nursing faculty on best practices and strategies to engage students in distant teaching environments.

2. As part of the clinical requirement for NURS 811 and NURS 861, students will attend a 3-day mandatory, on-campus residency session (Tuesday–Thursday) that includes core courses, enhancement programming, specialty courses, and advisor meetings. Due to placement of the courses in the curriculum, these residencies will be strategically placed to allow for initial introductions and networking followed by continued strengthen of social connections that will follow them into clinical practice. In addition to planned activities and coursework, students will have an opportunity to network and build relationships with faculty and
<table>
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<tr>
<th>8. This is the first time the Department of Nursing is putting in place a graduate program. Workload recognition and allocation for graduate programs can be different from undergraduate programs.</th>
<th>The Department should ensure existing Nursing Advancement Promotion and Tenure (APT) and workload policies are reviewed to ensure they are applicable to the workload realities of nursing faculty teaching in graduate programs.</th>
</tr>
</thead>
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<tr>
<td>colleagues, familiarize themselves with support services on campus, and share ideas. 3. DNP and MSN faculty advisors will mentor, coach, and guide students through the respective programs. Every student will be provided with individual feedback and regular 1:1 coaching from their faculty advisor. 4. The DNP and MSN programs will admit students once a year which allows for a cohort of students to progress together through the program. This model allows students to work together over consecutive semesters, and have the opportunity to build meaningful relationships with one another.</td>
<td>Although the nursing program currently does not have graduate programming, the current Nursing Advancement Promotion and Tenure workload policies follow that of the School of Health Sciences and address graduate teaching. The policy rewards faculty interprofessional teaching at a graduate level. Those who mentor graduate student projects/thesis/dissertation in other programs such as the PhD in Health Sciences are recognized. The Nursing workload polices for graduate approved faculty are aligned with policies from other USD graduate programs such as business, law, occupational therapy, and physical therapy.</td>
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<td><strong>See Appendix E for details.</strong></td>
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### Additional Areas of Weakness

| PhD prepared faculty to teach NURS 773 - Applied Clinical Research | Doctoral prepared faculty with PhD as a terminal degree will be responsible for teaching NURS 773, Clinical Scholarship and Analytical Methods. There are currently 4 faculty within the Department of Nursing who are well-qualified and who will be able to develop the curriculum and teach this course. Internal and external expertise will be used to augment existing faculty expertise if needed. Faculty with PhD as a terminal degree include:  
  - Amy Smith, PhD, RN  
  - Anne Kleinhesselink PhD, RN  
  - Jean Yockey, PhD, RN  
  - Sabina Kuperschmidt, PhD  
  - Haifa AbouSamra, PhD, RN  
  See Appendix C for details. |
| --- | --- |
| Plan for obtaining practicum hours | The school needs to ensure a clear plan and policy are in place for how these students will obtain their practice hours.  
The DNP program will fulfill the AACN requirement for 1000 clinical hours. USD has over 600 affiliation agreements and strong clinical partnerships to provide a variety of robust experiences for students.  
See Appendix A for details. |
### Pathway from MSN to DNP

<table>
<thead>
<tr>
<th>It is unclear if and how the proposed DNP program would articulate with the proposed MSN program to offer a pathway to the DNP degree for an applicant who currently only has a bachelor’s degree and is interested in both the DNP and MSN.</th>
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</thead>
</table>
| Students with a bachelor’s degree must complete the proposed MSN program, or a MSN program from an accredited institution, prior to entry into the DNP.  

Students with a conferred Master of Science in Nursing degree from an accredited institution will receive 33 credit hours towards the credit hours required for the DNP degree.  

DNP graduate students may transfer a maximum of 280 supervised clinical hours from their post-baccalaureate supervised clinical hours. The DNP graduate student who earned less than 280 post-baccalaureate supervised clinical hours will take additional elective practicum credits, to complete a minimum of 1,000 clinical hours.  

