



**Academic Review Committee
Request Form: New Program**

ARC Use Only:
 ARC #: _____
 Program ID: _____
 Status: _____
(A=Approved, I=Information Item, R=Returned)
 Date rec'vd by ARC: _____

Please submit the ORIGINAL of this request form and supporting documents (along with an electronic version) to your unit ARC representative, who will deliver them to the Academic Review Committee.

SECTION A: Program Information

Program Title: *Expansion of MSN program - 2 NEW TRACKS (FNP, NURSE ADMINISTRATOR)*
 Originator(s) of the Proposal: *K BURKE*
 Proposal Date: *2/15*
 School(s): *TAS* Convening Group(s): *NURSING*

Please attach a description of the proposed program, and all supporting documentation including the Provost's pre-approval.

SECTION B: Approvals

Reviewed and Approved by:

Title	Print name	Sign	Date
Convener (if a convening group exists)	<i>K BURKE</i>	<i>[Signature]</i>	<i>10/5/15</i>
Graduate Council Chair	<i>B Chinn</i>	<i>[Signature]</i>	<i>10/27/15</i>
School Curriculum Committee chair	<i>G E PATTERSON</i>	<i>[Signature]</i>	<i>10/15/15</i>
Dean	<i>E SAIFF</i>	<i>[Signature]</i>	<i>5 OCT 15</i>

ARC Disposition:

- Information item only - no ARC approval necessary¹
- ARC recommends approval by the Faculty Assembly
- ARC does NOT recommend approval by the Faculty Assembly

ARC Chair: _____ Date: _____
print & sign

The ARC recommends the following:

Office of the Provost Use Only:

Approved Not Approved Provost Signature _____ Date: _____

¹ Only applies to non-credit-bearing certificate programs

Checklist: Proposals for New Programs

Submit the following items along with this checklist. If an item is subject to approval in *only* one phase (feasibility or curricular), that information is indicated in parentheses. If an item applies *only* to a particular type of program, that information is also indicated in parentheses. Certificates developed by or affiliated with CIPL use CIPL's forms and items, but if they are credit-bearing certificates they will also need an ARC form.

1. Feasibility Phase:

- Program proposal
 - Program summary, objectives, and cooperative arrangements (if any)
 - Program's impact on the College's other programs, including the undergraduate curriculum if the proposed program is a graduate program
 - Program's need
 - If the program is in the liberal arts/sciences, indicate student demand and opportunities for further education if appropriate; if the program is career-oriented/professional, indicate student demand and labor market need, provide employer surveys, and describe opportunities for employment and advanced/additional study.
 - Alignment with the Strategic Plan
 - Comparison with similar programs in the State and neighboring states
 - Program's anticipated enrollment from launch to optimal level
 - Additional resources needed for the first five years
- Program budget (graduate program only)

Feasibility approval: Provost's signature: Bette Baruff Date: 06 Oct 2015

Upon approval by the Provost of the Feasibility Phase, include this signed form with the package for the Curricular Phase. Ensure all materials included in the Feasibility Phase are also included.

2. Curricular Phase

- Program proposal form with all signatures
- Program proposal –documents required in addition to those provided in the Feasibility Phase
 - Program assessment
 - learning goals/outcomes
 - direct and indirect measures
 - assessment process
 - alignment of program outcomes to all-college goals/outcomes (undergraduate programs only)
 - alignment of program outcomes to program courses
 - Program's relationship to:
 - College's mission (check those that apply)

<input checked="" type="checkbox"/> Interdisciplinary learning	<input type="checkbox"/> Diversity/Inclusiveness
<input checked="" type="checkbox"/> Experiential learning	<input type="checkbox"/> Sustainability
<input type="checkbox"/> International understanding	<input type="checkbox"/> Student engagement
<input type="checkbox"/> Intercultural understanding	<input type="checkbox"/> Community involvement
 - College's Strategic Plan
 - School's mission and/or goals
 - Degree requirements
 - Course titles, descriptions, and credits
 - Course sequencing
 - Distinction between required and elective courses
 - Number of credits for the entire program, including general education (undergraduate program only)
- Consultant's CV (for state review only) (majors and graduate programs only)

Curricular phase: Materials (checklist, ARC form, all proposal documents) received by ARC: _____ (date)

Proposal for additional MSN focus areas.

