June 13, 2022

Dr. Fatemeh Shahedipour-Sandvik
Provost-in-Charge
State University of New York
State University Plaza
Albany, NY 12246

Dear Dr. Shahedipour-Sandvik:

On behalf of the faculty at the University at Albany, I am pleased to transmit the attached proposal seeking approval and registration of a Master of Science program in Population Health Nursing. This proposal has been fully approved through campus governance.

We will be thankful for efforts by your staff in the Office of Program Review for timely review of this updated proposal and transmittal to the NYS Department of Education. Should there be any technical questions or the need for additional materials, please have inquiries directed to Colleen Davis, Assistant Dean of the Graduate School (cdavis@albany.edu). We thank you for your on-going support.

Sincerely,

Carol H. Kim
Provost and Senior Vice President for Academic Affairs

Enclosure
c.   Dean Kevin Williams, Vice Provost & Dean of the Graduate School
     Dean Mary Gallant, Interim Dean of the School of Public Health

New Program Proposal: Graduate Degree Program

Form 2B
Version 2016-10-13

This form should be used to seek SUNY's approval and New York State Education Department's (SED) registration of a proposed new academic program leading to master's or doctoral degree. Approval and registration are both required before a proposed program can be promoted or advertised, or can enroll students. The campus Chief Executive or Chief Academic Officer should send a signed cover letter and this completed form (unless a different form applies[1]), which should include appended items that may be required for Sections 1 through 6, 9 and 10 and MPA-1 of this form, to the SUNY Provost at *program.review@suny.edu*. The completed form and appended items should be sent as a single, continuously paginated document.[2] If Sections 7 and 8 of this form apply, External Evaluation Reports and a single Institutional Response should also be sent, but in a separate electronic document. Guidance on academic program planning is available here.

Table of Contents

NOTE: Please update this Table of Contents automatically after the form has been completed. To do this, put the cursor anywhere over the Table of Contents, right click, and, on the pop-up menus, select "Update Field" and then "Update Page Numbers Only." The last item in the Table of Contents is the List of Appended and/or Accompanying Items, but the actual appended items should continue the pagination.

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[1]Use a different form if the proposed new program will lead to a graduate degree or any credit-bearing certificate; be a combination of existing registered programs (i.e. for a multi-award or multi-institution program); be a breakout of a registered track or option in an existing registered program; or **lead to certification as a classroom teacher, school or district leader, or pupil personnel services professional** (e.g., school counselor).

[2]This email address limits attachments to 25 MB. If a file with the proposal and appended materials exceeds that limit, it should be emailed in parts.

Section 1. General Information		
a) Institutional Information	Date of Proposal:	November 1, 2021
	Institution's 6-digit SED Code:	**210500**
	Institution's Name:	**University at Albany**
	Address:	**1400 Washington Avenue, Albany, NY 12222**
	Dept of Labor/Regent's Region:	**Capital Region**
b) Program Locations	List each campus where the entire program will be offered (with each institutional or branch campus 6-digit SED Code): **210500**	
	List the name and address of off-campus locations (i.e., extension sites or extension centers) where courses will offered, **or check here [X] if not applicable**:	
c) Proposed Program Information	Program Title:	Population Health Nursing
	Award(s) (e.g., M.A., Ph.D.):	M.S.
	Number of Required Credits:	Minimum [42] If tracks or options, largest minimum [42]
	Proposed HEGIS Code:	[1203.10]
	Proposed 6-digit CIP 2010 Code:	[51.3811]
	If the program will be accredited, list the accrediting agency and expected date of accreditation: Commission on Collegiate Nursing Education (CCNE); The accrediting agency begins the process after students are admitted so that accreditation can be secured before first students graduate.	
	If applicable, list the SED professional licensure title(s)[3] to which the program leads:	
d) Campus Contact	Name and title: Colleen Davis, Assistant Dean of the Graduate School	
	Telephone: (518) 437-5063 E-mail: cdavis@albany.edu	
e) Chief Executive or Chief Academic Officer Approval	**Signature affirms that the proposal has met all applicable campus administrative and shared governance procedures for consultation, and the institution's commitment to support the proposed program.** *E-signatures are acceptable.*	
	Name and title: Carol H. Kim, Provost and Senior Vice President for Academic Affairs	
	Signature and date: *[signature]* 6/27/2022	
	If the program will be registered jointly[4] with one or more other institutions, provide the following information for each institution:	
	Partner institution's name and 6-digit SED Code:	
	Name, title, and signature of partner institution's CEO (or **append** a signed letter indicating approval of this proposal):	

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[3] If the proposed program leads to a professional license, a specialized form for the specific profession may need to accompany this proposal.
[4] If the partner institution is non-degree-granting, see SED's CEO Memo 94-04.

Attestation and Assurances

On behalf of the institution, I hereby attest to the following:

That all educational activities offered as part of this proposed curriculum are aligned with the institutions' goals and objectives and meet all statutory and regulatory requirements, including but not limited to Parts 50, 52, 53 and 54 of the Rules of the Board of Regents and the following specific requirements:

That credit for study in the proposed program will be granted consistent with the requirements in §50.1(o).

That, consistent with §52.1(b)(3), a reviewing system has been devised to estimate the success of students and faculty in achieving the goals and objectives of the program, including the use of data to inform program improvements.[5]

That, consistent with §52.2(a), the institution possesses the financial resources necessary to accomplish its mission and the purposes of each registered program, provides classrooms and other necessary facilities and equipment as described in §52.2(a)(2) and (3), sufficient for the programs dependent on their use, and provides libraries and library resources and maintains collections sufficient to support the institution and each registered curriculum as provided in §52.2(a)(4), including for the program proposed in this application.

That, consistent with 52.2(b), the information provided in this application demonstrates that the institution is in compliance with the requirements of §52.2(b), relating to faculty.

That all curriculum and courses are offered and all credits are awarded, consistent with the requirements of §52.2(c).

That admissions decisions are made consistent with the requirements of §52.2(d)(1) and (2) of the Regulations of the Commissioner of Education.

That, consistent with §52.2(e) of the Regulations of the Commissioner of Education: overall educational policy and its implementation are the responsibility of the institution's faculty and academic officers, that the institution establishes, publishes and enforces explicit policies as required by §52.2(e)(3), that academic policies applicable to each course as required by §52.2(e)(4), including learning objectives and methods of assessing student achievement, are made explicit by the instructor at the beginning of each term; that the institution provides academic advice to students as required by §52.2(e)(5), that the institution maintains and provides student records as required by §52.2(e)(6).

That, consistent with §52.2(f)(2) of the Regulations of the Commissioner of Education, the institution provides adequate academic support services and that all educational activities offered as part of a registered curriculum meet the requirements established by state, the Rules of the Board of Regents and Part 52 of the Commissioner's regulations.

CHIEF ADMINISTRATIVE or ACADEMIC OFFICER/ PROVOST	
Signature	Date
	6/27/2022
Type or print the name and title of signatory	Phone Number
Carol H. Kim, Provost and Senior Vice President for Academic Affairs	518-956-8030

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[5] The NY State Education Department reserves the right to request this data at any time and to use such data as part of its evaluation of future program registration applications submitted by the institution.

Section 2. Program Information

2.1. Program Format

Check all SED-defined formats, mode and other program features that apply to the **entire program**.

a) **Format(s):** [ ]Day [ ]Evening   [ ]Weekend   [ ]Evening/Weekend   [X]Not Full-Time

b) **Modes**: [ ]Standard [ ]Independent Study [ ]External [ ]Accelerated [X]Distance Education
NOTE: If the program is designed to enable students to complete 50% or more of the course requirements through distance education, check Distance Education, see Section 10, and append a Distance Education Format Proposal.

c) **Other**: [ ] Bilingual [ ] Language Other Than English [ ] Upper Division [ ] Cooperative [ ] 4.5 year [ ] 5 year

2.2. Related Degree Program

NOTE: This section is not applicable to a program leading to a graduate degree.

2.3. Program Description, Purposes and Planning

a)   What is the description of the program as it will appear in the institution's catalog?

The Master of Science in Population Health Nursing is designed to prepare advanced population health nurses to address social determinants of health, with a particular focus on addressing the health needs of vulnerable populations and communities. The program will offer a concentration in health disparities, which the University has a track record of teaching in the School of Public Health and has significant NIH funding to support through the Center for the Elimination of Minority Health Disparities [CEMHD]. It is a distinctive multi-disciplinary program, drawing on faculty strengths from the School of Public Health and the Center, which is an institution-wide multi-School center. The curriculum is designed to provide the critical content and competencies identified in Quad Council Coalition Community/Public Health Nursing [C/PHN] Competencies (https://www.cphno.org/wp-content/uploads/2020/08/QCC-C-PHN-COMPETENCIES-Approved_2018.05.04_Final-002.pdf) and 2011 AACN Essentials for Master's Nursing Education (https://www.aacnnursing.org/portals/42/publications/mastersessentials11.pdf. Students acquire advanced competency in population and community needs assessment, epidemiology and biostatistics, systems thinking and planning, social and behavioral aspects of health, and multicultural competence. Students have the opportunity to gain specialized knowledge and skills in the public health strategies for eliminating health disparities.

The 42-credit program provides education for nurses with bachelor's degrees to become advanced population health nurses, and attain career opportunities in a variety of settings, including public health departments, state or county departments of health, community health organizations, occupational health facilities, correctional facilities, and schools. The curriculum includes 9 credits of core coursework in nursing theory and research, 9 credits of core coursework in population health, 15 credits of clinical experience (480 hours including a capstone experience), and 9 credits of coursework in the concentration. The program is designed to be a BS to Masters of Nursing program, providing an advanced degree to registered nurses with a BS. The program will be delivered via distance learning with in-person clinical experiences.

b)   What are the program's educational and, if appropriate, career objectives, and the program's primary student learning outcomes (SLOs)? *NOTE: SLOs are defined by the Middle States Commission on Higher Education in the Characteristics of Excellence in Higher Education (2006) as "clearly articulated written statements, expressed in observable terms, of key learning outcomes: the knowledge, skills and competencies that students are expected to exhibit upon completion of the program."*

Population health educational programs designed to produce Advanced Public Health Nurses are scarce[1]. The COVID-19 pandemic has highlighted the need for nursing and others to "embrace the interconnection" between medicine and public health[2]. In addition, COVID's inequitable impact on people of color and indigenous groups[3] demonstrates the importance of applying expertise from nursing and public health systems to work in and with communities and other professional disciplines to address these complex issues[1,4].

Within nursing there have been calls for undergraduate and graduate prepared nurses to have knowledge and skills in population health that will support their assessing, addressing, and advocating for the health of the populations they serve across the care continuum[5,6,7].

Bekemeier, et al (2021) states that there is inadequate development and support of academic programs that go beyond the mere minimum fundamentals of population health important for nurses. Such additional programs and curricula are critical for supporting the development of the advanced practice competencies required to address social, economic, and environmental determinants of health, to improve structures and systems in communities, and to address public health crises such as the COVID-19 pandemic.

A major goal stated in the Future of Nursing 2020-2030 Report (https://www.nap.edu/resource/25982/Highlights_Future%20of%20Nursing_4.30.21_final.pdf) is the achievement of health equity in the United States built on strengthened nursing capacity and expertise. In the achievement of that goal, was the recognition that community and public health nurses play a vital role in advancing health equity.

The importance of public health nursing has also been reinforced by the Nursing Community Coalition and is supported by the F**uture Advancement of Academic Nursing (FAAN) Act S.246/H.R.851 (**https://131a058d-9186-c34a-b6f8-7f4cb1fce3f0.filesusr.com/ugd/148923_d0266ae06a004eceb337949af3f4de95.pdf) which supports that nurses be incorporated into all aspects of public health infrastructure needs, and that our public health departments have at least one nurse on staff, with a preference for nurses who have been specifically educated in public health.

The Master of Science in Population Health Nursing Program planned for the University at Albany addresses these needs. It is structured around achieving the outcomes based on the American Association of Colleges of Nursing (AACN) Essentials of Master's Education in Nursing (2011). Graduates of the program will be able to:

[1] Bekemeier, B.. Kuehnett, P., Zahner, S., Johnson, K., Kaneshiro, J., & Swider, S. (2021). A critical gap: Advanced practice nurses focused on the public's health. *Nursing Outlook,* 1-10

[2] Brownson, R. C., Burke, T. A., Colditz, G. A., & Samet, J. M. (2020). Reimagining public health in the aftermath of a pandemic. American Journal of Public Health, e1–e6, doi:10.2105/ajph.2020.305861.

[3] Webb Hooper, M., Napoles, A. M., & Perez-Stable, E. J (2020). COVID-19 and racial/ethnic disparities. Jama, doi:10.1001/jama.2020.8598.

[4] Nardi, D., Waite, R., Nowak, M., Hatcher, B., HinesMartin, V., & Stacciarini, J. R. (2020). Achieving health equity through eradicating structural racism in the United States: A call to action for nursing leadership. Journal of Nursing Scholarship, 52(6), 696–704, doi:10.1111/jnu.12602.

[5] Hermer, J., Hirsch, A., Bekemeier, B., Nyirati, C., Wojnar, D., Wild, L., . . ., Oneal, G. (2020). Integrating population health into nursing education: The process of gaining commitment from Washington's nursing deans and directors. Journal of Professional Nursing, 36 (2), 6–12, doi:10.1016/j.profnurs.2019.08.004.

[6] Robert Wood Johnson Foundation. (2019). *Nursing Education and the Path to Population Health Improvement*. Retrieved from https://campaignforaction.org/wp-con tent/uploads/2019/03/NursingEducationPathtoHealth Improvement.pdf.

[7] Storfjell, J. L., Winslow, B. W., & Saunders, J. S. D. (2017). Catalysts for change: Harnessing the power of nurses to build population health for the 21st century. Retrieved from https://www.rwjf.org/en/library/ research/2017/09/catalysts-for-changeÀharnessingthe-power-of-nurses-to-build-population-health.html.

- Integrate advanced knowledge from nursing, related sciences, and humanities to provide a theoretical framework for advanced practice in population health nursing (Element I)
- Apply organizational theories and systems thinking to improve the quality, cost-effectiveness and safety outcomes of practice decisions and initiatives (Elements II & III)
- Demonstrate competencies to develop, implement, and evaluate evidence-based interventions and conduct a scholarly inquiry (Element IV)
- Apply knowledge of informatics to coordinate and improve programs and systems of care (Element V)
- Incorporate advanced nursing practice standards to advocate for health policy and affect systems-level change within populations, healthcare environments, and organizational systems (Element VI)
- Apply evidence-based and interprofessional approaches for the design and delivery of comprehensive, culturally competent care to individuals/families, communities, and population (Elements VII & VIII)
- Practice in an advanced nursing role in collaboration with other disciplines to improve population health outcomes (Element IX)

c) How does the program relate to the institution's and SUNY's mission and strategic goals and priorities? What is the program's importance to the institution, and its relationship to existing and/or projected programs and its expected impact on them? As applicable, how does the program reflect diversity and/or international perspectives? For doctoral programs, what is this program's potential to achieve national and/or international prominence and distinction?

The proposed program fits well with SUNY's mission and strategic goals and priorities as well as the strategic plan and mission of the University at Albany. The mission of the University is "to empower our students, faculty, and campus communities to author their own success." Two values that underpin this mission are inclusive excellence – to value diversity in all forms, academic freedom, and the rights, dignity, and perspectives of all individuals – and common good – to work collectively to benefit our communities and create a sustainable way of life on earth. The Master of Science in Population Health Nursing reflects these values by training the next generation of nurses to address the health needs of vulnerable populations and communities and help eliminate health disparities. In this manner, it follows the Universities vision of creating a better, more equitable and sustainable way of life.

The Institute of Medicine of the National Academies notes in The Future of Nursing 2020-2030 report that "competencies needed to practice [nursing] have expanded, especially in the domains of community and public heath, geriatrics, leadership, health policy, system improvement and change, research and evidence-based practice, and teamwork and collaboration." UAlbany and its School of Public Health has existing excellent research in various health-related areas provides unique research and training opportunities for our nursing students with its over 35-year partnership with the New York State Department of Health (NYSDOH) and Wadsworth Laboratories. This established relationship is unique, as it is thought to be the only fully accredited School of Public Health in the U.S. that exists as a partnership between a research university and a state department of health. The benefits are many. The model most like it is the relationship between the Centers for Disease Control and Prevention and Emory University. This relationship with the DOH will offer unique and unmatched internships, career and community service opportunities, and opportunities for nursing students who are local and taking the program. Embedded into the Master's curriculum are opportunities that will prepare students to meet the Future of Nursing 2020-2030 goals.

The M.S. program will be housed in the School of Public Health, where it will benefit from internationally recognized expertise in public health, health policy, environmental health sciences, behavioral sciences, and epidemiology. The School of Public Health's mission is to offer unique and extensive experiential learning and public health practice opportunities and to conduct timely and impactful research to improve comprehensive wellness and eliminate health inequities in NY State, the nation, and around the world. The School also has experience delivering online degrees, as it has offered a fully online MPH program since 2012. The mission, culture, and existing programs of the School will provide an excellent supporting framework for a Master's of Science program in Population Health Nursing.

For over a decade, the University-wide Center for the Elimination of Minority Health Disparities (CEMHD) at the University at Albany is a collaborative effort focusing on minority health disparities in the cities and towns of New York. Faculty associated with CEMHD work in partnership with communities, health care providers, and state and county departments to identify community health concerns and sources of disparities, plan strategies to alleviate them, and test their

effectiveness. Many associated faculty are Public Health faculty members. With dozens of community partners (https://www.albany.edu/cemhd/about.php) faculty associated with the CEMHD will expose students in the Master of Science in Population Health Nursing program to cutting edge research on health disparities and prepare them to participate in community-based research and interventions. This is especially true in the Concentration Courses in Health Disparities which serve as the elective choices in the curriculum.

The proposed program also directly aligns with several of the Six Big Ideas in the Power of SUNY strategic plan. It aligns with the Healthier New York focus of the Power of SUNY by addressing the shortages in the State's healthcare workforce. The focus on population health fits with SUNY's agenda to reduce disparities in State's healthcare system and promote healthier lifestyles. The M.S. program is consistent with the idea of a Seamless Education Pipeline, providing advanced educational opportunities in the "cradle to career" pipeline. It fits with SUNY's particular focus on developing highly effective healthcare workers.

> **d)** How were faculty involved in the program's design? Describe input by external partners, if any (e.g., employers and institutions offering further education?

The Director of the Nursing Program has been the primary designer of this program. One of the adjunct professors in the School of Public Health, who is a public health nurse and educator, assisted with the design of the three core courses for the discipline.

> **e)** How did input, if any, from external partners (e.g., educational institutions and employers) or standards influence the program's design? If the program is designed to meet specialized accreditation or other external standards, such as the educational requirements in Commissioner's Regulations for the profession, append a side-by-side chart to show how the program's components meet those external standards. If SED's Office of the Professions requires a specialized form for the profession to which the proposed program leads, append a completed form at the end of this document.

The Community/Public Health Nursing (C/PHN) Competencies, established by the Quad Council Coalition of Public Health Nursing Organizations in 2018, are organized by eight domains that are foundational to specialty practice and include three tiers or levels of mastery—with Tier 2 and Tier 3 representing graduate-level "management or supervisory" and "senior management or leadership" levels, respectively (Quad Council Coalition Competency Review Task Force, 2018, p. 3). These domains and the individual skills associated with each are incorporated into the three Population Health Nursing courses taken toward the end of the program. The eight domains are competencies for analytic assessment, policy development and program planning, communication, cultural humility, community development, public health science, financial planning and management, and leadership and systems thinking in collaboration with communities and populations. Please refer to the curriculum map (Appendix 1) which provides a crosswalk showing how the program components address these competencies.

> **f)** Enter anticipated enrollments for Years 1 through 5 in the table below. How were they determined, and what assumptions were used?
>
> It is anticipated that the majority of students will enroll in the program on a part-time basis (50% FTE). These figures assume part-time program completion in 3 years, full-time program completion in 2 years and a loss of one part-time student each year.

Year	Anticipated Headcount Enrollment			Estimated FTE
	Full-time	**Part-time**	**Total**	
1	0	15	15	7.5
2	1	34	35	18
3	3	57	60	31.5
4	5	67	72	38.5
5	8	72	80	44

g) Outline all curricular requirements for the proposed program, including prerequisite, core, specialization (track, concentration), internship, capstone, and any other relevant component requirements, but do not list each General Education course.

All students will take a 9-credit core in nursing, a 9-credit core in population health, 15 credits of clinical experience, and 9 credits of coursework in the concentration. During the Population Health Nursing clinical experience, the student will work with a preceptor to complete a capstone experience. The student will complete a project related to their program concentration that demonstrates application of specialty advanced practice nursing role and knowledge.

Course Title	Credits	Course Title	Credits
Core Courses – Nursing	**9**	**Concentration Courses**	**9**
NSG 500 Theoretical Foundations of Nursing Science	3	**Health Disparities Concentration – Choose 3 courses from the following:**	
NSG 512 Nursing Research Methods	3	HPM 525 Social and Behavioral Aspects of Health	3
NSG 514 Health Care Policy & Systems Leadership	3	HPM 562 Health Communication and Health Disparities	3
		HPM 620 Health Disparities and Vulnerable Populations	3
Core Courses – Population Health	**9**	HPM 627 Program Development in Health Promotion	3
EPI 551 Basic Principles of Statistical Inference	3		
EPI 501 Principles and Methods of Epidemiology I	3		
EPI 503 Principles of Public Health	3		
Clinical Experience Courses	**15**		
NSG 600 Public/Population Health Nursing I	5		
NSG 610 Public/Population Health Nursing II	5		
NSG 650 Public/Population Health Nursing III (capstone)	5		
		Total required credits: 42	

h) Program Impact on SUNY and New York State

h)(1) *Need:* What is the need for the proposed program in terms of the clientele it will serve and the educational and/or economic needs of the area and New York State? How was need determined? Why are similar programs, if any, not meeting the need?

Nurses are in high demand in New York State and across the country. The COVID-19 pandemic has underscored the shortage of healthcare professionals in the State and the critical role that they place in responding to emergencies. There is also a clear need for an MSN in Population Health Nursing, specifically, in New York State. The United States spends more on health care than any other country but has poorer health outcomes and shorter life expectancy levels. There is a growing recognition that the discrepancy between what we spend on healthcare and the poor outcomes we experience is due to a lack of universal

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access to health care and a poor understanding of the social determinants of health (Future of Nursing, 2019; Storfjell et al., 2017). In response, there has been a push by professional associations to include population health knowledge and skills in the medical curriculum, including for nurses. Storfjell et al. (2017) argued that nursing education must move beyond the traditional individualistic to medical care (the "downstream" approach) and view individuals and families within their environmental context, understanding and assessing how their health is affected by their behavior, community, and environment. Population health is predicted to be an important part of nursing education in the next decade and there are very few MSN programs in New York that incorporate population health in their curriculum.

Graduates with an M.S. in Population Health Nursing are likely to be employed in jobs that provide health care to community members and address community health issues ranging from infectious diseases to substance abuse, focusing on prevention and education as well as treatment. They often work as part of a team of health care professionals, may work in a clinic, and may travel within a community or between different communities. Analyses conducted using burningglass® Technologies for NYS and Massachusetts with the same CIP codes revealed 403 job postings in New York for the title of public health nurse, community nurse, or occupational health nurse. This was average demand for all occupations in New York for 2021, but projected growth is over 18% for the next 10 years (high relative growth for the State). Graduates may also find employment as public health educators, disaster specialists, managed care administrator, and infectious disease manager. The top 5 industries that hire Population Health Nurses are hospitals, insurance carriers, government (State, country) agencies, continuing care and assisted living facilities, and home health care services. The median annual salary in New York and Massachusetts for graduates is projected at $93k, well above the average salary for the two states.

h)(2) *Employment:* For programs designed to prepare graduates for immediate employment, use the table below to list potential employers of graduates that have requested establishment of the program and state their specific number of positions needed. If letters from employers support the program, they may be **appended** at the end of this form.

Employer	Need: Projected positions	
	In initial year	In fifth year

h)(3) *Similar Programs:* Use the table below to list similar programs at other institutions, public and independent, in the service area, region and state, as appropriate. Expand the table as needed. *NOTE: Detailed program-level information for SUNY institutions is available in the Academic Program Enterprise System (APES) or Academic Program Dashboards. Institutional research and information security officers at your campus should be able to help provide access to these password-protected sites. For non-SUNY programs, program titles and degree information – but no enrollment data – is available from SED's Inventory of Registered Programs.*

Institution	Program Title	Degree	Enrollment
CUNY Hunter College	Community/Public Health Nursing	MS	<40
SUNY at Binghamton	Community Health Nursing*	MS	3

* Binghamton's Nursing MS with a concentration in Community Health Nursing is designed for nurse practitioners.

h)(4) ***Collaboration:*** Did this program's design benefit from consultation with other SUNY campuses? If so, what was that consultation and its result?

h)(5) ***Concerns or Objections:*** If concerns and/or objections were raised by other SUNY campuses, how were they resolved?

During the LOI comment period, SUNY Empire expressed concerns regarding the duplication of existing programs and competition for qualified faculty and clinical placements. Representatives from both institutions engaged in a productive discussion in June 2021, during which SUNY Empire's concerns were addressed and potential areas of collaboration were identified.

2.4. Admissions

a) What are all admission requirements for students in this program? Please note those that differ from the institution's minimum admissions requirements and explain why they differ.

In addition to having completed a college level statistics course, applicants are expected to have a BS in Nursing or pending BS in Nursing from an accredited institution. Students must have a BSN prior to matriculation as well as an unrestricted nursing license in the state that they practice. Transcripts and letters of recommendation will be required as a component of the application.

b) What is the process for evaluating exceptions to those requirements?

There are no exceptions to the requirement of a BSN.

c) How will the institution encourage enrollment in this program by persons from groups historically underrepresented in the institution, discipline or occupation?

The University at Albany's Vision, created with our strategic plan for 2018-2023, "Authoring our Success" ( ) is "To be the nation's leading ***diverse*** public research university—providing the leaders, the knowledge, and the innovations to create a better world." This statement shows the entire University's commitment to diversity in all our disciplines. Our analysis of enrollment ethnicity shows that steadily throughout the past 4 years, we have enrolled 55% or more undergraduate students who identify as an ethnic minority. With this commitment to our diverse population within the whole of the University at Albany, it will be a commitment within our nursing program as well.

University at Albany is a minority serving institution with many of our students belonging to historically underrepresented racial/ethnic groups and we expect that Masters in Community Health Nursing will represent a similar breakdown. We will be actively recruiting using a variety of means including online marketing. And we will be actively recruiting by visiting the many hospitals within our region. To increase enrollment of students from historically underrepresented groups, we will strive for faculty role models through aggressive recruitment of a diverse faculty.

According to a 2017 survey conducted by the National Council of State Boards of Nursing (NCSBN) and the Forum of State Nursing Workforce Centers, "Nurses from minority backgrounds represent 19.2% of the registered nurse (RN) workforce. Considering racial/ethnic backgrounds, the RN population is comprised of 80.8% white/Caucasian; 6.2% African American; 7.5% Asian; 5.3% Hispanic; 0.4% American Indian/Alaskan Native; 0.5% Native Hawaiian/Pacific Islander; 1.7% two or more races and 2.9% other nurses." (Enhancing Diversity in the Nursing Workforce Fact Sheet, 2017) .

According to AACN's report on *Enrollment and Graduations in Baccalaureate and Graduate Programs in*

Nursing ([https://www.aacnnursing.org/News-Information/Fact-Sheets/Enhancing-Diversity)](https://www.aacnnursing.org/News-Information/Fact-Sheets/Enhancing-Diversity) 34.7% of master's students. Given the track record at UAlbany we believe we can help to improve this and increase the number of underrepresented minority nurses.

d) What is the expected student body in terms of geographic origins (i.e., same county, same Regents Region, New York State, and out-of-state); academic origins; proportions of women and minority group members; and students for whom English is a second language?

We expect the largest draw to our program to be from the Capital Region and Upstate New York. However, because the program will be online we may have a greater catchment area. The proportion of women in the nursing profession and nursing programs is much higher than for men. In NYS there are 12.7 women nurses for every male (https://www.beckershospitalreview.com/hr/gender-ratio-of-nurses-across-50-states.html). The school's overall diversity and inclusion goal is to promote diversity and inclusion and commit to retention and success for all students and faculty through continued development of an inclusive teaching and research atmosphere with mentoring and support. Currently 21% of the master's students in the School of Public Health identify as a member of an underrepresented racial or ethnic group (African American, Hispanic, Native American, or Native Hawaiian). It is believed that the Population Health focus of the MSN will serve as an attractant to minority applicants.

The AACN (2018-19) has recommended that academic leaders work to balance the proportions of minority group members by identifying minority faculty recruitment strategies, encouraging minority leadership development, and advocating for programs that remove barriers to faculty careers. Our priority lines up with the national conversation about diversifying faculty within the nursing program. By adding graduate programs, we are in part, adding to the pool of potential faculty.

2.5. Academic and Other Support Services

a) Summarize the academic advising and support services available to help students succeed in the program.

The University requires mandatory advisement for all students, ensuring that each student connects with an advisor prior to registration for any term. As in many other graduate programs, academic advising will be provided by the faculty. Upon matriculation, each student will be assigned a faculty advisor, who will meet with the student each semester to discuss course selection for the following term. The administrative staff member for the program will provide students with registration numbers and general assistance regarding the registration process. As is the case for our MPH program, students' academic standing will be reviewed at the end of each term and students falling below the standards necessary for graduation (i.e. GPA of 3.0) will be notified and expected to develop an academic progress plan with their advisor outlining strategies for raising their GPA.

There is an extensive network of student support services on the UAlbany campus that are available to our students, both local and remote.

b) Describe types, amounts and sources of student financial support anticipated. Indicate the proportion of the student body receiving each type of support, including those receiving no support.

There is no specialized funding for master's students.

2.6. Prior Learning Assessment

If this program will grant credit based on Prior Learning Assessment, describe the methods of evaluating the learning and the maximum number of credits allowed, **or check here [✓] if not applicable**.

2.7. Program Assessment and Improvement

Describe how this program's achievement of its objectives will be assessed, in accordance with *SUNY policy*, including the date of the program's initial assessment and the length (in years) of the assessment cycle. Explain plans for assessing achievement of students learning outcomes during the program and success after completion of the program. **Append** at the end of this form, **a plan or curriculum map** showing the courses in which the program's educational and, if appropriate, career objectives – from Item 2.3(b) of this form – will be taught and assessed. *NOTE: The University Faculty Senate's* *Guide for the Evaluation of Undergraduate Programs* *is a helpful reference.*

The MS Nursing Program in Population Health Nursing will adhere to the evaluation program policies and guidelines set forth by the Office of Institutional Planning and Effectiveness, as well as those set forth by the nursing accrediting body, CCNE, and the accrediting body for Schools of Public Health, CEPH. UAlbany conducts program reviews on a seven-year cycle. However, since this is a new program an initial accreditation visit by CCNE will be scheduled at the completion of the first year of the program. The focus of this visit is to determine that the program is meeting the ACCN 2011 Essentials of Master's Degree in Nursing Education that address the domains and competencies for a graduate of a Master degree nursing program. These Essentials, which are the foundation of the program, are measured by the CCNE Standards for Accreditation for Master's Nursing Program which includes achievement of student learning outcomes and student success. Appendix 1 provides a table of the program's SLOs and indicates the courses/learning experiences that address each learning objective. These are also listed in each course syllabus.

Section 3. Program Schedule and Curriculum

Complete the **SUNY Graduate Program Schedule** to show how a typical student may progress through the program. This is the registered curriculum, so please be precise. Enter required courses where applicable, and enter generic course types for electives or options. Either complete the blank Schedule that appears in this section, or complete an Excel equivalent that computes all sums for you, found here. Rows for terms that are not required can be deleted.

*NOTES: The **Graduate Schedule** must include all curriculum requirements and demonstrate that expectations from in*
Regulation 52.2 http://www.highered.nysed.gov/ocue/lrp/rules.htm are met.

Special Cases for the Program Schedules:
☐ *For a program with multiple tracks, or with multiple schedule options (such as full-time and part-time options), use one Program Schedule for each track or schedule option. Note that licensure qualifying and non-licensure qualifying*
options cannot be tracks; they must be separate programs.
☐ *When this form is used for a multi-award and/or multi-institution program that is not based entirely on existing programs, use the schedule to show how a sample student can complete the proposed program. NOTE: Form 3A, Changes to an Existing Program, should be used for new multi-award and/or multi-institution programs that are based entirely on existing programs. SUNY policy governs the awarding of two degrees at the same level.*

a) If the program will be offered through a nontraditional schedule (i.e., not on a semester calendar), what is the schedule and how does it impact financial aid eligibility? *NOTE: Consult with your campus financial aid administrator for information about nontraditional schedules and financial aid eligibility.*

b) For each existing course that is part of the proposed graduate program, **append** a catalog description at the end of

this document.

Please see Appendix 2 for catalog descriptions of existing courses.

c) For each new course in the graduate program, **append** a syllabus at the end of this document. *NOTE: Syllabi for all courses should be available upon request. Each syllabus should show that all work for credit is graduate level and of the appropriate rigor. Syllabi generally include a course description, prerequisites and corequisites, the number of lecture and/or other contact hours per week, credits allocated (consistent with [SUNY policy on credit/contact hours](#)), general course requirements, and expected student learning outcomes.*

Please see Appendix 3 for new course syllabi.

d) If the program requires external instruction, such as clinical or field experience, agency placement, an internship, fieldwork, or cooperative education, **append** a completed [External Instruction](#) form at the end of this document

Please see Appendix 4 for the External Instruction form.

SUNY Graduate Program Schedule (*OPTION: You can insert an Excel version of this schedule AFTER this line, and delete the rest of this page.*)

Program/Track Title and Award: <u>Population Health Nursing MS PART TIME STUDENT SCHEDULE</u>

a) Indicate **academic calendar** type: [✓] Semester [ ] Quarter [ ] Trimester [ ] Other (describe):

b) **Label each term in sequence**, consistent with the institution's academic calendar (e.g., Fall 1, Spring 1, Fall 2)

c) Use the table to show **how a typical student may progress through the program**; copy/expand the table as needed.

d) Complete the last row to show program totals and comprehensive, culminating elements. **Complete all columns that apply to a course.**

Fall 1

Course Number & Title	Credits	New	Prerequisite(s)
NSG 500 Theoretical Foundations of Nursing Science	3	X	
EPI 503 Principles of Public Health	3		
Term credit total:	6		

Spring 1

Course Number & Title	Credits	New	Prerequisite(s)
EPI 501 Principles and Methods of Epidemiology I	3		
NSG 512 Nursing Research Methods	3	X	College level Statistics Course
Term credit total:	6		

Summer 1

Course Number & Title	Credits	New	Prerequisite(s)
Elective 1 of 3*	3		
Term credit total:	3		

Fall 2

Course Number & Title	Credits	New	Prerequisite(s)
NSG 514 Health Care Policy & Systems Leadership	3	X	
EPI 551 Basic Principles of Statistical Inference	3		
Term credit total:	6		

Spring 2

Course Number & Title	Credits	New	Prerequisite(s)
Elective 2 of 3*	3		
Elective 3 of 3*	3		
Term credit total:	6		

Summer 2

Course Number & Title	Credits	New	Prerequisite(s)
NSG 600 Public/Population Health Nursing I	5	X	NSG 500

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| Term credit total: | 5 | | | | | | |

| | | | | | | | |

Fall 3				Spring 3			
Course Number & Title	Credits	New	Prerequisite(s)	**Course Number & Title**	Credits	New	Prerequisite(s)
NSG 610 Public/Population Health Nursing II	5	X	NSG 500, 600	NSG 650 Public/Population Health Nursing III (capstone)	5	X	NSG 500, 600, 610
Term credit total:	5			Term credit total:	5	

Program Totals:	**Credits: 42**	Identify any comprehensive, culminating element(s) (e.g., thesis or examination), including course number if applicable: NSG 650 = capstone

*Concentration Electives: HPM 525 Social and Behavioral Aspects of Health or HPM 562 Health Communication and Health Disparities [new] or HPM 620 Health Disparities and Vulnerable Populations or HPM 627 Program Development in Health Promotion (prerequisite: HPM 525)

SUNY Graduate Program Schedule (*OPTION: You can insert an Excel version of this schedule AFTER this line, and delete the rest of this page.*)
Program/Track Title and Award: Population Health Nursing MS_FULL TIME STUDENT SCHEDULE

a) Indicate **academic calendar** type: [✓] Semester [ ] Quarter [ ] Trimester [ ] Other (describe):
b) **Label each term in sequence**, consistent with the institution's academic calendar (e.g., Fall 1, Spring 1, Fall 2)
c) Use the table to show **how a typical student may progress through the program**; copy/expand the table as needed.
d) Complete the last row to show program totals and comprehensive, culminating elements. **Complete all columns that apply to a course.**

Fall 1				Spring 1			
Course Number & Title	Credits	New	Prerequisite(s)	**Course Number & Title**	Credits	New	Prerequisite(s)
NSG 500 Theoretical Foundations of Nursing Science	3	X		EPI 551 Basic Principles of Statistical Inference	3		
EPI 503 Principles of Public Health	3			EPI 501 Principles and Methods of Epidemiology I	3		
NSG 514 Health Care Policy & Systems Leadership	3	X		NSG 512 Nursing Research Methods	3	X	College level Statistics Course
Term credit total:	9			Term credit total:	9	

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Summer 1							
Course Number & Title	Credits	New	Prerequisite(s)				
NSG 600 Public/Population Health Nursing I	5	X	NSG 500				
Term credit total:	5						

Fall 2				Spring 2			
Course Number & Title	Credits	New	Prerequisite(s)	**Course Number & Title**	Credits	New	Prerequisite(s)
Concentration Elective 1 of 2*	3			NSG 650 Public/Population Health Nursing III	5	X	NSG 500, 600, 610
Concentration Elective 2 of 3*	3			Concentration Elective 3 of 3*	3		
NSG 610 Public/Population Health Nursing II	5	X	NSG 500, 600				
Term credit total:	11			Term credit total:	8		

Program Totals:	**Credits:** 42	Identify any comprehensive, culminating element(s) (e.g., thesis or examination), including course number if applicable: NSG 650 = capstone

*Concentration Electives: HPM 525 Social and Behavioral Aspects of Health or HPM 562 Health Communication and Health Disparities [new] or HPM 620 Health Disparities and Vulnerable Populations or HPM 627 Program Development in Health Promotion (prerequisite: HPM 525)

a) Complete the **SUNY Faculty Table** on the next page to describe current faculty and to-be-hired (TBH) faculty.

b) **Append** at the end of this document position descriptions or announcements for each to-be-hired faculty member.