**See Appendix A for details.** |
## USD DNP Rebuttal to Consultant Report

<table>
<thead>
<tr>
<th>Area of Evaluation</th>
<th>Consultant Comment</th>
<th>Program Response</th>
</tr>
</thead>
</table>
| DNP Essentials I - VIII | Summary: *Specific words correlated to the DNP Essentials are either limited within the course titles and course descriptions or are not found demonstrating minimal or absent evidence of the essentials being present within the proposed curriculum.* | **The following course titles and descriptions were revised to align better with the DNP Essentials and the role of a DNP prepared nurse. Changes are in red font.**  

**Original:** NURS 811 Advanced Evidence-Based Practice Appraising: This course will focus on various methods, models and plans to level and appraise evidence. The student will learn how to conduct evidence retrieval and appraisal. This includes scoping reviews, use of various evidence-based models and methodology, as well as evidence management tools and matrices.  

**Revised:** NURS 811 Scientific Underpinnings and EBP: This course will focus on nursing science, specifically nursing theories to provide a framework for advanced nursing practice. The student will engage in evidence retrieval and appraisal, use science-based concepts to evaluate evidence, models & methods, and apply this knowledge to enhance care delivery at a systems level and improve patient outcomes. |
Original: NURS 861 Quality Safety and Legal Risk Management: This course will focus on developing the necessary knowledge and skills needed for graduates to engage in interdisciplinary multisector initiatives aimed at reducing risks and impacting healthcare safety and quality. Students will learn to use interprofessional-multidisciplinary implementation teams to embed innovations and science into ongoing organizational processes. Students will learn to use aggregate data and healthcare information to improve effectiveness and add the value of interventions and services.

Revised: NURS 861 Leadership Development in Quality Improvement in Nursing for Health Systems: This course will focus on developing necessary organizational and systems-level thinking and skills to lead interprofessional collaboration & multisector organizational change for quality improvement initiatives. Students will assimilate nursing science and practice with the complex needs of humankind (AACN). Using systems thinking, key skills included in this course are the development of clinical practice guidelines, designing evidence-based interventions, utilizing QI metrics (Lean or Six Sigma), evaluating aggregate data, analyzing risk management/compliance issues/liability recognition, human resource management, SWOT analysis, applying change theories to nursing, clinical practice, and evaluating practice outcomes.

Original: NURS 773 Applied Clinical Research: Review common research designs, levels of scientific rigor, ethical issues and sources of bias by critiquing examples from the literature. Advance the student’s knowledge of quantitative and qualitative methods in health care through critical appraisal of methodologies in current and substantive areas of health and human services research. Analyze and interpret quantitative and qualitative data using an existing dataset.

Revised: NURS 773 Clinical Scholarship and Analytical Methods: This course will examine research designs, levels of scientific rigor, ethical issues and sources of
bias by critiquing examples from the literature to critically analyze data to identify problems for change within the healthcare delivery system. By the end of this course, the DNP student will have skills to appraise the evidence and translate it to a practice system.

| New courses added to align with the DNP Essentials and DNP Practice: |
| NURS 841 Applied EBP and Population Health Concepts: This course will focus on the principles of public and community health to improve health outcomes aimed at a systems-level approach. The DNP student will evaluate care delivery models and strategies using EBP principles to address gaps in care across vulnerable populations and rural underserved communities. Additionally, by utilizing leadership and other social/change theory, and knowledge of the healthcare environment, the student will be challenged with establishing a vision of care for populations and the overall healthcare system. |
| NURS 862 Leadership Development in Information Systems/ Technology for Patient Care Improvement: This course will help the student to generate data-driven decisions in nursing and other healthcare disciplines through the use of information systems/technology and patient care technology. Through this process, the DNP student will be able to evaluate and improve outcomes of care and care systems. Additional goals of this course will focus on strengthening system strategic planning, and use of technology to transform healthcare for patient care improvements. |

| Does the DNP Program meet accreditation requirements where applicable? What changes if |
| It is not overtly clear that the courses will meet as many of the essentials that listed on the working draft document. As an example, the working document shows course N770 and |
| NURS 770 is not a nursing course but rather is a course from Beacom School of Business titled HSAD 770. It will provide students with foundational knowledge for NURS 863. |
| To meet DNP Essential #5, NURS 812 course title and description have been changed as follows: |
any, do you recommend

