Oakland University

GRADUATE COUNCIL MINUTES

Location: 242 KL
Meeting Time: 2:00-4:00 pm

Wednesday, November 18, 2015 – Meeting #6

Approved: 01/06/2016

Present: Kris Condic *(Ex Officio)*, Margaret Glembocki, Karl Majeske, Zissimos Mourelatos, Robert Noiva, Harvey Qu, Brad Roth, and Kris Thompson

Absent: Ledong Li, Claudia Petrescu (Chair), Claire Rammel *(Ex Officio)*, Mohammad-Reza Siadat, and Julia Smith

Staff: Julie Delaney and Tina Tucker (Secretary)

Guest: Shaun Moore

Visitors: Deana Hays, Anne Hranchook, Darlene Schott-Baer, and Colleen Meade-Ripper

Brad Roth served as Interim Chair for today's meeting while Claudia Petrescu was away. Dr. Roth called the meeting to order at 2:00PM.

APPROVAL OF MINUTES

Zissimos Mourelatos moved to approve the minutes of the November 4, 2015, Graduate Council Meeting as written. Harvey Qu seconded the motion. Motion passed unanimously.

OLD BUSINESS

- Doctor of Nursing Practice Nurse Anesthesia Track Program Modification Proposal.
  Reviewers: Bob Noiva and Kris Thompson
  Visitors: Deana Hays, Anne Hranchook, Colleen Meade-Ripper, and Darlene Schott-Baer
  Second Reading: Debatable, amendable, and eligible for final vote at this meeting
  Motion: To approve the Doctor of Nursing Practice Nurse Anesthesia Track Program Modification Proposal.

  Visitors from the School of Nursing addressed questions from the Council. The Council requests from the School of Nursing, a revised proposal reflecting the information derived from the questions/answers of the first and second readings of the proposal (See Attachment 1 of 2 and Attachment 2 of 2). Council will delay voting on the proposal until a revised and signed proposal is received. The next Graduate Council Meeting is scheduled for December 2, 2015. Council will need to receive the revised document with sufficient time to review in order to be able to vote on the proposal at the next scheduled meeting. Council also requests that the revised proposal be marked as revised with tracking and version number.

NEW BUSINESS

- **Master of Education in International Baccalaureate Program Modification Proposal.**
  Reviewers: Karl Majeske and Kris Thompson
  First Reading: Debatable, amendable, but not eligible for final vote at this meeting.
  Motion: To approve the Master of Education in International Baccalaureate Program Modification Proposal.

  After some discussion, Council had the following questions and suggested clarification for the proposal:
  1. Page 2 under Section 1.2., Proposed Academic Programs. "The IBE concentration has sufficient enrollment to warrant it's elevation to the level of a major within the MEd program**."**

Include data to support this statement. Council recommends including data on enrollment for the current program over the last two to three years. Also include the number of students in the current program and the teach-out plan for those students.

2. Page 5, Item #10.
   Clarify "adjustments as needed" in the first sentence that refers to the students currently enrolled in the Educational Studies program completing the program.
3. Include how marketing costs will be covered.
4. Include cost implications concerning faculty and removal of courses.

The next Graduate Council Meeting is scheduled for December 2, 2015. Council will need to receive the revised document with sufficient time to review in order to be able to proceed with the second reading of the proposal at the next scheduled meeting. Council also requests that the revised proposal be marked as revised with tracking and version number.

GOOD AND WELFARE

No Good and Welfare

ADJOURNMENT

With no further business, the meeting adjourned approximately 2:55 PM.

(ATTACHMENT 1 OF 2)
Doctor of Nursing Practice Nurse Anesthesia Track Program Proposal
Graduate Council Questions/Answers from 11/04/2015 Meeting
(First Reading)

Program:

1. Program title – track within DNP or stand-alone program?
    - Upon approval, the program will be a track within the Doctor of Nursing Practice (DNP) Program:
        - Post-Master's **Doctor of Nursing Practice (Post-MSN DNP)**
        - **Doctor of Nursing Practice Nurse Anesthesia Track (DNP-NA Track)**

2. What is the demand for the program? No data was offered regarding number of applications for the master.
    - The program receives approximately 150-200 applications per year.
    - The American Association of Nurse Anesthetists (AANA) and the Council on Accreditation of Nurse Anesthesia Educational Programs (COA) have mandated that all programs make the move to the practice doctorate as the terminal degree.
    - In a July, 2015 letter to Program Directors, the COA strongly encouraged programs to start transitioning toward doctoral degrees *if they have not already started the process* citing that approvals and accreditation decisions take longer than expected. (Program Directors Update, Issue 70, July 2015).