NOTE: CVs for all faculty should be available upon request. Faculty CVs should include rank and employment status, educational and employment background, professional affiliations and activities, important awards and recognition, publications (noting refereed journal articles), and brief descriptions of research and other externally funded projects. New York State's requirements for faculty qualifications are in Regulation 52.2 *http://www.highered.nysed.gov/ocue/lrp/rules.htm*

c) What is the institution's definition of "full-time" faculty?

A full-time faculty member is one who holds an appointment with a 100% time commitment.

SUNY Faculty Table

Provide information on current and prospective faculty members (identifying those at off-campus locations) who will be expected to teach any course in the graduate program. Expand the table as needed. Use a separate Faculty Table for each institution if the program is a multi-institution program.

(a)	(b)	(c)	(d)	(e)	(
Faculty Member Name and Title/Rank (Include and identify Program Director with an asterisk)	**% of Time Dedicated to This Program**	**Program Courses Which May Be Taught (Number and Title)**	**Highest and Other Applicable Earned Degrees (include College or University)**	**Discipline(s) of Highest and Other Applicable Earned Degrees**	**Additional Qualifications: List related certifications,**
PART 1. Full-Time Faculty					
Allison Appleton, Associate Professor	5%	EPI 501 Principles and Methods of Epi;	ScD, Harvard School of Public Health	Social Epidemiology	
Mark Kuniholm, Associate Professor	5%	EPI 503 Principles and Methods of Public Health	PhD, Johns Hopkins, MPH UC Davis	Epidemiology	
Igor Kuznetsov, Associate Professor	5%	EPI 551 Principles of Statistical Inference	PhD, Mount Sinai School of Medicine, NYU		
Tomoko Udo, Associate Professor	5%	HPM 525 Social and Behavioral Aspects of Health	PhD, Rutgers	Health Education and Behavioral Science	
Jennifer Manganello, Professor	5%	HPM 562 Health Communication and Health Disparities	PhD, Johns Hopkins MPH, Boston University	Health Policy and Management	
Janine Jurkowski, Professor	5%	HPM 620 Health Disparities and Vulnerable Populations	PhD University of Illinois at Chicago; MPH, Boston University	Community Health Sciences	

Part 2. Part-Time Faculty				
Part 3. Faculty To-Be-Hired (List as TBH1, TBH2, etc., and provide title/rank and expected hiring date)				
*TBH1 Director of MSN Program, Associate Professor, FT PhD, Fall 2022 (note: once the Nursing BS is registered, the Program Director's dedicated time will be split between the 2 programs.)	100%	NSG 500 Theoretical Foundations of Nursing Science; NSG 512 Nursing Research Methods; NSG 514 Health Care Policy & Systems Leadership		
TBH2 NSG Adjunct Lecturer, each Fall beginning Fall 2022 to teach one class	100%	NSG 500 Theoretical Foundations of Nursing Science; NSG 512 Nursing Research Methods; NSG 514 Health Care Policy & Systems Leadership		
TBH3 Nursing Faculty Member with Clinical Placement responsibilities, FT PhD, Spring 2024	100%	NSG 600 Public/Pop Health Nursing I; NSG 610 Public/Pop Health Nursing II; NSG 650 Public/Pop Health Nursing III;		
TBH4 SPH Adjunct Faculty as needed		EPI 501 Principles and Methods of Epi; EPI 503 Principles and Method of Public Health; EPI 551 Principles of Statistical Inference; HPM 525 Social and Behavioral Aspects of Health; HPM 562 Health Communication and Health Disparities; HPM 620 Health Disparities and Vulnerable Populations; HPM 627 Program Development Health Promotion		

a) What is the resource plan for ensuring the success of the proposed program over time? Summarize the instructional facilities and equipment committed to ensure the success of the program. Please explain new and/or reallocated resources over the first five years for operations, including faculty and other personnel, the library, equipment, laboratories, and supplies. Also include resources for capital projects and other expenses.

Personnel Resources

Faculty (Nursing and Public Health)

A full-time tenure-track faculty member, at the Associate Professor level or higher, will serve as Program Director. This position is currently held by Dr. Linda Millenbach. The Program Director will be responsible for oversight and administration of all aspects of the program and for accreditation. The Program Director will also have teaching and advising responsibilities. Due to the substantial administrative responsibilities, the program director will have a 1+1 course load, except for the first year, when the course load will be 0+1 to account for the significant accreditation related work needed at the beginning of the program. (If the BS proposal currently pending approval is registered when the MS program is implemented, the Program Director will be 50% FTE on each program, and an additional adjunct faculty member will be hired to teach a course.

In year 2, a full-time faculty member with clinical placement responsibilities (12-month position) will be hired. This person will be responsible for teaching the three 5-credit Population Health Nursing courses and coordinating the clinical components of those courses which will be arranged individually for each student. This faculty position will have associated administrative responsibilities for overseeing clinical placements. Minimum credentials for this position include doctoral-level preparation in nursing, education and/or experience in community public health nursing, and administrative skills.

One adjunct faculty member per year will be hired to teach the remaining nursing course. Minimum credentials for adjunct lecturers include doctoral preparation, training/experience in community public health nursing, and previous teaching experience.

Adjunct faculty will also be hired, on a per course basis, to teach the public health courses, or to cover other SPH courses when full-time faculty teach the public health courses that are part of this program. The three core public health courses are regularly taught online, but additional sections will need to be offered to accommodate the MSN students. Of the four concentration course options, three are regularly taught online, but one, HPM 620, will need to be developed into an online format. This will occur during the first year of the program.

Class sizes will be 25-30 students each, which is the typical size of the online classes in our current online programs.

1. *Administrative Assistant (AA):* The Administrative Assistant (AA) (SL2; $44,374) will provide administrative support to the Program Director, other faculty, and students, and will be the initial contact for potential MSN students. This person will assist in answering student questions about the program and directing potential students to the appropriate resource. The AA will work with the Program Director to create and update recruitment tools and information.

Library

Library resources are detailed in Section 6. The cost for necessary library resources is estimated as $24,550 for the initial year with an annual cost thereafter of $22,032.

Equipment

The equipment necessary for this program consists of computer and office equipment for faculty and

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staff.

Recruitment and Retention/ Student Support Services

The Program Director and Administrative Assistant will, along with the Graduate School, be responsible for student recruitment. Costs for recruitment expenses (targeted social media ads, paid advertising, recruitment materials, are estimated to be $5000 in the first year, and $1500 in other years.

Accreditation

Nursing accreditation is expected to occur in Year 2. Accreditation costs are $14,000 for initial accreditation, and $3500 annually thereafter.

Annual Operations

Annual operating fees for the program are budgeted at $4000. This will support program operating expenses including supplies, student events, guest speaker events, and faculty travel to professional conferences.

b) Complete the five-year SUNY Program Expenses Table, below, consistent with the resource plan summary.   Enter the anticipated academic years in the top row of this table. List all resources that will be engaged specifically as a result of the proposed program (e.g., a new faculty position or additional library resources). If they represent a continuing cost, new resources for a given year should be included in the subsequent year(s), with adjustments for inflation or negotiated compensation. Include explanatory notes as needed.

SUNY Program Expenses Table

	Prior to implementation	Year 1:	Year 2:	Year 3:	Year 4:	Year 5:
(a)Personnel (including faculty and all others)	$110,000	$181,674	$252,404	$307,276	$315,295	$323,553
(b) Library		$24,550	$22,032	$22,032	$22,032	$22,032
(c) Equipment		$7,000		$3,500		
(f) Capital Expenses						
(h) Faculty search expenses	10,000	10,000				
(g) Accreditation costs and annual organization fees		$5,277	$2,833	$8,139	$2,947	$3,006
(h)Annual operations		$4,000	$4,000	$4,000	$4,000	$4,000
(e) Recruitment Materials		$5,000	$1,500	$1,500	$1,500	$1,500
Sum	$120,000	$237,501	$282,769	$346,447	$345,774	$354,091

(a) Faculty salary estimates are based on data from the National League for Nursing: http://www.nln.org/newsroom/nursing-education-statistics/nln-faculty-census-survey-2018-2019

Salaries are estimated to increase by 3% annually

a)   Summarize the analysis of library collection resources and needs *for this program* by the collection librarian and program faculty. Include an assessment of existing library resources and accessibility to those resources for students enrolled in the program in all formats, including the institution's implementation of SUNY Connect, the SUNY-wide electronic library program.

Library Collections:

The University Libraries are among the top 115 research libraries in the country. The University Library, the Science Library, and the Dewey Graduate Library contain more than two million volumes and over 2.9 million microforms. The Libraries provide access to more than 75,000 online journals and several hundred thousand online books. Whenever possible, current subscriptions are available online. Additionally, the Libraries serve as a selective depository for U.S. Government publications and house collections of software and media.

The Science Library, which opened in September 1999, occupies 61,124 square feet on four floors. The Science Library serves the entire University at Albany community, but contains collections supporting the departments of Atmospheric and Environmental Sciences, Biological Sciences, Chemistry, Computer Science, Mathematics and Statistics, Physics, Psychology, the College of Nanoscale Science and Engineering, and the School of Public Health. Approximately 600,000 volumes in the science and technology subject areas (Q-TP of the Library of Congress classification scheme) are housed in this library. Online resources (journals, databases, e-books, digital libraries) are available on and off campus, all hours of the day.

Databases:

The University Libraries currently subscribe to or have access to several important databases and digital collections for nursing and health. These databases are:

> *-CINAHL Plus with Full Text*
> *-MEDLINE via PubMed*
> *-Health Reference Center Academic*
> *-Health Source: Nursing/Academic*
> *-PsychINFO*

There are a number of subject-focused databases that the University Libraries subscribe to or have access to that compliment these titles. A few of the most important ones are: *Google Scholar, Business Source Complete*, *Social Services Abstracts* and *Social Work Abstracts*.

The University Libraries also offer access to several important cross-disciplinary databases. *EBSCO Academic Search Complete* indexes nursing and health topics as well as a wide array of both related and general academic topics. *Web of Science* is an important cross-disciplinary resource that is very strong in medical and biomedical indexing.

Two new databases were recommended to support the new joint B.S. in Nursing at a cost of $13,801. These titles are: *Cochrane Library* and *Nursing Reference Center Plus*. If these two databases are purchased for the undergraduate program in nursing, we are not recommending subscribing to further databases at this time.

Journals:

Journal articles are a very important resource for students in a nursing M.S. program. The following databases provide access to multiple nursing journal titles:

     -CINAHL Plus with Full Text – articles from 750 full-text journals
     -Health Source: Nursing/Academic – articles from nearly 550 nursing journals

The SUNY libraries are finalizing a new contract with Elsevier. ScienceDirect provides a number of nursing journals, as well as a wide array of medical and biomedical journals. Some of the top nursing journals (by Impact Factor) in this package include:

     -International Journal of Nursing Studies
     -Nursing Outlook|
     -Australian Critical Care
     -Nurse Education Today
     -Clinical Simulation in Nursing
     -Women and Birth

The University Libraries also offer access to important, high-impact journals in the areas of medicine and science. They are:

     -JAMA
     -Lancet
     -New England Journal of Medicine
     -Nature
     -Science

To further support this new program, the University Libraries recommend purchasing a subscription to the following journal collection:

-Ovid Nursing Journal Collection – This collection provides access to 25 nursing journal titles, which are not covered by the package requested for the B.S. in Nursing**.** The annual cost of this journal package is **$14,082.00**.

Books:
Books serve as an important resource for graduate students, providing a foundation on important topics. In the proposed M.S. in Nursing with a focus in leadership, administration and public health, there will be some overlap between books purchased to support the School of Public Health, as well as the Biological Sciences program. In addition, some titles purchased by the School of Social Welfare and the School of Business will also be useful. The University Libraries also recently subscribed to an academic e-book collection. Of the more than 200,000 titles in this collection, over 1,000 books focus on nursing.

RCLweb (Resources for College Libraries) indexes critical books in many disciplines. For nursing – leadership and administration, it lists 21 important titles. Of those, 5 are available in the e-book collection. To purchase the other 16 titles would cost $1,301.07. For nursing – public health, it lists 11 important titles. Of those, 2 are available in the e-book collection. To purchase the other 9 titles would cost $845.23. We recommend purchasing these two groups of titles at a cost of **$2,146.30**.

To support this new program, we are recommending a yearly budget of **$7,450** to purchase 50 books at an average cost of $149.00 each.

Reference Collection:
The Reference collection was evaluated for the needs of a new M.S. in Nursing. The University Libraries have several titles of interest in the collection: *Black's Medical Dictionary* 43rd and *Dictionary of Nursing* (Oxford) 7th ed.

The purchase of a number of books in support of the joint B.S. in Nursing was recommended. They are: *AMA Manual of Style, Dorland's illustrated medical dictionary, Gale Encyclopedia of Nursing and Allied Health*, *Grant's atlas of anatomy*, *Mosby's Dictionary of Medicine, Nursing & Health Professions*, *Nursing 2020 Drug Handbook*, *Say it in Spanish: A guide for health care professionals ,Stedman's Medical Dictionary for the Health Professions and Nursing*, and *Taber's Cyclopedic Medical Dictionary*. Assuming that these will be purchased, there are still several reference titles that should be acquired to support the M.S. program in Nursing. These include:

> - *Dictionary of nursing theory and research*
> - *Encyclopedia of Nursing Research*
> - *Munro's Statistical Methods for health care research*

The total cost for purchasing these is: **$371.99**. In addition, it is recommended that **$500.00** be added to the annual Science Library reference budget to purchase new reference resources to support the graduate nursing program each year.

Interlibrary Loan and Delivery Services:
The University Libraries' Interlibrary Loan (ILL) program borrows books and microforms, and obtains digital copies of journal articles and other materials not owned by the Libraries from sources locally, state-wide, nationally, and internationally. ILL services are available at no cost to the user for faculty, staff, and students currently enrolled at the University at Albany. Users can manage their requests through the use of ILLiad, the University Libraries' automated interlibrary loan system, which is available through a Web interface at https://illiad.albany.edu/.

The University Libraries also provide delivery services for books and articles housed in any of the three libraries. Books can be delivered to one of the libraries or for faculty, to departmental addresses. Articles are scanned and delivered electronically via email. The Libraries also provide free delivery services to the home addresses of online learners and people with disabilities. Delivery services are managed through ILLiad as well.

Summary
Although some resources acquired for biology and public health will be useful, additional resources will be needed to support the joint B.S. in Nursing. Those are:

Databases (annual) --$0.00

Journals for nursing (annual) **--** $14,082.00

Books (one time purchase) -- $2,146.30

Books (annual) -- $7,450

Reference resources (one time purchase) -- $371.99

Reference resources (annual) -- $500.00S

> **Total   -$24,550.29 for first year**

b)Describe the institution's response to identified collection needs and its plan for library development.

All of the recommended library resources have been included in the program budget.

Section 7. External Evaluation

SUNY and SED require external evaluation of all proposed graduate degree programs. List below all SUNY-approved evaluators who conducted evaluations (adding rows as needed), and **append at the end of this document** each original, signed *External Evaluation Report.* ***NOTE:*** *To select external evaluators, a campus sends 3-5 proposed evaluators' names, titles and CVs to the assigned SUNY Program Reviewer, expresses its preferences and requests approval.*

Evaluator #1
Allison Del Bane Davis, PhD, RN
Community Public Health Nursing and Asst Professor
University of Maryland School of Nursing, Baltimore

Evaluator #2
Meredith Troutman-Jordan, PhD, PMHCNS
Associate Professor, Nursing
University of North Carolina, Charlotte

Section 8. Institutional Response to External Evaluator Reports

Append at the end of this document a single *Institutional Response* to all *External Evaluation Reports*.

Section 9. SUNY Undergraduate Transfer

NOTE: SUNY Undergraduate Transfer policy does not apply to graduate programs.

Section 10. Application for Distance Education

a) Does the program's design enable students to complete 50% or more of the course requirements through distance education? [ ] No [X] Yes. If yes, **append** a completed *SUNY Distance Education Format Proposal* at the end of this proposal to apply for the program to be registered for the distance education format.

b) Does the program's design enable students to complete 100% of the course requirements through distance education? [X] No   [ ] Yes

Section MPA-1. Need for Master Plan Amendment and/or Degree Authorization

a) Based on guidance on Master Plan Amendments, please indicate if this proposal requires a Master Plan Amendment.
[X] No [ ] Yes, a completed *Master Plan Amendment Form* is **appended** at the end of this proposal.

b) Based on *SUNY Guidance on Degree Authorizations* (below), please indicate if this proposal requires degree authorization.

[X] No [ ] Yes, once the program is approved by the SUNY Provost, the campus will work with its Campus Reviewer to draft a resolution that the SUNY Chancellor will recommend to the SUNY Board of Trustees.

SUNY Guidance on Degree Authorization. *Degree authorization is required when a proposed program will lead to a new degree (e.g., B.F.A., M.P.H.) at an existing level of study (i.e., associate, baccalaureate, first-professional, master's, and doctoral) in an existing disciplinary area at an institution. Disciplinary areas are defined by the New York State Taxonomy of Academic Programs. Degree authorization requires approval by the SUNY Provost, the SUNY Board of Trustees and the Board of Regents.*

Appended Items: Materials required in selected items in Sections 1 through 10 and MPA-1 of this form should be appended after this page, with continued pagination. In the first column of the chart below, please number the appended items, and append them in number order.

Number	Appended Items	Reference Items
	For multi-institution programs, a letter of approval from partner institution(s)	Section 1, Item (e)
	For programs leading to professional licensure, a side-by-side chart showing how the program's components meet the requirements of specialized accreditation, Commissioner's Regulations for the Profession, or other applicable external standards	Section 2.3, Item (e)
	For programs leading to licensure in selected professions for which the SED Office of Professions (OP) requires a specialized form, a completed version of that form	Section 2.3, Item (e)
	OPTIONAL: For programs leading directly to employment, letters of support from employers, if available	Section 2, Item 2.3 (h)(2)
1	*For all programs*, a plan or curriculum map showing the courses in which the program's educational and (if appropriate) career objectives will be taught and assessed	Section 2, Item 7
2	*For all programs*, a catalog description for each existing course that is part of the proposed graduate major program	Section 3, Item (b)
3	*For all programs with new courses,* syllabi for all new courses in a proposed graduate program	Section 3, Item (c)
4	*For programs requiring external instruction*, a completed *External Instruction Form* and documentation required on that form	Section 3, Item (d)
5	*For programs that will depend on new faculty*, position descriptions or announcements for faculty to-be-hired	Section 4, Item (b)
6	*For all programs*, original, signed External Evaluation Reports from SUNY-approved evaluators	Section 7
7	*For all programs*, a single Institutional Response to External Evaluators' Reports	Section 8
8	*For programs designed to enable students to complete at least 50% of the course requirements at a distance*, a *Distance Education Format Proposal*	Section 10
	For programs requiring an MPA, a *Master Plan Amendment form*	Section MPA-1

University at Albany
New Program Proposal
Population Health Nursing MS

Appendix 1 Curriculum Map

Appendix 1: Nursing Master Curriculum Map – A Crosswalk of Student Learning Outcomes, Major Courses and AACN Domains [1]

Core and Clinical Nursing Courses	NSG500 Theoretical Foundations of Nursing Science	NSG 512 Nursing Research Methods	NSG 514 Health Care Policy & Systems Leadership	NSG 600 Public/ Population Heath Nursing I	NSG 610 Public/ Population Heath Nursing II	NSG 650 Public/ Population Heath Nursing III
Master in Population Health Program Outcomes based on the 2011 AACN Essentials - Core Nursing Courses						
1.　　Integrate advanced knowledge from nursing, related sciences, and humanities to provide a theoretical framework for advanced practice in population health nursing. (Element I)	X	X	X	X	X	X
2.　　Apply organizational theories and systems thinking to improve the quality, cost-effectiveness and safety outcomes of practice decisions and initiatives (Element II & III)	X		X	X	X	X
3.　　Demonstrate competencies to develop, implement, and evaluate evidence-based interventions and conduct a scholarly inquiry. (Element IV)	X	X	X	X	X	X
4.　　Apply knowledge of informatics to coordinate and improve programs and systems of care. (Element V)			X	X	X	X
5.　　Incorporate advanced nursing practice standards to advocate for health policy and effect systems-level change within populations, healthcare environments, and organizational systems. (Element VI)	X		X	X	X	X
6.　　Apply evidence-based and interprofessional approaches for the design and delivery of comprehensive, culturally competent care to individuals/families, communities, and populations. (Element VII & VIII)	X	X	X	X	X	X
7.　　Practice in an advanced nursing role in collaboration with other disciplines to improve population health outcomes. (Element IX)	X	X	X	X	X	X

[1] https://www.aacnnursing.org/portals/42/publications/mastersessentials11.pdf

Nursing Master courses providing content that relate to, provide a foundation for, and/or support the Student Learning Outcomes

Master in Population Health Program Outcomes based on the 2011 AACN Essentials - Core Population Health Courses	EPI 551 Basic Principles of Statistical Inference	EPI 503 Principles of Public Health	EPI 501 Principles and Principles of Epidemiology
Student Learning Outcomes with a focus on Population Health			
1. Integrate advanced knowledge from public health, other sciences and humanities to provide a theoretical framework for advanced practice in population health nursing. (Element I)	X	X	X
2. Apply organizational theories and systems thinking to improve the quality, cost-effectiveness and safety outcomes of practice decisions and initiatives (Element II & III)			
3. Demonstrate competencies to develop, implement, and evaluate evidence-based interventions and conduct a scholarly inquiry. (Element IV)		X	
4. Apply knowledge of informatics to coordinate and improve programs and systems of care. (Element V)	X		
5. Incorporate practice standards to advocate for health policy and effect systems-level change within populations, healthcare environments, and organizational systems. (Element VI)			
6. Apply evidence-based and interprofessional approaches for the design and delivery of comprehensive, culturally competent care to individuals/families, communities, and populations. (Element VII & VIII)			
7. Practice in collaboration with other disciplines to improve population health outcomes. (Element IX)		X	X

Concentration courses providing content that relate to, provide a foundation for, and/or support the Student Learning Outcomes

Master in Population Health Program Outcomes based on the 2011 AACN Essentials - Core Health Disparities Courses	HPM 620 Health Disparities and Vulnerable Populations	HPM 525 Social and Behavioral Aspects	HPM 562 Health Communication and Health Disparities	HPM 627 Program Development in Health Promotion
Student Learning Outcomes with a focus on Population Health				
1. Integrate advanced knowledge from public health, other sciences and humanities to provide a theoretical framework for advanced practice in population health nursing. (Element I)	X	X	X	X
2. Apply organizational theories and systems thinking to improve the quality, cost-effectiveness and safety outcomes of practice decisions and initiatives (Element II & III)		X		
3. Demonstrate competencies to develop, implement, and evaluate evidence-based interventions and conduct a scholarly inquiry. (Element IV)		X		X
4. Apply knowledge of informatics to coordinate and improve programs and systems of care. (Element V)				
5. Incorporate practice standards to advocate for health policy and effect systems-level change within populations, healthcare environments, and organizational systems. (Element VI)		X		X
6. Apply evidence-based and interprofessional approaches for the design and delivery of comprehensive, culturally competent care to individuals/families, communities, and populations. (Element VII & VIII)	X		X	
7. Practice in collaboration with other disciplines to improve population health outcomes. (Element IX)	X	X	X	X

Appendix 2 Catalog Descriptions for Existing Courses

        EPI 501   Principles and Methods of Epidemiology I

        EPI 503   Principles of Public Health

        EPI 551   Basic Principles of Statistical Inference I

        HPM 525 Social and Behavioral Aspects of Public Health

        HPM 620 Health Disparities and Vulnerable Populations

        HPM 627 Program Development in Health Promotion

EPI 501 Principles and Methods of Epidemiology I (3)
Introduction to epidemiology for students majoring in any aspect of public health; covers the principles and methods of epidemiologic investigation including describing the patterns of illness in populations and research designs for investigating the etiology of disease. Introduces quantitative measures to determine risk, association and procedures for standardization of rates.

EPI 503 Principles of Public Health (3)
Public health seeks to prevent disease, prolong life and promote heath through organized efforts of society. Public health promotes and protects people and the communities where they live, learn, work and play. In this course, students will study and explain: the history of public health; public health values; core functions and essential services of public health; public health tools including qualitative and quantitative tools; and biologic; environmental; social and structural factors that affect human health. Students will demonstrate their knowledge and understanding of these topics through a diverse set of assessment methods.

EPI 551 Basic Principles of Statistical Inference (3)
General introduction to statistical methods used in the health sciences including basic descriptive and inferential statistics. Computing is introduced and used throughout the course. This course satisfies the core requirement for statistics for students not planning to take HEpi/HSta 553.

HPM 525 Social and Behavioral Aspects of Public Health (3)
This course provides an introduction to the role of social, cultural, psychological, and behavioral factors in determining the health of populations. Students will: gain understanding of the significance of social, cultural, psychological, and behavioral factors in relation to health status and well-being; learn to analyze public health problems in terms of the social, psychological, cultural, economic, and demographic factors that contribute to or protect from vulnerability to disease, disability, and death; and improve their ability to apply social science theory, research, and principals to the critical analysis of the appropriateness of public health interventions.

HPM 620 Health Disparities and Vulnerable Populations (3)
The goal of this course is to understand what contributes to health disparities in the United States. The course will discuss underlying assumptions of group definitions, why particular groups may experience disparities and individual versus ecological approaches to health in our current health system. This course will also cover theoretical frameworks for understanding and addressing health disparities in health promotion. The course is geared for students to critically think about and discuss health disparities and use the knowledge gained through the class in their work as public health professionals and researchers. Readings will be multidisciplinary; from the fields of public health, psychology, political science, disability studies, and gender studies.

HPM 627 Program Development in Health Promotion (3)
This course focuses on the development of theory- and evidence-based health promotion interventions. Students are introduced to the major steps of program planning, and apply these steps to design their own health promotion intervention. Using an ecological perspective, the course also gives students the opportunity to critically evaluate a variety of health promotion interventions targeting change at the individual, interpersonal, organizational, community and policy levels, and to examine how behavioral science theories have been applied to the design of these interventions. Prerequisite: HHPM 525.

Appendix 3 Syllabi for New Courses

HPM 562   Health Communication and Health Disparities

NSG 500   Theoretical Foundations of Nursing Science

NSG 512   Nursing Research Methods

NSG 514   Health Care Policy & Systems Leadership

NSG 600   Public/Population Health Nursing I

NSG 610   Public/Population Health Nursing II

NSG 650   Public/Population Health Nursing III

INSTRUCTOR
Jennifer Manganello, PhD, MPH
jmanganello@albany.edu

OFFICE HOURS
There are no regularly scheduled office hours since this is an online course. Students may contact the professor with questions via email. Emails are typically responded to during regular business hours (typically M-F, 8-4).

If there is a need for a phone call or in person meeting when it is an option, a meeting may be scheduled.

CLASS TIME AND LOCATION
This class is asynchronous. There are no scheduled meeting times. Any 'live' sessions that are added, such as a review session or special session, will not be mandatory and will be recorded when possible.

Online at https://blackboard.albany.edu/
(use your regular Blackboard log in ID and password)

Once you log into the course, you should find it easy to navigate. There will be a folder for each course Module. Each folder will have assigned readings, assignments, slides, and other module materials.

PRE-REQUISITE
None

COURSE DESCRIPTION
Health disparities are constructed according to gender, ethnicity, socioeconomic status, geographic region, age, sexual orientation, and disability. This course is designed to provide an overview of the major issues and topics related to communication and health disparities, as well as communication interventions to reduce health disparities. The course will introduce theories concerning health communication, and identify how communication patterns (such as those related to interpersonal and organizational communication) can lead to or help reduce health disparities. The course will also look at media influences including advertising, as well as explore the ways that technology (such as the internet) can create or lessen health disparities. Cultural competency and health literacy will be addressed as well.

COURSE COMPETENCIES (OBJECTIVES)
This course teaches topics and skills that relate to the new competencies created by the Association of Schools of Public Health (ASPPH). In accordance with ASPH Social and Behavioral Science Competencies, after completing this course, students will be able to:

- *Apply theories to explain how the media can influence health behavior*

- *Propose theory-based approaches to communication interventions*

- *Describe and implement the planning and evaluation process for communication campaigns*

- *Explain how communication in social relationships can influence health*

- *Understand how organizational communication can influence health and health behavior*

In accordance with ASPPH Communication Competencies, after completing this course, students will be able to:

- *Apply communication principles to different settings and groups*

- *Describe how societal, organizational, and individual factors influence and are influenced by public health communication*

- *Communicate public health messages*

- *Advocate for community public health programs and policies using mass media*

With respect to ASPPH Diversity and Culture Competencies, after completing this course, students will be able to:

- *Explain why cultural competence alone cannot address health disparity*

- *Differentiate between linguistic competence, cultural competency, and health literacy in public health practice.*

- *Cite examples of situations where consideration of culture-specific needs resulted in a more effective modification or adaptation of a health intervention.*

- *Develop public health programs and strategies responsive to the diverse cultural values and traditions of the communities being served.*

NOTE: This course has been approved as an elective for the Graduate Certificate in Maternal and Child Health. The course teaches topics and skills that address the following national MCH Leadership Competencies, Version 4.0.

- *Self*: MCH Knowledge Base/Context; Critical Thinking
- *Others:* Communication; Cultural Competency

COURSE GRADES

Course grades will be determined as follows (assignments are described below). I typically use a the following grading scale for determining course grades:

94 – 100	A
90 – 93	A-
87 – 89	B+
84 – 86	B
80 – 83	B-
77 – 79	C+
70 – 76	C
< 70	E

Assignments	15% (3 at 5% each)
Discussions	50% (5 at 10% each)
Midterm exam	15%
Final exam	20%

<u>Discussions</u> will occur during 5 of the class modules. They will involve work for students to complete as part of the original posts. There will be a due date for the original post, and due dates for the discussion posts. These assignments are structured as discussions so that students can view the work of others and engage in a discussion about the work presented. Each discussion will be worth 10% of the course grade as noted above. Specific instructions will be provided within each module.

In Module 1, part of the assignment will be to propose a disparity group and health topic that you want to focus on throughout the semester. **Each of the assignment discussions that follow will then be related to this population and topic.**

<u>Assignments:</u> There will be 3 assignments you need to complete during the one week modules. Online training courses will be taken in Module 3. You will be asked to upload a certification of completion for both of them. Information about the courses will be provided in the module. You will also write a brief (2-3 pages; double spaced) reflection paper that describes key ideas you learned during the training and how they apply to your chosen population group. Assignments for Modules 7 and 9 will be described in the Module folders on Blackboard.

<u>Exams</u> will be taken online and will be timed. The exams will consist of mostly multiple choice, true/false, and matching type questions. Some short answer or short essay questions will also be included. They will only be available to take during the specified dates provided in the syllabus. Any concerns about taking the exam during the specified dates must be discussed with the professor ahead of time. Once you start the exam, **you cannot stop and come back to it later**.

You may use your books and notes, but you are not allowed to share questions or compare answers with your classmates. You will be penalized with a grade of 0 and reported to the Director of Graduate Studies if cheating occurs. Although you will be allowed to use your course materials during the exams, note that if you have not reviewed the lecture notes and readings, it will be difficult to answer the questions correctly in the time period provided. Once the exam becomes available and you click on the link for it, you will see specific instructions for how to complete the exam. If you experience technological difficulties during the exam, you MUST notify the instructor immediately. Please be sure to take the exam from a computer with a stable internet connection. Each exam is worth 15% of the course grade.

READINGS
Readings will consist of research articles, government reports, and news articles. All will be available on the class Blackboard site. Assigned readings will be listed and provided in each Module.

COURSE ATTENDANCE AND LATE ASSIGNMENTS POLICIES
Students in this course typically have busy lives, and are balancing multiple life obligations. Succeeding in this course will require you to take full responsibility for managing your time and effort in order to meet the course objectives.

Attendance: Because this is an online course, there is no in-class attendance policy. However, 'attendance' in the course is assessed by your online participation as outlined in discussion instructions.

Late assignments: All assignments are due on the assigned date and time. If you expect you may have a problem completing work on time, please address this with the professor BEFORE the due date. While I usually send out reminders about assignments due, it is ultimately the responsibility of the student to make sure they complete all work by the due date.

You may turn in original posts for the student led discussions late but, if you choose to do so, 5% will automatically be deducted from your final score for missing the due date and an additional 5% will be deducted for every additional day the assignment is late. **PLEASE NOTE: Discussion posts can not be made up as they involve interaction with other students and/or the professor during a specific time period. They must be completed according to the due dates for posts. If you have official documentation for missing the discussion, please submit that and we can discuss options.**

DISABILITY SUPPORT SERVICES (DSS) STATEMENT
Reasonable accommodations will be provided for students with documented physical, sensory, systemic, cognitive, learning and psychiatric disabilities. If you believe you have a disability requiring accommodation in this class, please notify the Director of the Disability Resource Center (Campus Center 137, 442-5490). That office will provide the course instructor with verification of your disability, and will recommend appropriate accommodations.

ACADEMIC INTEGRITY
Academic dishonesty, such as plagiarism, cheating on an exam, submitting work that you previously submitted for another class, submitting work that was submitted for this or any other class by another student, or unauthorized collaboration on any assignment, will result in a grade of 0 for the assignment, and could result in a grade of E (failing grade) for the class. Students who submit more than one assignment with plagiarism will automatically fail the course. Please note, per school policy, all incidents of academic dishonesty must be reported to your department chair, Dean of the School of Public Health, and Dean of Graduate Studies. Incidents may also be subject to sanctions by the school and university. Please refer to the booklet, Community Rights and Responsibilities, for a full explanation of the University's standards of conduct.

http://www.albany.edu/studentconduct/assets/University_at_Albany_Community Rights8-7-15.pdf

It is the responsibility of the student to know how to reference material correctly in accordance with policies for this class. All students must use APA style referencing. You must correctly cite material that is not your own idea or wording in your papers. **Directly copying published material word-for-word without using quotation marks (even if you provide the reference), and not providing references for information taken from other sources, are examples of plagiarism.** Examples of how to reference using APA style are provided at this website:

http://library.albany.edu/cfox

The burden on avoiding plagiarism or other academic integrity violations falls solely on the student. Students are strongly advised to avoid placing themselves in any situation for which an instance of academic dishonesty is suspected by the instructor. For any assignment, you should consult with the professor to get clarification about potential plagiarism issues *PRIOR* to handing in your assignment if you have any questions, and you must proofread your work to avoid having a typo count as plagiarism. **The professor will randomly check wording and sources in assignments throughout the course to determine if any plagiarism is occurring.** Students who engage in academic dishonesty can not ask for any exceptions or provide "after the fact" rationales.

OTHER COURSE POLICIES

Communications: You are responsible for reading emails sent to you for the course and the announcements that are placed on the course web site. Information about readings, news events, your grades, assignments and other course related topics will be communicated to you with these electronic methods. Please understand that you should plan accordingly for questions about assignments.

Course Withdrawals: It is the student's responsibility to note the university determined deadlines for dropping or withdrawing from the course and changing to a pass/fail grade. No exceptions will be made. If a student feels they will not be able to complete the course work according to the dates provided on the syllabus, they should drop or withdraw from the course. The instructor reserves the right to ask any student missing a meaningful amount of class time or work (as defined by the instructor) to withdraw from the course at any time, even if it means a "W" will appear on the student's transcript.