Presently, the MSN program has one track with a focus on nursing education. This program was developed at the time that the program was part of UMDNJ, which had numerous other MSN programs. The faculty proposes two new tracks in the existing MSN degree: 1) nursing administration/health care administration focus; and 2) Family Nurse Practitioner focus.

Identification of need

In 2010, the Institute of Medicine (IOM) released a report entitled *The Future of Nursing: Leading Change, Advancing Health*, which recommended that nurses play a critical role in responding to the demands expected to result from the ACA and other forces (e.g., the aging of the U.S. population).

Half of the 20 U.S. occupations projected to grow the fastest over the next few years are in the health services fields. Employment in healthcare administration is expected to grow fastest in practitioners' offices and in services for home healthcare. The job outlook for healthcare administrators is strong, with the federal Bureau of Labor Statistics (BLS) projecting 22% growth nationally in the profession from 2010 to 2020, well above the 14% average for all occupations. As noted by the BLS, more nurses and physicians will be needed to care for an aging U.S. population. Consequently, more healthcare administrators will be needed to manage the increasing number of healthcare professionals and facilities

With the full implementation of the Patient Protection and Affordable Care Act (ACA), there have been major concerns about the looming primary care provider shortage. One of the most notable changes predicted to occur is a shortage of physicians and a rapid growth of nurse practitioners. According to The Association of American Medical Colleges, the U.S. will see a shortage of 62,100 physicians by 2015. At the same time, a study by *Medical Care* estimates that nurse practitioner jobs will rise 94 percent by 2025. With 15 million people expected to secure health coverage in 2014, the role of nurse practitioners is expected to expand “particularly in the area of primary care services.

Those nurses with a primary care background will be more apt to find jobs compared to those who work in specialized areas such as oncology. Due to financial pressure on hospitals to discharge patients as soon as possible, there will be a greater demand in outpatient care centers rather than in hospitals. This change has already started to shift. In 2011, according to a salary report conducted by Clinical Advisor, 24.7% of nurse practitioners worked in an office, 16.7% in a standalone clinic, 15.7% worked in a clinic inside a hospital, and 14.2% worked in a hospital. Nationally, the number of NPs is projected to nearly double by 2025, according to a recently published RAND study in which the researchers modeled the future growth of NPs. Specifically, the study predicts that the number of trained NPs would increase 94 percent from 128,000 in 2008 to 244,000 in 2025. New Jersey Nurse Practitioners are among the highest paid in the nation, earning a mean annual income of over \$100,000 (Bureau of Labor Statistics, 2014)

To conclude, the demand for nurse practitioners will continue to grow as the need for primary care physicians increases. Other trends nurse practitioners should expect in the future are more services and job openings in outpatient care centers rather than in hospitals and the increased need in academia.

Alignment with Strategic Plan

This expansion of the MSN programs easily aligns with Goal 1 of the Ramapo Strategic Plan: Advance Academic Excellence and Engagement; Graduate enrollment share of the overall headcount will increase to 8%.

Potential Students

Each year, the Ramapo Nursing BSN program graduates approximately 100 students. According to our internal database 25% of these students start graduate study within one to two years of graduation. The majority of these students first call us to see if we have practitioner or administrator tracks. It is the intent of this proposal to draw the students from our own graduate and alumni base. Additionally, we have strong relationships with the local Magnet Hospitals: Valley; HackensackUMC, Holy Name, St Joseph's, Morristown, Jersey City and Englewood. Each of these hospitals has a cadre of staff nurses interested in graduate study.

Other Programs in Local Area

Locally, Felician and Fairleigh Dickinson have FNP programs. Both of these schools are private colleges with a much higher tuition than a state school. Rutgers also has a FNP program, but many of our students do not want to commute to Newark. Other schools include Monmouth University, and The College of New Jersey, neither of which are considered competitors for this group of potential students. Adult Nurse Practitioner programs exist at Seton Hall, William Patterson, Rutgers, Felician, Monmouth, St Peter's, TCNJ and Stockton. The Adult Nurse Practitioner programs have very different requirements than a FNP.