3. Is there a letter of support from Beaumont for the program?
    - A letter is forthcoming from the Vice President and Chief Nursing Officer of Beaumont Hospital, Royal Oak, Maureen Bowman, RN.

Student level:

4. What happens if students come into the program with a master? Is there Transfer credit process?
    - Where there are courses in the DNP-NA Track curriculum that are deemed to be equivalent to courses offered in a MSN curriculum, transfer credit will be allowed.

5. Regarding the Qualified nursing who want to become a nurse anesthetist will have course equivalency assessed and an "individualized plan of study will be developed? What does this mean?

    - Where there are courses in the DNP-NA Track curriculum that are deemed to be equivalent to courses offered in a MSN curriculum, transfer credit will be allowed and the plan of study modified accordingly.
    - There is opportunity for students admitted to the program to receive credit for NRS 5XX Translational Research and Theory for Advanced Practice and NRS 595 Statistics in Advanced Practice Nursing. All other courses are specialty specific and/or offered at the doctoral level and must be taken by all students accepted into the program.

    Will courses be waived? Would the student need to take other courses if some are waived? Will credits be reduced and if so by potentially how many credits? For example if the student already has a Master's degree might the DNP degree be reduced by 30, 32, 36 credits?

    - Students entering with a master's degree have the potential to receive credit for and have waived 2 courses for a maximum of 7 credits (NRS 5XX Translational Research and Theory for Advanced Practice and NRS 595 Statistics in Advanced Practice Nursing).

- These are *prerequisite courses and will not* impact the credit hour allocation for the program.
- The remainder of the courses are specialty related or at the doctoral level and must be taken by all students accepted into the program.

6. Can students who have a MSN enter the Post-MSN DNP program (which requires 38 credits) and earn the Nurse Anesthesia degree?
    - No, please see previous answers for clarification.

Admission review and assessment:

7. Admission under "Limited Standing" is not clear. What happens if the student doesn't achieve a 3.0 or higher on those pre-req courses? Do they re-take the courses? Stay on "limited standing"?
    - Once admitted to the SON, graduate nursing students are required to earn a minimum grade of 3.0 or higher in each course. Nurse Anesthesia students may repeat one non-specialty related course during the program and thus would be allowed to repeat one prerequisite course if they did not achieve a 3.0.
    - Should the student fail to achieve a 3.0 in both pre-requisite courses, they would not be admitted to start classes in the fall.

Curriculum:

8. The pre-req courses are listed under the Proposed DNP-NA track as NRS5XX and NRS 595. Why not include them in the program and offer them in the first semester?
    - The overwhelming majority of programs around the United States are 36 months. Making the program length 40 months would be a barrier to remaining competitive.
    - Adding 7 credits to the first semester would increase the credit load from 12 to 19.

9. Seminars – what is their purpose?
    - This is an interactive course that socializes and immerses students into the doctoral advanced practice role.
    - Students will explore advanced clinical topics through the synthesis of theory and evidence-based practice strategies across the lifespan and within complex health care systems.
    - The courses will include essential content required by the accrediting bodies that accredit nurse anesthesia programs such as the American Academy of Colleges of Nursing and the COA. The course will also provide opportunities for inter-professional collaboration.