Incompletes: An Incomplete will only be given in extreme circumstances.

Extra Credit: There is no extra credit work available for students who want to improve their grade in the course. You earn your course grade based on the work you submit for each assignment. Feel free to ask the professor for help or clarification about assignments PRIOR to turning them in.

Syllabus Changes: Information contained in the course syllabus may be subject to change with reasonable advance notice, as deemed appropriate by the instructor in collaboration with the students.

Respect for Others: In this class I expect everyone to be respectful of one another. Respect for each other's viewpoint and contribution is an expectation in this course. Therefore, I ask that you please be courteous, and in your writing on the course website, please refrain from using inappropriate language. Also check that any websites or other electronic material referenced or linked to do not contain offensive content. Personal accusations or demeaning comments and behavior will not be tolerated. Please be respectful of the diverse opinions and views of your classmates, even if you disagree with them.

Course Materials: Please note that course materials should not be shared with anyone outside of the class or on the internet or social media sites.

Writing and References: All assignments, including discussions, will be graded not only on content, but presentation and proper citation of sources. Please note, I am looking for you to apply concepts and ideas from the readings or course in a meaningful way when developing your assignments, so I expect to see references to lecture notes, slides, and/or course readings.

Direct Quotes: Excessive use of direct quotes in your assignments is discouraged. You should use references to support your ideas and provide useful information, but should not rely on numerous direct quotes to complete your assignments. Any direct quotes must be cited appropriately.

COURSE SCHEDULE

Reading assignments for each module start on the next page.

Module 1	1/24-2/1	Course Overview and Introduction to Health Disparities **Discussion**
Module 2	2/2-2/15	Introduction to Communication Concepts **Discussion**
Module 3 (1 week)	2/16-2/22	Cultural Competency and Health Literacy **Assignment: Online Training Courses and reflection (due 3/2)**
Module 4 (2+ weeks)	2/23-3/11	Individual Communication Influences and Strategies **Discussion**
	3/12-3/18	**CLASSES SUSPENDED-SPRING BREAK**
Module 5	3/21-3/22	**Mid-term (can take exam any time on these days)**
Module 6	3/23-4/5	Interpersonal Communication Influences and Strategies **Discussion**
Module 7 (1 week)	4/6-4/12	Organizational Communication Influences and Strategies **Assignment: Local project proposal (due 4/12)**
Module 8	4/13-4/26	Media Influences and Strategies **Discussion**
Module 9 (1 week)	4/27-5/4	Community and Policy Communication Influences and Strategies (including news and media advocacy) **Assignment: Op-ed analysis (due 5/4)**
Module 10	5/6-5/7	**Final exam (can take exam any time on these days)**

University at Albany
School of Public Health

NSG 500 Theoretical Foundations of Nursing Science

INSTRUCTOR: TBD

OFFICE HOURS: TBD

COURSE CREDIT HOURS: 3 credits

This course is delivered online synchronously and asynchronously. Students should dedicate an average of 12 – 15 hours per week to this course.

COURSE PREREQUISITES/COREQUISITES:

COURSE DESCRIPTION:
Historical influences that have impacted upon the development of nursing are explored. Ways of knowing in nursing are explored. Theory-based nursing is emphasized as learners discuss and critically reflect upon the relevance and significance of nursing as an art and science. Philosophical views of selected nursing and other disciplines theories are critically examined for application to nursing practice, education, and leadership. Nursing theory within the paradigm of people, health, nursing, and environment are applied to the practice of nursing and promotion of health, research, moral reasoning, caring, and standards of professional nursing. Personal philosophies of nursing are explored and drawn from these theories to critically reflect upon personal values, ongoing learning, and transforming practice in the advanced practice role of professional nursing.

Course Objectives:

At the completion of this course, the learner will be able to:

1. Examine the historical social and political events that have influenced nursing as a profession.
2. Appraise ways of knowing in nursing.
3. Critically examine the application of nursing and other disciplines theories as they apply to nursing practice, education and nursing leadership.
4. Critique a nursing concept using the process of concept analysis.
5. Examine the paradigm shift of nursing theory within the ethic of care and standards of professional nursing practice in providing care to culturally diverse families, communities and populations.
6. Translate the application and development of theory-based nursing practice within the nursing
7. Critically reflect upon one's personal philosophy and professional development of professional nursing in the advanced practice nursing role.

Matrix of outcomes, activities and 2011 AACN *The Essentials of Master's Education in Nursing*

https://www.aacnnursing.org/portals/42/publications/mastersessentials11.pdf

Program Student Learning Outcomes (AACN Element)	Related Course Outcome	Learning Activity
Integrate advanced knowledge from nursing, related sciences, and humanities to provide a theoretical framework for advanced practice in population health nursing. (**Element I**)	1, 2,4	Discussion Papers Powerpoint presentation
Apply organizational theories and systems thinking to improve the quality, cost-effectiveness and safety outcomes of practice decisions and initiatives **(Element II & III)**	3, 5	Discussion Papers Powerpoint presentation
Demonstrate competencies to develop, implement, and evaluate evidence-based interventions and conduct a scholarly inquiry**. (Element IV)**	2, 3, 4	Discussion Papers Powerpoint presenations

Apply knowledge of informatics to coordinate and improve programs and systems of care. **(Element V)**		
Incorporate advanced nursing practice standards to advocate for health policy and effect systems-level change within populations, healthcare environments, and organizational systems. **(Element VI)**	1, 2, 3, 5	Discussion Papers Powerpoint presentation
Apply evidence-based and interprofessional approaches for the design and delivery of comprehensive, culturally competent care to individuals/families, communities, and populations **(Element VII & VIII)**	5	Discussion Papers Powerpoint presentation
Practice in an advanced nursing role in collaboration with other disciplines to improve population health outcomes. **(Element IX)**	3, 7	Discussion Papers Powerpoint presentation

COURSE MATERIALS:

American Psychological Association. (2019). *Publication manual of the American Psychological Association* (7th ed.). Author. ISBN 978-1-4338-3216-1

Butts, J. B. & Rich, K. L. (2018) (Eds.). *Philosophies and theories for advanced nursing practice* (3rd ed.). Jones & Bartlett Learning. ISBN 978-1-2841-1224-5

Chinn, P. L., & Kramer, M. K. (2018). *Knowledge development in nursing: Theory and process* (10th ed.). Elsevier Mosby. ISBN-13: 978-0-3235-3061-3

COURSE REQUIREMENTS:

Activity	Point Values
Nursing Theory presentation	20
Concept Analysis	20
Discussions	20
Application of theory to practice	20
Personal philosophy for nursing	20
Total Percentage:	100%

Assignment Descriptions

1. **CONCEPT ANALYSIS PAPER:**

Choose a concept relevant to your nursing practice [present or future]. Following the guidelines given in Chinn & Kramer [Chapter 7], analyze the concept and develop cases: model, contrary, related, and borderline. The paper length should not exceed 10 pages.

2. **NURSE THEORIST POWERPOINT PRESENTATION:**

Individually choose a nursing theory for analysis via class presentation. Your presentation needs to include the following:

1. Why this theory was chosen 10%
2. Appropriateness of theory chosen for analysis 10%
3. Presentation of key points of theory 40%
4. Critique [evaluation of theory following standardized format, (e.g., Chinn & Kramer; Walker & Avant, etc) 20%
5. Creativity of presentation 15%
6. Organization of presentation 5%

One class period prior to your presentation, give your classmates an appropriate reading assignment from the nursing literature for the theory.

3. **APPLICATION OF SELECTED THEORY TO PRACTICE:**

The purpose of this assignment is to demonstrate the application of a nursing theory/model to practice. Review the clinical case and apply your chosen theory to the case. Your paper should not exceed 4-5 pages.

4. **PERSONAL PHILOSOPHY OF NURSING PAPER:**

The purpose of this paper is to define, describe and explain *your* thoughts, feelings and beliefs about the four concepts of the nursing metaparadigm and their interrelationship to one another as they guide *your current* nursing practice. There are no right or wrong thoughts, feelings or beliefs; these represent your own philosophical beliefs. If your current philosophy includes any particular nursing or other theory(ies), identify these. The final paper is to be typed according to APA format and no more than 5 pages in length. The paper should include a title page and reference list, however, these pages are not to be included in the final count.

5. **Discussion**

The discussion areas focus on selected topics or issues. The "Ways of Knowing" from Chapter 1 of Chinn and Kramer textbook will be used as the framework for your posts and responses. It is expected you will focus your discussions on the following:
  ➢ Evidence in the literature to support your post and responses (**empiric** knowing);
  ➢ New insights gleaned from your readings or our discussion (**aesthetic** knowing);
  ➢ Ethical stance or moral reasoning perspective (**ethical** knowing);
  ➢ Personal or professional development and formation (**personal** knowing); and
  ➢ Solutions to challenges to improve outcomes or inequalities (**emancipatory** knowing).
It is expected that the **process** for all posts and responses are:
  ➢ **Timely** with adequate time to allow for participation with peers and faculty.
  ➢ **Constructive** with reflective feedback based on theory, evidence, and experience.
  ➢ **Inquisitive** with questions to peers and professor to advance the dialogue.
  ➢ **Respectful** following proper netiquette.

Students are also expected to engage in seminar discussions by offering comments at least 3 times for each seminar. All posts (initial and response) will be completed prior to the start of the following module.   All posts should be thoroughly developed and free from misspellings and grammar errors Finally, posts should reference reading material with sources cited in APA format. No posts which "simply agree" will be considered participation in the discussion. Please refer to the rubric provided.

GRADING:

Course Average	Final Grade
94-100	A
90-93	A-
87-89	B+
83-86	B
80-82	B-
77-79	C+
73-76	C
<60	E

CLASS POLICIES:

Medical Excuse Policy: http://www.albany.edu/health_center/medicalexcuse.shtml.

Absence due to religious observance: As per New York State Education Law Section 224-A (https://www.nysenate.gov/legislation/laws/EDN/224-A) campuses are required to excuse, without

penalty, individual students absent because of religious beliefs, and to provide equivalent opportunities for make-up examinations, study, or work requirements missed because of such absences. Faculty should work directly with students to accommodate absences.

SCHOOL AND UNIVERSITY RESOURCES AND POLICIES:

Academic Integrity: Students are expected to abide by the University at Albany's Code of Academic Integrity. Collaboration is encouraged in many instances; however, work submitted for academic credit must be the **student's own work**. Academic dishonesty (refer to http://www.albany.edu/undergraduate_bulletin/regulations.html), may result in a failing grade for the course and the student(s) may be subject to sanctions by the University.
Talking, discussions and the use of any electronic device are not permitted during quizzes and exams. It will be assumed that students who are talking are cheating and will be given a failing grade for the exam or quiz, which may lead to failure of the course and additional disciplinary action by the University.

Plagiarism: As stated on the Undergraduate Academic Regulations website (http://www.albany.edu/undergraduate_bulletin/regulations.html) plagiarism is defined as:

"Presenting as one's own work the work of another person (for example, the words, ideas, information, data, evidence, organizing principles, or style of presentation of someone else). Some examples of plagiarism include copying, paraphrasing, or summarizing without acknowledgment, submission of another student's

work as one's own, the purchase/use of prepared research or completed papers or projects, and the unacknowledged use of research sources gathered by someone else. Failure to indicate accurately the extent and precise nature of one's reliance on other sources is also a form of plagiarism. Students are responsible for understanding legitimate use of sources, the appropriate ways of acknowledging academic, scholarly, or creative indebtedness.

*Examples of plagiarism include: failure to acknowledge the source(s) of even a few phrases, sentences, or paragraphs; failure to acknowledge a quotation or paraphrase of paragraph-length sections of a paper; failure to acknowledge the source(s) of a major idea or the source(s) for an ordering principle; failure to acknowledge the source (quoted, paraphrased, or summarized) of major sections or passages in the paper or project **or website**; the unacknowledged use of several major ideas or extensive reliance on another person's data, evidence, or critical method; submitting as one's own work, work borrowed, stolen, or purchased from someone else."*

Students are strongly advised to avoid placing themselves in situations where academic integrity may be compromised. Please refer to the University's website regarding Undergraduate Academic Regulations (http://www.albany.edu/undergraduate_bulletin/regulations.html).

Accommodations: Reasonable accommodations will be provided for students with documented physical, sensory, systemic, medical, cognitive, learning and mental health (psychiatric) disabilities. If you believe you have a disability requiring accommodation in this class, please notify the Director of Disability Access and Inclusion Student Services (Campus Center 130, 518-442-5501, daiss@albany.edu). Upon verification and after the registration process is complete, DAISS will provide you with a letter that informs the course instructor that you are a student with a disability registered with DAISS and list the recommended reasonable accommodations.

Mental Health: As a student there may be times when personal stressors interfere with your academic performance and/or negatively impact your daily life. The University at Albany Counseling and Psychological Services (CAPS) provides free, confidential services including individual and group psychological counseling and evaluation for emotional, social and academic concerns. Given the COVID pandemic, students may consult with CAPS staff remotely by telephone, email or Zoom appointments regarding issues that impact them or someone they care about. For questions or to make an appointment, call (518) 442-5800 or email consultation@albany.edu. Visit www.albany.edu/caps/ for hours of operation and additional information.

If your life or someone else's life is in danger, please call 911. If you are in a crisis and need help right away, please call the National Suicide Prevention Lifeline at 1-800-273-TALK (8255).

Students dealing with heightened feelings of sadness or hopelessness, increased anxiety, or thoughts of suicide may also text "GOT5" to 741741 (Crisis Text Line).

<u>**COURSE SCHEDULE:**</u>

Review #5 Discussion above for expectations of discussion posts

Session# Date	Topics	Readings/Assignments
Weeks 1 & 2	Knowledge development and Nursing science	Chinn & Kramer Chapters 1 & 2 Butts and Rich Chapters 2 & 4 Discussion: Social, Political, Economic Influences on Nursing knowledge development Using the Discussion expectations, address one of the questions listed in Chinn & Kramer, *Discuss This* page 62. **DUE: Week 2: Selection of Theorist for PP presentation**
Weeks 3 & 4	Philosophies and Theories	Chinn & Kramer Chapter 5 Butts & Rich Chapters 1, 4 & 5 Discussion: Epistemology Using the Discussion expectations, address one of the discussion questions listed in Butts and Rich, page 110
Weeks 5 & 6	Moral Reasoning and Analysis	Chinn & Kramer Chapter 4 Butts & Rich: Chapters 8, 9, 22, & 24. Discussion: **Moral Dissonance and Moral Distress** Using the Discussion expectations, address one of the questions listed in Chinn & Kramer, *Why*

		is this important?, page 107
Weeks 7 & 8	Translation: Theory to Practice	Chinn & Kramer Chapter 7 & 9 Butts & Rich Chapters 10-17 Discussion: Annotated Bibliography: Integration of Discipline Theories and Practice; Advancing Theory to Practice. Topic for discussion to be assigned at the beginning of the module **DUE Week 8: APPLICATION OF SELECTED THEORY TO PRACTICE paper**
Weeks 9 & 10	Translation: Theory to Education	Chinn & Kramer: Chapter 6 Butts & Rich: Chapter 25 Discussion: Annotated Bibliography: Integration of Discipline Theories and Education; Advancing Theory to Education Topic for discussion to be assigned at the beginning of the module **Due week 10: CONCEPT ANALYSIS PAPER:**
Weeks 11 & 12	Translation: Theory to Leadership	Chinn & Kramer: Chapter 3 Butts & Rich: Chapters 6, 7, 14, 15, 23, & 26; Discussion: Annotated Bibliography: Integration of Discipline Theories and Leadership; Advancing Theory to Leadership Topic for discussion to be assigned at the beginning of the module **DUE Week 12: NURSE THEORIST POWERPOINT PRESENTATION**
Week 13	Professional Formation of theory	Butts & Rich: Chapters 18-24; Discussion: Conceptual Model; Ways of Knowing In the discussion, each student will discuss their PERSONAL PHILOSOPHY OF NURSING PAPER **DUE Week 13 PERSONAL PHILOSOPHY OF NURSING PAPER**

Weeks 9 & 10	Translation: Theory to Education	Chinn & Kramer: Chapter 6 Butts & Rich: Chapter 25 Discussion: Annotated Bibliography: Integration of Discipline Theories and Education; Advancing Theory to Education **Due week 10: CONCEPT ANALYSIS PAPER:**
Weeks 11 & 12	Translation: Theory to Leadership	Chinn & Kramer: Chapter 3 Butts & Rich: Chapters 6, 7, 14, 15, 23, & 26; Discussion: Annotated Bibliography: Integration of Discipline Theories and Leadership; Advancing Theory to Leadership **DUE Week 12: NURSE THEORIST POWERPOINT PRESENTATION**
Week 13	Professional Formation of theory	Butts & Rich: Chapters 18-24; Discussion: Conceptual Model; Ways of Knowing **DUE Week 13 PERSONAL PHILOSOPHY OF NURSING PAPER**

NSG 512 Nursing Research Methods

INSTRUCTOR:
Name and Title   TBA

OFFICE HOURS:

COURSE CREDIT HOURS: 3 credits

This course is delivered online synchronously and asynchronously. Students should dedicate an average of 12 – 15 hours per week to this course.

COURSE PREREQUISITES/COREQUISITES:

College level Statistics course

COURSE DESCRIPTION:

This course is delivered online with a combination of synchronous and asynchronous classes. The research process for quantitative and qualitative research studies is critically examined. The methods of scientific inquiry, problem identification, use of underlying theories and conceptual models, research design, measurement, data collection and analysis, and ethical considerations are applied to the development of a research proposal. Critical analysis of existing research studies and learner reports are used to further refine the development of research skills. The significance of research findings to practice environments and ongoing research are identified as they relate to evidence-based practice in nursing. Critical reflection upon one's developing role as a professional in advanced practice is explored as it relates to participation and collaboration in research activities within health care systems and communities.

COURSE LEARNING OBJECTIVES:

Upon completion of this course, students will be able to:

1. Integrate knowledge gained from nursing, the arts and sciences to utilize and apply the research process to advanced nursing roles.
2. Develop a research proposal that conceptualizes a nursing research problem, applies relevant literature, discusses research questions, and describes an appropriate research design and methodologies for evidence-based practice.
3. Critically examine quantitative and qualitative methodologies used in nursing and health related research literature.
4. Utilize research to promote health among culturally diverse families and communities in a variety of health care settings.
5.   Employ critical thinking, collaboration, and decision making to the development and utilization of research in the advanced nursing role.
6. Critically evaluate the significance of research in the development of advanced practice nursing

Matrix of outcomes, activities and 2011 AACN *The Essentials of Master's Education in Nursing*

https://www.aacnnursing.org/portals/42/publications/mastersessentials11.pdf

Program Student Learning Outcomes (AACN Element)	Related Course Outcome	Learning Activity
Integrate advanced knowledge from nursing, related sciences, and humanities to provide a theoretical framework for advanced practice in population health nursing. (**Element I**)	1, 6	Team presentation Discussion Papers
Apply organizational theories and systems thinking to improve the quality, cost-effectiveness and safety outcomes of practice decisions and initiatives **(Element II & III)**		
Demonstrate competencies to develop, implement, and evaluate evidence-based interventions and conduct a scholarly inquiry**. (Element IV)**	1, 2, 3,4,5.6	Team presentation Discussion Papers
Apply knowledge of informatics to coordinate and improve programs and systems of care. **(Element V)**		

Incorporate advanced nursing practice standards to advocate for health policy and effect systems-level change within populations, healthcare environments, and organizational systems. **(Element VI)**		
Apply evidence-based and interprofessional approaches for the design and delivery of comprehensive, culturally competent care to individuals/families, communities and populations **(Element VII & VIII)**	2, 3, 5	Team presentation Discussion Papers
Practice in an advanced nursing role in collaboration with other disciplines to improve population health outcomes. **(Element IX)**	5,6	Team presentation Discussion Papers

COURSE MATERIALS:

American Psychological Association. (2020). *Publication manual of the American Psychological Association* (7th ed.). Author.

Polit, F. D., & Beck, T. C. (2021). *Nursing research: Generating and assessing evidence for nursing practice* (11th ed.). Lippincott, Williams & Wilkins.

Additional Readings
In addition to the above texts, theoretical and empirical literature relevant to your research proposal topic will be required as you develop your proposal. Each of you will be expected to explore the *scholarly literature* through the internet and libraries. This will be highly individualized to your selected topic; however, it is fair to estimate at least 20 sources will be integrated in each of your proposals.

COURSE REQUIREMENTS:

Activity	Percentage of grade
Research Proposal Idea Paper	10%
Power point presentation	20%
Participation/ Discussions	35%
Research Proposal	35%

1. **Research Proposal Idea Paper**
The student will provide a brief review of the literature for the background, a research question based on the literature review and significance of the research question.

2. Discussion Forums
There are Discussion forums with a focus on critical conversations as they relate to selected topics or issues. Students are required to participate in the discussion boards throughout the semester. All posted discussions will be graded according to the discussion rubric. Most discussion boards will take place over the course of ONE week with specific dates listed. The instructor will monitor the discussions, but NOT actively participate in them. If necessary, feedback from the course faculty will be provided after the full students' discussion has occurred. Discussion boards will be open to begin on Monday at 8:00 AM and closed on every Sunday by midnight. Students are expected to be prepared by reading materials to learn and contribute to class discussion. Late or no postings will result in point deductions.

3. Research Proposal
Based on the *research proposal idea paper* the student will develop a research proposal.

Refer to below website for components

https://www.umass.edu/cfr/grant-writing/basic-components-proposal

4. PowerPoint presentation
Students will present a PowerPoint presentation of their research proposal to the class

GRADING:

Course Average	Final Grade
94-100	A
90-93	A-
87-89	B+
83-86	B
80-82	B-
77-79	C+
73-76	C
<60	E

CLASS POLICIES:

Medical Excuse Policy: http://www.albany.edu/health_center/medicalexcuse.shtml.

Absence due to religious observance: As per New York State Education Law Section 224-A (https://www.nysenate.gov/legislation/laws/EDN/224-A) campuses are required to excuse, without penalty, individual students absent because of religious beliefs, and to provide equivalent opportunities for make-up examinations, study, or work requirements missed because of such absences. Faculty should work directly with students to accommodate absences.

SCHOOL AND UNIVERSITY RESOURCES AND POLICIES:

Academic Integrity: Students are expected to abide by the University at Albany's Code of Academic Integrity. Collaboration is encouraged in many instances; however, work submitted for academic credit must be the **student's own work**. Academic dishonesty (refer to http://www.albany.edu/undergraduate_bulletin/regulations.html), may result in a failing grade for the course and the student(s) may be subject to sanctions by the University.
Talking, discussions and the use of any electronic device are not permitted during quizzes and exams. It will be assumed that students who are talking are cheating and will be given a failing grade for the exam or quiz, which may lead to failure of the course and additional disciplinary action by the University.

Plagiarism: As stated on the Undergraduate Academic Regulations website (http://www.albany.edu/undergraduate_bulletin/regulations.html) plagiarism is defined as:

"Presenting as one's own work the work of another person (for example, the words, ideas, information, data, evidence, organizing principles, or style of presentation of someone else). Some examples of plagiarism include copying, paraphrasing, or summarizing without acknowledgment, submission of another student's

work as one's own, the purchase/use of prepared research or completed papers or projects, and the unacknowledged use of research sources gathered by someone else. Failure to indicate accurately the extent and precise nature of one's reliance on other sources is also a form of plagiarism. Students are responsible for understanding legitimate use of sources, the appropriate ways of acknowledging academic, scholarly, or creative indebtedness.

*Examples of plagiarism include: failure to acknowledge the source(s) of even a few phrases, sentences, or paragraphs; failure to acknowledge a quotation or paraphrase of paragraph-length sections of a paper; failure to acknowledge the source(s) of a major idea or the source(s) for an ordering principle; failure to acknowledge the source (quoted, paraphrased, or summarized) of major sections or passages in the paper or project **or website**; the unacknowledged use of several major ideas or extensive reliance on another person's data, evidence, or critical method; submitting as one's own work, work borrowed, stolen, or purchased from someone else."*

Students are strongly advised to avoid placing themselves in situations where academic integrity may be compromised. Please refer to the University's website regarding Undergraduate Academic Regulations (http://www.albany.edu/undergraduate_bulletin/regulations.html).

Accommodations: Reasonable accommodations will be provided for students with documented physical, sensory, systemic, medical, cognitive, learning and mental health (psychiatric) disabilities. If you believe you have a disability requiring accommodation in this class, please notify the Director of Disability Access and Inclusion Student Services (Campus Center 130, 518-442-5501, daiss@albany.edu). Upon verification and after the registration process is complete, DAISS will provide you with a letter that informs the course instructor that you are a student with a disability registered with DAISS and list the recommended reasonable accommodations.

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If your life or someone else's life is in danger, please call 911. If you are in a crisis and need help right away, please call the National Suicide Prevention Lifeline at 1-800-273-TALK (8255).

Students dealing with heightened feelings of sadness or hopelessness, increased anxiety, or thoughts of suicide may also text "GOT5" to 741741 (Crisis Text Line).

COURSE SCHEDULE:

Session# Date	Topics	Readings/Assignments
Week 1	*Ice Breaker Discussion – Get to Know Your Classmates* Overview, Systematic Inquiry - Evidence-based Practice, Nursing Research: Influences and Topics	• Polit & Beck – Chapters 1 & 3 **Recommended Reading** • Campbell, M. (2016). Getting to grips with statistics: Understanding variables. *British Journal of Midwifery, 24,* 738-741. • McKeever, S. et al. (2016). Engaging a nursing workforce in evidence-based practice: Introduction of a nursing clinical effectiveness committee*. Worldviews on Evidence-Based Nursing*, 13, 85-88. Steven, K. R. (2013). The impact of evidence-based practice in nursing and next big ideas. *The Online Journal of Issues in Nursing*, 18, DOI: *Discussion* Evidence-Based Practice and Research: Why Nursing Research
Week 2	Database Search and Types of Evidence	**Required Reading** • Polit & Beck – Chapters 2 **Recommended Reading** • Facchiano, L. & Snyder, C. H. (2012). Evidence-based practice for the busy nurse practitioner: Part 1: Relevance to clinical practice and clinical inquiry process. *Journal of the American Academy of Nurse Practitioners, 24,* 579-585.

		• Facchiano, L. & Snyder, C. H. (2012). Evidence-based practice for the busy nurse practitioner: Part 2: Searching for the best evidence to clinical inquiries. *Journal of the American Academy of Nurse Practitioners, 24,* 640-645. **Discussion** - data searches
Week 3	Background Statement, Significance, Problem Statement, Purpose	**Required Reading** • Polit & Beck – Chapters 4 – 6 • Salkind – Chapter 7 **Recommended Reading** • Farrugia, P., Petrisor, B.A., Farrokhyar, F., & Bhandari, M. (2010). Research questions, hypotheses, and objectives. Can J Surg, 53, 278-281. • Schaffer, Sandau, & Diedrick, L. (2013). Evidence-based practice models for organizational change: Overview and practical applications. Journal of advanced nursing, 69, 1197-1209. do: 10.1111/j.1365-2648.2012.06122. • Stillwell, S. B., Fineout-Overholt, E., Melnyk, B.M., Williamson, K. M. (2010). Evidence-based practice, step by step: searching for the evidence. *American Journal of Nursing, 110* (5), 41-7. **Discussion** – Possible topic
Week 4	Theoretical Framework and Ethical Issues	**Required Reading** • Polit & Beck – Chapter 6 & 7 **Recommended Reading** (Available in Doc Sharing) • Larson, E., Foe, G., & Lally, R. (2015). Reading level and length of written research consent forms. Clinical Trans Science. 8, 355-356. doi:10.1111/cts12253 • Newhouse, R. P., Poe, S., Pettit, J. C., & Rocco, L. (2006). The slippery slope: Differentiating between quality improvement and research. *The Journal of Nursing Administration, 36*, 211-219. • Polit & Beck – Chapters 12 (optional) • Stausmire, J. M. (2014). Quality improvement or research – Deciding which road to take. Critical Care Nurse, 34, doi: 10.4237/ccn2014177 Discussion – ethical issues ***Research Proposal Idea Paper due***

Week 5	Quantitative Research	**Required Reading** • Polit & Beck – Chapters 9 **Recommended Reading** • Hoare, Z & Hoe, J. (2012). Understanding quantitative research: part 1. *Nursing Standard*, 27, 15-17, 52-57. • Hoare, Z & Hoe, J. (2012). Understanding quantitative research: part 2. *Nursing Standard*, 27, 18, 48-55 *Discussion -* evaluation of quantitative research study
Week 6	Sampling, Data Collection, and Data Quality in Quantitative Research	**Required Reading** • Polit & Beck – Chapter 13-15 **Recommended Reading** • Connor, L., Paul, F., McCabe, M., & Ziniel, S. (2017). Measuring nurses' values, implementation, and knowledge of evidence-based practice: Further psychometric testing of the quick-EBP-VIK Survey. *Worldviews on Evidence-Based Nursing*, 14, 10-21. • Mayo, A. M. (2015). Psychometric Instrumentation: Reliability and validity of instruments used for clinical practice, evidence-based practice projects and research studies. *Clinical Nurse Specialist*. May/June, doi: 10.1097/NUR.000000000000131 • Rojjanasrirat, W., Wambach, K. A., Sousa, V. D., & Gajewski, B. J. (2010). Psychometric evaluation of employer support for breastfeeding questionnaires. *Journal of Human Lactation, 26*, 286, DOI: 10.1177/0890334410365066. **Discussion** - issues in sampling
Week 7	Rigor, Validity, Measurement of Quantitative Research	**Required Reading** • Polit & Beck – Chapter 10 • Salkind – Chapter 6 **Recommended Reading** 5. Murfield, J., Cooke, M., Moyle, w., Shum, D., & Harrison, S. (2011). Conducting randomized controlled trials with older people with dementia in long-term care: Challenges and lessons learnt. *International Journal of Nursing Practice, 17,* 52-59. doi:10.1111/j.1440-172X.2010.01906.x **Discussion** – rigor in research
Week 8	Statistical Methods and Data Analysis	**Required Reading** • Polit & Beck – Chapter 17-19, 21; page 385-405; 412-419 • Salkind – Chapter 9, 11-15

		Recommended Reading • Garcia-Perez, M. A. (2012). Statistical conclusion validity: Some common threats and simple remedies. Frontiers in Psychology, doi:10.3389/fpsyg.2012.00325 • Hayat, M.J. (2010). Understanding Statistical Significance. *Nursing Research, 59*, 219-223. • Schober, P., Bossers, S. M., & Schwarte, L. A. (2018). Statistical significance versus clinical importance of observed effect sizes: What do *p* values and confidence intervals really represent? Anesthesia & Analgesia. 126(3), 1068-1072. Doi: 101213/ANE000000000000002798 • Yan, F. Rober, M., & Li, Y. (2017). Statistical methods and common problems in medical or biomedical science research. Int J Physiology Pharmacology, 9, 157-163. ISSN:1944-8171/IJPPP0066082 **Discussion -** data presentation
Week 9	Qualitative Research Designs	**Required Reading** • Polit and Beck - Chapter 22 **Recommended Reading** • Austin, Z. & Sutton, J. (2014). Qualitative Research: Getting started. Canada Journal of Hospital Pharmacologist. 67, 436-440. • 2. Korstjens, I. & Moser, A. (2017). Practical guidance to qualitative research part 2: Context, research questions, and designs. European Journal of General Practice, 23, 274-279. https://doi.org/10.1080/138147882017.1375090 • Wu, Y. P., Thompson, D., Aroian, K. J., McQuaid, E. L., & Deatrick, J. A. (2016). Commentary: Writing and evaluating qualitative research reports. Journal of Pediatric Psychology, 41(5), 493-505. Doi: 10.1093/jpepsy/jsw032. **Discussion** -qualitative research
Week 10	Sampling, Data Collection, and Data Analysis and Trustworthiness in Qualitative Research	• **Required Reading** • Polit and Beck - Chapter 23-26 • Beck, C. T. (2009). Critiquing qualitative research. *AORN Journal, 90*(4), 543 - 554. **Recommended Reading** • Forero et al. (2018). Application of four-dimension criteria to assess rigor of qualitative research in emergency medicine. BMC Health Services Research, 18:120. https://doi.org/10.1186/s12913-018-2915-2.

		• Korstjens, I. & Moser, A. (2017). Practical guidance to qualitative research part 4: Trustworthiness and publishing. European Journal of General Practice, 24, 120-124. https://doi.org/10.1080/138147882017.1375092. • Moser, A. & Korstjens, I. (2018). Practical guidance to qualitative research part 3: Sampling, data collection, and analysis. European Journal of General Practice, 23, 274-279. https://doi.org/10.1080/138147882017.1375091. • Sandelowski, M., Voils, C. I., Barroso, J., & Lee, E. (2008). "Distorted into Clarity": A methodological case study illustrating the paradox of systematic review, 31, 454-465. Doi:10.1002/nur.20278. **Discussion** – qualitative research sampling verse quantitative research sampling
Week 11	Implementing and Evaluating Results into Practice	**Required Reading** • Polit & Beck, Chapter 30, 31 • APA Publication Manual, Chapter 2 - 4 • Facchiano, L. & Snyder, C. H. (2013). Evidence-based practice for the busy nurse practitioner: Part 4: Putting it all together. *Journal of the American Academy of Nurse Practitioners, 25,* 24-31. **Recommended Reading** 1. Gallagher, E., Rogers, B. B., & Brant, J. M. (2017). Cancer-related pain assessment. *Clinical Journal of Oncology Nursing,* 21, 8-12. Doi: 10.1188/17.CJON.S3.8-12. **Discussion** – implementation of research proposal into practice
Week 12	Disseminating Findings and Next steps	**Required Reading** • Polit & Beck, Chapter 32 **Recommended Reading** • Berg, J. & Hicks, R. (2017). Successful design and delivery of a professional poster. *Journal of American Association of Nurse Practitioners,* 29, 461-469. Doi: 10.1002/2327-6924.12478. • Hasse, J. M. (2013). Developing the 'Write' skills for publishing. *Nutrition in Clinical Practice, 28,* 153-157. DOI: 10.1177/0884533613480526. • Hicks, R. (2014). Transforming a presentation to a publication: Tips for nurse practitioners. *American Association of Nurse Practitioners,* 27, 488-496. Doi: 10.1002/2327-6924.12228. • Kennedy, M. S. (2018). Journal Publishing: A Review of the Basics. *Seminars in Oncology*

		Nursing, 34, 361-371. https://doi.org/10.1016/j.soncn.2018.09.004. • McClendon, K. S. & Stover, K. R. (2014). Tips for a successful poster presentation. *Am J Helth-Syst Pharm,* 71, 449-451. Doi: 10.2146/ajhp130116. **Discussion** – implementation of research proposal into practice (cont)
Week 13	**Final project**	PP of final proposal to the class ***Research Proposal Due*** **Course evaluation**

NSG 514 Health Care Policy and Leadership

INSTRUCTOR:
Name and Title   TBD

OFFICE HOURS:

COURSE CREDIT HOURS: 3 credits

This course is delivered online synchronously and asynchronously. Students should dedicate an average of 12 – 15 hours per week to this course.

COURSE PREREQUISITES/COREQUISITES:

COURSE DESCRIPTION:
The role of the advanced practice nurse in shaping health care and population health policies are explored. The impact of the economic, environmental, socio-political, cultural, ethical, and governmental factors on health care delivery, financing, and availability are discussed .The historical and current role of the profession of nursing in population health and health care policy are explored. The role of the advanced practice nurse in research and advocacy to shape health care policy is explored.

COURSE LEARNING OBJECTIVES:

Upon successful completion of the course, the student will able to:

1. Analyze mechanisms of the development of health care and population health policy

2. Evaluate the historical and current role of the profession of nursing in population health and health care policy.

2. Evaluate a health care policy regarding healthcare and population health.

3. Critique nursing's contributions and role regarding the health care policy.

4. Analyze the utilization of research and evidence-based nursing practice in shaping the health policy agenda.

5. Explore the economic, socio-political, cultural, ethical, and governmental factors impacting health care delivery, financing, and availability.

6. Evaluate nursing leadership skills for policy development and implementation

7. Advocate for healthcare policies and regulations to enhance value, quality, and cost- effectiveness for community and population health

Matrix of outcomes, activities and 2011 AACN *The Essentials of Master's Education in Nursing*

https://www.aacnnursing.org/portals/42/publications/mastersessentials11.pdf

Program Student Learning Outcomes (AACN Element)	Related Course Outcome	Learning Activity
Integrate advanced knowledge from nursing, related sciences, and humanities to provide a theoretical framework for advanced practice in population health nursing. (**Element I**)	1	Discussion Papers Team presentation
Apply organizational theories and systems thinking to improve the quality, cost-effectiveness and safety outcomes of practice decisions and initiatives **(Element II & III)**	5	Discussion Papers Team Presentation
Demonstrate competencies to develop, implement, and evaluate evidence-based interventions and conduct a scholarly inquiry**. (Element IV)**	4	Discussion

		Papers
		Team presentation
Apply knowledge of informatics to coordinate and improve programs and systems of care. **(Element V)**	2, 4, 5	Discussion
		Papers
		Team Presentation
Incorporate advanced nursing practice standards to advocate for health policy and effect systems-level change within populations, healthcare environments, and organizational systems. **(Element VI)**	1, 2, 3,5	Discussion
		Papers
		Team Presentation
Apply evidence-based and interprofessional approaches for the design and delivery of comprehensive, culturally competent care to individuals/families, communities and populations **(Element VII & VIII)**	4	Discussion
		Papers
		Team Presentation
Practice in an advanced nursing role in collaboration with other disciplines to improve population health outcomes. **(Element IX)**	2,6,7	Discussion
		Papers
		Team Presentation

COURSE MATERIALS:

- Mason, D., Dickson, E., McLemore, M. & Perez (2021) *Policy and Politics in Nursing and Healthcare*. Elsevirer, 8th Ed
- Borkowski, N. (2015). *Organizational behavior, theory, and design in health care*. Jones & Bartlett Publishers.
- Additional readings will be assigned and provided in Blackboard.

