VIRGINIA COMMONWEALTH UNIVERSITY
BOARD OF VISITORS
1:00 P.M.
SEPTEMBER 13, 2019
JAMES BRANCH CABELL LIBRARY
901 PARK AVENUE – ROOM 303
RICHMOND, VIRGINIA

AGENDA

1. **CALL TO ORDER & OPENING COMMENTS**   Mr. Keith Parker, *Rector*

2. **APPROVAL OF AGENDA**   Mr. Keith Parker, *Rector*

3. **APPROVAL OF MINUTES**   Mr. Keith Parker, *Rector*
   May 10, 2019 Minutes

4. **PRESIDENT'S REPORT**   Dr. Michael Rao, *President*

5. **CLOSED SESSION**   Mr. Keith Parker, *Rector*

   Freedom of Information Act Sections 2.2-3711 (A) (1),
   (3), (7), (8), (9), (11), specifically:

   a. Faculty Tenure Appointments, Changes in   Dr. Michael Rao,   *President*
      Status and Other Personnel Actions

   b. Special Awards Edward A. Wayne Medal recipients   Dr. Michael Rao, *President*

   c. Closed session report from the Audit, Integrity   Dr. Shantaram Talegaonkar, *Chair*
      and Compliance Committee

   d. Closed session report from University Resources   Mr. G. Richard Wagoner, *Vice Chair*
      Committee

      i. Funds Eligible for Naming
      ii. Funds Eligible for Naming under $50,000

   e. Closed session report from Finance, Budget and   Mr. H. Benson Dendy, III, *Acting Chair*
      Investment Committee

Executive Session

    f. Closed session report from Governance and   Mr. H. Benson Dendy, III, *Chair*
       Compensation Committee
         i. Presidential Performance Review
         ii. Review of President's performance goals
            for 2019-2020

6. RETURN TO OPEN SESSION AND   Mr. Keith Parker, *Rector*
   CERTIFICATION

   Action Item:
   Approval of items discussed in closed session, if any

7. STRATEGIC ENROLLMENT UPDATE   Dr. Tomikia LeGrande, *Vice Provost – Strategic Enrollment Management*

8. ACADEMIC AND HEALTH AFFAIRS COMMITTEE   Mr. Edward McCoy, *Chair*
   REPORT

   Report to the Board of Visitors

   Action Item:
   Recommendation to approve modification to the
   Nursing M.S. degree program

9. AUDIT, INTEGRITY AND COMPLIANCE   Dr. Shantaram Talegaonkar, *Chair*
   COMMITTEE REPORT

   Report to the Board of Visitors

   Action Items:
   a. Recommendation to approve Audit and
   Compliance Services Charter

10. FINANCE, BUDGET AND INVESTMENT   Mr. H. Benson Dendy, III, *Acting Chair*
    COMMITTEE REPORT

   Report to the Board of Visitors

   Action Items:
   (a) Recommendation to approve Committee Charter and
   Planner
   (b) Recommendation to approve resolution
   approving six-year plan

(c) Recommendation to approve demolition of
Franklin Street Gym

11. GOVERNANCE AND COMPENSATION   Mr. H. Benson Dendy, III, *Chair*
   COMMITTEE REPORT

Report to the Board of Visitors

12. UNIVERSITY RESOURCES COMMITTEE   Mr. G. Richard Wagoner, *Chair*
   REPORT

Report to the Board of Visitors

13. OTHER BUSINESS   Mr. Keith Parker, *Rector*

14. ADJOURNMENT   Mr. Keith Parker, *Rector*

Strategic Enrollment Management

Introduction

The following documents serve as preliminary reading materials and will be referenced during the Strategic Enrollment Management (SEM) presentation at the September 2019 Board of Visitors meeting:

- Division of Strategic Enrollment Management Board of Visitors Report, Fall 2019 Census I
- Association of Governing Boards White Paper, February 2017, *Key Issues Confronting Campus CEOs: Recommendations from the Field, section I: Higher Education's Business Model (pages 4-5)*

Overview of the SEM Presentation

The SEM presentation will provide informative material on enrollment highlights and opportunities, the national and/or state enrollment landscape for specific populations, followed by a brief discussion of the material. The brief discussion will be focused on two discussion questions:

(1) What additional *entrepreneurial revenue-generating initiatives* would you encourage academic and enrollment leadership to explore and determine viability for VCU?
(2) What additional *innovative strategies to keep costs competitive and affordable* would you encourage academic and enrollment leadership explore and determine viability for VCU?

Division of Strategic Enrollment Management
Board of Visitors Report
Fall 2019 Census I

Tomikia P. LeGrande, Ed.D.

Vice Provost
Division of Strategic Enrollment Management

ADMISSIONS AND ENROLLMENT HIGHLIGHTS
FALL 2019
AS OF CENSUS I

New Students
- The size of VCU's fall 2018 freshman class will be about 4,450, with an acceptance rate of 78%.

- The fall 2019 freshman class has a slightly higher middle 50% range of high school GPAs (3.35-4.02), as compared to fall 2018 (3.34-3.98). The SAT middle 50% range for 2019 is also slightly higher (1080-1250), as compared to fall 2018 (1070-1250).

- Based on current enrollments, some freshman class statistics are:

  o 57% minority students, which is the same as last year
  o Top 5 feeder counties, comprising 49% of the freshman class:
    - Fairfax County
    - Loudoun County
    - Henrico County
    - Chesterfield County
    - Prince William County
  o 10% out-of-state, as compared to 9% last year
  o 2% international students
  o 31% first-generation students
  o 32% pell eligible

- VCU will enroll approximately 1,650 transfer students, with 69% coming from the Virginia Community College System.

Student Success
- VCU anticipates positive increases in four and six year graduation rates compared to 2018.

Overall Enrollment
- Fall 2019 degree-seeking graduate enrollments will be approximately 4,600, or 15% of the total enrollment. First professional enrollments will be about 1,650.

- Overall, VCU's total headcount enrollment for fall 2019 is estimated to be approximately 30,000 compared to 31,076 for fall 2018.

I. UNIVERSITY ENROLLMENT
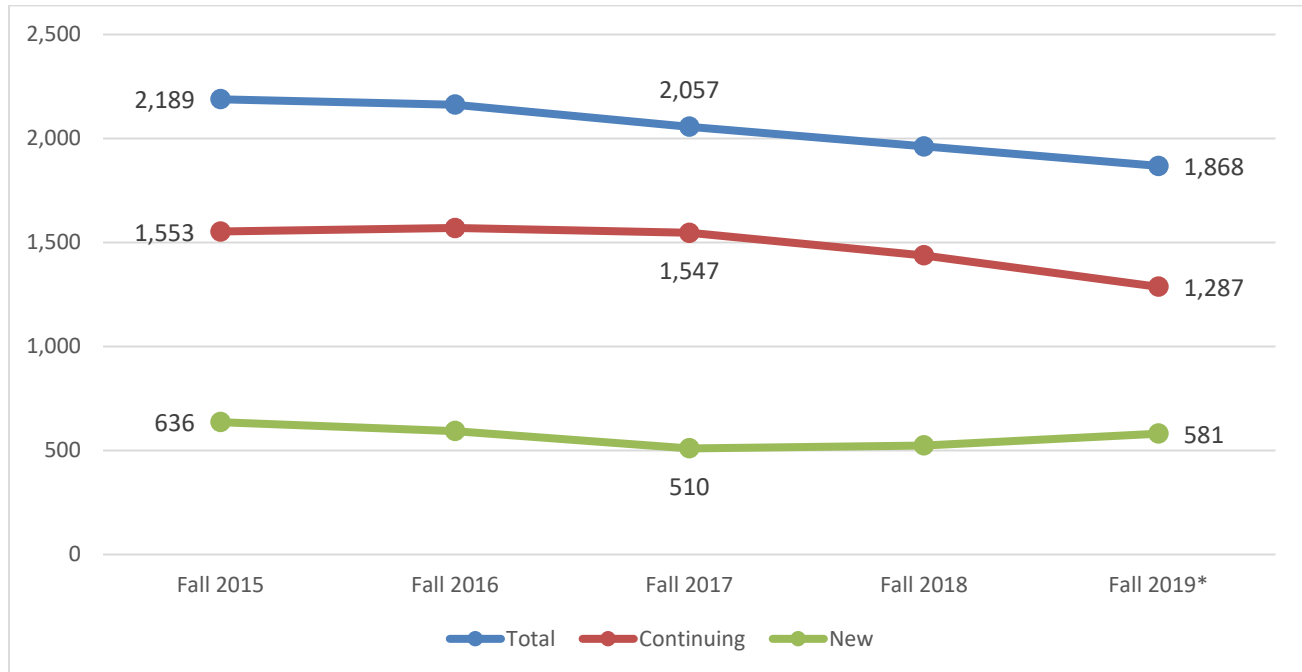
Figure 1: Fall 2018 and Fall 2019 Enrollments

	Headcount		FTE[a]	
	Fall 2018	Fall 2019*	Fall 2018	Fall 2019*
On-campus				
Undergraduate	22,554	22,167	20,854	20,435
New	6,289	6,118	6,123	5,917
Continuing	16,265	16,049	14,731	14,518
Non-degree Seeking Undergraduate	551	426	308	209
Graduate				
Master's	2,704	2,595	2,245	2,132
Doctoral	1,589	1,663	1,423	1,479
Post-Master's Certificate	40	26	18	13
Non-degree Seeking Graduate	534	435	279	249
First Professional				
Dentistry	405	412	405	412
Medicine	799	758	799	758
Pharmacy	505	470	680	634
Total On-campus	29,681	28,952	27,011	26,320
Off-campus				
Undergraduate	141	120	49	43
Non-degree Seeking Undergraduate	812	96	144	27
Graduate	372	387	203	212
Non-degree Seeking Graduate	70	124	23	29
Total Off-campus	1,395	727	420	311
Total Enrollment	31,076	29,679	27,431	26,631

[a]FTEs are calculated by dividing the total number of student credit hours by 15 for undergraduate and first professional students, and 12 for graduate students.
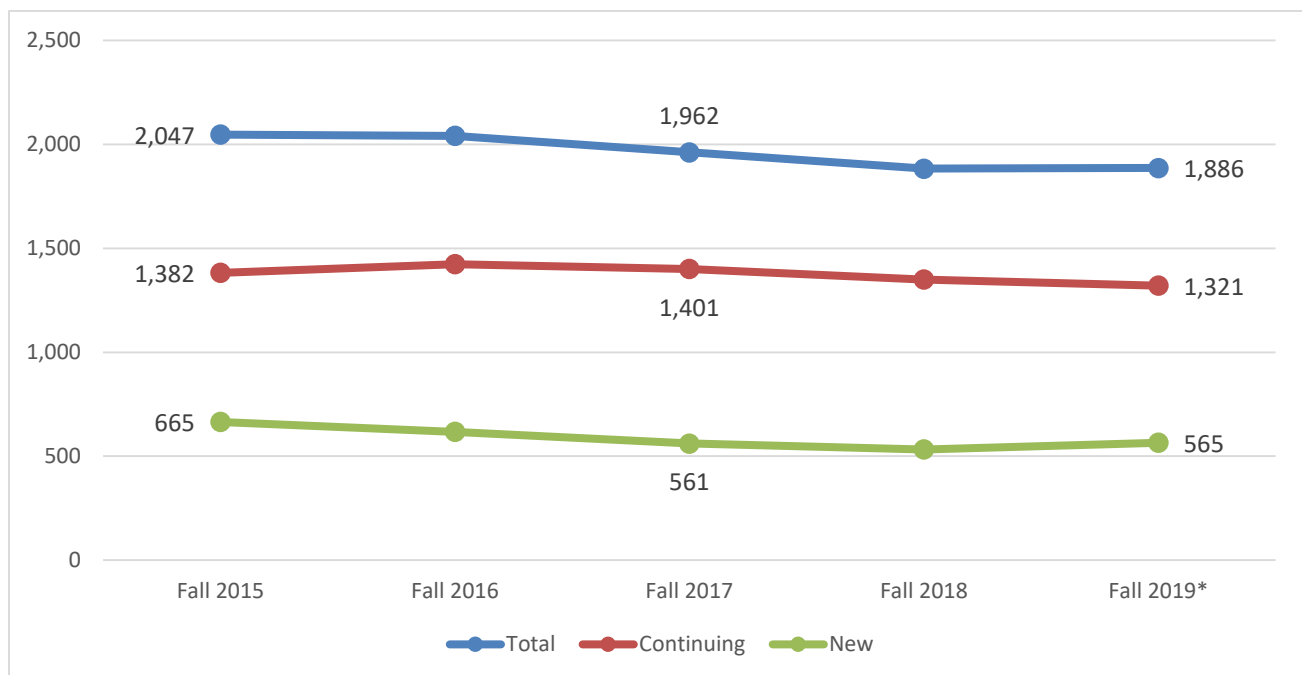*As of Census I

II. Out-of-State Degree-Seeking Student Enrollment

Figure 2: Undergraduate Out-of-State Enrollment
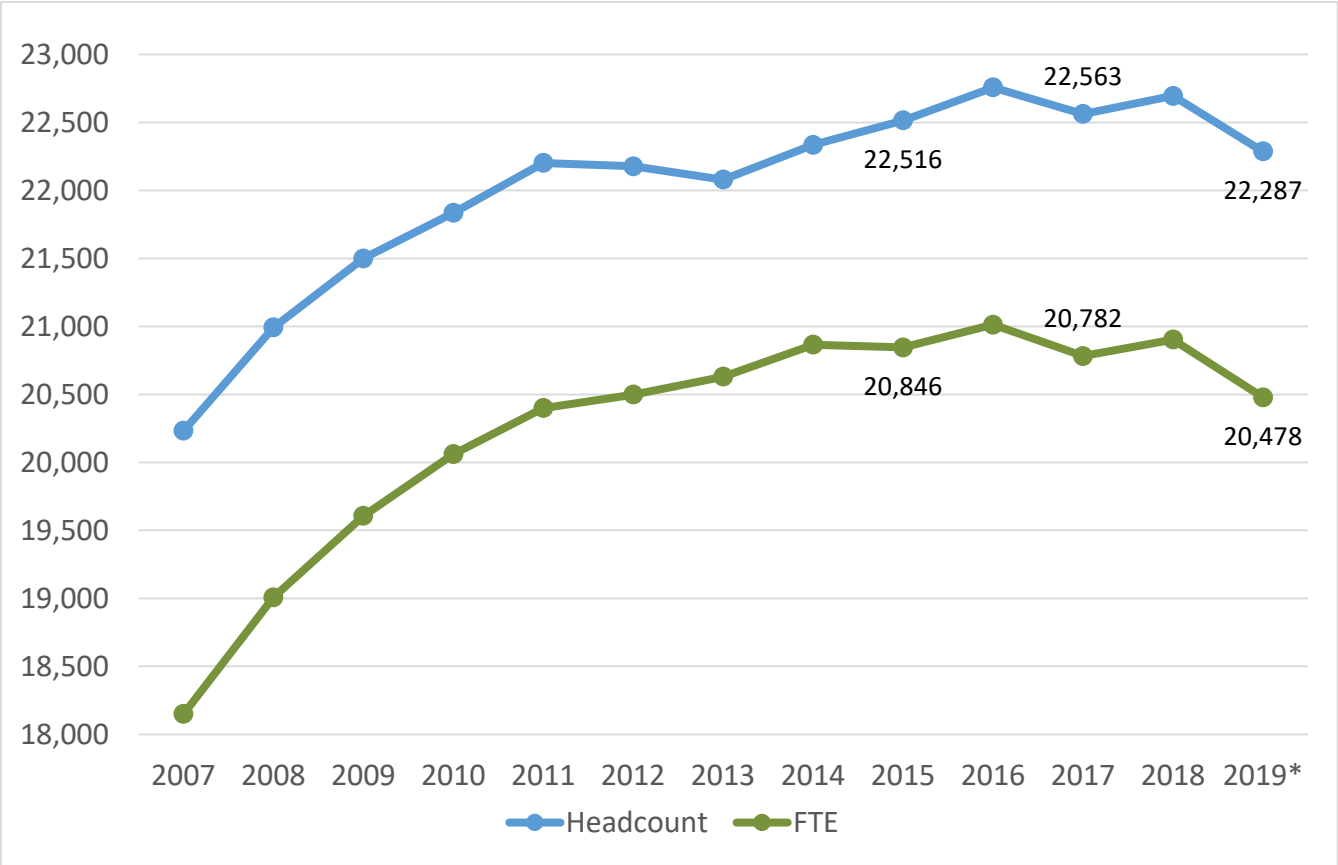

*As of Census I

Figure 3: Graduate and First Professional Out-of-State Enrollment

*As of Census I

III. UNDERGRADUATE ENROLLMENT

Figure 4: Fall 2007 to Fall 2019 Undergraduate Headcount and FTE Enrollments

*As of Census I

Note: FTEs are calculated by dividing the total number of student credit hours by 15.

Figure 5: Fall 2018 and Fall 2019 Undergraduate Enrollments By School

	Fall 2018			Fall 2019*		
	New	Continuing	Total	New	Continuing	Total
Engineering	544	1,260	1,804	467	1,297	1,764
Health Professions	34	181	215	27	195	222
Humanities and Sciences	3,628	8,380	12,008	3,558	8,228	11,786
LD Wilder School	200	835	1,035	226	781	1,007
School of Business	762	2,354	3,116	680	2,126	2,806
School of Dentistry	8	24	32	7	22	29
School of Education	0	0	0	5	4	9
School of Nursing	25	494	519	35	494	529
School of Social Work	107	222	329	91	257	348
School of the Arts	834	2,005	2,839	864	2,026	2,890
School of the Arts – Qatar	75	253	328	69	244	313
University College	8	113	121	13	175	188
VCU Life Sciences	83	266	349	103	293	396
Total	6,308	16,387	22,695	6,145	16,142	22,287

*As of Census I

IV. GRADUATE ENROLLMENT

Figure 6: Fall 2018 and Fall 2019 Master's Enrollments By School

	Fall 2018			Fall 2019*		
	New	Continuing	Total	New	Continuing	Total
Engineering	28	85	113	30	68	98
Graduate School	1	0	1	0	1	1
Health Professions	84	173	257	79	144	223
Humanities and Sciences	81	173	254	92	145	237
LD Wilder School	47	108	155	60	83	143
Office of the VP for Research	3	1	4	0	3	3
School of Business	350	422	772	326	468	794
School of Dentistry	15	19	34	16	19	35
School of Education	86	290	376	101	232	333
School of Medicine	53	83	136	56	82	138
School of Nursing	112	154	266	126	146	272
School of Pharmacy	3	5	8	6	4	10
School of Social Work	169	257	426	201	224	425
School of the Arts	57	84	141	57	66	123
School of the Arts – Qatar	6	8	14	6	5	11
Schools of Business & Engineering	0	6	6	0	0	0
VCU Life Sciences	14	26	40	11	35	46
da Vinci Center	2	16	18	2	21	23
Total	1,111	1,910	3,021	1,169	1,746	2,915

*As of Census I

Figure 7: Fall 2018 and Fall 2019 Doctoral Enrollments By School

	Fall 2018			Fall 2019*		
	New	Continuing	Total	New	Continuing	Total
Engineering	31	144	175	35	150	185
Health Professions	19	433	452	14	476	490
Humanities and Sciences	61	242	303	63	253	316
LD Wilder School	5	37	42	11	30	41
Office of the VP for Research	2	24	26	2	24	26
School of Business	3	20	23	7	14	21
School of Dentistry	0	5	5	1	6	7
School of Education	26	211	237	29	218	247
School of Medicine	38	181	219	45	159	204
School of Nursing	11	42	53	21	38	59
School of Pharmacy	14	32	46	18	39	57
School of Social Work	2	10	12	7	10	17
School of the Arts	0	6	6	0	5	5
VCU Life Sciences	11	30	41	11	36	47
Total	223	1,417	1,640	264	1,458	1,722

*As of Census I

V. RACE AND ETHNICITY

Figure 8: Freshman Enrollments by Race/Ethnicity

	2015	2016	2017	2018	2019*	2015	2016	2017	2018	2019*
African American	790	838	801	888	897	19.3%	19.8%	19.1%	19.3%	20.0%
American Indian / Alaskan Native	9	10	7	4	9	0.2%	0.2%	0.2%	0.1%	0.2%
Asian	633	598	647	756	711	15.5%	14.1%	15.4%	16.4%	15.9%
Hawaiian / Pacific Islander	3	3	1	4	1	0.1%	0.1%	0.0%	0.1%	0.0%
Hispanic	336	381	433	520	549	8.2%	9.0%	10.3%	11.3%	12.3%
International	119	114	98	110	80	2.9%	2.7%	2.3%	2.4%	1.8%
Not Reported	129	140	114	111	92	3.2%	3.3%	2.7%	2.4%	2.1%
Two or More Races	234	280	353	352	378	5.7%	6.6%	8.4%	7.7%	8.5%
White	1,837	1,870	1,747	1,855	1,758	44.9%	44.2%	41.6%	40.3%	39.3%
Total	4,090	4,234	4,201	4,600	4,475	100%	100%	100%	100%	100%

