

# Quality Indicators for Distance Education in Nursing

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# Session Overview

- ▶ Importance of quality in nursing DE programs
- ▶ Quality indicators and how to determine if they are met
- ▶ Conclusions, concerns, caveats
- ▶ Summary
- ▶ Questions

# Quality in Distance Education

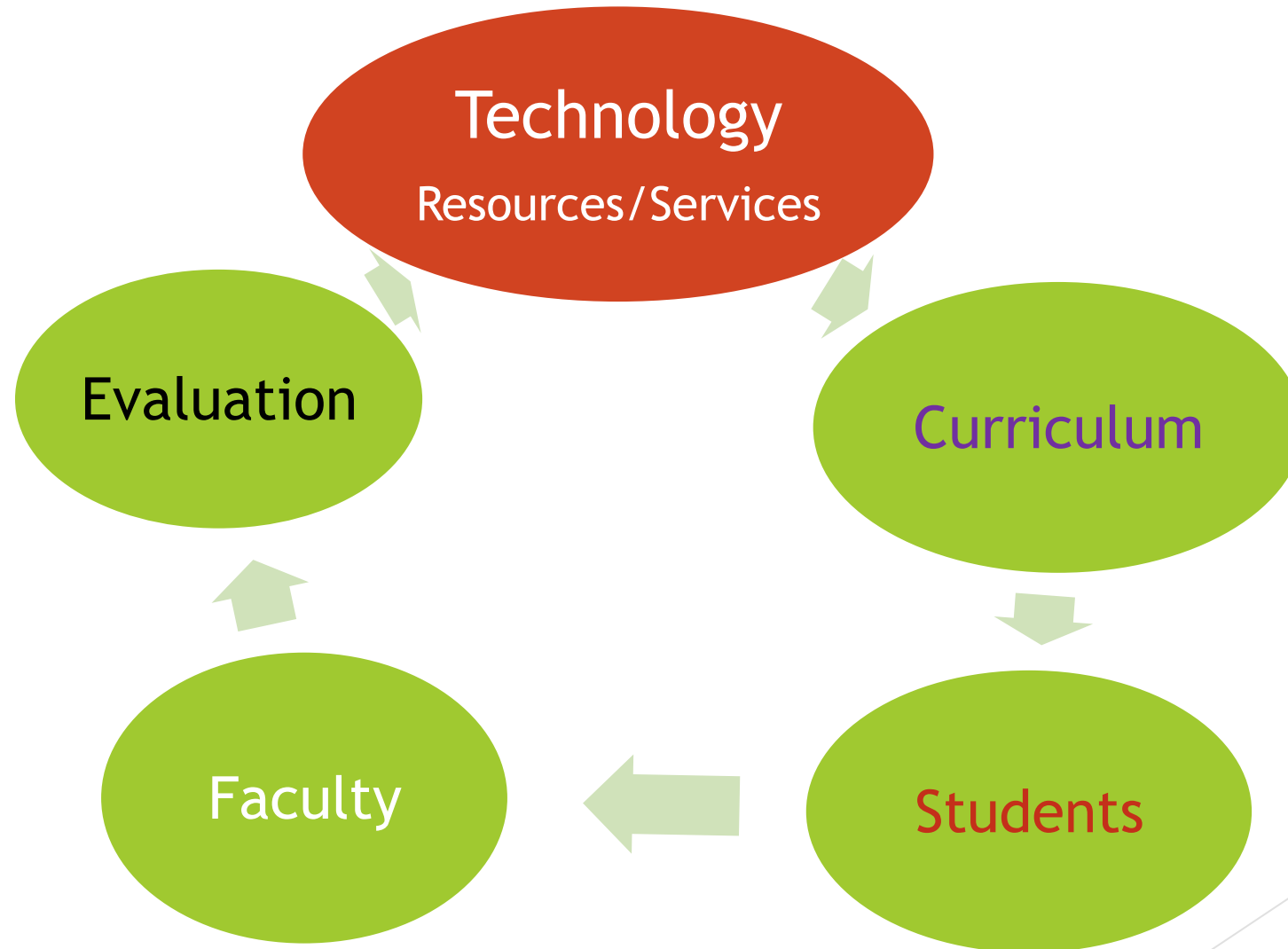


# Quality Matters

- ▶ Assure public
- ▶ Recruit and retain students
- ▶ Graduate prepared students



# Quality in DE Programs is a Mix of Variables



# Quality Indicators



# Who determines standards/indicators

- ▶ 1. Regional accrediting agencies --WICHE, SREB, MHEC  
*Middle States Commission on Higher Education's Interregional Guidelines for the Evaluation of Distance Education*
- ▶ 2. Nursing accrediting agencies ACEN, CCNE, CNEA
- ▶ 3. Nursing organizations—position papers
- ▶ 3. Other groups-- SLOAN-C, Quality Matters