| Course | Original: NURS 812 Applied Evidence-Based Practice Implementation: This course will focus on the field of implementation science and stakeholder engagement strategies to get organizations, teams, and individuals to adopt and consistently use evidence-based research findings and innovations in everyday practice. The course will cover a variety of strategies for the implementation of evidence-based practices. This will include exploring various change theories and models and piloting the change in a particular population or setting.
|        | Revised: NURS 812 Leadership Development in Healthcare Policy and Advocacy: Through this course, students will acquire skills to analyze policy to spearhead organizational policy change at the micro, meso, and macro levels, participate in community legislation, and practice negotiating and advocating for social justice and the nursing profession as a whole.
|        | Will the proposed DNP Program provide students with sound preparation for their careers and serve them well as they seek employment?
|        | Based on the presented evidence, students may have exposure to what is needed to pass AONL certification exams. Gaps exist in the curriculum including content in the area of finance, informatics, budget, policy, population health, organization or health systems transformation and ethics.
|        | To specifically address gaps within the curriculum pertaining to finance, budget and leadership:
|        | NURS 863 Leadership Development in Healthcare Business was added to the curriculum to emphasize workplace management and financial resource management.
|        | NURS 863 Leadership Development in Healthcare Business (pre-requisite HSAD 770, BADM 761): This course will prepare the nurse leader to engage in healthcare business. Topics include employment management, promotion of healthful work environments and ergonomically sound workplaces, and the management of emergency preparedness plans, employee recruitment, compensation, conflict management, and retention strategies. Additionally, DNP students will engage with interpreting financial statements, manage finances and financial resources and ensure the accuracy of reimbursement mechanisms in healthcare.
To address gaps within the curriculum regarding systems transformation, budget, and finance skills:
The course description for NURS 861 Leadership Development in Quality Improvement in Nursing for Health Systems was re-written to better align with systems transformation, budget, and finance skills (see course description above).

To address gaps in curriculum regarding policy:
NURS 812 Leadership Development in Healthcare Policy and Advocacy has been revised to address the gaps in healthcare policy (see course description above).

To address gaps in curriculum regarding population health:
NURS 841 Applied EBP and Population Health Concepts has been added to the curriculum to address the gaps in population health (see course description above).

To address gaps in curriculum regarding informatics:
NURS 862 Leadership Development in Information Systems/ Technology for Patient Care Improvement has been added to the curriculum to address the gaps in informatics (see course description above).

<table>
<thead>
<tr>
<th>Are there other issues that should be given attention?</th>
<th>The faculty seem unsure if the proposed DNP curriculum is designed for the new or middle manage (unit manager) or for the high-level experienced executive (Chief Nursing Officer).</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Based on South Dakota’s workforce data and the needs of health systems in the state, the target population for the DNP program is the mid-level nursing management nurse who desires a skill set to lead at the highest level of nursing practice. The curriculum has been revised to target this specific workforce. Each of the AONL Competencies and the Nurse Executive Board Certification exam aligns with the revisions.</td>
</tr>
</tbody>
</table>
There are a large number of DNP practicum hours required (11 cr.) for the program. The school may want to consider the number of practicum credit hours and potentially reduce those hours while simultaneously changing some of the listed elective courses and making them a required.

The program must be cautious of gaps and redundancies with partnering using courses outside of the Nursing Department.

The school needs to consider, and have clear policy in place, for the transfer of practice hours.

The DNP Practicum courses have renamed DNP Project courses to differentiate from Practicum courses available to students who need additional clinical hours. The DNP Project been reduced from 11 credit hours to 6 credit hours. The remaining 5 credit hours have been added to the nursing curriculum to meet the essentials, fill curricular gaps, and enhance rigor (NURS 841, NURS 862, NURS 812 and NURS 863).

The goal of collaborating with The Beacom Business School is to ensure integrity and alliance with business concepts while providing a mutually beneficial experience for graduate nursing students and essential application of business skills to the role of the Advanced Practice Registered Nurse.

Students with a bachelor’s degree must complete the proposed MSN program, or an MSN program from an accredited institution, prior to entry into the DNP.
<table>
<thead>
<tr>
<th>The proposed DNP curriculum appear to be post MSN. It is unclear if and how the proposed DNP program would articulate with the proposed MSN program to offer a pathway to the DNP degree for an applicant currently holding a bachelor’s degree interested in completing both programs.</th>
</tr>
</thead>
</table>
| Students with a conferred Master of Science in Nursing degree from an accredited institution will receive 33 credit hours towards the credit hours required for the DNP degree.  
DNP graduate students may transfer a maximum of 280 supervised clinical hours from their post-baccalaureate clinical hours. The DNP graduate student who earned less than 280 post-baccalaureate supervised clinical hours will take up to an additional 7 elective practicum credits to meet the requirement of 1,000 clinical hours. |
### Appendix B