COURSE REQUIREMENTS:

Evaluation component	Percentage of Total Grade
Online participation	20%
Introductory Policy Issue Paper	20%
Policy Analysis Exercise	30%
Leadership Assignment	15%
Team Presentation	15%

Assignment Descriptions

1. Introductory Policy Issue Paper (points)

Develop an introductory level policy issue paper [e.g. policy brief] that identifies the problem/issue for which there is no standing policy. Identify your position and the policy actions that you would like to see happen.

2. Policy Analysis Exercise (30 points)

Conduct a policy analysis that identifies the specifics of your policy proposal, including the stakes and stakeholders, implicit values, ethical considerations, beneficiaries of the policy and outcomes.

3. Discussion/Case Study   (20 points)

For all discussions, the student will be assessed on the quality, quantity, and timeliness of their discussion contributions. For each class, case studies are assignment from examples provided in Mason, el al , (2021) *Taking Action* chapters. Students are expected to read assigned chapters and additional reading listed. Discussion of the case study will focus are the following:

- o Impact on health care policy around healthcare and population health.
- o Critique nursing's contributions and role regarding a health care policy.
- o Analyze the utilization of research and evidence-based nursing practice in shaping the health policy agenda.
- o Explore as appropriate the economic, socio-political, cultural, ethical, and governmental factors impacting health care delivery, financing, and availability

Discussion will include 1 initial post + 1 response post in the minimum.

4. Leadership Assignment (15 points):

In conjunction with this assignment, you are expected to take on a leadership challenge in your organization. This assignment will be in the format of a PAR:

> Problem you tackled
>
> Action you took
>
> Result you obtained

You will draw on course content to identify, develop, and practice your leadership skills.

> 1. At the beginning of the semester identify a leadership **P**roblem that you will tackle during the semester in your organization (One page, include background and references)

> 2. After completing half of the course, submit a one page **A**ction you will take – include references to material you learned in class and how they influenced what you will do and a description of the role of others who are or will be involved

> 3. At the end of the semester describe what happened and the results you have obtained to date and any anticipated future results. The three sections should be assembled into a report of your leadership actions.

5. Presentation (15 points)

The class will be divided into teams to develop a team-based presentation on a special topic. The class will be given one class session to organize and another for the presentation based on one of the following chapters. Other resources to augment the chapter must be used and cited. Each team will submit an annotated citation bibliography be distributed to the rest of the class. Teams will select on a first-come, first-serve basis from Multicultural Communities (Mason, et al., Ch 19) Improving LGBTQ+ Health (Mason, et al., Ch 26) Reproductive Health (Mason, et al, Ch 27) Primary Care (Mason, et al., Ch 31) or Military and Veteran Care(Mason, et al.' Ch 36)

GRADING:

Course Average	Final Grade
94-100	A
90-93	A-
87-89	B+
83-86	B
80-82	B-
77-79	C+
73-76	C
<60	E

CLASS POLICIES:

Medical Excuse Policy: http://www.albany.edu/health_center/medicalexcuse.shtml.

Absence due to religious observance: As per New York State Education Law Section 224-A (https://www.nysenate.gov/legislation/laws/EDN/224-A) campuses are required to excuse, without penalty, individual students absent because of religious beliefs, and to provide equivalent opportunities for make-up examinations, study, or work requirements missed because of such absences. Faculty should work directly with students to accommodate absences.

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(http://www.albany.edu/undergraduate_bulletin/regulations.html) plagiarism is defined as:

"Presenting as one's own work the work of another person (for example, the words, ideas, information, data, evidence, organizing principles, or style of presentation of someone else). Some examples of plagiarism include copying, paraphrasing, or summarizing without acknowledgment, submission of another student's

work as one's own, the purchase/use of prepared research or completed papers or projects, and the unacknowledged use of research sources gathered by someone else. Failure to indicate accurately the extent and precise nature of one's reliance on other sources is also a form of plagiarism. Students are responsible for understanding legitimate use of sources, the appropriate ways of acknowledging academic, scholarly, or creative indebtedness.

*Examples of plagiarism include: failure to acknowledge the source(s) of even a few phrases, sentences, or paragraphs; failure to acknowledge a quotation or paraphrase of paragraph-length sections of a paper; failure to acknowledge the source(s) of a major idea or the source(s) for an ordering principle; failure to acknowledge the source (quoted, paraphrased, or summarized) of major sections or passages in the paper or project **or website**; the unacknowledged use of several major ideas or extensive reliance on another person's data, evidence, or critical method; submitting as one's own work, work borrowed, stolen, or purchased from someone else."*

Students are strongly advised to avoid placing themselves in situations where academic integrity may be compromised. Please refer to the University's website regarding Undergraduate Academic Regulations (http://www.albany.edu/undergraduate_bulletin/regulations.html).

Accommodations: Reasonable accommodations will be provided for students with documented physical, sensory, systemic, medical, cognitive, learning and mental health (psychiatric) disabilities. If you believe you have a disability requiring accommodation in this class, please notify the Director of Disability Access and Inclusion Student Services (Campus Center 130, 518-442-5501, daiss@albany.edu). Upon verification and after the registration process is complete, DAISS will provide you with a letter that informs the course instructor that you are a student with a disability registered with DAISS and list the recommended reasonable accommodations.

Mental Health: As a student there may be times when personal stressors interfere with your academic performance and/or negatively impact your daily life. The University at Albany Counseling and Psychological Services (CAPS) provides free, confidential services including individual and group psychological counseling and evaluation for emotional, social and academic concerns. Given the COVID pandemic, students may consult with CAPS staff remotely by telephone, email or Zoom appointments regarding issues that impact them or someone they care about. For questions or to make an appointment, call (518) 442-5800 or email consultation@albany.edu. Visit www.albany.edu/caps/ for hours of operation and additional information.

If your life or someone else's life is in danger, please call 911. If you are in a crisis and need help right away, please call the National Suicide Prevention Lifeline at 1-800-273-TALK (8255).

Students dealing with heightened feelings of sadness or hopelessness, increased anxiety, or thoughts of suicide may also text "GOT5" to 741741 (Crisis Text Line).

COURSE SCHEDULE:

Topics	Readings/Assignments
Overview and History of Organizational Behavior	Borkowski (Ch 1) Mason, et al (Ch 48)
Diversity, Attitudes & Communication Focus for discussion *Racism is the workplace*	Borkowski (Ch 2-3) Mason, et al., Ch 9 Discussion - Case Study - Mason,, et al. Taking Action, Ch 58 Review to following Iheduru-Anderson, K., Shingles, R. & Akanegbu, C. (2020). Discourse of race and racism in nursing: An integrative review of literature. *PHN – Public Health Nursing.* https://doi.org/10.1111/phn.12828 ANA. The National Commission to Address Racism in Nursing https://www.nursingworld.org/practice-policy/workforce/clinical-practice-material/national-commission-to-address-racism-in-nursing/
Nursing and Health Care Policy *Focus for discussion* *Political Action in Nursing*	Mason, et al. (Ch 1, 2 ,3, 4) Discussion - Mason, Case Study - Taking Action, Ch 5. Review the following Nitzky, A. (2018). How to lead change in nursing through political action. *Oncology Nursing News* https://www.oncnursingnews.com/view/how-to-lead-change-in-nursing-through-political-action Jurns, C., (2019) "Policy advocacy motivators and barriers: Research results and applications" *OJIN: The Online Journal of Issues in Nursing* Vol. 24, No. 3. **DOI:** 10.3912/OJIN.Vol24No03PPT63 https://doi.org/10.3912/OJIN.Vol24No03PPT63 ANA. Looking Forward: ANA's 2022 Legislative and Regulatory Priorities. https://anacapitolbeat.org/2022/02/09/looking-forward-anas-2022-legislative-and-regulatory-priorities/ **Introductory Policy Issue Paper due**

Leadership *Focus for discussion* *Nurses on Boards*	Borkowski (8, 9) Mason, et al (Ch 48, 49) Discussion- Mason,, et al. Case Study - Taking Action, Ch 50 Review the following Sundean, L.J., Polifroni, E.C., Libal, K. & McGrath, J.M. (2017). Nurses on Healthcare Governing Boards: An Integrative Review. *Nursing Outlook* (in publication before print). http://dx.doi.org.ezproxy.lib.uconn.edu/10.1016/j.outlook.2017.01.0 Cleveland, K. A. & Harper, K. J., (2020, March/April). Prepare and pursue board opportunities: A practical guide for nurse leaders to serve on a board. *Nursing Economics*, *38*(2), 94-97. Nurses on Boards Coalition https://www.nursesonboardscoalition.org/about/ Cleveland, K. A. & Harper, K. J., (2020, March/April). Prepare and pursue board opportunities: A practical guide for nurse leaders to serve on a board. *Nursing Economics*, *38*(2), 94-97
Leadership 2 *Focus of discussion* *Use of social media*	Borkowski (Ch 10-11) Mason et al., (Ch 10, 14) Discussion- Mason,, et al. Case Study - Taking Action Ch 13 Review the following: Lefebvre, C.; McKinney, K.; Glass, C.; Cline, D.; Franasiak, R; Husain, I.; Pariyadath, M.; Roberson, A. ; McLean, A.; & Stopyra, J. (2020) Social media usage among nurses. *JONA*, 50 (3) doi: 10.1097/NNA.0000000000000857 NCSBN. A nurse's guide to social media. https://www.ncsbn.org/NCSBN_SocialMedia.pdf Bautista, J., Zhang, Y. & Gwizdka, J. (2021) Healthcare professionals' acts of correcting health misinformation on social media. International Journal of Medical Informatics, 148 https://doi.org/10.1016/j.ijmedinf.2021.104375 **Leadership Assignment: Problem you will tackle due**
Stress, Decision-making, Conflict Management & Negotiation *Focus discussion –* *Use of Conflict*	Borkowski (Ch 12-13 -14) Discussion- Mason,, et al. Case study -Taking Action Ch 72 Health People 2030. Objective and data https://health.gov/healthypeople/objectives-and-data\

management in creating a healthy environment	Pronk, N., Kleinman, D. Goekler, s. Ochiani, E. Blakey, C. & Brewer, K. (2021). Promoting Health and Well-being in Healthy People 2030. *Journal of Public Health Management and Practice*. 27(6) Doi: 10.1097/PHH.0000000000001254
Group dynamics & Teams Focus of discussion - *negotiating full practice authority*	Borkowski Ch (15-16-17) Mason, et al. (Ch 59) Discussion- Mason,, et al. Case Study - Taking Action *63* Review the following AANP. Issues at a Glance: Full Practice Authority https://www.aanp.org/advocacy/advocacy-resource/policy-briefs/issues-full-practice-brief AANP. State Practice Environment https://www.aanp.org/advocacy/state/state-practice-environment Leadership Assignment: Action due ANA. ANA's Principles for Advanced Practice Registered Nurse (APRN) Full Practice Authority https://www.nursingworld.org/~49f695/globalassets/docs/ana/ethics/principles-aprnfullpracticeauthority.pdf
Healthcare Finance including The Affordable Care Act *Focus of discussion Health care finances*	Mason, et al. (Ch 15-16-17-18) Discussion- Mason,, et al. Case Study -Taking Action 23 Review the following Shrank, W., DeParle, N., Gottlieb, S., Jain, S., Orszag, P., Powers, B., & Wilensky. Health costs and financing: Challenges and strategies for a new administration, *Health Affairs*, 40.
Healthcare Policy *Focus discussion of Nurses in Politics*	Mason, et al (Ch 37, 38, 39, 40) Discussion- Mason,, et al. Case Study Taking Action Ch 42. 47 Review the Following Alhassan, A., Kumi-Kyereme, A., Wombeogo, M., Fuseini, A.-G., (2019) "Nurse participation in political activities: Level and practices of registered nurses in Tamale, Ghana" *OJIN: The Online Journal of Issues in Nursing* Vol. 24, No. 2.**DOI:** 10.3912/OJIN.Vol24No02PPT63 https://doi.org/10.3912/OJIN.Vol24No02PPT63

	Rasheed, S., Younas, A. & Meddi, F. (2020). Impact of nurses' involvement in politics and policy making in in last two decades: An integrative review . *Journal of Nursing Scholarship* **https://doi.org/10.1111/jnu.12567** Wilson, D., Anafi, F., Ksui-Appiah, E., Darko, E. Deck, K. & Errasti-Ibarron, B. (2020). Determining if nurses are involved in political action or politics: A scoping literature review. *Applied Nursing Research*, 54
Public and Population Health *Focus of discussion Influencing Public Health*	Mason, et al. (Ch 15, 28, 30, 54) Discussion- Mason, et al. Case Study -Taking Action Ch 29, 68, 69 Review the following Kub, J., Kulbok, P., Miner, S., & Merrill, J. (2017). Increasing the capacity of public health nursing to strengthen the public health infrastructure and to promote and protect the health of communities and populations. *Nursing Outlook*, 65 (5) DOI:https://doi.org/10.1016/j.outlook.2017.08.009 National Academies of Sciences, Engineering, and Medicine. 2021. *The Future of Nursing 2020-2030: Charting a Path to Achieve Health Equity*. Washington, DC: The National Academies Press.https://doi.org/10.17226/25982. **Policy Analysis Exercise due**
Evolving Policies in homecare, hospice and community-based care *Focus of discussion Rural Health*	Mason, et al. (Ch 31-31-33-34) Discussion- Mason, et al. Case Study - Taking Action, Ch 55 Review the following Gregg, J., Miller, J., Tennant, K.F., (July 31, 2018) "Nurse Policy Entrepreneurship in a Rural Community: A Multiple Streams Framework Approach" *OJIN: The Online Journal of Issues in Nursing* Vol. 23, No. 3. **DOI:** 10.3912/OJIN.Vol23No03PPT63 https://doi.org/10.3912/OJIN.Vol23No03PPT63 CDC About Rural Health https://www.cdc.gov/ruralhealth/about.html National Rural Health Association Policy Brief. *Rural Public Health* https://www.ruralhealth.us/getattachment/Advocate/Policy-Documents/NRHARuralPublicHealthPolicyPaperFeb2016.pdf.aspx?lang=en-US Leider, J., Melt, M., McCullough, M., Resnick, B., Dekker, D. Alfonso, N. & Bishai, D. (2020). The state of rural public health: Enduring needs in a new decade. *American Journal of Public Health*.

Special topics preparation	Class will be organized into teams for the following topics. Mason, et al – Multicultural Communities (Ch 19) Improving LGBTQ+ Health (Ch 26) Reproductive Health (Ch 27) Primary Care (Ch 31) Military and Veteran Care (Ch 36))
Team presentations Course evaluation	Team Based Presentation on Special Topic **Leadership Assignment - Result obtained**

University at Albany
School of Public Health

NSG 600 PUBLIC/POPULATION HEALTH NURSING I
Population Health Assessment and Analysis

INSTRUCTOR: *TBA*

COURSE CREDIT HOURS: 5 credits
This is an **asynchronous online course, with an in-person clinical component, awarding five (5) graduate hours on successful completion**. The didactic portion of the class awards three (3) credit hours and the clinical portion awarding two (2) credit hours.

 This course is partially delivered online and asynchronously. It meets or exceeds the total amount of instructional work time expected in a traditional in-class course in every week of a 14 week semester: the equivalent of **five (5)** 55 minute sessions of classroom or direct faculty instruction for every **five (5)** credit course. The contact time achieved in this class is satisfied by academic engagement through required readings, class discussions, written assignments, class projects and both in-person and remote clinical experiences, moderated and supervised by faculty. Students should dedicate an average of **twenty to twenty-five (20-25) hours** per week to this course.

COURSE PREREQUISITES/COREQUISITES: NSG 500 Theoretical Foundations of Nursing Science

COURSE DESCRIPTION:

This course introduces/identifies key components of advanced population health nursing practice, including skills related to health-focused population needs assessment and population diagnosis. A special emphasis is placed on vulnerable populations and the achievement of health equity. The learner will gain skills in participation on interdisciplinary teams, as well as in forming and maintaining partnerships with diverse populations. The learner will gain proficiency in synthesizing content from biostatistics, epidemiology and other public health sciences with the advanced practice of population health nursing to promote, protect and improve the population's health. The course prepares the learner to practice population health nursing in both institutional and community settings.

COURSE LEARNING OBJECTIVES:

Upon completion of the course, the learner will be able to:

1. Identify key components of advanced population health nursing practice, theoretical and practical, including skills related to health-focused population needs assessment and population diagnosis;
2. Identify vulnerable populations;

3. Identify the antecedents of poor health experiences and outcomes and incorporate this knowledge into safe and cost-effective care and programs ;
4. Form and maintain partnerships with diverse populations;
5. Participate on and lead interdisciplinary teams;
6. Engage key informants in the assessment process;
7. Acquire, organize and analyze pertinent data for the purpose of population assessment and program planning or program revision;
8. Perform a comprehensive population assessment; and
9. Form population/community diagnoses.

FOUNDATIONAL KNOWLEDGE DOMAINS AND COMPETENCIES:

This course addresses the following Domains and Core Competencies for Community/Public Health Nurses at the levels of Tiers 2 and 3:

Foundational Competencies	Assessment Methods
Domain 1: **Assessment & Analytic Skills**	Discussion boards, written assignments, reflection papers, final presentation.
Domain 2: **Policy Development & Program Planning Skills**	Deferred to Course 2. Course 1 focuses on the groundwork for planning and development.
Domain 3: **Communication Skills**	Discussion boards, written assignments, Zoom interviews, reflection papers, final presentation.
Domain 4: **Cultural Competency Skills**	Key informant interviews, zoom clinical interviews, population assessment.
Domain 5: **Community Dimensions of Practice Skills**	Key informant interviews, Zoom clinical interviews, population assessment.
Domain 6: **Public Health Sciences Skills**	Epidemiology exercises, population assessment, final presentation.
Domain 7: **Financial Planning, Evaluation, & Management Skills**	Deferred to Course 2. Course 1 focuses on the groundwork for planning, evaluation, management.
Domain 8: **Leadership & Systems Thinking Skills**	Discussion board, written assignments, Zoom clinical presentations, final presentation.

MS COMPETENCIES: Master of Science in Population Health Nursing

This course addresses the following Master in Population Health Nursing Program core competencies defined by the American Association of Colleges of Nursing (AACN):

Essential	
I	Uses clinical reasoning to make decisions in nursing practice based on synthesis of knowledge form nursing and liberal arts and sciences
II	Provides patient-centered care across the healthcare continuum

III	Collaborates with the interprofessional teams and stakeholders to support and improve equitable population health outcomes
IV	Integrates research and evidence-based practice into nursing practice
V	Applies principles of quality and safety across the healthcare continuum
VI	Communicates and collaborates interprofessional teams and stakeholders to healthcare needs of patients and populations
VII	Applies leadership principles when responding to and leading healthcare systems
VIII	Advocates for the use of technology, informatics and innovation in the delivery of care across the healthcare continuum
IX	Integrates values, ethics, accountability, policies and regulations to provide diverse, equitable and inclusive nursing care
X	Demonstrates a commitment to personal growth, professional knowledge and capacity for leadership

Matrix of course outcomes, learning activities, CPHNO's Core Competencies for C/PHNs and based on AACN's The Essentials, 2011

Program Student Learning Outcomes/ AACN's Program Outcomes	Related Course Outcome	Learning Activity	Domains of CPHNO's Core Competencies
Integrate advanced knowledge from nursing, related sciences, and humanities to provide a theoretical framework for advanced practice in population health. (Element I)	**1 through 9**	**Readings** **Discussion Board** **Written Assignments** **Clinical Activities with Reflection** **Final Presentation**	1,3,5,6,8
Apply organizational theories and systems thinking to improve the quality, cost-effectiveness and safety outcomes of practice decisions and initiatives. (Element II & III)	**1 through 9**	**Readings** **Discussion Board** **Written Assignments** **Clinical Activities with Reflection** **Final Presentation**	1, 8
Demonstrate competencies to develop, implement, and evaluate evidence-based interventions and conduct a scholarly inquiry. (Element IV)	**1 though 9**	**Readings** **Discussion Board** **Written Assignments** **Clinical Activities with Reflection** **Final Presentation**	1,3,4,5,8
Apply knowledge of informatics to coordinate and improve programs and systems of care. (Element V)	**1 through 9**	**Readings** **Discussion Board**	1,6,8

	See: Weeks 5 through 15	Written Assignments Clinical Activities with Reflection Final Presentation	
Incorporate advanced nursing practice standards to advocate for health policy and effect systems-level change within populations, health care environments, and organizational systems. (Elements VI)	**2,3,4,7,8,9** **See: Weeks 2,3,6,12**	Readings Discussion Board Written Assignments Clinical Activities with Reflection Final Presentation	1,3,4,5,6,8
Apply evidence-based and interprofessional approaches for the design and delivery of comprehensive, culturally competent care to individuals/families, communities and populations. (Element VII & VIII)	**4,5,6** **See: Week 1** **All clinical placements**	Readings Discussion Board Written Assignments Clinical Activities with Reflection Final Presentation	3,4,5
Practice in an advanced nursing role in collaboration with other disciplines to improve population health outcomes. (Element IX)	**7,8,9**	Readings Discussion Board Written Assignments Clinical Activities with Reflection Final Presentation	1,3,4,5,6,8

In addition, students are expected to be able to perform within the Three Core Functions of Public Health and the Ten Essential Services. This course focuses on the Assessment function of public health, enabling learners to effectively monitor, identify and solve public health issues (Essential Services 1 and 2). The course also focuses on Policy Development functions: mobilizing community partnerships (Essential Service 4), developing plans to inform, educate and empower people (Essential Service 4), and developing plans to support community efforts (Essential Service 5). The Assurance Functions 7, 9 and 10 are also covered.

Core Functions:	Ten Essential Services of Public Health:
Assessment – Health needs, investigate health problems, & analyze the determinates of health (medical and non-medical)	1. Monitor health status to identify and solve community health problems.
	2. Diagnose and investigate health problems and health hazards in the community.
Policy Development –	3. Inform, educate, and empower people about health issues.

Advocate for resources to address needs, prioritize and address health needs, & plan & develop policies to address the priority health needs	4. Mobilize community partnerships and action to identify and solve health problems.
	5. Develop policies and plans that support individual and community health efforts.
Assurance – Manage resources, implement programs to address priority health needs, evaluate how those interventions are affecting populations & inform the community about health issues that are or could impact them and the resources available to them	6. Enforce laws and regulations that protect the health and ensure safety.
	7. Link people to needed personal health services and assure the provision of health care when otherwise unavailable.
	8. Assure competent public and personal health care workforce.
	9. Evaluate effectiveness, accessibility, and quality of personal and population based health services.
	10. Research for new insights and innovative solutions to health problems.

COURSE MATERIALS: including required textbooks and other required materials, purchases, fees when applicable, requirement of Internet for coursework if applicable. ***Please note that these texts will be used for each of the Population Health Nursing courses, 1 through 3.***

Curley, A. L. C. (2020). *Population-based nursing: Concepts and competencies for advanced practice*. New York: Springer Publishing Company.

Ervin, N. E., & Kulbok, P. A. (2018). *Advanced public and community health nursing practice: Population assessment, program planning, and evaluation*. Springer Publishing Company.

deChesnay, M. & Anderson, B. A. (eds.) Caring for the Vulnerable: Perspectives in nursing theory, practice, and research.

American Psychological Association. (2020). *Publication manual of the American Psychological Association* (7th ed.).

Plough, A. L. (2020). *Well-Being: Expanding the definition of Progress: Insights from Practitioners, researchers, and innovators from around the globe*. Oxford University Press.

Additional web-based resources include:

Centers for Disease Control and Prevention. (2021). *Thinking in Systems.*
    www.cdc.gov/policy/polaris/tis/index.html

Council of Public Health Nursing Organizations*. Community/Public Health Nursing [C/PHN] Competencies*. (2018). Retrieved from https://www.cphno.org/wp-content/uploads/2020/08/QCC-C-PHN-COMPETENCIES-Approved_2018.05.04_Final-002.pdf

Future of Nursing Campaign for Action. *Population Health and the Future of Nursing: Conclusions.* (April 2020). Retrieved from: https://campaignforaction.org/wp-content/uploads/2020/05/PHIN-Conclusions-Report-508.pdf

Robert Wood Johnson Foundation. (n.d.). *Culture of Health*. Retrieved from
https://www.rwjf.org/en/how-we-work/building-a-culture-of-health.html

O'Kane, M., S. Agrawal, L. Binder, V. Dzau, T. K. Gandhi, R. Harrington, K. Mate, P. McGann, D. Meyers, P. Rosen, M. Schreiber, and D. Schummers. 2021. An Equity Agenda for the Field of Health Care Quality Improvement. *NAM Perspectives.* Discussion Paper, National Academy of Medicine, Washington, DC. https://doi.org/10.31478/202109b.

Storefjell, J., Winslow, E. & Saunders, J. (2017). *Catalysts for Change: Harnessing the power of nurses to build population health in the 21st century.* Robert Wood Johnson Foundation. Retrieved from
https://www.rwjf.org/content/dam/farm/reports/reports/2017/rwjf440276

All course materials are available through the bookstore or online. Some materials may be purchased through Amazon or Google Books.

COURSE SCHEDULE:

Session# Date	Topics	Readings/Assignments

1 (date)	*Welcome and introductions via discussion board.*
	• Each class member and the instructor will post a "getting to know me" on the discussion board as a way of introducing the group to each other. Instructions will be provided.
	• View the posted video on expectations for the course
	   o Weekly assignments
	   o Due dates for assignments
	   o Clinical placement requirements
	
	Population Health Nursing Practice at the Advanced Level
	• Introduction to Population Health Nursing
	• Populations, aggregates
	• High-risk/vulnerable populations/ aggregates
	• Core processes of population health nursing
	• Foundations and context of Population Health as a specialty practice
	• Using data to determine populations and aggregates at risk.
		Required activity:
		View video at:
		(Insert current web address where students can access the posted video.)
		
		Required reading:
		Ervin & Kulbok, Chapters 1 & 2.
		Curley, Chapter 1.
		deChasnay & Anderson, Chapter 1.
		
		Robert Wood Johnson Foundation. (n.d.). *Culture of Health*. Retrieved from https://www.rwjf.org/en/how-we-work/building-a-culture-of-health.html
		
		Assignments:
		Discussion question 1a AND 1b
		Written assignment 1

2 (date)	*Overview of Populations and the Community or Population Assessment Process* • Conceptualizing the population as client, the relational experience of living within a community, and community as resource.	*Required Reading:* Ervin & Kulbok, Chapter 3. Review Curley, Chapter 1. *CDC Thinking in Systems*

	• Stakeholders • Measuring outcomes of care at the population level. • Working with diverse populations • Purposes of assessment • Interdisciplinary approaches to assessment.	Plough, read Foreword and pages 1 through 27. Stakeholders: https://www.business2community.com/strategy/stakeholder-identification-analysis-made-easy-project-managers-01440041#:~:text=Identify%20and%20analyse%20stakeholders%201%20Brainstorm%20your%20stakeholders,to%20filter%20your%20map%20by.%20More%20items...%20 https://www.atsdr.cdc.gov/hac/phamanual/ch4.html *Zoom Clinical Hours: 3* Site visit to local health department program to review needs assessment for a health department program. Clinical reflections are due 1 day before the next class. *Assignments:* Discussion questions 2 Written Assignment 2
3 (date)	*Vulnerable Populations – A closer look* • Advocacy Role of Providers • Cultural Competence and Resiliency • Social Justice in Nursing • Low Literacy *and* Vulnerable Clients	deChasnay & Anderson, Chapters 2 - 5. Marmot, M. *The social determinants of health inequalities.* Published on ww.thelancet.com Vol 365 March 19, 2005 Retrieved from: https://www.who.int/social_determinants/strategy/Marmot-Social%20determinants%20of%20health%20inqualities.pdf Go to: https://nam.edu/an-equity-agenda-for-the-field-of-health-care-quality-improvement/ *Zoom Clinical Hours: 3 hours*

		Rescue Mission/ Homeless Program/Parish Nurse *Assignments:* Discussion question 3 Written assignment 3 Clinical reflection 1
4 (date)	*Theories, Frameworks and Models for Guiding Assessment* <u>Theories</u>: • Grand nursing theories • Middle range theory • Borrowed or shared knowledge • Nursing frameworks and Models: • Population as partners • Helvie's energy theory • Epidemiologic frameworks: • Epidemiologic triangle • Web of causation • Equity models/community empowerment • Community capacity • WHO primary healthcare • Other • Community participation/ethno-graphic model • Worksite assessment • Criteria for assessment	*Required reading:* Ervin & Kulbok, Chapter 4. deChasnay & Anderson, Chapters 6-10. Ervin, N.E. & Kuehnert, P.L. (March 1993). Application of a model for public health nursing program planning. *Public Health Nursing*. Vol 10(1), 25-30. *Zoom Clinical Hours: 2 hrs* Community Health Center 1 Community Health Center 2 *Assignments:* Discussion question 4 Written assignment 4 Reflection 2
5 (date)	*Locating Sources of Data* • Numeric & non-numeric data • Comparison data • Pertinence & balance • Demographics • Vital Statistics • Surveillance data/Outcome monitoring • National surveys • Health behavior data – NHANS/BRFSS/YRBSS • Physical environment • Environmental health • Services • Economics • Transportation • Communication • Education • Culture/Values/Beliefs • What happens when there is no data?	*Required reading*: Ervin & Kulbok, Chapter 5 Curley, Chapter 2. deChasnay & Anderson, Chapters 15 & 21. Plough, Chapter 3. *Zoom Clinical Hours: 3 hrs* MCH providers, Child Care Health Consultants or Head Start Regional Perinatal Center *Assignments:* Discussion question 5 Written assignment 5 Reflection 3

6 (date)	*Factors determining/influencing the distribution & frequency of disease, injury, other health-related events* • Associations and determining causation • Populations at risk, analysis of aggregate data, recognition of health disparities • Study designs suited for population-based research • Health Impact Assessment (HIA)	*Required reading*: Curley, Chapter 3 deChasney & Anderson, Chapter 24, 26, 38. Plough, Chapter 4 & 5 *Zoom Clinical Hours: 3 hrs* Nurse Epidemiologist visit – communicable disease control or cancer control Hospital acquired infections – Infection control *Assignments:* Discussion question 6 Written assignment 6 Reflection 4
7 (date)	*Methods of Data Collection* • Participant Observation • Windshield Surveys • Focus Groups • Key Informants • Delphi Technique • Surveys • Archival Data • Literature Review • Making choices of methods • "Why the dials on the dashboard matter" • Cultural narratives • Reflecting aggregates within the population/disaggregating data	*Required reading:* Ervin & Kulbok, Chapter 6 Key Informant Interviews: 1. https://upstream.consulting/grant-readiness/6-tips-for-planning-successful-key-informant-interviews 2. https://upstream.consulting/grant-readiness/how-to-conduct-a-successful-key-informant-interview#:~:text=During%20the%20interview%2C%20pay%20close%20attention%20to%20eye,take%20notes%20and%20summarize%20details%20during%20your%20interviews. 3. https://upstream.consulting/grant-readiness/how-to-analyze-key-informant-interview-data *Zoom Clinical Hours: 3 hrs* University Health Services School Health *Assignments:* Discussion question 7 Written assignment 7 Reflection 5

8 (date)	*Epidemiologic Methods and Measurements in Population-Based Nursing Practice – Part 2* • Strengths and weaknesses of study designs • Errors • Bias • Interaction • Confounding • Randomization • Causality • Misconduct and Ethical Issues	*Required reading*: Curley, Chapter 4 *Assignments:* Discussion question 8 Written assignment 8 Reflection 6 Find and interview at least three (3) Key Informants in preparation for your final paper. Indicate this on the learning platform when completed. (6 hours)

9
(date)
	Planning a Community/Population Assessment
	• Preassessment Phase
	   o Purpose/framing/model
	   o Building an interdisciplinary team
	   o Identifying data sources
	   o Developing a timeline/resources
	   o Dividing work
	   o Identifying Key Informants
	   o Writing the plan
		Required reading:
		Ervin & Kulbok, Chapter 7, p 155-171
		
		Assignments:
		Discussion question 9 A- OR- B
		Written assignment 9
		Reflection 8
		
		Zoom Clinical Hours: 3 hrs
		American Red Cross – Sheltering Services, Disaster Health Services & Sound the Alarm Program

10 (date)	*Conducting a Community/Population Assessment* • Overview of the community/ population • Conducting data collection organized by framework or model • Disaggregating data • Acquiring adequate data • Organizing data collection • Reporting – organizing findings	*Required reading*: Ervin & Kulbok, Chapter 7, p 171-180 Curley, Chapter 6 *Assignments:* Discussion question 10 Written assignment 10 Reflection 9 *Zoom Clinical Hours: 3 hrs* Migrant Health Center
11 (date)	*Community Diagnoses: Analysis and Synthesis of Data and Information* • Defining Community/Population Diagnosis(es) as a hypothesis • Differentiate from Nursing Diagnosis, community needs and community problems • Analyzing and synthesizing data from various sources • Dealing with conflicting data	*Required reading*: Ervin & Kulbok, Chapter 8 https://extension.arizona.edu/sites/extension.arizona.edu/files/pubs/az1776-2018.pdf

	Incorporating risk factors in dx • Variations in format • Audience considerations *Preparing Assessments and Analyses for Public Presentation* • Prioritizing issues • How audiences differ • The need for transparency • The role of health literacy	https://www.healthycommunities.org/resources/toolkit/files/step6-document-community-results https://www.healthycommunities.org/sites/default/files/achi/step-6-cha-toolkit-children%27s-mercy.pdf https://www.jmu.edu/assessment/sass/AC-step-seven.shtml *Zoom Clinical Hours: 3 hrs* Occupational Health/Industry Setting *Assignments:* Discussion question 11 Written assignment 11 Reflection 10
12 (date)	*Applying Evidence at the Population Level* • *Goal: Improving health of the population* • *Gather, appraise, synthesize information* • *PICO/PICOT* • *Literature review data bases* • *Appraising literature* • *Review of hierarchy of studies* • *Integrating evidence with practice*	***Required reading:*** ***Curley,*** *Chapter 5* *Zoom Clinical Hours: 3 hrs* *Jail/Prison Health* *Assignments:* *Discussion question 12* *Written assignment 12* *Reflection 11*
13 (date)	*FINAL PRESENTATION/Course Wrap-up* Upload Final Presentation by Tuesday Ask questions of your classmates by Friday Answer questions raised by your classmates about your presentation by Sunday.	*Required Reading:* *Your classmates' presentations*

ADDENDUM – Course discussion questions and written assignments:

Week	Discussion Question	Written Assignment
1	All students will introduce themselves to fellow classmates and to the instructor. Please talk about your professional experiences, pre-professional experiences if they are	Why is it important to recognize the historic, philosophical, conceptual, and knowledge foundations of practice for advanced practice population health nursing? How does the concept of social

	relevant, and what draws you to population health nursing. Discuss with your classmates how the core processes of advanced population health nursing (assessment, program planning, program implementation and program evaluation) are similar and different from the core public health functions and the nursing process.	justice provide the foundation of population-focused nursing and impact our practice in population health? Describe how the expanded concept of well-being as a pathway to equity is or is not congruent with the concept of social justice.
2	Population health assessments tell a story to meet various purposes. Describe how the AP Population Health Nurse can go about "defining" a population of interest that is not geographically-based, describing that population and distilling information to form an accurate picture of the population's characteristics, strengths, and unmet needs. How does the purpose of the assessment shape the process?	Well-being is said to be the pathway to equity. How can the population health nurse incorporate this concept into the assessment process? Give concrete examples of health outcomes that are shaped by inequity and how nurses can tell the story. Discuss the impacts of cultural and minority status on health.
3	Discuss steps that can be taken to achieve cultural competency and cultural humility.	What is the role of the population health nurse in addressing inequitable distribution of resources and power among social groups? What leadership skills are needed/useful?
Clinical Reflection 1 due		
4	In addition to examples in your test, can you think of additional criteria a Population Health Nurse could use before recommending the selection of an assessment framework or model for a particular population? What else might you want to consider?	Describe the framework or model you might want to use in assessing the needs of a particular community or population. Explain why you believe this framework is feasible for use with the population you have chosen. Describe the advantages and disadvantages of the approach with your chosen population.
Reflection 2 due: Reflect on your experience at a local health department.		