*As of Census I

Figure 9: University Enrollments by Race/Ethnicity

	2015	2016	2017	2018	2019*	2015	2016	2017	2018	2019*
African American	4,957	5,101	5,300	5,382	5,145	15.9%	16.3%	17.1%	17.3%	17.3%
American Indian / Alaskan Native	75	79	70	63	53	0.2%	0.3%	0.2%	0.2%	0.2%
Asian	3,769	3,822	3,892	4,032	3,902	12.1%	12.2%	12.5%	13.0%	13.2%
Hawaiian/Pacific Islander	42	38	37	27	22	0.1%	0.1%	0.1%	0.1%	0.1%
Hispanic	2,165	2,246	2,348	2,586	2,720	6.9%	7.2%	7.6%	8.3%	9.2%
International	1,703	1,600	1,452	1,260	1,150	5.5%	5.1%	4.7%	4.1%	3.9%
Not Reported	1,217	1,264	1,232	1,357	1,437	3.9%	4.0%	4.0%	4.4%	4.9%
Two or More Races	1,447	1,556	1,684	1,804	1,855	4.6%	5.0%	5.4%	5.8%	6.3%
White	15,867	15,525	15,021	14,565	13,395	50.8%	49.7%	48.4%	46.9%	45.1%
Total	31,242	31,231	31,036	31,076	29,679	100%	100%	100%	100%	100%

*As of Census I

VI. TRANSFER STUDENTS

Figure 10: Transfers

	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019*
Virginia's Community Colleges	1,264	1,430	1,334	1,411	1,573	1,453	1,516	1,310	1,221	1,158
Other Virginia Institutions	380	340	306	312	343	268	275	295	252	247
Non-Virginia Institutions	407	374	381	372	371	301	278	306	235	265
Total	2,043	2,144	2,021	2,095	2,287	2,022	2,069	1,911	1,708	1,670

*As of Census I

Figure 11: Top Feeder VCCS Institutions

	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019*
Northern Virginia Community Colleges	261	349	356	395	439	445	461	379	361	319
Reynolds Community College	358	336	368	340	380	323	347	294	241	221
John Tyler Community College	179	230	177	211	253	235	237	224	203	224
Tidewater Community Colleges	86	109	84	90	90	80	85	86	82	76
Germanna Community College	80	94	81	85	96	82	89	67	73	73
Total from VCCS	1,264	1,430	1,334	1,411	1,573	1,453	1,516	1,310	1,221	1,158

*As of Census I

VII. FRESHMAN PROFILE

Figure 12: Freshman Class Profile

	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019*
Number in Class	3,615	3,803	3,617	3,588	3,586	4,090	4,234	4,201	4,600	4,475
HS GPA Middle 50%	3.16-3.75	3.19-3.81	3.29-3.88	3.29-3.88	3.28-3.90	3.30-3.95	3.30-3.96	3.30-3.95	3.34-3.98	3.35-4.02
SAT Middle 50%	990-1190	980-1180	1020-1190	1010-1190	1010-1200	1000-1190	990-1190	1070-1250	1070-1250	1080-1250
Out-of-state	449	522	546	516	431	518	477	389	421	449
Percent Minority	44%	45%	44%	46%	46%	49%	50%	53%	57%	57%
First Generation	N/A	N/A	N/A	N/A	33%	33%	35%	33%	33%	31%
International	79	99	138	125	111	119	114	98	110	80

*As of Census I

VIII. FIRST GENERATION FIRST-TIME FRESHMEN

Figure 13: First Generation Freshmen By Race / Ethnicity

	Fall 2017 Number	Fall 2018 Number	Fall 2019* Number	Fall 2017 Pct. of Total	Fall 2018 Pct. of Total	Fall 2019* Pct. of Total
African American	359	400	378	44.8%	45.0%	42.1%
American Indian / Alaskan Native	4	0	1	57.1%	0.0%	11.1%
Asian	207	245	224	31.9%	32.4%	31.5%
Hawaiian/Pac Islander	1	0	0	100.0%	0.0%	0.0%
Hispanic	230	280	285	53.1%	53.8%	51.9%
International	36	34	15	36.7%	30.9%	18.7%
Not Reported	12	10	9	10.5%	9.0%	9.7%
Two or More Races	146	128	115	41.3%	36.3%	30.4%
White	399	417	364	22.8%	22.4%	20.7%
Total	1,394	1,514	1,391	33.1%	32.9%	31.0%

*As of Census I

IX. First-time Freshman Retention and Graduation Rates

One-year Retention Rate

83%
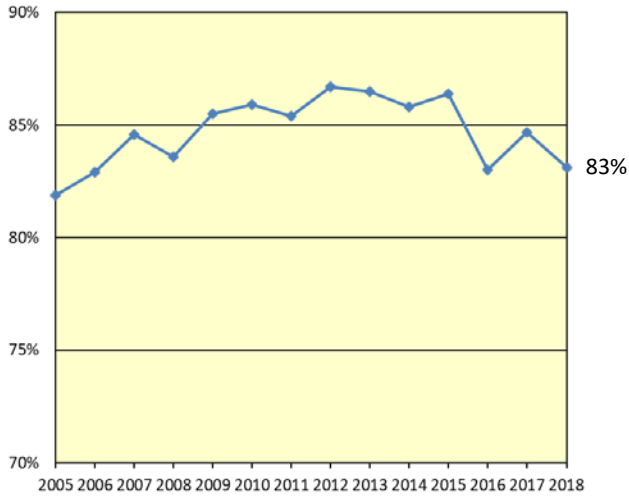
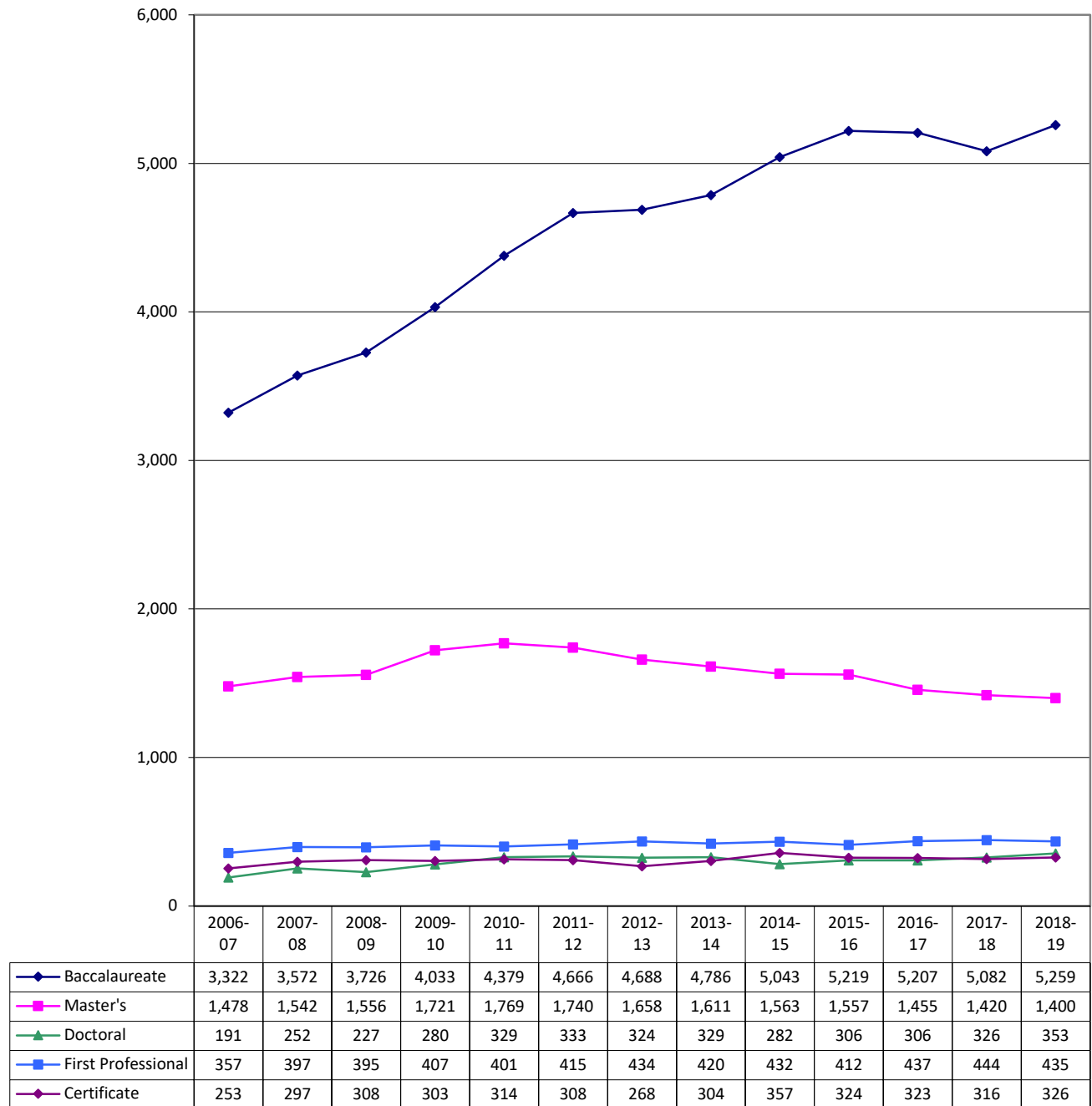### Two-year Retention Rate

75%
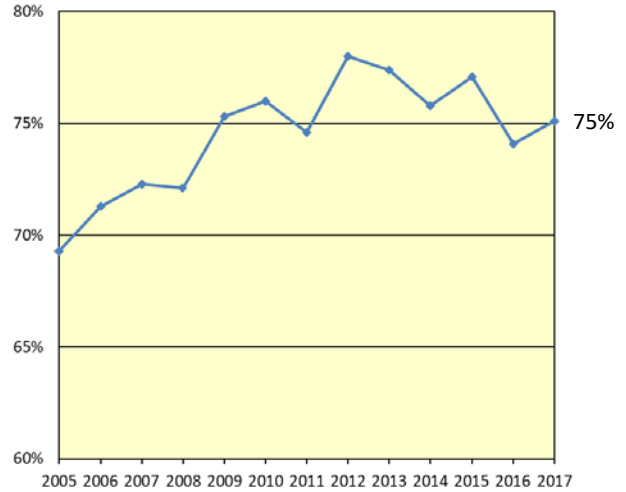
Four-year Graduation Rate

47%

Six-year Graduation Rate

67%
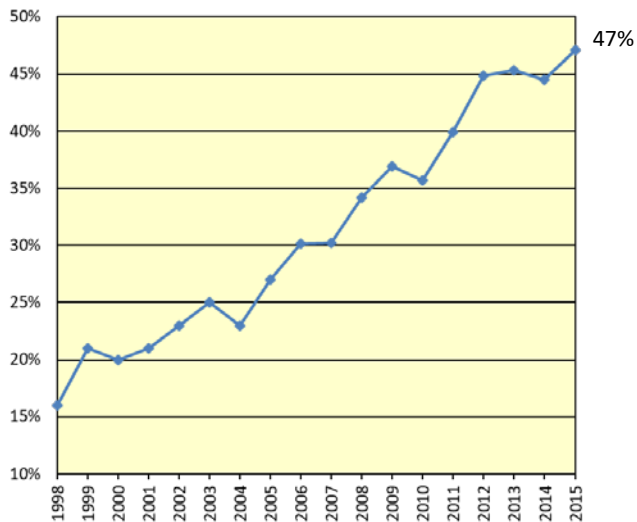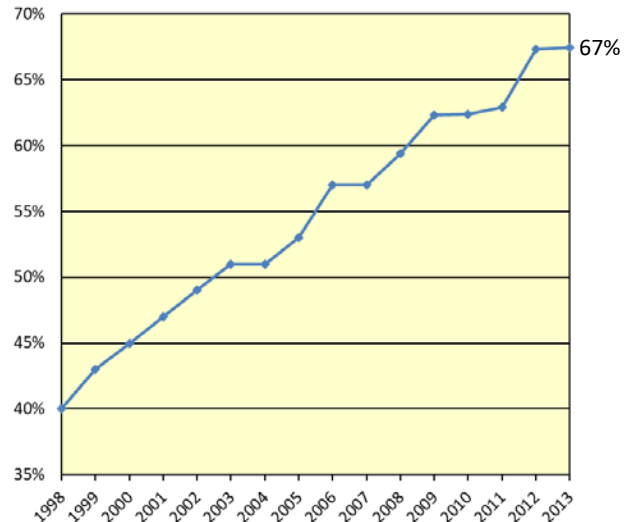
(Most recent rates are estimated and are not yet final)

X. DEGREES AND CERTIFICATES AWARDED

	2006-07	2007-08	2008-09	2009-10	2010-11	2011-12	2012-13	2013-14	2014-15	2015-16	2016-17	2017-18	2018-19
Baccalaureate	3,322	3,572	3,726	4,033	4,379	4,666	4,688	4,786	5,043	5,219	5,207	5,082	5,259
Master's	1,478	1,542	1,556	1,721	1,769	1,740	1,658	1,611	1,563	1,557	1,455	1,420	1,400
Doctoral	191	252	227	280	329	333	324	329	282	306	306	326	353
First Professional	357	397	395	407	401	415	434	420	432	412	437	444	435
Certificate	253	297	308	303	314	308	268	304	357	324	323	316	326

Key Issues Confronting Campus CEOs: Recommendations from the Field

ASSOCIATION OF
GOVERNING BOARDS
OF UNIVERSITIES AND COLLEGES

An AGB White Paper
February 2017

Key Issues Confronting Campus CEOs: Recommendations from the Field

INTRODUCTION

The Association of Governing Boards of Universities and Colleges convened its Council of Presidents, an advisory group of 35 college leaders from a wide variety of institutions across North America, on October 15-16, 2016. Given the depth and breadth of experience among those assembled, and the fact that they represented such a diverse cross-section of leaders, the meeting was an exceptional opportunity for them to share their experiences and insights on some of the most challenging issues confronting higher education today.

This white paper briefly summarizes some of the issues the presidents discussed, which included: 1) higher education's business model, 2) the regulatory environment and current state of accreditation, 3) campus climate, and 4) intercollegiate athletics. The presidents also engaged in a brief discussion about the impact of the impending November national elections which, given the speculative nature of forecasting, is not included here. After each issue, we've outlined the recommendations that emerged for fellow presidents —both in general and specifically when working with boards. AGB is distributing this paper in hopes it proves useful as you and your board grapple with these issues on your own campuses.

1: HIGHER EDUCATION'S BUSINESS MODEL

One of the most regularly discussed issues among presidents and boards is the business model of their specific institution. Virtually all aspects of the model are under stress: colleges and universities must contend with tuition prices rising faster than families' incomes and institutional expenses outpacing revenues, as well as deep tuition discounting, diminished public funding, uncertain philanthropic support, volatile endowment returns, and limited institutional debt capacity.

In response, some colleges and universities are embarking on entrepreneurial revenue-generating initiatives or forming new partnerships—sometimes with for-profit enterprises. Several institutions have partnered with real-estate investment trusts to develop student housing and retail space; the companies financed the projects and are now paying rent to the institutions. Other institutions are making significant cuts and trying to reduce expenses by, for example, hiring more part-time and adjunct faculty or outsourcing some operations.

Almost all colleges and universities are being forced to consider new arrangements and alignments. For instance, cooperative agreements are proliferating among many institutions, through which they realize savings and economies of scale in procuring supplies, in fulfilling administrative functions, and by sharing academic programs.

The financial challenges are also pressuring colleges and universities to adopt a new mindset. Although most institutions aren't inherently entrepreneurial, they must learn to be responsive to changing demands. To that end, some are hiring outside consultants to work with administrators and faculty members to help inculcate a more entrepreneurial way of thinking.

In its discussion of the issue, AGB's Council of Presidents made the following recommendations:

For Presidents

- Presidents should work with their boards, cabinets, and key constituencies to clearly define the mission of their institution. A college or university today can't afford to be all things to all people. It is vital that the institution clarify what it is, what kind of educational experience it wants to offer, and where it hopes to be in the future.

- Campus leaders can't merely tweak the current business model, which is increasingly unsustainable. In keeping with the established mission of the institution, presidents and other senior administrators should seek to add relevant new revenue streams. As part of that, they should diversify their institutions' product mix, adding new programs that fit with, and balance out, the current portfolio of offerings. Depending on only one product line—for example, liberal-arts courses—is increasingly less viable in today's environment.

- When conducting any assessment of new product lines or revenue-generating initiatives, presidents should be clear-eyed about their institution's true market. They should avoid being under any illusions and carefully consider the institution's business proposition in terms of its location, demographics, competing institutions, and other key trends.

- In such a challenging financial environment, institutions must be as efficient as possible. Poor organization, for example, can lead to overstaffing, so presidents and their cabinets should review operations with an eye for weeding out redundancies and less-efficient business processes. In addition, when it comes to cutting expenses, presidents would be well-advised to focus on those operations that support the institution's core mission and then outsource or make cuts in the others. Such an approach would allow the institution to reinvest the added revenue in mission-related areas.

- Given the changing demographics of potential students, presidents and boards should also consider extending the institutional mission to educate new populations. Many students coming to higher education are less affluent and less prepared than students in the past. These new demographics will have a direct impact on the higher education business model; as a result, institutions should not raise tuitions so high that they leave many low-income students out. Higher education must continue to innovate in order to provide access to learners in each new generation of students, whatever their backgrounds, and be prepared to educate them "where they are."

- Communication is the key to bringing all key constituencies on board when it comes to streamlining and re-energizing the business model. Presidents should educate everyone who works on the campus about why certain steps are being taken. They also need to lead in transforming the campus culture so that people won't simply assume that things should be a certain way because they always have been so in the past.

- Higher education is a public good as well as a private one; it contributes significantly to our entire society, not just to each individual who earns a degree. Presidents from various institutions should work together as a sector to emphasize to government leaders and others the need for greater public investment.

For Presidents and Their Boards

- Gone are the days when board meetings were predominantly cheerleading sessions or simply an arena for pro-forma reports from various committees. Board members must be educated in depth about their institution's business model and the issues surrounding it.

- Boards can't understand the business model of the institution if they don't understand its mission—and vice versa. They need to be clear about both, as they can't make key decisions without such knowledge and perspective.

- Boards, often made up of people with business expertise, can tend to focus on making cuts as the most direct and efficient way to sustain financial health. But they should be made aware that too much cutting can damage the quality of the institution as well as limit its ability to serve less-affluent students and needy segments of society. As one president put it, "We can't cut our way to success."

- At the same time, people in higher education should not just assume that business is so different that none of its principles can be applied to higher education. An open dialogue with board members should always be encouraged.

- Boards should consider restructuring their committees so that they are strategically aligned to think about the fundamental relationships among mission, goals, budget, markets, and other financial concerns. For instance, one university has established a financial health committee of the board, which focuses on issues related to admissions, fundraising, and other key areas.

Related Resources
- Stephen G. Pelletier, "Stress Testing: How Can You Ensure Your Institution's Fiscal Health?" (*Trusteeship*, September/October 2015).
- Natalie Krawitz, *The Board's Role in Financial Oversight* (AGB Press, 2015).
- Stephen M. Jordan, Charles A. Shorter, and Iris Weinshal, "A Tale of Two Cities: Using Public-Private Partnerships to Create Higher Education Opportunities" (*Trusteeship*, January/February 2013).

2: THE REGULATORY ENVIRONMENT AND CURRENT STATE OF ACCREDITATION

For many years, higher education has been bearing the burden of rapidly increasing regulatory activity at both the federal and state level. Colleges and universities have had to adapt to ever-growing demands for accountability from policymakers, regulators, and the public—including heightened scrutiny of their operations and outcomes. Often, the policies that have been put in place have done more harm than good, and recent initiatives by the American Council on Education, with the support of U.S. Senator Lamar Alexander (R-Tenn.), have highlighted some of the most expensive, time-consuming, and onerous requirements, in hopes that the most egregious over-regulation might be curtailed.

Meanwhile, higher education's own system of self-regulation—accreditation—is undergoing key changes and facing multiple challenges. The federal government's authority over accreditation is expanding significantly, which will ultimately have a major impact on the independence of the system as a whole, as well as on the individual colleges and universities that are accredited. In addition, policymakers and the public are pressuring accreditors to play a much stronger role in holding higher education institutions accountable. Some legislators, for instance, have called on accreditors to focus more on student success, higher graduation rates, lower student debt, and better jobs and earnings.