10. Are the new courses academic or clinical? Who will teach them?

Course	**Instructor**
NRS 5XX	This course will replace NRS 500 and NRS 531. Instructors currently teaching NRS 531 will teach this course
NRS NA Clinical Internship VII	Beaumont Hospital and Affiliate Site Clinical Faculty
NRS NA Clinical Internship VIII	Beaumont Hospital and Affiliate Site Clinical Faculty
NRS 705 Advanced Practice Seminar for NAs I	Team taught by DNP/PhD faculty

NRS 706 Advanced Practice Seminar for NAs II	Team taught by DNP/PhD faculty
NRS 707 Advanced Practice Seminar for NAs III	Team taught by DNP/PhD faculty
NRS 708 Advanced Practice Seminar for NAs IV	Team taught by DNP/PhD faculty
NRS 896 Cumulative Review for NAs	Beaumont Clinical Coordinator

11. Contact hours as required by the accreditation agency? What are the contact hours per student/faculty?
    - Each clinical internship is 1-2 credits with clinical time ranging from 16 to 32 hours/week. Students are assigned a preceptor daily (non-OU faculty) that is a CRNA and/or an Anesthesiologists working in the clinical area the student is assigned to.
    - Per the COA, clinical oversight of graduate students in the clinical area must not exceed (1) 2 graduate students to 1 CRNA, or (2) 2 graduate students to 1 anesthesiologist. The majority of clinical sites affiliated with the program provide 1:1 oversight of students in the clinical area.
    - Per the COA Standards for Accreditation of Nurse Anesthesia Programs for the Practice Doctorate (October, 2015):
        - The COA requires students matriculating into programs as of January 1, 2015 to achieve a minimum of 2000 clinical hours.
            - Clinical hours are defined by COA as time spent in the actual administration of anesthesia (i.e., anesthesia time).

12. Missing courses (such as Ethics)– other accredited programs have it.
    - Ethics is offered in NRS 643 Interprofessional Role Development, Leadership, and Ethics in Advanced Nursing Practice.

    - This course focuses on professional role development, leadership, and the influence of ethical principles on advanced practice.

13. Online portion of the program? Site location? What is the structure of the online part?
    - Online courses are taught via WebEx. WebEx courses are designed by each instructor and may include: course syllabus, course material/content, course assignments, quizzes/tests, hyperlinks to other websites on the Internet and/or other OU web pages, discussion boards, Internal email, and the course grade book.
    - Online courses do not require a site location.

14. DNP final project: will it require more faculty or faculty time comparatively with a master's project?
    - DNP projects will require more faculty than MSN projects. The school of nursing has increased the number of DNP and PhD faculty. Currently there are 30 DNP or PhD faculty available to serve as chairs.
    - In addition, students are allowed to work in pairs on the DNP project.

15. Concern re: faculty resources. Who will teach the new courses and additional credits?
    - Please see the table under question 10
16. How does the Beaumont budget fit into the proposed budget?

- Beaumont hospital provides in-kind contributions such as classroom space, office space, simulation, classroom technical support, and clinical experiences to meet and exceed the COA standards for graduate education.

17. Why is there a deficit for the first two years? Rationale for increasing the tuition from a current flat fee of $6,800 to $8000 is presented
    - The budget was submitted prior to a board action to increase tuition. In addition, student enrollment was increased and changes were made to contract services. An updated budget is forthcoming from the School of Nursing's Assistant Dean of Finance and Administration.

18. In-kind expenses are discussed in Appendix D. Appendix D is missing.
    - The reference to this appendix should have been removed. The in-kind contributions cannot be quantified. Examples of these contributions include office space, classroom space, clinical instructors for daily instruction, simulation.

(ATTACHMENT 2 OF 2)

Doctor of Nursing Practice Nurse Anesthesia Track Program Proposal
Graduate Council Questions/Answers from 11/18/2015 Meeting
(Second Reading)

Q: Why are the two prerequisite courses not included as part of the degree program and how are students able to take the two prerequisite graduate courses if they have not yet been admitted to the program?

A: Students are admitted to the program one year out with limited standing to allow for the two prerequisite courses. This allows students to enroll in the courses and the time to complete them prior to beginning the program. Taking the prerequisite courses while in the program would make the course load too heavy and possibly lengthen the time of completion. Completing them as prerequisites keeps completion time comparable to and competitive with similar programs at other institutions.

Q: Degree versus tracks. Is there a future vision for a DNP as a Nurse Practitioner versus a Nurse Anesthesia, so that the degree says DNP with a track and, if so, how is that going to be done?

A: That is the concept that the School of Nursing has moving forward. There is the mandate for Nurse Anesthesia and fully expecting Nurse Practitioner to soon have the same mandate. By saying track, it clearly identifies one specialty versus another. The MSN programs are currently set up with tracks and the DNP programs will mirror that at the doctorate level in the future.