5	Why is it important to locate data from a variety of sources and methods? Elaborate on information that cannot be gleaned from numeric data about a population. If our goal is to connect with the most seriously unserved or disconnected, what steps might be taken to accurately describe the needs of the population?	A. Compare and contrast A Framework for Understanding Human Well-Being with commonly used measures of community or population wellness. OR B. Describe how economic and environmental inequity impact a particular population's well-being. Create a plan for assessing that population's or an aggregate of that population's economic and environmental situation.
	Reflection 3 due. Reflect on your clinical experience of last week.	
6	Discuss how some of the methods described in Chapter 3 of the Curley book are, were or could be used in your place of employment. If you are not currently employed, think about your last job and how these measures would help.	Complete and submit these exercises at the end of Curley Chapter 3: • 3.3 • 3.5 • 3.6 • 3.7 – breast cancer only.
	Reflection 4 due: Reflect on your clinical experience of last week.	
7	The authors describe the use of Windshield Surveys as a method of data collection. What are the benefits and shortfalls of this method? When are they most useful? If as an undergraduate you had to perform a Windshield Survey, what did you learn from that? Did you actually use all of your senses to complete your survey? What would you do differently now? If you have never performed a Windshield Survey, what concerns you about this method? What are you most eager to learn?	Explain what steps can be taken to prepare for a Key Informant interview. How can these data be used to further your assessment of a given population? Give examples of a population, how you would select your Key Informants (at least 3), how you would contact them and enlist them in the experience, and what you would ask them. Does it matter to capture the cultural narrative, as Plough writes?
	Reflection 5 due: Reflect on your practicum experience of last week.	
8	What constitutes scientific misconduct, what are the ramifications, and how should it be handled? What is our responsibility as nurses?	Complete the following exercises following Curley, Chapter 4: • 4.1 • 4.3 • 4.4

	Reflection 6 due: Reflect on your practicum experience of last week. **Begin finding and interviewing at least three (3) Key Informants in preparation for your final project.**	
9	Discussion Question 9A: Why is it important to have a written plan for conducting a community/ population health assessment? -OR – Discussion Question 9B: In addition to the preassessment activities described in Chapter 7 of Ervin and Kulbok, what other preassessment activities might you want to consider before undertaking the assessment?	Discuss how community/population members can be involved in the assessment process. How should the population health nurse go about ensuring their participation? Discuss roles the community/population members could play,
	Reflection 7 due: Reflect on your practicum experience of last week.	
10	Why is an interdisciplinary approach to community or population health assessment preferable to the nurse working alone? Discuss how you can engage various components of your organization, other stakeholder organizations and the community or population itself to assist with an accurate assessment.	What are quality improvement opportunities for conducting a population assessment? What might be indicators of a successful process? What would indicate the process is not going as well as it should be? How can the population health nurse contribute to ensuring a high quality assessment is performed?
	Reflection 8 due: Reflect on your practicum experience of last week.	
11	Ervin and Kulbok portray the importance of forming community diagnoses as focusing on defined issues, enabling clarity on the boundaries of particular issues, being able to specifically define community or population issues and providing a common understanding among all stakeholders. Discuss how different perspectives might see the importance differently or how population members could have differing perspectives.	Propose how Community Diagnoses can best be written for understanding throughout the population of interest and among each of the stakeholders in improving population health. Do different audiences require different formats for reporting? Why of why not?
	Reflection 9 due: Reflect on your practicum experience of last week.	
12	Curley states that nurses have a unique ability to improve health though their clinical expertise,	Present a clinical problem that you would like to see improved. Why is change needed? In PICO/PICOT format, write a

	leadership and education. Nurses often face barriers to change. How can the population health nurse encourage incorporation of new evidence into practice and lead change for improved quality of care and improved health outcomes? Explain the various uses for population health assessments and how material might be presented differently, depending on its uses.	clinical question. Then summarize a minimum of 5 articles as part of a literature review on this PICO. Complete Table 5.3 and 5.5. Note databases accessed, Boolean logic and limits placed on the search.
	Reflection 10 due: Reflect on your practicum experience of last week.	
13	Considering what was learned about wellbeing, how can we ensure that marginalized groups are not left out of the narrative? What are methods to reach out, include, embrace those within the population who are not well served?	Your final written assignment will be to comment on and/or ask questions about the final presentations on the learning platform. Answer questions and address remarks on your presentation. Please complete your course evaluation.
	Reflection 11 due: Reflect on and summarize your practicum experiences *this semester*.	

COURSE REQUIREMENTS/COURSE LEARNING ACTIVITIES:

This course requires both online and an in-person presence for clinical. Because the overall responsibility for learning is the student's, the student must take responsibility following through on learning activities and asking questions where explanations are needed.

Each week, the learner will be presented on the learning platform with a new module, organized in a format that includes completing required reading and linked activities, followed by an online discussion and a writing assignment. The discussion or writing assignment may be based on the reading, mini-lecture or on other learning activities in the syllabus. The intention is for the learner to utilize the information from readings and lectures to stimulate their thinking around one or more major concepts presented that week. Learners are encouraged to think of ways to bridge new knowledge gained from course activities with what they have previously learned. In this way, the learner's confidence in new material is enhanced.

Discussions and written assignments will be graded for grammar, spelling and English usage. A large part of successful professional practice is the ability to communicate clearly. You are expected to write clearly and concisely for all assignments. Learners should carefully proofread their contributions to both the discussions and the written assignments.   Always "spell check" before you hit "send." It is recommended that you compose longer posts in Word, then cut and paste them into the learning platform. This will prevent the platform from "timing out" prior to

your contribution being completed and your contribution being lost. Anything submitted should be well thought out, well organized, and submitted on time.

Clinical Experiences/Practicum

- **Developing a Clinical Practicum site.**

In addition to required online activities, there will be a required in-person practicum involving local agencies and programs practicing population health. Since the members of our student body are dispersed across the map, students will need to find their own clinical placements.

Students should work closely with their instructor and faculty adviser when developing placements. The student will be responsible for constructing a plan for their placement, on which the mentor and instructor will need to sign off. The plan must include: Student's name, a title for the preceptorship, instructor, faculty advisor, mentor's name, site/agency, type of agency, student role, competencies to be addressed, Identification of any products to be delivered as a result of the placement, and agreement on clinical hours to be precepted and agreement from the preceptor that they will return the final evaluation by the end date of the course. The instructor and faculty advisor must indicate agreement. This form will be filed the second week of the course.

Students should choose mentors who practice population health and who demonstrate the Core Competencies for C/PHNs. The mentor should have at least a Master's degree in Nursing. The mentor should be willing to actively engage the student and offer information and feedback on their experiences. The mentor will also be responsible for completing an evaluation at the end of the placement.

If the precepting agency requires a Letter of Agreement from the School, please let your instructor know immediately so that the process can begin.

The grade for the practicum is Pass/Fail. The student cannot pass this course without a satisfactory completion of the clinical preceptorship.

In addition to your arranged clinical practicum, students will be introduced via Zoom to a variety of settings where population health nursing is practiced, starting in the second week of the course. These will take place on Insert day of the week at x o'clock. This aspect of the course calls will provide thirty (30) hours of clinical experience to meet the minimum requirements. In addition, ten (10) hours of clinical time may be claimed for the completion of three (3) required Key Informant Interviews.

Clinical Component	Hours per Week	Semester Total Hours
Mentored Practicum	10 hrs x 12 wks	120

Zoom Interviews	3	30
Key Informant Interviews	--	10
Total Clinical Hours		160 minimum

Assignment Descriptions

In addition to the clinical preceptorship, there are four types of assignments in this course.

o **Discussion Boards**

The discussion questions are formulated to stimulate student interaction on related issues. Each student is required to participate in the discussion each week by raising a new point or raising their own discussion question related to current course materials and topics. Learnings will need to visit the course pages frequently (preferably daily) in order to follow the discussion. The instructor will monitor the discussion, but only to be sure the discussion stays on track. Sometimes an opinion may be offered, or a suggestion made, but for the most part, it will be up to the learners to keep the discussion going. Because we are all lifelong learners, it is appropriate to contribute to the discussion of the lectures and reading assignments by discussing them in relation to your own lived experience, which can add richness to the discussion. You might discuss how your experience compares to the evidence that is the basis of your nursing practice and with course materials. If you have a specialty area within population health, you may wish to give examples from that specialty (i.e. MCH, cardiovascular nursing, disaster nursing).

Since these discussions take place asynchronously, you as a student have time to reflect on peer comments and to thoughtfully and analytically think about how to respond. Remember there could be several valid approaches to any issue.

If you contribute early in the week, you can have the earlier opportunities to say insightful things before the others. If you come into the discussion later, you still have the opportunity to react to and respond to ideas that were already presented by other learners. So "jump in" and get your feet wet. Everyone has something valuable to contribute. Try not to be always among the last to contribute.

Initial posts are due by Tuesday at midnight.

Initial posts should be less than 500 words and should directly address the discussion prompt.

Discussion closes on Fridays at midnight.

Return to the discussion forum and reply to those who responded to you by Sunday midnight.

Remember to show respect and courtesy for other learners. You should say nothing demeaning or degrading to other learners. If you disagree, do so politely and with respect for the opposing view. If in doubt, err on the side of caution and courtesy. Remember that these same rules would be required if the course were offered in a classroom. We are striving for courtesy, consistency and fairness, with in the end ensures that each person has a pleasant experience in this course. Posts that are rude, demeaning, degrading or otherwise non-contributory will be graded as zero. So, when you proofread your posts, it is wise to read for tone as well as content.

The discussion board is tangible proof that the learner is engaged and taking part in the learning activities. These are a few ways that the learner can score high points for discussion:

- Keeping abreast of the discussion and contributing actively;
- Putting real thought into your contributions during the discussion;
- Bringing in evidence or theories to support your positions;
- Summarizing the points of previous discussion and adding your own "tilt" to it;
- Taking the collective responsibility to keep the discussion on track;
- Not rambling on with shallow or empty thoughts; and
- Most of all, letting your motivation and desire to learn show!

Discussions will be graded based on the following:

- Grasp of the issue/subject matter (30%);
- Evidence offered to bolster credibility of the learner's position/use of solid references (40%); and
- Professional tone and clarity of the argument or point of view (30%).

o **Written Assignments**

Written assignments provide the learner with the opportunity to demonstrate skilled analysis of current topics in population health nursing. Some written assignments may be based on case studies and their analysis. Unlike the discussion board, they will be seen only by the student and the instructor. Written assignments will be evaluated based on:

- Grasp of the subject matter (30%);
- Evidence offered to bolster credibility of the learner's position/use of solid references (40%); and
- Professional tone and clarity of the writing (30%).

It is well established that professional writing is a key to professional progress. What is the secret to good writing? One word: rewriting. Always carefully proofread your writing products for errors, clarity and tone. Read them as if you hadn't written them. Make warranted corrections.

- o **Clinical Practicum Summaries and Reflections**

There is a clinical practicum component to this course, starting with Week 3 and throughout the course. These may involve in-person visits to clinical sites, and some experiences may be virtual. Following and within one week of the completion of the clinical assignment, each student will write a Site Visit or Practicum Summary. The final reflection paper should reflect on the semester of clinical work. The final reflection should also indicate what was learned about Key Informant interviews. Key Informant interviews are counted as clinical hours.

Each of the reflection papers must have two distinct components, each worth 50% of the grade:

- A summary description of the clinical experience (50%), including:
    - o A brief description of the agency or program, location, and mentor;
    - o Activities that occurred and the student's role;
    - o Describe any collaborations, either with community partners or with other professionals, that occurred; and
    - o The degree of student participation in the various activities that took place (Observer? Helper? Full participant? Leader?)

- The student's own reflection (50%), including:
    - o Explaining how these activities furthered the student's understanding and/or mastery of the Core Competencies for Public Health Nurses;
    - o Reflection on the role of interprofessional and community collaboration on the experience; and
    - o An honest appraisal of the impact the experience had on the student – The "So What?" of the experience. What impact did this experience have?
    - o The student may reflect not only on "what is," but also on "what could be" with the application of what is learned in the course. Do you see a role for a specialist in population health in this setting?

- **Examinations** - There will be no examinations for this course.

- **Final Presentations**

  Each student will prepare and deliver a presentation that will be uploaded online to be shared with the class. The presentation may address any population (or aggregate within a population) that experiences disparities in their health experiences or health outcomes.

  You may choose an issue from a community or institutional perspective (meaning you are interested in the issue as a nurse in the community or because you work for a particular organization). As an example, you might choose to center your presentation on the disparities in outcomes for low-income populations during natural disasters. As another example, you might choose an occupational health issue or an issue that deals with surgical outcomes. Students are encouraged to think about and plan for the final presentation early in the semester.

  The presentation will focus on gathering, analyzing and synthesizing data to form community/population diagnoses, and must include information from either three (3) key informant interviews or a focus group convened by the student to address the chosen issue. Explain your rationale for your selection of a project and how you believe it is important to your understanding and the understanding of your population health classmates.

  The final presentation is intended to demonstrate grasp of the material presented throughout the course. Again, students are advised to begin thinking about the final project early in the semester.

  Here's a link to how get started on a presentation using VoiceThread. Here is a second reference on creating presentations using VoiceThread.

  After uploading of the presentations, each student and the course instructor will have an opportunity to ask questions about the material in the presentation. The final presentation will account for 20% of the final grade. Grading will be based on the following:

    o Content of the presentation and grasp of the subject matter (70%);
    o Professional presentation – prose, graphics and overall (10%); and
    o Professional handling of questions from peers and instructor (20%).

Content of Presentation - Must include:	Points Assigned
Identification of at-risk population or aggregate ✓ Clear identification of the population ✓ Inclusions and exclusions ✓ Disparity experienced of concern ✓ Community in which residing	10
Framework used for assessment and rationale for its choice	5

History – Pertinent history in the community or with community providers	5
Description of the population or aggregate – with data sources ✓ Demographics - Vital Statistics Data ✓ Morbidity and Mortality Data of interest ✓ Disease or injury patterns with comparison data ✓ Prevalence and incidence of disease or injury patterns Impacts of: ✓ Economics - Income levels, business & industry, occupational health ✓ Environment - both supportive and unsupportive ✓ Health and Social Services ✓ Education – and educational resources ✓ Safety – law enforcement, crime and violence ✓ Transportation ✓ Communication – Is there a digital divide? ✓ Politics and Government ✓ Other pertinent information	25
Health Behavior Data ✓ Culture, Values, Beliefs – as pertinent to the selected issue ✓ Rates of protective measures from disease/disability (Example: immunization, early prenatal care, screenings, use of alcohol or tobacco) ✓ Resident opinions ✓ Describe all sources of data – including whether focus groups, key informant interviews were utilized ✓ Other pertinent information	10
Resources within the community ✓ List population/community strengths ✓ Opinions of Key Informants	5
Analysis, Conclusion and Population/Community Diagnosis/ Diagnoses – ✓ 1 or 2 Dx are sufficient ✓ State "ideal" outcomes ✓ Literature review	10
Subtotal	**70**
Professional presentation – prose, graphics and overall ✓ Overall professional presentation - Grammar/prose – clear, good usage - Graphics – appropriate, helpful and clear	20
Professional handling of questions from peers and instructor ✓ Clear explanations ✓ Professional tone and courtesy	10
Total	**100**

COURSE GRADING:

Grading for this course will be as a letter grade based on completion of required course components, broken down as follows:

Course Component	Number	Total Weight
Participation and Quality of Discussions	12	24%
Written Assignments	12	36%
Practicum Summaries & Reflections	10	20%
Presentation	1	20%
Practicum	P/F	---
		100%

Course Average	Final Grade
94-100	A
90-93	A-
87-89	B+
83-86	B
80-82	B-
77-79	C+
73-76	C
70-72	C-
60-70	D
<60	E

CLASS POLICIES:

Attendance: To ensure the optimal online learning environment, students must regularly check the class pages and participate regularly and robustly. Attendance for an online course means on-time remittance of assignments and checking in on discussion frequently and preferably at least daily. Late assignments will be treated like an absence and are ineligible for full credit. Medical excuses can be obtained only in accordance with the University's Medical Excuse Policy: http://www.albany.edu/health_center/medicalexcuse.shtml.

Absence due to religious observance: New York State Education Law Section 224-A (https://www.nysenate.gov/legislation/laws/EDN/224-A) requires campuses to excuse, without penalty, individual students absent because of religious beliefs, and to provide equivalent opportunities for make-up examinations, study, or work requirements missed because of such absences. Faculty will work directly with students to accommodate absences. Please inform the instructor via email of planned absences for religious observance so arrangements can be planned prior to the absence.

Late assignment policy: Late assignments, as previously stated, will not be eligible for full credit. The instructor may take off up to 50% of the credit that would normally have been

earned for a late assignment. A late assignment will not be accepted if the assignment is more than a full week over the deadline. An assignment that are more than one week late will be considered a missing assignment. Missing assignments will receive no credit.

Cell phones: With the permission of the clinical preceptor, cell phones may be carried when on clinical assignment, however students are cautioned not to make personal calls, take photos without express written permission, nor in any other way disrupt the clinical experience.

Diversity, Equity, and Inclusion Statement

At the University at Albany School of Public Health, we believe deeply that equity, respect, and justice are central to our united path forward. The character of our School is to stand steadfast in the face of injustice and act for the betterment of health outcomes. Racism and discrimination have no place in our work.

We are committed to creating and supporting a community diverse in every way, which includes but is not limited to: race, ethnicity, age, disability, gender, gender expression, geography, religion, academic and extracurricular interest, political beliefs, family circumstances, national origin, sexual orientation, and socioeconomic background. It is central to our mission to ensure that each member of our community has full opportunity to thrive. We recognize that all of us must embrace the responsibility and accountability for upholding these values, as they are central, not only to our mission, but also to individual growth, education excellence and the advancement of knowledge.

The University at Albany is committed to a campus environment that supports diversity, equity and inclusion and will provide support to individuals who report incidents of bias or hate. We encourage any campus community member who experiences or witnesses a bias act or hate crime to report this incident by using the [Bias Incident Reporting Form](). For more information, visit https://www.albany.edu/diversity-and-inclusion.

SCHOOL AND UNIVERSITY RESOURCES AND POLICIES:

The policies and procedures regarding Standards of Academic Integrity were revised by action of the University Senate as of Fall 2013. See full text in Graduate Bulletin http://www.albany.edu/graduatebulletin/requirements_degree.htm#standards_integrity.html.

Every student has the responsibility to become familiar with the standards of academic integrity at the University. Faculty members must specify in their syllabi information about academic integrity, and may refer students to this policy for more information. Nonetheless, student claims of ignorance, unintentional error, or personal or academic

pressures cannot be excuses for violation of academic integrity. Students are responsible for familiarizing themselves with the standards and behaving accordingly, and UAlbany faculty are responsible for teaching, modeling and upholding them. *Anything less undermines the worth and value of our intellectual work, and the reputation and credibility of the University at Albany degree. (University's* Standards of Academic Integrity Policy, Fall 2013*)*

Accommodations

Reasonable accommodations will be provided for students with documented physical, sensory, systemic, cognitive, learning and psychiatric disabilities. If you believe you have a disability requiring accommodation in this class, please notify the Director of Disability Access and Inclusion Student Services (Campus Center 130, 518-442-5501, daiss@albany.edu). That office will provide the course instructor with verification of your disability, and will recommend appropriate accommodations.

Mental Health

As a student there may be times when personal stressors interfere with your academic performance and/or negatively impact your daily life. The University at Albany Counseling and Psychological Services (CAPS) provides free, confidential services including individual and group psychological counseling and evaluation for emotional, social and academic concerns. Given the COVID pandemic, students may consult with CAPS staff remotely by telephone, email or Zoom appointments regarding issues that impact them or someone they care about. For questions or to make an appointment, call (518) 442-5800 or email consultation@albany.edu. Visit www.albany.edu/caps/ for hours of operation and additional information.

If your life or someone else's life is in danger, please call 911. If you are in a crisis and need help right away, please call the National Suicide Prevention Lifeline at 1-800-273-TALK (8255).

Students dealing with heightened feelings of sadness or hopelessness, increased anxiety, or thoughts of suicide may also text "GOT5" to 741741 (Crisis Text Line).

NSG 610 PUBLIC/POPULATION HEALTH NURSING II
Advanced Practice of Population Health Nursing

INSTRUCTOR:

OFFICE HOURS:

COURSE CREDIT HOURS: 5 credits
This is an **asynchronous online course, with an in-person clinical component, awarding five (5) graduate hours on successful completion**. The didactic portion of the class awards three (3) credit hours and the clinical portion awarding two (2) credit hours.

 This course is partially delivered online and asynchronously. It meets or exceeds the total amount of instructional work time expected in a traditional in-class course in every week of a 14 week semester: the equivalent of **five (5)** 55 minute sessions of classroom or direct faculty instruction for every **five (5)** credit course. The contact time achieved in this class is satisfied by academic engagement through required readings, class discussions, written assignments, class projects and both in-person and remote clinical experiences, moderated and supervised by faculty. Students should dedicate an average of **twenty to twenty-five (20-25) hours** per week to this course.

COURSE PREREQUISITES/COREQUISITES: HNSG 500 Theoretical Foundations of Nursing Science, HNSG 600 Public/Population Health Nursing I

COURSE DESCRIPTION:
This course builds on knowledge and skills honed in HNSG 600. The student will utilize analyzed assessment data to effectively design, plan, implement, innovate, and evaluate population-focused health programs and policies, with knowledge of organizational decision-making. Learners will use data that is timely, pertinent and accurate to develop effective population-focused policies and programs to improve health outcomes in the institutional or the community setting. Learners will examine factors that impact the success of these efforts, communicate and market programs, develop checkpoints for evaluation, and carry out program improvement efforts.

COURSE LEARNING OBJECTIVES:

Upon completion of this course, students will be able to:

1. Design evidence-based policies and programs based on timely, pertinent, accurate assessment and analysis of population needs;
2. Plan for program implementation;
3. Develop program budgets;
4. Garner resources needed for implementation;
5. Formulate meaningful program goals and objectives;

6. Develop program marketing and communications plans;
7. Implement population-based policies and programs;
8. Track program progress, expenses and revenues;
9. Make program course corrections, where necessary; and
10. Evaluate population-based policies and programs.

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KNOWLEDGE DOMAINS AND COMPETENCIES:

This course addresses the following Domains and Core Competencies for Community/Public Health Nurses at the levels of Tiers 2 and 3:

Foundational Competencies	Assessment Methods
Domain 1: **Assessment & Analytic Skills**	Discussion boards, written assignments, reflection papers, final presentation.
Domain 2: **Policy Development & Program Planning Skills**	Discussion boards, written assignments, reflection papers, final presentation.
Domain 3: **Communication Skills**	Discussion boards, written assignments, Zoom interviews, reflection papers, final presentation.
Domain 4: **Cultural Competency Skills**	Key informant interviews, zoom clinical interviews, population assessment.

Domain 5: Community Dimensions of Practice Skills	Key informant interviews, Zoom clinical interviews, population assessment.
Domain 6: Public Health Sciences Skills	Epidemiology exercises, population assessment, final presentation.
Domain 7: Financial Planning, Evaluation, & Management Skills	Discussion boards, written exercises, program budget exercise, clinical reflections, final paper.
Domain 8: Leadership & Systems Thinking Skills	Discussion board, written assignments, Zoom clinical presentations, final presentation.

MS COMPETENCIES: Master of Science in Population Health Nursing

This course addresses the following Master in Population Health Nursing Program core competencies defined by the American Association of Colleges of Nursing (AACN):

Essential	
I	Uses clinical reasoning to make decisions in nursing practice based on synthesis of knowledge form nursing and liberal arts and sciences
II	Provides patient-centered care across the healthcare continuum
III	Collaborates with the interprofessional teams and stakeholders to support and improve equitable population health outcomes
IV	Integrates research and evidence-based practice into nursing practice
V	Applies principles of quality and safety across the healthcare continuum
VI	Communicates and collaborates interprofessional teams and stakeholders to healthcare needs of patients and populations
VII	Applies leadership principles when responding to and leading healthcare systems
VIII	Advocates for the use of technology, informatics and innovation in the delivery of care across the healthcare continuum
IX	Integrates values, ethics, accountability, policies and regulations to provide diverse, equitable and inclusive nursing care
X	Demonstrates a commitment to personal growth, professional knowledge and capacity for leadership

Matrix of course outcomes, learning activities, CPHNO's Core Competencies for C/PHNs and based on AACN's The Essentials, 2011

Program Student Learning Outcomes/ AACN's Program Outcomes	Related Course Outcome	Learning Activity	Domains of CPHNO's Core Competencies
Integrate advanced knowledge from nursing, related sciences, and humanities to provide a theoretical	1 through 10	Readings Discussion Board Written Assignments	1,3,5,6,8

framework for advanced practice in population health. (Element I)		Clinical Activities with Reflection Final Presentation	
Apply organizational theories and systems thinking to improve the quality, cost-effectiveness and safety outcomes of practice decisions and initiatives. (Element II & III)	1 through 10	Readings Discussion Board Written Assignments Budget Exercise Clinical Activities with Reflection Final Presentation	1, 8
Demonstrate competencies to develop, implement, and evaluate evidence-based interventions and conduct a scholarly inquiry. (Element IV)	1 though 10	Readings Discussion Board Written Assignments Clinical Activities with Reflection Final Presentation	1,3,4,5,8
Apply knowledge of informatics to coordinate and improve programs and systems of care. (Element V)	1 through 10	Readings Discussion Board Written Assignments Budget Exercise Clinical Activities with Reflection Final Presentation	1,6,8
Incorporate advanced nursing practice standards to advocate for health policy and effect systems-level change within populations, health care environments, and organizational systems. (Elements VI)	1 through 10	Readings Discussion Board Written Assignments Clinical Activities with Reflection Final Presentation	1,3,4,5,6,8
Apply evidence-based and interprofessional approaches for the	1 through 10	Readings	3,4,5

| design and delivery of comprehensive, culturally competent care to individuals/families, communities and populations. (Element VII & VIII) | See: Week 1

All clinical placements | Discussion Board

Written Assignments

Clinical Activities with Reflection

Final Presentation | |
|---|---|---|---|
| Practice in an advanced nursing role in collaboration with other disciplines to improve population health outcomes. (Element IX) | 1 through 10 | Readings

Discussion Board

Written Assignments

Clinical Activities with Reflection

Final Presentation | 1,3,4,5,6,8 |

In addition, all students are expected to be able to perform within the Three Core Functions of Public Health and the Ten Essential Services. This course covers all ten essential services and three core functions.

Core Functions:	Ten Essential Services of Public Health:
Assessment – Health needs, investigate health problems, & analyze the determinates of health (medical and non-medical)	1. Monitor health status to identify and solve community health problems.
	2. Diagnose and investigate health problems and health hazards in the community.
Policy Development – Advocate for resources to address needs, prioritize and address health needs, & plan & develop policies to address the priority health needs	3. Inform, educate, and empower people about health issues.
	4. Mobilize community partnerships and action to identify and solve health problems.
	5. Develop policies and plans that support individual and community health efforts.
Assurance – Manage resources, implement programs to address priority health needs, evaluate how those interventions are affecting populations & inform the community about health issues that are or could impact them and the resources available to them	6. Enforce laws and regulations that protect the health and ensure safety.
	7. Link people to needed personal health services and assure the provision of health care when otherwise unavailable.
	8. Assure competent public and personal health care workforce.
	9. Evaluate effectiveness, accessibility, and quality of personal and population based health services.
	10. Research for new insights and innovative solutions to health problems.

COURSE MATERIALS: *Please note that these texts will be used for each of the Population Health Nursing courses, 1 through 3.*

Curley, A.L. C. (2020). *Population-based nursing: Concepts and competencies for advanced practice*. New York: Springer Publishing Company.

Ervin, N. E., & Kulbok, P. A. (2018). *Advanced public and community health nursing practice: Population assessment, program planning, and evaluation.*

deChesnay, M. & Anderson, B. A. (eds.) Caring for the Vulnerable: Perspectives in nursing theory, practice, and research.

American Psychological Association. (2020). *Publication manual of the American Psychological Association* (7th ed.).

Plough, A. L. (2020). *Well-Being: Expanding the definition of Progress: Insights from Practitioners, researchers, and innovators from around the globe*. Oxford University Press.

Additional web-based resources include:

Centers for Disease Control and Prevention. (2021). *Thinking in Systems.*
    www.cdc.gov/policy/polaris/tis/index.html

Council of Public Health Nursing Organizations*. Community/Public Health Nursing [C/PHN] Competencies*. (2018). Retrieved from https://www.cphno.org/wp-content/uploads/2020/08/QCC-C-PHN-COMPETENCIES-Approved_2018.05.04_Final-002.pdf

Plough, A. L. (2020). *Well-Being: Expanding the definition of Progress: Insights from Practitioners, researchers, and innovators from around the globe*. Oxford University Press.

Robert Wood Johnson Foundation. (n.d.). *Culture of Health*. Retrieved from
     https://www.rwjf.org/en/how-we-work/building-a-culture-of-health.html

O'Kane, M., S. Agrawal, L. Binder, V. Dzau, T. K. Gandhi, R. Harrington, K. Mate, P. McGann, D. Meyers, P. Rosen, M. Schreiber, and D. Schummers. 2021. An Equity Agenda for the Field of Health Care Quality Improvement. *NAM Perspectives.* Discussion Paper, National Academy of Medicine, Washington, DC. https://doi.org/10.31478/202109b.

Storefjell, J., Winslow, E. & Saunders, J. (2017). *Catalysts for Change: Harnessing the power of nurses to build population health in the 21st century.* Robert Wood Johnson Foundation. Retrieved from
     https://www.rwjf.org/content/dam/farm/reports/reports/2017/rwjf440276

All course materials are available through the bookstore or online. Some materials may be purchased through Amazon or Google Books.

COURSE REQUIREMENTS: exams, assignments, and other course elements upon which students will be graded

Assignment Descriptions

This course requires both and online and an in-person presence for a clinical preceptorship. Because the overall responsibility for learning is the student's, the student must take responsibility following through on learning activities and asking questions where explanations are needed.

Each week, the learner will be presented on the learning platform with a new module, organized in a format that includes completing required reading and linked activities, followed by an online discussion and a writing assignment. The discussion or writing assignment may be based on the reading, mini-lecture or on other learning activities in the syllabus. The intention is for the learner to utilize the information from readings and lectures to stimulate their thinking around one or more major concepts presented that week. Learners are encouraged to think of ways to bridge new knowledge gained from course activities with what they have previously learned. In this way, the learner's confidence in new material is enhanced.

Discussions and written assignments will be graded for grammar, spelling and English usage. A large part of successful professional practice is the ability to communicate clearly. You are expected to write clearly and concisely for all assignments. Learners should carefully proofread their contributions to both the discussions and the written assignments.   Always "spell check" before you hit "send." It is recommended that you compose longer posts in Word, then cut and paste them into the learning platform. This will prevent the platform from "timing out" prior to your contribution being completed and your contribution being lost. Anything submitted should be well thought out, well organized, and submitted on time.

Clinical Experiences/Practicum

- **Developing a Clinical Practicum site.**

In addition to required online activities, there will be a required in-person **15- to 20-hour-per - week** practicum involving local agencies and programs practicing population health. Since the members of our student body are dispersed across the map, students will need to find their own clinical placements. Placements at the student's place of employment can be considered, as long as the designated clinical time is dedicated to course objectives.

Students should work closely with their instructor and faculty adviser when developing placements. The student will be responsible for constructing a plan for their placement, on which the mentor and instructor will need to sign off. The plan must include: Student's name, a title for the preceptorship, instructor, faculty advisor, mentor's name, site/agency, type of agency, student role, competencies to be addressed, Identification of any products to be

delivered as a result of the placement, and agreement on clinical hours to be precepted and agreement from the preceptor that they will return the final evaluation by the end date of the course. The instructor and faculty advisor must indicate agreement. This form will be filed the second week of the course.

Students should choose mentors who practice population health and who demonstrate the Core Competencies for C/PHNs. The mentor should have at least a Master's degree in Nursing. The mentor should be willing to actively engage the student and offer information and feedback on their experiences. The mentor will also be responsible for completing an evaluation at the end of the placement.

If the precepting agency requires a Letter of Agreement from the School, please let your instructor know immediately so that the process can begin.

 The grade for the practicum is Pass/Fail. The student cannot pass this course without a satisfactory completion of the clinical preceptorship.

Assignment Descriptions

In addition to the clinical preceptorship, there are four types of assignments in this course.

- o **Discussion Boards – 20% of final grade**

  The discussion questions are formulated to stimulate student interaction on related issues. Each student is required to participate in the discussion each week by raising a new point or raising their own discussion question related to current course materials and topics. Learnings will need to visit the course pages frequently (preferably daily) in order to follow the discussion. The instructor will monitor the discussion, but only to be sure the discussion stays on track. Sometimes an opinion may be offered, or a suggestion made, but for the most part, it will be up to the learners to keep the discussion going. Because we are all lifelong learners, it is appropriate to contribute to the discussion of the lectures and reading assignments by discussing them in relation to your own lived experience, which can add richness to the discussion. You might discuss how your experience compares to the evidence that is the basis of your nursing practice and with course materials. If you have a specialty area within population health, you may wish to give examples from that specialty (i.e. MCH, cardiovascular nursing, disaster nursing).

Since these discussions take place asynchronously, you as a student have time to reflect on peer comments and to thoughtfully and analytically think about how to respond. Remember there could be several valid approaches to any issue.

> Suggested: **Initial posts** are due **by Tuesday at midnight**. Initial posts should be less than 500 words and should directly address the discussion prompt. **Discussion closes on Fridays at midnight.** Return to the discussion forum and reply to those who responded to you by **Sunday midnight**.

If you contribute early in the week, you can have the earlier opportunities to say insightful things before the others. If you come into the discussion later, you still have the opportunity to react to and respond to ideas that were already presented by other learners. So "jump in" and get your feet wet. Everyone has something valuable to contribute. Try not to be always among the last to contribute.

Remember to show respect and courtesy for other learners. You should say nothing demeaning or degrading to other learners. If you disagree, do so politely and with respect for the opposing view. If in doubt, err on the side of caution and courtesy. Remember that these same rules would be required if the course were offered in a classroom. We are striving for courtesy, consistency and fairness, with in the end ensures that each person has a pleasant experience in this course. Posts that are rude, demeaning, degrading or otherwise non-contributory will be graded as zero. So, when you proofread your posts, it is wise to read for tone as well as content.

The discussion board is tangible proof that the learner is engaged and taking part in the learning activities. These are a few ways that the learner can score high points for discussion:

- Keeping abreast of the discussion and contributing actively;
- Putting real thought into your contributions during the discussion;
- Bringing in evidence o https://owl.purdue.edu/owl/subject_specific_writing/professional_technical_writin g/grant_writing/index.html#:~:text=Introduction.%20Professional%20grant%20writ ers%20use%20clear%2C%20specific%20language,practice%20and%20awareness%2 0of%20a%20few%20common%20missteps.r theories to support your positions;
- Summarizing the points of previous discussion and adding your own "tilt" to it;
- Taking the collective responsibility to keep the discussion on track;
- Not rambling on with shallow or empty thoughts; and
- Most of all, letting your motivation and desire to learn show!

Discussions will be graded based on the following:

- Grasp of the issue/subject matter (30%);

- Evidence offered to bolster credibility of the learner's position/use of solid references (40%); and
- Professional tone and clarity of the argument or point of view (30%).

o **Written Assignments – 20% of final grade**

Written assignments provide the learner with the opportunity to demonstrate skilled analysis of current topics in population health nursing. Some written assignments may be based on case studies and their analysis. Unlike the discussion board, they will be seen only by the student and the instructor. Written assignments will be evaluated based on:

- Grasp of the subject matter (30%);
- Evidence offered to bolster credibility of the learner's position/use of solid references (40%); and
- Professional tone and clarity of the writing (30%).

It is well established that professional writing is a key to professional progress. What is the secret to good writing? One word: rewriting. Always carefully proofread your writing products for errors, clarity and tone. Read them as if you hadn't written them. Make warranted corrections.

o **Clinical Practicum Summaries and Reflections – 20% of final grade**

There is a clinical practicum component to this course, starting with Week 3 and throughout the course. Following and within one week of the completion of the clinical assignment, each student will write a Site Visit or Practicum Summary. Fourteen (14) of these papers are required, one each week after the second week of the semester when the first clinical experience occurs, and a last that is a final summary of the semester of practicum experiences.

Each of the reflection papers must have two distinct components, each worth 50% of the grade:

1. A summary description of the clinical experience (50%), including:
   o A brief description of the agency or program, location, and mentor;
   o Activities that occurred and the student's role;
   o Describe any collaborations, either with community partners or with other professionals, that occurred; and
   o The degree of student participation in the various activities that took place (Observer? Helper? Full participant? Leader?)