The Administration track exists at Seton Hall and Fairleigh Dickinson, both private universities. It also exists at Rutgers.

Description of new foci

The Family Nurse Practitioner track consists of 47 credits, with 720 clinical hours. This will qualify students to sit for the American Nurses Credentialing Centers' (ANCC) Family Nurse Practitioner Exam. Passage of this exam is necessary for Advance Practice Licensure in the State of NJ.

The Nurse Administrator track consists of 34/35 credits and with a 135 Hour Role Practicum. This will enable the graduate to sit for the Advanced Nurse Administrator (NEA-BC) certification of the ANCC.

Curricular Design for the FNP is based on the *Essentials of Masters' Education in Nursing* (AACN, 2011), APRN Consensus Work Group & National Council of State Boards of Nursing APRN Advisory Committee (2008) *Consensus Model for APRN Regulation: Licensure, Accreditation, Certification & Education*, National Organization of Nurse Practitioner Faculties (2012) *Nurse Practitioner Primary Care Competencies in specialty areas: Family Nurse Practitioner*. AACN (2013) *Population-Focused Nurse Practitioner Competencies*. *The Future of Nursing: Leading Change, Advancing Health* (IOM, 2011)

Curricular design for the Nurse Administrator track is based on *Essentials of Masters' Education in Nursing* (AACN, 2011), *The Organization of Nurse Executives Core Competencies* , *The Future of Nursing: Leading Change, Advancing Health* (IOM, 2011) AONE Nurse Executive Competencies (2011).

The credit load of both programs reflects standard load in programs across the country. Curricular Outcomes for the three MSN tracks are focused on the same constructs as the Baccalaureate curricula. The expected learning outcomes follow.

Construct	Nursing Education (already in place)	Nursing Administration	Family Nurse Practitioner
<i>Knowledge</i>	Draws on extant literature and knowledge to design and implement evidence based teaching/learning and evaluation practices to support global nursing education	Incorporate administration and leadership theories in the design, development, implementation and evaluation of quality nursing health care delivery programs Encompass concepts of fiscal responsibility and human resource management in designing quality care	Applies knowledge of organizational practices and complex systems to improve health care delivery Develops new practice approaches based on the integration of research, theory and practice knowledge
<i>Evidence based research and practice</i>	Contributes to the development of the science of nursing education through the critique, utilization, dissemination of current evidence and	Integrate principles of evidence based practice and current research in the design and implementation of nursing and health care delivery	Uses best available evidence to continually improve quality of clinical practice Provides leadership in

	the conduct of research	programs.	the translation of new knowledge into practice
<i>Information Management</i>	Develop and use information and communication technologies to enter, retrieve, and evaluate data appropriate for the delivery and evaluation of nursing education	Advocate for and use information and communication technologies to enter, retrieve, and evaluate data appropriate for the delivery and evaluation of nursing care delivery	Uses technology systems that capture data on variables for the evaluation of nursing care Contributes to the design of clinical information systems that promote safe, quality and cost effective care
<i>Professionalism</i>	Models professional behavior for learners and fellow faculty Engage in life long learning activities, dissemination of information through scholarship and advocacy Develops networks, collaborations and partnerships to enhance nursing's influence within the academic community	Incorporate ethical principles in leadership and management practices Build leadership alliances for collaborative action, change and decision making across the health care delivery system.	Applies ethically sound solutions to complex issues related to individuals, populations and systems of care Advances practice through the development and implementation of innovations incorporating principles of change
<i>Social Advocacy</i>	Utilize knowledge about the educational environment within they which they practice and recognize how the political, institutional, social and economic forces impact the global educator role.	Influence the health policy making process through the involvement and leadership of nurses having diverse perspectives	Analyzes the implications of health policy across disciplines Contributes to the development of health policy Evaluates the impact of globalization on health care policy