The next Congress will probably take up the reauthorization of the Higher Education Act, which contains proposals to both streamline accreditation and add outcomes measures to the regional accreditation process. That process has already been shining a brighter light on board governance, as boards are increasingly being seen as agents for ensuring an institution's accountability to its constituencies and the public.

In its discussion of the issue, AGB's Council of Presidents made the following recommendations:

For Presidents

- Colleges and universities should collaborate in a more strategic way to educate legislators and government officials on the issues. Often, such policymakers aren't aware of the many lines of operations that higher education institutions are involved in and the negative repercussions that so many regulatory burdens can have. As one possible step, presidents might work more collaboratively with government leaders such as Sen. Alexander in efforts to help ease the regulatory burden.

- At their individual colleges and universities, presidents and other senior administrators should try to identify metrics around the cost of compliance to help demonstrate the institutional investment required to comply with so many regulations.

- They should also work within their institutions to identify redundancies and other unnecessary investments required to comply with regulations, and share these with key policymakers. For example, a university led by one of the presidents at the council meeting discovered that 14 different agencies oversee animal research.

- When making the case to policymakers and the public, messaging matters. Rather than emphasizing the cost to the institution, campus leaders should explain that filling out forms and complying with regulations requires time and money that could otherwise be invested in educating students.

For Presidents and Their Boards

- Presidents should help educate boards about issues related to compliance and accreditation, including how they relate to the institution's business model. While boards are growing increasingly aware of those issues, and the stakes, they often remain removed from the process rather than engaging at an appropriate level.

- As accreditors increasingly hold boards accountable, presidents should continue to help their trustees understand their role and their duties as fiduciaries to their institution. AGB and the accreditors themselves can be helpful in this regard.

- Colleges and universities should enlist board members as advocates to help explain to policymakers the concerns about over-regulation and inappropriate government involvement in institutional operations.

- Boards should rethink their committee structures to deal with emerging issues in compliance and accreditation. For instance, one college expanded its audit committee into an audit, risk, and compliance committee.

Related Resources

- Wesley T. Dellinger, "Navigating Accreditation Issues with a New President and Board Chair" (*Trusteeship*, July/August 2014).
- Peter F. Lake, "Welcome to Compliance U: The Board's Role in the Regulatory Era" (*Trusteeship*, July/August 2013).
- "AGB-CHEA Joint Advisory Statement on Accreditation & Governing Boards" (AGB, 2009).
- "What Does the 'Federalization' of Accreditation Mean for Boards of Institutions?" (*Trusteeship*, May/June 2001).

3: CAMPUS CLIMATE

A fundamental role of higher education is to help students learn to understand and value different perspectives, and colleges and universities have traditionally been environments where many points of view can be expressed and discussed with respect. Yet campuses have recently been sites of highly visible campus protests around the issues of social justice, inclusion, and free speech, as well as a wide-ranging set of other topics including racism, religion, and curriculum content. A survey conducted by the Higher Education Research Institute of the University of California at Los Angeles suggests that the unrest will probably continue: almost 1 in 10 incoming freshmen in America said they planned to participate in student protests while in college—the highest percentage since the survey was first conducted five decades ago.

For presidents, the ongoing campus unrest is a leadership issue that will require continuing attention and fresh ideas. They must work with their boards to make sure their institutions are providing a respectful and inclusive learning environment for all students long before the protests occur. Presidents should take a broad view and understand the relationships between the issues being raised on campuses today and the missions of their institutions. They should see their students' need to voice their concerns as an opportunity for dialogue and education.

Boards must also play a role, as well. The "AGB Board of Directors' Statement on Governing Board Accountability for Campus Climate, Inclusion, and Civility," published in summer 2016, encourages boards to become knowledgeable about the root causes of those heightened concerns. It also calls on boards to ensure that policies are in place to protect higher education's most salient values, while grappling with emerging problems in a proactive manner.

In its discussion of the issue, AGB's Council of Presidents made the following recommendations:

For Presidents

- Presidents are often seen as either for or against campus protests or other incidents at their institutions. Instead, they should work to be leading spokespersons on how change happens at their college or university, who gets to lead that change, and what roles key constituencies—such as students and faculty members—should play. Presidents should also speak out on controversial topics like misogyny, racism, inequity, and other key matters; they should become models for how to talk about such issues.

- Presidents and other campus leaders should make a point of listening to students and their concerns, of understanding their experiences and cultures. They should be open to the ways their college or university might change—rather than simply expect students from increasingly diverse backgrounds to adapt themselves to the institution.

- Presidents and other campus leaders need to be honest about the real history and narrative of their individual institutions. They should not try to sugarcoat the past or ignore parts of it that don't comport with an idealized view. All colleges and universities are, and should be, continually evolving as institutions.

- College leaders must also help educate students on how to appropriately express themselves. While protests and loud words can gain attention, often what is missing is a philosophical framework in which to ground them. Students need education on the broader context of their concerns, as well as on some of the real risks that can accompany speaking out.

- Presidents might want to consider conducting a risk-management audit of their institution, in which a risk is defined as anything that gets in the way of student success. That includes racism and other campus-climate issues. If students feel that the institution is working to help remove any such barriers to their success in college, the conversation can change dramatically. One president who participated in the meeting noted that engaging an outside organization to conduct an audit of campus climate can be very helpful.

- It is easy and all-too-human to react in the moment" to incidents on campus rather than considering the larger context in which those incidents occur. Senior administrators from various colleges and universities should meet together regionally or nationally to examine the common issues being raised at their individual institutions and explore the longer-term implications of the various isolated, yet similarly motivated, student demonstrations. Faculty members and students should also be invited to participate.

For Presidents and Their Boards

- Boards have a vital role to play in ensuring that the institutions they serve maintain cultures in which people on the campus can express and discuss differing opinions. That entails welcoming diverse populations with many points of view and encouraging them to come together where free and open discourse can occur in a civil environment.

- As AGB's recent statement on the topic has noted, "Boards should periodically review campus climate policies and ensure those policies are up-to-date and consistent with institutional mission and relevant laws and regulations" regarding matters of diversity, inclusion, freedom of expression, and academic freedom.

- The statement also recommends that the chief executive regularly inform the board about challenges concerning campus culture and any instances of protest and engagement by various constituencies, as well as potential risk areas.

- Chief executives should also encourage boards to have direct engagement with students and other stakeholders to help them understand their sensitivities, concerns, and priorities. This can be facilitated during board meetings on campus by inviting constituents to take part in social opportunities at which board members will be present.

Related Resources
- Julianne Basinger, "Campus Unrest" (*Trusteeship*, November/December 2016).
- "AGB Board of Directors' Statement on Governing Board Accountability for Campus Climate, Inclusion, and Civility" (AGB, 2016).
- Marc A. Nivet, "Diversity Questions for Boards" (*Trusteeship*, May/June 2014).
- "Why Boards Must Become Diversity Stewards" (*Trusteeship*, May/June 2014).
- Kevin P. Reilly, "We Must Build a Culture of Civility on Campus" (*Trusteeship*, March/April 2011).

4: INTERCOLLEGIATE ATHLETICS

Well-run intercollegiate athletics programs offer some clear benefits to colleges and universities, and their students. They can provide growth opportunities for individual student athletes, build cohesiveness and a sense of community within the student body, and engage alumni and other constituencies in the life of the institution beyond just athletics. They present opportunities to introduce new audiences to the institution's academic offerings and achievements that those audiences might otherwise be unaware of. Some colleges and universities have intentionally invested in athletics programs to refresh their institutional brand.

But intercollegiate athletics can also present problems and challenges across almost all sectors of institutional life, in a myriad of ways. Very few institutions gain net revenue from the overall effort, and the expenses related to college sports—often quite significant—can directly undercut any initiatives to contain costs, creating not only financial but public relations problems. At the same time, court decisions and other pending issues are having a pronounced impact on how colleges and universities fund their sports programs. Recent legislation in Virginia, for example, limits the percentage of athletic program budgets that can be paid for through mandatory student fees. In addition, intercollegiate athletics programs bring risks, including poor academic performance, breaches in academic integrity, concussions and other injuries, and sexual assaults, among others.

For their part, boards remain among many institutions' biggest boosters of intercollegiate athletics programs. AGB has encouraged board members to understand their appropriate fiduciary role in college sports. The pressure to field winning teams in an environment of overall disruption to the higher education sector creates challenges that presidents and boards must address. The president and board should carefully review the athletic program's impact on their institution's mission and budget, student well-being, and other important considerations.

In its discussion of the issue, AGB's Council of Presidents made the following recommendations:

For Presidents

- Presidents should consider whether, and to what degree, the institution's athletics programs align with its mission.

- Presidents must also stay on top of the financial challenges that intercollegiate athletics programs raise. They must grapple with how to obtain and sustain resources for their athletics teams to compete regionally and nationally, as expenditures on coaches' salaries, equipment, and facilities continue to skyrocket. At a time when the business model is under such stress, they can't expect resources to keep pace, nor can they simply raise student fees to cover their costs—a practice that is increasingly controversial.

- Presidents must also be aware of growing legal challenges related to intercollegiate athletics, such as the O'Bannon case (an antitrust lawsuit filed against the National Collegiate Athletic Association that challenged the use of images of former athletes for commercial purposes), class-action suits regarding concussions, and investigations into sexual assaults by athletes conducted by the U.S. Department of Education's Office of Civil Rights.

- Presidents should view athletics as one part of a student-centered environment. A number of institutions have been making a conscious and significant effort to improve the graduation and retention rates of student athletes. They've also been putting in place other policies, for example, requiring athletes to commit to a certain number of hours of community service in order to play.

- Presidents can also emphasize and support the role that athletics programs, whether intercollegiate or intramural, should play as educational vehicles for students. For example, one president at the meeting spoke of how sports can be integral to creating vital and unparalleled leadership and growth opportunities for student-athletes. Another president described how institutions can use athletics to help students build career paths in fields like orthopedic medicine and kinesiology. Colleges and universities can also help prepare students to be professional athletes, if they choose such a path, through programs on personal financial planning and other relevant topics.

For Presidents and Their Boards

- Chief executives should educate and inform their boards about issues concerning intercollegiate athletics at their institutions and make sure that they are aware of their responsibilities in this arena. For example, one president at the meeting described how his university's board established an athletics committee in order to be appropriately involved. As the "AGB Statement on Board Responsibilities for Intercollegiate Athletics" states, "The governing board is ultimately accountable for athletics policy and oversight and should fulfill this fiduciary responsibility." It goes on to say, "Effective oversight requires that the board be informed about the risks and challenges of intercollegiate athletics programs and engage in questions of policy concerning intercollegiate athletics."

- Boards should ensure that the institution's mission steers its intercollegiate athletics programs, rather than vice versa, and that those programs are integrated appropriately into the culture and structure of the institution.

- The chief executive should provide the board with relevant financial information concerning intercollegiate athletics, along with indicators of the academic progress of student athletes and student well-being.

- Boards should also be informed about whether the institution is in compliance with the regulations of the various athletic conferences and the National Collegiate Athletic Association, and annually certify that it is.

Related Resources

- John T. Casteen, "What Does HB 1897 Mean for Athletics?" (*Trusteeship*, July/August 2016).
- John T. Casteen and Richard D. Legon, "Governance and Intercollegiate Athletics: Boards Must Know the Score" (*Trusteeship*, November/December 2012).
- "Trust, Accountability, and Integrity: Board Responsibility for Intercollegiate Athletics" (AGB, 2011).
- "AGB Statement on Board Responsibilities for Intercollegiate Athletics" (AGB, 2009).

Virginia Commonwealth University
Proposed Program Brief

Proposal to Modify
Nursing M.S.

<u>Overview</u>

Currently, there are five concentrations within VCU's Nursing M.S. program. Four prepare nursing professionals to provide direct, clinical care to patients and the fifth prepares nursing professionals to provide indirect care as nurse administrators:

    Direct Care Concentrations
        1. Adult-Gerontology Acute Care Nurse Practitioner (AGACNP)
        2. Adult-Gerontology Primary Care Nurse Practitioner (AGPCNP)
        3. Family Nurse Practitioner (FNP)
        4. Psychiatric Mental Health Nurse Practitioner (PMHNP)

    Indirect Care Concentration
        5. Nursing Administration and Leadership (NAL)

VCU seeks modifications to the Nursing M.S. to:

1) reduce by 7 credits the current 51 credit hour program to create a 44 credit-hour Nursing M.S.
2) establish a 23 credit-hour core for the Nursing M.S.
3) include a concentration for Nurse Leadership and Organizational Science that
    a) shares only 12 credit-hours of the 23 credit-hour core for the M.S. in Nursing
    b) comprises 35 credits to degree

The Nursing M.S. degree program can be traced to March 20, 1967 when the State Council for Higher Education in Virginia granted the request for the Medical College of Virginia "to offer the program leading to the degree of Master of Science with a major in Nursing, effective September 1968."

The proposed modifications are in response to two factors. First, in 2017 an internal audit of the School of Nursing degree programs disclosed that the Nursing M.S. did not meet SCHEV policy requirements for 50% shared credits for master's degree programs. Second, external reviews and consultations in 2017 and 2018 stimulated the Nursing M.S. faculty to update and streamline the curriculum.

<u>Method of Delivery</u>
The four concentrations preparing nurses for clinical care can be completed in face-to-face or hybrid formats. The fifth concentration, which prepares nurses for administration and leadership is fully online.

<u>Target Implementation Date</u>
Fall 2020.

<u>Demand and Workforce Development</u>
A nursing workforce with advanced education as nurse practitioners will mitigate the effects of the shortage of physicians in the United States. Based on research commissioned by the American Association of Medical Colleges in 2017, "The latest projections continue to align with previous estimates, showing a projected

shortage of between 40,800 and 104,900 doctors."[1] Advanced Practice Nurses (APN), including Nurse Practitioners (NP) and nursing administrators, are key to meeting the anticipated need for healthcare providers.[2] For example, according to Pohl et al. (2018), "the trends for physicians and NPs have been striking in their contrasts…. not only are the numbers of nurse practitioners who are prepared as primary care providers surging, their numbers in practice, in both rural and non-rural settings, are increasing."[3] Further, Heath (2018) reports "Seventy-eight percent of nurse practitioners – 204,000 out of 262,000 – practice primary care, a far cry from the 33 percent of physicians to specialize in primary care."[4]

External Competition
Eleven universities in Virginia offer a Nursing M.S. degree.

George Mason University	George Washington University
Hampton University	James Madison University
Jefferson College of Health Sciences	Liberty University
Marymount University	Old Dominion University
Shenandoah University	University of Virginia

Of these, only George Washington University and VCU offer curriculum leading to certification in the same five distinct areas of advanced nursing.

Target Population
The target population for the Nursing M.S. degree program is nurses with a current R.N. license or authorization to practice as a nurse in the U.S.

Impact on Existing Programs/Policies
As this program is already well established, there will be no impact on other programs at VCU or any VCU policies.

Impact on Faculty
No new faculty hires are needed to implement and sustain the program.

Funding
The program will incur no additional expenses.

Benefit to the University
The Nursing M.S. will be able to continue meeting workforce needs for highly prepared nurses for advance clinical and administrative positions.

Next Steps

[1] Heiser, S. (2017, March 14). New research reaffirms physician shortage. Retrieved from https://news.aamc.org/press-releases/article/workforce_projections_03142017/

[2] American Association of Colleges of Nursing (AACN). (2017, April 26). *Nursing faculty shortage fact sheet.* Retrieved from http://www.aacnnursing.org/News-Information/Fact-Sheets/Nursing-Faculty-Shortage

[3] Pohl, J., Thomas, A., Bigley, M.B. & Kopanos, T. (2018, December 13). Primary Care Workforce Data and the need for Nurse Practitioner Full Practice Authority. Health Affairs Blog. Retrieved from https://www.healthaffairs.org/do/10.1377/hblog20181211.872778/full/

[4] Heath, S. (2018). *NPs, PAs could reduce primary care physician shortage nearly 70%.* Retrieved from https://patientengagementhit.com/news/nps-pas-could-reduce-primary-care-physician-shortage-nearly-70

Approving Body	Date	Action
• University Graduate Committee's Programs and Courses	3/26/2019	approved
• University Graduate Committee	4/9/2019	approved
• University Council Academic Affairs and University Policy	4/25/2019	approved
• University Council	5/2/2019	approved
• President's Cabinet	8/28/2019	approved
• Board of Visitors	9/13/2019	

Full Proposal
- See attached.

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<u>Description of Proposed Modified Program</u>

Modification Background

Virginia Commonwealth University (VCU) requests approval for substantial modification of its current Nursing M.S. degree program. The proposed modified degree program resides in the School of Nursing. The target initiation date is fall 2020.

VCU seeks modifications to the Nursing M.S. to:

1) reduce by 7 credits the current 51 credit hour program to create a 44 credit-hour Nursing M.S.
2) establish a 23 credit-hour core for the Nursing M.S.
3) include a concentration for Nursing Administration and Leadership that
   a) shares 12 credit-hours of the 23 credit-hour core for the M.S. in Nursing
   b) comprises 35 credits to degree

The Nursing M.S. degree program can be traced to March 20, 1967 when the State Council for Higher Education in Virginia granted the request for the Medical College of Virginia "to offer the program leading to the degree of Master of Science with a major in Nursing, effective September 1968." The Nursing M.S. program first appears in the 1969-1971 bulletin, *Medical College of Virginia, Health Sciences Division of Virginia Commonwealth University* describing areas of emphasis that are the progenitors of the current degree program's five concentrations: "Programs of nursing are offered [at VCU] with emphasis on preparation for teaching or clinical specialization in medical-surgical, maternal-child, and psychiatric-mental health nursing. Preparation for supervision in public health nursing is offered."

Currently, there are five concentrations within VCU's Nursing M.S. program. Four prepare nursing professionals to provide direct, clinical care to patients and the fifth prepares nursing professionals to provide indirect care as nurse administrators:

Direct Care Concentrations
1. Adult-Gerontology Acute Care Nurse Practitioner (AGACNP)
2. Adult-Gerontology Primary Care Nurse Practitioner (AGPCNP)
3. Family Nurse Practitioner (FNP)
4. Psychiatric Mental Health Nurse Practitioner (PMHNP)

Indirect Care Concentration
5. Nursing Administration and Leadership (NAL)

The purpose of the proposed modified program is to create a 23-credit core curriculum to prepare nursing professionals pursuing one of four clinical, direct-care concentrations and a 29-credit core for nursing professionals pursuing an administration, indirect care concentration. The two cores will have 12 credits of coursework in common.

3.1.19

The proposed modifications are in response to two factors. First, in 2017 an internal audit of the School of Nursing degree programs disclosed that the Nursing M.S. did not meet SCHEV policy for a common core of courses of 50% of the total credit hours required for a master's degree programs. Second, external reviews and consultations regarding the Nursing M.S. program yielded the following: In 2017, Susie Adams, Ph.D., R.N., from Vanderbilt University, identified areas of strength as well as those in need of improvement that stimulated this work on program modifications. Also in 2017, Michael Bleich, Ph.D., R.N. President and CEO, from NursDynamics, LLC, consulted with the nursing faculty to develop a contemporary curriculum for nursing leaders. Finally, in 2018, Dean Laurie Clabo from Wayne State University met with the VCU nursing faculty and presented "Competency-Based Education: Implications for Nursing Curricula."

Graduates of VCU's Nursing M.S. program develop proficiency in nursing content and skills that will enable them to provide high quality and safe care. VCU graduates, with their technical skills, critical thinking and judgement, and competencies in verbal and written communication are prepared to meet healthcare employment demands for primary care, acute care and health care administration.

Admission

To be considered for admission to the School of Nursing, all applicants must:
- Meet the general admission requirements of the VCU Graduate School
- Submit all official college transcripts from each college attended, including concurrent college enrollment transcripts
- Be eligible for readmission or in good standing at the last college attended
- Be a baccalaureate (or higher) graduate of an accredited (ACEN, CCNE or CNEA) nursing program
- Have a current unrestricted R.N. license or authorization to practice as an R.N. in the U.S.
- Submit three (3) academic and/or professional references
- Write a personal statement
- Submit a resume/CV

International students must provide evidence of English language proficiency before admission and/or enrollment in the university. This can be satisfied with one of the following:
- A minimum TOEFL score of 550 (paper-based) or 80 (internet based)
- A minimum IELTS score of 6.5
- A PTE minimum score of 65

Modified Degree Program

The Nursing M.S. is being modified in three ways. First, reduce by 7 credits the current 51 credit hour program to create a 44 credit hour Nursing M.S. with four concentrations in direct, clinical care; second, create a 23 credit core curriculum; and third, offer a fifth concentration for nursing administration that shares only 12 of the 23 core credits and that comprises only 35 credits to degree.