2. The student's own reflection (50%), including:

- o Explaining how these activities furthered the student's understanding and/or mastery of the Core Competencies for Public Health Nurses;
- o Reflection on the role of interprofessional and community collaboration on the experience; and
- o An honest appraisal of the impact the experience had on the student – The "So What?" of the experience. What impact did this experience have?
- o The student may reflect not only on "what is," but also on "what could be" with the application of what is learned in the course. Do you see a role for a specialist in population health in this setting?

- **Selected Planning Model (Logic Model, PRECEDE-PROCEED, other) – 10% of final grade**

  Students will select a planning model to apply to the proposed program development and intervention. Points will be awarded based on:
  - o Appropriateness of model to population need and intervention planned;
  - o Assumptions underlying use of the chosen model;
  - o Assumptions on how or why the proposed model should work;
  - o Comprehensive thoughtful use of the model;
  - o Comprehensive analysis of factors influencing change;
  - o Changes that may be needed to the organizational structure;
  - o Research around best/evidence-based practices as a rationale for change; and
  - o How the population's unmet need is addressed by the plan.

- **Budget Exercise and Presentation – 10% of final grade**

  Students will formulate a budget for their project that will include:

  Personal services: staffing, % FTE, duration of the project budget (months, weeks, years)

  Other than personal services: Equipment, utilities, space costs/rents, training, office expenses.

  Students will also describe any opportunity costs associated with the proposed project.

- **Final Presentation: Program Planning, Implementation and Evaluation – 20% of final grade**

  Each student will prepare and deliver a presentation that will be uploaded online to be shared with the class. The presentation may address any population (or aggregate within a population) that experiences disparities in their health experiences or health

outcomes and describe their proposed intervention, model used to plan change, associated budget, assumptions, evidence-based intervention, evaluation plan and scheduled checkpoints.

Students may choose an issue from a community or institutional perspective (meaning you are interested in the issue as a nurse in the community or because you work for a particular organization). As an example, you might choose to center your presentation on the disparities in outcomes for low-income populations during natural disasters. As another example, you might choose an occupational health issue or an issue that deals with surgical outcomes. Students are encouraged to think about and plan for the final presentation early in the semester.

The presentation will focus on utilizing analyzed population health assessment data or a resultant community diagnosis to design, innovate, and plan a community-based program or an institutionally-based patient care improvement. Students will design a logic model and a budget for this innovation, as well as a comprehensive evaluation plan. The project must take into account the unique needs of the targeted population.

The final presentation is intended to demonstrate grasp of the material presented throughout the course. Again, students are advised to begin thinking about the final project early in the semester.

Here's a link to how get started on a presentation using VoiceThread. Here is a second reference on creating presentations using VoiceThread.

After uploading of the presentations, each student and the course instructor will have an opportunity to ask questions about the material in the presentation. The final presentation will account for 20% of the final grade. Grading will be based on the following:

- o   Content of the presentation and grasp of the subject matter (70%);
- o   Professional presentation – prose, graphics and overall (10%); and
- o   Professional handling of questions from peers and instructor (20%).

Content of Presentation – Must include:	Points Assigned
Identification of the at-risk population or aggregate for which the intervention is intended. ✓ Clear identification of the population, inclusions/exclusions ✓ Disparity/health issue of concern ✓ Pertinent data ✓ Source of assessment data	10
Design Process ✓ Model used (logic model, PRECEDE-PROCEED model, other) ✓ Interprofessional teamwork	10

Chosen Intervention/Intervention Stage
  ✓ How chosen
  ✓ What the intervention replaces/What's not working
  ✓ Evidence for the new nursing intervention
  ✓ Goals and objectives
  ✓ Planned Activities – included needed pre-intervention activities (ex: staff education)
  ✓ Structure needed to support the intervention
  ✓ Timeline
  ✓ Resources
  ✓ Marketing
	30	

Evaluation Plan
  ✓ Rationale for why the intervention should work
  ✓ Nurse-Sensitive Process and Outcome Indicators
  ✓ Evaluation points
	20	

Subtotal	**70**	

Professional presentation – prose, graphics and overall
  ✓ Clear presentation of the plan
  ✓ Overall professional presentation
    - Grammar/prose – clear, good usage
    - Graphics – appropriate, helpful and clear
	20	

Professional handling of questions from peers and instructor
  ✓ Clear explanations
  ✓ Professional tone and courtesy
	10	

Total	**100**	

COURSE GRADING:

Grading for this course will be as a letter grade based on completion of required course components, broken down as follows:

Course Component	Number	Total Weight
Participation and Quality of Discussions	10	20%
Written Assignments	10	20%
Budget Exercise	1	10%
Logic Model	1	10%
Practicum Summaries & Reflections	10	20%
Final Presentation	1	20%
Practicum	P/F	---
		100%

Course Average	Final Grade
94-100	A
90-93	A-
87-89	B+
83-86	B
80-82	B-
77-79	C+
73-76	C
70-72	C-
60-70	D
<60	E

CLASS POLICIES:

Attendance: To ensure the optimal online learning environment, students must regularly check the class pages and participate regularly and robustly. Attendance for an online course means on-time remittance of assignments and checking in on discussion frequently and preferably at least daily. Late assignments will be treated like an absence and are ineligible for full credit. Medical excuses can be obtained only in accordance with the University's Medical Excuse Policy: http://www.albany.edu/health_center/medicalexcuse.shtml.

Absence due to religious observance: New York State Education Law Section 224-A (https://www.nysenate.gov/legislation/laws/EDN/224-A) requires campuses to excuse, without penalty, individual students absent because of religious beliefs, and to provide equivalent opportunities for make-up examinations, study, or work requirements missed because of such absences. Faculty will work directly with students to accommodate absences. Please inform the instructor via email of planned absences for religious observance so arrangements can be planned prior to the absence.

Late assignment policy: Late assignments, as previously stated, will not be eligible for full credit. The instructor may take off up to 50% of the credit that would normally have been earned for a late assignment. A late assignment will not be accepted if the assignment is more than a full week over the deadline. An assignment that are more than one week late will be considered a missing assignment.   Missing assignments will receive no credit.

Cell phones: With the permission of the clinical preceptor, cell phones may be carried when on clinical assignment, however students are cautioned not to make personal calls, take photos without express written permission, nor in any other way disrupt the clinical experience.

> ### *Diversity, Equity, and Inclusion Statement*
>
> *At the University at Albany School of Public Health, we believe deeply that equity, respect, and justice are central to our united path forward. The character of our School is to stand steadfast in the face of injustice and act for the betterment of health outcomes. Racism and discrimination have no place in our work.*
>
> *We are committed to creating and supporting a community diverse in every way, which includes but is not limited to: race, ethnicity, age, disability, gender, gender expression, geography, religion, academic and extracurricular interest, political beliefs, family circumstances, national origin, sexual orientation, and socioeconomic background. It is central to our mission to ensure that each member of our community has full opportunity to thrive. We recognize that all of us must embrace the responsibility and accountability for upholding these values, as they are central, not only to our mission, but also to individual growth, education excellence and the advancement of knowledge.*
>
> *The University at Albany is committed to a campus environment that supports diversity, equity and inclusion and will provide support to individuals who report incidents of bias or hate. We encourage any campus community member who experiences or witnesses a bias act or hate crime to report this incident by using the [Bias Incident Reporting Form](#). For more information, visit https://www.albany.edu/diversity-and-inclusion.*

SCHOOL AND UNIVERSITY RESOURCES AND POLICIES:

The policies and procedures regarding Standards of Academic Integrity were revised by action of the University Senate as of Fall 2013. See full text in Graduate Bulletin http://www.albany.edu/graduatebulletin/requirements_degree.htm#standards_integrity.html.

Every student has the responsibility to become familiar with the standards of academic integrity at the University. Faculty members must specify in their syllabi information about academic integrity, and may refer students to this policy for more information. Nonetheless, student claims of ignorance, unintentional error, or personal or academic pressures cannot be excuses for violation of academic integrity. Students are responsible for familiarizing themselves with the standards and behaving accordingly, and UAlbany faculty are responsible for teaching, modeling and upholding them. *Anything less undermines the worth and value of our intellectual work, and the reputation and credibility of the University at Albany degree. (University's* Standards of Academic Integrity Policy, Fall 2013*)*

Accommodations

Reasonable accommodations will be provided for students with documented physical, sensory, systemic, cognitive, learning and psychiatric disabilities. If you believe you have a disability requiring accommodation in this class, please notify the Director of Disability Access and Inclusion Student Services (Campus Center 130, 518-442-5501, daiss@albany.edu).That office will provide the course instructor with verification of your disability, and will recommend appropriate accommodations.

Mental Health

As a student there may be times when personal stressors interfere with your academic performance and/or negatively impact your daily life. The University at Albany Counseling and Psychological Services (CAPS) provides free, confidential services including individual and group psychological counseling and evaluation for emotional, social and academic concerns. Given the COVID pandemic, students may consult with CAPS staff remotely by telephone, email or Zoom appointments regarding issues that impact them or someone they care about. For questions or to make an appointment, call (518) 442-5800 or email consultation@albany.edu. Visit www.albany.edu/caps/ for hours of operation and additional information.

If your life or someone else's life is in danger, please call 911. If you are in a crisis and need help right away, please call the National Suicide Prevention Lifeline at 1-800-273-TALK (8255).

Students dealing with heightened feelings of sadness or hopelessness, increased anxiety, or thoughts of suicide may also text "GOT5" to 741741 (Crisis Text Line).

<u>**COURSE SCHEDULE:**</u>

Session# Date	Topics	Readings/Assignments
1 (date)	*Using Information Technology to Improve Population Outcomes* • Evaluating online information • Using technology to improve population health • Electronic Health Records and Health Information Exchange • E-Resources to support population-based nursing. • Dangers of social media in healthcare	*Required Reading:* Curley, Chapter 6 https://www.cdc.gov/nchs/data-visualization/mortality-leading-causes/index.htm Assignments: Discussion 1 Written Assignment 1

2 (date)	*Overview of Program Planning* • Conceptual frameworks and models to guide program planning vs. strategic planning • Planning in response to a population/community health assessment • Strategic planning	*Required Reading:* Ervin & Kulbok, Chapter 9 *Assignments:* Discussion 2 Written Assignment 2 *Clinical Reflection*
3 (date)	*Concepts in Program Design and Development* • Role of stakeholders – identifying key stakeholders • Information accuracy, relevance and timeliness/justification • Sources of population-level and organizational-level data • Demands of consumers • Innovating care delivery • Policy/program justification • Role for interprofessional team • Determining Structure • Identifying desired outcomes	*Required Reading:* Curley, Chapter 7, p 159-172 *Assignments:* Discussion 3 Written Assignment 3 *Clinical Reflection*
4 (date)	*Formulating Program Goals and Objectives* • Operationalizing population health priorities • Program focus • Coordination – goals, objectives, activities – basis for implementation and evaluation • Measuring behavior • Relating objectives to a goal • Nurse-sensitive process and outcome objectives • Timeframes	*Required readings*: Ervin & Kulbok, Chapter 10 *Assignments*: Discussion 4 Written assignment 4 *Clinical Reflection*

5
(date)
	Implementation Plans
	• Operating policies and procedures
	• Communications and marketing
	• Models
	    o Logic models
	    o PRECEDE_PROCEED
	    o Plan-Do-Check-Act
		Required readings:
		Curley, Chapter 7, p 173-182
		Complete:
		https://www.cdc.gov/dhdsp/docs/logic_model.pdf
		Move It: A case study in policy change and health promotion programming
		https://phtc-online.org/learning/?courseId=14&status=all&sort=group
		Introduction to Logic Models

		https://phtc-online.org/learning/?courseId=29&status=all&sort=group *Assignments*: Discussion 5 Written assignment 5 *Clinical Reflection*

6
(date)
	Focusing Evidence-Based Program Planning
	• Validating community or population diagnosis
	• Prioritizing diagnoses
	• Identifying causes – causal analysis
	   o Literature searches
	   o Fishboning
	   o Cause & consequence analysis
	• Selecting the level of program focus
	• Identifying research-based interventions
	• Using theory and research in practice
	• Constructing an intervention from theory
		Required reading:
		Ervin & Kulbok, Chapter 11
		
		Assignments:
		Discussion 6
		Written assignment 6
		
		Clinical Reflection

7 (date)	*Evaluation of Practice at the Population Level*
	• Nurses as proactive and responsive to the needs of patients and the healthcare environment
	    ○ Outcomes of care
	    ○ Effectiveness
	        Efficiency
	    ○ Trends in healthcare across the continuum
	    ○ System changes
	    ○ Benchmarking
	• Population Health Models
	    ○ Health and wellness
	    ○ Disease management
	    ○ Case management/care coordination
	• Process improvement models
	    ○ Clinical quality and safety
	    ○ Committees – community,provider
		Required reading:
		Curley, Chapter 8
		Performance Measurement: https://phtc-online.org/learning/?courseId=45&status=all&sort=group
		Quality Improvement Team Development: https://phtc-online.org/learning/?courseId=46&status=all&sort=group
		
		Targeting Improvement with AIM Statements: https://phtc-online.org/learning/?courseId=47&status=all&sort=group
		
		Assignments:
		Planning Model Due
		
		Clinical Reflection

8 (date)	*Developing a Program Plan Budgeting and Cost Analysis* • Resources • Thinking about costs • Cost-Benefit Analysis	*Required reading:* Ervin & Kulbok, Chapter 12 & 13 *Doing A Lot with A Little: Economic Analysis in Public Health.* *https://phtc-online.org/learning/?courseId=43&status=all&sort=group* *How to Create a Project Budget:* *https://www.youtube.com/watch?v=LwnLNMTOQFk* Introduction to Grant Writing: https://owl.purdue.edu/owl/subject_specific_writing/professional_technical_writing/grant_writing/index.html#:~:text=Introduction.%20Professional%20grant%20writers%20use%20clear%2C%20specific%20language,practice%20and%20awareness%20of%20a%20few%20common%20missteps *Assignments:* Discussion Week 8 Written Assignment Week 8

		Clinical Reflection
9 (date)	*The Role of Accreditation in Validating Population-Based Practice/Programs* • Conditions of participation • Credentialing	*Required reading:* Curley, Chapters 9 & 10 *Assignments:* Project Budget due
10 (date)	*Program Implementation and Challenges in Program Implementation*	*Required reading:* Ervin & Kulbok, Chapter 14 Curley, Chapter 11 *Community Dimensions of Practice, Modules 1 and 2:* *https://phtc-online.org/learning/?courseId=68&status=all&sort=group* *https://phtc-online.org/learning/?courseId=69&status=all&sort=group* *Assignments:* Discussion Week 10 Written Assignment Week 10
11 (date)	*Monitoring Program Implementation* • Components of successful implementation • Role of communications and marketing • Enhancing community involvement and ownership • Revising program plans	*Required reading:* Ervin & Kulbok, Chapter 15 *Assignments:* Discussion Week 11 Written Assignment Week 11
12 (date)	*Evaluating Population-Based Programs Developing a Program Evaluation Plan* • Relationship of program evaluation to research • Models • Plan development • Setting standards • Involving interdisciplinary teams and community members	*Required reading:* Ervin & Kulbok, Chapters 16 & 17 *Assignments:* Discussion Week 12 Written Assignment Week 12
13 (date)	*Measuring Program Effectiveness/ Conducting a Program Evaluation* • Defining effectiveness • Measuring effectiveness o Community as client measures	*Required reading:* Ervin & Kulbok, Chapter 18 & 19 *Assignment:* Final Project Due

	o Community as relational experience o Community as resource	

Addendum:

Discussion Prompts and Written Assignments		
Session # (Week)	Discussion Prompts	Written Assignments
1	Curley, Exercise 6.3	Curley, Exercise 6.1 and 6.2
2	Identify two or three key skills the advanced population health nurse should have in order to lead community-wide planning around health issues.	Discuss the ethical implications of community-wide planning for scare health-related resources and the leadership role of the population health nurse specialist. What ethical principles can be applied?
3	Think about a recent program or policy change where you work. What was the reason for the change? Who were the stakeholders in that change, both within and outside the organization? Who supported the change? Who did not support the change? What did you learn from this? Was there a team approach to change?	You are asked to justify a needed change within your organization with data-driven rationale. What might you look into before writing the justification? How will you show a benefit to change?
4	Why is it helpful to plan both nurse-sensitive process and nurse-sensitive outcome objectives for a new program you are planning?	Write at least one goal and three objectives for a program based on a population health assessment. (You may use data from last semester's assignments.) Explain the identified need and how the goals and objectives will address the need.
5	What are the benefits of the various planning models? How do they help us look ahead?	Discuss the importance of a structural assessment during the planning process. How does this help?
6	How can the population health nurse go about identifying, critiquing and selecting research-based interventions to address a health problem specified in a community diagnosis?	Select one diagnosis from your assessment. Review the literature to find upstream causes of the diagnosis. Add a fishbone drawing to your post.
7	Planning Model Due	
8	Discuss the importance of fiscal knowledge in implementing a population-based project.	Why is it important to look at multiple funding options for a project? What steps can be taken to locate and access funding? How do we build in sustainability for our population-based projects?

9	Project Budget Due	
10	What ethical principles apply when working with a community? What is your personal strengths that you believe would enable you to work well within a population or community?	What effects might the political environment have on the implementation of a program plan?
11	Why is flexibility in program implementation important? What determines how much flexibility is enough and how much is too much?	What is social marketing and how is it an important skill for the population health nurse?
12	What is the relationship of program evaluation to safety and quality improvement?	How would you prepare an evaluation report in written and oral formats?
13	Final Project Due	

NSG650 PUBLIC/POPULATION HEALTH NURSING III
CAPSTONE Population Health Nursing in Action

INSTRUCTOR: TBD

OFFICE HOURS:

COURSE CREDIT HOURS: 5 credits

This is an **asynchronous online course, with an in-person clinical component, awarding five (5) graduate hours on successful completion**. The didactic portion of this course will be delivered online and asynchronously. It meets or exceeds the total amount of instructional work time expected in a traditional in-class course in every week of a 14 week semester: the equivalent of five 55 minute sessions of classroom or direct faculty instruction for every 5 credit course. The contact time achieved in this class is satisfied by (1) instruction or interaction with a faculty member once a week for each week the course runs as well as (2) academic engagement through group discussions moderated by faculty, virtual study/project groups, interaction with class peers and faculty. Students should dedicate an average of 15 – 25 hours per week of this course.

COURSE PREREQUISITES/COREQUISITES: HNSG 600 Public/Population Health Nursing I, HNSG 600 Public/Population Health Nursing II

COURSE DESCRIPTION:

This course is the culminating experience of the Population Health Nursing Program and prepares the MS-prepared Population Health nursing student to assume leadership roles in a variety of community and population health settings, including community-based programs, clinics, health systems, disaster management, educational systems, policy and research programs, and public health agencies. The purpose of this course is to combine clinical practice experiences with scholarly activities to provide an in-depth learning experience for the student, focusing on continued development and implementation of a practice-focused process, program or policy that decreases risk and supports the health and wellness of a selected population to improve health care outcomes for the population served. Working through an intensive clinical practicum experience, engaging key stakeholders and working with interdisciplinary teams, students will apply advanced practice expertise learned in the program to a population-serving project to enhance health and safety for a vulnerable population of interest. Students will have the opportunity to build an interdisciplinary professional network.

COURSE LEARNING OBJECTIVES:

Upon completion of this course, students will be able to:

1. Utilize advanced practice expertise to improve health care outcomes and achieve equity for vulnerable populations.
2. Analyze and synthesize theories from the natural, behavioral, and applied sciences and the humanities and apply them to advanced clinical practice of population health nursing and role development.
3. Analyze health information about a specific population gathered through available informatics.
4. Build an interdisciplinary professional network for the purpose of designing and delivering safe, high quality, comprehensive, equitable, culturally competent care to individuals, families, communities, and populations.
5. Involve key stakeholders in an issue to create change toward positive health outcomes.
6. Take responsibility for the development of ethical values, principles, and personal beliefs that acknowledge human diversity, cultural humility, professional practice decisions and nursing interventions.
7. Communicate effectively within the multidisciplinary collaborative context of advanced population health nursing practice.
8. Design cost-effective interventions/strategies collaboratively with multiple disciplines for the purpose of providing safe, high quality health care within the community.
9. Evaluate health care issues, trends, and policies to improve health status of communities.
10. Evaluate and apply research findings for the development and implementation of evidence-based practice guidelines.
11. Construct grant applications and project budgets sufficient to ensure the delivery of safe and comprehensive, high quality care.

Diversity, Equity, and Inclusion Statement

At the University at Albany School of Public Health, we believe deeply that equity, respect, and justice are central to our united path forward. The character of our School is to stand steadfast in the face of injustice and act for the betterment of health outcomes. Racism and discrimination have no place in our work.

We are committed to creating and supporting a community diverse in every way, which includes but is not limited to: race, ethnicity, age, disability, gender, gender expression, geography, religion, academic and extracurricular interest, political beliefs, family circumstances, national origin, sexual orientation, and socioeconomic background. It is central to our mission to ensure that each member of our community has full opportunity to thrive. We recognize that all of us must embrace the responsibility and accountability for upholding these values, as they are central, not only to our mission, but also to individual growth, education excellence and the advancement of knowledge.

The University at Albany is committed to a campus environment that supports diversity, equity and inclusion and will provide support to individuals who report incidents of bias or hate. We encourage any campus community member who experiences or witnesses a bias act or hate

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KNOWLEDGE DOMAINS AND COMPETENCIES:

This course addresses the following Domains and Core Competencies for Community/Public Health Nurses at the levels of Tiers 2 and 3:

Foundational Competencies	Assessment Methods
Domain 1: Assessment & Analytic Skills	Discussion boards, project papers 1 &2, reflection papers, practicum evaluation, final paper/presentation.
Domain 2: Policy Development & Program Planning Skills	Discussion boards, project papers 2& 3, reflection papers, practicum evaluation, final paper/presentation.
Domain 3: Communication Skills	Discussion boards, project papers 2 & 3, reflection papers, practicum evaluation, final paper/presentation.
Domain 4: Cultural Competency Skills	Discussion boards; project papers 1, 2 &3; reflection papers; practicum evaluation; final paper/presentation.
Domain 5: Community Dimensions of Practice Skills	Discussion boards, project papers 1 &2, reflection papers, practicum evaluation, final paper/presentation.
Domain 6: Public Health Sciences Skills	Discussion boards, project papers 1, reflection papers, practicum evaluation, final paper/presentation.
Domain 7: Financial Planning, Evaluation, & Management Skills	Discussion boards, project papers 2 & 3, reflection papers, practicum evaluation, final presentation.
Domain 8: Leadership & Systems Thinking Skills	Discussion boards; project papers 1, 2 & 3; reflection papers, practicum evaluation, final paper/presentation.

MS COMPETENCIES: Master of Science in Population Health Nursing

This course addresses the following Master in Population Health Nursing Program core competencies defined by the American Association of Colleges of Nursing (AACN):

Essential	MSN Competency	Course Objectives
I	Uses clinical reasoning to make decisions in nursing practice based on synthesis of knowledge form nursing and liberal arts and sciences	1, 2, 3, 6
II	Provides patient-centered care across the healthcare continuum	1, 5, 6, 8. 9, 10
III	Collaborates with the interprofessional teams and stakeholders to support and improve equitable population health outcomes	4, 7, 8
IV	Integrates research and evidence-based practice into nursing practice	2, 9, 10

V	Applies principles of quality and safety across the healthcare continuum	4, 8, 11	
VI	Communicates and collaborates interprofessional teams and stakeholders to healthcare needs of patients and populations	4, 7, 8	
VII	Applies leadership principles when responding to and leading healthcare systems	4, 5, 6, 7, 8	
VIII	Advocates for the use of technology, informatics and innovation in the delivery of care across the healthcare continuum	3, 10	
IX	Integrates values, ethics, accountability, policies and regulations to provide diverse, equitable and inclusive nursing care	6	
X	Demonstrates a commitment to personal growth, professional knowledge and capacity for leadership	1, 6	

Matrix of course outcomes, learning activities, CPHNO's Core Competencies for C/PHNs and based on AACN's The Essentials, 2011

Program Student Learning Outcomes/ AACN's Program Outcomes	Related Course Outcome	Learning Activity	Domains of CPHNO's Core Competencies
Integrate advanced knowledge from nursing, related sciences, and humanities to provide a theoretical framework for advanced practice in population health. (Element I)	1, 2, 6, 9	Reading/research Discussion Board Project Papers Clinical Activities with Reflection Final Paper/Presentation	1,3,5,6,8
Apply organizational theories and systems thinking to improve the quality, cost-effectiveness and safety outcomes of practice decisions and initiatives. (Element II & III)	1, 2, 5, 11	Readings Discussion Board Written Assignments Budget Exercise Clinical Activities with Reflection Final Paper/Presentation	1, 8
Demonstrate competencies to develop, implement, and evaluate evidence-	1, 3, 6, 9, 10	Readings	1,3,4,5,8

based interventions and conduct a scholarly inquiry. (Element IV)		Discussion Board Written Assignments Clinical Activities with Reflection Final Paper/Presentation	
Apply knowledge of informatics to coordinate and improve programs and systems of care. (Element V)	1, 3, 6	Readings Discussion Board Written Assignments Budget Exercise Clinical Activities with Reflection Final Paper/Presentation	1,6,8
Incorporate advanced nursing practice standards to advocate for health policy and effect systems-level change within populations, health care environments, and organizational systems. (Elements VI)	1, 5, 9	Readings Discussion Board Written Assignments Clinical Activities with Reflection Final Paper/Presentation	1,3,4,5,6,8
Apply evidence-based and interprofessional approaches for the design and delivery of comprehensive, culturally competent care to individuals/families, communities and populations. (Element VII & VIII)	1, 3, 4, 5, 7, 8, 9, 10	Readings Discussion Board Written Assignments Clinical Activities with Reflection Final Paper/Presentation	3,4,5
Practice in an advanced nursing role in collaboration with other disciplines to improve population health outcomes. (Element IX)	1, 3, 4, 7, 8, 9, 10	Readings Discussion Board Written Assignments Clinical Activities with Reflection Final Presentation	1,3,4,5,6,8

In addition, all students are expected to be able to perform within the Three Core Functions of Public Health and the Ten Essential Services.   This course covers all ten essential services and three core functions.

Core Functions:	Ten Essential Services of Public Health:
Assessment – Health needs, investigate health problems, & analyze the determinates of health (medical and non-medical)	1. Monitor health status to identify and solve community health problems.
	2. Diagnose and investigate health problems and health hazards in the community.
Policy Development – Advocate for resources to address needs, prioritize and address health needs, & plan & develop policies to address the priority health needs	3. Inform, educate, and empower people about health issues.
	4. Mobilize community partnerships and action to identify and solve health problems.
	5. Develop policies and plans that support individual and community health efforts.
Assurance – Manage resources, implement programs to address priority health needs, evaluate how those interventions are affecting populations & inform the community about health issues that are or could impact them and the resources available to them	6. Enforce laws and regulations that protect the health and ensure safety.
	7. Link people to needed personal health services and assure the provision of health care when otherwise unavailable.
	8. Assure competent public and personal health care workforce.
	9. Evaluate effectiveness, accessibility, and quality of personal and population based health services.
	10. Research for new insights and innovative solutions to health problems.

COURSE MATERIALS:

Curley, A. L. C. (2020). *Population-based nursing: Concepts and competencies for advanced practice*. New York: Springer Publishing Company.

Ervin, N. E., & Kulbok, P. A. (2018). *Advanced public and community health nursing practice: Population assessment, program planning, and evaluation*. Springer Publishing Company.

deChesnay, M. & Anderson, B. A. (eds.) Caring for the Vulnerable: Perspectives in nursing theory, practice, and research.

American Psychological Association. (2020). *Publication manual of the American Psychological Association* (7th ed.).

Plough, A. L. (2020). *Well-Being: Expanding the definition of Progress: Insights from Practitioners, researchers, and innovators from around the globe*. Oxford University Press.

COURSE REQUIREMENTS/COURSE LEARNING ACTIVITIES:

Assignment Descriptions

This course requires both and online and an in-person presence for a clinical preceptorship. Because the overall responsibility for learning is the student's, the student must take responsibility following through on learning activities and asking questions where explanations are needed.

Clinical Experiences/Practicum

- **Developing a Clinical Practicum site.**

In addition to required online activities, there will be a required in-person **15- to 20-hour-per-week** practicum involving local agencies and programs practicing population health. Since the members of our student body are dispersed across the map, students will need to find their own clinical placements. These agencies do not have to be a traditional health care provider or official agency. For example, they may be Head Starts, schools, domestic violence programs, rape crisis services, disaster-responding agencies, Rescue Missions, LGBTQ+ serving agencies, Senior Housing or feeding sites, jails or prisons. Placements at the student's place of employment can be considered, as long as the designated clinical time is dedicated to course objectives.

Students should work closely with their instructor and faculty adviser when developing placements. The student will be responsible for constructing a plan for their placement, on which the mentor and instructor will need to sign off. The plan must include: Student's name, a title for the preceptorship, instructor, faculty advisor, mentor's name, site/agency, type of agency, student role, competencies to be addressed, Identification of any products to be delivered as a result of the placement, and agreement on clinical hours to be precepted and agreement from the preceptor that they will return the final evaluation by the end date of the course. The instructor and faculty advisor must indicate agreement. This form will be filed the second week of the course.

Students should choose mentors who practice population health and who demonstrate the Core Competencies for C/PHNs. The mentor should have at least a Master's degree in Nursing. The mentor should be willing to actively engage the student and offer information and feedback on their experiences*. **The mentor and the hosting agency should be made aware of the three student projects required for the capstone during this semester.** The mentor will also be responsible for completing an evaluation at the end of the placement.

If the precepting agency requires a Letter of Agreement from the School, please let your instructor know immediately so that the process can begin.

Students will be required to set up a standing appointment with their instructor for discussion of the clinical practicum and progress on class projects. These can be arranged via the learning platform and done via chat or voice call. Regular contact with the instructor is required to receive a passing grade.

 The grade for the practicum is Pass/Fail. The student cannot pass this course without a satisfactory completion of the clinical preceptorship.

- **Clinical Practicum Summaries and Reflections – 20% of final grade**

There is a clinical practicum component to this course, starting with Week 2 and throughout the course. Following and within one week of the completion of the clinical assignment, each student will write a Practicum Summary and Reflection. Ten of these papers are required, one each week after the second week of the semester when the first clinical experience occurs, and a last that is a final summary of the semester of practicum experiences.

Each of the reflection papers must have two distinct components, each worth 50% of the grade:

1. A summary description of the clinical experience (50%), including:
   o A brief description of the agency or program, location, and mentor;
   o Activities that occurred and the student's role;
   o Describe any collaborations, either with community partners/stakeholders or with other professionals, that occurred;
   o The degree of student participation in the various activities that took place (Observer? Helper? Full participant? Leader?); and
   o Progress made this week on course projects.

2. The student's own reflection (50%), including:
   o Explaining how these activities furthered the student's understanding and/or mastery of the Core Competencies for Community/Public Health Nurses and the Essentials;
   o Reflection on the role of interprofessional and community collaboration on the experience; and
   o An honest appraisal of the impact the experience had on the student – The "So What?" of the experience. What impact did this experience have?
   o The student may reflect not only on "what is," but also on "what could be" with the application of what is learned in the course. *Do you see a role for a specialist in population health in this setting? How can you apply the theoretical to your actual experience in practice?*

- **Discussion Boards – 20% of final grade**

The discussion prompts are formulated to stimulate student interaction on related issues. Each student is required to participate in the discussion each week by raising a new point or raising their own discussion question related to current course materials and topics. Learners will need to visit the course pages frequently (preferably daily) in order to follow the discussion. The instructor will monitor the discussion, but only to be sure the discussion stays on track. Sometimes an opinion may be offered, or a suggestion made, but for the most part, it will be up to the learners to keep the discussion going. Because we are all lifelong learners, it is appropriate to contribute to the discussion of course material and assignments by discussing them in relation to your own lived experience, which can add richness to the discussion. You might discuss how your experience compares or contrasts to the evidence that is the basis of your nursing practice and with course materials. If you have a specialty area within population health, you may wish to give examples from that specialty (i.e. MCH, cardiovascular nursing, disaster nursing).

Since these discussions take place asynchronously, you as a student have time to reflect on peer comments and to thoughtfully and analytically think about how to respond. Remember there could be several valid approaches to any issue.

Discussions and written assignments will be graded for grammar, spelling and English usage. A large part of successful professional practice is the ability to communicate clearly. You are expected to write clearly and concisely for all assignments. Learners should carefully proofread their contributions to both the discussions and the written assignments.   Always "spell check" before you hit "send." It is recommended that you compose longer posts in Word, then cut and paste them into the learning platform. This will prevent the platform from "timing out" prior to your contribution being completed and your contribution being lost. Anything submitted should be well thought out, well organized, and submitted on time.

If you contribute early in the week, you can have the earlier opportunities to say insightful things before the others. If you come into the discussion later, you still have the opportunity to react to and respond to ideas that were already presented by other learners. So "jump in" and get your feet wet. Everyone has something valuable to contribute. Try not to be always among the last to contribute.

> **Initial posts** are due **by Tuesday at midnight**. Initial posts should be less than 500 words and should directly address the discussion prompt. **Discussion closes on Fridays at midnight.** Return to the discussion forum and reply to those who responded to you by **Sunday midnight**.

Remember to show respect and courtesy for other learners. You should say nothing demeaning or degrading to other learners. If you disagree, do so politely and with respect for the opposing view. If in doubt, err on the side of caution and courtesy. Remember that these same rules would be required if the course were offered in a classroom. We are striving for courtesy, consistency and fairness, with in the end ensures that each person has a pleasant experience in this course. Posts that are rude, demeaning, degrading or otherwise non-contributory will be graded as zero. So, when you proofread your posts, it is wise to read for tone as well as content.

The discussion board is tangible proof that the learner is engaged and taking part in the learning activities. These are a few ways that the learner can score high points for discussion:

- Keeping abreast of the discussion and contributing actively;
- Putting real thought into your contributions during the discussion;
- Bringing in evidence or theories to support your positions;
- Summarizing the points of previous discussion and adding your own "tilt" to it;
- Taking the collective responsibility to keep the discussion on track;
- Not rambling on with shallow or empty thoughts; and
- Most of all, letting your motivation and desire to learn show!

Discussions will be graded based on the following:

- Grasp of the issue/subject matter (30%);
- Evidence offered to bolster credibility of the learner's position/use of solid references (40%); and
- Professional tone and clarity of the argument or point of view (30%).

- **Course Projects – 45% of final grade (15% each)**

There will be three course projects due, one each on Weeks 5, 8, and 11. The three projects will lead up and become key elements to the final capstone paper and poster presentation. These projects are intended to address and design solutions for an actual health problem encountered by the population being served by the host agency. In this way, the learner can develop real-world skills to serve vulnerable populations and communities through the practicum. Students should be working on the projects all through the course. There is no necessity to wait until after Week 5 to start work on Project 2, for example. However, it is anticipated that students will frequently check with their professor and incorporate feedback given as they proceed. Always, students must consider and work toward achievement of health equity for all in the population.

Course Project 1: Population Health Problem Research Paper (Due Week 5)

In completing Course Project 1, the student will research causation, risk factors, and characterization of a problem encountered by the chosen population and search the literature for potential solutions. Potential solutions may include programs (new or altered), policy change, or both program and policy change. The paper will compare and contrast various potential solutions.

Required elements for this project include:	% of grade
Literature Review	35%
• Clear description of agency and population of interest	
• Clear description of problem to be addressed/opportunities for health or process improvement	
• Well organized discussion of the literature	
• Focused/relevant	
• Comprehensive/complete	
• Concisely summarized with salient points clearly emphasized	
• Presents information about the population of interest and the particular information gathered as it relates to the population	
• Notes at what level of prevention for each potential solution	
Analysis	35%
• Well organized	
• Explains how	
• Compares and contrasts potential solutions – positives and negatives/benefits and drawbacks explained	
• Likely champions and likely detractors for the change	
• Likely feasibility of potential solutions	
• Ethical considerations	
Conclusion	25%
• Which program, policy or combination of program and policy was made	
• Why selection was made	
• All conclusions are well stated	
Overall	5%
• Professional tone and clarity	
• Grammar, spelling and punctuation	
• Cited correctly/APA guidelines for citation followed	

Course Project 2: Population Analysis and Program Plan/Policy Design (Due Week 8)

Course Project 2 requires the learner to analyze which of the potential solutions might be safe, effective and acceptable to the chosen population. Program or policy design must

include input from affected communities or populations and key stakeholders. Students will compose a Logic Model or other program model that notes all project goals and objectives, assumptions, barriers, supports/assets, inputs, impacts/influences, outputs, and as well as a project budget and evaluation plan. The who, what when, where and how must be included in the program plan.