<p><i>Leadership</i></p>	<p>Provides leadership in the parent institution as well as in the nursing program to enhance visibility of nursing and its contribution to the global academic community</p>	<p>Lead in a manner that recognizes the cultural and spiritual context of the health care community and environment</p>	<p>development</p> <p>Assumes leadership to foster collaboration with multiple stakeholders (patients, community and interprofessional groups) to facilitate the development, implementation and evaluation of care provided in complex systems</p>
<p><i>Role Function</i></p>	<p>Participates in interdisciplinary efforts to address health care needs locally, regionally, nationally and internationally</p>	<p>Integrate advanced core competencies and clinical expertise to evaluate and continually improve nursing care delivery systems</p>	<p>Integrate advanced core competencies and clinical expertise to evaluate and continually improve nursing care</p> <p>Provides a full spectrum of health care services to include health promotion, disease prevention, health protection, anticipatory guidance counseling, disease management, palliative and end of life care</p> <p>Provides patient/family centered care recognizing cultural diversity of the family recognizing the patient/family as a full partner in decision making</p>

Courses for MSN

Core Courses (all already exist)

Science and Research 4 credits
(all tracks)

Role Practicum 6 credits
(all tracks)

Advanced Pathophysiology 3 credits
Advanced Health Assessment 4 credits

Advanced Pharmacology 3 credits
(FNP track all courses)
(Nurse Educator track 2 of 3)

Nurse Educator	Nurse Administrator	Nurse Practitioner (FNP)
Science and Research 4	Science and Research 4	Science and Research 4
Two of the three P's 6/7		
Curriculum Development 3	Leadership and Innovation in Health Care 3	Context of Health Care for Advanced Practice 3
Educational Technology 3	Health Care Economics and Finance 3	Advanced Health Assessment 4 (45 hours)
Psychometrics 3	Human Resource Management 3	Advanced Pathophysiology 3
Program Evaluation 3	Quality Improvement in Health Care 3	Advanced Pharmacology 3
Role Practicum 6 (135 hours)	Program Evaluation 3	Primary Care of Adults I 3
Free elective 3/4	Context of Health Care for Advanced Practice 3	Primary Care of Adults Practicum I 3 (135 Hours)
33/34 credits	Strategic Management and Project Development in Health Care Organizations 3	Primary Care of Adults II 3
	Elective 3/4	Primary Care of Adults Practicum II 3 (135 Hours)
	Role Practicum 6 (135 hours)	Primary Care of Adults/Gero III 3

	34/35 credits	Primary Care of Adults/Gero Practicum III 3 (135 hours)
		Family Centered Primary Care 3
		Family Centered Primary Care Practicum 3 (135 hours)
		Role Practicum 6 (135 hours)
		47 credits (675 clinical hours, plus 45 Health Assessment Hours)

Timeline

It is anticipated that the two programs will start in Fall 16. The first graduating class of the Nurse Administrator program will graduate in May 18. The first class of the FNP program will graduate in May 18/19.

Impact on Undergraduate Programs

There is no anticipated impact on the already existing undergraduate programs. Not all undergraduate faculty will be qualified to teach at the MSN level, especially within the FNP tracks. This track will require licensed practicing FNPs. This may result in faculty teaching primarily at the MSN level.

Graduate Admission Goals/Track

It is anticipated that 20 students will be admitted to each track per year. The anticipated retention will be 75%. Given the following sequencing of courses, the additional student credit hours (beyond the nurse educator track) are documented below.

Yellow highlight indicates graduation semester for first cohort admits..

Green highlight indicates number of student credit hours generated from two new tracks, pink indicates annual total from two tracks/semester.

It will take three years for full course sequencing to become standard.

Courses in italics can serve as electives for other tracks.

Outcomes Assessment

Student learning outcomes are evaluated according to the assignments designed to measure the individual outcomes. Further tracking will be done utilizing **NPST™ - for Advanced Practice Nursing Programs**. Typhon Group's **NPST Student Tracking System** functions as a complete electronic student tracking system, including comprehensive patient encounter logs and reports, a fully featured evaluation and survey component for assessments, management of student rotation scheduling, student electronic portfolios, student and preceptor biographic databases, clinical site database, and curriculum mapping. Final program outcomes will be measured by ANCC (American Nurses Credentialing Center) certification scores for both tracks. Advanced Practice Licensure will be an additional outcome measure for the FNP program. Additionally graduate satisfaction, employer satisfaction, role appropriate employment and progression towards doctoral degrees will be measured.