3.1.19

The current and proposed curriculum for Nursing M.S. is divided into two tables. The first table presents the current and proposed curriculum for the four concentrations leading to clinical, direct care. The second table presents the current and proposed curriculum for the nursing administration, indirect care concentration.

Current and Proposed Curriculum

Nursing M.S. Current Curriculum for Direct Care Concentrations Modified Curriculum for Direct Care Concentrations			
Current Curriculum Core Courses for Direct Care Concentrations		Proposed, Modified Core Courses for Direct Care Concentrations	
NURS 501 Advanced Professionalism I	1	NURS 502 Advanced Pharmacology	3
NURS 502 Advanced Pharmacology	3	NURS 504 Advanced Pathophysiology	3
NURS 503 Ethics, Advanced Nursing Practice, and the Healthcare Environment	3	NURS 511 Advanced Health Assessment	3
NURS 504 Advanced Pathophysiology	3	NURS 512 Foundations for Evidence-Based Practice	3
NURS 507 Health Promotion and Disease Prevention Across the Lifespan	4	NURS 520 Professional Transitions for the Advanced Practice Nurse	2
NURS 508 Policy, Process & Systems for Advanced Nursing Practice	3	NURS 607 Epidemiology and Population Health	3
NURS 511 Health Assessment for Advanced Practice Nursing	3	NURS 638 Health Policy, Leadership and Advocacy	3
NURS 512 Evidence-Based Advanced Nursing Practice	3	NURS 640 Teamwork in Complex Clinical Situations	3
NURS 601 Advanced Professionalism II	1		
Total Core Credits	24	Total Core Credits	23
Direct Care Concentrations (choose one)		Direct Care Concentrations (choose one)	
Adult-Gerontology Acute Care Nurse Practitioner Concentration		Adult-Gerontology Acute Care Nurse Practitioner Concentration	
NURS 611 Primary Care Advanced Practice Procedures	1	NURS 580 Primary Care of the Adult-Gerontology Population	4
NURS 612 Acute Care Advanced Practice Procedures	1	NURS 581 Adult-Gerontology Acute Care Practicum I	2
NURS 618 Diagnosis and Management in Adult Gerontology Acute Care I	3	NURS 619 Acute and Complex Health Conditions of the Adult-Gerontology Population	3
NURS 619 Diagnosis and Management in Adult-Gerontology Acute Care II	3	NURS 662 Care of the Adult-Gerontology Population in the Critical Care Setting	4

3.1.19

NURS 620 Geropharmacology	1	NURS 669 Adult-Gerontology Acute Care Practicum II	4
NURS 662 Diagnosis and Management in Adult Gerontology Critical Care	4	NURS 689 Adult-Gerontology Acute Care Practicum III	4
NURS 669 Adult Gerontology Acute Care Practicum II	4		
NURS 678 Adult Gerontology Acute Care Practicum I	3		
NURS 679 Adult Gerontology Acute Care Practicum III	5		
Credits for Concentration	**25**	**Credits for Concentration**	**21**
Total Credits to Degree: Nursing M.S. - Adult-Gerontology Acute Care Nurse Practitioner Concentration	**49**	**Total Credits to Degree: Nursing M.S. - Adult-Gerontology Acute Care Nurse Practitioner Concentration**	**44**
Concentration: Adult-Gerontology Primary Care Nurse Practitioner		**Concentration: Adult-Gerontology Primary Care Nurse Practitioner**	
NURS 611 Primary Care Advanced Practice Procedures	1	NURS 580 Primary Care of the Adult-Gerontology Population	4
NURS 615 Diagnosis and Management in Adult Gerontology Primary Care I	3	NURS 596 Adult-Gerontology Primary Care Practicum I	2
NURS 616 Diagnosis and Management in Adult-Gerontology Primary Care II	3	NURS 617 Advanced Gerontology Primary Care Across the Care Continuum	4
NURS 617 Advanced Gerontology Primary Care Across the Care Continuum	4	NURS 619 Acute and Complex Health Conditions of the Adult-Gerontology Population	3
NURS 620 Geropharmacology	1	NURS 675 Adult-Gerontology Primary Care Practicum II	4
NURS 675 Adult Gerontology Primary Care Practicum II	3	NURS 688 Adult-Gerontology Primary Care Practicum III	4
NURS 676 Adult Gerontology Primary Care Practicum I	4		
NURS 677 Adult Gerontology Primary Care Practicum III	5		
Credits for Concentration	**24**	**Credits for Concentration**	**21**
Total Credits to Degree: Nursing M.S. - Adult-Gerontology Primary Care Nurse Practitioner Concentration	**48**	**Total Credits to Degree: Nursing M.S. - Adult-Gerontology Primary Care Nurse Practitioner Concentration**	**44**
Family Nurse Practitioner Concentration		**Family Nurse Practitioner Concentration**	
NURS 611 Primary Care Advanced Practice Procedures	1	NURS 580 Primary Care of the Adult-Gerontology Population	4
NURS 627 Foundational Perspectives of Family Centered Care	2	NURS 589 Maternal and Child Health in Primary Care	3

NURS 629 Diagnosis and Management in Family Primary Care I	4	NURS 590 Complex Problems in Family Primary Care	4
NURS 630 Diagnosis and Management in Family Primary Care II	4	NURS 595 Family Primary Care Practicum I	2
NURS 631 Primary Care of Select Populations	2	NURS 642 Family Primary Care Practicum II	4
NURS 643 Family Primary Care Practicum I	6	NURS 658 Family Primary Care Practicum III	4
NURS 644 Family Primary Care Seminar	1		
NURS 645 Family Primary Care Practicum II	6		
NURS 646 Family Primary Care Final Synthesis Seminar	1		
Credits for Concentration	**27**	**Credits for Concentration**	**21**
Total Credits to Degree: Nursing MS - Family Nurse Practitioner Concentration	**51**	**Total Credits to Degree: Nursing MS - Family Nurse Practitioner Concentration**	**44**
Concentration: Psychiatric-Mental Health Nurse Practitioner		**Concentration: Psychiatric-Mental Health Nurse Practitioner**	
NURS 635 Advanced Practice Psychiatric Mental Health Nursing Practicum I	6	NURS 521 Psychiatric Disorders Across the Lifespan	4
NURS 636 Advanced Practice Psychiatric Mental health Nursing Seminar	3	NURS 522 Psychopharmacology for Advanced Practice	3
NURS 637 Advanced Practice Psychiatric Mental Health Nursing Practicum II	6	NURS 597 Psychiatric Mental Health Practicum I	2
NURS 656 Diagnosis and Management of Psychiatric Disorders Across the Lifespan	4	NURS 598 Managing Psychiatric Disorders in Special and Vulnerable Populations	2
NURS 657 Advanced Practice Psychiatric Mental Health Nursing: Theory and Practice Across the Lifespan	4	NURS 602 Psychotherapy: Theory and Practice	2
		NURS 641 Psychiatric Mental Health Practicum II	4
		NURS 659 Psychiatric Mental Health Practicum III	4
Credits for Concentration	**23**	**Credits for Concentration**	**21**
Total Credits to Degree: Nursing M.S. - Psychiatric-Mental Health Nurse Practitioner Concentration	**47**	**Total Credits to Degree: Nursing M.S. - Psychiatric-Mental Health Nurse Practitioner Concentration**	**44**

3.1.19

Nursing M.S. Current Curriculum for Indirect Care Concentration		Nursing M.S. Proposed Modified Curriculum for Indirect Care Concentration	
Nursing M.S. - Nursing Administration and Leadership Concentration		**Nursing M.S. - Nursing Leadership and Organizational Science Concentration**	
Core Courses		**Core Courses**	
NURS 503 Ethics, Advanced Nursing Practice, and the Healthcare Environment	3	NURS 512 Foundations for Evidence-Based Practice[a]	3
NURS 505 Advanced Nursing Practice: Foundations in Health Care Finance	3	NURS 515 Holistic Leadership in Healthcare Delivery	3
NURS 508 Policy, Process & Systems for Advanced Nursing Practice	3	NURS 517 Organizational Science Implications for Human and Material Resource Management	3
NURS 512 Evidence-Based Advanced Nursing Practice	3	NURS 603 Improvement Science and Outcomes Management	3
NURS 609 Health Care Delivery and Reimbursement System for Nurse Leaders	3	NURS 604 Applied Budgeting and Finance	3
NURS 613 Organizational Behavior and Leadership for Nurse Leaders	3	NURS 607 Epidemiology and Population Health[a]	3
NURS 614 Organizational Systems and Leadership for Nurse Leaders	3	NURS 628 Practicum in Nursing Leadership and Organizational Science	5
NURS 639 Health Informatics for Nurse Leaders	3	NURS 638 Health Policy, Leadership and Advocacy[a]	3
NURS 651 Decision Analysis for Quality Outcomes Across Populations	3	NURS 640 Teamwork in Complex Clinical Situations[a]	3
NURS 652 Health Care Managerial Finance I: for Nurse Leaders	3	Electives	
NURS 653 Health Care Managerial Finance II: Economic Evaluation and Analysis	3	Students select 6 credits of restricted electives	6
NURS 666 Strategic and Change Management for Quality Outcomes for Nurse Leaders	3	[a]Nursing Leadership and Organizational Science core credit shared with Nursing M.S. direct-care concentrations	
NURS 668 Human Resource (HR) and Customer Relationship Management for Nurse Leaders	3		
NURS 695 Managing for Performance and Health Care Outcomes	3		
NURS 696 Practicum I, Comparative Health Care Delivery Systems for Nurse Leaders	2		

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NURS 697 Practicum II: Comparative Interdisciplinary Health Care Leadership Roles	1		
NURS 698 Practicum III: Applied Integrative Health Care Delivery Leadership	3		
Total Core Nursing Administration and Leadership credits	**35**	**Total Core Nursing Leadership and Organizational Science credits**	**29**
Total restricted elective credits	**0**	**Total restricted elective credits**	**6**
Total Credits to Degree: Nursing M.S. - Nursing Administration and Leadership Program	**41**	**Total Credits to Degree: Nursing M.S. - Nursing Leadership and Organizational Science credits**	**35**

Curriculum

The Nursing M.S. degree program will require 44 credits for each of the four nurse practitioner concentrations and 35 credits in the nursing administration concentration.   The curriculum is designed to align with the standards published by the American Association of Colleges of Nursing (AACN) in 2011 titled The Essentials of Master's Education. AACN acknowledges, "Some graduates will pursue direct care practice roles in a variety of settings (e.g., the Clinical Nurse Leader, nurse educator). Others may choose indirect care roles or areas of practice that focus on aggregate, systems, or have an organizational focus, (e.g. nursing or health program management, [nursing administration], informatics, public health, or clinical research coordinator)."[1]

The purpose of the nurse practitioner curriculum is to prepare nurses for novice level positions in advanced clinical practice. The core courses for nurse practitioners focus on foundational knowledge in pharmacology, health promotion, and evidenced based practices for delivering quality patient care to specific patient populations. Additionally, nurse practitioner core courses focus on skills in clinical decision making, assessment, and using patient-care technologies. Students select one of four concentrations in direct care: Adult-Gero Acute Care Nurse Practitioner, Adult-Gero Primary Care Nurse Practitioner, Family Nurse Practitioner, and Psychiatric Mental Health Nurse Practitioner. Concentration courses focus on the knowledge and skills for providing direct care to these patient populations.

The purpose of the nurse administration curriculum is to prepare nurses for leadership and management roles in a variety of healthcare settings. The courses for the nurse administration concentration focus on foundational knowledge in financial management, human resource management, performance improvement, and leadership at the unit or organizational level. The required nurse administrator courses focus on skills for creating safe, healthy environments that

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[1] American Association of Colleges of Nursing (AACN). 2011, March 21). *The essential of Master's Education in Nursing.* Retrieved from https://www.aacnnursing.org/Portals/42/Publications/MastersEssentials11.pdf

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support the work of the health care team, contribute to patient engagement, improve the patient experience and improve patient outcomes.

New courses are denoted with asterisk (*).

Nursing M.S. Core Courses - 23 credits
NURS 512	Foundations for Evidence-Based Practice (3 credits)	
NURS 607	Epidemiology and Population Health (3 credits)	
NURS 638	Health Policy, Leadership and Advocacy (3 credits)	
*NURS 640	Teamwork in Complex Clinical Situations (3 credits)	
NURS 502	Advanced Pharmacology (3 credits)	
NURS 504	Advanced Pathophysiology (3 credits)	
NURS 511	Advanced Health Assessment (3 credits)	
*NURS 520	Professional Transitions for the Advanced Practice Nurse (2 credits)	

Concentration Courses for Nurse Practitioners - 21 credits

Adult-Gerontology Acute Care Nurse Practitioner Concentration – The purpose of the Adult-Gerontology Care concentration is to prepare students with the knowledge and skills for clinical practice to provide direct acute care to the entire spectrum of adults including young adults, adults and older adults. The focus of the courses is on the care of adult patients who are characterized as physiologically unstable, technologically dependent, and/or are highly vulnerable to complications.

*NURS 580 Primary Care of the Adult-Gerontology Population (4 credits)
*NURS 581 Adult-Gerontology Acute Care Practicum I (2 credits)
NURS 619 Acute and Complex Health Conditions of the Adult-Gerontology Population (3 credits)
NURS 662 Care of the Adult-Gerontology Population in the Critical Care Setting (4 credits)
NURS 669 Adult-Gerontology Acute Care Practicum II (4 credits)
*NURS 689 Adult-Gerontology Acute Care Practicum III (4 credits)

Adult-Gerontology Primary Care Nurse Practitioner Concentration – The purpose of the Adult-Gerontology Primary Care concentration is to prepare students with the knowledge and skill to provide primary care services including wellness/preventive, episodic and chronic care to adults across the lifespan. The focus of the courses is on episodic, comprehensive, chronic, and continuous care characterized by a long-term relationship between the patient and AG PCNP.

*NURS 580 Primary Care of the Adult-Gerontology Population (4 credits)
*NURS 596 Adult-Gerontology Primary Care Practicum I (2 credits)
NURS 617 Advanced Gerontology Primary Care Across the Care Continuum (4 credits)
NURS 619 Acute and Complex Health Conditions of the Adult-Gerontology Population (3 credits)
NURS 675 Adult-Gerontology Primary Care Practicum II (4 credits)
*NURS 688 Adult-Gerontology Primary Care Practicum III (4 credits)

Family Nurse Practitioner Concentration – The purpose of the Family Nurse Practitioner concentration is to prepare students with knowledge and skills to provide primary care services including wellness/preventive, episodic and chronic care to children, adolescents, adults, pregnant and postpartum women, and older adults. The focus of the courses is on episodic, comprehensive, chronic, and continuous care characterized by a long-term relationship between the patient and the FNP.

*NURS 580 Primary Care of the Adult-Gerontology Population (4 credits)
*NURS 589 Maternal and Child Health in Primary Care (3 credits)
*NURS 590 Complex Problems in Family Primary Care (4 credits)
*NURS 595 Family Primary Care Practicum I (2 credits)
*NURS 642 Family Primary Care Practicum II (4 credits)
*NURS 658 Family Primary Care Practicum III (4 credits)

Psychiatric-Mental Health Nurse Practitioner Concentration – The purpose of the Psychiatric-Mental Health Nurse Practitioner concentration is to prepare students with knowledge and skills to provide primary mental health care to individuals, families, or populations across the life span in a wide range of settings. The focus of the courses is assessment, diagnosis, and management of mental health problems including the promotion of optimal mental health, and prevention and treatment of psychiatric disorders.

*NURS 521 Psychiatric Disorders across the Lifespan (4 credits)
*NURS 522 Psychopharmacology For Advanced Practice   (3 credits)
*NURS 597 Psychiatric Mental Health Practicum I (2 credits)
*NURS 598 Managing Psychiatric Disorders in Special and Vulnerable Populations (2 credits)
*NURS 602 Psychotherapy: Theory and Practice (2 credits)
*NURS 641 Psychiatric-Mental Health Practicum II (4 credits)
*NURS 659 Psychiatric-Mental Health Practicum III (4 credits)

Nursing Leadership and Organizational Science Concentration (35 credits)

The purpose of the Nursing Leadership and Organizational Science concentration (NLOS) is to prepare nurses for leadership and management roles in healthcare settings. The courses for the NLOS concentration focus on financial management, human resource management, performance improvement, and leadership at the unit or organizational level. The required NLOS courses focus on skills for creating safe, healthy environments that support the work of the health care team, contribute to patient engagement, improve the patient experience and improve patient outcomes.

Core Courses (12 credits)
This concentration shares only 12 credits of core coursework with the other four concentrations.

NURS 512   Foundations for Evidence-Based Practice (3 credits)
NURS 607   Epidemiology and Population Health (3 credits)
NURS 638   Health Policy, Leadership and Advocacy (3 credits)
*NURS 640   Teamwork in Complex Clinical Situations (3 credits)

Required Courses (17 credits)
*NURS 515   Holistic Leadership in Healthcare Delivery (3 credits)
*NURS 517   Organizational Science Implications for Human and Material Resource
               Management (3 credits)
*NURS 603   Improvement Science And Outcomes Management (3 credits)
*NURS 604   Applied Budgeting and Finance (3 credits)
*NURS 628   Practicum in Nursing Leadership and Organizational Science (5 credits)

Restricted Elective Courses – 6 credits
Students work with their advisor to select from the restricted elective courses list to develop creative administrative and leadership skills. These courses focus on the skills for producing creative ideas, products and services in nursing.
INNO 502 Business Principles for Product Innovation (3 credits)
INNO 590 Da Vinci Project (3 credits)
INNO 600 Integrative Design Studio (3 credits)
INNO 691 Topics in Product Innovation (3 credits)

Course Delivery

On Campus/Hybrid: Nurse Practitioner Concentrations
All of the nurse practitioner concentrations are offered in an on campus, face-to-face format. Some courses are offered in a hybrid format with some on campus sessions and some online sessions. Blackboard is the course management system used for both online and hybrid courses.

Online Delivery: Nursing Leadership and Organization Science Concentration
The current NAL curriculum is delivered in a web-based format. The revised curriculum with the name change to Nursing Leadership and Organization Science will continue to be delivered online. The 4 courses (12 credits) that are shared with NP concentrations all have an online section as well as a face-to-face section. Blackboard is the management software used to deliver course content and for discussion. The university provides help desk service 24/7 for Blackboard and all online programs. VCU offers resources to students to include instructional and technological support. All faculty can receive assistance with developing courses and training in online teaching from Online@VCU (http://online.vcu.edu/). If students select to take electives offered by the da Vinci Center for Innovation, these courses are not offered online.

Student Assessment

Students who complete the Nursing M.S. program will possess knowledge and skills to function as nurse practitioners and nursing managers, administrators and health care leaders. Formative assessments, intended to provide students with immediate feedback on their learning, will be administered in each course by various means including but not limited to 1) homework

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assignments, 2) online postings, 3) examinations, 4) term papers and 5) skills and clinical performance evaluations.

Summative assessment comprises a national certification examination in each of the four clinical and the one administration-leadership concentration.

<u>Learning Outcomes</u>

<u>Core Courses Learning Outcomes for Nursing M.S. (Clinical, Direct-Care Concentrations)</u>
1. Synthesize knowledge and theories from nursing and related sciences to improve health outcomes for individuals, populations, and systems.
2. Integrate prevention and population health concepts into models of care.
3. Demonstrate leadership to foster interprofessional collaboration that advances healthcare practices and influences health policies.
4. Integrate evidence and organizational science into practice to enhance outcomes.
5. Enhance patient care and safety using quality processes and improvement science.
6. Incorporate current and emerging healthcare technologies and informatics into practice.
7. Demonstrate core competencies in their advanced practice concentration.

<u>Adult-Gerontology Acute Care Concentration Learning Outcomes</u>
1. Perform assessment, diagnosis, and management of young adults, adults, and older adults who are physiologically unstable, technologically dependent, and/or are highly vulnerable to complications.
2. Synthesize knowledge from advanced practice nursing and related sciences to successfully complete a clinical practicum in an acute care setting with adult and gerontology patients.

<u>Adult-Gerontology Primary Care Concentration Learning Outcomes</u>
1. Perform primary care assessment, diagnosis, and management including wellness/preventive, episodic and chronic care of adolescents, young adults, adults, and older adults.
2. Synthesize knowledge from advanced practice nursing and related sciences to successfully complete a clinical practicum in a primary care setting with adult and gerontology patients.

<u>Family Nurse Practitioner Concentration Learning Outcomes</u>
1. Perform primary care assessment, diagnosis, and management including wellness/preventive, episodic and chronic care of children, adolescents, adults, pregnant and postpartum women, and older adults.
2. Synthesize knowledge from advanced practice nursing and related sciences to successfully complete a clinical practicum in primary care across the life span (children to gerontology patients and their families.)