**USD MSN Rebuttal to Consultant Report**

<table>
<thead>
<tr>
<th>Essential I</th>
<th>Consultant Comment</th>
<th>Program Response</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Patient care is the crux of nursing and therefore an MSN program should demonstrate the focus of technology use on the delivery and enhancement of quality patient care.</strong></td>
<td>NURS 511, NURS 513, NURS 514, NURS 740, NURS 767, NURS 788: Course descriptions were revised to link the use of technology to enhance patient care and improve health outcomes of patients and populations.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Essential II</th>
<th>Consultant Comment</th>
<th>Program Response</th>
</tr>
</thead>
</table>
| **Content on how communication can be improved through use of technologies with the intent of coordinating care is missing.** | NURS 514 course description was revised to include the following phrasing: *Emphasis will be placed on the use of informatics, communications technologies, and the electronic health record to facilitate the coordination and enhancement of quality patient care.*

NURS 740 course description was revised to include a link between communication and population health outcomes. and the use of communication technologies to promote population health will be discussed. |

<table>
<thead>
<tr>
<th>Essential III</th>
<th>Consultant Comment</th>
<th>Program Response</th>
</tr>
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<tbody>
<tr>
<td><strong>Data management is not tied to outcomes of care in any of the courses.</strong></td>
<td>The department of nursing does not have the ability to link data management to outcomes of care within Beacom School of business courses (DSCI 723). Because this course is heavily focused on business and does not have a healthcare focus, it is the team’s recommendation to remove this course from the curriculum. We recommend that data management and its impact on patient outcomes be addressed in HIMS 743 as it is currently under development.</td>
<td></td>
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</table>

NURS 535: This course was developed to address gaps in the curriculum. Part of the course description is in direct response to
<table>
<thead>
<tr>
<th>Essential IV</th>
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<tbody>
<tr>
<td><strong>In Nursing Informatics, outcomes that are nurse sensitive outcomes should be tied to care, not just health services.</strong></td>
</tr>
<tr>
<td><strong>Course description for NURS 767 was revised to include the following phrasing:</strong> This course will focus on process improvement models and methods to impact nurse sensitive clinical outcomes and process outcomes.</td>
</tr>
<tr>
<td>The course description for NURS 514 was revised to include a link to patient care outcomes: <em>Emphasis will be placed on the use of informatics, communications technologies, and the electronic health record to facilitate the coordination and enhancement of quality patient care.</em></td>
</tr>
</tbody>
</table>

| **No reference to health education has been offered in the content.** |
| **The course description for NURS 514 was revised to include the phrasing “health education”: Students will be introduced to informatics theory as it relates to nursing informatics, adult learning theory, health education, and communication and computer science.** |
| The course description for NURS 749 was revised to include the phrasing “health education.” *Health equity, community health assessment, epidemiologic methods, health education, and the use of communication technologies to promote population health will be discussed.* |

<p>| <strong>Data management and information management are not the same things. Therefore, the use of health</strong> |
| <strong>The course NURS 511 was revised to be an EBP course. The following phrasing within that course description includes the</strong> |</p>
<table>
<thead>
<tr>
<th><strong>RESPONSE TO REPORT EVALUATION</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Essential V:</strong> Both HIIMS courses describe EHR information systems, however it is not tied to improvement of patient care.</td>
</tr>
<tr>
<td>The course description for NURS 514 was revised to include a link between the use of EHR and patient care outcomes: Emphasis will be placed on the use of informatics, communications technologies, and the electronic health record to facilitate the coordination and enhancement of quality patient care.</td>
</tr>
</tbody>
</table>
| The five broad areas of nursing informatics as described in the AACN essentials of Master’s of Education in Nursing include:  
  - Use of patient care and other technologies to deliver and enhance care  
  - Communication technologies to integrate and coordinate care  
  - Data management to analyze and improve outcomes of care  
  - Health information management for evidence-based care and health education  
  - Facilitation and use of electronic health records to improve patient care.  