SUGGESTED SEQUENCING OF GRADUATE COURSES

NURSE ADMINISTRATOR	NURSE PRACTITIONER	Nurse Education
<p>SUMMER (15) admit 20</p> <p>SCIENCE AND RESEARCH 4 (80)</p>	<p>SUMMER (15) admit 20</p> <p>SCIENCE AND RESEARCH 4 (80)</p> <p>(60)</p>	<p>SUMMER (15)</p> <p>SCIENCE AND RESEARCH 4</p>
<p>FALL</p> <p>CONTEXT OF HEALTHCARE 3 (60)</p> <p>LEADERSHIP AND INNOVATION3 (60)</p>	<p>FALL</p> <p>CONTEXT OF HEALTHCARE 3 (60)</p> <p>PATHOPHYSIOLOGY 3 (60)</p> <p>(240)</p>	<p>FALL</p> <p>CURRICULUM DEVELOPMENT 3</p> <p>EDUCATIONAL TECHNOLOGY 3</p> <p>ROLE PRACTICUM (135 hrs)</p>
<p>SPRING (16)</p> <p>PROGRAM EVALUATION 3 (60)</p> <p>HUMAN RESOURCES 3 (60)</p>	<p>SPRING (16)</p> <p>PHARMACOLOGY 3 (60)</p> <p>ADV HEALTH ASSESSMENT 4 (45hrs) (80)</p> <p>(260)</p> <p>Annual SCH 660 (year 1)</p>	<p>SPRING (16)</p> <p>PSYCHOMETRICS 3</p> <p>PROGRAM EVALUATION 3</p> <p>GRANTS 4</p>
<p>SUMMER admit 20/cont 15</p> <p>SCIENCE AND RESEARCH 4 (80)</p>	<p>SUMMER admit 20/cont 15</p> <p>SCIENCE AND RESEARCH 4 (80)</p> <p>PRIMARY CARE OF ADULTS I 3 (45)</p> <p>(205)</p>	<p>SUMMER</p> <p>SCIENCE AND RESEARCH 4</p>
<p>FALL</p> <p>QUALITY IMPROVEMENT IN HC 3 (45)</p> <p>HEALTH ECONOMICS 3 (45)</p> <p>CONTEXT OF HEALTHCARE 3 (60)</p> <p>LEADERSHIP AND INNOVATION3</p>	<p>FALL</p> <p>PRIMARY CARE OF ADULTS PRACTICUM I 3 (135 hrs) (45)</p> <p>CONTEXT OF HEALTHCARE 3 (60)</p> <p>PATHOPHYSIOLOGY 3 (60)</p>	<p>FALL</p> <p>ELECTIVES</p> <p>CURRICULUM DEVELOPMENT 3</p> <p>EDUCATIONAL TECHNOLOGY 3</p>

<p>60</p>	<p>375</p>	
<p>SPRING (17)</p> <p><i>STRATEGIC MANAGEMENT</i> 3 45</p> <p>ROLE PRACTICUM 6 (135 hrs) 90</p> <p>PROGRAM EVALUATION 3 60</p> <p><i>HUMAN RESOURCES</i> 3 60</p>	<p>SPRING (17)</p> <p>PRIMARY CARE OF ADULTS II 3 45</p> <p>PRIMARY CARE OF ADULTS 45</p> <p>PRACTICUM II 3 (135 HOURS) 45</p> <p><i>PHARMACOLOGY</i> 3 60</p> <p><i>ADV HEALTH ASSESSMENT</i> 4 (45 hrs) 80</p> <p>580</p> <p>Annual SCH 1,110 (year 2)</p>	<p>SPRING (17)</p> <p>ROLE PRACTCUM 6 (135)</p> <p><i>PSYCHOMETRICS</i> 3</p> <p>PROGRAM EVALUATION 3</p> <p><i>GRANTS</i> 4</p>
<p>SUMMER admit 20/cont 15</p> <p>SCIENCE AND RESEARCH 4 80</p>	<p>SUMMER admit 20/cont 15</p> <p>SCIENCE AND RESEARCH 4 80</p> <p>PRIMARY CARE OF ADULTS I 3 45</p> <p>PRIMARY CARE OF ADULTS/GERO III 3 45</p> <p>PRIMARY CARE OF ADULTS/GERO III PRACTICUM (135 HOURS) 45</p> <p>295</p>	<p>SUMMER</p> <p>SCIENCE AND RESEARCH 4</p>
<p>Fall</p> <p><i>QUALITY IMPROVEMENT IN HC</i> 3 45</p> <p><i>HEALTH ECONOMICS</i> 3 45</p> <p>CONTEXT OF HEALTHCARE 3 60</p> <p><i>LEADERSHIP AND INNOVATION</i> 3</p>	<p>FALL</p> <p>FAMILY CENTERED PRIMARY CARE 3 45</p> <p>FAMILY CENTERED PRIMARY CARE PRACTICUM 3 (135hrs) 45</p> <p>PRIMARY CARE OF ADULTS</p>	<p>Fall</p> <p>ELECTIVES</p> <p><i>CURRICULUM DEVELOPMENT</i> 3</p> <p><i>EDUCATIONAL TECHNOLGY</i> 3</p>