<u>Psychiatric-Mental Health Nurse Practitioner Concentration Learning Outcomes</u>

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1. Perform mental health assessment, diagnosis, and management of mental health problems and psychiatric disorders for individuals and families.
2. Synthesize knowledge and theories from advanced practice nursing and related sciences to complete a clinical practicum in psychiatric-mental health care with patients across the lifespan.

Core Courses Learning Outcomes for Nursing Leadership and Organizational Science
1. Integrate prevention and population health concepts into models of care.
2. Demonstrate leadership to foster interprofessional collaboration that advances healthcare practices and influences health policies.
3. Integrate evidence and organizational science into practice to enhance outcomes.
4. Enhance patient care and safety using quality processes and improvement science

Nursing Leadership and Organizational Science Concentration Learning Outcomes
1. Provide leadership, oversight and management of a unit, organization or health system to optimize operations and improve care and outcomes.
2. Demonstrate management of the human, material and financial resources of a unit, organization, or health systems to improve patient outcomes.
3. Work within a collaborative and interprofessional environment to influential improvement in the patient experience of care (including quality and satisfaction), improving the health of populations and reducing the per capita cost of health care.
4. Synthesize knowledge and theories from advanced nursing practice and related sciences to complete a leadership practicum focused on communication, management, health care environment; leadership; professionalism; business skills and principles.

Assessment Map for the Proposed Modified Nursing M.S.

Learning Outcomes Nursing M.S.	Courses	Assessment Methods (f)=formative assessment (s)=summative assessment
Synthesize knowledge and theories from nursing and related sciences to improve health outcomes for individuals, populations, and systems.	NURS 502 Advanced Pharmacology NURS 504 Advanced Pathophysiology NURS 511 Advanced Health Assessment NUR 512 Foundations for Evidence Based Practice NURS 520 Professional Transitions for the Advanced Practice Nurse NURS 607 Epidemiology and Population Health NURS 638 Health Policy Leadership and Advocacy NURS 640 Teamwork in Complex Clinical Situation	Homework assignments (f) Case study (f) Online postings (f) Examinations (f) Written papers (f) Skills assessment (f) National Certification Examination (s)

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Integrate prevention and population health concepts into models of care.	NURS 607 Epidemiology and Population Health	Homework assignments (f) Online postings (f) Examination (f) Written paper (f) National Certification Examination (s)
Demonstrate leadership to foster interprofessional collaboration that advances healthcare practices and influences health policies.	NURS 638 Health Policy Leadership and Advocacy NURS 640 Teamwork in Complex Clinical Situation	Homework assignments (f) Online postings (f) Examinations (f) Skills assessment (f) Group Projects (f) National Certification Examination (s)
Integrate evidence and organizational science into practice to enhance outcomes.	NUR 512 Foundations for Evidence Based Practice NURS 640 Teamwork in Complex Clinical Situation	Homework assignments (f) Online postings (f) Skills assessment (f) Examinations (f) Written papers (f) National Certification Examination (s)
Enhance patient care and safety using quality processes and improvement science.	NURS 640 Teamwork in Complex Clinical Situation NURS 520 Professional Transitions for the Advanced Practice Nurse	Homework assignments (f) Case study (f) Skills assessment (f) Online postings (f) Examinations (f) National Certification Examination (s)
Incorporate current and emerging healthcare technologies and informatics into practice.	NURS 640 Teamwork in Complex Clinical Situation	Homework assignments (f) Case study (f) Online postings (f) Skills assessment (f) Clinical observation and evaluation (f) National Certification Examination (s)
Demonstrate core competencies in their advanced practice concentration.	NURS 640 Teamwork in Complex Clinical Situation	Skills assessment (f) Clinical observation and evaluation (f) National Certification Examination (s)

Employment Skills/Workplace Competencies

Graduates of the MS program in Nursing will be able to:

- Manage health or systems issues within the scope of advanced nursing practice

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- Develop and implement patient management policies and procedures
- Provide holistic, compassionate care to patients and families in collaboration and consultation with physicians, and other healthcare professionals
- Promote education of medical and health conditions to ensure patients and families have an understanding their conditions, care, and expectations.
- Facilitate referrals to other healthcare professionals and medical facilities
- Use a scientific bases for nursing and healthcare in their specific area of expertise
- Use communication skills in a work or professional setting to facilitate achievement of optimal health outcomes with diverse teams, patients and families.

Adult-Gerontology Acute Care Concentration Workplace Competencies
- Perform and document comprehensive acute evaluations, treatment plans, and ongoing care for adult and gerontology patients.
- Collaborate with other disciplines to ensure safe and effective acute care.

Adult-Gerontology Primary Care Concentration Workplace Competencies
- Perform and document comprehensive evaluations, treatment plans, and ongoing care for adults and gerontology patients in primary care practice.
- Collaborate with other disciplines to ensure safe and effective primary care of adult and gerontology patients.

Family Nurse Practitioner Concentration Workplace Competencies
- Evaluate and treat minor acute and chronic conditions in patients (children, adults, maternal and women's health, gerontology) across the lifespan in collaboration with other healthcare professionals as needed.
- Provide primary care to promote optimal health outcomes for patients and families across the lifespan.

Psychiatric-Mental Health Nurse Practitioner Concentration Workplace Competencies
- Perform and document psychiatric evaluations, treatment plans, and ongoing psychiatric care to a variety of patients across the lifespan.
- Collaborate with other disciplines to ensure safe and effective psychiatric and mental health care.

Nursing Administration and Leadership Concentration Workplace Competencies
- Analyze, develop and maintain an effective and efficient nursing care delivery system that reflects patient and family needs across the continuum; achieving desired outcomes.
- Manage various personnel actions including, but not limited to hiring, orientation, performance appraisals, promotions and scheduling; and counsel and conduct formal discipline of staff.
- Collaborate in the development, implementation and expansion of learning opportunities and skill development for all staff.

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Rationale for the Program

The reduction of credits to degree and the 23-credit core are the direct result of the faculty members' analysis of the curriculum. This analysis, informed by VCU's internal audit and the external reviews and consultations in 2017 and 2018, revealed redundancies, fragmentation, and gaps in the current design of the Nursing M.S. In response to these findings, the faculty members used the American Association of Colleges of Nursing 2011 publication "The Essentials of Master's Education in Nursing"[2] to guide their efforts to construct a modified degree program that is streamlined and more accurately aligned with the "essentials" for preparing nursing professionals at the master's degree level.

Faculty members concluded, in the light of the external reviews, consultations, and the AACN "Essentials," that a common core of 23 credits could be established only for the four concentrations in clinical, direct care. Preparation for nursing administration and leadership entails a knowledge and skills set that does not entail all that is necessary for the clinical nurse. The AACNB acknowledges this, noting that the path to nursing administration and leadership requires "more in-depth preparation . . . that will provide knowledge useful for nursing management roles."[3]   Nevertheless, the proposed modified Nursing Leadership and Organizational Science Administration and Leadership will share 12 credits of the 23-credit core required for the clinical, direct care concentrations.

Bringing the Nursing M.S. into a better alignment with the AACN's "essentials" will better prepare graduates of the Nursing M.S. program to meet Virginia's increasing workforce needs for advanced healthcare professionals. The "Essentials," the AACN writes, in synergy with "current and future healthcare reform legislation . . . provide guidance for master's programs . . . to prepare nurses who can address the gaps resulting from growing healthcare needs."[4]

A nursing workforce with advanced preparation will mitigate the effects of an expected shortage of physicians in the United States. Based on research commissioned by the American Association of Medical Colleges in 2017, "The latest projections continue to align with previous estimates, showing a projected shortage of between 40,800 and 104,900 doctors."[5] Advanced Practice Nurses (APN), including Nurse Practitioners (NP) and nursing administrators, are key to meeting the anticipated need for healthcare providers.[6] For example, according to Pohl et al. (2018), "the trends for physicians and NPs have been striking in their contrasts…. not only are the numbers of NPs who are prepared as primary care providers surging, their numbers in practice, in both rural and non-rural settings, are increasing."[7] Further, Heath (2018) reports

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[2] American Association of Colleges of Nursing (AACN). The Essentials of Master's Education in Nursing. (March 21, 2011.) Retrieved from https://www.aacnnursing.org/Portals/42/Publications/MastersEssentials11.pdf
[3] American Association of Colleges of Nursing (AACN). p. 6.
[4] American Association of Colleges of Nursing (AACN). p. 3.
[5] Heiser, S. (2017, March 14). New research reaffirms physician shortage. Retrieved from https://news.aamc.org/press-releases/article/workforce_projections_03142017/
[6] American Association of Colleges of Nursing (AACN). (2017, April 26). Nursing faculty shortage fact sheet. Retrieved from http://www.aacnnursing.org/News-Information/Fact-Sheets/Nursing-Faculty-Shortage
[7] Pohl, J., Thomas, A., Bigley, M.B. & Kopanos, T. (2018, December 13). Primary Care Workforce Data and the need for Nurse Practitioner Full Practice Authority. Health Affairs Blog. Retrieved from https://www.healthaffairs.org/do/10.1377/hblog20181211.872778/full/

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"Seventy-eight percent of nurse practitioners – 204,000 out of 262,000 – practice primary care, a far cry from the 33 percent of physicians to specialize in primary care."[8]

Student Demand

Student enrollment in the proposed Nursing Leadership and Organizational Science (NLOS) concentration will increase as the concentration becomes more streamlined and is able to compete with other programs across the nation. Growth in the four Nurse Practitioner (NP) concentrations will be modest, however, due to the competition for appropriate clinical sites across the region and the need to ensure program quality with existing resources. Existing program resources are adequate to manage the increased enrollment. The program modification also involves a reduction in credits that facilitates reassignment of current faculty to manage increased enrollment and clinical supervision.

STATE COUNCIL OF HIGHER EDUCATION FOR VIRGINIA
SUMMARY OF PROJECTED ENROLLMENTS IN PROPOSED PROGRAM

Projected enrollment:

Year 1		Year 2		Year 3		Year 4 **Target Year** **(2-year institutions)**			Year 5 **Target Year** **(4-year institutions)**		
2020 - 2021		2021 - 2022		2022 – 2023		2023 - 2024			2024 - 2025		
HDCT 292	FTES 97	HDCT 296	FTES 99	HDCT 304	FTES 101	HDCT _____	FTES _____	GRAD _____	HDCT 312	FTES 104	GRAD 150

Assumptions:
Retention percentage: 90%
Full-time students 50% / Part-time students 50%
Full-time students credit hours per semester: 9-10 credits
Part-time students credit hours per semester: 6-8 credits
Full-time students graduate in 2 years; part-time students graduate in 3 years
Student to Faculty ratio: 8 student FTE to 1 faculty FTE

Duplication

In the Commonwealth of Virginia, there are five public and five private institutions with Master's programs in Nursing. Public institutions include: George Mason University, James

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[8] Heath, S. (2018). *NPs, PAs could reduce primary care physician shortage nearly 70%.* Retrieved from
https://patientengagementhit.com/news/nps-pas-could-reduce-primary-care-physician-shortage-nearly-70

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Madison University, Old Dominion University, University of Virginia, and Virginia Commonwealth University. Private institutions include Hampton University, Jefferson College of Health Sciences, Liberty University, Marymount University, and Shenandoah University. Appendix D outlines the programs that offer similar concentrations to those offered at Virginia Commonwealth University.

Projected Resources for the Proposed Modified Program

Resource Needs

The VCU School of Nursing possesses adequate resources to launch and sustain the proposed modified master's degree program. The school has the faculty, staff, equipment, space, and library resources to support this program. Existing resources from the current program are available to initiate and sustain the modified degree program. Assessments of need for full-time and part-time faculty are based on a ratio of 1.0 FTE of instructional effort and currently a 1:8 ratio for clinical supervision. However, CCNE allows for different ratios for clinical supervision if it can be justified based on available resources.

Full-time Faculty
There are currently 9 FTEs for Master's program instruction.

Part-time Faculty
Currently there are no part-time faculty teaching in the MS program.

Adjunct Faculty
There are 21 adjunct faculty who teach didactic courses or provide clinical supervision. No additional adjunct faculty are needed to launch or sustain the proposed modified degree program.

Graduate Assistants
No graduate assistants are needed to launch or sustain the proposed modified degree program.

Classified Positions
Three staff support the MS Program which includes one Educational Program Coordinator (1.0 FTE), one Clinical Placement Specialist (1.0 FTE), and an Academic Assessment and Evaluation specialist at (.25 FTE).

Equipment (including computers)
No additional resources are required to launch or sustain the proposed modified degree program.

Library
No new resources are needed to launch or sustain the proposed modified degree program. The library resources, such as books, journals, and online access are sufficient to support coursework in the proposed modified degree program.

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Telecommunications
No additional resources are required to launch or sustain the proposed modified program.

Space
No new space is needed to launch or sustain the proposed modified degree program. The School of Nursing has adequate classroom space to accommodate students enrolled in the program.

Targeted Financial Aid – No targeted financial aid is projected to launch or sustain the proposed modified degree program.

Other Resources (specify)
No other resources are needed to launch or sustain the proposed modified degree program.

<p style="text-align:center">Resource Needs: Parts A-D</p>

<p style="text-align:center">RESOURCE NEEDS</p>

Part A: Answer the following questions about general budget information.

- Has the institution submitted or will it submit an addendum budget request to cover one-time costs? Yes ☐ No ☒

- Has the institution submitted or will it submit an addendum budget request to cover operating costs? Yes ☐ No ☒

- Will there be any operating budget requests for this program that would exceed normal operating budget guidelines (for example, unusual faculty mix, faculty salaries, or resources)? Yes ☐ No ☒

- Will each type of space for the proposed program be within projected guidelines? Yes ☒ No ☐

- Will a capital outlay request in support of this program be forthcoming? Yes ☐ No ☒

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Part B: Fill in the number of FTE and other positions needed for the program				
	Program Initiation Year **2020- 2021**		**Expected by** **Target Enrollment Year** **2024- 2025**	
	On-going and reallocated	**Added (New)**	**Added (New)***	**Total FTE positions**
Full-time faculty FTE*	9.00	0.00	0.00	9.00
Part-time faculty FTE**	0.00	0.00	0.00	0.00
Adjunct faculty	21.00	0.00	0.00	21.00
Graduate assistants (HDCT)	0.00	0.00	0.00	0.00
Classified positions	3.00	0.00	0.00	3.00
TOTAL	33.00	0.00	0.00	33.00

*Faculty dedicated to the program. **Faculty effort can be in the department or split with another uni

*** Added **after** initiation year

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Part C: Estimated resources to initiate and operate the program				
	Program Initiation Year **2020 - 2021**		**Expected by** **Target Enrollment Year** **2024 - 2025**	
Full-time faculty	9.00	0.00	0.00	9.00
salaries	$936,000			$936,000
fringe benefits	$368,902			$368,902
Part-time faculty (faculty FTE split with unit(s))	0.00	0.00	0.00	0.00
salaries				$0
fringe benefits				$0
Adjunct faculty	21.00	0.00	0.00	21.00
salaries	$124,305	$0	$0	$124,305
fringe benefits				$0
Graduate assistants	0.00	0.00	0.00	0.00
salaries				$0
fringe benefits				$0
Classified Positions	3.00	0.00	0.00	3.00
salaries	$112,000			$112,000
fringe benefits	$44,128			$44,128
Personnel cost				
salaries	$1,172,305	$0	$0	$1,172,305
fringe benefits	$413,030	$0	$0	$413,030
Total personnel cost	$1,585,335	$0	$0	$1,585,335
Equipment				$0
Library				$0
Telecommunication costs				$0
Other costs				$0
TOTAL	**$1,585,335**	**$0**	**$0**	**$1,585,335**

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Part D: Certification Statement(s)

The institution will require additional state funding to initiate and sustain the proposed program.

_____ Yes _____
Signature of Chief Academic Officer

 X   No _____
Signature of Chief Academic Officer

Please complete Items 1, 2, and 3 below.

1. Estimated $$ and funding source to initiate and operate the proposed program.

Funding Source	Program initiation year 2020 - 2021	Target enrollment year 2024 - 2025
Reallocation within the department *(Note below the impact this will have within the department.)*	0	0
Reallocation within the school or college *(Note below the impact this will have within the school or college.)*	1,585,635	1,585,635
Reallocation within the institution *(Note below the impact this will have within the institution.)*	0	0
Other funding sources *(Specify and note if these are currently available or anticipated.)*	0	0

2. Statement of Impact/Funding Source(s). A separate detailed explanation of funding is required for each source used and a statement of impact on existing resources.

Reallocation within the school or college
Within the School of Nursing a budget exists which includes funding for the operation of MS program in nursing degree program. The resources for the proposed modified program will come from the reallocation of current and existing resources within the School already devoted to the current MS program. Existing faculty will be used to support the proposed modified degree program. Because the School of Nursing has these funds, there will be no negative impact to any existing academic programs in the School of Nursing.

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3. Secondary Certification.
If resources are reallocated from another unit to support this program, the institution will **not** subsequently request additional state funding to restore those resources for their original purpose.

   <u> X </u>   Agree   _____

                                  Signature of Chief Academic Officer

  <u>   </u>   Disagree   _____

                                  Signature of Chief Academic Officer

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Appendices

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Appendix A – Changes and Modifications to Titles and Courses

<u>Title Changes and Course Content Updates</u>: The following core courses have been retitled and content updated to align with the American Association of Critical-Care Nurses (AACN) and the National Organization of Nurse Practitioner Faculties (NONPF) standards and outcomes for master's level nursing education.

Current		Modified	
NURS 512 Evidence-Based Advanced Nursing Practice	3	NURS 512 Foundations for Evidence-Based Practice (T, C)	3
NURS 504 Advanced Pathophysiology	3	NURS 504 Advanced Pathophysiology (C)	3
NURS 502 Advanced Nursing Practice: Pharmacotherapeutics	3	NURS 502 Advanced Pharmacology (T,C)	3
NURS 511 Health Assessment for Advanced Practice Nursing	3	NURS 511 Advanced Health Assessment (T,C)	3
NURS 619 Diagnosis and Management in Adult Gerontology Acute Care II	3	NURS 619 Acute and Complex Health Conditions of the Adult-Gerontology Population (T,C)	3
NURS 662 Diagnosis and Management in the Adult Gerontology Critical Care	4	NURS 662 Care of the Adult-Gerontology Population in the Critical Care Setting (T, C)	4
NURS 678 Adult Gerontology Acute Care Practicum I	3	NURS 581 Adult Gerontology Acute Care Practicum I (C,#)	2
NURS 669 Adult Gerontology Acute Care Practicum II	4	NURS 669 Adult Gerontology Acute Care Practicum II (C)	4
NURS 679 Adult Gerontology Acute Care Practicum III	5	NURS 689 Adult Gerontology Acute Care Practicum III (C, #)	4
NURS 617 Advanced Gerontology Primary Care Across the Care Continuum	4	NURS 617 Advanced Gerontology Primary Care Across the Care Continuum (C)	4
NURS 676 Adult Gerontology Primary Care Practicum I	3	NURS 596 Adult Gerontology Primary Care Practicum I (C,#)	2
NURS 675 Adult Gerontology Primary Care Practicum II	4	NURS 675 Adult Gerontology Primary Care Practicum II (C)	4
NURS 677 Adult Gerontology Primary Care Practicum III	5	NURS 688 Adult Gerontology Primary Care Practicum III (C, #)	4
NURS 643 Family Primary Care Practicum I	6	NURS 642 Family Primary Care Practicum II (T, C, #)	4
NURS 645 Family Primary Care Practicum II	6	NURS 658 Family Primary Care Practicum III (T, C, #)	4

Courses with title changes are indicated with a (T)
Courses with non-substantive course description and course objectives are indicated with a (C)
Courses with credit changes are indicated with a (#)

3.1.19

New Nursing M.S. Core Courses:

     NURS 640 Teamwork in Complex Clinical Situations – 3 credits
New course designed to develop competence in interprofessional collaboration for improving patient and population health outcomes.

     NURS 638 Health Policy, Leadership and Advocacy - 3 credits
Existing course added to develop competence in leadership and policy.

     NURS 607 Epidemiology and Population Health- 3 credits
Existing course added to develop competence in the management of health at a population level

New Core Courses for NP concentrations (in addition to those listed above):

     NURS 520 Professional Transitions for the Advanced Practice Nurse 2 credits
New course to designed to develop competency in the business aspects and role attainment of the NP role.

     NURS 580 Primary Care of the Adult-Gerontology Population 4 credits
New course designed to develop competency in the care of Adolescents through geriatrics

     NURS 589 Maternal and Child Health in Primary Care 3 credits
New course designed to develop competence in the care of women and children.

     NURS 590 Complex Problems in Family Primary Care 4 credits
New course designed to develop competency in care for complex patient and family conditions.