# General Indicators

*(Middle States Commission on Higher Education's Interregional Guidelines for the Evaluation of Distance Education)*

- ▶ Mission
- ▶ Institutional planning for DE
- ▶ Faculty governance of programs
- ▶ Curriculum
- ▶ Faculty/faculty support
- ▶ Students/student services
- ▶ Resources
- ▶ Evaluation
- ▶ Integrity



# Levels of focus for quality indicators



**Courses**

**Program**

**Institution**

# Choosing Indicators

- ▶ Appropriate for focus of program evaluation
- ▶ Appropriate for level of information needed
- ▶ Match with other indicators/standards used by the school of nursing

# Mission

## Quality indicator

- ▶ Mission supports distance education

## What to evaluate

- ▶ Mission is to increase access and flexibility
- ▶ Mission is to serve particular populations of students
- ▶ Students, faculty, administrators can articulate the mission for distance education
- ▶ Information about the distance aspects of the program is on SON web site

# Curriculum

## Quality indicator

- ▶ Curriculum prepares graduates for current practice needs
- ▶ Curriculum is coherent, structured, sequenced
- ▶ Curriculum development process followed by faculty

## What to evaluate

- ▶ Curriculum well designed and sequenced
- ▶ Comparable rigor to traditional program
- ▶ Courses developed by outside subject matter experts reviewed by faculty
- ▶ Curriculum evaluated and updated on a regular basis

# Didactic Courses

## Quality indicator

- ▶ Courses designed following 7 principles of best practice

## What to evaluate:

- ▶ High expectations
- ▶ Time on task
- ▶ Active learning
- ▶ Interaction among classmates
- ▶ Interaction with faculty
- ▶ Prompt feedback
- ▶ Respect for diversity

# Didactic Courses

## Quality indicator

- ▶ Course design is consistent for all DE courses
- ▶ Technology supports the learning activities in the course

## What to evaluate

- ▶ Look and design is consistent for all courses
- ▶ Tools are available to meet course learning activities

# Didactic Courses

## Quality indicator

- ▶ There are instructions for students about how to start and use the course

## What to evaluate

- ▶ Students can easily access and navigate the course
- ▶ There is information and opportunity to practice using course tools

# Didactic Courses

## Quality indicator

- ▶ Syllabus provides course overview and policies
- ▶ Faculty welcome students to the course and provide opportunity for students to introduce themselves
- ▶ Faculty post “office hours”

## What to evaluate:

- ▶ Syllabus includes learning outcomes, learning activities, assessments, and evaluation
- ▶ There is a sense of social presence and connectedness to the course
- ▶ Faculty are available to students with “office hours” (e-mail, phone, skype)



# Didactic Courses

## Quality indicator

- ▶ Course design promotes student progress in course

## What to evaluate

- ▶ Faculty establish deadlines for assignments/module completion
- ▶ Faculty identify students at risk and provide support as needed
- ▶ Faculty hold office hours and communicate with students outside of course as needed

# Didactic Courses

## Quality indicator

- ▶ Learning activities are varied

## What to evaluate:

- ▶ Activities promote active learning and collaboration and contribute to attaining the learning outcome
- ▶ Discussion is not the only learning activity employed
- ▶ “Lecture”, video, podcasts are supported with application activities

# Clinical Courses

## Quality indicator

- ▶ There is a connection between learning outcomes in clinical and didactic courses

## What to evaluate:

- ▶ Clinical experiences support learning outcomes
- ▶ Students are supervised by appropriate personnel
- ▶ Preceptors, nurses are oriented to program, course, and course outcomes

# Clinical Courses

## Quality indicator

- ▶ Students receive clinical supervision from faculty/preceptors who are licensed in the host state
- ▶ BON host state accepts home state approval
- ▶ Faculty/preceptors have appropriate credentials

## What to evaluate:

- ▶ Clinical faculty and preceptors are licensed and have appropriate credentials
- ▶ Faculty at home school are responsible for oversight of clinical faculty/preceptors

# Clinical Courses

## Quality indicator

- ▶ Home school provides oversight for clinical placement and supervision of students
- ▶ Home school facilitates clinical course that connects didactic and clinical experiences