All 5 of these areas have been addressed through the course description changes previously mentioned. |
| **Proposed MSN program and accreditation standards**  
The two courses listed that did not have any matches in the AACN categories of informatics essentials key word searches, described above, are Nurs511 and Nurs535.  
NURS 511 course was changed to an EBP course that now contains several keywords under Essential 4.  
NURS 535 course was changed to a leadership course that now includes several keywords under Essential I, II, and IX. |
| Per current course descriptions, there is limited intent to address  
NURS 688: Policy development was added within the course description. |
<table>
<thead>
<tr>
<th>Rules, Regulations and Requirements (R, R &amp; R).</th>
<th>This course will enhance student knowledge in federal and state regulatory environments, data governance, and policy development. NURS 514: Rules, Regulations and Requirements language was added to the course description due to their link to scope of practice. This course will focus on the nursing informatics rules, regulations, and requirements. Content will include scope and standards of practice, informatics evolution, professional organizations, and professional development in advanced practice nursing.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Policy is not in course descriptions, yet “policy creation” (ANCC), “Policy development” (AACN) are cited in accreditation agency standards. The lack of linking these concepts together in the coursework, raises concerns for students to grasp the important relationship of this foundational component of Nursing Informatics.</td>
<td></td>
</tr>
<tr>
<td>Six (50%) of your courses have no identified content applicable to the ANCC certification.</td>
<td>NURS 535 was developed to address many of the foundational leadership concepts with the ANCC category I: foundations of practice that were not addressed within the previous course descriptions. ANCC category II: System Design and Lifecycle, and ANCC category III: Data Management and Health Care Technology continue to be deficits within the program. Consultants with in-depth knowledge of the field of informatics are needed to determine where/how these concepts fit within the program.</td>
</tr>
<tr>
<td>There are two courses that have “Foundations” in the titles (Nurs514 and HIMS743). Per the ANCC website’s description of the certification exam, 51% of the ANCC exam is about Foundations of Practice. The course descriptions for</td>
<td>Course descriptions for NURS 514 and HIMS 743 were revised to differentiate between health information and health informatics. Connections were made between nursing practice and the use of information to impact nursing care and patient/system outcomes in NURS 514.</td>
</tr>
</tbody>
</table>
| **the two foundations courses (Nurs514 and HIMS743) are very different.** | HIMS 743 is concerned with what informatics is, what technologies are available for health care, and how technologies are used within healthcare. Thus, providing a foundation in informatics in general.

NURS 514 focuses on providing that foundational link between nursing and informatics. This includes concepts related to nursing regulation, nursing care, patient care and clinical outcomes. The course description for NURS 514 was revised to include how informatics are used to coordinate and enhance patient care:

> Emphasis will be placed on the use of informatics, communications technologies, and the electronic health record to facilitate the coordination and enhancement of quality patient care.

| **Clarification and specificity with respect to the differences between Nursing Informatics and Health Informatics needs to be fleshed out in the curriculum.** | Nurs 513: The terms health information and health information were separated. This includes emerging applications in health informatics, health information, and patient care technologies that enhance patient care.

NURS 740: The use of “health information” was included in the course description. Health equity, community health assessment, epidemiologic methods, health education, and the use of communication and health information technologies to promote population health will be discussed.

**Consultation with someone with expertise in nursing informatics will be needed to further address this comment.**

| **The Department should clearly define how the determination of healthcare knowledge/experience be made as a prerequisite for HIMSS742.** | The department is currently working with DSU to remove the prerequisite requirement. |
### RESPONSE TO REPORT EVALUATION