Required elements for this project include:	% of grade
Population Analysis	45%
• Clear description of agency and population of interest	
• Clear description of problem/opportunity for improvement	
• Selected solution(s) and explanation of appropriateness to population of interest	
• Likely safety, feasibility, applicability, acceptability, accessibility, affordability for the population of interest	
• Advice/Input from population and other key stakeholders	
Program Plan/Policy Design	50%
• Comprehensive design using LOGIC Model or other program planning model	
• Clearly outlined project/policy goals, objectives, strategies, actions	
• Effectiveness of implementation strategies	
• Project budget/resources identified	
• Evaluation/data collection plans	
• Project champions – role	
• Marketing plan – social marketing principles applied? Product, price, place, promotion	
• Plan for getting feedback and for how to deal with feedback – positive and negative	
Overall	5%
• Professional tone and clarity	
• Grammar, spelling and punctuation	
• Cited correctly/APA guidelines for citation followed	

Course Project 3: Resourcing and Providing Solutions (Due Week 11)

This phase of the projects is focused on the implementation of strategies for change. The student will report on their progress pilot testing a new solution, be it program or policy change, or both, and describe work toward sustainability of the change. If the intervention is to establish a new service that is without resources, the student should seek resources on behalf of the project. If the solution is a new policy, the student should be specific about who is engaged in the advocacy for the policy and how a coalition of stakeholders can be

achieved. How can other social and health services be involved? How will you engage stakeholders?

Required elements for this project include:	% of grade
Outcomes of the project, to date	35%
- What was implemented - Who – student's role/coalitions formed/key players/multidisciplinary/interagency - What - Where - When - How	
Evaluation	35%
Supports/difficulties or barriers encountered	
- Progress, benefits accrued - Data provided – Were measures selective enough? Sensitive enough? - Honest assessment of feedback/reactions - Advisement - Any notable experiences - Did the project improve health equity? Were disparities reduced?	
Lessons learned	
Ongoing monitoring	
Sustainability	25%
Decisions about continuing project/policy	
Marketing	
Financial sustainability – what's needed and steps taken	
Overall	5%
Professional tone and clarity	
Grammar, spelling and punctuation	
Cited correctly/APA guidelines for citation followed	

- **Final Paper and Presentation - 15% of final grade – (Due Week 13)**

The final paper and presentation will tie together the three course projects into a congruent description of the capstone project. The final paper will be submitted via the learning platform and the final poster presentation will be shared with classmates.

Required elements for this paper and presentation:	% of grade
Final Paper and Presentation uploaded on time	5%
Clear summary of Projects 1, 2, & 3 into a cohesive, clear paper and presentation	35%

• Resulting accrued benefits/expected and unexpected outcomes	
• Any updates/further progress added	
What was learned	20%
Legacy – What will happen with the project now and in the future? How do you know?	20%
Professional feedback given to classmates	10%
Overall	10%
• Professional tone and clarity	
• Grammar, spelling and punctuation	
• Cited correctly/APA guidelines for citation followed	

FINAL GRADING:

Assignments:	% Final Grade
Clinical Summaries and Reflections	20%
Discussion Board	20%
Projects -	45%
Project 1 (15%)	
Project 2 (15%)	
Project 3 (15%)	
Final Paper and Presentation	15%
Total	100%

Course Average	Final Grade
94-100	A
90-93	A-
87-89	B+
83-86	B
80-82	B-
77-79	C+
73-76	C
65-72	D
<65	E

Not applicable for graduate credit

CLASS POLICIES:

Medical Excuse Policy: http://www.albany.edu/health_center/medicalexcuse.shtml.

Absence due to religious observance: As per New York State Education Law Section 224-A (https://www.nysenate.gov/legislation/laws/EDN/224-A) campuses are required to excuse, without penalty, individual students absent because of religious beliefs, and to provide equivalent opportunities

for make-up examinations, study, or work requirements missed because of such absences. Faculty should work directly with students to accommodate absences.

SCHOOL AND UNIVERSITY RESOURCES AND POLICIES:

Academic Integrity: Students are expected to abide by the University at Albany's Code of Academic Integrity. Collaboration is encouraged in many instances; however, work submitted for academic credit must be the **student's own work**. Academic dishonesty (refer to http://www.albany.edu/undergraduate_bulletin/regulations.html), may result in a failing grade for the course and the student(s) may be subject to sanctions by the University.
Talking, discussions and the use of any electronic device are not permitted during quizzes and exams. It will be assumed that students who are talking are cheating and will be given a failing grade for the exam or quiz, which may lead to failure of the course and additional disciplinary action by the University.

Plagiarism: As stated on the Undergraduate Academic Regulations website (http://www.albany.edu/undergraduate_bulletin/regulations.html) plagiarism is defined as:

"Presenting as one's own work the work of another person (for example, the words, ideas, information, data, evidence, organizing principles, or style of presentation of someone else). Some examples of plagiarism include copying, paraphrasing, or summarizing without acknowledgment, submission of another student's

work as one's own, the purchase/use of prepared research or completed papers or projects, and the unacknowledged use of research sources gathered by someone else. Failure to indicate accurately the extent and precise nature of one's reliance on other sources is also a form of plagiarism. Students are responsible for understanding legitimate use of sources, the appropriate ways of acknowledging academic, scholarly, or creative indebtedness.

*Examples of plagiarism include: failure to acknowledge the source(s) of even a few phrases, sentences, or paragraphs; failure to acknowledge a quotation or paraphrase of paragraph-length sections of a paper; failure to acknowledge the source(s) of a major idea or the source(s) for an ordering principle; failure to acknowledge the source (quoted, paraphrased, or summarized) of major sections or passages in the paper or project **or website**; the unacknowledged use of several major ideas or extensive reliance on another person's data, evidence, or critical method; submitting as one's own work, work borrowed, stolen, or purchased from someone else."*

Students are strongly advised to avoid placing themselves in situations where academic integrity may be compromised. Please refer to the University's website regarding Undergraduate Academic Regulations (http://www.albany.edu/undergraduate_bulletin/regulations.html).

Accommodations: Reasonable accommodations will be provided for students with documented physical, sensory, systemic, medical, cognitive, learning and mental health (psychiatric) disabilities. If you believe you have a disability requiring accommodation in this class, please notify the Director of

Disability Access and Inclusion Student Services (Campus Center 130, 518-442-5501, daiss@albany.edu). Upon verification and after the registration process is complete, the DRC will provide you with a letter that informs the course instructor that you are a student with a disability registered with the DRC and list the recommended reasonable accommodations. This statement appears on our University website as part of our Statement of Reasonable Accommodation Policy In Response to the Americans with Disabilities Act that can be found at the following link: https://portal.itsli.albany.edu/documents/14702/27405/ep-hp-RAP-UpdatedSummer2016.pdf

Mental Health: As a student there may be times when personal stressors interfere with your academic performance and/or negatively impact your daily life. The University at Albany Counseling and Psychological Services (CAPS) provides free, confidential services including individual and group psychological counseling and evaluation for emotional, social and academic concerns. Given the COVID pandemic, students may consult with CAPS staff remotely by telephone, email or Zoom appointments regarding issues that impact them or someone they care about. For questions or to make an appointment, call (518) 442-5800 or email consultation@albany.edu. Visit www.albany.edu/caps/ for hours of operation and additional information.

If your life or someone else's life is in danger, please call 911. If you are in a crisis and need help right away, please call the National Suicide Prevention Lifeline at 1-800-273-TALK (8255).

Students dealing with heightened feelings of sadness or hopelessness, increased anxiety, or thoughts of suicide may also text "GOT5" to 741741 (Crisis Text Line).

COURSE SCHEDULE:

Please review the full course schedule, all topics and all assignments before the first night of class.

Session# Date	Topics	Readings/Assignments
1 (date)	*Improving and protecting the health of populations* • Focus on vulnerable populations • Quality, safety & equity • Advanced practice as leadership for change	*Required reading:* Ervin & Kulbok, Chapter 20 *Recommended:* Review Ervin and Kulbok, Chapter 19 and pages 17-20. *Assignments:* Arrange a site for practicum (see instructions) Respond to Discussion Prompt 1

	• The professional practice environment	
2 (date)	*Charting the Course for an Equity-Centered Data System*	*Required Reading:* https://www.rwjf.org/en/library/research/2021/10/charting-a-course-for-an-equity-centered-data-system.html?rid=0034400001rmHgwAAE&et_cid=2491481 Read all associated papers/addenda: Charting a Course for an Equity-Centered Data System: Recommendations from the National Commission to Transform Public Health Data Systems Transforming Public Health Data Systems: Opportunities and Paths Forward Addendum: Population-Specific Data Gaps *Assignments:* Respond to Discussion Prompt 2 Submit proposal for practicum/submit required information to instructor on the learning platform. Work with instructor to make a standing appointment for instructor check-in and feedback.
3 (date)	*The Imperative for Community-Driven Approaches and Radical Inclusion* • Asking the right questions • Building engagement, ownership and trust • Youth as leaders • Shifting power	*Required reading:* Plough, Chapter 8 *Assignments:* Discussion Prompt 3 Clinical Summary and Reflection 1
4 (date)	*Developing Population-Based Programs for the Vulnerable* • Balancing efficiency with need and effectiveness • Focus • Stakeholders & Gatekeepers • Mission &Values • Design process • Capturing data • Business plan • Evaluation	*Required reading:* deChasnay, Chapter 22 *Recommended:* Review texts for assistance with Project 1. *Assignments:* Discussion Prompt 4 Clinical Summary and Reflection 2

5 (date)	*Teaching Nurses about Vulnerable Populations*	*Required reading:* deChasnay, Chapter 30
		Assignments: Course Project 1 Due Discussion Prompt 5 Clinical Summary and Reflection 3
6 (date)	*Teaching Nurse Practitioners about Sex Trafficking: An Honors Capstone Project* • Read an example of an excellent capstone project	*Required reading:* deChasnay, Chapter 35 *Assignments:* Discussion Prompt 6 Clinical Summary and Reflection 4
7 (date)	*Public Policy and Vulnerable Populations* • How agendas are set by policy makers • How policies are evaluated • How nurses can influence policy	*Required reading:* deChasnay, Chapter 38 *Assignments:* Discussion Prompt 7 Clinical Summary and Reflection 5
8 (date)	*Impact of the ACA on Health Policy and Advocacy for Vulnerable Populations*	*Required reading:* deChasnay, Chapter 40 *Assignments:* Course Project 2 Due Discussion Prompt 8 Clinical Summary and Reflection 6
9 (date)	*Health Systems and Human Resources for Health: New Dimensions in Global Health Nursing*	*Required reading:* deChasnay, Chapter 41 *Assignments:* Clinical Summary and Reflection 7 Discussion Prompt 9
10 (date)	*Revising Programs* • Actions to take with ineffective programs • Political and organizational environments for program changes • Involving the population/	*Required Reading:* Ervin & Kulbok, Chapter 20 *Assignments:* Discussion Prompt 10 Clinical Summary and Reflection 8

	community in program revisions	
11 (date)	*The Practice Environment*	*Required Reading:* Ervin & Kulbok, Chapter 21 *Assignments:* Course Project 3 Due Discussion Prompt 11 Clinical Summary and Reflection 9
12 (date)	*Capstone Preparation*	*Reading required as for your individual final project.* *Assignments:* Discussion Prompt 12 Clinical Summary and Reflection 10
13 (date)	Place your final poster on the Discussion Board to share with your classmates.	*Assignments:* Final Papers to be Uploaded Final Poster Due Debrief preceptor with the final Clinical Summary and Reflection on the semester Comment on your classmates' presentations.

ADDENDUM:

Course Discussion Prompts and Guidance for Course Projects/Written Assignments

Week	Discussion Prompt	Written Assignments/Projects
1	This course is all about applying advanced practice knowledge in order to affect real change in the way services are delivered to vulnerable populations, making sure diverse needs are met. Share with your classmates your ideas for your practicum and what your goals are relative to your ongoing professional development in the area of population health nursing.	Arrange for practicum site at a community-based or population-focused organization. Discuss any needed items/support with your instructor.

2	How can you see your advanced practice of population health nursing impacted by the changes discussed in the RWJF papers? Can you think of times it could have helped you in the past? How do you see this concept supporting your practice in the future?	Submit a proposal for your practicum on the learning platform. Please provide all required information in the required format. Make standing appointment for instructor interaction.
3	What do you think the author means by "radical inclusion"? What are the benefits? How does this relate to the concept of "shifting power"?	Complete Clinical Summary and Reflection 1.
4	In Chapter 22, deChasnay and Bongiorno discuss key points in formulating population-based programs for the vulnerable. Was there anything in particular that they mention that struck a chord? What piece of shared information would seem to be most helpful to you as you undertake our course projects?	Complete Clinical Summary and Reflection 2
5	Update your classmates on how your first project went. What did you learn from the experience? What will you take away from the experience?	Course Project 1 Due Complete Clinical Summary and Reflection 3
6	For the last two weeks, we have been reading about educating nurses. Teaching is frequently embedded in the population health nurses practice. How is this information useful to you in your professional development? How can this information be used in a variety of settings?	Complete Clinical Summary and Reflection 4
7	Sometimes we hear policy makers refer to "Big 'P' Policy" and "Little 'p' policy. What do they mean by that? As a Masters-prepared population health nurse, you can have a huge impact on both. What are some of the ways the population health nurse can impact both the "Big 'P' Policies" and the "little 'p' policies? How can we increase our voice?	Complete Clinical Summary and Reflection 5
8	Update your classmates on how your second project went. What did you learn from the experience? What will you take away from the experience?	Course Project 2 Due Complete Clinical Summary and Reflection 6

9	The topic of out-migration of nurses is an especially hot topic in times of shortages. Discuss the implications for the health systems with in- and out-migration. How does this impact how we are able to meet the needs of vulnerable populations? What are keys to retention and equitable distribution?	Complete Clinical Summary and Reflection 7
10	It has been said that program revision is harder than inventing new programs. What would that be true? What should the population health nurse consider in deciding whether a program needs revision or completely stopped and its resources used elsewhere?	Complete Clinical Summary and Reflection 8
11	Update your classmates on how your third project went. What did you learn from the experience? What will you take away from the experience?	Course Project 3 Due Complete Clinical Summary and Reflection 9
12	The environment in which we practice can have a great impact on our success and our professional satisfaction. Discuss some things we can each do to improve the environment for successful and happy advanced practice of population health nursing.	Complete Clinical Summary and Reflection 10
13	Place your final poster on the Discussion Board to share with your classmates. Share any comments you have.	Final Paper and Poster Presentation Due Debrief preceptor with the final Clinical Summary and Reflection on the semester.

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Appendix 4 External Intruction Form

External Instruction Form

This form is required when external instruction is part of the degree requirements in an academic program. External instruction includes internships, field work, clinical placements, cooperative education, service learning, and the like, which are offered in cooperation with external partners, such as business and industry, health care facilities, public agencies, or schools.

1. Use the table below (expanded as necessary) to summarize proposed arrangements for required external instruction in an academic program. List all proposed arrangements. The number of placements listed below should equal or exceed the number of students expected to be in the initial cohort of a new program.

Name and Title of Contact Person	Name and Address of Placement Site	# of placements per year
Johanne Morne, Director, Center for Community Health, NY State Department of Health (NYSDOH)	NYS Department of Health Empire State Plaza Albany, NY 12237 And, associated organizations: for example, federally qualified Health Centers; designated AIDS Centers; Adult Day Health Centers	10
Keith Brown, Interim Public Health Director, Schenectady County Health Department	Schenectady County Health Department 107 Nott Terrace Schenectady, NY 12308	2
Linda Spokane, Vice President, Population Health	Hudson Headwaters Health Network 9 Carey Road, Queensbury, NY 12804	3

2. For clinical placements for programs leading to professional licensure in a health profession, **append** documentation to demonstrate each site's commitment to a numerical range of students each year, and the time period of its commitment. The documentation should be signed by the responsible official at each proposed clinical site.

3. In the table below, list the individual(s) at the campus (or at each campus, in the case of multi-institution programs) who will have responsibility for oversight and administration of external instruction.

Name	Title	Email Address
	Clinical Professor	

Appendix 5 Position Descriptions for Faculty To Be Hired

University of Albany
School of Public Health
Faculty, Nursing Program

Job title	*Nursing Program Director and Professor (tenure-track)*
Reports to	*Dean, School of Public Health*

Job purpose

The Nursing Program Director will provide oversight and administration of all aspects of the nursing program. The Program Director will provide strategic direction for the development and growth of nursing programs at the school, and will foster an environment of inclusion and collegiality among a culturally diverse school community. The Program Director will work closely with the Dean to implement bachelors and masters nursing programs, and develop new programs in the future. The Program Director will also be the primary liaison between the nursing program and key external stakeholders.

This will be a tenured 9-month faculty position with 12-month administrative responsibilities.

Duties and responsibilities

The Nursing Program Director will responsible for oversight and administration of all aspects of the nursing program. This will include recruiting and providing oversight to administrative staff and faculty. Specific responsibilities include accreditation activities, course, faculty and program assessment and evaluation, oversight of the development of new courses and curriculum revisions, oversight of the recruitment of a diverse student body, development of affiliation agreements to support the clinical placement of students, and maintenance of relationships with external stakeholders.

The Program Director will also have teaching and advising responsibilities commensurate with a tenured faculty member with significant administrative responsibilities. Ordinarily this will equate to one course per semester. In addition, the Program Director will mentor and advise BS and MS level nursing students, and actively engage in university and community service.

Candidate review will also be based on the NLN Nurse Educator Core Competencies
http://www.nln.org/professional-development-programs/competencies-for-nursing-education/nurse-educator-core-competency

Qualifications

Required qualifications include:

- A doctoral degree in nursing, education, or related field from college/university accredited by the Department of Education
- Appropriate credentials to qualify for appointment as a tenured associate professor or professor
- Experience in population health, community health, or advanced clinical practice nursing
- Previous teaching experience in academic and/or clinical settings
- Unrestricted license to practice as a registered nurse in NYS
- Demonstrated scholarship activity

Preferred attributes:

- Three (3) years of related experience in higher education
- Experience with online/remote teaching.
- Demonstrated understanding of advising and competency-based learning.
- Experience with nursing accreditation, curriculum development, implementation, and evaluation

Direct reports

Administrative Assistant; other nursing faculty, both tenure-track and adjunct

<div align="center">

University of Albany
School of Public Health
Faculty, Nursing Program

</div>

Job title	*Clinical Assistant/Associate Professor (12-month)*
Reports to	*Director of Nursing Program*

Job purpose

The Clinical Assistant/Associate Professor is responsible for teaching the three masters level nursing courses that have clinical components.

This position is also responsible for the oversight of clinical instruction of students, including obtaining appropriate clinical sites and preceptors to meet course and program objectives.

Additional responsibilities include participation in assessment activities, committee assignments, and academic advising. This position will be a full-time 12-month faculty appointment.

Duties and responsibilities

The Clinical Assistant/Associate Professor will be responsible for teaching nursing courses and advising and mentoring nursing students. The teaching load will consist of a 5-credit nursing course with clinical component each term (fall, spring, summer). We are especially interested in individuals who incorporate public health and community-based content into their teaching. In addition, faculty will mentor and advise nursing students, and actively engage in university and community service. We are especially interested in candidates with a commitment to fostering an environment of inclusion and collegiality among a culturally diverse school community.

In addition, the Clinical Assistant/Associate Professor will work closely with students to arrange clinical placement sites in conjunction with three courses with clinical components. Responsibilities include: planning and organizing the clinical courses to meet course learning objectives; ensuring students meet all clinical-related program and agency requirements, ensuring that all correspondence and documentation with clinical agencies is complete and current each semester, reviewing clinical site evaluations and making recommendations for change based on evaluation data, and maintaining ongoing communication with clinical partners.

Candidate review will also be based on the NLN Nurse Educator Core Competencies
http://www.nln.org/professional-development-programs/competencies-for-nursing-education/nurse-educator-core-competency

Qualifications

Required qualifications include:

- A doctoral degree in nursing, education, or related field from college/university accredited by the Department of Education
- Experience in advanced practice public health nursing
- Previous teaching experience in academic and/or clinical settings
- Unrestricted license to practice as a registered nurse in NYS

Preferred attributes:

- 3 years clinical nursing experience
- Experience with online/remote teaching
- Demonstrated understanding of advising and competency-based learning
- Experience with curriculum development, implementation, and evaluation at the graduate level

Direct reports

None

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New Program Proposal
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Appendix 6 External Evaluation Reports

SUNY — The State University of New York

The External Evaluation Report is an important component of a new academic program proposal. The external evaluator's task is to examine the program proposal and related materials, visit the campus to discuss the proposal with faculty and review related instructional resources and facilities, respond to the questions in this Report form, and submit to the institution a <u>signed</u> report that speaks to the quality of, and need for, the proposed program. The report should aim for completeness, accuracy and objectivity.

The institution is expected to review each External Evaluation Report it receives, prepare a single institutional response to all reports, and, as appropriate, make changes to its program proposal and plan. Each separate External Evaluation Report and the Institutional Response become part of the full program proposal that the institution submits to SUNY for approval. If an external evaluation of the proposed program is required by the New York State Education Department (SED), SUNY includes the External Evaluation Reports and Institutional Response in the full proposal that it submits to SED for registration.

Institution:

Evaluator Name (Please print.): Allison Del Bene Davis PhD, RN

Evaluator Title and Institution: Specialty Director, Community and Public Health Nursing, University of Maryland, School of Nursing

Evaluator Signature:

Proposed Program Title: Population Health Nursing

Degree: MS

Date of evaluation: 2/10/22

I. Program

1. Assess the program's **purpose, structure, and requirements** as well as formal mechanisms for program **administration and evaluation.** Address the program's academic rigor and intellectual coherence.

This new MS degree in population health nursing is designed to prepare advanced population health nurses to address the social determinants of health, particularly the health needs of vulnerable populations. It is a 42 credit MS degree which includes 15 credit hours of clinical field experience. It was designed for Registered Nurses who have already completed a BS degree. The degree will be housed within the School of Public Health and will be administered by a doctorally prepared nursing director. The program will be evaluated by the American Association of Colleges of Nursing (CCNE). The program was designed to meet the AACN 2011 Essentials of Master's degree in Nursing Education competencies and the Community/ Public Health Nursing, QUAD council Graduate level Tiers. As per the MPH program, students will be expected to maintain a 3.0 average GPA.

2. Comment on the **special focus** of this program, if any, as it relates to the discipline.

The specific focus of this program will be on the community and public health nursing, determinants of health, vulnerable populations and health disparities, public health science and methods and the application of this knowledge to communities and populations.

3. Comment on the plans and expectations for **self-assessment and continuous improvement**.

The program will adhere to the program policies set by the Office of Institutional Planning and Effectiveness. Modifications will be made based of internal review, external evaluation and student feedback.

4. Discuss **the relationship** of this program to other programs of the institution and collaboration with other institutions, and assess available support from related programs.

The Master's of Science in Population Health Nursing will be housed within the School of Public Health and will be a joint venture between this school and the nursing program. Students will benefit from the public health expertise of the faculty in the School of Public Health as well as from the guidance, role modeling and mentorship from the nursing program director.

5. What is the evidence of **need** and **demand** for the program locally, in the State, and in the field at large? What is the extent of occupational demand for graduates? What is the evidence that demand will continue?

Nurses are in high demand in New York State and across the country. The COVID-19 pandemic has underscored the shortage of healthcare professionals in the State and the critical role that they place in responding to emergencies. There is also a clear need for an MSN in Population Health Nursing, specifically, in New York State. Population health is predicted to be an important part of nursing education in the next decade and there are very few MSN programs in New York that incorporate population health in their curriculum. Graduates with an M.S. in Population Health Nursing are likely to be employed in jobs that provide health care to community members and address community health issues ranging from infectious diseases to substance abuse, focusing on prevention and education as well as treatment. Health disparities continue to grow in this country. The demand and need for nurses who can address these disparities will also continue to grow.

II. Faculty

6. **Evaluate the faculty**, individually and collectively, with regard to training, experience, research and publication, professional service, and recognition in the field.

The M.S. program will be housed in the School of Public Health, where it will benefit from internationally recognized expertise in public health, health policy, environmental health sciences, behavioral sciences, and epidemiology. The School of Public Health's mission is to offer unique and extensive experiential learning and public health practice opportunities and to conduct timely and impactful research to improve comprehensive wellness and eliminate health inequities in NY State, the nation, and around the world.

For over a decade, the University-wide Center for the Elimination of Minority Health Disparities (CEMHD) at the University at Albany is a collaborative effort focusing on minority health disparities in the cities and towns of New York. Faculty associated with CEMHD work in partnership with communities, health care providers, and state and county departments to identify community health concerns and sources of disparities, plan strategies to alleviate them, and test their 6 effectiveness. Many associated faculty are Public Health faculty members. With dozens of community partners (https://www.albany.edu/cemhd/about.php) faculty associated with the CEMHD will expose students in the Master of Science in Population Health Nursing program to cutting edge research on health disparities and prepare them to participate in community-based research and interventions.

7. **Assess the faculty in terms of number and qualifications** and **plans for future staffing**. Evaluate **faculty responsibilities** for the proposed program, taking into account their other institutional and programmatic commitments. Evaluate faculty **activity in generating funds** for research, training, facilities, equipment, etc. Discuss any **critical gaps and plans for addressing them**.

Two new faculty members will be hired for this program. Both will be nurses with earned doctorates who have experience and expertise in public and population health. Faculty hired will be at the Assistant professor level or higher.

8. Evaluate credentials and involvement of **adjunct faculty** and **support personnel**.

Adjunct faculty will be hired as needed to fill teaching roles.

III. Students

9. Comment on the **student population the program seeks to serve**, and assess plans and projections for student recruitment and enrollment.

The projected program will serve registered nurses with an earned BS degree who are interested in public and population health, health promotion and health disparities. It is anticipated that the program will enroll 7 students in year one, working up to 44 in year five of the program.

10. What are the prospects that recruitment efforts and admissions criteria will supply **a sufficient pool of highly qualified applicants and enrollees**?

Student recruitment will occur through normal marketing channels as well as through information disseminated to partners and interested stakeholders including the health department, local hospitals, community agencies and schools.

11. Comment on provisions for encouraging participation of **persons from underrepresented groups**. Is there adequate attention to the needs of part-time, minority, or disadvantaged students?

The University at Albany's Vision, created with our strategic plan for 2018-2023, "Authoring our Success" ( ) is "To be the nation's leading *diverse* public research university—providing the leaders, the knowledge, and the innovations to create a better world." This statement shows the entire University's commitment to diversity in all our disciplines. Our analysis of enrollment ethnicity shows that steadily throughout the past 4 years, we have enrolled 55% or more undergraduate students who identify as an ethnic minority. With this commitment to our diverse population within the whole of the University at Albany, it will be a commitment within our nursing program as well.

University at Albany is a minority serving institution with many of our students belonging to historically underrepresented racial/ethnic groups and we expect that Masters in Population Nursing will represent a similar breakdown. We will be actively recruiting using a variety of means including online marketing. And we will be actively recruiting by visiting the many hospitals within our region. To increase enrollment of students from historically underrepresented groups, we will strive for faculty role models through aggressive recruitment of a diverse faculty.

12. Assess the system for monitoring **students' progress and performance** and for **advising students** regarding academic and career matters.

The University requires mandatory advising for every student. This advising provides the opportunity for the advisor and student to connect prior to registering for each term. Advisement will be provided by the faculty which is ideal because they can monitor progression and GPA, recommend course pacing as well as council regarding career matters.

13. Discuss prospects for graduates' post-completion success, whether **employment, job advancement, future study, or other outcomes related to the program's goals.**

The pandemic has only exacerbated the need for nurses prepared to tackle population and public health challenges. Graduates of this program will fill positions in local and state public health departments as well as private not for profit organizations and industry. Graduates of this program will have the opportunity to advance their education by completing a doctoral degree which will also create opportunities in academia.

IV. Resources

14. Comment on the adequacy of physical **resources** and **facilities**, e.g., library, computer, and laboratory facilities; practica and internship sites or other experiential learning opportunities, such as co-ops or service learning; and support services for the program, including use of resources outside the institution.

The University has extensive library and computer resources to aid the students in their success. In addition, the strong community partnerships will ensure that students are placed in practica sites that increase their knowledge and expertise in the field.

15. What is the **institution's commitment** to the program as demonstrated by the operating budget, faculty salaries, the number of faculty lines relative to student numbers and workload, and discussions about administrative support with faculty and administrators?

The University is committed to hiring two full time faculty members to teach in the program. In addition, faculty will also be available as needed from the proposed BSN program as well. In addition, administrative time will also be allocated to the program.

V. Summary Comments and Additional Observations

16. Summarize the **major strengths and weaknesses** of the program as proposed with particular attention to feasibility of implementation and appropriateness of objectives for the degree offered.

The proposed program has many strengths. The program will be housed within the School of Public Health so students will be able to learn from internationally recognized public health experts and practitioners. In addition, the School of Public Health and the University has a vast network of community partnerships and collaborations which helps to ensure that there is an influx of practical knowledge into the program and shared expertise from the program to the collaborators. These strong collaborations will allow for interdisciplinary work and strong mentorship of the students. Another strength of the program is that is it being created at the same time as a BSN program for nurses. This BSN program will serve as a pipeline to engage students in population and public health and ensure that there are high quality applicants for this degree. The plan of study for the program is strong. Students will be able to combine core advanced practice nursing competencies with core public health knowledge and quantitative methods. They will also then have 15 credits of practicum experience to apply this knowledge in a real-life setting. Program graduates will be highly sought after for advanced public health nursing roles. The program objectives are guided by the most current graduate public health nursing competencies and are appropriate for the degree.

There were very few weaknesses found in this proposal. Because this is a new nursing program, there are no current advanced practice public health nurses on the faculty. However, the program development team are committed to ensure that the students of the new program will have advanced practice public health nurses to serve as role models and mentors throughout the plan of study.

17. If applicable, particularly for graduate programs, comment on the ways that this program will make a **unique contribution** to the field, and its likelihood of achieving State, regional and/or national **prominence**.

The need for public health practitioners will continue to grow in the next decade. It is critical that the Capital region be at the forefront of educating public health practitioners to meet the challenges of the region and of the State of New York. This program is an important step in creating this cadre of experts who will help solve local and State public health challenges.

18. Include any **further observations** important to the evaluation of this program proposal and provide any **recommendations** for the proposed program.

Strong program and critically timed to meet the growing need.

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External Reviewer Conflict of Interest Statement

I am providing an external review of the application submitted to the State University of New York by:

University at Albany
_____
(Name of Institution or Applicant)

The application is for (circle A **or** B below)

A) New Degree Authority

B) Registration of a new academic program by an existing institution of higher education:

Population Health Nursing MS
_____
(Title of Proposed Program)

I affirm that I:

1. am not a present or former employee, student, member of the governing board, owner or shareholder of, or consultant to the institution that is seeking approval for the proposed program or the entity seeking approval for new degree authority, and that I did not consult on, or help to develop, the application;

2. am not a spouse, parent, child, or sibling of any of the individuals listed above;

3. am not seeking or being sought for employment or other relationship with the institution/entity submitting the application?

4. do not have now, nor have had in the past, a relationship with the institution/entity submitting the application that might compromise my objectivity.

Name of External Reviewer (please print):

Allison Del Bene Davis PhD, RN
_____

Signature: _____

External Evaluation Report

The External Evaluation Report is an important component of a new academic program proposal. The external evaluator's task is to examine the program proposal and related materials, visit the campus to discuss the proposal with faculty and review related instructional resources and facilities, respond to the questions in this Report form, and submit to the institution a <u>signed</u> report that speaks to the quality of, and need for, the proposed program. The report should aim for completeness, accuracy and objectivity.

The institution is expected to review each External Evaluation Report it receives, prepare a single institutional response to all reports, and, as appropriate, make changes to its program proposal and plan. Each separate External Evaluation Report and the Institutional Response become part of the full program proposal that the institution submits to SUNY for approval. If an external evaluation of the proposed program is required by the New York State Education Department (SED), SUNY includes the External Evaluation Reports and Institutional Response in the full proposal that it submits to SED for registration.

Institution: State University of New York, University at Albany

Evaluator Name (Please print.): Meredith Troutman-Jordan

Evaluator Title and Institution: Associate Professor and MSN Systems Coordinator, University of North Carolina at Charlotte

Evaluator Signature: *Meredith Troutman-Jordan*

Proposed Program Title: Population Health Nursing

Degree: MSN

Date of evaluation: 2-10-22

I. Program

1. Assess the program's **purpose, structure, and requirements** as well as formal mechanisms for program **administration and evaluation.** Address the program's academic rigor and intellectual coherence.

The proposed program is intended to prepare population health nurses at an advanced practice level, equipping them with expertise and skills needed to target social determinants of health, experienced by vulnerable populations and communication, in particular. It is a thoughtfully designed program with robust partnerships with various service providers and resources throughout the state. The wealth of human capital undergirding the program is a strength. The program aligns with SUNY's mission to empower students, faculty and campus communities to author their own success, and will exist within the School of Public Health. Supporting faculty with include Public Health faculty members, current director of the MSN program, and two part time nursing faculty, to be hired. A crucial team member will be the Nursing Clinical Coordinator, who is identified as full time, yet listed as a part time faculty in the proposal. Based on (written and verbal) descriptions of this role, this person seems like they will be full time and will need to be a creative problem-solver and dynamic individual with strong communication and multi-tasking skills. The majority of faculty supporting the program will be disciplines other than nursing. While this is a great opportunity for interprofessional education, there could be some limitations with having only three identified nursing faculty (director, adjunct lecturer, and clinical coordinator).

The program requires 42 credit hours of coursework, comparable to other programs (36-52 credit hours). Students must complete 480 total hours of practicum experience, close to CCNE standards for 500 practicum hours. The program will be overseen by a doctorally-prepared nursing faculty member who will dedicate 100% of her time to program administration and teaching. The clinical coordinator to be hired will dedicate 100% of his or her effort to three practicum courses. This individual will be doctorally-prepared and responsible for coordinating the clinical components of these courses which will be arranged individually for each student. Students may be located throughout the state and though there is ample support and resources available for preceptors and clinical sites, students may need considerable guidance in contacting and securing preceptors, sites, and completing all paperwork and permissions typically associated with clinical placements. The Public Health program director will support the Clinical Coordinator; however, to maintain teaching responsibilities for three courses, as well as ensuring and navigating communication, tracking, and maintaining current academic affiliation documents, it could be possible to that additional manpower is needed to help the Clinical Coordinator in these functions. Evaluation of course delivery will be done ongoing, as faculty meet to discuss course delivery, student completion, etc. at the end of each semester. If there is not a formal plan for these evaluations, having an end of course report for each course could be useful. This would ensure uniform collection of complete data, and could be compiled to inform annual evaluations that the School of Public Health Administration plan to do, and to prepare for CCNE accreditation.

2. Comment on the **special focus** of this program, if any, as it relates to the discipline.

The proposed program is built upon the institution's deep, longstanding focus on health disparities. This emphasis is present throughout the proposal, as evidenced by academic preparation and expertise of participating faculty, extensive well-established relationships with community partners throughout the state, and thoughtfully developed courses with learning objectives that reflect this emphasis, addressing characteristics and special needs of diverse and vulnerable communities.

3. Comment on the plans and expectations for **self-assessment and continuous improvement**.

The proposed program will adhere to policies and guidelines for program evaluation that have been established by the SUNY's Office of Institutional Planning and Effectiveness, in addition to requirements of CCNE (nursing) and CEPH (public health) accrediting bodies. CCNE will conduct an initial accreditation visit at completion of year one of the program. CCNE entails a rigorous and comprehensive review, the data for which will include (access to) courses, and interviews with faculty and administration. The program will likely prepare for these reviews by collecting and evaluating data from its inception, including course evaluations, and end of course reports that faculty complete. It might be helpful to have an established action plan that can be implemented as soon as any issues are identified; if a problem is recognized through student course evaluations, what steps will be taken?

4. Discuss **the relationship** of this program to other programs of the institution and collaboration with other institutions, and assess available support from related programs.

The proposed program has a number of strengths in terms of interinstitutional and community support. Faculty within the Public Health program enthusiastically support it, and bring a rich history of community program experience, research and teaching expertise. SUNY Distance Education department online offerings are overseen by the MPH Director, and there is a history of DE course delivery originating in the late 90's. A cadre of 70 instructors have taught courses over time. DE offerings include 30 asynchronous courses. Faculty support is available from multiple sources. Among these are Institute for Academic Learning and Teaching fellowships and a dedicated instructional designer. A robust IT department is another asset. An array of longstanding collaborations with other institutions throughout the state support the proposed program; a 35-year partnership with the New York State Department of Health and Wadsworth Laboratories; relationship with communities, health care providers, and state and county departments statewide, through a partnership with the University-wide Center for the Elimination of Minority Health Disparities (CEMHD). The CEMHD is a collaborative effort focusing on minority health disparities in the smaller cities and towns of New York. A number of NIH-funded core research projects and other funded research development awards have been completed through this center, which identifies over 20 partnering community agencies. There is a wealth of expertise and skills available within SUNY and throughout the state.

5. What is the evidence of **need** and **demand** for the program locally, in the State, and in the field at large? What is the extent of occupational demand for graduates? What is the evidence that demand will continue?

