

MEMORANDUM

To: Board of Regents
From: Board Office
Subject: Accreditation Report for the Nurse Anesthesia Program,
University of Iowa
Date: January 31, 2000

Recommended Action:

Receive the report on accreditation of the Nurse Anesthesia Program, University of Iowa.

Executive Summary:

On November 6, 1998, the Council on Accreditation of Nurse Anesthesia Educational Programs (COA) granted continuing accreditation to the University of Iowa's Nurse Anesthesia Program. In subsequent correspondence (October 22, 1999), the COA has indicated that all documentation relative to previously raised concerns was complete.

The two-year reaccreditation period began October 10, 1998; it is in effect until October 2000. Another visit is to be conducted in the Spring of 2000. In the report to be prepared for that visit, several ongoing concerns are to be addressed.

Accreditation is one method of measuring quality of academic programs. Such a practice is consistent with KRA 1.0.0.0, Quality, of the Board of Regents' strategic plan. More specifically, it relates to Objective 1.1.0.0, "to improve the quality of existing and newly created educational programs."

Background and Analysis:

The Nurse Anesthesia Program is a 30-month program resulting in a Master of Nursing in Anesthesia degree. Approximately five to six students are admitted per year. A core faculty of four persons, plus additional clinical staff in Iowa City and at off-campus sites, provides an average faculty/student ratio in most courses and practicum of 1:1 or 1:2.

There have been three graduating classes, comprising a total of 17 graduates, since the inception of the Anesthesia Nursing Program. Of the 17 graduates, all are CRNAs and to date,

- 9 graduates are employed in Iowa
- 2 graduates are employed in areas in Illinois and Arkansas designated by the federal government as health professional shortage areas (rural or poverty areas)
- 6 graduates are working in other locales (Kansas City, KS; Omaha, NE; Flagstaff, AZ; Birmingham, AL; Vancouver, WA; Eau Claire, WI).

The score results on the National Certification Examination are as follows:
(Perfect scaled Score = 600; passing = 450)

<u>Class Year</u>	<u>Graduates</u>	<u>Iowa Mean Score</u>	<u>Natl. Mean Score</u>
1997 1997: 5 pass	5	559.6 (range 536-596)	523.7 (range 300-600)
1998 1998: 5 pass, 1 failure*	6	539.4 (range 408-600)	535.0 (range 300-600)
1999 1999: 6 pass	6	589.7 (range 579-600)	543.1 (range 300-600)

*failure passed on re-take in 1999

The COA changed its policy in 1990 that lengthened the maximum accreditation cycle for nurse anesthesia programs from four to six years. In that same year, a requirement for biennial interim reports, i.e., modified self-studies, was eliminated and a new requirement of annual reports was adopted, effective in August 1991. Further modifications were made in the annual report requirements in 1997, effective in 1998.

These changes had an impact upon the preparation of the annual report for 1998 and the accreditation on-site visit, which was conducted in April of 1998. On campus, the program was undergoing a significant change; a new director of the Iowa City program began his duties in June 1998.

The on-site team's report (June 4, 1998) listed eleven strengths of the program, and indicated that there were no areas of possible critical weakness. However, there were 12 areas of concern, which were judged to be in partial compliance of

the standards. In July of 1998, SUI responded that the on-site judgments were correct in most aspects and indicated that changes would be made in the program. Throughout 1998 and into 1999, these concern areas were successfully addressed. Several related to the consistency of the mission of the program which is to provide Certified Registered Nurse Anesthetists(CRNAs) for Iowa, rural settings, and the nation. The concerns were that there were too few rural affiliate rotations, lack of documentation of curriculum experiences, insufficient linkage of outcomes with curriculum, and insufficient faculty and staff time for teaching and research.

By October 1999, the concerns had been addressed. The COA asked the program to be attentive to three areas. Since these three areas relate to implementation and use of the evaluation instrument and to the direct observation of the students in clinical performance, the COA will instruct the site visitors to review these three areas at the time of the on-site review in April 2000. The three areas are:

- **(Standard III, Criterion C12). A program is required to maintain a curriculum that achieves the program's outcome criteria.**
Response to date: The program submitted a copy of the newly modified outcome evaluation tool implemented during the Spring 1999 semester. Reviewers will be required to pay particular attention to the completed copies of the form.
- **(Standard III, Criterion C16). A program is required to afford students experiences that require their active participation in perioperative anesthesia management.**
Response to date: The program submitted seven student evaluations completed by 2nd and 3rd year students. These forms are categorized as 2nd and 3rd year by appendices only; the form is missing the program name, student name, date, and level of student experience. The program director has noted that the COA has requested that submitted student evaluations be anonymous. The first year students were not clinical participants during that semester, so they were not required by the COA to be included in the survey. During the semester in question, four of the 11 program students were away at off-site rotations, hence the low response rate. The reviewers will be directed to pay particular attention to completed clinical evaluations to verify that they represent all pertinent information and that they continue to be utilized.

- **(Standard V, Criterion E4). A program is required to employ a variety of indicators to evaluate students' clinical and cognitive skills as they progress through the program.**

Response: The program submitted copies of the new clinical evaluation tool implemented during the Spring 1999 semester. Reviewers will be directed to pay particular attention to the completed copies of the clinical evaluation tool to verify that it is being utilized.

In the fall of 1998, the accreditation organization's headquarters received some complaints about working conditions for students. The investigation of these complaints required additional time, including the opportunity for students to visit with the University ombudsperson. Ultimately, it was determined that some of the complaints were based on situations since resolved. The COA determined that the rest of the complaints were not supported by evidence. The response of the University, accepted by COA, was that changes made in the curriculum -- clinical assignments, a new administrative team, and modifications in communications to alert students to resources available to discuss problems -- would address pending issues. COA policy provides that, at each accreditation site visit, all students are required to meet with the site visitors in closed session. At the upcoming visit, students will meet with the site visitors. At that time, they can express their views if they do not believe their complaints have been adequately addressed.

A copy of the self study, annual reports, and relevant correspondence is located in the Board Office. The University of Iowa Anesthesia Nursing Program submitted an Annual Report to the Council on Accreditation of Nurse Anesthesia on July 1, 1999. This report is separate from the progress report requested by the Council and submitted on July 15, 1999.

Charles R. Kniker

Approved: _____
Frank J. Stork