<table>
<thead>
<tr>
<th>Human factors related to human interaction with technology and usability are a part of the user experience (ANCC). There is limited reference to education in these areas. In Nurs767, workflow usability is the only mention of usability, this is not user experience or system usability.</th>
<th>NURS 767: ANCC criteria were partially addressed within the revision of the course description: Human factors related to human interaction with technology and usability are included. In order to fully meet the ANCC requirements more content in this area will need to be included in the curriculum. It is the recommendation of the team that additional content related to human interaction are included in the HIMS 742 course that is currently under development.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Sound Preparation for career</strong></td>
<td><strong>ANCC Category I (Foundations) is extensively covered in the revisions. Refer to Appendix A for identification of how each course meets the ANCC exam criteria.</strong>  The department review found many gaps in the curriculum related to Category II (System Design Life Cycle) and Category III (Data Management and Technology). Whether this information is absent, or whether the team does not have the expertise to identify it within the curriculum is unclear. The department has reached out to DSU for guidance on how/where to best address the remaining ANCC exam criteria.</td>
</tr>
<tr>
<td>The proposed MSN program is more closely aligned to the AACN Essentials than the ANCC exam. The current language used in the course descriptions will be dissimilar to the language used by the ANCC. A recommendation is made to integrate more of the language from ANCC to better help the students to understand question intent and be prepared for the exam.</td>
<td>The only course description that discusses preparation for the role of an informatics nurse is Nurs514 and it reads as if it is a theory course. This course content is critical to preparation for the role, yet it has the fewest number of credits indicating less time spent on learning content.  NURS 788: The course description for the practicum project was revised to include role preparation: The project will focus on role preparation and emphasize the application of nursing informatics to improve patient and/or population health outcomes.  NURS 535: This newly developed leadership course will provided a focus on role preparation from a leadership standpoint: This course will prepare students for an advanced practice leadership role in nursing informatics and focus on effective communication in inter-collaborative teams.</td>
</tr>
</tbody>
</table>
### More details are needed on objectives for Nurs788 – how will the project be structured to provide an opportunity for students to apply what they have learned in the clinical environment?

The course description was revised to:

*Independent research problems/projects that lead to research or design paper, but not to a thesis. The plan of study is negotiated by the faculty member and the candidate. The project will focus on role preparation and emphasize the application of nursing informatics to improve patient and/or population health outcomes.*

### Nursing informatics is specific within the larger framework of health informatics, therefore within the curriculum more concentration on use of technology to improve patient outcomes and patient care are needed in preparation.

NURS 511, NURS 513, NURS 514, NURS 740, NURS 767, NURS 788: Course descriptions were revised to link the use of technology to enhance patient care and improve health outcomes of patients and populations.
Appendix C

MSN and DNP Graduate Degree Faculty Roster

Additional CV information is available upon request.

**USD Department of Nursing**

Dr. Lisa Feller, Associate Professor and Pierre Academic Site Director, Nursing

*EdD; University of South Dakota; 2014*
*MS; South Dakota State University; 1995*
*BS; Morningside College; 1986*

[https://www.usd.edu/faculty-and-staff/Lisa-Feller](https://www.usd.edu/faculty-and-staff/Lisa-Feller)

Dr. Cheryl Fischbach, Lecturer, Nursing

*DNP; Chamberlain College of Nursing; 2016*
*MS; University of Phoenix; 2005*
*BS; Mount Marty College; 2001*

[https://www.usd.edu/faculty-and-staff/Cheryl-Fischbach](https://www.usd.edu/faculty-and-staff/Cheryl-Fischbach)

Dr. Tamela Kisner, Lecturer, Nursing

*EdD; University of South Dakota; 2014*
*MS; University of Wyoming; 2005*
*BS; South Dakota State University; 2001*

[https://www.usd.edu/faculty-and-staff/Tami-Kisner](https://www.usd.edu/faculty-and-staff/Tami-Kisner)

Dr. Anne Kleinhesselink, Associate Chair of Academics & Academic Site Director, Nursing

*PhD; Walden University; 2019*
*MS; Walden University; 2011*
*BS; University of Iowa; 2005*

[https://www.usd.edu/faculty-and-staff/Anne-Kleinhesselink](https://www.usd.edu/faculty-and-staff/Anne-Kleinhesselink)

Dr. Sabina Kupershmidt, Assistant Professor, Nursing

*PhD; Vanderbilt University; 1990*
*BS; Middle Tennessee State University; 1984*

[https://www.usd.edu/faculty-and-staff/Sabina-Kupershmidt](https://www.usd.edu/faculty-and-staff/Sabina-Kupershmidt)

Dr. Anne Pithan, Chair and Assistant Professor, Nursing

*DNP; Allen College; 2017*
*MS; Clarkson College; 1994*
*BS; Augustana College; 1987*

[https://www.usd.edu/faculty-and-staff/Anne-Pithan](https://www.usd.edu/faculty-and-staff/Anne-Pithan)
Dr. Emily Smith, Student Services Director, Nursing
_DNP; Graceland University; 2019_  
_MS; Grand Canyon University; 2011_  
_BS; South Dakota State University; 2008_  
[https://www.usd.edu/faculty-and-staff/Emily-M-Smith](https://www.usd.edu/faculty-and-staff/Emily-M-Smith)