     NURS 595 Family Primary Care Practicum 2 credits
New course designed to add a practicum experience in the summer semester.

     NURS 521 Psychiatric Disorders Across the Lifespan 4 credits
New course designed to develop competency in common psychiatric disorders across the lifespan

     NURS 522 Psychopharmacology 3 credits
New course designed to develop competency in psychopharmocotherapuetics.

     NURS 598 Managing Psychiatric Disorders in Special and Vulnerable Populations 2 credits
New course designed to develop competency in the care of vulnerable populations

NURS 602 Psychotherapy: Theory and Practice 2 credits
New course designed to develop competency in the provision of psychotherapy.

NURS 597 Psychiatric Mental Health Practicum I 2 credits
New course designed to add a practicum experience in the summer semester.

NURS 641 Psychiatric Mental Health Practicum II 4 credits
New course designed to develop focused competency in psychiatric mental health clinical experiences.

NURS 659 Psychiatric Mental Health Practicum III 4 credits
 New course designed to develop focused competency in psychiatric mental health clinical experiences.

New NLOS Required Courses

NURS 515 Holistic Leadership in Healthcare Delivery 3 credits
New courses designed to reflect essential components of leadership that consider the whole person as an object of leadership, allowing leaders to reach their full potential

NURS 517 Organizational Science Implications for Project and Human Resource Management 3 credits
Expands on the traditional human resource management content to include project management and human capital from the perspective operations research and management sciences.

NURS 604 Applied Budgeting and Finance 3 credits
Approach budgets and financial knowledge from an application perspective rather than a theoretical perspective.

NURS 603 Improvement Science and Outcomes Management 3 credits
Adapted from a previous course to include improvement science as a foundation for enhancing quality and outcomes.

NURS 628 Practicum in Nursing Leadership and Organization Science 5 credits
Provides a concentrated practicum that allows for a guided field-based experience for application of knowledge.

New NLOS Electives
NURS 516 Healthcare Information Technology 3 credits
New course that develops competence in information technologies

NURS 593 Project and Planned Change Management 3 credits
New course that develops competence in the skills required to conduct a planned organizational change

Appendix B – Sample Plans of Study

Full Time Pan of Study Adult-Gerontology Acute Care Nurse Practitioner			
Course #	**Course Title**	**Credits**	**Semester**
Year One			
NURS 504	Advanced Pathophysiology	3	Fall
NURS 511	Advanced Health Assessment	3	Fall
NURS 512	Foundations for Evidence-Based Practice	3	Fall
NURS 502	Advanced Pharmacology	3	Spring
NURS 580	Primary Care of the Adult-Gerontology Population	4	Spring
NURS 607	Epidemiology and Population Health	3	Spring
NURS 581	Adult-Gerontology Acute Care Practicum I	2	Summer
NURS 619	Acute and Complex Health Conditions of the Adult-Gerontology Population	3	Summer
	Year One Total	24	
Year Two			
NURS 638	Health Policy Leadership and Advocacy	3	Fall
NURS 662	Care of the Adult-Gerontology Population in the Critical Care Setting	4	Fall
NURS 669	Adult-Gerontology Acute Care Practicum II	4	Fall
NURS 520	Professional Transitions for the Advanced Practice Nurse	2	Spring
NURS 640	Teamwork in Complex Clinical Situations	3	Spring
NURS 689	Adult-Gerontology Acute Care Practicum III	4	Spring
	Year Two Total	20	
	TOTAL	**44 Credits**	

3.1.19

Part Time Plan of Study Adult-Gerontology Acute Care Nurse Practitioner			
Course #	**Course Title**	**Credits**	**Semester**
Year One			
NURS 504	Advanced Pathophysiology	3	Fall
NURS 512	Foundations for Evidence-Based Practice	3	Fall
NURS 502	Advanced Pharmacology	3	Spring
NURS 607	Epidemiology and Population Health	3	Spring
	Year One Total	12	
Year Two			
NURS 511	Advanced Health Assessment	3	Fall
NURS 638	Health Policy Leadership and Advocacy	3	Fall
NURS 580	Primary Care of the Adult-Gerontology Population	4	Spring
NURS 640	Teamwork in Complex Clinical Situations	3	Spring
NURS 581	Adult-Gerontology Acute Care Practicum I	2	Summer
NURS 619	Acute and Complex Health Conditions of the Adult-Gerontology Population	3	Summer
	Year Two Total	18	
Year Three			
NURS 662	Care of the Adult-Gerontology Population in the Critical Care Setting	4	Fall
NURS 669	Adult-Gerontology Acute Care Practicum II	4	Fall
NURS 520	Professional Transitions for the Advanced Practice Nurse	2	Spring
NURS 689	Adult-Gerontology Acute Care Practicum III	4	Spring
	Year Three Total	14	
	TOTAL	**44 Credits**	

Full Time Plan of Study Adult-Gerontology Primary Care Nurse Practitioner			
Course #	**Course Title**	**Credits**	**Semester**
Year One			
NURS 504	Advanced Pathophysiology	3	Fall
NURS 511	Advanced Health Assessment	3	Fall
NURS 512	Foundations for Evidence-Based Practice	3	Fall
NURS 502	Advanced Pharmacology	3	Spring
NURS 580	Primary Care of the Adult-Gerontology Population	4	Spring
NURS 607	Epidemiology and Population Health	3	Spring
NURS 596	Adult-Gerontology Primary Care Practicum I	2	Summer
NURS 619	Acute and Complex Health Conditions of the Adult-Gerontology Population	3	Summer
	Year One Total	24	
Year Two			
NURS 617	Advanced-Gerontology Primary Care Across the Care Continuum	4	Fall
NURS 638	Health Policy Leadership and Advocacy	3	Fall
NURS 675	Adult-Gerontology Primary Care Practicum II	4	Fall
NURS 520	Professional Transitions for the Advanced Practice Nurse	2	Spring
NURS 640	Teamwork in Complex Clinical Situations	3	Spring
NURS 688	Adult-Gerontology Primary Care Practicum III	4	Spring
	Year Two Total	20	
	TOTAL	**44 Credits**	

3.1.19

Part Time Plan of Study Adult-Gerontology Primary Care Nurse Practitioner			
Course #	**Course Title**	**Credits**	**Semester**
Year One			
NURS 504	Advanced Pathophysiology	3	Fall
NURS 512	Foundations for Evidence-Based Practice	3	Fall
NURS 502	Advanced Pharmacology	3	Spring
NURS 607	Epidemiology and Population Health	3	Spring
	Year One Total	12	
Year Two			
NURS 511	Advanced Health Assessment	3	Fall
NURS 638	Health Policy Leadership and Advocacy	3	Fall
NURS 580	Primary Care of the Adult-Gerontology Population	4	Spring
NURS 640	Teamwork in Complex Clinical Situations	3	Spring
NURS 596	Adult-Gerontology Primary Care Practicum I	2	Summer
NURS 619	Acute and Complex Health Conditions of the Adult-Gerontology Population	3	Summer
	Year Two Total	18	
Year Three			
NURS 617	Advanced Gerontology Primary Care Across the Care Continuum	4	Fall
NURS 675	Adult-Gerontology Primary Care Practicum II	4	Fall
NURS 520	Professional Transitions for the Advanced Practice Nurse	2	Spring
NURS 688	Adult-Gerontology Primary Care Practicum III	4	Spring
	Year Three Total	14	
	TOTAL	**44 Credits**	

Full Time Plan of Study Family Nurse Practitioner			
Course #	**Course Title**	**Credits**	**Semester**
	Year One		
NURS 504	Advanced Pathophysiology	3	Fall
NURS 511	Advanced Health Assessment	3	Fall
NURS 512	Foundations for Evidence-Based Practice	3	Fall
NURS 502	Advanced Pharmacology	3	Spring
NURS 580	Primary Care of the Adult-Gerontology Population	4	Spring
NURS 607	Epidemiology and Population Health	3	Spring
NURS 589	Maternal and Child Health in Primary Care	3	Summer
NURS 595	Family Primary Care Practicum I	2	Summer
	Year One Total	24	
	Year Two		
NURS 590	Complex Problems in Family Primary Care	4	Fall
NURS 638	Health Policy Leadership and Advocacy	3	Fall
NURS 642	Family Primary Care Practicum II	4	Fall
NURS 520	Professional Transitions for the Advanced Practice Nurse	2	Spring
NURS 640	Teamwork in Complex Clinical Situations	3	Spring
NURS 658	Family Primary Care Practicum III	4	Spring
	Year Two Total	20	
	TOTAL	**44 Credits**	

Part Time Plan of Study Family Nurse Practitioner		Credits	Semester
Course #	Course Title	Credits	Semester
Year One			
NURS 504	Advanced Pathophysiology	3	Fall
NURS 512	Foundations for Evidence-Based Practice	3	Fall
NURS 502	Advanced Pharmacology	3	Spring
NURS 607	Epidemiology and Population Health	3	Spring
	Year One Total	12	
Year Two			
NURS 511	Advanced Health Assessment	3	Fall
NURS 638	Health Policy Leadership and Advocacy	3	Fall
NURS 580	Primary Care of the Adult-Gerontology Population	4	Spring
NURS 640	Teamwork in Complex Clinical Situations	3	Spring
NURS 589	Maternal and Child Health in Primary Care	3	Summer
NURS 595	Family Primary Care Practicum I	2	Summer
	Year Two Total	18	
Year Three			
NURS 590	Complex Problems in Family Primary Care	4	Fall
NURS 642	Family Primary Care Practicum II	4	Fall
NURS 520	Professional Transitions for the Advanced Practice Nurse	2	Spring
NURS 658	Family Primary Care Practicum III	4	Spring
	Year Three Total	14	
	TOTAL	**44 Credits**	

3.1.19

Full Time Plan of Study Psychiatric-Mental Health Nurse Practitioner			
Course #	**Course Title**	**Credits**	**Semester**
Year One			
NURS 504	Advanced Pathophysiology	3	Fall
NURS 511	Advanced Health Assessment	3	Fall
NURS 512	Foundations for Evidence-Based Practice	3	Fall
NURS 502	Advanced Pharmacology	3	Spring
NURS 521	Psychiatric Disorders Across the Lifespan	4	Spring
NURS 607	Epidemiology and Population Health	3	Spring
NURS 522	Psychopharmacology for Advanced Practice	3	Summer
NURS 597	Psychiatric Mental Health Practicum I	2	Summer
	Year One Total	24	
Year Two			
NURS 598	Managing Psychiatric Disorders in Special and Vulnerable Populations	2	Fall
NURS 602	Psychotherapy: Theory and Practice	2	Fall
NURS 638	Health Policy Leadership and Advocacy	3	Fall
NURS 641	Psychiatric Mental Health Practicum II	4	Fall
NURS 520	Professional Transitions for the Advanced Practice Nurse	2	Spring
NURS 640	Teamwork in Complex Clinical Situations	3	Spring
NURS 659	Psychiatric-Mental Health Practicum III	4	Spring
	Year Two Total	20	
	TOTAL	**44 Credits**	

3.1.19

Part Time Plan of Study Psychiatric-Mental Health Nurse Practitioner			
Course #	**Course Title**	**Credits**	**Semester**
Year One			
NURS 504	Advanced Pathophysiology	3	Fall
NURS 512	Foundations for Evidence-Based Practice	3	Fall
NURS 502	Advanced Pharmacology	3	Spring
NURS 607	Epidemiology and Population Health	3	Spring
	Year One Total	12	
Year Two			
NURS 511	Advanced Health Assessment	3	Fall
NURS 638	Health Policy Leadership and Advocacy	3	Fall
NURS 521	Psychiatric Disorders Across the Lifespan	4	Spring
NURS 640	Teamwork in Complex Clinical Situations	3	Spring
NURS 522	Psychopharmacology for Advanced Practice	3	Summer
NURS 597	Psychiatric-Mental Health Practicum I	2	Summer
	Year Two Total	18	
Year Three			
NURS 598	Managing Psychiatric Disorders in Special and Vulnerable Populations	2	Fall
NURS 602	Psychotherapy: Theory and Practice	2	Fall
NURS 641	Psychiatric-Mental Health Practicum II	4	Fall
NURS 520	Professional Transitions for the Advanced Practice Nurse	2	Spring
NURS 659	Psychiatric-Mental Health Practicum III	4	Spring
	Year Three Total	14	
	TOTAL	**44 Credits**	

Full Time Plan of Study Nursing Leadership and Organizational Science			
Course #	**Course Title**	**Credits**	**Semester**
Year One			
NURS 512	Foundations for Evidence-Based Practice	3	Fall
NURS 515	Holistic Leadership in Healthcare Delivery	3	Fall
NURS 516 or INNO 502	**Electives:** Health Information Technology or Business Principles for Product Innovation	3	Fall
NURS 517	Organizational Science Implications for Project and Human Resource Management	3	Spring
NURS 607	Epidemiology and Population Health	3	Spring
NURS 640	Teamwork in Complex Clinical Situations	3	Spring
NURS 603	Improvement Science and Outcomes Management	3	Summer
NURS 604	Applied Budgeting and Finance	3	Summer
	Year One Total	24	
Year Two			
NURS 593	**Electives:** Project and Planned Change Management or INNO 590 DaVinci Project	3	Fall
NURS 628	Practicum in Nursing Leadership and Organizational Science	5	Fall
NURS 638	Health Policy Leadership and Advocacy	3	Fall
	Year Two Total	11	
	TOTAL	**35 Credits**	

Students take 6 credits of electives throughout the program. May take electives in any semester.

Part Time Plan of Study Nursing Leadership and Organizational Science			
Course #	Course Title	Credits	Semester
Year One			
NURS 512	Foundations for Evidence-Based Practice	3	Fall
NURS 515	Holistic Leadership in Healthcare Delivery	3	Fall
NURS 517	Organizational Science Implications for Project and Human Resource Management	3	Spring
NURS 607	Epidemiology and Population Health	3	Spring
NURS 604	Applied Budgeting and Finance	3	Summer
	Year One Total	15	
Year Two			
INNO 502 or NURS 516	Business Principles for Product Innovation Health or Information Technology	3	Fall
NURS 638	Health Policy, Leadership and Advocacy	3	Fall
NURS 640	Teamwork in Complex Clinical Situations	3	Spring
NURS 603	Improvement Science and Outcomes Management	3	Summer
	Year Two Total	12	
Year Three			
NURS 593	Project and Planned Change Management or INNO 590 DaVinci Project	3	Fall
NURS 628	Practicum in Nursing Leadership and Organizational Science	5	Fall
	Year Three Total	8	
	TOTAL	**35 Credits**	

3.1.19

Appendix C – Course Descriptions

Courses that are new are indicated with an *

Nursing M.S. Core Courses

NURS 512 Foundations For Evidence Based Advanced Practice   3
This course assists with the identification and use of evidence to identify and address problems faced in the healthcare setting. Emphasizes appraisal and synthesis of scientific literature to design evidence-based practice strategies and outcome measures in the context of a selected clinical problem, population health risk, or organizational issue

NURS 607 Epidemiology And Population Health   3
Integrates principles of epidemiology, evidence-based clinical prevention, health screening, behavioral modification, disease modification, disease management of populations and quality metrics. Students will assess population health models and frameworks to address a multi-level perspective of the health status of vulnerable populations and sources of health inequalities. Cultural perspectives will be emphasized at a regional, national and global level.

NURS 638 Health Policy Leadership And Advocacy   3
Emphasizes critical analysis of the political, organizational, economic, ethical, quality and safety dimensions of health policy issues. Contextual factors such as social justice, health disparities, vulnerable populations, access to care, health care financing and the globalization of health care will be explored. Leadership skills in health policy advocacy will be refined throughout the course.

*NURS 640 Teamwork In Complex Clinical Situations   3
Students collaborate with their peers to analyze complex clinical situations from individual and system level perspectives. Through teamwork, students apply critical decision making skills to improve quality, safety, and care coordination.

Direct Care (NP) Core Courses

NURS 502 Advanced Pharmacology   3
This course develops the students requisite knowledge of pharmacotherapeutics necessary for the safe, pharmacological management of common patient problems across the lifespan by the advanced practice nurse.

NURS 504 Advanced Pathophysiology   3
This course focuses on the biological and pathophysiological foundations of health problems across the lifespan. Uses biologic changes underlying selected health risks and health problems as a framework for critically appraising health assessment data and for understanding advanced nursing therapeutic strategies.

NURS 511 Advanced Health Assessment   3
Provides a framework for conducting a comprehensive and systematic assessment of individuals across the lifespan. Focuses on advancing students' knowledge and assessment techniques in collecting and interpreting data from the health history and physical examination. Emphasizes

the identification of deviations from normal in assessment data, including laboratory and diagnostic studies, and application of diagnostic reasoning skills to develop a prioritized differential diagnosis list. This course includes laboratory experiences.

*NURS 520 Professional Transitions For The Advanced Practice Nurse   2
This course emphasizes the transition to the advanced practice nursing role. The course focuses on synthesizing the knowledge, skills, and abilities that will allow students to transition successfully into the advanced practice nursing role.

Concentration Courses

Adult-Gerontology Acute Care Nurse Practitioner

*NURS 580 Primary Care of the Adult-Gerontology Population   4
This course provides content on the primary care management of adolescents through geriatrics. This course focuses on building a foundation of knowledge and clinical decision-making skills related to normal development, health promotion and disease prevention, and the diagnosis and management of common health conditions across the adult-life span. This course includes laboratory experiences.

NURS 619 Acute And Complex Health Conditions of the Adult-Gerontology Population 3
This course builds upon knowledge and skills from prior courses and provides content on the management of acute and complex health issues in the adolescent, adult and geriatric population. Students will increase knowledge and decision making skills in the management of physiologically unstable patients, multiple comorbidities, and appropriate prescribing practices. This course includes laboratory experiences.

NURS 662 Care Of The Adult-Gerontology Population In The Critical Care Setting   4
This course addresses the diagnosis and management of selected common health and illness changes encountered in adolescent through geriatric in critical care settings. Students will increase their knowledge about the management of common critical illnesses encountered in the adult critical care environment. This course includes laboratory experiences.

NURS 581 Adult-Gerontology Acute Care Practicum I   2
This course focuses on management of adolescent through geriatric with complex health care conditions through precepted experiences. Students have the opportunities to focus on the provision of a spectrum of care ranging from disease prevention to acute care management. Graded as Pass/Fail.

NURS 669 Adult-Gerontology Acute Care Practicum II   4
This course focuses on acute care management of adolescents through geriatric population with complex acute, critical and chronic health conditions with particular emphasis on integrating health promotion, disease prevention, and risk reduction strategies through precepted clinical experiences. Graded as Pass/Fail.

NURS 689 Adult-Gerontology Acute Care Practicum III   4
This course focuses on advanced management of the adolescent through geriatric population with acute, critical, or chronic conditions. Students work with clinical preceptors to assimilate advanced clinical decision making and knowledge of the health system. Acute care skills including prioritization, treatment and coordination of both acute, complex episodic and chronic illnesses. Interdisciplinary collaborative practice skills are emphasized. Technology utilization is refined. Graded as Pass/Fail.

Adult-Gero Primary Care Nurse Practitioner

*NURS 580 Primary Care Of The Adult-Gerontology Population   4
This course provides content on the primary care management of adolescents through geriatrics. This course focuses on building a foundation of knowledge and clinical decision-making skills related to normal development, health promotion and disease prevention, and the diagnosis and management of common health conditions across the adult-life span. This course includes laboratory experiences.

NURS 619 Acute And Complex Health Conditions Of The Adult-Gerontology Population 3
This course builds upon knowledge and skills from prior courses and provides content on the management of acute and complex health issues in the adolescent, adult and geriatric population. Students will increase knowledge and decision making skills in the management of physiologically unstable patients, multiple comorbidities, and appropriate prescribing practices. This course includes laboratory experiences.

NURS 617 Advanced Gerontology Primary Care Across The Care Continuum   4
In this course students will further examine and integrate physiological, psychological, and sociocultural processes associated with normal aging. Students will refine knowledge of pharmacotherapeutics needed by the advanced practice nurse for the safe pharmacological management of common patient problems in older adults. Relevant theories, concepts, and research findings from the behavioral, social, and biological sciences are analyzed as a basis for advanced nursing practice with older adults and their families. Emphasis is placed on enhancing the individual's health within the context of their functional capabilities, social support networks and environment. Important geriatric care models for effective practice with older adults across the care continuum; coordinated care across the interprofessional team including families and caregivers, transitions of care, and complex care management are reviewed. This course includes laboratory experiences.

NURS 596 Adult-Gerontology Primary Care Practicum I   2
This course focuses on providing primary care management of adolescent through geriatric patients across the wellness-illness continuum through a precepted clinical experiences. Provides opportunities to focus on the differing and unique developmental, life stage needs that impact a patient's care across the adult age spectrum and application of evidence-based strategies in directing health promotion, health protection, disease prevention and primary care management of injuries and disease. Graded as Pass/Fail.