<p>(60)</p>	<p>PRACTICUM I 3 (135 hrs) (45)</p> <p>CONTEXT OF HEALTHCARE 3 (60)</p> <p>PATHOPHYSIOLOGY 3 (60)</p> <p>(45)</p>	
<p>SPRING (18)</p> <p>STRATEGIC MANAGEMENT 3 (45)</p> <p>ROLE PRACTICUM 6 (135 hrs) (90)</p> <p>PROGRAM EVALUATION 3 (60)</p> <p>HUMAN RESOURCES 3 (60)</p>	<p>SPRING (18)</p> <p>ROLE PRACTICUM 6 (135 hrs) (90)</p> <p>PRIMARY CARE OF ADULTS II 3 (45)</p> <p>PRIMARY CARE OF ADULTS PRACTICUM II 3 (135 HOURS) (45)</p> <p>PHARMACOLOGY 3 (60)</p> <p>ADV HEALTH ASSESSMENT 4 (45) (30)</p> <p>(60)</p> <p>Annual SCH 1,335 (year 3)</p>	<p>SPRING (18)</p> <p>Electives</p> <p>ROLE PRACTCUM 6 (135)</p> <p>PSYCHOMETRICS 3</p> <p>PROGRAM EVALUATION 3</p> <p>GRANTS 4</p>
<p>SUMMER admit 20/cont 15</p> <p>SCIENCE AND RESEARCH 4 (80)</p>	<p>SUMMER admit 20/cont 15</p> <p>SCIENCE AND RESEARCH 4 (80)</p> <p>PRIMARY CARE OF ADULTS I 3 (45)</p> <p>PRIMARY CARE OF ADULTS/GERO III 3 (45)</p> <p>PRIMARY CARE OF ADULTS/GERO III PRACTICUM (135 HOURS) (45)</p> <p>(90)</p>	<p>Summer</p> <p>SCIENCE AND RESEARCH 4</p>

Revenues

Expenses

Year 1 – 660 student credit hours.

Tuition/fees (705.90) = **465,894**

Summer overload 10 credits 15,000
Adjunct 4 credits 6,000
2 FT faculty (1 ten month, 1 12 month)
(90,000 plus 45,00 benefits) 135,000
(125,000 plus 62,000 benefits) 187,000
Typhon tracking system 1700
Library resources 15,000
Marketing 20,000
\$379,700

Year 2 – 1,110 student credit hours

Tuition/fees (705.90) = **783,549**

Summer overload 10 credits 15,000
Adjunct 8 credits 12,000
Add one 12 month FT faculty
(125,000 plus 62,000 benefits) 187,000
Existing Faculty 322,000
Simulation expenses purchase 161,000
Typhon tracking system 2000
Library Resources 15,000
Marketing 20,000

\$734,000

Year 3 – 1,335 student credit hours

Tuition/fees (705.90) = **942,376.50**

Summer overload 14 credits 21,000

Adjunct 8 credits 12,000

Add on 12 month FT faculty

(125,000 plus 62,000 benefits) 187,000

Existing faculty 509,000

Typhon tracking system 2000

Library Resources 15,000

Marketing 20,000

\$631,000