Dr. Amy Smith, Lecturer, Nursing
_PhD; University of Nevada; 2014_  
_MS; Walden University; 2007_  
_BS; South Dakota State University; 1999_  
[https://www.usd.edu/faculty-and-staff/Amy-Smith01](https://www.usd.edu/faculty-and-staff/Amy-Smith01)

Dr. Susan Strobel, Assistant Professor, Nursing & Public Health
_DNP; University of Colorado; 2018_  
_MPH; University of Minnesota; 1992_  
[https://www.usd.edu/faculty-and-staff/Susan-Strobel](https://www.usd.edu/faculty-and-staff/Susan-Strobel)

Dr. Dawn Warren, Instructor & Rapid City Academic Site Director, Nursing
_EdD; University of South Dakota; 2014_  
_MS; South Dakota State University; 2000_  
_BS; University of South Dakota; 1991_  

Dr. Jean Yockey, Assistant Professor, Nursing
_PhD; University of Northern Colorado; 2015_  
_MS; Idaho State University; 2001_  
_BS; Lewis Clark State College; 1985_  
[https://www.usd.edu/faculty-and-staff/Jean-Yockey](https://www.usd.edu/faculty-and-staff/Jean-Yockey)

**USD Beacom School of Business:**

Dr. Chet Barney, Associate Professor
_PhD; New Mexico State University; 2013_  
_MISM; Brigham Young University; 2003_  
_BA; Utah State University; 2001_  
[https://www.usd.edu/faculty-and-staff/Chet-Barney](https://www.usd.edu/faculty-and-staff/Chet-Barney)

Dr. Bart Hanus, Assistant Professor, Decision Science
_PhD; University of North Texas; 2014_  
_MS; University of North Texas; 2008_  
_MS; Nicolaus Copernicus University; 2004_  
_BS; Torun School of Banking; 2002_  
[https://www.usd.edu/faculty-and-staff/Bart-Hanus](https://www.usd.edu/faculty-and-staff/Bart-Hanus)
Dr. Mark Yockey, Chair & Associate Professor

*PhD; Washington State University; 2006*
*MA; University of Florida; 1998*
*BA; Brigham Young University; 1982*

https://www.usd.edu/faculty-and-staff/Mark-Yockey
Appendix D

Financial Impact

See Appendix B on the New Graduate Program Proposals
Appendix E

USD Nursing Graduate Program Workload Policy

As set forth in BOR policy, workload is based on a total of 30 workload units of undergraduate instruction or its equivalent per academic year for a full-time faculty member (USD Workload Policy).

**Lecturer Track Faculty:** Full-time lecturer track faculty are typically assigned 29 workload units (wlu) (97%) per academic year (9 months) for teaching and 1 wlu (3%) for service.

**Tenure Track Faculty:** Full-time tenure track faculty are typically assigned 18 wlus (60%) per academic year for teaching, 9 wlus (30%) for Scholarship, and 3 (10%) wlus for service.

**General Service** (Professional development): .5 flexible wlu per semester for general service for non-tenure track faculty. (this is assigned for serving as adhoc members on curriculum, PAC or any other taskforce or other special assignment etc.). Tenure Track faculty receive 1.5 (10%) wlu per semester for general service. please refer to the faculty handbook and Appendix G for expectations.

**Special Assignments:** Faculty with identified deliverables related to the School of Health Sciences, University or Department of Nursing strategic goals and initiatives may negotiate with their site director for workload release. The chair of the department must approve all negotiated workload releases.

**Graduate Teaching**

**Face-to-face Theory Teaching:** 1.34 wlu = 1 credit hour; (4/3 at the rate of undergraduate).

**Online Theory Teaching:** 1.34 wlu = 1 credit hour, (4/3 at the rate of undergraduate). Max number of students 20 per section.

**Practicum Supervision:** 1 WLU per 5 graduate students (.20 WLU per graduate student)

**Master’s Project Supervision:** 1 WLU per 5 graduate students (.20 WLU per graduate student)

**DNP Project committee**
- Committee Advisor – 1 WLU per DNP student
- Committee Member –.5 WLU per DNP student

| The Clinical director oversees all program clinical affairs (adjuncts/preceptors/affiliation agreements/placement and scheduling) | 0.5FTE |