NURS 675 Adult-Gerontology Primary Care Practicum II   4

Focuses on primary care management of the adolescent through geriatric population throughout the wellness-illness spectrum with particular attention on integrating health maintenance and risk reduction interventions for patients with comorbidities through precepted clinical experiences. Building on previous practicum experience, students implement health screening, health promotion and risk reduction strategies for the adolescent through geriatric population within the context of their current health issues and comorbidities. Provides opportunities to develop and carry out the plan of care incorporating evidence-based practice guidelines to improve patient outcomes. Graded as Pass/Fail.

NURS 688 Adult-Gerontology Primary Care Practicum III   4
Focuses on advanced primary care management of the adolescent through the geriatric population with complex health issues and comorbidities through faculty supervised clinical experiences with a preceptor. Building on previous practicum experience, students implement and evaluate health screening, health promotion, health protection, disease prevention, risk reduction strategies and systems-based coordination in the management of adolescent through the geriatric population with complex health condition. Provides opportunities for leadership within the interprofessional healthcare team to direct quality improvement methods, implementation of evidence-based practice guidelines to address a clinical problem and evaluation of patient and systems-based outcomes. As the final practica course, performance at the advanced level is expected. Graded as Pass/Fail.

Family Nurse Practitioner

*NURS 580 Primary Care Of The Adult-Gerontology Population   4
This course provides content on the primary care management of adolescents through geriatrics. This course focuses on building a foundation of knowledge and clinical decision-making skills related to normal development, health promotion and disease prevention, and the diagnosis and management of common health conditions across the adult-life span. This course includes laboratory experiences.

*NURS 589 Maternal and Child Health in Primary Care   3
The course provides content on the management of the primary care health needs of pregnant women, and children from birth to adolescence. This course explores how family theory and health promotion of families provides the basis for both patient and family-centered approaches to providing evidence-based quality healthcare. This course includes laboratory experiences.

*NURS 590 Complex Problems In Family Primary Care   4
This course builds upon knowledge and skills from prior courses and clinical practicum experiences. The course provides content on the management of complex health issues across the lifespan. Students will increase knowledge and decision making skills in the primary care treatment of vulnerable populations, patients with multiple comorbidities, and selecting appropriate pharmacotherapeutics. This course includes laboratory experiences.

*NURS 595 Family Primary Care Practicum I   2
This course provides opportunities for students to develop beginning competencies as a family nurse practitioner through precepted practicum experiences. Advanced health assessment skills

and knowledge of management of common health problems are applied in the clinical setting to improve critical thinking and diagnostic reasoning.   Graded as Pass/Fail.

NURS 642 Family Primary Care Practicum II   4
The course provides opportunities for students to expand on their competencies as a family nurse practitioner through precepted practicum experiences. Critical thinking and diagnostic reasoning are applied in the management of common and complex health conditions across the lifespan. Students will develop, implement, and evaluate treatment plans. Students will provide high quality, safe, collaborative, and ethical care. Performance of clinical skills at an intermediate level is expected. Graded as Pass/Fail.

NURS 658 Family Primary Care Practicum III   4
This practicum course is the culminating experience for the family nurse practitioner student and focuses on skill refinement with increasing responsibility in the delivery of primary care to families. Students work with clinical preceptors to assimilate advanced clinical decision making and knowledge of the health system. Primary care skills including prioritization, treatment and coordination of both routine and complex episodic and chronic illnesses. Interdisciplinary collaborative practice skills are emphasized. Technology utilization is refined. Graded as Pass/Fail

Psychiatric Mental Health Nurse Practitioner

*NURS 521 Psychiatric Disorders Across The Lifespan   4
This course explores the role and scope of the advanced practice psychiatric mental health nurse, the psychiatric diagnostic reasoning process, psychiatric case formulation, and treatment planning. This course includes laboratory experiences.

*NURS 522 Psychopharmacology For Advanced Practice   3
This course examines the psychopharmacological treatment of psychiatric disorders. The course will cover pharmacodynamics and pharmacokinetics of psychotropic medications in detail and will explore major psychopharmacological drug classes and specific medications, indications, dosing, and side effects. Students will be exposed to content related to the interaction between prescription medications and nonprescription substances. This course includes laboratory experiences.

*NURS 598 Managing Psychiatric Disorders In Special And Vulnerable Populations   2
This course deepens students' knowledge of the diagnosis and treatment of psychiatric disorders in special and vulnerable patient populations, such as children and adolescents, older adults, individuals with chronic illness, , substance use disorders, personality disorders, individuals within the criminal justice system, refugees, LGBT+ populations, and military populations. Students will be challenged to confront their own biases and values as related to psychiatric practice.

*NURS 602 Psychotherapy: Theory And Practice   2
This course addresses the theoretical foundations and application of psychotherapy in advanced practice psychiatric mental health nursing. The course will explore major psychotherapy

approaches. Students will apply principles of reflective practice relevant to their future practice as psychiatric mental health nurse practitioners. This course includes laboratory experiences.

*NURS 597 Psychiatric Mental Health Practicum I   2
This course focuses on the diagnosis and management of individuals with psychiatric disorders across the lifespan through faculty-supervised clinical experiences with a preceptor. The course provides opportunities to perform comprehensive psychiatric evaluations and ongoing psychiatric care. Graded as Pass/Fail.

*NURS 641 Psychiatric Mental Health Practicum II   4
This course provides opportunities for students to expand on their competencies as a psychiatric mental health nurse practitioner student through faculty supervised practicum experiences with a preceptor. Students will provide high quality, safe, collaborative, and ethical care. Graded as Pass/Fail.

*NURS 659 Psychiatric Mental Health Practicum III   4
This practicum course is the culminating experience for the psychiatric mental health nurse practitioner student and focuses on skill refinement with increasing responsibility in the delivery of psychiatric care across the lifespan through precepted practicum experiences. Graded as Pass/Fail.

Nursing Leadership and Organization Science

*NURS 515 Holistic Leadership In Healthcare Delivery   3
Leadership concepts are advanced from a self- to organizational and societal perspective. How leaders evolve and maintain critical perspectives based on organizational mission, purpose and goals are critically analyzed. Political, legal, ethical, diversity and cultural perspectives are explored as a basis for leadership expression. Emphasis will be placed on communication and decision making skills.

*NURS 517 Organizational Science Implications For Human And Material Resource Management   3
Classical, modern, and postmodern theories of organizations are examined as the scientific foundation for leadership and administration in healthcare organizations. Human capital is presented as a foundation for examining individual and group thinking and decision-making. How groups and organizations form and evolve are explored through classic and current research. Foundations in human resource management and law, evaluating performance, job analysis and design, managing conflict, and influencing a culture of diversity and inclusion will be applied to current practice issues. Supply chain logistics and management, including product evaluation and decision-making related to sustainability are studied.

*NURS 604 Applied Budgeting And Finance   3
Fiscal analysis and application to unit, program, and service-line management are presented using finance-language to advance human resource, supplies and capital budgeting. Specific topics include price-setting, cost-benefit/break even analysis, contract development, and financial ratio analysis. Clinical operations, grant budgets, and start-up fund acquisition skills are

acquired. The cost analysis and clinical benefit of current staffing models will be justified from a fiscal/clinical perspective. Requires competency in Excel.

*NURS 603 Improvement Science And Outcomes Management   3
 With an emphasis on the foundations of quality and safety science, the techniques and tools for analyzing organizational and clinical processes for efficacy, root cause analysis when examining medical errors, and developing or using valid and reliable metrics to measure outcomes are presented. The importance of building a culture of quality and safety is reinforced, along with the role of regulators and regulations to monitor safety.

*NURS 628 Practicum In Nursing Leadership And Organizational Science   5
 A field-based course project is the centerpiece of the practicum, where the learner advances leadership skills through decision-making, human and capital resource management, communication and change management. Knowledge is synthesized and applied in this practicum experience. Graded as pass/fail.

*NURS 516 Healthcare Information Technology   3
The course gives students a broad overview of health information technology in the context of the healthcare organization; discusses principles of informatics and information-flows in nursing and health care using systems analysis techniques; and, emphasizes understanding of how nurse leaders implement, manage, and evaluate health care technology and informatics projects. Information and communication technology system integration, data security, as well as ethical and regulatory issues will be reviewed. Current topics and issues related to the use, retrieval, evaluation, and dissemination of healthcare information will be discussed, as well as the role of informatics and analytics in decision-making.

*NURS 593 Project And Planned Change Management   3
Models for leading change through project management are examined using linear and non-linear change dynamics. Skills in problem analysis, change agent-client system capacity for change and standard setting are acquired in this course.   The impact of non-linear social change on organizations is introduced. Project management and tools to evaluate the impact of change are examined.

Electives from the DaVinci Center
INNO 502   Business Principles for Product Innovation   3
This course presents an overview of business organizations and processes. Major functional responsibilities of the modern organization are introduced. Mechanisms such as strategic planning and project management are used to establish connections between business functions, the work that comprises them, and their purpose. An emphasis is placed on business topics relevant to students' interested in innovation and product development. Understanding the framework within which business decisions are made, and considering the outcomes of selected courses of action, is essential to being part of an organization.

INNO 590 Da Vinci Project   3
Students will engage in an interdisciplinary product innovation project with a corporate sponsor under faculty supervision. Topics and activities will hone product innovation skills, including

project management, team building, concept generation and testing, market analysis, visualization, and prototyping.

INNO 600 Integrative Design Studio   3
 Integrates the theory and practice of product innovation across the arts, business and engineering disciplines. Students are exposed to and apply a broad set of skills and tools to aid in understanding, envisioning and communicating product innovation. Working in interdisciplinary teams, students will hone team working skills and collectively address contemporary issues associated with product innovation, such as sustainability. Taught in English.

INNO 691 Topics in Product Innovation   3
Study of current and emerging topics in the field of product innovation. Topics may vary by semester. See the Schedule of Classes for offerings each semester

Appendix D - Comparison of Virginia's Nursing Master's Programs with Similar Concentrations

	AGACNP	AGPCNP	FNP	PMHNP	NAL
George Mason University		MSN 49c	MSN 49c	PMC 21	MSN 39 c
George Washington University	MSN 51c PMC 23c	MSN 48c PMC 30c	MSN 48 c PMC 17c	MSN 50 c PMC 22c	MSN 36 c
Hampton University			MS 44c		MS 45c
James Madison University		MSN 46c	MSN 49c	MSN 51c	MSN 32c
Jefferson College of Health Sciences			MSN 50c		MSN 36c
Liberty University					MSN 42c
Marymount University			MSN 45c		
Old Dominion University			MSN 49c		MSN 47c
Shenandoah University		MSN 49c PMC 21c	MSN 48c PMC 23c	MSN 52c PMC 21c	
University of Virginia	MSN 43c PMC 33c		MSN 46c PMC 36 c	MSN 42c PMC 32c	
Virginia Commonwealth University (modified)	*MS 44c PMC 21c*	*MS 44c PMC 21c*	*MS 44c PMC 21c*	*MS 44c PMC 21c*	*MS 35c PMC 20c*
		c = Credits			
		MS = Masters of Science			
		MSN = Masters of Science in Nursing			
		PMC = Post Masters Certificate			

AUDIT AND COMPLIANCE SERVICES CHARTER

VIRGINIA COMMONWEALTH UNIVERSITY
and
VCU HEALTH SYSTEM

Virginia Commonwealth University (university) and VCU Health System Authority (health system) maintain comprehensive and effective internal audit and compliance programs. The objective of Audit and Compliance Services ("department") is to assist members of the Board of Visitors, Board of Directors, and management in the effective performance of their responsibilities. The department fulfills this objective by providing independent and impartial examinations, investigations, evaluations, counsel, and recommendations for the areas and activities reviewed.

Scope of Work

The scope of the department's work is to determine whether the university's and health system's risk management, internal control, governance, and compliance processes, as designed and represented by management, are adequate and functioning in a manner to provide reasonable assurance that:

- Risks are appropriately identified and managed

- Control processes are adequate and functioning as intended

- Significant, financial, managerial, and operating information is accurate, reliable, and timely

- An effective university compliance program is maintained to provide guidance and resources, in an oversight role, for all educational, research, and athletic compliance programs to optimize ethical and compliant behavior

- An effective health system compliance program is implemented to further the health system's mission, vision, and values by promoting a culture of compliance, and preventing, correcting, and investigating issues through education, monitoring, and enforcement

- An effective program of information technology (IT) management and security is maintained by management to ensure health system and university IT and data assets are properly secured, integrity protected, available as needed and kept confidential as required by applicable policies laws and regulations

- Employees' actions are in compliance with the respective codes of conduct, policies, standards, procedures, and applicable laws and regulations

- Resources are used efficiently and are adequately protected

- Program plans and objectives are achieved

- Significant legislative and regulatory issues impacting the university and health system are recognized and appropriately addressed

Opportunities for improving management controls, accountability, fiscal performance and compliance processes, and for protecting organizational reputation will be addressed with the appropriate level of management when identified.

Accountability

The Executive Director of Audit and Compliance Services shall be accountable to the Board of Visitors, through the Audit, Integrity, and Compliance Committee, and the Board of Directors, through the Audit and Compliance Committee, to maintain comprehensive and professional internal audit and compliance programs. In fulfilling those responsibilities, the Executive Director will:

- Establish annual goals and objectives for the department, and report periodically on the status of those efforts.

- Execute the annual work plans and initiatives.

- Coordinate efforts with other control and monitoring functions (risk management, financial officers, campus police, university counsel and health system general counsel, external auditors, government reviewers, etc.).

- Report significant issues related to the department's scope of work, including potential improvements, and continue to provide information about those issues through resolution.

- Provide updates to the respective board committees, the university president, and the chief executive officer of the health system on the status of the work plans and initiatives, qualifications of staff, and sufficiency of department resources.

Independence and Objectivity

All work will be conducted in an objective and independent manner. Staff will maintain an impartial attitude in selecting and evaluating information and in reporting results. Independence in fact and appearance enables unbiased judgments that are essential to the proper conduct of the department's scope of work.

To provide an appropriate reporting structure to support independence, the Executive Director shall report to the Audit, Integrity, and Compliance Committee of the Board of Visitors and to the Audit and Compliance Committee of the Board of Directors. The Executive Director shall report administratively to the university's President.

Responsibility

The department will assist the Board of Visitors, Board of Directors, and management by:

- Maintaining a professional staff with sufficient knowledge, skills, and experience to fulfill the requirements of this charter.

- Developing and executing annual and long-range risk-based work plans and initiatives. The plans and initiatives will be submitted to management for review and comment and to the respective board committee for approval. The department recognizes that one of the primary benefits of these programs is the ability to respond to issues that arise during the normal course of business. Accordingly, the annual plans shall include time for management requests and special projects.

- Participating in an advisory capacity in the planning, development, implementation, or change of significant compliance and control processes or systems. The Executive Director shall ensure that the level of participation in these projects does not affect the department's responsibility for future evaluation of evaluating these processes or systems nor compromise its independence.

- Conducting or assisting in the investigation of any suspected fraudulent activities, misconduct, or non-compliance issues, and notifying management and the respective board committees of the results.

- Issuing periodic reports to management and the respective board committees summarizing the results of the department's activities.

- Considering the scope of work of the external auditors, as appropriate, to provide optimal audit coverage to the university and health system at a reasonable overall cost.

- Reporting at least annually to the Board of Visitors, Board of Directors, and senior management on the department's purpose, authority, responsibility, and performance relative to its plans and initiatives, and on its conformance to standards and best practices. Reporting should also include significant risk exposures and control issues, corporate governance issues, serious misconduct or non-compliance, and other matters needed or requested by the Board and senior management.

Authority

The department and its staff are authorized to:

- Have unrestricted access to all activities, records, property, and personnel. Receive cooperation from all university and health system personnel and affiliates.

- Have full access to the respective board committee.

- Allocate departmental resources, set audit and review frequencies, determine scopes of work, and apply the techniques necessary to accomplish objectives.

- Obtain the necessary assistance of personnel in departments when performing work plans and initiatives, as well as that of other specialists.

The department and its staff are not authorized to:

- Perform operational duties in interim status, or otherwise, unless authorized in advance by the respective board committee.

- Initiate or approve accounting transactions external to the department.

Standards of Practice

The department will conduct its scope of work in accordance with requirements and best practices as established by relevant authoritative and objective sources from industry and government.

For internal audit functions, this includes both mandatory and recommended guidance from the Institute of Internal Auditors International Professional Practices Framework. The mandatory guidance requires our department to conform with the Core Principles for the Professional Practice of Internal Auditing, Definition of Internal Auditing, Code of Ethics, and *International Standards for the Professional Practice of Internal Auditing (Standards)*. Internal auditing is an independent, objective assurance, and consulting activity designed to add value and improve an organization's operations. Our department will help the university and health system accomplish its objectives by bringing a systematic, disciplined, and risk-based approach to evaluate and improve the effectiveness of risk management, control, and governance processes.

For maintaining effective compliance programs, standards of practice are driven by the guidance provided in Chapter 8 of the Federal Sentencing Guidelines as promulgated by the US Sentencing Commission. The main focus of an effective program is to prevent and detect misconduct, remedy harm when identified, self-report where applicable, and maintain due diligence in promoting an organizational culture that encourages ethical conduct and a commitment to compliance with the law.

For the health system compliance program, guidance by the Health Care Compliance Association is also included. This organization sets the standard for professional values and ethics in the health care compliance field.

Quality Assurance and Improvement Program

The department will maintain a quality assurance and improvement program that covers all aspects of the internal audit activity. This program will be designed to:

- evaluate internal audit's conformance with the *Standards* and application of the Code of Ethics;
- assess the efficiency and effectiveness of the department; and
- identify opportunities for improvement.

The quality program includes both internal and external assessments. Internal assessments will include ongoing monitoring and periodic assessments of internal audit activity. An external assessment will be performed at least once every five years by qualified individuals who are independent of the internal audit function.

VIRGINIA COMMONWEALTH UNIVERSITY
BOARD OF VISITORS

FINANCE, BUDGET, AND INVESTMENT COMMITTEE CHARTER

I. PURPOSE

The primary purpose of the Finance, Budget, and Investment Committee ("Committee") is to assist the Board of Visitors in fulfilling its objectives and fiduciary responsibilities related to applicable policy/ies and oversight of:

- University finances and investments
- University policies on debt management
- University facilities planning, design, construction and renovation.
- University purchase and divesture of land, including any easements.

The Committee is responsible for reviewing financial statements, budgets, debt, investments, cash management, six-year financial operating and capital plans, and make corresponding recommendations to the Board of Visitors all for the purpose of maintaining a sound fiscal standing. In addition and contributing to fiscal standing, the Committee is responsible for reviewing the University's tuition and fee charges for each year. The Committee directly oversees the investment of the cash management pool and reviews the financial activities of any foundation or organization established to benefit the University, including foundations, partnerships, or other affiliated entities.

The Committee also approves selection of engineers and architects for University construction capital projects exceeding $2 million, approves the renovation or replacement of outdated facilities and equipment, and approves project plans for construction projects exceeding $2 million, approves the acquisition of all property, and the sale and demolition of property.

University management is responsible for day to day operation of the University within the established authorities, under the governance of the Committee.

II. COMPOSITION AND INDEPENDENCE

The Committee will be comprised of three or more Visitors. In addition to complying with the Commonwealth of Virginia's Conflict of Interest laws and any University policies, each member must be free from any financial, family or other material personal relationship that, in the opinion of the Board or the Committee members, would impair their independence from management and the University. Committee members should also refrain from activities that a reasonable person would view as unethical or contrary to the institutional mission.

III.   **RESPONSIBILITIES**

In performing its oversight responsibilities, the Committee shall:

A.   <u>**General**</u>**:**

1.   Adopt a formal written charter that specifies the Committee's scope of responsibility. The charter should be reviewed annually and updated as necessary.
2.   Maintain minutes of open session meetings.
3.   Report Committee actions to the Board of Visitors with such recommendations as the Committee may deem appropriate.
4.   Consistent with state law, the Committee may meet in closed session (with or without members of senior management present) with the external auditors and/or the Vice President for Finance and Administration to discuss matters that the Committee or any of these groups believe should be discussed privately.
5.   Become well acquainted with all of the information and pertinent facts under the purview of the Committee.
6.   Implement best practices across the institution for financial management.
7.   Ensure that the institution is operating efficiently, effectively and appropriately with regard to the use of public and other funds to support its stated mission.