Q: The proposal states 150 to 200 applications. Is that completed applications?

A: Yes.

Q: The proposal addresses the possibility of students with advanced standing or with a master's in nursing being able to move into the program and the mention of transfer credit and decisions on advance standing, but there is not a well-described process. Will that be the program director or a committee? How will that be handled?

A: There is currently a similar process with the master's program. These students would be able to receive credit for similar course work already completed. Looking at the Plan of Study there are really only two courses that could potentially be waived or eligible for transfer credit for which are NRS 5XX, a transitional and research course and a statistics course. The remainder of the Plan of Study is either a specialty course, which only a nurse anesthetist would have that content, or doctoral level courses, which someone entering with a bachelor's would clearly need.

Q: What if someone is in another doctorate program in anesthesia and wanted to transfer to Oakland with courses from that doctorate program?

A: The Council on Accreditation of Nurse Anesthesia Educational Programs is very specific about students transferring into programs and it would be very unusual for a student, and usually not for a good reason, for a student to try and transfer. They would be required to get permission from their

previous director in order to be able transfer into the Oakland program. This type of scenario would be highly unlikely to occur. If it were to happen, it would have to be handled on a case by case basis.

Q: It appears that the seminars have specific content associated with them. This is not clear in the course description. Will it be content specific or will they be sequenced? The course descriptions are somewhat vague, making it difficult sometimes to tell what content was where.

A: They will be sequential and the content will mirror the theory and advance practice content that is needed, as well as the essential content that is dictated by the accrediting body.

Q: There is a significant amount of additional teaching, because it is a doctoral program, but the number of faculty remains the same. Will work load change?

A: Some of the courses will be deleted and some of those that will be added will have lower credit hour loads. The seminars are currently already in place and will just be at a more advanced level. The teaching load will not be that much different than what is currently in place other than being at the doctoral level. Also, there is a deep pool of part-time/adjunct faculty from Beaumont that can be used to do the seminar-type of discussions.

Q: Is there money included somewhere in the budget to cover those part-time/adjunct faculty from Beaumont?

A: Yes. It is the 1.9 clinical faculty listed on the Beaumont side, and that does not include the in-kind contributions of Beaumont in terms of all the clinical instructors that teach in the clinical area. They do that as part of their profession and job description.

COMMENT: That is something that SON should add to the proposal in terms of how those courses might be managed.

Q: When checking accreditation, they required a minimum number of hours. Although there appears to be more courses than the other comparable programs, there is nothing in the proposal that states what the number of hours that the training works out to be. Have the clinical hours been totaled?

A: It is 2,000 hands-on institutional clinical hours. The current students are graduating well over that amount of hours, somewhere in the 2,500 hour range, and those hours are tracked very closely. In addition, the clinicals are being raised from 7 to 8.

COMMENT: It was indicated that the budget in the proposal was going to be updated but does not appear to be included in the current version of the proposal. Revised budget needs to be included in revised proposal.

RESPONSE: Have spoken with the Assistant Dean of Finance and Administration of the School of Nursing and she is currently working on bringing that up-to-date.

Q: How was the increase in tuition rate derived and it is the same for in-state and out-of-state students?

A: An analysis of all of the programs in the state of Michigan and also programs in the United States, private versus public was done. It was determined that Oakland was behind and had not had an

increase since 2011. With that information, the increase was determined while still remaining competitive with other institutions. The program does attract quite a few students from out-of-state, including from rural and underserved areas, and the feeling is that it is important to teach anesthetists around the country so that they will go back and give to society. The Board asked the same question and, based on the same response, they agreed.

Q: Does this apply to just the DNP or does it also apply to the master's.

A: This also applies to the master's.

Q: The in-kind services on the Beaumont side of the budget has a deficit. Will that be addressed?

A: Yes. In the revised budget, reflecting the tuition increase, the deficit will be taken care of and the overall budget improved.

COMMENT: Appendix C on the Beaumont budget should be included in point #11 to make it clear where the in-kind income comes from and how it is distributed.

- When is this program to be effective?

- Will the master's be suspended and when? How will current students be handled?