SON OP: 50.020, Improvement Action Plan Policy

PURPOSE: The purpose of the School of Nursing Operating Improvement Action Plan Policy and Procedure (SON OP) is to provide a mechanism for demonstrating the planning, implementation, assessment, analysis, comparison to target values, evaluation, and reporting of outcomes for improvement strategies as required by the Federal and State Government via the accreditation processes, as well as for annual reporting.

REVIEW: The OP will be reviewed biennially by October 1 of each odd numbered year (ONY) by the Associate Dean of Outcomes Management and Evaluation, with recommendations for revisions forwarded to the Dean of the School of Nursing.

POLICY/PROCEDURE:

1. Policy

The improvement action plan serves as a consistent template for demonstrating the planning, implementation, assessment, evaluation, and reporting of outcomes for improvement strategies. Documentation of ongoing identification, planning, and achievement of continuous improvement is required by the Federal Government and the state government via the accreditation processes and for annual reporting.

The improvement action plan process within the School of Nursing is implemented to guide and document ongoing/continuous improvement. Improvement action plans are developed and implemented, and closing-the-loop outcomes assessed and evaluated by faculty, Shared Governance Councils, and administrators on an ongoing basis.

Components of the action plan template include the following:

a. Improvement Action Plan Title (e.g., course, curriculum, administrative support, student affairs, … improvement)

b. History (of identified Gaps; conditions/circumstance/event heralding identified area for improvement).

c. Link to Master Evaluation Plan Matrix measure target values.

d. Link to Accreditation Criteria (SACS-COC, CCNE, ACME)

e. Impetus/Motivation for Improvement (Gap Analysis Value, customer and/or community of interest feedback)

f. Start Date (for plan implementation)

g. Participants (Shared Governance Councils, task force, faculty, student, …)
h. Priority Level (for implementation and completion)
i. Current Status (of implementation and completion)
j. Type of Report (Initial Plan, Progress, Final)
k. Improvement Goal
l. Improvement Plan Matrix (objectives, measures, actions, responsibility, progress, outcomes).

2. Procedure

a. Identify area for improvement through gap analysis value from a dashboard containing various options for interacting with the data, reflection (scheduled review of curriculum, course, bylaws, Shared Governance Council functions, policies and procedures, Master Evaluation Plan Matrix …), program/school level assessment plans, and/or annual reports.

b. Develop the Improvement Action Plan template (see Attachment A) by completing the information for each component and the improvement action plan matrix.

c. Implement the actions of the improvement action plan.

d. Assess progress regularly (monthly, every semester, annually).

e. Provide brief updates on Improvement Action Plan progress to the Process Improvement and Evaluation Council, and quarterly reports for QI projects to the Coordinating Council for reflection on closing-the-loop outcomes and designation of improvement plan completion, revision of objectives/plan, and/or continued implementation with on-going monitoring. (see Attachment B)