B.   <u>**Financial Policy and Investments**</u>**:**

1.   Review recommendations of the Administration concerning new or revised financial policy and make appropriate recommendations to the Board of Visitors.
2.   Review financial assumptions upon which budgets are based.
3.   Review and recommend approval of the six-year financial plan and operating budget.
4.   Review and recommend approval of the six-year capital outlay plan and capital outlay budget, and all amendments to the plan.
5.   Review periodically and compare financial operating results with appropriate budgets and benchmarks.
6.   Approve major design changes to the VCU Optional Retirement Plan.
7.   Review annual financial statements and supporting schedules and report to the Board the results of that review.
8.   Serve, with the advice of the Investment Advisory Subcommittee, as an investment committee and oversee University investment policies and activities including direct management of the University's cash investment pool and monitoring of the policies and activities of the University-related private foundations.
9.   Review annually the BOV Fund.
10.   Review quarterly the University Efficiencies.
11.   Review quarterly the F&A Dashboard.

C.   **Facilities Planning and Debt Management:**

1.   Review and recommend approval of the master site plan.
2.   Review and recommend approval of plans for new construction and major renovation projects in accordance with Board-approved procedures.
3.   Review and recommend approval of the six year capital outlay program and amendments thereto.
4.   Review and recommend to the Board all debt issuance and review debt management policies.
5.   Review and recommend approval of property acquisition or disposition of real estate and other interests therein.
6.   Consider such other matters relating to the maintenance and security of the University's buildings and grounds and the care and preservation of the University's furnishings and equipment as may warrant its consideration.

D.   **Emergency Preparedness:**

1.   Review and recommend approval of plans pertaining to emergency preparedness and campus security.

E.   **Administration:**

1.   Review and approve the Committee charter annually and any significant updates to the charter.
2.   Review and approve the annual Committee work plan and any significant changes to the plan.
3.   Review the qualifications of the Committee members, staff and the level of staffing by the institution as needed.
4.   Review annually the Deficit Disclosure.
5.   Annual Investment Conflict of Interest Disclosure Statement.
6.   Review annually all Investment Policy Statements – specifically asset allocations.
7.   Review reports of the Financial Integrity and Stewardship Committee as needed.
8.   Review annually Agency Risk Management and Internal Control Standards (ARMICS)

F.   **Tuition and Fees:**

1.   Review and recommend tuition and fee charges if needed to provide guidance to the Board.

IV.   **MEETINGS**

The Committee will meet at least four times annually. Additional meetings may occur more frequently as circumstances warrant. The Committee Chair should communicate with the Vice President of Finance and Administration prior to each Committee meeting to finalize the meeting agenda and review the matters to be discussed.

Virginia Commonwealth University
Board of Visitors

Finance, Budget, and Investment Committee Meeting Planner

A=Annually; Q=Quarterly; AN=As Necessary	Frequency			Planned Timing			
Q1, Q2, Q3, Q4 based on Fiscal Year (July – June)	A	Q	AN	Q1	Q2	Q3	Q4
				Sept	Dec	Feb	May
A. General							
1. Adopt a formal written charter that specifies the Committee's scope of responsibility. The charter should be reviewed and updated as necessary.	X			X			
2. Maintain minutes of open session meetings.		X		X	X	X	X
3. Report Committee actions to the Board of Visitors with such recommendations as the Committee may deem appropriate.		X		X	X	X	X
4. Consistent with state law, the Committee may meet in closed session (with or without members of senior management present) with the external auditors and/or the Vice President for Finance and Administration to discuss matters that the Committee or any of these groups believe should be discussed privately.	X		X				X
5. Become well acquainted with all of the information and pertinent facts under the purview of the Committee.			X				
6. Implement best practices across the institution for financial management.			X				
7. Ensure that the institution is operating efficiently, effectively and appropriately with regard to the use of public and other funds to support its stated mission.			X				
B. Financial Policy and Investments							
1. Review recommendations of the Administration concerning new or revised financial policy and make appropriate recommendations to the Board of Visitors.			X				
2. Review financial assumptions upon which budgets are based.	X						X
3. Review and recommend approval of the six-year financial plan and operating budget.	X			X			
4. Review and recommend approval of the six-year capital outlay plan and capital outlay budget, and all amendments to the plan.	X		X				X
5. Review periodically and compare financial operating results with appropriate budgets and benchmarks.		X		X	X	X	X
6. Approve major design changes to the VCU Optional Retirement Plan			X				
7. Review annual financial statements and supporting schedules and report to the Board the results of that review.	X					X	

A=Annually; Q=Quarterly; AN=As Necessary	**Frequency**			**Planned Timing**			
Q1, Q2, Q3, Q4 based on Fiscal Year (July – June)	**A**	**Q**	**AN**	**Q1**	**Q2**	**Q3**	**Q4**
				Sept	Dec	Feb	May
8. Serve, with the advice of the Investment Advisory Subcommittee, as an investment committee and oversee University investment policies and activities including direct management of the University's cash investment pool and monitoring of the policies and activities of the University-related private foundations.			X				
9. Review the BOV Fund	X			X			
10. Review the University Efficiencies		X		X	X	X	X
11. Review the F&A Dashboard		X		X	X	X	X
C. Facilities Planning and Debt Management							
1. Review and recommend approval of the master site plan.			X				
2. Review and recommend approval of plans for new construction and major renovation projects in accordance with Board-approved procedures.		X		X	X	X	X
3. Review and recommend approval of the six year capital outlay program and amendments thereto.	X		X				X
4. Review and recommend to the Board all debt issuance and review debt management policies.	X		X		X		
5. Review and recommend approval of property acquisition or disposition of real estate and other interests therein.			X				
6. Consider such other matters relating to the maintenance and security of the University's buildings and grounds and the care and preservation of the University's furnishings and equipment as may warrant its consideration.			X				
D. Emergency Preparedness							
1. Review and recommend approval of plans pertaining to emergency preparedness and campus security			X				
E. Administration							
1. Review and approve the Committee charter and any significant updates to the charter.	X			X			

A=Annually; Q=Quarterly; AN=As Necessary	**Frequency**			**Planned Timing**			
Q1, Q2, Q3, Q4 based on Fiscal Year (July – June)	**A**	**Q**	**AN**	**Q1**	**Q2**	**Q 3**	**Q4**
				Sept	Dec	Feb	May
2. Review and approve the Committee work plan and any significant changes to the plan.	X			X			
3. Review the qualifications of the Committee members, staff and the level of staffing by the institution.			X				
4. Review the Deficit Disclosure.	X						X
5. Investment Conflict of Interest Disclosure Statement.	X						X
6. Review the Investment Policy Statements – Asset Allocation	X			X			
7. Review reports of the Financial Integrity and Stewardship Committee			X				
8. Review the Agency Risk Management and Internal Control Standards (ARMICS)	X			X			

September 2019

A=Annually; Q=Quarterly; AN=As Necessary	Frequency			Planned Timing			
Q1, Q2, Q3, Q4 based on Fiscal Year (July – June)	A	Q	AN	Q1	Q2	Q3	Q4
				Sept	Dec	Feb	May
F. Tuition and Fees							
1. Review and recommend tuition and fee charges.	[1]						X

[1] Annually in April a Special Meeting of the BOV may be held to discuss the Budget Plan and Proposed Tuition and Fees.

SCHEV Six Year Operating Plan, FY2021-22 Biennium

The Virginia Higher Education Opportunity Act of 2011 requires institutions to submit plans to SCHEV (State Council of Higher Education for Virginia) highlighting enrollment projections, academic strategies, and financial revenue projections.

- Plans are submitted at the beginning of the fiscal year (July). New plans are submitted every odd year for the next biennium; updates on alternate years.

- Figures are for planning purposes only and are not considered as binding on the Board of Visitors.
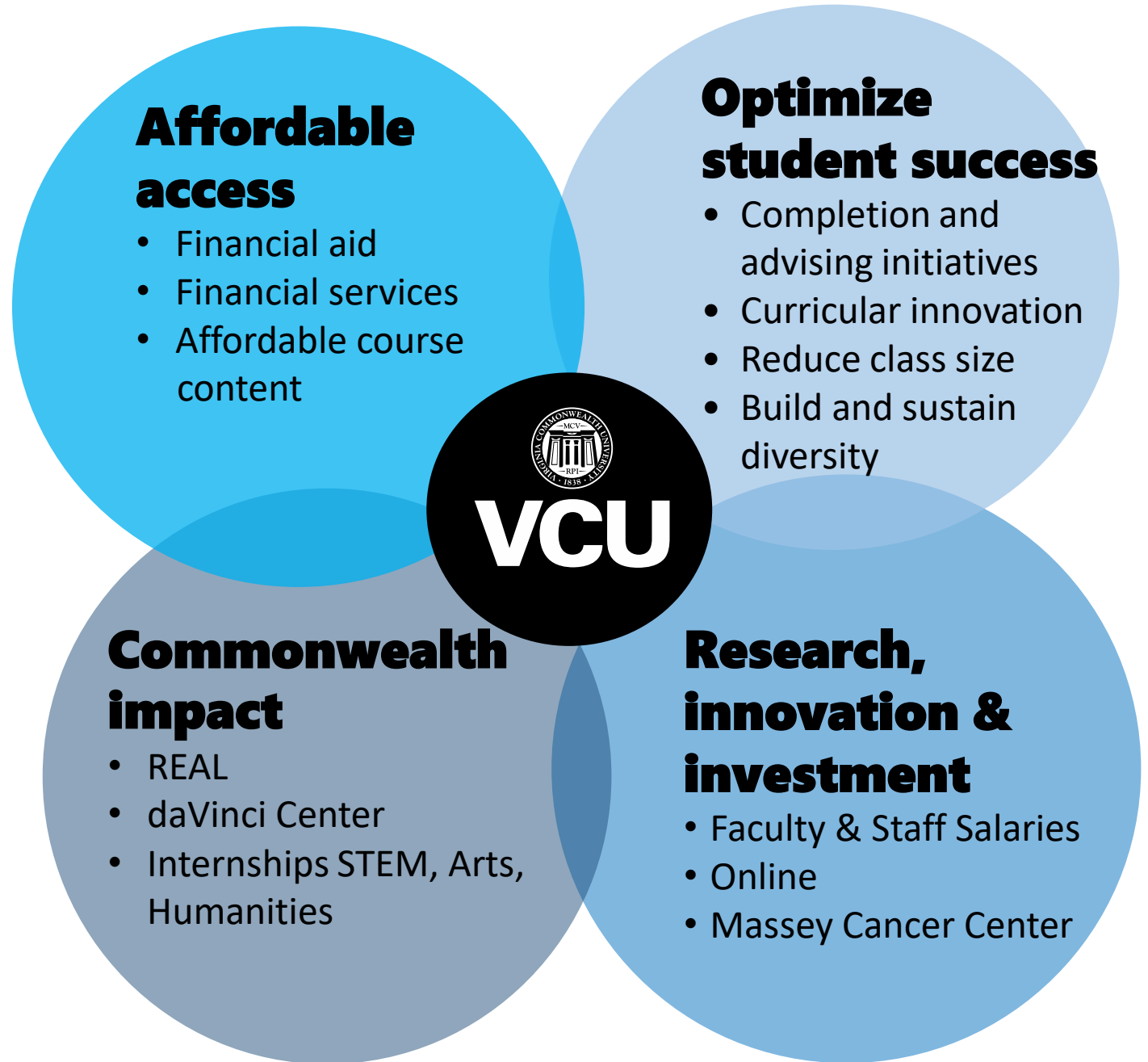
Six Year Operating Plan

Given Virginia's decentralized structure for higher education, the Six Year Plan assists SCHEV in:

- **Identifying strategic priorities across institutions**

- **Data gathering on metrics such as financial aid, economic impact**

The plan for this year asked that institutions identify:

- Key strategic initiatives

- Planned financial aid spending for need-based aid

- Economic impact (due 10/1)

- Requests for additional State funding

- Anticipated growth in tuition rates assuming

  a) flat State funding; b) with additional tuition moderation funding from the State

Six-year Plan strategies address Quest and Virginia Plan goals

Affordable access
- Financial aid
- Financial services
- Affordable course content

Optimize student success
- Completion and advising initiatives
- Curricular innovation
- Reduce class size
- Build and sustain diversity

Commonwealth impact
- REAL
- daVinci Center
- Internships STEM, Arts, Humanities

Research, innovation & investment
- Faculty & Staff Salaries
- Online
- Massey Cancer Center

VCU

SCHEV Six Year Operating Plan, FY2021-22 Biennium
July 2019 Plan assumptions

- Moderate enrollment growth

- Growth in expenses limited to highest strategic priorities:

  - Faculty & staff salary increase – 3% faculty, 2% staff (deferred six months)

  - Financial aid -

  - Student Success initiatives

  - Operational mandates

- Requested growth in state support:

  - Mitigate Tuition rate growth - estimated rates of 4% with $10M of new state support; 7% if funding remains flat

  - Increase financial aid (matching VCU growth)

  - Provide funding for expansion of REAL/Student Success initiatives

  - Support Massey Cancer Center

VCU

VCU FY20-FY22 Financial Plan

- No increase General Fund Support

- UG Tuition 0%, 7%, 4%

Virginia Commonwealth University
Preliminary 3 Year Financial Plan Scenario

	2020	2021	2022
University Revenue			
Tuition		463,287	491,713
Fees		13,862	13,862
Other NGF Funding		27,161	30,993
State Funding (FY20 growth included)		195,407	195,407
Total University Revenue	**680,857**	**699,716**	**731,974**
Projected Expenses			
University Budget		(689,701)	(709,832)
Projected Salary & Fringe Growth		(10,808)	(15,927)
Projected Financial Aid Growth		(4,100)	(5,100)
Academic and Operational Needs		(5,222)	(5,641)
Projected Additional University Expenses		**(20,130)**	**(26,668)**
Auxiliary Overhead		500	1,000
Net Total University Expenses	**(689,701)**	**(709,332)**	**(735,500)**
University Net Position	**(8,844)**	**(9,615)**	**(3,525)**
Health Ins Premium Holiday Funds (1X)	2,300	-	-
Growth in State Support	-		
Revised University Net Position	**($6,544)**	**($9,615)**	**($3,525)**

VCU FY20-FY22 Financial Plan

- Increased General Fund Support

- UG Tuition 0%, 4%, 3%

Virginia Commonwealth University
Preliminary 3 Year Financial Plan Scenario

	2020	2021	2022
University Revenue			
Tuition		454,732	479,606
Fees		13,862	13,862
Other NGF Funding		27,161	30,993
State Funding (FY20 growth included)		195,407	195,407
Total University Revenue	**680,857**	**691,161**	**719,867**
Projected Expenses			
University Budget		(689,701)	(709,832)
Projected Salary & Fringe Growth		(10,808)	(15,927)
Projected Financial Aid Growth		(4,100)	(5,100)
Academic and Operational Needs		(5,222)	(5,641)
Projected Additional University Expenses		**(20,130)**	**(26,668)**
Auxiliary Overhead		500	1,000
Net Total University Expenses	**(689,701)**	**(709,332)**	**(735,500)**
University Net Position	**(8,844)**	**(18,171)**	**(15,632)**
Health Ins Premium Holiday Funds (1X)	2,300	-	-
Growth in State Support	-	10,000	13,000
University Net Position	**(6,544)**	**($8,171)**	**($2,632)**

VIRGINIA COMMONWEALTH UNIVERSITY
BOARD OF VISITORS
FINANCE, BUEGET & INVESTMENT
COMMITTEE
September 13, 2019

Action Item
Approval of Virginia Commonwealth University's
2019 Six-Year Plan

Item:
Board of Visitors approval of Virginia Commonwealth University's 2019 Six-Year Plan as required by § 23-38.87:17 of the "*Preparing for the Top Jobs of the 21st Century: The Virginia Higher Education Opportunity Act of 2011*" (TJ21).

Background:
In response to the requirements outlined in § 23-38.87:17 of the "*Preparing for the Top Jobs of the 21st Century: The Virginia Higher Education Opportunity Act of 2011*" (TJ21) legislation, attached is a copy of Virginia Commonwealth University's 2019 amended Six-Year Plan submitted to the State Council of Higher Education for Virginia (SCHEV) by the stated deadline of July 1, 2019.

TJ21 established a mandate that the governing board of each public institution of higher education develop and adopt biennially and amend or affirm annually a six-year plan for their institution. The act requires the plans to be submitted to the State Council for Higher Education of Virginia (SCHEV) by July 1 of each odd-numbered year and also requires any amendments or affirmations to existing plans to be submitted by July 1 of each even-numbered year.

The instructions and template to complete the six-year plan, or the plan update, are usually provided by SCHEV in May, typically at the time of the May Board meeting. Due to this timeline and in accordance with SCHEV instructions, the University has historically submitted the plan, or update, to SCHEV by the July 1st deadline and then has presented it to the Board for approval at the next scheduled meeting which is usually held in September. Over the July and August months, State representatives review the plans submitted by each institution and then provide comments in early September for each institution to respond. The responses as well as the final board approved six-year plan is then due to SCHEV by October 1st. This process was once again followed for the 2019 Six Year Plan submission.

The strategies identified in the University's 2019 Six-Year Plan were developed collaboratively with each division through the annual budget development cycle. Building upon the strategic multi-year budget developed in the previous cycle, divisions reviewed their respective submissions and updated strategies to align with current priorities and objectives. The academic strategies related to programmatic growth were developed by the Provost through the respective academic unit.

The presented tuition and fee scenarios are for modeling purposes only and are based on a range of assumed incremental general fund support. These scenarios and the funding of the proposed strategies are subject to change based on the actual general fund support received. Additionally, approval of tuition and fees is the responsibility of the Board of Visitors and may be adjusted based upon factors such as incremental general fund support, legislative requirements, projected enrollment growth, and prioritization of strategies to implement.

Virginia Commonwealth University's 2019 Six-Year Plan was updated to reflect the status of existing strategies based on institutional priorities and legislative action during the 2019 General Assembly Session. Comments regarding the University's 2019 Six-Year Plan update have been provided by SCHEV and will be addressed in the institution's final plan submittal to SCHEV by October 1, 2019.

Action:
Virginia Commonwealth University Board of Visitors approval of the Virginia Commonwealth University 2019 Six-Year Plan.

Resolution

Approval of Virginia Commonwealth University's
2019 Six-Year Plan
September 13, 2019

       WHEREAS, the Higher Education Opportunity Act of 2011 became effective July 1, 2011, and requires each public institution of higher education in Virginia to develop and submit an institutional six-year plan; and

       WHEREAS, § 23-38.87:17 of the Act requires, "*The governing board of each public institution of higher education shall develop and adopt biennially and amend or affirm annually a six-year plan for the institution and shall submit that plan to the Council* (State Council of Higher Education for Virginia)*, the Governor, and the Chairs of the House Committee on Appropriations and the Senate Committee on Finance no later than July 1 of each odd-numbered year, and shall submit amendments to or an affirmation of that plan no later than July 1 of each even-numbered year or at any other time permitted by the Governor or General Assembly";* and

       WHEREAS, Virginia Commonwealth University prepared a six-year plan in accordance with the requirements of the Higher Education Opportunity Act of 2011 and guidelines provided by the State Council of Higher Education for Virginia; and

       WHEREAS, the University submitted the six-year plan to the State Council of Higher Education for Virginia by the stated deadline of July 1, 2019 for the 2019 submission; and

       WHEREAS, the 2019 Six-Year Plan must be approved by the Board of Visitors prior to the October 1 final submission;

       THEREFORE, BE IT RESOLVED the Virginia Commonwealth University Board of Visitors approves the Virginia Commonwealth University 2019 Six-Year Plan as presented in the format provided by the State Council of Higher Education for Virginia; and

       BE IT FURTHER RESOLVED, that the University is authorized to revise the 2019 Six-Year Plan as required by State officials for final submission by the stated deadline.

Request for Approval of Demolition
Franklin Street Gymnasium

Background

The Franklin Street Gymnasium was built in phases between 1892 and 1967 and located at 817 West Franklin Street on the Monroe Park Campus. While the site is within the Franklin Street historic district, the Department of Historic Resources found the Gymnasium is not a contributing structure. The Virginia Department of Historic Resources does not object to the demolition.

Considerations

The 817 West Franklin Street location is the site for the College of Humanities and Sciences STEM Teaching Laboratory building included in the One VCU Master Plan.

Funding

Demolition of the building is funded as part of the Capital Project to construct the College of Humanities and Sciences STEM Teaching Laboratory. The state approved funding for the new STEM building in May 2019.

Recommendation

Approve the demolition of the Franklin Street Gymnasium.

Approval for Demolition
Franklin Street Gymnasium

Franklin Street Gym

Purpose:
- VCU seeks BOV approval to demolish the Franklin Street Gymnasium.
- The new STEM building will be built on the site.

Cost:
- The state approved funding for the College of Humanities and Sciences STEM building in May 2019. The gymnasium demolition is funded as part of the project.

Recommendation:
- Approve the demolition of the Franklin Street Gymnasium.

STEM building rendering