As the nation continues to struggle with the pandemic, there remain many statewide (and nationwide) needs for community health nurses prepared at the graduate level. Nursing is a major in high demand at SUNY, and there are no public health nursing programs offered in the capital region. The proposed program is well-aligned with the National Academy of Medicine 2021 report calling for investment of significant resources and funding to increase the number of community and public health nurses, and noting the many strengths the Community Public Health nurse workforce has to offer-team-based care, a holistic approach, community-centered care, and advocacy. Though there are no public nursing program options in capital region, there is a great need within the state to address health outcomes and disparities. Therefore, the proposed program could provide a much-needed service that is missing, as there is increasing demand for public health nurses, particularly in medically underserved and low-income communities. And, the program is a direct response to the Future of Nursing 2020-2023 call to "provide major investments for nursing education and traineeships in public health, including through state-level workforce programs" by: initiating substantive actions to enable the nursing workforce to address social determinants of health and health equity more comprehensively, regardless of practice setting. . . by increasing the number of nurses with expertise in health equity and the number of nurses in specialties with significant shortages, including public and community health (Future of Nursing 2020-2030 Recommendation 2).

II. Faculty

6. **Evaluate the faculty**, individually and collectively, with regard to training, experience, research and publication, professional service, and recognition in the field.

The broad collective expertise of faculty (epidemiology, health education and behavioral science, health policy and management, community health sciences, maternal child health) is a strength. The faculty slated to teach in the program have an excellent track record of involvement/leadership in a range of community engagement projects, research, assistantships, internships, apprenticeships, and practice in tele-mental health, obstetric clinics, churches, vaccination clinics, COVID testing sites, and with diabetes management in various populations. However, most of the full-time faculty will only be responsible for one course within the curriculum. Broad distribution of courses across a number of faculty could pose the risk of fragmented instruction, with each course associated with a different instructor. As the part-time nursing faculty have not been hired, their experience cannot be evaluated. Individuals with clinical and teaching expertise in theory, research, health policy (adjunct) and public/population health nursing (clinical coordinator) will be needed.

7. **Assess the faculty in terms of number and qualifications** and **plans for future staffing**. Evaluate **faculty responsibilities** for the proposed program, taking into account their other institutional and programmatic commitments. Evaluate faculty **activity in generating funds** for research, training, facilities, equipment, etc. Discuss any **critical gaps and plans for addressing them**.

Eight full-time and two part-time faculty will deliver the program. Of full-time faculty, the Program Director will devote 100% of her time to this program. However, the Program Director's dedicated time will be split between the proposed program and a BS in Nursing program, once it is registered. Given the increased workload with initiating any new program, it would be prudent to anticipate the Program Director could need additional support if she will oversee two new programs that will be started in a possibly close timeframe, and there are plans for this outlined in the proposal. A seasoned nurse leader of many years and at several institutions, the Program Director is well-prepared to oversee the program, with doctoral degree attainment in nursing and certifications in nursing administration and nursing education. Remaining full-time faculty will dedicate 5% time to the program. These faculty have educational training in fields/specialties within a public health focus, and a strong track record of related community engagement and research projects. The School of Public Health Center for the Elimination of Minority Health Disparities has significant NIH funding supporting projects from 2009-2016. Ongoing research by CEMHD associates includes research on COVID-19 in the Capital Region, the Albany Infant and Mother Study, and investigation of mHealth interventions to treat cocaine and other substance use disorders in HIV+ individuals.

Two part-time faculty are planned; these individuals will dedicate 100% of their time to the program, and be responsible for six (nursing) courses. Aside from the Program Director, the only other nursing faculty for this nursing program are listed as part time. Therefore, the program seems lean in terms of nursing faculty, which is a bit of a concern, as it is an MSN program. The Program Director's leadership and having an adjunct lecturer and clinical coordinator who are experienced, strong communicators with creative problem-solving skills will be important to the success of the program. Retention of a consistent adjunct lecturer teaching the three nursing courses planned will also be vital. It would be helpful to have further detail about what plans there are for tracking faculty performance outcomes and indicators of any change needed (e.g. hiring additional faculty, revising roles, etc.). How and when will workload feasibility to evaluated? At what point will might there need to be a redistribution of workloads or task distribution, based on program growth and outcomes?

8. Evaluate credentials and involvement of **adjunct faculty** and **support personnel**.

One adjunct lecturer will be hired. This individual will be responsible for three core nursing courses, foundational to the program, HNSG 550, HNSG 512, and HNSG 514. Desired/required credentials for this individual are not found within the proposal. Educational preparation and credentials/experience of this individual seem vital to program success, as these are new courses and central to the program. The plan could be strengthened if minimum credentials were specified, and included doctoral preparation and

training/experience in community public health nursing. Plans are for a PhD-trained Clinical Coordinator to teach three 5-credit nursing courses, HNSG 600, HNSG 610, and HNSG 650. It is not clear whether this individual must be a nurse and/or what the doctoral degree can be in. Like the role and work expectations for the adjunct faculty, having an experienced solution-oriented faculty member with strong problem-solving and communication skills in this role will be critical. Supporting students in the securing of practicum sites and preceptors can be a major task, that requires coordination, planning and time-management skills. One Administrative Assistant will provide support to the Program Director, faculty, students, serve as initial contact for potential students, and be responsible for student recruitment (along with the Graduate School). No minimum required credentials or experience are found for this individual, who will also play an important role in the program. Will this person be 100% dedicated to the proposed program? Is there a plan to hire an additional administrative support personnel if needed (which could happen, depending upon rate of program expansion and community interest)?

III. Students

9. Comment on the **student population the program seeks to serve**, and assess plans and projections for student recruitment and enrollment.

Students are anticipated to be part time (though full-time study is possible). Enrollment projections are to begin with 15 students the first year, increasing annually, for the first three years of program delivery, and then plateauing during years four and five, with 67-72 students planned. The university has a diverse student body, with 55% undergraduate students identifying as minority individuals, consistently for the past 4 years. It is anticipated that most students will be from the Capital Region and Upstate New York, although online delivery will make it possible for students to be located anywhere inside or outside of the U.S. The university's longstanding and deep-rooted commitment to diversity, and its current student demographics suggest that students in the planned program will be diverse. State/nationwide proportions of women and men in nursing indicate that most students will be female. The program is a response, in part, to need for community public health nurses in the state. However, it might be prudent to have a strategy for retaining, and specifically practicum placements and preceptors, for students who might be attracted to this program from throughout the U.S., particularly if the need to recruit students beyond the state becomes necessary to achieve the desired enrollments.

10. What are the prospects that recruitment efforts and admissions criteria will supply **a sufficient pool of highly qualified applicants and enrollees**?

No public nursing program options currently exist in the capital region. Thus, there is likely to be demand for the program. Qualified candidates for admission will need to have completed a college level statistics course; have a BS in nursing or a pending BSN from an accredited institution (with BSN completion prior to matriculation); and have an unrestricted license in their state of practice. These admission requirements are comparable to those of any typical MSN program. Deliberative and strategic recruitment and retention will be critical to the success and longevity of the program. With the nationwide nursing shortage projected to continue through 2030, there will be arguably fewer candidates for admission and possibly greater competition to attract students to a program. Easily accessible program information, a sound recruitment plan, and resources such as scholarship support will be important steps in attracting and retaining highly qualified applicants.

11. Comment on provisions for encouraging participation of **persons from underrepresented groups**. Is there adequate attention to the needs of part-time, minority, or disadvantaged students?

*A strength of the institution is its attention to diversity and recognition of the value of diverse perspectives and approaches across all disciplines. Because the proportion of university undergraduate student population who identify as an ethnic minority, 55%, exceeds that of White college students, 45.7%[1], it is likely that a substantial proportion of enrollees will be individuals from underrepresented groups. Vulnerable communities (which might include underrepresented groups) are likely to be more accessible and more responsive to a community public health nurse who they see as "like them" and trust. Strategies for specifically attracting **and** retaining students from underrepresented groups will be critical. It might enhance likelihood of drawing in and retaining non-White and other underrepresented students if there were a strategic plan for mentoring, identifying students as soon as*

they might begin to experience challenges, and providing them with available supports (e.g. the writing center, counseling center, financial aid, etc.).

12. Assess the system for monitoring **students' progress and performance** and for **advising students** regarding academic and career matters.

The university requirement for mandatory advisement of all students is an important component of monitoring their progress and early identification of any issues. Similar to most programs, student advising will be done by faculty, who will be assigned to each student upon matriculation. It might be helpful to develop a guide or handout to help faculty provide quality advising for a program that will be new to them and students, so they can provide timely and accurate information and guidance to students. This resource might facilitate more thorough advising on the part of less experienced faculty advisors. There are plans for students' academic standing to be reviewed at the end of each term and students falling below the standards necessary for graduation will be prompted to develop an action plan with their advisor. Again, a resource guide would probably be useful to ensure timely and consistent support resource access when such instances arise.

13. Discuss prospects for graduates' post-completion success, whether **employment, job advancement, future study, or other outcomes related to the program's goals.**

The Bureau of Labor Statistics projects 13% growth in the field of Community Health workers, including nurses, in the next 10 years, which is faster than the average for all occupations.[2] This estimate, coupled with the continuing nursing shortage, suggests great need for advance practice community health nurses such as graduates from the proposed program. Moreover, New York is the state with the highest employment level in community health workers, suggesting ample job opportunities for graduates.[2] Strong community support and limited currently available services/providers further substantiate need for the program and suggest graduates will be successful (and much-needed) throughout the state.

IV. Resources

14. Comment on the adequacy of physical **resources** and **facilities**, e.g., library, computer, and laboratory facilities; practica and internship sites or other experiential learning opportunities, such as co-ops or service learning; and support services for the program, including use of resources outside the institution.

Institution resources area particular strength; three libraries are housed within the university, with an extensive collection and access via multiple databases. Technology resources include Blackboard learning management system, which affords a variety of applications. A Blackboard community exists specifically for distance education students, allowing for peer support and sharing of information. A dedicated instructional designer is available to support faculty in delivery of high-quality online education. Even more importantly, a wealth of collaborations exists throughout the state. Long term partnerships with New York State Department of Health, Wadsworth Laboratories, and numerous clinical sites statewide are a tremendous asset, as practicum sites are increasingly difficulty to come by, and students may even secure employment as Community Health Nurses at these sites upon graduation.

15. What is the **institution's commitment** to the program as demonstrated by the operating budget, faculty salaries, the number of faculty lines relative to student numbers and workload, and discussions about administrative support with faculty and administrators?

Ample financial support is budgeted for library resources, recruitment and retention, accreditation, annual operations, and equipment costs. Depending upon course evaluations, student retention/outcomes, and program growth, especially during the first few years, it may be necessary to reconfigure faculty distribution, with faculty teaching multiple courses, rather than just one course per faculty member, for consistency throughout the program. Additional faculty could be needed beyond the adjunct nursing lecturer and nursing clinical coordinator. Or, redistributing tasks, and shifting preceptor/ site procurement, and maintaining academic affiliation agreements, to another individual might be warranted. If the program grows as projected, then these responsibilities will likely become more involved and consume even more time and energy from the Clinical Coordinator, who is already teaching three courses.

V. Summary Comments and Additional Observations

16. Summarize the **major strengths and weaknesses** of the program as proposed with particular attention to feasibility of implementation and appropriateness of objectives for the degree offered.

Extensive network of collaborating partners and sites is a tremendous strength; these critical elements of any nursing program are increasingly hard to come by. Given the need for Community and Public health nurses, particularly at the masters level, and in light of the nursing shortage, it seems plausible that graduates could find employment with their practicum sites, as sometimes occurs. The deep, longstanding collaborative relationship between the nursing and public health programs is another outstanding feature. This well-established working relationship exemplifies interprofessional collaboration for students, who will be involved in similar collaborative relationships as future Community and Public Health nurses. Core nursing courses are thoughtfully well-developed, with excellent inclusion of theory application in the clinical setting. Not necessarily a weakness, but a concern is the limited representation of nursing faculty within the program. The Director of the MSN program will split her dedicated time between two programs once the Nursing BS is registered, and the adjunct (who is to be hired, and will therefore have a learning curve as he or she orients to the University and program) will be responsible for three core courses in the new program. The Clinical Coordinator will be responsible for three practicum courses in addition to maintaining relationships with community agencies serving as practicum sites, communicating with preceptors, and monitoring student compliance and affiliation agreement documentation. Theses tasks seem like a heavy lift for key individuals who will be vital to program success. Furthermore, as the program grows, their workloads will likely become heavier, so it might be useful to anticipate need for additional faculty support/lines.

17. If applicable, particularly for graduate programs, comment on the ways that this program will make a **unique contribution** to the field, and its likelihood of achieving State, regional and/or national **prominence**.

Incorporation of interdisciplinary faculty and courses throughout the program are a notable and particularly strong feature. This program goes beyond simply adding in a few courses from an epidemiology nr community health perspective, to identify as a Population Health Nursing MSN. Courses across various disciplines are integrated throughout the program, building upon the distinct approaches to community or public health that each has. Thorough integration of multiple disciplines and the extensive community agency partners who support the program and serve as clinical/ preceptor sites are particularly unique features. In my own institution, our local health care system will now only allow MSN students to work with preceptors and sites within it, if the students are currently employed there and there is a fee for each student. These requirements only intensify the challenge of finding sites and preceptors. If the proposed program were to market their statewide collaborative partners and the wonderful support available for students, the program would likely grow, partly due to these features alone. Program growth and increasing numbers of skilled master's prepared community/public health graduates could be an important part of the solution to service/care access of vulnerable communities and populations locally and nationwide. Word of mouth and growing numbers of alumni serving diverse communities would contribute to local and national prominence of the program.

18. Include any **further observations** important to the evaluation of this program proposal and provide any **recommendations** for the proposed program.

The proposed program will likely have great impact on much-needed service and care delivery for communities across the state, and arguably, the nation. It seems to have been carefully planned and with a well-established foundation of support.

SUNY The State University of New York

External Reviewer Conflict of Interest Statement

I am providing an external review of the application submitted to the State University of New York by:

State University of New York at Albany
_____
(Name of Institution or Applicant)

The application is for (circle A **or** B below)

A) New Degree Authority

B) Registration of a new academic program by an existing institution of higher education:
MS in Population Health Nursing
_____
(Title of Proposed Program)

I affirm that I:

1. am not a present or former employee, student, member of the governing board, owner or shareholder of, or consultant to the institution that is seeking approval for the proposed program or the entity seeking approval for new degree authority, and that I did not consult on, or help to develop, the application;

2. am not a spouse, parent, child, or sibling of any of the individuals listed above;

3. am not seeking or being sought for employment or other relationship with the institution/entity submitting the application?

4. do not have now, nor have had in the past, a relationship with the institution/entity submitting the application that might compromise my objectivity.

Name of External Reviewer (please print):

Meredith Troutman-Jordan
_____

Signature:

Meredith Troutman-Jordan
_____

Appendix 7 Institutional Response to External Evaluation

School of Public Health

A joint venture with the
New York State Department of Health
In affiliation with Albany Medical College

Institutional Response to the MS in Population Health Nursing Program Review

February 2022

The comments and suggestions received from the reviewers were informative and very helpful. Overall the program review was a very productive and positive experience and exchange of information and ideas. Below are the responses to the reviewers' comments and suggestions.

<u>Reviewer #1 (Meredith Troutman-Jordan)</u>

Comment (Q1):
"A crucial team member will be the Nursing Clinical Coordinator, who is identified as full time, yet listed as a part time faculty in the proposal."

Response:
The faculty table shared with the reviewers contained an error listing this position as part time, but the description and intention is for the position to be full time.

Comment (Q1):
"The majority of faculty supporting the program will be disciplines other than nursing. While this is a great opportunity for interprofessional education, there could be some limitations with having only three identified nursing faculty (director, adjunct lecturer, and clinical coordinator)."

Response:
The proposed program will be established along with a BS in Nursing completion program, and additional nursing faculty will be hired as part of that program. Therefore, the total number of nursing faculty that students will have access to is larger than what is described in this proposal. In addition, this proposal describes the faculty complement that will be needed to support the program during its initial years; as enrollment grows, additional faculty will be added to support the needs of the program.

Comment (Q1):
"Students may be located throughout the state and though there is ample support and resources available for preceptors and clinical sites, students may need considerable guidance in contacting and securing preceptors, sites, and completing all paperwork and permissions typically associated with clinical placements. The Public Health program director will support the Clinical Coordinator; however, to maintain teaching responsibilities for three courses, as well as ensuring and navigating communication, tracking, and maintaining current academic affiliation documents, it could be possible to that additional manpower is needed to help the Clinical Coordinator in these functions."

Response:
A full-time faculty member (originally described as the Clinical Coordinator, but renamed in the proposal based on feedback from reviewers) will be responsible for assisting students with securing clinical sites and preceptors, overseeing the administrative aspects of setting up placements, and teaching the courses that have clinical components. This administrative work will be an explicit part of this job description, and experience and ability to conduct this work will be part of the hiring process. The administrative assistant supporting the program will provide extensive support to this person to complete the administrative tasks related to setting up clinical placements.

"Evaluation of course delivery will be done ongoing, as faculty meet to discuss course delivery, student completion, etc. at the end of each semester. If there is not a formal plan for these evaluations, having an end of course report for each course could be useful. This would ensure uniform collection of complete data, and could be compiled to inform annual evaluations that the School of Public Health Administration plan to do, and to prepare for CCNE accreditation."

Response:
All nursing courses will be evaluated using the Student Instructional Rating Form (SIRF) evaluation system used throughout the University at Albany, and the Nursing Program Director will be responsible for reviewing data from these evaluations each semester.

Comment (Q3):
"The program will likely prepare for these [accreditation] reviews by collecting and evaluating data from its inception, including course evaluations, and end of course reports that faculty complete. It might be helpful to have an established action plan that can be implemented as soon as any issues are identified; if a problem is recognized through student course evaluations, what steps will be taken?"

Response:
The Nursing Program Director will be responsible for reviewing data from course evaluations each semester, and will work with the Associate Dean for Academic Affairs and the Dean to address any issues that are identified.

Comment (Q6):
"However, most of the full-time faculty will only be responsible for one course within the curriculum. Broad distribution of courses across a number of faculty could pose the risk of fragmented instruction, with each course associated with a different instructor. As the part-time nursing faculty have not been hired, their experience cannot be evaluated. Individuals with clinical and teaching expertise in theory, research, health policy (adjunct) and public/population health nursing (clinical coordinator) will be needed."

Response:
It is not correct that most full-time faculty members will only teach one course. The Program Director will teach two courses (one per semester) and the full-time faculty member with clinical responsibilities will teach the three courses with clinical components. That leaves just one course to be taught each year by an adjunct lecturer. Care will be taken to have the courses taught by the same individuals each year to maximize consistency. We plan to recruit faculty with the necessary backgrounds/expertise in theory, research, health policy, and public/population health to match the courses they will be responsible for teaching.

Comment (Q7):
"The program seems lean in terms of nursing faculty, which is a bit of a concern, as it is an MSN program. The Program Director's leadership and having an adjunct lecturer and clinical coordinator who are experienced, strong communicators with creative problem-solving skills will be important to the success of the program. Retention of a consistent adjunct lecturer teaching the three nursing courses planned will also be vital. It would be helpful to have further detail about what plans there are for tracking faculty performance outcomes and indicators of any change needed (e.g. hiring additional faculty, revising roles, etc.). How and when will workload feasibility to evaluated? At what point will might there need to be a redistribution of workloads or task distribution, based on program growth and outcomes?"

Response:
The Program Director will review teaching evaluations and Faculty Activity Reports annually, and discuss program needs and workload distribution with the Dean annually. Based on these annual assessments, requests for additional faculty and/or support staff will be made of the Provost as needed, as part of the School's annual budget request for new positions.

Comment (Q8):
"One adjunct lecturer will be hired. This individual will be responsible for three core nursing courses, foundational to the program, HNSG 550, HNSG 512, and HNSG 514. Desired/required credentials for this individual are not found within the proposal. Educational preparation and credentials/experience of this individual seem vital to program success, as these are new courses and central to the program. The plan could be strengthened if minimum credentials were specified, and included doctoral preparation and training/experience in community public health nursing."

Response:
The adjunct lecturer will only teach one course per year, and it will be either HNSG 550, HNSG 512 or HNSG 514, depending on the expertise of the adjunct lecturer hired. Minimum credentials for adjunct lecturers include doctoral preparation, training/experience in community public health nursing, and previous teaching experience. The proposal has been revised to reflect this.

Comment (Q8):
"Plans are for a PhD-trained Clinical Coordinator to teach three 5-credit nursing courses, HNSG 600, HNSG 610, and HNSG 650. It is not clear whether this individual must be a nurse and/or what the doctoral degree can be in. Like the role and work expectations for the adjunct faculty, having an experienced solution-oriented faculty member with strong problem-solving and communication skills in this role will be critical."

Response:
The Clinical Coordinator position will be a 12-month full-time faculty position, with associated administrative responsibilities for overseeing clinical placements. The title of this position has been changed in both the proposal and job description to indicate that this is a faculty position which includes clinical placement responsibilities, and that minimum credentials for this position include doctoral-level preparation in nursing, education and/or experience in community public health nursing, and administrative skills. We agree that this position is critical to the success of the program, and will seek "an experienced solution-oriented faculty member with strong problem-solving and communication skills."

Comment (Q8):
"**Supporting students in the securing of practicum sites and preceptors can be a major task, that requires coordination, planning and time-management skills. One Administrative Assistant will provide support to the Program Director, faculty, students, serve as initial contact for potential students, and be responsible for student recruitment (along with the Graduate School). No minimum required credentials or experience are found for this individual, who will also play an important role in the program. Will this person be 100% dedicated to the proposed program? Is there a plan to hire an additional administrative support personnel if needed (which could happen, depending upon rate of program expansion and community interest)?"**

Response:
The administrative assistant will be dedicated 100% to nursing programs, which include the proposed MS program and a BS completion program currently in the approval process as well. Administrative support for the program will also be available to the program from other School of Public Health administrative

staff who currently provide administrative support across the school for such things as admissions, online education, and fiscal management. If the program expands such that the proposed administrative support is not sufficient, requests for additional administrative staff positions will be made to the Provost as needed.

Comment (Q9):
It might be prudent to have a strategy for retaining, and specifically practicum placements and preceptors, for students who might be attracted to this program from throughout the U.S., particularly if the need to recruit students beyond the state becomes necessary to achieve the desired enrollments.

Response:
It is anticipated that out-of-state enrollment will be low, especially during the initial years of the program. However, as each clinical placement will be set up individually with each student, the faculty member responsible for the clinical courses and associated placements will work individually with each student, whether they are local or at a geographic distance, to set up placements convenient to them.

Comment (Q10):
Deliberative and strategic recruitment and retention will be critical to the success and longevity of the program.

Response:
We understand that nursing programs require deliberative and strategic recruitment, and plan to engage in active and substantial recruitment through in-person relationships and communications with programs and venues likely to yield prospective students. In addition, the relatively small size of the proposed program will allow students and faculty to be well-engaged with one another, despite the online format of the program, which will help with student retention.

Comment (Q11):
Vulnerable communities (which might include underrepresented groups) are likely to be more accessible and more responsive to a community public health nurse who they see as "like them" and trust. Strategies for specifically attracting and retaining students from underrepresented groups will be critical. It might enhance likelihood of drawing in and retaining non-White and other underrepresented students if there were a strategic plan for mentoring, identifying students as soon as they might begin to experience challenges, and providing them with available supports (e.g. the writing center, counseling center, financial aid, etc.).

Response:
A priority will be to enroll and support students from underrepresented groups. The University at Albany and the School of Public Health has an excellent track record in this regard, in both undergraduate programs and our MPH degree program, and we will build on the successful strategies from these programs. In addition, the university has strong supports for students that these nursing students will have access to. The School of Public Health is in the process of developing a mentoring program for doctoral students in underrepresented groups, and the plan is to expand this program to other student populations once it is established.

Comment (Q12):
It might be helpful to develop a guide or handout to help faculty provide quality advising for a program that will be new to them and students, so they can provide timely and accurate information and guidance to students. This resource might facilitate more thorough advising on the part of less experienced faculty advisors. There are plans for students' academic standing to be

reviewed at the end of each term and students falling below the standards necessary for graduation will be prompted to develop an action plan with their advisor. Again, a resource guide would probably be useful to ensure timely and consistent support resource access when such instances arise.

Response:
An advising handbook will be developed for faculty advisors. In addition, a student handbook will be developed for this program, as there is for every other program at the School of Public Health, which will contain a resource guide for students.

Comment (Q15):
Additional faculty could be needed beyond the adjunct nursing lecturer and nursing clinical coordinator. Or, redistributing tasks, and shifting preceptor/ site procurement, and maintaining academic affiliation agreements, to another individual might be warranted. If the program grows as projected, then these responsibilities will likely become more involved and consume even more time and energy from the Clinical Coordinator, who is already teaching three courses.

Response:
As the program is established and grows, the Program Director will assess workload and distribution of responsibilities, and adjustments will be made as necessary.

Comment (Q16):
Not necessarily a weakness, but a concern is the limited representation of nursing faculty within the program. The Director of the MSN program will split her dedicated time between two programs once the Nursing BS is registered, and the adjunct (who is to be hired, and will therefore have a learning curve as he or she orients to the University and program) will be responsible for three core courses in the new program. The Clinical Coordinator will be responsible for three practicum courses in addition to maintaining relationships with community agencies serving as practicum sites, communicating with preceptors, and monitoring student compliance and affiliation agreement documentation. These tasks seem like a heavy lift for key individuals who will be vital to program success. Furthermore, as the program grows, their workloads will likely become heavier, so it might be useful to anticipate need for additional faculty support/lines.

Response:
As the program grows, additional faculty lines will be requested from the Provost to support the program.

<u>Reviewer #2 (Allison Davis)</u>

Comment (Q16):
"There were very few weaknesses found in this proposal. Because this is a new nursing program, there are no current advanced practice public health nurses on the faculty. However, the program development team are committed to ensure that the students of the new program will have advanced practice public health nurses to serve as role models and mentors."

Response:
When the program is established, the faculty will include advanced practice public health nurses. The full-time faculty member with clinical placement responsibilities will be required to have experience in advanced practice public health nursing. A desired qualification for the adjunct lecturer that will teach one of the nursing core courses will also be experience in advanced practice public health nursing.

University at Albany
New Program Proposal
Population Health Nursing MS

Appendix 8 Distance Education Proposal

Distance Education Format Proposal
For A Proposed or Registered Program
Form 4
Version 2014-11-17

When a new or existing program is designed for a [distance education format](), a campus Chief Executive Officer or Chief Academic Officer should submit a signed cover letter and this completed form to the SUNY Provost at *program.review@suny.edu*. According to MSCHE, the 50% standard includes only courses offered in their entirety via distance education, not courses utilizing mixed delivery methods. Also, MSCHE requires that the first two programs for which 50% or more is offered through distance education be submitted for Commission review and prior approval of a substantive change.

- All campuses must complete the following sections: Sections 1 - 3, and Part B: Program Specific Issues.

- Part A must be completed if the proposing campus has not previously submitted this form with a completed Part A: Institution-wide Issues, or has made significant changes to its institution-wide distance education operations since last completing Part A. This applies even if the institution has programs registered to be delivered at a distance.

Section 1. General Information		
a) **Institutional Information**	Institution's 6-digit SED Code:	210500
	Institution's Name:	**University at Albany**
	Address:	**1400 Washington Avenue, Albany, NY 12222**
b) **Registered or Proposed Program**	Program Title:	Population Health Nursing
	SED Program Code	
	Award(s) (e.g., A.A., B.S.):	MS
	Number of Required Credits:	Minimum [42] If tracks or options, largest minimum [42]
	HEGIS Code:	1203.10
	CIP 2010 Code:	51.3811
c) **Distance Education Contact**	Name and title: Colleen Davis, Assistant Dean of the Graduate School Telephone: (518) 437-5063 E-mail: cdavis@albany.edu	
d) **Chief Executive or Chief Academic Officer Approval**	**Signature affirms that the proposal has met all applicable campus administrative and shared governance procedures for consultation, and the institution's commitment to support the proposed program.** *E-signatures are acceptable.* Name and title: Carol H. Kim, Provost and Senior Vice President for Academic Affairs Signature and date: 6/27/2022	
	If the program will be registered jointly[1] with one or more other institutions, provide the following information for each institution:	
	Partner institution's name and 6-digit SED Code:	
	Name, title, and signature of partner institution's CEO (or **append** a signed letter indicating approval of this proposal):	

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[1] If the partner institution is non-degree-granting, see SED's CEO Memo 94-04.

Year	Anticipated Headcount Enrollment			Estimated FTE
	Full-time	Part-time	Total	
1		15	15	7.5
2	1	34	35	18
3	3	57	60	31.5
4	5	67	72	38.5
5	8	72	80	44

Section 3: Program Information

a) **Term length** (in weeks) for the distance program: 15

b) Is this the same as term length for classroom program? [ ] No [X] Yes

c) How much "**instructional time**" is required per week per credit for a distance course in this program? (Do not include time spent on activities that would be done outside "class time," such as research, writing assignments, or chat rooms.)   **NOTE:** *See SUNY policy on credit/contact hours and SED guidance.*

   The instructional time required for online classes is one hour per credit, per week. The courses are designed to be equivalent to face to face classes in terms of instructional time and total material covered, following SED guidelines of 150 minutes/week for 15 weeks for a 3 credit course..

d) What proportion or percentage of the program will be offered in Distance Education format? Will students be able to complete 100 percent of the program online? If not, what proportion will be able to be completed online?

   100% of the program's courses will be online. A 480 hour in person clinical component is required and arranged on an individual student basis.

e) What is the maximum number of students who would be enrolled in an online course section?

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Part A: Institution-wide Issues: Submit Part A only for the **first** Distance Education program proposed by your institution using this form. SUNY and the State Education Department will keep this in a master file so that your institution will not need to resubmit it for each new proposed online program, **unless there are significant changes, such as a new platform**. NA

Part A.1. Organizational Commitment

a) Describe your institution's planning process for Distance Education, including how the need for distance access was identified, the nature and size of the intended audiences, and the provisions for serving those audiences, including how each student's identity will be verified.

b) Describe your institution's resources for distance learning programs and its student and technical support services to ensure their effectiveness. What course management system does your institution use?

c) Describe how the institution trains faculty and supports them in developing and teaching online courses, including the pedagogical and communication strategies to function effectively. Describe the qualifications of those who train and/or assist faculty, or are otherwise responsible for online education.

d) If your institution uses courses or academic support services from ***another provider***, describe the process used (with faculty participation) to evaluate their quality, academic rigor, and suitability for the award of college credit and a degree or certificate.

e) Does your institution have a clear ***policy on ownership of course materials*** developed for its distance education courses? How is this policy shared with faculty and staff? ***NOTE:*** *You may refer to [SUNY's statement on copyright and faculty ownership of instructional content](#), and/or faculty contract provisions.*

Part A.2. Learner Support

a) Describe how your institution provides distance students with ***clear information*** on:
- Program completion requirements
- The nature of the learning experience
- Any specific student background, knowledge, or technical skills needed
- Expectations of student participation and learning
- The nature of interactions among faculty and students in the courses.
- Any technical equipment or software required or recommended.

b) Describe how your institution provides distance learners with adequate ***academic and administrative support***, including academic advisement, technical support, library and information services, and other student support services normally available on campus. Do program materials clearly define how students can access these support services?

c) Describe how ***administrative processes*** such as admissions and registration are made available to distance students, and how program materials inform students how to access these services.

d) What ***orientation*** opportunities and resources are available for students of distance learning?

Part B: Program-Specific Issues: Submit Part B for <u>each new request</u> to add Distance Education Format to a proposed or registered program.

Part B.1. Learning Design

a) How does your institution ensure that the ***same academic standards and requirements*** are applied to the program on campus and through distance learning? If the curriculum in the Distance Education program differs from that of the on-ground program, please identify the differences.

The program and its courses are only offered online. The distance learning requirements for the Master of Population Health Nursing program classes are incorporated into template/syllabi. All of the classes are identified in the course syllabi and calendar as distance learning and only offered as online courses.

The review and approvals process for course development and modification follow the same procedure whether the course is offered on-campus or online, which includes review and approval through the departmental, school, and university academic committees, as well as administrative heads of all units, where appropriate.

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(b)   Are the courses that make up the distance learning program offered in a sequence or configuration that allows *timely completion of requirements*?

Courses will be offered on a regular basis and at least one time per year. Students are advised to follow a recommended plan of study to ensure timely completion of requirements.

b)   How do faculty and others ensure that ***the technological tools*** used in the program are appropriate for the content and intended learning outcomes?

Technological tools used in the courses are standard instructional tools. Students will need access to a computer and Internet. All courses are delivered via BlackBoard, which is the University-supported Learning Management System. This platform is updated regularly and enables video, student discussion and collaboration, weblinks, and many other resources.

The University at Albany offers comprehensive training, consultation and other resources to assist faculty in developing and reviewing the structure of online courses, including use of appropriate technology to support course goals and student learning outcomes.

c)   How does the program provide for appropriate and flexible interaction between faculty and students, and among students?

Courses and office hours are online and organized by the instructor. Interaction is enhanced via BlackBoard tools such as discussion boards and course messaging. Faculty can be reached via telephone, e-mail and in-person. In addition, webinar technology is available for faculty use for office hours, review sessions, etc.

d)   How do faculty teaching online courses verify that the student who registers in a distance education course or program is the same student who participates in and completes the course or program and receives the academic credit?

The University at Albany utilizes two layers of authorization and authentication for students who participate in online learning. Students are required to establish an account and to log in to the University password protected domain using the NETID protocol and must also log into the BLS Learning Management System using their university credentials. Blackboard also uses Safe Assign as a tool to monitor the completion of certain tasks within the LMS environment.

Part B.2. Outcomes and Assessment

a)   Distance learning programs are expected to produce the ***same learning outcomes*** as comparable classroom-based programs. How are these learning outcomes identified – in terms of knowledge, skills, or credentials – in course and program materials?

Each course has a syllabus with course goals, content focus, readings, and assignments. Learning objectives are assessed through assignments, class participation, papers, and other activities. The assignments for these classes help the student meet the student learning outcomes

b)   Describe how the ***means chosen for assessing student learning*** in this program are appropriate to the content, learning design, technologies, and characteristics of the learners.

All the courses have assessments based on the program student learning outcomes. The assessments are specific to the course goals and may involve video analysis, discussion, essay response, written reflection, group work around an assignment and video presentations. These activities are aligned with the student learning objectives for the course and program

a) What process is in place to monitor and ***evaluate the effectiveness*** of this particular distance education program on a regular basis?

   Annual evaluations will be performed among School of Public Health administration to include a review of student census, graduation rates, course grades and student evaluations of each course to determine whether they are effectively meeting the needs of the students and changing dynamics of the field. Student satisfaction surveys will also be administered. Evaluation methods for each course are based on the student learning outcomes. The periodic assessment and length of assessment cycle is based on SUNY standards and accreditation standards of the Commission of Colligate Nursing Education (CCNE) nursing programs.

b) How will the evaluation results will be used for ***continuous program improvement***?

   Annual course evaluation results are used and the results are communicated back to the Director and the faculty member to make changes and modify the curriculum. These regular assessments will guide continuous program improvement through identification of strengths and areas for improvement pertaining to student recruitment, enrollment and retention, program completion, and student satisfaction with individual courses as well as the program as a whole. Action will be undertaken by appropriate School contacts to address identified issues and concerns.

c) How will the evaluation process assure that the ***program results in learning outcomes appropriate to the rigor and breadth*** of the college degree or certificate awarded?

   The Master in Population Nursing evaluation assesses the courses to meet university requirements for rigor and breadth required for coursework, including credits, format, and assignments needed for a master's degree. In addition, the evaluation processes assure that the program meets the accreditation standards for CCNE.

Part B.4. Students Residing Outside New York State

SUNY programs must comply with all "authorization to operate" regulations that are in place in other U.S. states where the institution has enrolled students or is otherwise active, based on each state's definitions.

a) What processes are in place to monitor the U.S. state of residency of students enrolled in any distance education course in this program while residing in their home state?

   The University is a member of the National Council for State Authorization Reciprocity Agreement (NC-SARA). This is a voluntary agreement among member states and U.S. territories that establishes comparable national standards for interstate offering of postsecondary distance-education courses and programs. As a member institution, the University is approved to offer distance education courses to students outside of New York.

   There will regular querying so that we can identify any out of state students who participate from their home state. This information will be provided to a University at Albany Committee composed of the Director of Enrollment Management, the Registrar, Registrar staff, the Associate Provost for Online Learning and invited Program Directors that review and monitor the residency of enrolled students in distance education programs. Records of the evolving federal and state authorization regulations are also monitored by this group. Through this committee discussions and inquiries regarding state authorization approvals have been initiated with all of the fifty states and more detailed inquiries are made in cases where non-resident students are identified enrolled in online courses.

b) Federal regulations require institutions delivering courses by distance education to provide students or prospective students with contact information for filing complaints with the state approval or licensing entity in the student's state of residency and any other relevant state official or agency that would appropriately handle a student's

complaint. What is the URL on your institution's website where contact information for filing complaints for students in this program is posted?

The University at Albany link for complaints is: http://www.albany.edu/ir/rtk/