## What to evaluate:

- ▶ Contracts/agreements are in place that specify responsibilities of home school and clinical facilities
- ▶ Technology can be used to support oversight and student learning (on-line or virtual post-conferences; regular conferences by phone or teleconference)

# Resources

## Quality indicator

- ▶ Resources are adequate to support the DE program, curriculum, courses and student learning

## What to evaluate:

- ▶ Students have access to online library resources
- ▶ Students do not need to come to campus to purchase books, supplies, equipment
- ▶ Student services, advising, study support, are available at a distance

# Students

## Quality indicator

- ▶ Students meet admission criteria for the program
- ▶ Students meet learning outcomes

## What to evaluate

- ▶ Students meet admission standards
- ▶ Students are oriented to the course and distance learning approaches
- ▶ Students progress through curriculum
- ▶ Students know how to locate needed resources

# Faculty teaching in didactic courses

## Quality indicator

- ▶ Faculty in DE didactic courses are licensed in state in which they teach (home state) and meet educational requirements of the nursing program

## What to evaluate:

- ▶ Faculty are oriented to the course, to the technology, and to the online pedagogy
- ▶ Faculty participate in curricular deliberations and decisions
- ▶ Adjunct faculty participate in course meetings



# Faculty teaching clinical courses

## Quality indicator

- ▶ Faculty/preceptors in DE clinical courses are licensed/credentialed in state in which they are teaching clinical
- ▶ Faculty/preceptors hold faculty appointment and are arranged by the program
- ▶ Faculty/preceptors are responsible to and supervised by the home state school

## What to evaluate:

- ▶ Faculty are oriented to the curriculum, course, technology, and clinical agency
- ▶ There is a match between clinical experiences and course goals
- ▶ Faculty teaching is reviewed by students, peers, administrators
- ▶ Faculty participate in curricular deliberations and decisions

# Faculty teaching clinical courses

## Quality indicator

- ▶ There are contracts between the school of nursing and clinical agency

## What to evaluate:

- ▶ Contracts specify roles and responsibilities of faculty and clinical agency
- ▶ Students know how to contact faculty
- ▶ Clinical faculty and agency know when and how to report “sentinel events”

# Evaluation Plan

## Quality indicator

- ▶ The evaluation plan gathers data about mission, curriculum, courses, curricular outcomes, students (APG data), faculty (qualifications, teaching) and is broad enough to gather data about distance education

## What to evaluate:

- ▶ Evaluation plan accounts for DE
- ▶ Evaluation plan is implemented
- ▶ Data from evaluation plan are used for improvement

# Conclusions, Concerns, Caveats

# Conclusions...the evidence\* shows:

- ▶ Distance education is comparable to traditional on-campus programs/courses
- ▶ Distance education creates access and flexibility for many students
- ▶ Distance education supports national goals of increasing BSN and doctorally prepared nurses
- ▶ Quality indicators used by nursing accrediting agencies for DE programs are same as for on-campus programs

\*Most evidence is from students and faculty in post-licensure programs

# Conclusions...the evidence\* shows:

- ▶ Students and faculty are satisfied with DE programs and courses
- ▶ When using the 7 principles of good education students are more likely to complete courses, be socialized, and be satisfied, and meet learning outcomes
- ▶ Technology has improved DE delivery and better promotes active learning, student progress tracking, faculty teaching skills, connections between clinical and didactic courses
- ▶ \*Most evidence is from students and faculty in post-licensure programs

# Concerns

- ▶ Some still question that DE programs are as effective as traditional programs
- ▶ There have been issues of faculty “presence” and effective teaching in DE courses
- ▶ There are concerns about student “presence” and effective learning
- ▶ Student academic integrity must be assured
- ▶ Lack of evidence about pre-licensure programs....need more “big data”

# Caveats

- ▶ Consider “best practices” vs. “good practices” that are working
- ▶ Do not hold DE programs to higher standards than traditional programs
- ▶ Use existing quality indicators/standards and measures
- ▶ Keep the focus on teaching and learning, not technology



# Caveats

- ▶ Consider how new technology has made teaching, evaluation, progress monitoring, testing easier and student-centered
- ▶ Allow for innovation; there are new models of clinical teaching; use of simulation; improved learning technology.

# Summary

# Key Points



- ▶ Distance education in nursing works
- ▶ Quality in DE programs is a synergistic mix of variables
- ▶ Using quality indicators for BON approval identifies best practices and areas for improvement

# Questions





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